

Maharashtra University of Health Sciences, Nashik

Inspection Committee Report for Academic Year 2023 - 2024

Faculty of Medicine

(For Grant of Continuation / Extension of Affiliation for affiliated UG/ Colleges/Institutes & Hospitals)

Date of Inspection	:	
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Name & Designation of Inspectors :		Signature
1)	Chairman	
2)	Member	
3)	Member	
4)	Member	

1	Name of the College / Institute	: Government Medical College, Dharashiv [Osmanabad]
a	Name of Society / Trust	: Government Medical College, Dharashiv [Osmanabad]
b	Address	: New Building, Civil Hospital Compound, Marwad Galli, Dharashiv [Osmanabad]-413 501
c	Email Address	: deangmcosmanabad@gmail.com
d	Fax No.(s)	:
e	Telephone No.(s)	: 02472
f	Website	: gmcosmanabad.org.in
g	College Code	: AA1231
h	Year of Establishment	: 27/01/2021
i	Status	: Government / Corporation / Private
j	Letter of permission by Medical Council of India (UG)	: Letter No.NMC/UG/2022-23/000190/042661-70 Dated 22/09/2022 Intake:100
k	Stage of Renewal	: First Renewal
2	Details of the Dean/Principal	:
a	Name of the Dean/ Principal	: Dr. Shilpa V. Domkundwar
b	Nature of Appointment	: Permanent / Temporary / Officiating
c	Mobile No.	: 9867719088
d	Office Landline	: 02472-297440
e	E-mail Address	: deangmcosmanabad@gmail.com

1. Details of the College are available on the College Website, in the prescribed format?

Yes/No

2. Whether the information is complete in all respect.

Yes/No

3. If incomplete information, please write the points from prescribed format regarding unavailable/insufficient information, (LIC to physically verify) the infrastructure/available facilities regarding those points and write the observation below-

Sr. No.	Points Number in prescribed format	Particulars of the point	Observations of the LIC

4. LIC to randomly choose the 5-10 points from prescribed format about which information is completely available.

Sr. No.	Points Number in prescribed format	Particulars of the point	Observations of the LIC

5. LIC to randomly choose few departments and physically verify the availability of teaching staff and residents in the department (Please attach the attendance sheet duly signed by teachers and residents for these randomly chosen departments) Annexure- "II".

6. Curricular Activities in the College-

- a. Whether Master Time Table is available.

Yes/No

- b. Whether the lectures, Practicals, Clinical Sessions etc. are conducted as per the master time table?

(LIC to randomly choose 5-10 today's lectures, Practicals, clinical sessions, PG activities, (if PG course available) etc. from master time table and physically verify the conduction of these sessions).

Sr. No.	Year (I, II, III / I, III / II, PG)	Teaching method (Lecture, Practical, Clinics, PG activities etc.)	Whether Actual session is conducted as per master plan	Remark

- c. LIC to randomly choose at least two departments from Clinical side and at least one departments Pre/Para Clinical Departments. LIC to verify past record of teaching activities (UG & PG) of these departments. (Please mention the findings in below)-

Sr. No.	Department	Past Records Available (Yes /No)	If available, whether past teaching activities are as per time table (Yes/No)	Remark

7. **Ongoing Research Activities in the college excluding PG thesis** (LIC to verify the relevant details of any one of ongoing research activities such as Ethics Committee Approval, status of data collection, data analysis etc., and give the remarks below).

8. **MUHS Faculty Evaluation Status:**

(Refer University Circular No.99/2022 (MUHS/Acad/EO/UG & PG/3869/2022 dtd.21/10/2022))

Faculty Evaluation carried out at College level	Total No. of Teachers	Total evaluation carried out	Remaining pending with reasons

9. **Status of NAAC Accreditation: Accredited**

Yes / No / Not Applicable

If Yes, Grade & Date of last Inspection:

If No, what is current status/ progress of work

10. **Students Feedback**

Sr. No.	Particulars to be verified	Details on College Website	Adequate/ Inadequate
1	Hostel facility: Boys (UG & PG), Girls (UG & PG), Interns, Residents, Canteen Facility, Warden/ Rector, Hygiene, Vending Machine etc. [Note: Verify Canteen Facility is monitored as per MUHS Circular No.18/2019 dated 19/03/2019].	Yes/No	Adequate for 100
2	Toilets / Washroom Facilities (Cleanness & Hygiene maintain)	Yes/No	Adequate
3	Housekeeping at Hostel	Yes/No	Adequate
4	Drinking Water Facilities	Yes/No	Adequate
5	Security Services	Yes/No	Adequate

11. **Fees Details:**

Sr. No.	Continuation / Extension of Affiliation Fees Details:				Reasons of Non-payment
	Course (s)	Paid / Not paid	Amount	Outstanding (if any)	
1	UG	Not paid	42,00,000/-	-	-

12. **Date of college data uploaded on web portal (<http://aishe.gov.in>) regarding "All India Survey on Higher Education (AISHE)".** Yes/No

13. **Summary and other observation of LIC: (If required separate sheet to be attached).**

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

Information to be provided by the College for verification of Local Inquiry Committee LIST OF ANNEXURE
FOR LIC

No. of Annexures	Particulars	Verified by Committee
ANNEXURE-I-A & I-B	Approved Teaching Staff & Total Teaching Staff (Approved + Not approved) Information as per MSR 1. Hard copy & soft copy of this Annexure must be submitted to the University. 2. The information must be made available on the College website.	Yes/No
ANNEXURE-II	LIC to randomly choose few departments and physically verify the availability of teaching staff and residents in the department (Please attach the attendance sheet duly signed by teachers and residents) 1. Hard copy of this Annexure must be submitted to the University. 2. The information must be made available on the College website	Yes/No
ANNEXURE-III	Intake Capacity/ Seat Matrix 1. Hard copy & soft copy of this Annexure must be submitted to the University. 2. The information must be made available on the College website.	Yes/No
ANNEXURE-IV	Total Subject-wise Teacher Staff List (Approved + Not approved) 1. Hard copy & soft copy of this Annexure must be submitted to the University. 2. The information must be made available on the College website.	Yes/No
ANNEXURE-V	Total Ancillary Staff Information The information must be made available on the College website.	Yes/No
ANNEXURE-VI	Total Non-Teaching Staff Information The information must be made available on the College website.	Yes/No
ANNEXURE-VII	Examination Related Information Hard copy & soft copy of this Annexure must be submitted to the University). The information must be made available on the College website.	Yes/No
ANNEXURE-VIII	Form for Fellowship/Certificate Course(s)	Yes/No

IMPORTANT INSTRUCTIONS & DECLARATIONS:

- Our College is fully aware that our college is responsible to fulfil and maintain norms including the infrastructure both physical and human resources, teaching faculty and clinical material throughout Academic Year as per MSR/Council norms/University norms. In case false/wrong declaration or fabricated documents is submitted for purpose of Affiliation of the University by the College and if it is found by the University at any stage, then our college is fully aware that affiliation will be withdrawn by the University with immediate effect with penal action.

(P.T.O.)

2. It is certified that our college has uploaded all above Annexures on our college website and it will be kept ready for verification of Local Inquiry Committee (LIC). Our college is fully aware that University will not grant Continuation of Affiliation, in case if required information, is not uploaded on college website.
3. Our College hereby undertake that all Annexures information will be made available on college website for a period of next 05 years. Year-wise information of all Annexures will be made available on college website for a period of 05 years from time to time. In case if any information (Annexurewise) is called-for by the University in intermittent period, our college will furnish required information to the University immediately.

Date :10.4.1.2023.....

Signature of Dean/Principal



Place : Dharashiv...

Name of the Signatory- (with

**DEAN
Government Medical College,
Dharashiv**

Seal of the College / Institute)

DECLARATION BY LIC

We hereby certify that, the College has uploaded Annexures as prescribed by University on College Website and it is duly verified by our Committee. Details of Information of Annexure/s which is not uploaded on College Website is mentioned in LIC Report.

Name of Inspectors		Signature of Inspectors
1)	Chairman	
2)	Member	
3)	Member	
4)	Member	

Short Report

To,
The Registrar M.U.H.S.,
Nashik

Sub: - Short Report of Local Inquiry Committee for Continuation of Affiliation for the Academic Year 2022-23.

Sir,

With reference to above mentioned subject and letter we are visiting Government Medical College, Osmanabad. College on dated 25/02/2023 and sending a **Short Report** regarding present Teaching Staff and IPD in your prescribed format as follows at 11.00 a.m.

1. Number of Teaching Staff present:
2. Number of IPD patients on Bed:

(Photocopy of Attendance of Teacher and IPD at the time 11:00 a.m.)

- 1) (Name & Sign of LIC Member)
- 2) (Name & Sign of LIC Member)
- 3) (Name & Sign of LIC Member)
- 4) (Name & Sign of LIC Chairman)

Maharashtra University of Health Sciences, Nashik

Name of College/Institute : Government Medical College, Dharashiv [Osmanabad]

Intake Capacity: 100 Recognized/Permitted If permitted, Stage of renewal: First Renewal.

APPROVED TEACHING STAFF AVAILABLE:

Departments	Professor			Associate Professor			Assistant Professor			Senior Resident			Tutor /JR/		
	R	AA	D	R	AA	D	R	AA	D	R	AA	D	R	AA	D
Anatomy	01	01	00	01	0	01	02	02	00	00	00	00	03	03	00
Physiology	01	0	01	01	02	00	02	02	00	00	00	00	03	03	00
Biochemistry	01	01	00	01	01	00	02	02	00	00	00	00	03	03	00
Pharmacology	01	0	01	01	01	00	02	01	01	00	00	00	03	03	00
Pathology	01	01	00	02	02	00	03	03	00	02	02	00	01	01	00
Microbiology	01	0	01	01	01	00	02	02	00	00	00	00	04	04	00
Forensic Medicine	01	0	01	01	0	01	01	0	01	00	00	00	02	02	00
Community Medicine	01	0	01	02	02	00	03	03	00	02	02	00	01	01	00
Gen. Medicine	01	0	01	02	02	00	03	01	02	03	02	01	00	00	00
Paediatrics	01	0	01	01	0	0	01	01	00	01	01	00	00	00	00
Respiratory Medicine	00	00	00	01	0	01	01	01	00	01	00	01	00	00	00
D.V.L.	00	00	00	01	0	01	01	0	01	01	00	01	00	00	00
Psychiatry	00	00	00	01	0	01	01	0	01	01	01	00	00	00	00
Gen. Surgery	01	01	00	02	01	01	03	03	00	03	01	02	00	00	00
Orthopaedics	01	0	01	01	01	00	01	01	00	01	01	00	00	00	00
E.N.T.	00	00	00	00	00	00	01	01	00	01	01	00	00	00	00
Ophthalmology	00	00	00	00	00	00	01	01	00	01	01	00	00	00	00
Obst. & Gynae.	01	0	01	01	01	00	02	02	00	02	02	00	00	00	00
Anaesthesia	00	00	00	02	02	00	02	02	00	01	01	00	00	00	00
Radio-diagnosis	00	00	00	01	01	00	01	01	00	02	00	02	00	00	00
Dentistry	00	00	00	00	00	00	01	01	00	01	01	00	00	00	00
Emergency Medicine	00	00	00	01	0	01	01	01	00	06	05	01	00	00	00
Total	13	4	9	24	17	7	37	31	6	29	21	8	20	20	0

R = Required, AA=Approved Available, D=Deficiency.

- Requirement is to be calculated as per MCI/NMC norms as the case may be, and considering the stage of renewal.
- Staff requirement should also include requirement for any running PG course in the institute.
- Extra teacher on higher post can compensate deficiency of teacher on lower post in same department.
- Deficiency of SR cannot be compensated by extra teacher.

Deficiency in faculty % = (Total deficiency of approved faculty) * 100 / (Total Required faculty)

Available approved faculty % = 100 - Deficiency % = _____

(Faculty includes Professors, Associate Professors and Assistant Professors)


 Signature of Dean
 DEAN
 Government Medical College,
 Dharashiv

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

Name of College/Institute Government Medical College, Dharashiv [Osmanabad]

Intake Capacity: 100

Recognized/PermittedIf permitted, Stage of renewal: First Renewal

TOTAL (APPROVED + NOT APPROVED) TEACHING STAFF AVAILABLE:

Departments	Professor			Associate Professor			Assistant Professor			Senior Resident			Tutor /JR		
	R	TA	D	R	TA	D	R	TA	D	R	TA	D	R	TA	D
Anatomy	01	01	00	01	0	01	02	02	00	00	00	00	03	03	00
Physiology	01	0	01	01	02	00	02	02	00	00	00	00	03	03	00
Biochemistry	01	01	00	01	01	00	02	02	00	00	00	00	03	03	00
Pharmacology	01	0	01	01	01	00	02	01	01	00	00	00	03	03	00
Pathology	01	01	00	02	02	00	03	03	00	02	02	00	01	01	00
Microbiology	01	0	01	01	01	00	02	02	00	00	00	00	04	04	00
Forensic Medicine	01	0	01	01	0	01	01	0	01	00	00	00	02	02	00
Community Medicine	01	0	01	02	02	00	03	03	00	02	02	00	01	01	00
Gen. Medicine	01	0	01	02	02	00	03	01	02	03	02	01	00	00	00
Paediatrics	01	0	01	01	0	0	01	01	00	01	01	00	00	00	00
Respiratory Medicine	00	00	00	01	0	01	01	01	00	01	00	01	00	00	00
D.V.L.	00	00	00	01	0	01	01	0	01	01	00	01	00	00	00
Psychiatry	00	00	00	01	0	01	01	0	01	01	01	00	00	00	00
Gen. Surgery	01	01	00	02	01	01	03	03	00	03	01	02	00	00	00
Orthopaedics	01	0	01	01	01	00	01	01	00	01	01	00	00	00	00
E.N.T.	00	00	00	00	00	00	01	01	00	01	01	00	00	00	00
Ophthalmology	00	00	00	00	00	00	01	01	00	01	01	00	00	00	00
Obst. & Gynae.	01	0	01	01	01	00	02	02	00	02	02	00	00	00	00
Anaesthesia	00	00	00	02	02	00	02	02	00	01	01	00	00	00	00
Radio-diagnosis	00	00	00	01	01	00	01	01	00	02	00	02	00	00	00
Dentistry	00	00	00	00	00	00	01	01	00	01	01	00	00	00	00
Emergency Medicine	00	00	00	01	0	01	01	01	00	06	05	01	00	00	00
Total	13	4	9	24	17	7	37	31	6	29	21	8	20	20	0

R = Required, TA=Total Available, D=Deficiency.

- Requirement is to be calculated as per MCI/NMC norms as the case may be, and considering the stage of renewal.
- Staff requirement should also include requirement for any running PG course in the institute.
- Extra teacher on higher post can compensate deficiency of teacher on lower post in same department.
- Deficiency of SR cannot be compensated by extra teacher.

Deficiency in faculty % = (Total deficiency of faculty) * 100/ (Total Required faculty) = Available total faculty % = 100 - Deficiency % =

(Faculty includes Professors, Associate Professors and Assistant Professors)

Deficiency in residents and tutors % = (Total deficiency of residents and tutors) * 100/ (Total Required residents and tutors) =

Available residents and tutors % = 100 - Deficiency % = _____



Signature of Dean

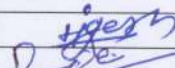
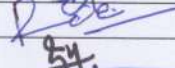
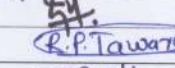
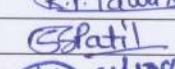
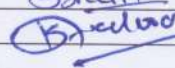
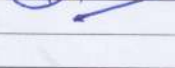
DEAN

Government Medical College,
Dharashiv

ANNEXURE-II

Name of College/Institute: Government Medical College, Dharashiv [Osmanabad]

Name of the Department: ANATOMY

Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
1	Dr.M.S. Selukar	Professor & HOD	Yes	
2	Dr.Peerzade M.S.M.K.	Assistant Professor	Yes	
3	Dr. Galphade Y.P.	Assistant Professor	Yes	
4	Dr.R.P. Taware	Tutor	---	
5	Dr. Supriya Patil	Tutor	---	
6	Dr. _____ Kotalwad V.C.E.S.H.A.D.G.	Tutor	---	

Summary-

Approved Staff

Sr. No.	Designation	Required	Available	Deficiency
1	Professor	1	1	0
2	Associate Professor	1	0	1
3	Assistant Professor	2	2	0
4	Senior Resident	0	0	0
5	Junior Resident	3	03	0

Approved+Non Approved Staff

Sr. No.	Designation	Required	Available	Deficiency
1	Professor	1	1	0
2	Associate Professor	1	0	1
3	Assistant Professor	2	2	0
4	Senior Resident	0	0	0
5	Junior Resident	3	3	0



Signature of HOD



Signature of Dean

DEAN
Government Medical College,
Dharashiv

Name of College/Institute: Govt M

ANNEXURE-II

Name of College/ Institute: Government Medical college, Dharashiv [Osmanabad]

Name of the Department: Microbiology

Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
1	Dr. Charushila S. Halgarkar	Associate Professor	Yes	<i>[Signature]</i>
2	Dr. Trupti H. Mande	Assistant Professor	Yes	<i>[Signature]</i>
3	Dr. Supriya Arun Gaikwad	Assistant Professor	Yes	<i>[Signature]</i>
4	Dr. Dattatray Bhosle	S. R./ Tutor		<i>[Signature]</i>
5	Dr. Shrikant Balwande	S. R./ Tutor		<i>[Signature]</i>
6	Dr. Smita Bagal	S. R./ Tutor		<i>[Signature]</i>
7	Dr. Sanjay Sontakke	S. R./ Tutor		<i>[Signature]</i>

Summary –

Approved Staff

Approved + Non Approved Staff

Sr. No.	Designation	Required	Available	Deficiency
1	Professor	1	0	1
	Associate			

Sr. No.	Designation	Required	Available	Deficiency
1	Professor	1	0	1

ANNEXURE-II

Name of College/Instituit: Government Medical college, Dharashiv [Osmanabad]

Name of the Department: Pathology

Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
1	Dr. Jayashri khiste (Inamdar)	Asso. Prof	Yes	<i>Jayashri Khiste</i>
2	Dr. Sable Bhaskar Mahadev	Assistant Professor		<i>Bhaskar Sable</i>
3	Dr. Satpute Amarsingh R	Sr. Resident		<i>A.R. Satpute</i>
4	Dr. Vivek Aruri Kolage	Sr. Resident		<i>Vivek Kolage</i>
5	Dr. Ashvini Dhondiam Kadam	Sr. Resident		<i>Ashvini Kadam</i>
6	Dr. Kapse Amol Atmaram	Sr. Resident		<i>Amol Kapse</i>
7	Dr. Nitin D. Bhosale	Tutor		<i>Nitin D. Bhosale</i>

Summary -

Approved Staff

Approved + Non Approved Staff

Sr. No.	Designation	Required	Available	Deficiency
1	Professor	01	00	01
2	Associate Professor	02	01	01
3	Assistant Professor	03	01	02

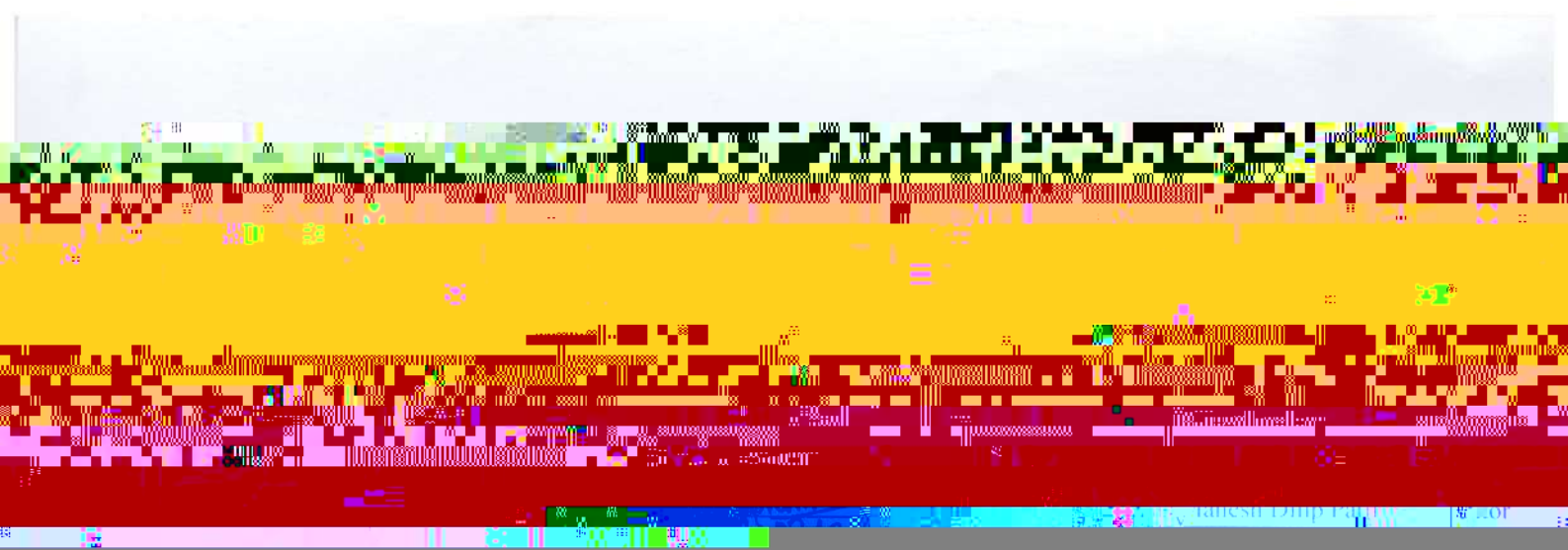
Sr. No.	Designation	Required	Available	Deficiency
1	Professor	01	00	01
2	Associate Professor	02	01	01
3	Assistant Professor	03	01	02



ANNEXURE-II

Name of College/Institute: Government Medical College, Osmanabad

Name of the Department: Pharmacology



ANNEXURE-II

Name of College/ Institute: Government Medical college, Dharashiv [Osmanabad]

Name of the Department: E.N.T.

ANNEXURE-II

Name of College/Institute: Government Medical college, Dharashiv [Osmanabad]

Name of the Department: Ophthalmology

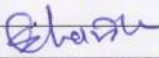
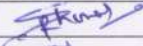

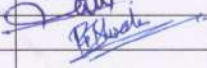
Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
01	Dr Pavan Shivajirao Mahajan	Assistant Professor		<i>[Signature]</i>
02	Dr Shweta Vinod Pawar	Senior Resident		<i>[Signature]</i>

Summary –

Approved Staff

Approved + Non Approved Staff

ANNEXURE-II**Name of College/Institute: Government Medical college, Dharashiv [Osmanabad]****Name of the Department: General Medicine**

Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
01	Dr. Sachin Chaudhari	Associate Professor	Yes	
02	Dr.Sainath Dhumal	Assistant Professor	Yes	
03	Dr.Saurabh Patil	Senior Resident		
4	DR.Rameshwar Bhosale	Senior Resident		

Summary –**Approved Staff****Approved + Non Approved Staff**


Sr. No.	Designation	Required	Available	Deficiency
1	Professor	1	0	01
2	Associate Professor	2	1	01
3	Assistant Professor	3	1	2
	Senior Resident	3	0	3

Sr. No.	Designation	Required	Available	Deficiency
1	Professor	1	0	01
2	Associate Professor	2	1	01
3	Assistant Professor	3	1	2
	Senior Resident	3	0	3

ANNEXURE-II

Name of College/Institute: Government Medical College, Osmanabad

Name of the Department: General Medicine

Sr. No.	NameoftheTeacher	Designation	MUHSApproved Designation	Signature
1	DR MAROTI SAMBHAJI KARALE	ASSOCIATE PROFESSOR	ASSOCIATE PROFESSOR	
2				
3				






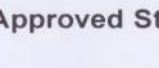
Summary-

ApprovedStaff ApprovedStaff

ANNEXURE-II

Name of College/Institute: Government Medical college, Dharashiv [Osmanabad]

Name of the Department: Emergency Medicine

Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
01	Dr. Balaji Samudre	Assistant Professor	Yes	
02	Dr. Shubhada Khandare	Senior Resident		
3	Dr Smita Gawli	Senior Resident		
4	Dr. Prasenjeet Padwal	Senior Resident		
5	Dr. Sudhir Sontakke	Senior Resident		
6	Dr. Sujit Naikal	Senior Resident		

Summary –

Approved Staff

Approved + Non Approved Staff

Sr. No.	Designation	Required	Available	Deficiency
1	Professor	0	0	0
2	Associate Professor	1	0	1
3	Assistant Professor	1	01	0
4	Senior Resident	6	5	1
5	Junior Resident	0	0	0

Sr. No.	Designation	Required	Available	Deficiency
1	Professor	0	0	0
2	Associate Professor	1	0	1
3	Assistant Professor	1	01	0
4	Senior Resident	6	5	1
5	Junior Resident	0	0	0



Signature of HOD




Signature of Dean
DEAN
Government Medical College,
Dharashiv

ANNEXURE-II

Name of College/Instituit: Government Medical college, Dharashiv [Osmanabad]

Name of the Department: PSYCHIATRY

Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
1.	Dr. RAJESH SHRIRANG NARWADE	SENIOR RESIDENT		
2.				
3				
4				
5				
6				

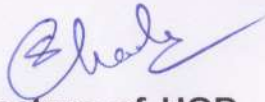
Summary –

Approved Staff

Approved + Non Approved Staff

Sr. No.	Designation	Required	Available	Deficiency
1	Professor			
2	Associate Professor	01	0	01
3	Assistant Professor	01	0	01
4	Senior Resident	01	01	0
5	Junior Resident			

Sr. No.	Designation	Required	Available	Deficiency
1	Professor			
2	Associate Professor	01	0	01
3	Assistant Professor	01	0	01
4	Senior Resident	01	01	0
5	Junior Resident			



Signature of HOD






Signature of Dean
Government Medical College,
Dharashiv

ANNEXURE-II

Name of College/Institit: Government Medical college, Dharashiv [Osmanabad]

Name of the Department: General Surgery

Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
1.	Dr.Parwej Mujawar	Professor	Yes	
2.	Dr. Prashant Patil	Assi. Prof	Yes	
3	Dr. Pramod Lokare	Assi prof	Yes	
4	Dr. Trupti Pawar	Assi. Prof	Yes	
5	Dr. Paritosh Kurund	S R		

Summary –


Approved Staff

Sr. No.	Designation	Required	Available	Deficiency
1	Professor	01	01	0
2	Associate Professor	02	0	02
3	Assistant Professor	03	03	00
4	Senior Resident	03	01	02
5	Junior Resident			

Approved + Non Approved Staff


Sr. No.	Designation	Required	Available	Deficiency
1	Professor	01	01	0
2	Associate Professor	02	0	02
3	Assistant Professor	03	03	00
4	Senior Resident	03	01	02
5	Junior Resident			

Signature of HOD



Signature of Dean

ANNEXURE-II**Name of College/Institute: Government Medical college, Dharashiv [Osmanabad]****Name of the Department: General Surgery**

Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
01	Dr. Ganesh Swami	Associate Professor	Yes	

Summary –**Approved Staff**

Sr. No.	Designation	Required	Available	Deficiency
1	Professor	01	01	00
2	Associate Professor	02	01	01
3	Assistant Professor	03	03	00
4	Senior Resident	03	01	02
5	Junior Resident	0	0	0

Approved + Non Approved Staff

Sr. No.	Designation	Required	Available	Deficiency
1	Professor	01	01	00
2	Associate Professor	02	01	01
3	Assistant Professor	03	03	00
4	Senior Resident	03	01	02
5	Junior Resident	0	0	0

Signature of HOD
Signature of Dean
DEAN
Government Medical College,
Dharashiv

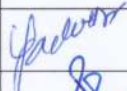
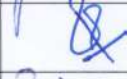



ANNEXURE-II

Name of College/Institit: Government Medical college, Dharashiv [Osmanabad]

Name of the Department: Orthopaedics

Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
1	DR. RUSHIKESH	ASSOCIATE	YES	

ANNEXURE-II**Name of College/Institute: Government Medical college, Dharashiv [Osmanabad]****Name of the Department: OBGY**

Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
01	Dr. B. B. Yadav	Associate Prof	Yes	
02	Dr. Ganesh Bandkhadke	Assistant Professor	Yes	
03	Dr. Shantanu Patil	Assistant Professor	Yes	
04	Dr. Kiran Deshmukh	Senior Resident		
05	Dr. Vasudha Diggaj Dapke-Deshmukh	Senior Resident		

Summary –**Approved Staff**


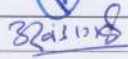
Sr. No.	Designation	Required	Available	Deficiency
1	Professor	1	0	1
2	Associate Professor	1	01	0
3	Assistant Professor	2	02	0
4	Senior Resident	2	2	0
5	Junior Resident	0	0	0

Approved + Non Approved Staff

Sr. No.	Designation	Required	Available	Deficiency
1	Professor	1	0	1
2	Associate Professor	1	01	0
3	Assistant Professor	2	02	0
4	Senior Resident	2	2	0
5	Junior Resident	0	0	0


Signature of HOD
Signature of Dean
DEAN
Government Medical College,
Dharashiv

ANNEXURE-II**Name of College/Institit: Government Medical college, Dharashiv [Osmanabad]****Name of the Department: F.M.T.**

Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
1.	Dr. Pritam T.Raut	Tutor		
2.	Dr. Khandagale Amol Arun	Tutor		
3.				

Summary –**Approved Staff**

Sr. No.	Designation	Required	Available	Deficiency
1	Professor			
2	Associate Professor	02	0	02
3	Assistant Professor	02	2	02
4	Senior Resident	01	02	0
5	Junior Resident			

Approved + Non Approved Staff

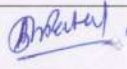
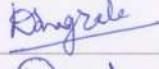
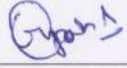
Sr. No.	Designation	Required	Available	Deficiency
1	Professor			
2	Associate Professor	02	0	02
3	Assistant Professor	02	2	02
4	Senior Resident	01	02	0
5	Junior Resident			

**Signature of HOD****Signature of Dean****DEAN
Government Medical College,
Dharashiv**

ANNEXURE-II

Name of College/Instituit: Government Medical college, Dharashiv [Osmanabad]

Name of the Department: ANAESTHESIA

Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
1.	Dr. Ajay S. Patil	Assistant Professor		
2.	Dr. Deepti Satish Nagrale	Assistant Professor		
3.	Dr. Pranita Gangadharrao Patil	Senior Resident		

Summary –

Approved Staff

Approved + Non Approved Staff



Sr. No.	Designation	Required	Available	Deficiency
1	Professor			
2	Associate Professor	02	0	02
3	Assistant Professor	02	02	0
4	Senior Resident	01	01	0
5	Junior Resident			

Sr. No.	Designation	Required	Available	Deficiency
1	Professor			
2	Associate Professor	02	0	02
3	Assistant Professor	02	02	0
4	Senior Resident	01	01	0
5	Junior Resident			

for 
Signature of HOD


Signature of Dean
DEAN
Government Medical College,
Dharashiv

ANNEXURE-II**Name of College/Institit: Government Medical college, Dharashiv [Osmanabad]****Name of the Department: ANAESTHESIA**

Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
1.	Dr Deepak M Kokane	Associate professor		
2.	Dr Joshi Vyankatesh S	Associate professor		
3.				

Summary –**Approved Staff****Approved + Non Approved Staff**

Sr. No.	Designation	Required	Available	Deficiency

Sr. No.	Designation	Required	Available	Deficiency

ANNEXURE-II

Name of College/Institit: Government Medical college, Dharashiv [Osmanabad]

Name of the

ANNEXURE-II

Name of College/Institute: Government Medical college, Dharashiv [Osmanabad]

Name of the Department: Radiodiagnosis

Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
01	Dr. Shivam [redacted]			[Signature]

ANNEXURE-IV

Page No. 100

Details of PG Recognition		MET Work shop attended in last 5 years	Photograph with Signature
Temp/Regular	Letter No. & date		
---	MUHS/ PG/E-1/ 1406/107 0/17 5.10.17	Yes	
---	MUHS/ PG/E-1/ 1208/70 /13 5.10.13	Yes	
---	MUHS/ S.V./EO/ UG/3801/ 22 17.10.22	Yes	

With Seal
T.M.V. Medical College,
Pune




ANNEXURE-IV

(Not Approved)

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Specialty.....

Work Capacity:100

University Approval Status (Yes/No)	Temporary Approval		Details of PG Recognition	MET Workshop attended in last 5 years	Photograph with Signature
	From	To			
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.....	
.....	

..... LIC Committee.



Signature of Dean with Seal

DEAN
Government Medical College,
Dharashiv










PG Identification	MET Workshop attended in last 5 years	Photo graph with Signature
Center No. & date G1303/ 833/22	Yes E1	
UHS/UG 0153/13 5199/2 016	Yes	
UHS/P G/E- 406/27 528/14 06/201 4	Yes	
UHS/UI E- 8/1/202 2020 2/20 /01	Yes	

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**ES, NASHIK ANNEXURE-IV
Approved + Not Approved)**

PG..... /.....
**SuperSpecialty.....
 A1231 Intake Capacity: 100**


Sl No	Type of Appointment Temp/ Regular/ Contractual	University Approval Status (Yes/No)	Temporary Approval		Details of PG Recognition		MET Work shop attend ed in last 5 years	Photo graph with Signat ure
			From	To	Temp/ Regular	Letter No. & date		
	Regular	YES	--	--	Regular	MUHS/PG /E-1/ 1404/ 27/3628/14 Dt 23/12/2014	Yes	
	Regular	YES	--	--	Regular	MUHS/PG /E-1/ 1403/36 /11 Dt 07/01/2011	Yes	
	Regular	Yes					No	
	Regular	No						
	Temp	NO						

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Signature of **Dean** with Seal
 Government Medical College,
 Dharashiv

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Letter No. & date	MET Work shop attended in last 5 years	Photo graph with Signat ure
MUHS/ PG/E-1/ 1404/12 38/13 dated 20/5/201 3	Yes.	
	No	
	No	

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Yes



Yes







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SHIK ANNEXURE-IV
(Approved + Not Approved)
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 er UG....

Intake Capacity:100

Total Teaching Experience in years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes/No)	Temporary Approval		Details of PG Recognition	MET Workshop attended in last 5 years	Photo graph with Signature
			From	To			
11 yr	Regular	yes	--	--	Regular/MUHS/PG/E-1/1208/2384/11	Yes	
--	Temp	---	---	---	---	---	
-----	Temp	---	---	---	---	---	
	Temp						

ive to the LIC Committee.


Signature of Dean with Seal

DEAN

**Government Medical College,
Dharashiv**

NASHIK ANNEXURE-IV
AFF (Approved + Not Approved)
NO: /..... /2023
Whether UG....

Intake Capacity: 100

Total Teaching Experience in years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes/No)	Temporary Approval		Details of PG Recognition	MET Workshop attended in last 5 years	Photograph with Signature
			From	To			
---	Temp	--	---	---			
---	Temp	---	---	---			
---	Temp	---	---	---			

Signature of Dean to the LIC Committee.

Signature of Dean with Seal

DEAN
Government Medical College,
Dharashiv

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK ANNEXURE-IV

DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)

UG Degree/ PG-Degree/ Super-Specialty) AS ON: /..... /2023

Pharmacology

Subject: Pharamacology Whether UG....

M.C., Dharashiv [Osmanabad]

College Code : AA1231

Intake Capacity:100

Sl. No.	Name	Mob. No.	E-mail ID	DOB	Whether belongs to Reserved category (if Yes, specify category)	Date of appointment at College	Teaching Experience			Total Teaching Experience in years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes/No)	Temporary Approval		Details of PG Recognition	MET Workshop attended in last 5 years	Photo with Signature
							Asst. Prof.	Asso Prof.	Prof.				From	To			
1	Ujwalaga	9420492342	ujwalaga@gmail.com	09/06/1983		15/09/2022	Asst. lect. 04 yrs 10mths Asst.Professor: 7yrs 7mths	13 yrs 05 mths 07 mths	31 yrs 04 mths	31 yrs 04 mths	Yes			Regular	Regula No. MUHS/E-1/PG/1403/2317/2011, Dt. 14/10/2011 (Yes)	Yes	
2	Sureshpa	9766623943	sureshpa@gmail.com	29/08/1984	VJINT	08/02/2023								Temp			
3	Dpriyab	9420962517	dpriyab@gmail.com	4/3/1987		23/3/2023								Temp			
4	Drmukun	8275304690	drmkum@gmail.com	25/5/1987		23/3/2023								Temp			

shall submit one hard copy & a soft copy (in Excel Format) of the list in Pen Drive to the LIC Committee.

Signature of Dean with Seal

DEAN

Government Medical College,
Dharashiv

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Temporary Approval	Details of PG Recognition	MET Workshop attended in last 5 years
From	Temp/Regular	Letter No. & date
--	Regular	MUHS/P G/E- 1/1406/2 7/4386/1 5 Dt:18/12/ 2015

Photo
with
Signature




the LIC Committee.



Signature of Dean w
DEAN
Government Medical College
Dharashiv



ANNEXURE-IV
(Approved)



Details of PG Recognition		MET Workshop attended in last 5 years	Photo graph with Signature
Temp/Regular	Letter No.& date		
Regular	No. MUHS/PG/E-1/1406/948/12 Dated 07/05/2012	Yes	
Regular	No. MUHS/PG/E1/1406/3642/2018 Dated 11/10/2018	Yes	
	No. MUHS/PG/E1/1406/1798/2021 Dated 09/07/2021	Yes	



ANNEXURE-IV

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Category	Temporary Approval	Details of PG Recognition		MET Workshop attended in last 5 years	Photograph with Signature
		From	To		
					
					

[Signature]
 Dean With Seal
 Datta Medical College,
 Dharashiv







CES, NASHIK
(Approved + Not Approved)

..... / /

Whether UG
 Take Capacity: 100

Total Working Experience in PG	Type of Appointment Regular/ Temp./ Contractual	University Approval Status (Yes/No)	Temporary Approval		Details of PG Recognition	MET Work shop attend ed in last 5 years	Photograph with Signat ure
			From	To			
Years	Regular	Yes			Regular MUHS/E- I/PG/1404/ 757/11 Date- 18/04/2011	Yes	
Months	Regular	Yes			Regular MUHS/PG E- I/1406/260 4/2022 Date- 03/08/2022	Yes	

list in Pen Drive to the LIC Committee.

Signature of Dean with Seal

DEAN
 Government Medical College,
 Dharashiv

ANNEXURE-IV

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University Approval Status (Yes/No)	Temporary Approval		Details of PG Recognition		MET Workshop attend ed in last 5 years	Photo graph with Signat ure
	From	To	Temp/ Regular	Letter No. & date		
No	-	-	-	-	No	
No	-	-	-	-	No	
No	-	-	-	-	No	

Drive to the UG Committee.

Signature of Dean with Seal

DEAN
Government Medical College,
Dharashiv

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ANNEXURE-IV

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S. No.	Name of the Candidate	Details of PG Recognition		MET Workshop attended in last 5 years	Photo graph with Signature
		Temp/Regular	Letter No. & date		
		Regular	MUHS/PG/E-I/1406/2327/2021 DATE-25/08/2021		

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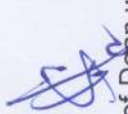
DEAN
 ent Medical College,
 Dhara Shiv

ANNEXURE-IV

ES, NASHIK
 (Approved + Not Approved)
 /..... /2023
 Whether UG....
 Intake Capacity:100

Sl. No.	Type of Appointment Regular/ Contractual	University Approval Status (Yes/No)	Temporary Approval		Details of PG Recognition Temp/Regular	MET Workshop attended in last 5 years	Photo graph with Signature
			From	To			
	temp	yes			म.आ.वि.वि./ओ.पदवी व 3801/2022 दि.17.10.22	no	

Drive to the LIC Committee.


 Signature of Dean with Seal
DEAN
 Government Medical College,
 Dharashiv

ANNEXURE-IV

UNIVERSITY OF HEALTH SCIENCES, NASHIK
 OBJECTWISE TEACHING STAFF (Approved + Not Approved)

Degree/Super-Specialty) AS ON: /..... /2023

Specialty Subject:Psychiatry Whether UG....

College Code : AA1231 Intake Capacity:100

Whether eligible to be considered (specify category)	Date of appointment at College	Teaching Experience UG(Yrs.)			Total Teaching Experience in years of PG	Type of Appointment Temp/ Regular/ Contractual	University Approval Status (Yes/No)	Temporary Approval		Details of PG Recognition	MET Work shop attend ed in last 5 years	Photo graph with Signature
		Asst. Prof.	Asso Prof.	Prof				From	To			
	16/03/2023				TEMPORARY							

Copy (in Excel Format) of the list in Pen Drive to the LIC Committee.

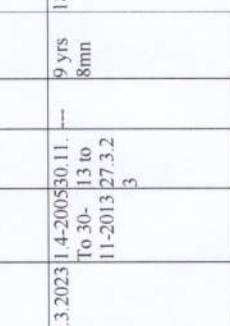
Signature of Dean with Seal

DEAN
 Government Medical College,
 Dharashiv

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ANNEXURE-IV
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
UG Degree/ PG-Degree/Super-Specialty) AS ON:/...../2023
Whether UG....
Subject: General Surgery
Intake Capacity:100
College : G.M.C., Dharashiv [Osmanabad] College Code : AA1231

Name of teacher	Designation	Mob. No.	E-mail ID	DOB	Whether belongs to Reserved category (if Yes, specify category)	Date of appointment at College	Teaching Experience			Total Teaching Experience in years of PG	Type of Appointment Temp./ Regular/ Contractual	University Approval Status (Yes/No)	Temporary Approval		Details of PG Recognition	MET Workshop attended in last 5 years	Photo graph with Signature	
							UG(Yrs.)	Asst. Prof.	Asso Prof.				From	To				Temp/ Regular
Vinayesh	Associate Professor	8805388247	examigame03.07.1976 sh34@gmail.com	03.07.1976	----	28.3.2023	1.4-2005	30.11.13 to 11-2013	27.3.23	18 yrs	9 yrs 8mn	Yes	---	---	Regular	No. MUHS/yes PG/E-1/1406/27/1344/16 Date 26.05.2016		

College shall submit one hard copy & a soft copy (in Excel Format) of the list in Pen Drive to the LIC Committee.

Signature of Dean with Seal
DEAN
Government Medical College,
Dharashiv

