

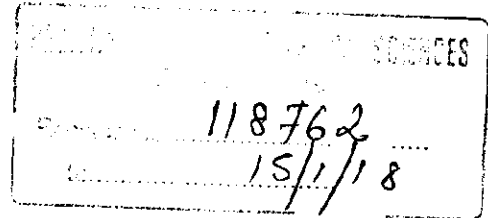
DEPARTMENT OF ORTHOPAEDICS
REGIONAL INSTITUTE OF MEDICAL SCIENCES
IMPHAL

No.48/Ortho/MTS/RIMS-2016

Imphal, the 15 January, 2018

To

The Director,
Regional Institute of Medical Sciences,
Imphal.



Subject: Submission of Details of teachers for the month of October,
November and December 2017.


Sir,

I have the honour to submit the details of teachers in our Department duly filled up in the prescribed MCI declaration form for your kind perusal.

Thanking you,



Yours faithfully,



(Dr. S. Nongthon Singh)
Professor and Head,
Department of Orthopaedics,
RIMS, Imphal.

Dr. S. Nongthon Singh
Professor and Head
Department of Orthopaedics
R.I.M.S. Hospital, Imphal,
Manipur



Forms for submitting various data by the HODs in compliance of the directions of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Promotion to the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
Dr. V. Mangalam	01.03.56	Pr. Lectr Ortho			2516

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty
1 X	Oct	12-10	1 PM	P&VD	Dr. S. N. Singh
		26-10	1 PM	Ortho/MS/OSD	
			4 PM		

M. S. S.

C. Monthly Teaching Report for the month Oct, 2016

Semester	Date	Time	Topic	Faculty	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class
R	12.10.2016	1:00 PM	DIVID data processing	S.N. Sona	A	N/A	150	130

D. Cumulative Report for Teaching for the month 2016

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any
R	Oct	2	2	X	X

[Signature]

F. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
Oct.	Dr. S. M. Jaiswal	680	80	18	X	26	22	130

F. Infrastructure

List the department specific infrastructure as per MCI guidelines

Sl. No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2016	Remark
		X	
		X	

M. K. Jaiswal

Formats for submitting various data by the HODs in compliance of the directives of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Promotion to the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
Dr. S. N. Singh	01.03.56	Prin. B. G. O. A. Officer, Rims, Bhubaneswar	2	Y	7516

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty
IX	Nov	9	1 PM	Ortho Awareness	Dr. S. N. Singh
	Nov	16	"	G. S. G.	
		22	"	Ewing	
		29	"	Jointly present for the 1 st day	

(Signature)

C. Monthly Teaching Report for the month..... NOV, 2016

D. Cumulative Report for Teaching for the month, 2016

Semester	Date	Time	Topic	Quality	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class
1X	9	12m	Notes preparation		A		150	130
	16		G.C.P.					
	22		Writing papers					
	29		Smart lessons					
Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any			
1X	NOV	4	4	X	X			

Handwritten signature

F. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
Nov	DR. S.N. Singh	268	28	20	*	28	26	140

F. Infrastructure

List the department specific infrastructure as per MCI guidelines

Sl. No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2016	Remark
		X	
		X	*

MSG

Formats for submitting various data by the HODs in compliance of the directions of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB (DD/MM/YYYY)	Designation	Date of Joining/ Relocation to the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
Dr. S. Nongthun	01-03-56	Prof & HOD D.H.M.C.		X	2516

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty
1 st	Dec.		1 st PM	Maclean	Dr. S. N. Goud

Handwritten signature

C. Monthly Teaching Report for the month December 2016

Semester	Date	Time	Topic	Faculty	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class
1 st X		10 ^{AM}	No class		*	Admission	*	*

D. Cumulative Report for Teaching for the month , 2016

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any
1 st X	Dec	No class	*	^	Students are preparing for examinations & did not turn up as course was completed.

Preparing for examinations & did not turn up as course was completed.
Alivel

E. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
Nov.	Dr. S. Nopptam	640	20	16	X	24	20	120

F. Infrastructure

List the department specific infrastructure as per MCI guidelines

Sl. No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2016	Remark
		X	
		Y	Y

M. N. S.

Forms for submitting various data by the HODs in compliance of the directions of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Promotion to the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
Dr. Arun Kumar Sury	01/3/1952	Asst. Prof.		15.8852 (MCI) → PG	12114 (Bitol) → MBBS

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty
					Dr. Arun

C. Monthly Teaching Report for the month... *October, 2017*

Semester	Date	Time	Topic	Faculty	Class conducted (A) or not (B)	If cancelled, reason thereof	No. of students on roll	No. of students who actually attended the class

D. Cumulative Report for Teaching for the month , 2016

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any

E. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
		125	16	14	N/A	8	6 major	

F. Infrastructure

List the department specific infrastructure as per MCI guidelines

Sl. No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2016	Remark

Forms for submitting various data by the HODs in compliance of the directions of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Relief to the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
Dr. Anand Kumar Singh	01/3/82	Professor	28/11/17	2	12114 (Bihar) MBBS 15-16855 (MCI) B.S.

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty

C. Monthly Teaching Report for the month....., 2016

November

Semester	Date	Time	Topic	Quality	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class

D. Cumulative Report for Teaching for the month 2016

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any

E. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
November	Dr. Shankaran Srin	65	10		N/A			

Infrastructure

if the department specific infrastructure as per MCI guidelines

No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2016	Remark

Forwards for submitting various data by the HODs in compliance of the directions of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Relief from the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
Dr. Dr. Anu S Kumar S	01/03/1952	Professor	29/1/17		12114 (Bihar) 4285 15-16856 (MCI) PG

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty
					<i>[Signature]</i>

C. Monthly Teaching Report for the month *December*, 201*7*

Semester	Date	Time	Topic	Availability	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class

D. Cumulative Report for Teaching for the month 2016

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any

E. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
December 2017	Dr. A. Anurag Kumar	60	10		Nil			

Infrastructure

of the department specific infrastructure as per MCI guidelines

No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2016	Remark

Formats for submitting various data by the HODs in compliance of the directions of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Promotion to the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
Dr A Mahendra Singh	15-03-52	Professor	28-04-2017	✓	0081 (M.M.C)

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty
V & VI	Octo.	3, 10, 17	9-12	Travel	Dr A Mahendra Singh
VII	2017	24-03	Noon	deformities of limbs	

C. Monthly Teaching Report for the month Octo., 2019

Semester	Date	Time	Topic	Faculty	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class
V	3, 10, 9	9-12	Trachema & deformity	A. Maheshwari	A	—	10	10
IX	17, 24, 31	noon		Singh			12	12

D. Cumulative Report for Teaching for the month Octo., 2019

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any
IX	Octo. 17	—	—	—	—

E. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
Oct-17	Dr A Makendra Singh	750	20	18	NIL	10	12	72

F. Infrastructure

List the department specific infrastructure as per MCI guidelines

Sl. No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2017	Remark
I	11 TV Camera in Ortho Main OT & emergency O.T.	Department on 31 st October, 2017	
II	X-ray Microscope for knee in HANDS	ONE separate demonstration room attached to Main Ortho ward	All are functioning
III	Arthroscopy set in O.T.		

Handwritten signature and date: 27/10/17

Formats for submitting various data by the HODs in compliance of the directives of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Promotion to the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
Dr A Mahendra Singh	15-03-52	Professor of Orthopedics	28-04-2017	/	DD81 (Manipal Medical Council)

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty

C. Monthly Teaching Report for the month *Nov*....., 201*9*

Semester	Date	Time	Topic	Locality	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class

D. Cumulative Report for Teaching for the month *Nov*....., 201*9*

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any

E. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
Nov. 17	Dr A Mahendra Singh	150	15	14	NIL	8	12	105

F. Infrastructure

List the department specific infrastructure as per MCI guidelines

Sl. No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2017	Remark
1.	ERTV		
2.	Hysteroscopy	Aluminium Room	
3.	Arthroscopy	in Ortho/ward	

Handwritten signature

Forms for submitting various data by the HODs in compliance of the directions of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Promotion to the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
Dr A Mahendran Singh	15-03-52	Professor of Orthopaedics	28-04-2017	/	0081 (Mangpur Medical Council)

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty

Monthly Teaching Report for the month December, 2016

Semester	Date	Time	Topic	Roll No.	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class

(Cumulative Report for Teaching for the month 2016

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any

E. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
Dec-2017	Dr A Mahindya Singh	150	15	14	NIL	12	14	105

Infrastructure

at the department specific infrastructure as per MCI guidelines

No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2017	Remark
1.	IITV	Department on 31 st October, 2017	
2.	Arthroscopy	Demonstration Room	
3.	Hemiarthroplasty	with the use of robot arm	

4

Formats for submitting various data by the HODs in compliance of the directives of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Promotion to the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
SHEKH NAZIMUDDIN CHTSHI	01.02.1962	PROF	01.08.2003	/	4975

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty
6 th	OCT	6.10.17	1-2 Pm	GOVT	Prof. ELIETH
"	"	13.10.17	"	ACTOR I	"
"	"	20.10.17	"	ACTOR TREATMENT	"

[Handwritten signature]

[Handwritten mark]

C. Monthly Teaching Report for the month Oct, 2017

Semester	Date	Time	Topic	Faculty	Class conducted (A) or not (B)	If cancelled, reason thereof	No. of students on roll	No. of students who actually attended the class
B/E	6/10	(1-2) Pm	GOUT		A		16	11
"	13/10	"	FRACTURE I		A	/	16	8
"	20/10	"	FRACTURE TREATMENT		A		16	9

D. Cumulative Report for Teaching for the month 2016

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any
B/E	OCT	3	3	7, 10, 11	x

[Handwritten signature]

4. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
OCT	POD CHSHTI	249	18	13	0	22	102	502
"								
"								

3 months

F. Infrastructure

List the department specific infrastructure as per MCI guidelines

Sl. No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2016	Remark
1.	Image Intensifier (C-Arm)	same	
2.	Portable X-ray		

S. Srinivas

Forms for submitting various data by the HODs in compliance of the directions of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Promotion to the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
DR. S. NAZIRUDDIN CHETTIYER	01.02.1942	Professor	01.02.2013	1	4995

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty
6 th	NDV			Classes over topics	

[Handwritten signature]

C. Monthly Teaching Report for the month Nov/Vincent 2016

Semester	Date	Time	Topic	Priority	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class
6th	1	1	Topic covered					

D. Cumulative Report for Teaching for the month Nov, 2016

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any
6th	Nov.				
		110 classes	Topics covered		

[Handwritten signature]

F. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
	B.R. S. NAZKIN OPD OPD	556	23	16	-	19	252	546
	<i>Handwritten signature</i>							

F. Infrastructure

List the department specific infrastructure as per MCI guidelines

Sl. No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2016	Remark
	2 - Army in OT.		
	Portable X-ray in ward	/	not

Handwritten signature

Formats for submitting various data by the HODs in compliance of the directions of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DDMM/YYYY	Designation	Date of Joining/ Promotion to the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
DR. NAZIMUDDIN CHISHTI	01.02.1968	Professor	01.02.2013	/	4975

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty
64	Dec	class	am	Topic 12	/

Signature

C. Monthly Teaching Report for the month..... Dec 2016

Semester	Date	Time	Topic	Feasibility	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class
6th	1	1						
			Topic cancelled					

D. Cumulative Report for Teaching for the month 2016

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any
6th	Dec		no classes	Topic cancelled	

no classes

E. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
Dec	S. MAZUMBAR (ASST)	417	19	16	21	10	222	322

S. Mazumbar

Infrastructure

List the department specific infrastructure as per MCI guidelines

No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2016	Remark
	2-From CT		
	Private X-ray ward		not

S. Mazumbar

Formats for submitting various data by the HODs in compliance of the directions of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Relocation to the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
SANDIB S. WAIKHAM.	1/02/1968	Associate Prof.	01/02/2013	-	09-7947 (MCI)

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty
VIII	Oct, 17	3/10/17	8-9am	5 th year Secondary	D. Sanyal S. Waikham.
		12/10/17	8-9am	Amputation	A. Sanyal S. Waikham.
		24/10/17	"	Old case, H.I.	"
		31/10/17	"	Old question paper discussion.	"

Sanyal

C. Monthly Teaching Report for the month....., 2016

Semester	Date	Time	Topic	Quality	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class
VIII	31/10/17	8-9	Special assembly. School's		A	-	20	10
	21/10/17	8-9	Announcement PPRP. Newton.		A	-	20	10
	24/10/17	8-9	QA for H.P. Post preparation.		A	-	20	9
	31/10/17	8-9	Old question paper disam.		A		20	11

D. Cumulative Report for Teaching for the month. October, 2017

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any
VIII	October	4 (Four)	4 (Four)		

Institute →

E. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Facility	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
October	Sreeya's Workshop	700	92	20	-	13	90	-

Infrastructure

List the department specific infrastructure as per MCI guidelines

No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2016	Remark

Sharma

Forms for submitting various data by the HODs in compliance of the directions of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Relief to the post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
Sanjib S. Wadhvani	11/02/1968	Associate Prof.	01/02/2013		09-7947 (MCI)

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty
VII	DEC NOV.	07/11/12	8-9am.	Misc Small	Sanjib S. Wadhvani
		14/11/12	8-9am	RA, and	Sanjib S. Wadhvani
		21/11/12	8-9am	Said, Anil	Sanjib S. Wadhvani
		28/11/12	8-9am	Practical.	Sanjib S. Wadhvani

Sanjib

C. Monthly Teaching Report for the month, 2016

Semester	Date	Time	Topic	Faculty	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class
VII	28/11/12	8-9	Misc. small topics	Biswas	A		20	9
	14/11/12	8-9	RA, adj. exam (Sci. System)	"	A		20	20
	21/11/12	8-9	Scrub, Antibiotic sensitivity.	"	A		20	20
	29/11/12	8-9	Recell. osteoporosis.	"	D.		20	20

D. Cumulative Report for Teaching for the month, 2016

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any

Sharma

E. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
NOV.	Sanjiv S. Arshin	550	18	20	-	15	70	-

Infrastructure

List the department specific infrastructure as per MCI guidelines

No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2016	Remark

Arshin

C. Monthly Teaching Report for the month....., 2016

Semester	Date	Time	Topic	Faculty	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class
Win	Dec	5/12/12	AVN. Penton. XI & Tenth	Course 6 SW	A	-	20	20
		12/12	Misc. Topics	Course 6 SW	A	-	20	20

D. Cumulative Report for Teaching for the month , 2016

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any

Formats for submitting various data by the HODs in compliance of the directions of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Promotion to the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
SANTIB S. KRAIKHOM	1/02/1968	Associate Prof.	01/02/2013	-	09-7947 (MD)

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty
VIII	Dec.	5/12/17	8-9 am	AVN, postns	Dr Santib S. Kraikhom
		12/12/12	8-9 am	MSc. Toxic	

E. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
Dec	Sanyukta S. Sawant	786	24	22	-	20	70	-

Infrastructure

List the department specific infrastructure as per MCI guidelines

No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2016	Remark

Forms for submitting various data by the HODs in compliance of the directions of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DDMMYYYY	Designation	Date of Joining/ Relief from the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
Dr. ROEL DANIGSHONG	16-1-78	ASST. PROFESSOR	1-2-15	- NA -	4974 (MS)

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty

Dr. Danigshong

Forms for submitting various data by the HODs in compliance of the directions of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Promotion to the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
Dr. ROEL LAMIC SIBINAY	16.1.73	Asst. Professor	1.2.15	— NA —	4974 (MS)

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty

Dr. Anand K. S. P.

C. Monthly Teaching Report for the month....., 2016

Semester	Date	Time	Topic	Availability	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class

D. Cumulative Report for Teaching for the month 2016

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any

Dr. Anand K. S. P.

E. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
October 2017	Dr. ROEL VANSHARU	720	22	17	N/A	15	13	400

Infrastructure

List the department specific infrastructure as per MCI guidelines

No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2016	Remark
	C Arm X-ray (O.T).		
	Portable X-ray (ward)		

Dr. Pradeep

C. Monthly Teaching Report for the month....., 2016

Semester	Date	Time	Topic	Faculty	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class

D. Cumulative Report for Teaching for the month 2016

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any

Dr. ...

E. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
November 2019	Dr. R. Anand Shrivastava	700	20	17	Nil	16	17	380

Infrastructure

List the department specific infrastructure as per MCI guidelines

No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2016	Remark
	C-Mm X-ray (O.T)		
	Portable X-ray (Cath)		

Dr. Anand Shrivastava

Formats for submitting various data by the HODs in compliance of the directions of the Supreme Court Mandated Oversight Committee

A. Faculty Data

Name	DOB DD/MM/YYYY	Designation	Date of Joining/ Relief from the present post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
Dr. Edel Carol Strong	16.1.73	Asst. Professor	1.2.15	NA	4974 (MS)

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every month before the 1st day of every month.

Semester	Month	Date	Time	Topic	Faculty

Dr. Edel Carol Strong

C. Monthly Teaching Report for the month....., 2016

Semester	Date	Time	Topic	Quality	Class conducted (A) or not (B)	If cancelled, reason thereof.	No. of students on roll	No. of students who actually attended the class

D. Cumulative Report for Teaching for the month 2016

Semester	Month	Total No. of theory classes	Total No. of classes actually done	Roll numbers of the frequently absent students (> 2 times)	Reason(s) for cancellation of classes, if any

Dr. Anand K. S. S.

E. Clinical Material

Monthly census for Clinical Subjects (to be filled up wherever applicable)

Month	Name of the Faculty	Number of patients seen in the OPD by the faculty	Number of patients admitted in the ward under the faculty	Number of Discharges	Number of Deaths	Number of Surgeries	Number of procedures	Number of investigations
December	Mr. ROEL LAOCSORAY	527	17	15	NA	14	17	350

Infrastructure

of the department specific infrastructure as per MCI guidelines

No.	Infrastructure as per MCI guidelines	Infrastructure available in the Department on 31 st October, 2016	Remark
	C-arm X-ray (O.T.),		
	Portable X-ray (ward)		

Dr. [Signature]