

**Maharashtra University of Health Sciences, Nashik**  
**Inspection Committee Report for Academic Year 2026-27**

**Clinical Material in Hospital**

Name of College/Institute- Yogeshwari College of Nursing , Diksal

Faculty- Bsc Nursing

**HOSPITAL DETAILS**

Sr. No.	Particulars to be verified	Particular	Adequate/ Inadequate
1	The Institute / College shall execute a MoU with any institute for affiliation of hospital in addition to minimum 100 bedded own/parent Hospital (Affiliated hospital must be 50 bedded or more.) <b>To be made available on web site</b>	100 bed	Adequate
a.	Whether Hospital is registered under any act under Local Authority such as Corporation, Municipality, Gram Panchayat etc.: <b>Copy to be made available on web site</b>	Yes	Adequate
b.	Student Bed Ratio for UG & PG to be verified:(As per MSR) Calculate at Actual 3:1	Yes	Adequate
c.	Average Bed Occupancy in % : 85% (Minimum 75%)	Yes	Adequate
d.	Clinical facilities for PG to be verified:-(As per MSR)		
	(i) Whether OPD is functioning to be verified (ii) Total No of OPD (on the day of inspection) (iii) Average Number of patients attending OPD(current year) (iv) Average Number of Delivery (Current year) (v) Average Number of abnormal Delivery (Current year)	Yes 150+ 25000+ 95 15	Adequate
<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 it should be available on college website</li> <li>• In case of "Inadequate", it must be marked as "Inadequate" with evidence. To be submit to university with report</li> </ul>			

Here we declare all relevant document uploaded are clear and visible on web site & are true as per my knowledge & Belief  
Any Other, Please Specify:-

Date:- 11/04/2026

Chairman of LIC

Member Of LIC

Dean/ Principal & Signature  
for Principal  
Yogeshwari College Of Nursing  
Diksal Tq. Kallam Dist. Dahanu



DEPARTMENT OF PUBLIC HEALTH

# Certification Of Registration

Under the Bombay Nursing Homes Registration Act, 1949 and Maharashtra Nursing Home Regulation Rules Amendment 2021  
(Under Rule 5)

This is to certify that

Shri. /Smt./Dr. **GOVARDHAN GOVINDRAO TAMBARE** has been registered under the Bombay Nursing Homes Registration Act Amendment 1949 in respect of **KRISHNA HOSPITAL ( A UNIT OF KRISHNA KALLAMB MULTISPECIALITY HOSPITAL LLP)** situated at **1191 Juna vitthal mandir road papade galli Kallamb 413507** and has been authorized to carry on the said Nursing Home.

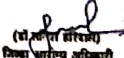
**No. of Beds**

A. Maternity Count	: 10
B. ICU(Adult) Count	: 10
C. ICU(Pediatric) Count	: 0
D. Other Count	: 80


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Total : : 100

Registration Number	: MH/DHA/NH1000
Date of Registration	: 12-08-2025
Date of Issues Certificate	: 06-03-2026
Certificate is Valid upto	: 31-03-2028
Place	: Kallamb

  
(Dr. Yogeshwari Diksal)  
Principa, Yogeshwari  
Diksal, Tq. Kallamb, Dist. Dharashiv

Dharashiv,

  
Principal  
Yogeshwari College Of Nursing  
Diksal Tq. Kallamb Dist. Dharashiv

