- (vi) Age increased for Teaching Faculty up to 70 years.
- (vii) Maximum of 100 seats will be given to those parent hospitals with 300 beds without insisting Medical College.
- (viii) Distance from school to hospital has been relaxed from 15 km to 30 km
- (ix) Eligibility Criteria to admission *i.e.* (Marks) for Diploma and Degree has been relaxed 5% (GNM 40%, B.Sc. 45%).

## Projected shortfall of medical doctors

- 89. SHRI B.S. GNANADESIKAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:
- (a) whether it is a fact that there will be shortfall of a whopping 9.54 lakh doctors by 2031 if the levels of student intake to medical colleges across the country remain what they are at present;
- (b) if so, whether Government has proposed any specific plan to increase the student intake in the medical colleges in the country;
  - (c) if so, the details thereof; and
  - (d) if not, the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) to (c) The current doctor-population ratio in India is low which needs to be improved. The Central Government has already initiated the following measures to facilitate setting up of medical colleges to increase number of doctors/specialists in the country:

- I. Requirement for land, faculty, staff, bed/bed strength, other infrastructure, etc. has been relaxed.
- 2. Maximum intake capacity at MBBS level has been increased from 150 ta 250.
- 3. Maximum age for appointment of faculty has been enhanced from 65 to 70 years.
- 4. DNB qualifications have been recognized for appointment to various faculty positions.
- $\textbf{5.} \quad \textbf{Teacher student ratio has been relaxed to increase the seats at Postgraduate level.} \\$

- 6. The Central Government under the scheme of 'Strengthening and Upgradation of State Government Medical Colleges' is providing financial support to State medical colleges to increase postgraduate seats in various disciplines or start new postgraduate medical courses.
  - (d) Does not arise.

## Spreading of CCHF virus

- 90. SHRI NANDI YELLAIAH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:
- (a) whether the Ministry is aware that according to WHO's latest map on the geographic distribution of Crimean Congo Haemorrhagic Fever (CCHF) virus with 40 per cent fatality rate is present all over India except Jammu and Kashmir and it has so far taken a toll of 3 human lives in Gujarat;
  - (b) if so, the details in this regard; and
  - (c) the strategy of the Ministry to check the spread and eradication of CCHF virus?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) to (c) There is no latest map by WHO on geographic distribution of Crimean Congo Haemorrhagic Fever (CCHF) implying widespread presence of the disease among humans in India.

There has been an outbreak of Crimean Congo Haemorrhagic Fever (CCHF) in Gujarat in January 2011. As on 14.02.2011, there were nine laboratory confirmed cases with two deaths.

The strategy for limiting the spread of CCHF indudes early case detection and management through surveillance; coordination with Department of Animal Husbandry for animal health surveillance and control of ticks through anti tick measures.

## Screening of toys for toxicity

- 91. SHRI RAMA CHANDRA KHUNTIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:
- (a) whether Government has any plan to screen all the toys available in the domestic markets for toxicity;