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# CET, NEET cause a dilemma for medical seat aspirants

## Surrendering engg seats to study medicine may cost a fortune

Virupaksha Hokrani

**BENGALURU:** As results of the Common Entrance Test (CET) are likely to be announced ahead of the National Eligibility and Entrance Test (NEET), students waiting to get medical seats are in a state of confusion - whether to take admission for engineering or not.

All these years, students who were not getting medical seats were opting for engineering courses. However, from this year, there are sepa-

rate exams for engineering (CET) and medical (NEET).

### Results

CET results are almost ready and are likely to be announced by the end of this month, while results of CBSE and ICSE class XII are awaited.

Counselling for engineering may start on June 1 and NEET results are likely to be announced on June 8.

Those who have got engineering seats in government or private colleges under government quota have to pay the fees to Karnataka Examina-

tion Authority.

### Development fee

Students who have got an engineering seat in a private college under government quota have to pay up to Rs 25,000 extra as 'development fee'.

Students said in case they opt for engineering and then get a seat through NEET, they will lose the 'development fee'.

The third or fourth round of counselling for medical seats is set to be complete by September-end. Students are worried that if they decide to

leave engineering and join medical courses in this phase, engineering colleges may demand payment of fees for the entire four years. They are also worried that the college authorities may withhold original documents if they do not pay.

### Three options

KEA gives three options during counselling. In the first option, students can pay the fee and opt for admission.

Using the second or third option, students can appear for the second and third round

of counselling depending on the availability of medical seats. Such students, however, may not get an engineering seat in a college of their choice.

"In 2016-17, I got an engineering seat in a prestigious college in Bengaluru. After that, I got a medical seat at Sambhram Medical College, Kolar. The engineering college told me to pay Rs 1.5 lakh to return my original documents. I had to pay Rs 75,000 and Rs 25,000 as development fee for getting my documents," said M Sanjan, a student.

**DH News Service**

# Madras HC stays NEET results

**CHENNAI, DHNS:** The Madras High Court on Wednesday stayed the announcement of results of the National Eligibility cum Entrance Test (NEET).

The test determines admissions to medical and dental courses across India, and results are due in June.

When a petition filed by a group of candidates came up for hearing, Justice M V Muralidaran of the Madurai bench directed the Central Board of Secondary Education not to publish the results till June 7, or until further orders. The test was conducted on May 7 in English, Hindi, Kannada, Tamil, Telugu, Marathi, Bengali, Gujarati, Odia and Assamese.

The petitioners said the test had not been uniform, with the questions being easier to crack in some languages.

Citing an example, the petitioners said the question paper in Tamil was much easier than the one in English.

The students argued the CBSE had denied them a level playing field. The question paper should be the same for the whole country, they contended. "Otherwise, assessment of intelligence and aptitude will differ. Further, an uneven playing field would infringe the right to equal opportunity in education," they said.

The court had recently sought the response of the Union health secretary and CBSE, among other stakeholders, to a petition seeking the cancellation of NEET 2017.



# Lower cut-offs for NEET-PG

STAFF REPORTER

NEW DELHI

Percentile cutoffs for NEET-PG 2017 is to be reduced by 7.5 percentile for the academic year 2017, as per a release issued by the Union Health Ministry on Wednesday.

The National Eligibility cum Entrance Test (NEET)-PG, 2017 was conducted by the National Board of Examinations for admission to all post-graduate medical courses in the country. The qualifying criteria was marks at 50th per-

centile for general category, 40th percentile for OBC/SC/ST and 45 percentile for PwD category.

However, as per Clause 9 sub-clause III of the Medical Council of India's Post-graduate Medical Education Regulations (PGMER), 2000, when sufficient candidates fail to secure minimum marks, the Central Government in consultation with MCI, may lower the minimum marks which shall be applicable for the

said academic year only. Representations were received from some State Governments that seats in some categories may remain vacant as there are not enough candidates available. Therefore, it has been decided to reduce the percentile cut-offs by 7.5 percentile, taking them to 42.5 percentile for general candidates, 32.5 percentile for reserved category and 37.5 percentile for PwD category.



# With 8,750 seats, K'taka produces most doctors

## State May Get 6 More Medical Colleges Soon

Aditi.Gyanesh@timesgroup.com

**Bengaluru:** Karnataka has the highest number of MBBS seats in the country. According to the Medical Council of India (MCI), the state has 8,750 seats followed by Maharashtra (7,120) and Tamil Nadu (6,660).

Director of medical education Dr S Sacchidanand told TOI, "Karnataka has the highest number of MBBS seats in the country and 350 additional seats will be available from this academic year. We have asked the Medical

### 'INCREASE POST-GRADUATE SEATS'

State	MBBS seats
Karnataka	8,750
Maharashtra	7,120
Tamil Nadu	6,660
Uttar Pradesh	5,949
Kerala	4,050

Source: MCI



“With just an MBBS degree, a doctor cannot conduct major procedures. So, it's important that there is a proportionate increase in post-graduate seats too. Else the purpose of producing so many MBBS graduates will go waste

**Dr Devi Shetty** | CARDIOLOGIST

Council of India to sanction six more medical colleges to Karnataka.”

There are 56 colleges, government and private, which provide medical education across the state. Overall, there are more than 12,000 medical seats in Kar-

nataka. Academicians say Karnataka is probably the most sought-after destination for students to pursue medicine. This has forced institutions to increase their intake every year.

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# Seat increase brings cheer to medicine aspirants

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The colleges where seats have been increased from 100 to 150 are Shivamogga Institute of Medical Sciences, Hassan Institute of Medical Sciences, Bidar Institute of Medical Sciences, Belagavi Institute of Medical Sciences, Raichur Institute of Medical Sciences, and Mandya Institute of Medical Sci-

ences. The number of seats in the Karnataka Institute of Medical Sciences, Hubballi has been raised to 200 seats from 150 seats.

Renowned cardiologist Dr Devi Shetty said while it's heartening to see the number

of undergraduate seats going up, it's important to increase the number of post-graduate seats too. "With just an MBBS degree, a doctor cannot conduct major procedures. So, it's important that there is a proportionate increase in post-graduate seats too. Else the purpose of producing so many MBBS graduates will go waste," he added.

The seat increase has

brought cheer to medicine aspirants. "It's good that the number of seats has increased in some prominent colleges in Karnataka. Now, we can hope for more students getting a chance for getting admission," said a medical aspirant.

Last year, the number of medical seats was raised from 60 seats to 90 seats in St John's Medical College, Bengaluru.



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# Govt hospitals forced to hire private practitioners to tide over staff crisis

## Dearth Of Docs At Community Health Centres

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**Bengaluru:** 216 paediatricians, 217 anaesthetists, 174 gynaecologists, 94 general medicine practitioners, 63 general surgeons — these many specialist posts have been lying vacant in government hospitals across Karnataka. Result: The government is now forced to hire private practitioners.

With a shortage of 1,100 specialists in its hospitals, the government has decided to hire private doctors. Hiring will be done on a temporary basis and will be need-based. The medical superintendent or doctor in charge of the government medical facility will take the call on when and who to hire for emergency services. While the association of private hospitals sees the move as a great idea to deliver quality care to poor patients, doctors in the health department say it's not easy to get private practitioners when there is a need, especially during emergencies in taluk hospitals.

The government has proposed to pay Rs 1.25 lakh per month to a specialist, who volunteers to work in government hospitals. If the doctor comes on a visit, he/she will be paid Rs 2000 for six-hour outpatient duty (OPD) per day.

The state has 206 community health centres (CHCs)



Photo for representation only

### TIMES VIEW

It's a pity that a profession as noble as medicine is today increasingly driven by profit-making, and not a sense of service. Medical professionals shunning rural stints is the key reason for community health centres failing miserably. While hiring private practitioners and specialists will be an expensive move, the government seems to be left with no alternative. The huge vacancies across departments are a clear pointer to the poor health of government medical facilities. Sadly, access to private healthcare is the privilege of a few. Medical professionals need to understand their responsibility towards patients. After all, it's not for nothing that they take the Hippocratic Oath before starting their practice.

### SHORTAGE OF HANDS: NUMBERS SAY IT ALL



Source: Health department (data as on February 20, 2017)

which need gynaecologists, paediatricians, anaesthetists, and dentists. But the posts in most CHCs are vacant. In 146 taluk hospitals of the state, there is a need for specialists such as gynaecologist, dentist, paediatrician, ENT specialist, ophthalmologist and anaesthetist.

Health and family welfare minister K R Ramesh Kumar told TOI that despite the many

vacancies, the government is trying its best to provide quality health care in government hospitals. "Doctors aren't coming forward to work in government hospitals. Not all those shortlisted by the KPSC for recruitment came forward to work in government hospitals. We advertised for recruitment of 980 specialist doctors, but only 500 candidates appeared for the interview. Of

them, not even hundred reported to work," said Kumar.

"It's been observed that some specialist doctors working in CHCs live in nearby towns and run their own clinics, instead of turning up for hospital work. They get patients to visit their clinics instead of accessing the government facility. Such malpractice has to stop. We aren't asking anyone to make sacri-

fices, but medical professionals need to serve in government hospital."

Despite the lure of good incentives, it's difficult to find specialists doctors in many taluks. "For six hours of work in the OPD, the government pays a private practitioner Rs 2000. Yet places like Chikkayakanahalli, a taluk in Tumakuru, has no specialists even in the private sector. It's equally tough to find specialist doctors in North Karnataka districts of Raichur, Kalaburagi and Vijayapura," said Dr T A Veerabhadraiah, president, Karnataka Government Medical Officers' Association (KGMOA).

Also, there are PG medical students who would have studied under the government quota but aren't turning up for the mandatory one-year government service, thereby affecting rural healthcare. Recently, the government issued a list of 661 specialist doctors who studied in Karnataka but hadn't turned up for compulsory government service as per the bond they signed.

### HOW CAN THEY SAY NO?

Road, water, electricity — everything that a private practitioner uses comes from public money. How private are these private clinics then? Are they isolated from society? Aren't they using infrastructure provided by the government to run their establishments? How can they then say no to rural service?

**K R Ramesh Kumar**  
Health minister