



**महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक**  
**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**

दिंडोरी रोड, म्हसळ, नाशिक - ४२२००४ Dindori Road, Mhasrul, Nashik - 22004

Tel:(0253) 2539244/6659244/241/242-☎ Student Helpline:0253-539111/6659111/100

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**डॉ. राजेंद्र शिवाजी बंगाळ**

एम.बी.बी.एस, एम.डी.(न्यायवैद्यकशास्त्र), डी.एन.बी, एल.एल.बी.

**कुलसचिव**

**Dr. Rajendra Shivaji Bangal**

M.B.B.S, M.D.( Forensic Medicine), D.N.B, L.L.B.

**Registrar**

No. MUHS/PB/PG/FTA/ *ees* /2025

Date : *28* / 12/ 2025

To,  
 The Dean /Principal  
 Saraswati Education Society's  
 Dr. N.Y. Tasgaonkar Institute of Medical Sciences,  
 At- Diksal Tal- Karjat  
 Dist- Raigad- 410 201

Sub : Grant of first time affiliation to start new Post Graduate course for the Academic Year 2025-26.

Sir / Madam,

As per the provision of section 65 (4) of Maharashtra University of Health Sciences Act 1998, I am directed to inform you that, on the basis of Local Inquiry Committee report the Hon'ble Vice Chancellor is pleased to Grant First Time Affiliation to start New Post Graduate courses in the following subject as per intake capacity shown against it, at your college viz. **Saraswati Education Society's Dr. N.Y. Tasgaonkar Institute of Medical Sciences, At- Diksal Tal- Karjat Dist- Raigad, (Maharashtra),** for the Academic Year 2025-26. Subject to approval of Academic Council as per the provision under section 65 (2) of MUHS Act 1998, by following due procedure.

| Sr. No. | Subjects                                | Intake Sanctioned As Per GR | Permitted Intake Capacity By MUHS Considering The Available Teacher(s) |
|---------|---|-----------------------------|--|
| 01      | MD (Anesthesiology)                     | 04                          | 04   |
| 02      | MS (Obstetrics and Gynecolgy)           | 03                          | 03   |
| 03      | MD (Dermatology, Venereology & Leprosy) | 03                          | 03   |
| 04      | MS (General Surgery)                    | 04                          | 04   |
| 05      | MS (Orthopedics)                        | 03                          | 03   |
| 06      | MS (Otorhinolaryngology) (ENT)          | 04                          | 04   |
| 07      | MS (Ophthalmology)                      | 04                          | 04   |

However, the permission is subject to the following conditions:-

1. Fulfillment of norms and conditions laid down by NMC and Govt. of India.
2. Rules and Regulations made by the Govt. and the University, as amended from time to time, will be binding on the College.

3. The college should obtain approval / recognition for UG / PG teachers (as applicable) from Maharashtra University of Health Sciences, Nashik.
4. This permission to start above mentioned PG course is valid for **A. Y. 2025 - 26** only.
5. The next batch of students shall not be admitted unless continuation of affiliation of MUHS, is obtained by college/Institute.



*[Handwritten signature]*  
24-12-25  
**Registrar**  
Registrar  
Maharashtra University of Health Sciences,  
Nashik  
**24 DEC 2025**

**Copy to:-**

1. The Secretary, Government of India, Ministry of Health and Family Welfare, Nirman Bhavan, New Delhi.
2. The Secretary, National Medical Commission Medical Assessment & Rating Board, (MARB) Pocket -14, Sector- 8, Dwarka Phase 1, New Delhi.
3. The Secretary, Medical Education & Drugs Department, Mumbai.
4. The Director, Medical Education & Research, Mumbai.
5. The Chairman, Admission Regulating Authority, Bandra (E), Mumbai,
6. The Chairman, Fee Regulating Authority, Bandra (E), Mumbai,
7. The Commissioner CET Cell, Mumbai
8. P.S. to the Hon'ble Vice Chancellor, MUHS, Nashik.
9. P.A. to the Pro Vice Chancellor, MUHS, Nashik
10. P.A. to the Registrar, MUHS, Nashik.
11. The Controller of Examination, MUHS, Nashik.
12. The Finance and Accounts Officer, MUHS, Nashik
13. HOD, Academic Section,(1) MUHS, Nashik.
14. HOD, Student Welfare Section
15. HOD, Eligibility Section, MUHS, Nashik.
16. HOD, Computer Section, MUHS, Nashik.
17. HOD, Special Cell, MUHS, Nashik