

**Maharashtra University of Health Sciences, Nashik**  
**Physiotherapy Faculty**  
**Inspection Committee Report for Academic Year 2026 - 2027**

Clinical Material in Hospital

**Name of College/Institute - Aparampar Swami Physiotherapy College, Nanded**  
**Name of the Parent /attached Hospital :- Gurukrupa Hospital, Nanded**

| Sr. No. | Particulars to be verified   |   |                 |                 |                 |                      | Actual Available | Lacuna               |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
|---------|--|---|-----------------|-----------------|-----------------|----------------------|------------------|----------------------|----|------------------|----|----|----|----|-----|----|-----------------|----|----|----|----|-----|----|-------------|----|----|----|----|-----|----|--------------|----|----|----|----|----|----|------------|----|----|----|----|----|----|-------------|----|----|----|----|----|----|--------------|----|----|----|----|----|----|-------------|----|----|----|----|----|----|-------------|----|----|----|----|----|----|------------------|----|----|----|----|----|----|-----------|----|----|----|----|----|--|-------|-----|-----|-----|-----|-----|--|--|--|--|--|--|--|
| a.      | There must be a parent / attached Hospital with minimum ..... beds as per the Intake Capacity Indoor & Outdoor Facility with Physiotherapy exposure in the broad specialty areas Including Intensive care to provide practical experience to the student.: ( Refer Sr. No. C for Beds as per Intake Capacity )   |   |                 |                 |                 |                      | Available        |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| b.      | The student to patient ratio should be minimum 1:5, the first part being student & second part patient.  |   |                 |                 |                 |                      | Available        |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| c.      | The desirable breakup of beds shall be as follows :<br><b>Student Patient Ratio (as per M.S.R., it must be 1:5):</b>   |   |                 |                 |                 |                      |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
|         | <table border="1"> <thead> <tr> <th>Sr.No.</th> <th>Specialty</th> <th>10 to 30 Intake</th> <th>31 to 40 Intake</th> <th>41 to 50 Intake</th> <th>51 to 60 Intake</th> <th>For 61 to 100 Intake</th> </tr> </thead> <tbody> <tr> <td>01</td> <td>General Medicine</td> <td>30</td> <td>40</td> <td>50</td> <td>60</td> <td>100</td> </tr> <tr> <td>02</td> <td>General Surgery</td> <td>30</td> <td>40</td> <td>50</td> <td>60</td> <td>100</td> </tr> <tr> <td>03</td> <td>Orthopedics</td> <td>30</td> <td>50</td> <td>50</td> <td>60</td> <td>100</td> </tr> <tr> <td>04</td> <td>Obst &amp; Gynac</td> <td>15</td> <td>20</td> <td>30</td> <td>30</td> <td>60</td> </tr> <tr> <td>05</td> <td>Pediatrics</td> <td>15</td> <td>20</td> <td>30</td> <td>30</td> <td>60</td> </tr> <tr> <td>06</td> <td>Medical ICU</td> <td>05</td> <td>05</td> <td>10</td> <td>10</td> <td>15</td> </tr> <tr> <td>07</td> <td>Surgical ICU</td> <td>05</td> <td>05</td> <td>10</td> <td>10</td> <td>15</td> </tr> <tr> <td>08</td> <td>PICU + NICU</td> <td>05</td> <td>05</td> <td>05</td> <td>10</td> <td>15</td> </tr> <tr> <td>09</td> <td>ICCU + RICU</td> <td>05</td> <td>05</td> <td>05</td> <td>10</td> <td>15</td> </tr> <tr> <td>10</td> <td>Burns Unit / ICU</td> <td>05</td> <td>05</td> <td>05</td> <td>10</td> <td>10</td> </tr> <tr> <td>11</td> <td>Emergency</td> <td>05</td> <td>05</td> <td>05</td> <td>10</td> <td>10</td> </tr> <tr> <td></td> <td>Total</td> <td>150</td> <td>200</td> <td>250</td> <td>300</td> <td>500</td> </tr> </tbody> </table> | Sr.No.  | Specialty       | 10 to 30 Intake | 31 to 40 Intake | 41 to 50 Intake      | 51 to 60 Intake  | For 61 to 100 Intake | 01 | General Medicine | 30 | 40 | 50 | 60 | 100 | 02 | General Surgery | 30 | 40 | 50 | 60 | 100 | 03 | Orthopedics | 30 | 50 | 50 | 60 | 100 | 04 | Obst & Gynac | 15 | 20 | 30 | 30 | 60 | 05 | Pediatrics | 15 | 20 | 30 | 30 | 60 | 06 | Medical ICU | 05 | 05 | 10 | 10 | 15 | 07 | Surgical ICU | 05 | 05 | 10 | 10 | 15 | 08 | PICU + NICU | 05 | 05 | 05 | 10 | 15 | 09 | ICCU + RICU | 05 | 05 | 05 | 10 | 15 | 10 | Burns Unit / ICU | 05 | 05 | 05 | 10 | 10 | 11 | Emergency | 05 | 05 | 05 | 10 | 10 |  | Total | 150 | 200 | 250 | 300 | 500 |  |  |  |  |  |  |  |
| Sr.No.  | Specialty  | 10 to 30 Intake   | 31 to 40 Intake | 41 to 50 Intake | 51 to 60 Intake | For 61 to 100 Intake |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| 01      | General Medicine   | 30  | 40              | 50              | 60              | 100                  |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| 02      | General Surgery  | 30  | 40              | 50              | 60              | 100                  |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| 03      | Orthopedics  | 30  | 50              | 50              | 60              | 100                  |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| 04      | Obst & Gynac   | 15  | 20              | 30              | 30              | 60                   |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| 05      | Pediatrics   | 15  | 20              | 30              | 30              | 60                   |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| 06      | Medical ICU  | 05  | 05              | 10              | 10              | 15                   |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| 07      | Surgical ICU   | 05  | 05              | 10              | 10              | 15                   |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| 08      | PICU + NICU  | 05  | 05              | 05              | 10              | 15                   |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| 09      | ICCU + RICU  | 05  | 05              | 05              | 10              | 15                   |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| 10      | Burns Unit / ICU   | 05  | 05              | 05              | 10              | 10                   |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| 11      | Emergency  | 05  | 05              | 05              | 10              | 10                   |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
|         | Total  | 150   | 200             | 250             | 300             | 500                  |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| d.      | Student : Bed Ratio (Undergraduate) : 1:5  |   |                 |                 |                 |                      |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| e.      | Average Bed Occupancy in % : 80%   |   |                 |                 |                 |                      |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| f.      | Whether separate Registration room is available at OPD?  |   |                 |                 |                 |                      |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
|         | f. Number of total patients registered in last Year : 32860  |   |                 |                 |                 |                      |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
|         | g. Number of New Patients registered on daily average : 56   |   |                 |                 |                 |                      |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
|         | h. Number of Old patient registered on daily average : 32  |   |                 |                 |                 |                      |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
|         | i. Average Number of patients attending OPD (current year) : 88  |   |                 |                 |                 |                      |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
|         | j. Whether records of patient registration are well maintained : Yes   |   |                 |                 |                 |                      | Yes              |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| g.      | Indoor Physiotherapy Department Areas as per Clinical Load and Intake : (as per M.S.R.) Clinical Load, Total Strength of Hospital Beds, Outdoor Physiotherapy Load per specialty, Indoor Physiotherapy Load per Specialty, Student : Patient ratio per specialty.  |   |                 |                 |                 |                      | Available        |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| h.      | Outdoor Physiotherapy Department Areas as per Clinical Load and Intake : (as per M.S.R.)   |   |                 |                 |                 |                      | Available        |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
| i.      | <b>Physiotherapy OPD Services (as per M.S.R.) : The hospital shall have functional physiotherapy department providing services on outpatient &amp; in patient department at least since 12 Months prior application &amp; shall maintain required OPD and IPD records for verification.</b>  |   |                 |                 |                 |                      | Available        |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |
|         |  | <ul style="list-style-type: none"> <li>• As per Central Council Norms/ University Norms, above Infrastructure must be available at College.</li> <li>• If Infrastructure is available, then mark "Adequate" &amp; do not attach any documents.</li> <li>• In case of "Inadequate", it must be mark as "Inadequate" with evidence.</li> <li>• If attached Hospitals provide valid MOU</li> </ul> |                 |                 |                 |                      |                  |                      |    |                  |    |    |    |    |     |    |                 |    |    |    |    |     |    |             |    |    |    |    |     |    |              |    |    |    |    |    |    |            |    |    |    |    |    |    |             |    |    |    |    |    |    |              |    |    |    |    |    |    |             |    |    |    |    |    |    |             |    |    |    |    |    |    |                  |    |    |    |    |    |    |           |    |    |    |    |    |  |       |     |     |     |     |     |  |  |  |  |  |  |  |

Verified by The LIC Committee Members

Dean/ Principal Stamp & Signature

Principal  
Aparampar Swami Physiotherapy College  
Jambharun, Tq. Ardhapur Dist. Nanded