

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF(Approved + Not Approved)
(PG Degree / Super Speciality)

ANNEXURE - III

Name of the Dept. :			Paediatrics			Subject : MD															
Name of the College :			Bombay Hospital Institute of Medical Sciences			College Code : 6116			Intake Capacity : Two												
S	Subject	Full name of the	Designation	Mob	Email	Date of	Whether	Date of	Teaching Experience UG (Yrs.)				Total	Type of	Univ.	Temporary	Details of PG Recogn.		MET	Photograph	
N		Teaching staff		No.	Id	Birth	belongs to	Appoint	Asst.	Asso.	Prof.	Total	Teaching	T / R / C	Approval	Approval	by University (Y/N)		Workshop	with	
							Res. Cat.(If	ment	Prof.	Prof.			Exp. in		Status	From	To	Temp/	Letter No	attended in	
							Yes,specify						yrs.of PG		(Yes/No)			Reg	& date	last 5 yrs.	Signature
							category)														
1	Paediatrics	Dr. Rashmi B. Dalvi	Professor & Head	9821063069	rashmidalvi5@gmail.com	6/7/1959	No	3/1/2002				7	28	R	Y		R	MUHS/PG/E-1/27/6116/918/19 Dt. 25/02/2019	Yes		
2	Paediatrics	Dr.Mukesh U. Sanklecha	Assistant Professor	9869134900	doctormukesh@gmail.com	7/3/1966	No	15/02/2007	-	-	-	-	16	R	Y		R	MUHS/PG/E-1 6116/1783/10 Dt.18/08/2010	Yes		
3	Paediatrics	Dr. Deepak Mulchandani	Assistant Professor	8097807218	dr.deepakm1986@gmail.com	23/12/1986	No	1/12/2017	-	-	-	-	5	R	N		N	NA	Yes		


 Sign. Of Dean with Seal
Dr. S. V. Khadiolkar
 MD DM DNDE FIAN FICP
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 Dean
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ANNEXURE - III

Name of the Dept. :			Anaesthesiology			Subject : MD													
Name of the College :			Bombay Hospital Institute of Medical Sciences			College Code : 6116			Intake Capacity : One										
S	Subject	Full name of the	Designation	Mob	Email	Date of	Whether	Date of	Teaching	Experience	UG (Yrs.)	Total	Type of	Univ.	Temporary	Details of PG Recogn.		MET	Photograph
N		Teaching staff		No.	Id	Birth	belongs to	Appoint	Asst.	Asso.	Prof.	Total	Teaching	Approval	Approval	by University (Y/N)		Workshop	with
							Res. Cat.(If	ment	Prof	Prof.			Exp. in	T / R / C	Status	From	Letter No	attended in	Signature
							Yes,specify						yrs.of PG		(Yes/No)	To	Reg	last 5 yrs.	
							category)												
1	Anaesthe siology	Dr.Pradnya Kulkarni	Professor & Head	9892059518	drpradnyackulkarni@gmail.com	13/11/1964	No	1/7/2003	-	-	-	-	20	R	Y		R MUHS/PG/E-1/ 6116/2539/19 Dt. 25/06/2019	Yes	
2	Anaesthe siology	Dr.Pratima Kothare	Assistant Professor	9819790343	pratimakothare@hotmail.com	22/01/1963	No	1/2/1990	-	-	-	-	32	R	Y		R MUHS/PG/E-1/ 27/6116/4142/18 Dt.28.11.2018	Yes	
3	Anaesthe siology	Dr.Jeet Prakash Arora	Assistant Professor	9821107207	indore2cool@gmail.com	14/03/1955	No	1/4/1990	-	-	-	-	32	R	N		N NA	No	
4	Anaesthe siology	Dr. Balasaheb Kendre	Assistant Professor	9867285895	balasaheb.kendre@gmail.com	7/6/1975	No	1/2/2006	-	-	-	-	17	R	N		N NA	Yes	
5	Anaesthe siology	Dr. Neeta Khandelwal	Assistant Professor	9820740591	drneeta2001@rediffmail.com	17/03/1971	No	1/4/2003	-	-	-	-	20	R	N		N NA	Yes	
6	Anaesthe siology	Dr. Ranjana Gaur	Assistant Professor	9820284660	ranjanadas18@yahoo.in	18/03/1962	No	22/01/1990	-	-	-	-	29	R	N		N NA	Yes	

Sign. Of Dean with Seal

Dr. S. V. Khadilkar,
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FAMS FRCP (London)

Dean

Bombay Hospital

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12, New Marine Lines,
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Pradnya

Kothare

Jeet

Balasaheb

Neeta

Ranjana

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
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ANNEXURE - III

Name of the Dept. : Radio-diagnosis
Name of the College : Bombay Hospital Institute of Medical Sciences
Subject : MD
College Code : 6116
Intake Capacity : Two

S N	Subject	Full name of the Teaching staff	Designation	Mob No.	Email Id	Date of Birth	Whether belongs to Res.Cat.(If Yes,specify category)	Date of Appoint ment	Teaching Experience UG (Yrs.) Asst. Asso. Prof. Total Prof. Prof.	Total Teaching Exp. in yrs.of PG	Type of Apptmt. T / R / C	Univ. Approval Status (Yes/No)	Temporary Approval From To	Details of PG Recogn. by University (Y/N) Temp/ Reg Letter No & date	MET Workshop attended in last 5 yrs.	Photograph with Signature
1	Radio diagnosis	Dr.Sunila Jaggi	Professor & Head	9820247845	sunilajaggi@yahoo.com	22/03/1969	No	1/4/2003	- - - -	30	R	Y		R MUHS/PG/E-1/ 27/6116/4142/18 Dt.28/11/2018	Yes	
2	Radio diagnosis	Dr. D B Modi	Associate Professor	9821172376	drdmodi@gmail.com	7/9/1954	No	1/4/1990	- - - -	33	R	N		N NA	No	
3	Radio diagnosis	Dr. Sonali Shah	Assistant Professor	9820235344	shahsonali75@hotmail.com	12/10/1975	No	1/4/2007	- - - -	16	R	Y		R MUHS/PG/E-1/ 27/6116/4142/18 Dt.28/11/2018	Yes	
4	Radio diagnosis	Dr.Rupesh Kashikar	Assistant Professor	9930059885	rupeshkashikar13@gmail.com	13/07/1975	No	1/10/2008	- - - -	14	R	N		N NA	Yes	
5	Radio diagnosis	Dr. Neha Shah	Assistant Professor	9769848068	drneha30@gmail.com	30/08/1978	No	1/2/2011	- - - -	12	R	N		N NA	Yes	

Sign. Of Dean with Seal

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ANNEXURE - III

Name of the Dept. : Pathology Subject : MD
Name of the College : Bombay Hospital Institute of Medical Sciences College Code : 6116 Intake Capacity : Two

S N	Subject	Full name of the Teaching staff	Designation	Mob No.	Email Id	Date of Birth	Whether belongs to Res.Cat.(If Yes,specify category)	Date of Appoint ment	Teaching Experience U/G (Yrs.)				Total Teaching Exp. in yrs.of PG	Type of Apptmt. T / R / C	Univ. Approval Status (Yes/No)	Temporary Approval From To	Details of PG Recogn. by University (Y/N)		MET Workshop attended in last 5 yrs.	Photograph with Signature
									Asst. Prof	Asso. Prof	Prof.	Total					Temp/ Reg	Letter No & date		
1	Patho logy	Dr.Maya Parihar Malhotra	Professor & Head	9820302628	maya.parihar@gmail.com	8/6/1966	No	15/02/1996	-	-	-	-	27	R	Y		R	MUHS/PG/E-1/27/ 6116/918/19 Dt. 25/02/2019	Yes	
2	Patho logy	Dr.Paresh Marathe	Associate Professor	9819227044	paresh.marathe73@gmail.com	6/3/1973	No	1/3/2008	-	-	-	-	16	R	Y		R	MUHS/PG/E-1/27/ 6116/44/18 Dt. 01/01/2019	Yes	
3	Patho logy	Dr. Keyuri Patel	Assistant Professor	9820233165	keyuri227@hotmail.com		No	1/8/2005	-	-	-	-	33	R	N		N	NA	Yes	
4	Patho logy	Dr. Rupali Parikh	Assistant Professor	9820521188	rsparikh74@gmail.com	14/05/1974	No	1/2/2022	-	-	-	-	1	R	N		N	NA	Yes	

(Signature)

Sign. Of Dean with Seal

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(Signature)

(Signature)

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ANNEXURE - III

Name of the Dept. :			General Surgery				Subject : MS													
Name of the College :			Bombay Hospital Institute of Medical Sciences				College Code : 6116				Intake Capacity : Two									
S	Subject	Full name of the	Designation	Mob	Email	Date of	Whether	Date of	Teaching Experience UG (Yrs.)				Total	Type of	Univ.	Temporary	Details of PG Recogn.		MET	Photograph
N		Teaching staff		No.	Id	Birth	belongs to Res. Cat. (If Yes,specify category)	Appoint ment	Asst. Prof	Asso. Prof.	Prof.	Total	Teaching Exp. in yrs.of PG	T / R / C	Approval Status (Yes/No)	Approval From To	Temp/ Reg	Letter No & date	Workshop attended in last 5 yrs.	with Signature
1	General Surgery	Dr.Anand Nande	Professor & Head	9820095499	agnande@gmail.com	5/6/1956	No	1/12/1991	-	-	-	-	32	R	Y		R	MUHS/PG/E-1/6116/2539/19 Dt. 25/06/2019	Yes	
2	General Surgery	Dr.Sanjay Chatterjee	Assistant Professor	9322243938	aparnasanjay@hotmail.com	20/01/1969	No	1/2/2002	-	-	-	-	21	R	Y		R	MUHS/PG/E-1/27/6116/4142/18 Dt.28/11/2018	Yes	
3	General Surgery	Dr.Niranjn Agarwal	Assistant Professor	9820541923	drndagarwal@hotmail.com	12/4/1967	No	22/04/1999	-	-	-	-	24	R	N		N	NA	Yes	
4	General Surgery	Dr. Aniruddh Patil	Assistant Professor	9765187631	anirudhapatil27@gmail.com	27/02/1985	No	19/04/2016	-	-	-	-	7	R	N		N	NA	Yes	

Sign. Of Dean with Seal

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Dr. Anand Nande

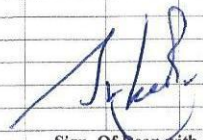
Dr. Sanjay Chatterjee

Dr. Aniruddh Patil

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ANNEXURE - III

Name of the Dept. :			Orthopaedics			Subject : MS													Intake Capacity : Two					
Name of the College :			Bombay Hospital Institute of Medical Sciences			College Code : 6116																		
S	Subject	Full name of the Teaching staff	Designation	Mob No.	Email Id	Date of Birth	Whether belongs to Res.Cat (If Yes,specify category)	Date of Appointment	Teaching Asst. Prof.	Experience Asso. Prof.	UG (Yrs.) Prof.	Total	Total Teaching Exp. in yrs.of PG	Type of Apptmt. T / R / C	Univ. Approval Status (Yes/No)	Temporary Approval From To	Details of PG Recogn. by University (Y/N)		MET Workshop attended in last 5 yrs.	Photograph with Signature				
N																	Temp/ Reg	Letter No & date						
1	Ortho - paedics	Dr. Parag Munshi	Professor & Head	9819934002	paragmunshi@hotmail.com	30/05/1966	No	20/11/2004	-	-	-	-	19	R	Y		R	MUHS/PG/E-1/6116/2539/19 Dt. 25/06/2019	Yes					
2	Ortho - paedics	Dr.Hetal Chiniwala	Associate Professor	9819894840	hchiniwala@yahoo.com	30/09/1972	No	1/10/2007	-	-	-	-	15	R	Y		R	MUHS/PG/E-1/6116/613/2009 Dt.06/05/2009	Yes					
3	Ortho - paedics	Dr.Hemant Bhandari	Assistant Professor	9821550550	hemantbhandari@hotmail.com	13/12/1962	No	1/9/2004	-	-	-	-	17	R	Y		R	MUHS/PG/E-1/6116/1783/10 Dt. 18/08/2010	Yes					
4	Ortho - paedics	Dr.Arvind Kulkarni	Assistant Professor	9892875490	drarvindspines@gmail.com	3/1/1973	No	2/7/2007	-	-	-	-	15	R	N		N	NA	Yes					
5	Ortho - paedics	Dr. Vishal Kundnani	Assistant Professor	9769310120	kundnanivishal@yahoo.co.in		No	1/9/2009	-	-	-	-	13	R	N		N	NA	Yes					


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ANNEXURE - III

Name of the Dept. : Ophthalmology
 Name of the College : Bombay Hospital Institute of Medical Sciences
 Subject : MS
 College Code : 6116
 Intake Capacity : One

S N	Subject	Full name of the Teaching staff	Designation	Mob No.	Email Id	Date of Birth	Whether belongs to Res.Cat.(If Yes,specify category)	Date of Appoint ment	Teaching Experience UG (Yrs.)				Total Teaching Exp. in yrs.of PG	Type of Apptmt. T / R / C	Univ. Approval Status (Yes/No)	Temporary Approval		Details of PG Recogn. by University (Y/N)		MET Workshop attended in last 5 yrs.	Photograph with Signature
									Asst. Prof	Asso. Prof	Prof	Total			From	To	Temp/ Reg	Letter No & date			
1	Ophthal mology	Dr.Nagendra Shah	Professor & Head	9324754190	kanudans@yahoo.co.in	30/06/1974	No	22/08/2005	-	-	-	-	17	R	Y		R	MUHS/PG/E-1/ 6116/2539/19 Dt.25/06/2019	Yes		
2	Ophthal mology	Dr.Moreker Mayur	Associate Professor	9820308358	mayurconsults@gmail.com	3/1/1977	No	15/12/2008	-	-	-	-	14	R	Y		R	MUHS/PG/E-1/27 6116/44/18 Dt. 01/01/2019	Yes		
3	Ophthal mology	Dr. Sandeep Kataria	Assistant Professor	9920604202	eyefacts@hotmail.com	17/09/1970	No	22/08/2005	-	-	-	-	17	R	N		N	NA	Yes		
4	Ophthal mology	Dr. Ajay Dudani	Assistant Professor	9820149976	drjay_dudani@yahoo.co.in	10/7/1967	No	8/3/2006	-	-	-	-	17	R	N		N	NA	Yes		

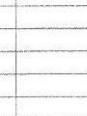
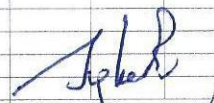
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Mayur-M
Sandeep K

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ANNEXURE - III

Name of the Dept. :			Obstetrics & Gynaecology			Subject : MS			Intake Capacity : Three											
Name of the College :			Bombay Hospital Institute of Medical Sciences			College Code : 6116														
S N	Subject	Full name of the Teaching staff	Designation	Mob No.	Email Id	Date of Birth	Whether belongs to Res. Cat. (If Yes, specify category)	Date of Appoint ment	Teaching Asst. Prof.	Experience Asso. Prof.	UG (Yrs.) Prof.	Total	Total Teaching Exp. in yrs. of PG	Type of Apptmt. T / R / C	Univ. Approval Status (Yes/No)	Temporary Approval From To	Details of PG Recogn. by University (Y/N) Temp/ Letter No & date		MET Workshop attended in last 5 yrs.	Photograph with Signature
1	Obst. & Gynaec.	Dr. Suvarna Khadilkar	Professor & Head	9820078703	suvarnakhadilkar@yahoo.com	6/9/1961	No	19/08/2013	-	-	-	-	35	R	Y		R	MUHS/PG/E-1/ 27/6116/4142/18 Dt. 28.11.2018	Yes	
2	Obst. & Gynaec.	Dr. Shashi Goyal	Associate Professor	9820122479	drshashigoyal@gmail.com	21/07/1956	No	1/9/1990	-	-	-	-	32	R	Y		R	MUHS/PG/E-1/ 6116/613/2009 Dt. 06/05/2009	Yes	
3	Obst. & Gynaec.	Dr. Prema Kania	Assistant Professor	9820127396	premakania@rediffmail.com	30/03/1962	No	1/8/1995	-	-	-	-	27	R	Y		R	MUHS/PG/E-1/ 27/6116/4142/18 Dt. 28/11/2018	Yes	
4	Obst. & Gynaec.	Dr. Kunjal Bathija	Assistant Professor	9820296242	kunjalbathija@hotmail.com	21/07/1971	No	1/5/2005	-	-	-	-	17	R	N		N	NA	Yes	
5	Obst. & Gynaec.	Dr. Varsha Pai Dhungat	Assistant Professor	9820182464	varshapaidhungat@yahoo.com	20/10/1974	No	1/5/2011	-	-	-	-	12	R	N		N	NA	Yes	
6	Obst. & Gynaec.	Dr. Nitin Pai Dhungat	Assistant Professor	9833016128	nppaidhungat@gmail.com	20/06/1975	No	15/9/2006	-	-	-	-	16	R	N		N	NA	Yes	
7	Obst. & Gynaec.	Dr. Neelima Mantri	Assistant Professor	9819437957	drneelimamantri@gmail.com	7/9/1981	No	16/03/2016	-	-	-	-	9	R	N		N	NA	Yes	
8	Obst. & Gynaec.	Dr. Tejaswi Kamble	Assistant Professor	9867359199	tejaswi_kamble281@yahoo.com	28/09/1984	No	2/5/2016	-	-	-	-	7	R	N		N	NA	Yes	
										 Sign. Of Dean with Seal Dr. S. V. Khadilkar MD DM DNBE FIAN FICP FAMS FRCP (London)										

Sign. Of Dean with Seal

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ANNEXURE - III

Name of the Dept. : Cardiology Subject : DM
Name of the College : Bombay Hospital Institute of Medical Sciences College Code : 6116 Intake Capacity : Two

S N	Subject	Full name of the Teaching staff	Designation	Mob No.	Email Id	Date of Birth	Whether belongs to Res. Cat. (If Yes, specify category)	Date of Appoint ment	Teaching Experience UG (Yrs.) Asst. Asso. Prof. Total	Total Teaching Exp. in yrs. of PG	Type of Apptmt. T / R / C	Univ. Approval Status (Yes/No)	Temporary Approval From To	Details of PG Recogn. by University (Y/N) Temp/ Letter No & date	MET Workshop attended in last 5 yrs.	Photograph with Signature
1	Cardiology	Dr. Anil Sharma	Professor & Head	9820071077	dranilheart@yahoo.co.in	31/08/1963	No	15/04/2004	- - - -	19	R	Y		R MUHS/PG/E-1/27/ 6116/4699/18 Dt.27/12/2018	Yes	
2	Cardiology	Dr. Ramesh Kavar	Associate Professor	9820088202	rameshkavar8@gmail.com	1/9/1964	No	1/1/2005	- - - -	18	R	Y		R MUHS/PG/E-1/ 6116/1783/10 Dt.18/08/2010	Yes	
3	Cardiology	Dr. B C Kalmath	Associate Professor	9820045848	b_kalmath@yahoo.co.in	9/6/1966	No	1/1/2005	- - - -	18	R	Y		R MUHS/PG/E-1/ 6116/1783/10 Dt.18/08/2010	Yes	
4	Cardiology	Dr. Sameer Pagad	Assistant Professor	8879089689	spagad@yahoo.com	14/11/1975	No	15/03/2012	- - - -	11	R	Y		R MUHS/PG/E-1/27/ 6116/4699/18 Dt.27/12/2018	Yes	

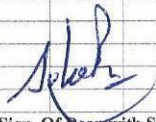
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fs1
Ramesh Kavar
BK

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(PG Degree / Super Speciality)

ANNEXURE - III

Name of the Dept. : Name of the College :			Neurology Bombay Hospital Institute of Medical Sciences			Subject : DM College Code : 6116			Intake Capacity : Two										
S N	Subject	Full name of the Teaching staff	Designation	Mob No.	Email Id	Date of Birth	Whether belongs to Res.Cat.(If Yes,specify category)	Date of Appoint ment	Teaching Asst. Prof	Experience Asso. Prof.	UG (Yrs.) Prof.	Total	Total Teaching Exp. in yrs.of PG	Type of Apptmt. T / R / C	Univ. Approval Status (Yes/No)	Temporary Approval From To	Details of PG Recogn. by University (Y/N) Temp/ Letter No & date	MET Workshop attended in last 5 yrs.	Photograph with Signature
1	Neurology	Dr.Satish V Khadilkar	Professor & Dean	9820024689	khadiilkarsatish@gmail.com	11/3/1960	No	10/7/1994	-	-	-	-	29	R	Y		R MUHS/PG/E-1/27 6116/4141/148 Dt.28/11/2018	Yes	
2	Neurology	Dr. J A Lalkaka	Associate Professor	9819767259	jimmylalkaka@gmail.com	21/07/1959	No	1/5/1993	-	-	-	-	30	R	Y		R MUHS/PG/E-1/ 6116/621/2009 Dt.07/05/2009	Yes	
3	Neurology	Dr.Vibhor Pardasani	Assistant Professor	9833908081	vibhorpardasani@gmail.com	14/12/1975	No	25/07/2012	-	-	-	-	10	R	Y		R MUHS/PG/E-1/27/ 6116/4699/18 Dt.27/12/2018	Yes	
4	Neurology	Dr. Nirmal Surya	Assistant Professor	9820026889	nirmal_surya@yahoo.com	15/08/1956	No	18/06/2007	-	-	-	-	16	R	N		N NA	Yes	
5	Neurology	Dr. Rakesh Singh	Assistant Professor	9223347374	drakeshn@gmail.com	6/2/1979	No	1/5/2014	-	-	-	-	9	R	N		N NA	Yes	
6	Neurology	Dr. Varsha Patil	Assistant Professor	9833182577	drvarsha.a.patil@gmail.com	17/09/1984	No	1/10/2019	-	-	-	-	3	R	N		N NA	Yes	
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Sign. Of Dean with Seal

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Khadiilkar

Pardasani

Khadiilkar

Rakesh

Patil

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF(Approved + Not Approved)
(PG Degree / Super Speciality)

ANNEXURE - III

Name of the Dept. : Nephrology Subject : DM
Name of the College : Bombay Hospital Institute of Medical Sciences College Code : 6116 Intake Capacity : Two

S N	Subject	Full name of the Teaching staff	Designation	Mob No.	Email Id	Date of Birth	Whether belongs to Res.Cat.(If Yes,specify category)	Date of Appoint ment	Teaching Experience UG (Yrs.) Asst. Asso. Prof. Total	Total Teaching Exp. in yrs.of PG	Type of Apptmt. T / R / C	Univ. Approval Status (Yes/No)	Temporary Approval From To	Details of PG Recogn. by University (Y/N) Temp/ Letter No & date	MET Workshop attended in last 5 yrs.	Photograph with Signature
1	Nephrolog	Dr. Shrirang Bichu	Professor & Head	9820191683	shrirangbichu@gmail.com	28/07/1967	No	1/4/2007	- - - -	16	R	Y		R MUHS/PG/E-1/27/ 6116/923/19 Dt. 25/02/2019	Yes	
2	Nephrolog	Dr. Viswanath Billa	Associate Professor	9820140041	billav@gmail.com	2/6/1966	No	1/4/1999	- - - -	22	R	Y		R MUHS/PG/E-1/ 6116/613/2009 Dt.06/05/2009	Yes	
3	Nephrolog	Dr. Hardik Shah	Assistant Professor	9833919767	drhardik74@hotmail.com	6/11/1974	No	1/8/2006	- - - -	16	R	Y		R MUHS/PG/E-1/27/ 6116/4141/148 Dt.28/11/2018	Yes	
4	Nephrolog	Dr. Dilip Kirpalani	Assistant Professor	9820091754	dilip_kirpalani@yahoo.com	23/01/1980	No	15/09/2009	- - - -	13	R	Y		R MUHS/PG/E-1/27/ 6116/4141/148 Dt.28/11/2018	Yes	
5	Nephrolog	Dr. Satarupa Deb	Assistant Professor	9326786023	dr.satarupadeb@gmail.com	30/09/1989	No	1/11/2022	- - - -	04 months	R	No			No	

Sign. Of Dean with Seal
Dr. S. V. Khadilkar
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FAMS FRCP (London)
Dean
Bombay Hospital
Institute of Medical Sciences
12, New Marine Lines,
Mumbai - 400 020

Dr. Shrirang Bichu

Dr. Viswanath Billa

Dr. Hardik Shah

Dr. Satarupa Deb

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ANNEXURE - III

Name of the Dept. :			Neurosurgery				Subject : M.Ch.														
Name of the College :			Bombay Hospital Institute of Medical Sciences				College Code : 6116				Intake Capacity : Three										
S	Subject	Full name of the	Designation	Mob	Email	Date of	Whether	Date of	Teaching Experience UG (Yrs.)				Total	Type of	Univ.	Temporary	Details of PG Recogn.		MET	Photograph	
N		Teaching staff		No.	Id	Birth	belongs to	Appoint	Asst.	Asso.	Prof.	Total	Teaching	Apptmt.	Approval	Approval	by University (Y/N)		Workshop		
							Res. Cat (If	ment	Prof	Prof.			Exp. in	T / R / C	Status	From	To	Temp/	attended in	with	
							Yes,specify						yrs.of PG		(Yes/No)			Reg	Letter No	Signature	
							category)											& date	& date	last 5 yrs.	
1	Neuro-surgery	Dr. C E Deopujari	Professor & Head	9819831736	d.chandrashekar11@gmail.com	31/08/1954	No	1/4/1994	-	-	-	-	29	R	N			R	MUHS/PG/E-1/6109/1600/2008 Dt.02/12/2008	Yes	
2	Neuro-surgery	Dr.Suneel Shah	Professor	9820213260	suneelshah@gmail.com	15/09/1962	No	1/10/2001	-	-	-	-	21	R	Y			R	MUHS/PG/E-1/6116/27/216/2022 Dt. 19/01/2022	Yes	
3	Neuro-surgery	Dr.Mahesh Chaudhari	Associate Professor	9820059698	drmaheshc@gmail.com	14/09/1954	No	1/4/1996	-	-	-	-	27	R	N			R	MUHS/PG/E-1/6116/613/2009 Dt.06/05/2009	Yes	
4	Neuro-surgery	Dr.Vikram Karnmarkar	Associate Professor	9819521273	vskarnmarkar@gmail.com	11/5/1974	No	19/01/2009	-	-	-	-	14	R	Y			R	MUHS/PG/E-1/6116/27/2656/2021 Dt. 29/09/2021	Yes	
5	Neuro-surgery	Dr. Nirav Mehta	Associate Professor	9867199967	drnamehta@yahoo.co.in	16/01/1977	No	10/2/2010	-	-	-	-	13	R	Y			R	MUHS/PG/E-1/6116/27/2656/2021 Dt. 29/09/2021	Yes	
6	Neuro-surgery	Dr. Chandan Mohanty	Assistant Professor	8451938613	bhims1990@yahoo.co.in	24/04/1982	No	15/09/2015	-	-	-	-	7	R	N			N	NA	Yes	

Sign. Of Dean with Seal

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(PG Degree / Super Speciality)

ANNEXURE - III

Name of the Dept. : Urology
 Name of the College : Bombay Hospital Institute of Medical Sciences
 Subject : M.Ch.
 College Code : 6116
 Intake Capacity : Two

S N	Subject	Full name of the Teaching staff	Designation	Mob No.	Email Id	Date of Birth	Whether belongs to Res.Cat.(If Yes,specify category)	Date of Appoint ment	Teaching Experience UG (Yrs.) Asst. Asso. Prof. Total	Total Teaching Exp. in yrs.of PG	Type of Apptmt. T / R / C	Univ. Approval Status (Yes/No)	Temporary Approval From To	Details of PG Recogn. by University (Y/N) Temp/ Reg Letter No & date	MET Workshop attended in last 5 yrs.	Photograph with Signature
1	Urology	Dr.Umesh Oza	Professor & Head	9820058623	drumeshoza@gmail.com	18/09/1954	No	15/04/1990	- - - -	33	R	Y		R MUHS/PG/E-1/ 6116/613/2009 Dt.06/05/2009	Yes	
2	Urology	Dr.Prashant Pattnaik	Professor	9820080161	drpkpattnaik@yahoo.com	26/08/1958	No	1/3/2001	- - - -	22	R	Y		R MUHS/PG/E-1/611 27/2958/2021 Dt. 01/11/2021	Yes	
3	Urology	Dr. Varun Gunavanthe	Assistant Professor	9920282201	varunuro@gmail.com	27/06/1982	No	2/1/2017	- - - -	5	R	Y		R MUHS/PG/E-1/611 27/2656/2021 Dt. 29/09/2021	Yes	


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ANNEXURE - III

Name of the Dept. : CVTS
Name of the College : Bombay Hospital Institute of Medical Sciences
Subject : M.Ch.
College Code : 6116
Intake Capacity : One

S N	Subject	Full name of the Teaching staff	Designation	Mob No.	Email Id	Date of Birth	Whether belongs to Res.Cat.(If Yes,specify category)	Date of Appoint ment	Teaching Asst. Prof.	Experience Asso. Prof.	UG (Yrs.) Prof.	Total Teaching Exp. in yrs.of PG	Type of Apptmt. T / R / C	Univ. Approval Status (Yes/No)	Temporary Approval From To	Details of PG Recogn. by University (Y/N) Temp/ Reg Letter No & date	MET Workshop attended in last 5 yrs.	Photograph with Signature
1	CVTS	Dr. Rajendra Umbarkar	Associate Professor	9821090504	rajumbarkar@hotmail.com	10/7/1965	No	27/01/2009	-	-	-	14	R	Y		R MUHS/PG/E-1/27/ 6116/4699/18 Dt. 27/12/2018	Yes	
2	CVTS	Dr. Aniruddh Trivedi	Associate Professor	9820076038	aniruddh_trivedi@hotmail.com	8/5/1957	No	3/4/1995	-	-	-	28	R	N		N NA	Yes	
3	CVTS	Dr. Krishna Prasad Imiraya	Assistant Professor	9920029100	dr_krishnaprasad@rediffmail.com	25/03/1970	No	1/9/2013	-	-	-	9	R	Y		R MUHS/PG/E-1/27/ 6116/4141/148 Dt.28/11/2018	Yes	
4	CVTS	Dr. Shivprasad Shetty	Assistant Professor	9769379377	dr.shiv13@gmail.com	13/08/1982	No	14/9/2018	-	-	-	4	R	N		N NA	Yes	

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