



॥ आयुषे सर्वलोकानाम् ॥

भारतीय चिकित्सा पद्धति राष्ट्रीय आयोग

आयुष मंत्रालय, भारत सरकार

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National Commission for Indian System of Medicine

Ministry of AYUSH, Govt. of India

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क्रमांक / Ref. No. 4-93/KA/MARB/2026-27-Av

दिनांक / Dated:-22.09.2026

To,

The Principal,

Sri Raghavendra Ayurveda Medical College & Hospital,

P.O Malladihalli, Tq. Holalkere,

Distt. Chitradurga-577531, Karnataka

E-mail ID: - sramcmdh@gmail.com, 2006ayu0097ast@gmail.com

Subject:-Grant of Yearly Permission to Sri Raghavendra Ayurveda Medical College & Hospital, P.O Malladihalli, Tq. Holalkere, Distt. Chitradurga-577531, Karnataka (Inst. Id-AYU0097) with 42 seats (instead of 60 seats) in UG (BAMS) course, for the academic session 2026-27 under section 28 of NCISM Act, 2020 and relevant regulations thereunder- reg.

Sir/Madam,

- 1) It is hereby informed that visitation of your institution namely, **Sri Raghavendra Ayurveda Medical College & Hospital, P.O Malladihalli, Tq. Holalkere, Distt. Chitradurga-577531, Karnataka (Inst. Id-AYU0097) was conducted on 23.01.2026 on Hybrid mode** by the visitation team of Medical Assessment and Rating Board, NCISM, as part of the annual visitation process to verify the physical presence of teaching faculty, non-teaching, Hospital staff, and to assess the availability of practical training and other infrastructure facilities available during working hours.
- 2) Upon examination of the Visitor Observation Report submitted by the visitation team, irregularities were observed in the Biometric Attendance System (AEBAS) records of the teaching faculty, along with other discrepancies were also noticed during the course of the visitation as detailed below. Accordingly, the matter was placed before the **157th Board meeting** of Medical Assessment and Rating Board for Indian System of Medicine (NCISM) held on **29.01.2026, wherein Board decided to provide an opportunity of personal hearing to the college to establish the regularity of the teaching faculty and to clarify the position with regard to other shortcoming/discrepancies observed during visitation**
- 3) Therefore, in adherence to the principles of natural justice and in accordance with the provisions of the Regulation 55(7) of the Minimum Essential Standards, Assessment and Rating for Undergraduate Ayurveda Colleges and Attached Teaching Hospital, Regulations, 2024, your institute was granted an opportunity of personal hearing on 20.02.2026 to appear before the designated Hearing Committee appointed by the President, Medical Assessment and Rating Board, NCISM to present your case and clarify the above position.
- 4) The college was directed to make written submission in respect of the case and produce all relevant valid documents/records/proof to substantiate the claims against all the deficiencies/shortcomings as indicated above. The representatives of the college submitted written submissions **vide letter no.-AST/SRAMC/494/2025-26 dated 20.02.2026** against the deficiencies conveyed to them. Whereas, the college through its representatives, **Dr Shripati, Principal** of College appeared before the hearing committee on **20.02.2026** and made their submission virtually as well as written submission against the shortcomings communicated to the college.
- 5) **The submissions furnished by you during pre-hearing and during hearing proceedings, and the observations made by the Hearing Committee, are as under: -**

Shortcoming	Clarification given by the college	Observation of the Hearing Committee
	College submitted a compliance with covering letter with ref no. AST/SRAMC/494/2025-26 dated 20.02.2026.	Hearing was attended by Dr.Shripati Principal

1. <u>Functionality of Hospital:</u> i. <u>Functionality of all OPD-Not proper functional.</u> ii. <u>Functionality of all IPD-No proper distance between two beds. Balarog, Stri rog, Shalakya, Shalya, Agad IPD having no patients on the day of visitation.</u>	1. <u>Functionality of Hospital:</u> All OPD's are fully functional ii). <u>Functionality of all IPD-</u> Bed spacing: The distance between beds was temporarily altered for ward cleaning; this was a manual error by the ward attendant and has been rectified to meet (NCISM) standards. Speciality IPD availability: On the day of visitation The absence of patients in Balaroga, Striroga, Shalakya, Shalya, Agada IPD, was due to a discharge cycle. we are submitting 3 months of IPD data to prove that above mentioned speciality departments remain functional. (Average IPD for above specialties are Balaroga-18/month, SRPP- 18/month, Shalya 22/Month, Shalakya 18/month)	1. <u>Functionality of Hospital:</u> For the functionality of OPD Principal stated that OPD is functional. Hearing committee asked the Principal about average no of patient in all OPDs, Principal stated that an average of 40 patients attending the OPD on week days and on sat an average of 120 patients , But committee asked the no of patients on 19,20,21,22,23 Jan 2026 and in observation it was found that nearly 110 -120 average patients attended different OPDs on 19th -119, on 20th -116, on 21st -118, on 22nd -119, 23rd -36, on 24-132, on 27-113, which is contradictory statement by the Principal. On observation it was found that only 36 patients was present on the day of visitation. Committee also asked for CCTV footage of registration counter of OPD, college failed to provide that. The submission not accepted. ii). <u>Functionality of all IPD</u> Bed spacing: Principal stated that they maintain bed spacing but it was routine standards that was not found during visitation to the visitor. Hence submission not accepted. Visitor observed that no patient in Balarog, Stri rog, Shalakya, Shalya, Agad IPD , Principal statd that there were 12 patients in IPD but Visitors made observation that only 4 patients in IPD and 1 patient in day care . Visitor also made observation that patients were mismatch. The Principal stated that due to confusion, the name of Patients name were mismatch. College stated that day care patients were gone at home, but they were not discharged on register, it arises medico-legal problem and they cannot give evidence for that also. According to the Visitor, the name of admitted patients not found in IPD register and name of patients which were registered in IPD not found on bed. Hence it shows that the patients admitted were not genuine patients. In the IPD register the discharge date column not observed. Hearing committee also asked about the patient admission procedure in hospital to Principal and entry of patient as admitted patient. But he was unable to explain exact procedure for admission. Hearing committee also observed the entries erased by whitener applied on the admission register. This means College is submitting fabricated data to NCISM. Principal also stated that discharge are made on the day of visitation due to discharge cycle. He couldn't clarify whether patient are
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iii. <u>Hospital staff</u> - Out of 84 staff total 60 hospital staff have not signed at 11 am. On the day of visitation, two staff doctor from Panchakarma and prasuti tantra were mentioned twice. Total 14 doctors and many other paramedical hospital staff not signed since 1st January 2026 and five doctors and other paramedical staff also found irregular and not signed as per record provided and document verification. iv. <u>Functionality of the hospital-</u> Overall hospital is not found properly functional on the day of visitation. i. <u>Medicine dispensing</u> - Medicine	iii). <u>Hospital staff</u> On the day of visitation out of 84 total hospital staff - 06 staff members were on prior sanctioned leave for valid reasons, the leave applications were processed internally but due to a clerical delay were not updated in the consolidated attendance register shown to the visitors. Further we wish to clarify that 35 Hospital staff members have not signed at 11 :00 AM The Reason is as follows (Consultants 14, EMO 2, Modern Doctors 10 who are all on call doctors, analytical chemist O I is a part time, pharmacologist -01 is a part time, night security-0 I, yoga teacher-0 I he was present but no signed in the register, PK Shalya PTRS specialist -03 these three doctors signed as consultants, night ward aya-02,) 43 were present in photo shoot and 06 were on prior sectioned leave (43+35+06=84) a majority were physically present and performing their duties in their respective departments on the morning on 23-01- 2026 these staff members moved directly to their duty stations and some of them failed to mark their attendance in the attendance register before 11 AM. - As per the MSR - 2016 Page Number 53 and 54 schedule - IV Two staff doctors from Panchakarna and prasoothi tantra Were entered in consultant list and also Repeated in Panchakarma specialist and streeroga prasoothi specialist list hence doctors name mentioned twice. - Total 14 Doctors have signed in teaching staff attendance register but not signed in hospital staff attendance register since 1st Jan 2026 and it has been rectified by the doctors as visitors instructed to sign in both teaching staff and hospital staff attendance register without fail. iv). <u>Functionality of the hospital-</u> - Over all hospital is functional on day of visitation. <u>Medicine dispensing</u> The 3 days gap in the medicine dispensing register	discharged by prognosis or by cycle. It proves that hospital is not functional. The submission of college is not accepted. iii). <u>Hospital staff-</u> i. Principal stated the distribution of staff i.e., 43+35+06=84. Hearing committee verified the attendance register submitted by college. It has been observed that 41 rows in attendance register were blank as 41 staff did not sign on this register. Even Principal/MS not put his attendance in this registered. The part timers /guest faculties did not put attendance on register. One hospital staff serial number 37 Amarish dresser has not signed on register in whole month of Jan 2026 according to the submitted attendance register college after visitation, but there were all signatures done on register shown by principal during hearing it proves that all signatures are done after visitation at a time which proves that attendance register is fabricated and not reliable. The observation of Visitor is correct as mentioned in report” 14 doctors and many other paramedical hospital staff not signed since 1st January 2026 and five doctors and other paramedical staff also found irregular and not signed”. The submission of college not accepted and it has been observed that many staff is not regular. <u>Medicine dispensing</u> - Principal stated that Pharmacist was on leave for 3
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dispensing records was not found satisfactory for OPD and IPD on the day of visitation. Medicine dispensing record were not written in register since three days. ii. <u>Clinical Laboratory:-</u> No patient record found in the pathology laboratory register at the time of visitation. iii. <u>Radiology:-</u> No patient record found in the X-ray register on the day of visitation. X-ray technician is not aware about x-ray process and TLD batch. iv. <u>Functionality of the hospital at the time of visit:-</u> OPD & IPD data in the hospital record with availability of patients are mismatching on the day of visitation.	was due to sudden illness of the pharmacist, however stock issue slips were maintained and the register are now been updated to match the stock. <u>Clinical Laboratory:-</u> In clinical laboratory average number 0 patient Per month is 130. <u>Radiology:-</u> In the radiology average number patient per month for x-ray is 20. X-ray technician was under stress on the day of visitation, actually our technician is familiar with X-ray process and TLD badge. <u>Functionality of the hospital at the time of visit</u> We sincerely regret the discrepancy or mismatch observed in the OPD and IPD data of hospital records on the day of visitation. Upon internal review, It was found that the mismatch was the result of a clerical delay in updating OPD & IPD data in the hospital records. On the day of visitation staff member made a human error by double counting a few follow up OPD patient as new IPD admission This lead to an inflated figure in the daily report that did not align with the Physical head count of the patient on the day of visitation. Corrective measures taken;- To prevent any recurrence of such error in future the institution has implemented	days and did not update his medicine dispensing register. On verification of dispensing register it has been observed that the register was not updated from 13-01-2026. The observation of visitor is correct. The submission of college is not accepted. <u>Clinical Laboratory –no patient is found in pathology laboratory register at the time of visitation.</u>
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	the following masseurs. • Real- time reconciliation: The OMS and nursing in charge are instructed to verify the physical headcount against the register records every day without fail. • Staff training - The concerned clerical and nursing staff have been officially warned and provided with the additional training On accurate record keeping and data entry. • Request for consideration. We submit this was an isolated administrative oversight and was not intended to misrepresent the hospitals functionality. The actual medical care and treatment of patient continue to be our highest priority.	
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- 6) The visitation report and all other related documents were assessed in terms of enforced regulations and relevant regulations thereunder. **On careful examination of the assessment report, visitor observation and same was placed in the in the 160th Board meeting of Medical Assessment and Rating Board for Indian System of Medicine (NCISM) convened on 18.05.2026 and Board discussed and decided to provide an opportunity of physical hearing to the suspected on paper faculties.**
- 7) Further, as outlined in the communication vide letter ref.no.3/2024/MARB/General Matters dated 10.02.2025, the verification of daily attendance in AEBAS and CCTV footage of registering the attendance in AEBAS device is a Standard Operating Procedure (SOP) approved by the Medical Assessment and Rating Board for verification of the faculty who are physically absent but present only on-paper, which emphasize the critical importance of proper maintenance of CCTV surveillance system along with footages and AEBAS devices. Therefore, in adherence to the principles of natural justice and in accordance with the Regulation 55(7) of the Minimum Essential Standards, Assessment and Rating for Undergraduate Ayurveda Colleges and Attached Teaching Hospital, Regulations, 2024, an opportunity of personal hearing was also granted from 29.06.2026 to 03.07.2026 to the suspected teaching faculty members as mentioned above to make their submission before the designated hearing Committee.

8) Thereafter, the observation of hearing committee based on the submission made by the college and faculties representatives during hearing was duly placed in the 164th Board meeting of Medical Assessment and Rating Board for Indian System of Medicine (NCISM) convened on 21.07.2026. The Board approved the observations of the Hearing Committee and concluded that all the 19 faculties are found to be regular faculties in the college and Board concluded that the college is not fulfilling the notified & requisite criteria for issuance of permission as per the Concerned Acts and regulations. However, Board decided to issue yearly permission in accordance with regulation 54 (3) of MESAR UG Ayurveda regulations, 2024, under section 28 of NCISM Act, 2020 as per the Punitive Policy in accordance of Section 28 (1) (f) of NCISM Act 2020 for failing to maintain the minimum essential standards, 2024 for the Academic year 2026-27.

❖ As per the "Punitive Policy for the academic session 2026-27"

i) "In case of deficiency in Functionality of Hospital, seat reduction in the intake capacity shall be considered by reducing the intake strength by 30%."

As per the observation there is deficiency in:-

- i. OPD Functionality
- ii. IPD Functionality
- iii. Hospital staff
- iv. Medicine Dispensing

Therefore, the intake capacity of the college shall be reduced by 30% of total intake capacity (i.e. Reduction of 18 seats).

Accordingly, after applying the seat reduction policy 2026-27 under section 28 (1) (f) of NCISM Act 2020, college is fulfilling the basic eligibility criteria for issuance of **Yearly Permission with intake capacity of 42 seats (instead of 60 seats) in UG (BAMS) course, for the academic session 2026-27 under section 28 of NCISM Act, 2020.**

"DECISION"

9) Therefore, Sri Raghavendra Ayurveda Medical College & Hospital, P.O Malladihalli, Tq. Holalkere, Distt. Chitradurga-577531, Karnataka (Inst. Id-AYU0097) is hereby granted with :-

- i. **Yearly Permission with seat reduction with intake capacity of 42 seats (instead of 60 seats) in UG (BAMS) course for the academic session 2026-27 in accordance with Regulation 54 (3) of Minimum Essential Standards, Assessment and Rating for Undergraduate Ayurveda colleges 2024 under section 28 of NCISM Act, 2020 subject to the condition that following conditions shall be fulfilled :-**

10) It is further informed that minimum **15% of undergraduate seats of the permitted intake capacity with 42 seats (instead of 60 seats)** shall be treated as all India quota. The counseling for seats under all India quota shall be conducted by respective counseling authority as designated by Central Government for A.Y. 2026-27 and counseling for the remaining 85% seats or as the case may be, shall be conducted by the concerned Counseling Authority of that State/UT. **The permission of the college stands withdrawn if the college fails to comply with the aforesaid direction of the Central Government/NCISM for all India quota or the students admitted thereunder.**

11) Admissions made in violation of the above conditions will be treated as invalid and action will be initiated under NCISM Act & Regulations thereunder.

12) Further, **as per Sub-section (7) of Section 29 of NCISM Act, 2020**, The Medical Assessment and Rating Board for Indian System of Medicine may conduct evaluation and assessment of any University or medical institution at any time, either directly or through any other expert, having integrity and experience in medical profession, without any prior notice and assess and evaluate the performance, standards and benchmarks of such University or medical institution and if the college is found to be not maintaining the Minimum Essential standards as specified in the concerned Acts & Regulations then **in accordance of Section 28 (1) (f) of NCISM Act, 2020 the issued permission of the college shall deemed to be withdrawn and denial of permission shall be issued by MARBISM for stoppage of admission for that particular academic year or the subsequent year.**

13) Discrepancies, if any, may be immediately brought to the notice of Medical Assessment and Rating Board for Indian System of Medicine, NCISM.

14) **Compliance report of all the requirements of Aadhaar Enabled Biometric Attendance System as mentioned in the implementation letters vide ref. no. 3/2024/MARB/AEBAS & HMS dated 09.05.2024 and 06.09.2024 issued by the board.**

15) The following requirements must be fulfilled and the compliance report must reach the Board by 31st December, 2026 to be considered for the issuance of permission for the academic session 2027-28 :-

- i) All the requirements under the provisions of the NCISM Act, 2020 and relevant Regulations made thereunder should be fulfilled.
 - ii) All the requirements of Minimum Standard of infrastructure and teaching & training facilities as specified in NCISM (Minimum essential standards, assessment and rating for undergraduate Ayurveda colleges and attached teaching hospitals) Regulations, 2024.
 - iii) All the requirements of the National Commission for Indian System of Medicine (Minimum Standards of Undergraduate Ayurveda Education) Regulations-2022.
- 16) The fulfilment of the conditions given above may be made within the time period specified and compliance report should be submitted by the college within the timeline as mentioned above to the President, Medical Assessment and Rating Board for Indian System of Medicine. The Medical Assessment and Rating Board for Indian System of Medicine will verify that the conditions have been fulfilled for considering the permission for the academic session 2026-27.
- 17) Further, in case you are not satisfied with the decision of Medical Assessment and Rating Board, NCISM, you may prefer an appeal addressed to the Chairman, NCISM, within 15 days of issuance of the decision of the Board as per regulation 65 of MESAR 2024 and section 29(5) of NCISM Act 2020.

Note:- It is also noted that, if the concerned University does not grant affiliation to the college or withdraws the affiliation, the permission granted by MARBISM shall automatically stand withdrawn without any further notice or order.

Please acknowledge the receipt of this letter.

(Dr. Mukul Patel)

President, Medical Assessment and Rating Board for Indian System of Medicine

अध्यक्ष, आंकलन एवं रेटिंग बोर्ड
President, Medical Assessment and Rating Board
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(NCISM)

Copy to (Through email): -

- 1) The Chairperson, NCISM, T-19, 1st & 2nd Floor, Block-IV, Dhanwantari Bhawan, Road No.66, Punjabi Bagh (West), New Delhi-110026 for information.
- 2) Secretary to the Govt. of India, Ministry of AYUSH, Ayush Bhawan, B-Block GPO Complex, INA, New Delhi 110023. (secy-ayush@nic.in, aaccc-admin-ayush@gov.in, ep1section-ayush@gov.in)
- 3) The Principal Secretary (H&FW), Department of health & Family Welfare Government of Karnataka Room No. 104 1st Floor, Vikas Souda, Bangalore-560001, Karnataka for information and necessary action(prshfw@karnataka.gov.in)
- 4) The Director Department of AYUSH, Ayurveda Yoga & Naturopathy, Unani, Siddha & Homoeopathy), Dhanwantri Road, Near Ananda Rao Circle Bengaluru-560009, Karnataka (directorayush@gmail.com, jdayushme@gmail.com) for information.
- 5) The Registrar, Rajiv Gandhi University of Health Sciences, 4th 'T' Block, Jayanagar, Bangalore-560041, Karnataka. (registrar@rguhs.ac.in) for information.
- 6) Guard file.

(Dr. Mukul Patel)

President, Medical Assessment and Rating Board for Indian System of Medicine
(NCISM)