

ANNEXURE- VIII

FOR FELLOWSHIP/CERTIFICATE COURSE(S) FOR A.Y. 20.23-20.24..

(As per provisions of the Maharashtra University of Health Sciences Act, 1998 and University Rule / Guidelines)

| | | |
|--------------------|---|--|
| Date of Inspection | : | |
|--------------------|---|--|

1. Name(s) of the Fellowship/Certificate Course(s)

| Sr. No. | Name of the Fellowship/ Certificate Course | Course Started from the Academic Year | Intake Capacity Sanctioned by the University | Name of Mentor and Contact Details |
|---------|--|---------------------------------------|--|--|
| 01 | Certificate course in ECG Technician Assistant | 2020-21 | 09 | Dr. J.K. Deshmukh 9422013615 |
| | | | | Dr. Madhu Bansode 9822998833 |
| | | | | Dr. Sudeep Kumar 7387105362 |
| | | | | Dr. Prakash Fadnis 8767336705 |
| | | | | Dr. Yuvaraj Badhe 9423778855 |
| | | | | Dr. Sachinkumar K. Khade 9850420210 |

(Attach separate List if necessary)

2. Year-wise number of students admitted to Fellowship/ Certificate course during last 5 years

| Sr. No. | Academic Year | Name of Fellowship / Certificate Course | Intake Capacity | No. of Students Admitted (In figure only) |
|---------|------------------|--|-----------------|---|
| 1 | A.Y. 2020 – 2021 | Certificate course in ECG Technician Assistant | 09 | Nil |
| 2 | A.Y. 2021 – 2022 | Certificate course in ECG Technician Assistant | 09 | 01 |

FOR FELLOWSHIP/CERTIFICATE COURSE(S) FOR A.Y. 20.23-20.24

(As per provisions of the Maharashtra University of Health Sciences Act, 1998 and University Rule / Guidelines)

| | | |
|--------------------|---|--|
| Date of Inspection | : | |
|--------------------|---|--|

1. Name(s) of the Fellowship/Certificate Course(s)

| Sr. No. | Name of the Fellowship/Certificate Course | Course Started from the Academic Year | Intake Capacity Sanctioned by the University | Name of Mentor and Contact Details |
|---------|---|---------------------------------------|--|--|
| 01 | Fellowship course in Neonatology | 2017-2018 | 02 | 1) Dr. Vijay Bhavari 9822109299 2) Dr. Arun Zaveri 9890885780 3) Dr. Eric Dsouza 9860436074 4) Dr. Dilip Sankapl 9763131073 |

(Attach separate List if necessary)

2. Year-wise number of students admitted to Fellowship/ Certificate course during last 5 years

| Sr. No. | Academic Year | Name of Fellowship / Certificate Course | Intake Capacity | No. of Students Admitted (In figure only) |
|---------|-----------------------|---|-----------------|---|
| 1 | A.Y. 20..... - 20.... | Fellowship course in Neonatology | 02 | - |
| 2 | A.Y. 20..... - 20.... | Fellowship course in Neonatology | 02 | - |
| 3 | A.Y. 20..... - 20.... | Fellowship course in Neonatology | 02 | - |
| 4 | A.Y. 20..... - 20.... | Fellowship course in Neonatology | 02 | - |
| 5 | A.Y. 20..... - 20.... | Fellowship course in Neonatology | 02 | - |

FOR FELLOWSHIP/CERTIFICATE COURSE(S) FOR A.Y. 2022-2023

(As per provisions of the Maharashtra University of Health Sciences Act, 1998 and University Rule / Guidelines)

| | | |
|---------------------------|---|--|
| Date of Inspection | : | |
|---------------------------|---|--|

1. Name(s) of the Fellowship/Certificate Course(s)

| Sr. No. | Name of the Fellowship/ Certificate Course | Course Started from the Academic Year | Intake Capacity Sanctioned by the University | Name of Mentor and Contact Details |
|----------------|---|--|---|--|
| 01 | Fellowship Course in Minimal Access Surgery | 2017 | 02 | 1. Dr. Sachin Naik Mobile No-9822409640 2. Dr. Tushar Khachane Mobile No - 9881726634 3. Dr. Sandesh Gawade Mobile No - 9890950097 4. Dr. Samadhan Kshirsagar Mobile No - 9823336680 5. Dr. Kalpesh Patil Mobile No - 9920147567 |
| 02 | Fellowship course in Head & Neck Onco surgery | 2017 | 02 | 1. Dr. Sachin Naik Mobile No-9822409640 2. Dr. Jaipalreddy R. Pogal Mobile No - 8237348509 3. Dr. Nikhil Phadke Mobile No - 7387995127 4. Dr. Tushar Khachane Mobile No - 9881726634 5. Dr. Sandesh Gawade Mobile No - 9890950097 |
| 03 | Certificate course in OT Technician | 2021 | 09 | 1. Dr. Sachin Naik Mobile No-9822409640 2. Dr. R. N. Bharadwaj Mobile no- 9371035335 3. Dr. Nikhil Phadke Mobile No - 7387995127 4. Dr. Tushar Khachane Mobile No - 9881726634 5. Dr. Sandesh Gawade Mobile No - 9890950097 |

(Attach separate List if necessary)

2. Year-wise number of students admitted to Fellowship/ Certificate course during last 5 years

| Sr. No. | Academic Year | Name of Fellowship /Certificate Course | Intake Capacity | No. of Students Admitted (In figure only) |
|---------|-------------------|--|-----------------|---|
| 1 | A.Y. 2021 – 2022 | 1. Fellowship Course in Minimal Access Surgery | 2 | 0 |
| | | 2. Fellowship course in Head & Neck Onco surgery | 2 | 0 |
| | | 3. Certificate course in OT Technician | 9 | 1 |
| 2 | A.Y. 2020 – 2021 | 1. Fellowship Course in Minimal Access Surgery | 2 | 0 |
| | | 2. Fellowship course in Head & Neck Onco surgery | 2 | 0 |
| 3 | A.Y. 2019 – 2020 | 1. Fellowship Course in Minimal Access Surgery | 2 | 1 |
| | | 2. Fellowship course in Head & Neck Onco surgery | 2 | 1 |
| 4 | A.Y. 2018 – 2019 | 1. Fellowship Course in Minimal Access Surgery | 2 | 0 |
| | | 2. Fellowship course in Head & Neck Onco surgery | 2 | 0 |
| 5 | A.Y. 2017. – 2018 | 1. Fellowship Course in Minimal Access Surgery | 2 | 2 |
| | | 2. Fellowship course in Head & Neck Onco surgery | 2 | 1 |

ANNEXURE- VIII

FOR FELLOWSHIP/CERTIFICATE COURSE(S) FOR A.Y. 20.23.-20.24.

(As per provisions of the Maharashtra University of Health Sciences Act, 1998 and University Rule / Guidelines)

| | | |
|--------------------|---|--|
| Date of Inspection | : | |
|--------------------|---|--|

1. Name(s) of the Fellowship/Certificate Course(s)

| Sr. No. | Name of the Fellowship/ Certificate Course | Course Started from the Academic Year | Intake Capacity Sanctioned by the University | Name of Mentor and Contact Details |
|---------|--|---------------------------------------|--|------------------------------------|
| 01 | Fellowship course in Regional Anaesthesia | 2017-2018 | 02 | Dr. Shilpa Y. Gurav 9850303375 |
| | | | | Dr. Yuvraj Kumbhar 9850422933 |
| | | | | Dr. Anita Kulkani 9689652384 |
| | | | | Dr. Leena Paulose 9604865712 |

(Attach separate List if necessary)

2. Year-wise number of students admitted to Fellowship/ Certificate course during last 5 years

| Sr. No. | Academic Year | Name of Fellowship / Certificate Course | Intake Capacity | No. of Students Admitted (In figure only) |
|---------|-----------------------|---|-----------------|---|
| 1 | A.Y. 20..... – 20.... | Fellowship course in Regional Anaesthesia | 02 | Nil |
| 2 | A.Y. 20..... – 20.... | Fellowship course in Regional Anaesthesia | 02 | Nil |
| 3 | A.Y. 20..... – 20.... | Fellowship course in Regional Anaesthesia | 02 | Nil |
| 4 | A.Y. 20..... – 20.... | Fellowship course in Regional Anaesthesia | 02 | Nil |
| 5 | A.Y. 20..... – 20.... | Fellowship course in Regional Anaesthesia | 02 | Nil |

FOR FELLOWSHIP/CERTIFICATE COURSE(S) FOR A.Y. 2022-2023

(As per provisions of the Maharashtra University of Health Sciences Act, 1998 and University Rule / Guidelines)

| | | |
|--------------------|---|--|
| Date of Inspection | : | |
|--------------------|---|--|

1. Name(s) of the Fellowship/Certificate Course(s)

| Sr. No. | Name of the Fellowship/ Certificate Course | Course Started from the Academic Year | Intake Capacity Sanctioned by the University | Name of Mentor and Contact Details |
|---------|--|---------------------------------------|--|------------------------------------|
| 01 | High Risk Obstetrics | 2017 | 02 | Attached |

(Attach separate List if necessary)

| Sr. No. | Name of Mentor | Contact Details Mob. Number |
|---------|---------------------------|--------------------------------|
| 1 | Dr. Vaishali Korde | 9372478118 |
| 2 | Dr. Sushma Sharma | 9822445537 |
| 3 | Dr. Dattatraya Gopalghare | 9323650352 |
| 4 | Dr. Shashikant Pawar | 9822046945 |
| 5 | Dr. Sachin Vedpathak | 7350891021 |
| 6 | Dr. Jaya Barla | 7722001091 |
| 7 | Dr. Meenakshi Surve | 99754779992 |
| 8 | Dr. Priya Bagade | 8425846673 |
| 9 | Dr. Priya Karmani | 8390597548 |
| 10 | Dr. Pranali Ghuge | 9730714871 |

2. Year-wise number of students admitted to Fellowship/ Certificate course during last 5 years

| Sr. No. | Academic Year | Name of Fellowship / Certificate Course | Intake Capacity | No. of Students Admitted (In figure only) |
|---------|------------------|---|-----------------|--|
| 1 | A.Y. 2021 – 2022 | High Risk Obstetrics | 02 | 0 |
| 2 | A.Y. 2020 – 2021 | High Risk Obstetrics | 02 | 0 |
| 3 | A.Y. 2019 – 2020 | High Risk Obstetrics | 02 | 0 |
| 4 | A.Y. 2018 – 2019 | High Risk Obstetrics | 02 | 0 |
| 5 | A.Y. 2017– 2018 | High Risk Obstetrics | 02 | 0 |

FOR FELLOWSHIP/CERTIFICATE COURSE(S) FOR A.Y.2023-2024

(AS per provision of the Maharashtra University of Health Sciences Act, 1998 and University Rule/Guidelines)

| | | |
|--------------------|---|--|
| Date of Inspection | : | |
|--------------------|---|--|

1. Name (s) of the Fellowship /Certificate Course(s)

| Sr.No | Name of the Fellowship/Certificate Course | Course Started from the Academic Year | Intake Capacity Sanctioned by the University | Name of Mentor and Contact Details |
|-------|--|---------------------------------------|--|--------------------------------------|
| 01 | Certificate Course In Radiography Technology | 2020-21 | 9 | Dr.Santosh Madhav Sabnis- 9822049929 |
| 02 | Certificate Course In Radiography Technology | 2021-2022 | 9 | Dr.Santosh Madhav Sabnis- 9822049929 |

(Attach separate List if necessary)

2. Year-wise number of students admitted to Fellowship/ Certificate Course during last 5 Years

| Sr. No. | Academic Year | Name of Fellowship /Certificate Course | Intake Capacity | No.of Student Admitted (In figure only) |
|---------|----------------|--|-----------------|---|
| 1 | A.Y.2020- 2021 | Certificate Course In Radiography Technology | 9 | |
| 2 | A.Y.2021- 2022 | Certificate Course In Radiography Technology | 9 | 01 |