DEPARTMENT OF ORTHOPAEDICS REGIONAL INSTITUTE OF MEDICAL SCIENCES <u>IMPHAL</u>

No. 48/Ortho/MTS/RIMS-2016

Imphal, the 18th February, 2017

To

The Director, Regional Institute of Medical Sciences, Imphal. Subject: Submission of Details of teachers.

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,

(Dr. S

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

Yours faithfully,

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

Dean Academic

20/2/17

21/21/7.

DEPARTMENT OF ORTHOPAEDICS REGIONAL INSTITUTE OF MEDICAL SCIENCES IMPHAL

A. FACULTY DATTA

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13777(AMC)	Z	2-3-2005/1.2.2015	Assistant Professor	16.1.1973	6. Dr. Roel Langshong	
09-7947(MCI)-PG			(Time Scale)		0	
10724(MCI)-MBBS	Z	3-3-2000 /01-03-2013	Associate Professor	01-02-1968	5. Dr. Sanjib Singh Waikhom	_
4975(ACMR)	Z	11-11-1986 /01-02-2013	Professor	1.2.1962	4. Prof. Sheikh Nazimuddin Chishti	
0081(MMC)	N	16-11-1976 /01-02-2005	Professor	15-03-1952	Prof. A. Mahendra Singh	_
7516(AMC)	N.	24th July, 1979/18-3-2006	Professor & HOD	1.3.1956	2. Prof. S. Nongthon Singh	
12114(BCMR)	Ni	6 -12-1978/(26-8-14 to 26-4-2015) and (27-4-2016 to till date)	Director, RIMS	1-3-1952	1. Prof. Ch. Arun Kumar Singh	
Registration no.(for postgraduate course	resignation/Transfer	the present post		DD/MM/YYYY		
Indian Medical	Date of	Date of joining/promotion to	Designation	DOB	Name	

Dated:The 18th February, 2017

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

Dr. S. Nongthon Single Professor and Head Department of Orthopaedics R I M S Hospital, Imc^{N-91}

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

A. Faculty Data

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n 01.03.195	DOB
90th A lang 2	Designation
1. 5. 2006	p of Joining/ p notion to the p nt post
NH)	Date of resignation/transfer
25/67/1978	Indian Medical Registration No. (for postgraduate courses)

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

Semester Month Date Time Lopic No class examination		
Month Date Time	Jan	of the example of the state of
Month Date Time	Carl	No class
Manth Date Time		
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Š	Semester) Cumulative Report for Teaching for the month	R	Semester Date	C. Monthly Teaching Report for the month
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	o. of t	for the month	du to their usam-		re month
	The state of the s			alty	
	Total No. of classes actually done			Class conducted (A) or not (B)	
	Roll numbers of the frequently absent students (> 2 times)			If cancelled, reason thereof.	
			×	No. of students on roll	
	Reason(s) for cancellation of classes, if any			No. of students who actually attended the class	

E. Clinical Material

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

	C	Yan	Milan
•		Tag. S. Nong Thom	Name of the Facility
		620	patients seen in the OPD by the faculty
	500h 00 -18	DOWNOO.CO	Number of patients admitted in the ward under the faculty
	16	./ 8	Number of Discharges
	100	131	Number of Deaths
		26	Number of Surgeries
	000	5	Number of procedures
			Number of investigations

F. Infrastructure

I ist the department specific infrastructure as per MCI guidelines

	intrastructure as per MCI guidelines
	Department on 31st October, 2016
	Remark

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

A. Faculty Data

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tion/transfer	resignat	provion to the	Designation	DOB	Name

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

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Trof. A Makin			
Faculty	Topic	Time	Date

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Semester

Month

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	mester Month Total No. of	Semester Date Time Topic Semester Date Time Topic
	Total No. of theory classes	both
		Sings.
	Total No. of classes actually done	Class conducted (A) or not (B)
	Roll numbers of the frequently absent students (> 2 times)	If cancelled, reason thereof. Thereof. Same to the s
		No. of students on roll
	Reason(s) for cancellation of classes, if any	No of students who actually attended the class

E Clinical Material

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

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0	Singh	Junit you to maninara	Name of the Faculty
	,	146	patients seen in the OPD by the faculty
		13	Number of patients admitted in the ward under the faculty
		10	Number of Discharges
	100	NIC	Number of Deaths
	100	0	Number of Surgeries
	1	17	Number of procedures
	17	1/4	Number of investigations

F. Infrastructure

List the department specific infrastructure as per MCI guidelines

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CALLO WARD	n wow	Sam		Department on 31st October, 2016
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Formats for submitting various data by the HODs in compliance of the diverges of the Supreme Court Mandated Oversight Committee

A. Faculty Data

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		PROFESSOR	Designation
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		PROFESSOR	Designation
		Elde 1019/ 9861 Wall	Date of Joining/ production to the present post
		X 8/30	Date of resignation/transfer
matted Regulation	Allema Consect of-	4975	Indian Medical Registration No. (for postgraduate courses)

B. Monthly Schedule of Teaching (Theory Classes) to be submitted every as 2th before the 1st day of every month.

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Month JAMes

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Time

Topic

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Roll numbers of the frequently absent students (> 2 times)			to exe believes		If cancelled, reason thereof.
Reason(s) for cancellation of classes, if any			1		No. of students
100				attended the	No. of students who

E Clinical Material

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

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	Chicago Chicago	JAMENY DR. S. MAZIMODINI MICHAEL	Anne of the Facility
	24.0	0	Number of patients seen in the OPD by the faculty
	М,	raculty	Number of patients admitted in the ward under the
	14		Number of Discharges
	ķ		Number of Deaths
	41		Number of Surgeries
	30		Number of procedures
01.0	3		Number of investigation

F. Infrastructure

I ist the department specific infrastructure as per MCI guidelines

Infrastructure available in the Department on 31st October, 2	2. Inequintrasifies	i hoterbooking wild	vo. Infrastructure as per MCI guidelines
1.0	bier .	Depart	idelines Infrastructure available in the

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

A. Faculty Data

09- 7947 (MCL	N-1	101/03/2013	· gaed	Associali	01/02/1968	SANJIBSINGHLIMINGHOM 01/02/1968 Associate port
Indian Medical Registration No. (for postgraduate courses)	Date of resignation/transfer	p of Joining/ p otion to the p nt post		Designation	DDMMYYYY	Name

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

Semester

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Saux	and the war when	ulty	

). Cumulative Report for Teaching for the month Semester Date Time Topic C. Monthly Teaching Report for the month. January, 2016 ξj 6-8 411/118 Algerra Bone Tumon. 2016 X Lay 6 worker my bwola. (A) or not (B) Class If cancelled, reason conducted thereof. BO all assemt No. of on roll students 00 00 attended the actually class students who No. of 150 78

2 (Two)	Total No. of theory classes
(2007)	Total No. of classes actually done
1	Roll numbers of the frequently absent students (> 2 times)
All Edwards wash	Reason(s) for cancellation of classes, if any

emester

Month

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January.

E. Clinical Material

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

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			0	AGE Sand Show South John	Name of the Faculty
			190	187	Number of patients seen in the OPD by the faculty
			X	900	Number of patients admitted in the ward under the faculty
			14	5	Number of Discharges
			150		Number of Deaths
			0		Number of Surgeries
Steamed in	Cart +	-	60		Number of procedures
			1		Number of investigations

F. Infrastructure

l ist the department specific infrastructure as per MCI guidelines

		intrastructure as per MCI guidelines
		Department on 31st October, 2016
		Remark

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

A. Faculty Data

Name	DOB	Designation	D of Joining/ p otjon to the p ont post	Date of resignation/transfer	Indian Medical Registration No. (for postgraduate courses)
DR. ROEL LANGSHONES	16.1.73	ASSI. PROFESSOR	1.2.15	- NA -	とながら!
					1001/000

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

Semester

	Month Date	
	Time	
	Topic	
	ecte	
	Faculty	

Semester Month Total No. of theory classes actually done) Cumulative Report for Teaching for the month, 2016		(B)		Semester Date Time Topic
Roll numbers of the frequently absent students (> 2 times)				thereof.	If annually manage
Reason(s) for cancellation of classes, if any				students su	
for n of nny			attended the	students who actually	

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E Clinical Material

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

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		Law to law to	January Con Knowledge Hou	and the Lacilly
		- ()	1000	patients seen in the OPD by the faculty
		6		Number of patients admitted in the ward under the faculty
		14		Number of Discharges
		0		Number of Deaths
		00		Number of Surgeries
	1	7		Number of procedures
	(-60		Number of investigations

F. Infrastructure

List the department specific infrastructure as per MCI guidelines

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

Br. Roselfalla