

Name of the College: Rajiv Gandhi Medical College

Phone/Mobile No.: 022-25372774

Name of the Subject: Physiology

Sr. No.	College Name	Subject	Full name of the Teacher (First/Middle/Last)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG passing	Approval MUHS (Yes/No)	If Yes MUHS Approval Letter & Date	Aadhar No.	Pan No.	Date of Birth (Age in years)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	Rajiv Gandhi Medical College	PHYSIOLOGY	Dr. Swapnali Saurabh Kadam	Professor & HOD	01/09/1998	MBBS 1995	MD Physiology 2004	21 years 7 months	Yes	MUHS/UG/E-1/53/1109/2015 dt 20/10/2015	514656253604	AOOPK2138M	24/09/1972	faimerssk1@gmail.com	9820959095	No
2	Rajiv Gandhi Medical College	PHYSIOLOGY	Dr. Geeta Rohit Hegde	Associate Professor (Contractual)	20/07/2024	MBBS 2007	MD Physiology 2011	13 years 10 months	Yes	MUHS/UG/E-1/1102/2163/2015 dt 05/06/2015	294286179373	ALOPJ792B	11/01/1984	drgeetargme@gmail.com	8169043600	No



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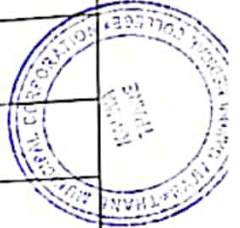
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College: Rajiv Gandhi Medical College

Phone/Mobile No.:

Name of the Subject: BIOCHEMISTRY

Sr. No.	College Name	Subject	Full name of the Teacher (First/Middle/Last)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in years)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	Rajiv Gandhi Medical College	Biochemistry	Dr. Rojekar Mohit Vijay	Associate Professor & Head	01-09-2014	MIBBS 2007	MID Biochemistry 2014	11 Yr	Yes	MUHS/PG/EI/101107/3253/2022	504389932868	ACRPR068111	20/02/1984, 41 YRS	mohitrojekar@gmail.com	8390465676	No



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ANNEXURE-IV-C

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)
 Name of College: Rajiv Gandhi Medical College
 Phone No: 022-5237786
 Name of the Subject: Pathology

Sr. No.	Name of Teacher (LastName FirstName Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp./ Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mob. No.	Aadhar Card No.	If Debarred (Yes/No)	Signature of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Kori Shivkumar R	Professor and HOD	Pathology	Regular	MD Pathology	Yes	19Y, 1M	Yes	16 DEC 2006	5	04 MAR 1965	drsrk65@gmail.com	9757223723	929910016051	No	<i>[Signature]</i>
2	Dr. Bholay Sandhya U	Professor (Additional)	Pathology	Regular	MD Pathology	Yes	19Y, 1M	Yes	16 DEC 2006	6	21 DEC 1964	sandhyabholay@gmail.com	9702046448	427818829253	No	
3	Dr. Sane Kavita C	Professor (Additional)	Pathology	Regular	MD Pathology	Yes	19Y, 1M	Yes	7 FEB 2019	6	20 SEP 1967	ksane2@yahoo.co.in	9869250291	437105500678	No	<i>[Signature]</i>



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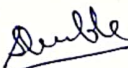
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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College: Rajiv Gandhi Medical College

Phone/Mobile No.:

Name of the Subject: Microbiology

Sr. No.	Name of Teacher	Designation	Subject / Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Milind R. Ubale	Professor & HOD	Microbiology	Regular	MBBS (1999) MD Microbiology (2006)	MUHS/UG/E-1/53/1109/3746/2017	18 years 9 months	Yes	MUHS/PG/E-1/1109/679/19 Dated 7/2/2019	6	19.09.1975	ubales2001@gmail.com	9869392959	92111803990	No	
2	Dr. Sujata Kamble	Associate Professor	Microbiology	Temporary	MBBS (2006) MD Microbiology (2017)	NA	07 Years 6 months	Yes	MUHS/PG/E-1/101107/519/2024 DATED: 10/09/2024	2	20.07.1982	dreems.skm20@gmail.com	9604592659	495011330533	No	



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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
Subject Wise Eligible Examiner List (PG Courses)

Name of the College - Rajiv Gandhi Medical College
Phone no. 02225347784/85/86
name of the Subject: PHARMACOLOGY

SR. NO.	College Name	Subject	Full name of the teacher (First/Middle/Last)	Designation	Date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes, MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth (Age in years)	Latest Email Address	Contact No. (Mob.)	Debarred (Yes/No)
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Rajiv Gandhi Medical College	Pharmacology	Dr. Tushar Ramesh Bagle	Associate Professor & Head	04-09-2014	MBBS	MD	14 Years	Yes	MUHS/PG/E-1/101107/3364/2023 dated 19/12/2023	334830638455	ALQPB6775L	20-04-1983 (42 Y)	tusharbagle21@gmail.com	9869052680	No
2			Dr. Rohankumar Chandrakant Hire	Associate Professor	21-01-2015	MBBS	MD	10 Years	Yes	MUHS/PG/E-1/101107/1586/2023 dated 19-06-2023	813250079264	ADFPH0386Q	11-02-1985 (40 Y)	rohanhire123@gmail.com	9970036883	No



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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST(PG Courses)

Name of the College : RAJIV GANDHI MEDICAL COLLEGE, KALWA, THANE

Phone/ Mobile No: 022-25372774

Name of Subject: FORENSIC MEDICINE & TOXICOLOGY

Sr. No.	Name of the Teacher (Last/First/Middle)	Designation	Subject / Speciality	Type of Appointment (Regular / Temp. / Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in years) after PGM	PG Teacher Recognition Yes/No	Recognition letter Date issued by university	No. Of PG Students Guided last 5 years	Date of Birth	Email ID	Mobile No	Adhar Card No	If Debarred (Yes/No)	Sign. Of Teacher
1	Dr Ghadge Mangesh Ramchandra	Prof & Head	Forensic Medicine & Toxicology	Regular	MBBS, MD Forensic Medicine	MUHS/UG/E-1/53/1109/2574/2018 Dated 05/07/2018	18 yr 01 mth	Yes	MUHS/PG/E-1/101107/1250/2023 DATED 10/05/2023	8	29.12.1967 (57 yrs, 11 mth)	dr.mangeshghadge@gmail.com	9594975245	354157324788	No	
2	Dr Pate Rajeshwar Sambhaji	Associate Professor	Forensic Medicine & Toxicology	Regular	MBBS, MD Forensic Medicine	MUHS/UG/E-1/53/105107/3218/2022 Dated 01/09/2022	5 yr 09 mth	Yes	MUHS/PG/E-1/101107/3253/22 DATED 02/09/2022	4	28.1.1985 (40 yrs, 10 mth)	drpate2801@gmail.com	9028505506	217681504507	No	



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ANNEXURE-IV-C

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College : Rajiv Gandhi Medical College, Kalwa, Thane

Phone/Mobile No. :

Name of the Subject : Community Medicine

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp./ Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (In Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date Issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No	Aadhar Card No	If Debarred (Yes/No)	Sign. of Teacher
1	Dr. Ravindra. B. Gurav	Professor Additional	Community Medicine	Regular	M.D (PSM) 1994	MUHS/EI/109/5545/2003 dated 17th July 2003	19 years 1 months	Yes	MUHS/EI/PG/1109/5896/2006 dated 16th Dec 2006	12	02/01/1965	drbgu_rav65@gmail.com	9869612640	461505455635	No	
2	Dr. Aniruddha. A. Malgaonkar	Associate Professor		Regular	M.D (PSM) 2002	MUHS/UG/EI/05760/480/2012 dated 03rd Feb 2012	9 years	Yes	MUHS/PG/EI/1109/27/2324/17 dated 23rd Oct 2017	6	10/04/1976	andydr@rediffmail.com	9769007570	973864037798	No	
3	Dr. Pradnya S. Jadhav	Assistant Professor		Regular	M.D (PSM) (2015)	MUHS/UG/EI/53/1109/2850/2017 dated 05th Dec 2017	3 years 1 month	Yes	MUHS/PG/EI/101107/254/2023 dated 20/01/2023	3	12/04/1983	drpradnyajadhav12@gmail.com	8422994024	228458510118	No	
4	Dr. Ranjana Zade	Assistant Professor		Regular	M.D (PSM) (2012)	MUHS/UG/EI/53/1109/3850/2017 dated 05th Dec 2017	3 years 3 months	Yes	MUHS/PG/EI/101107/250/2023 dated 10/05/2023	3	07/01/1983	zadernanjana@yahoo.com	8425982266	646565761720	No	



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ANNEXURE IV C

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES NASHIK (PG COURSES)

NAME OF COLLEGE:

RAJIV GANDHI MEDICAL COLLEGE, KALWA

PHONE/MOBILE NO.:

02225372776 EXT: 1437

NAME OF SUBJECT:

GENERAL SURGERY

Sr. No.	College Name	Subject	Full name of the Teacher (First/Middle/Last)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in years)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	RGMC Kalwa	General Surgery	Dr. Arun Y. Mane	Professor & HOD	11/05/1996	MBBS 1989	MS 1995	30 Yrs	Yes	MUHS/E-1/PG/1109/1874/2008	703855137853	ABNPM 5796R	31/07/1967 58 Yrs	arunjuly31@gmail.com	9930153906	No
2	RGMC Kalwa	General Surgery	Dr. Deepak G. Pawar	Associate Professor	14/10/1999	MBBS	MS	27 years	Yes	MUHS/E-1/PG/1109/1874/2008	590269062579	ABCP 3484E	22/07/1970 55 YEARS	pawardg1970@gmail.com	9820386345	NO
3	RGMC Kalwa	General Surgery	Dr. Prashant D. Pawar	Associate Professor	1/02/2014	MBBS 1998	MS 2004	11 Yrs	Yes	MUHS/PG/E-1/1109/32/2012 Dt. 3/01/20	520182016165	AFOPP 853K	26/06/1975 50 YEARS	drdpawar1@gmail.com	9820401821	No
4	RGMC Kalwa	General Surgery	Dr. Sandeep S. Dabade	Associate Professor	24/09/2014	MBBS 2004	DNB 2011	11 Yrs	Yes	MUHS/UG/E-1/53/1109/4411/2016 DATE: 06/06/2016	596697017072	APXPD 456K	27/03/1983 42 YEARS	dr.sandeepdabade@gmail.com	9892147352	No



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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses) ANNEXURE IVC

Name of College: RGM and CSMH

Phone/Mobile No. :

Name of the Subject : Obstetrics and Gynecology

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr Jayanarayan Bishnumohan Senapati	Prof & HOD	OBGY	regular	MS DNB	YES	29 YRS	YES	MUHS/PG/E1/11095696/2006 dt. 16.12.2006		09/05/1964	jay.senapati@gmail.com	9869575750	973229003869	no	
2	Dr Sunita Milind Ubale	Professor (Additional)	OBGY	regular	MS FCPS DFP	YES	16 YRS	YES	MUHS/PG/E1/1109679/19 DT: 07/02/2019		16/09/1977	subales2022@gmail.com	9222092637	824172408221	no	
3	Dr Mamta Neelesh Anand	Associate Professor	OBGY	Regular	MS OBGY	YES	11YR 5 M	NO			30/07/1984	drmamtaneelesh@yahoo.co.in	9322577680	947636998171	no	
4	Dr Misbah Ishaque Mulla	Associate Professor	OBGY	contractual	MBBS DGO DNB	yes	8y 5m	NO			23/06/1985	misbah23@gmail.com	9920134423	391357853995	no	



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ANNEXURE-IV-C

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College :
 Phone/Mobile No. :
 Name of the Subject :

RAJIV GANDHI MEDICAL COLLEGE
 022-25347791
 ORTHOPEDICS

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (In Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	DR SANJAY BARANWAL	PROF & HOD	ORTHOPEDICS	REGULAR	MS ORTHO	YES	20 YEARS	YES	MUHSE-1/PG/1109/067/07	6	27/01/1965	drsanjaybaranwal@gmail.com	9323700160	572632122556	NO	
2	DR SANJAY GAIKWAD	ASSO PROF	ORTHOPEDICS	REGULAR	MS ORTHO	YES	1 YEAR	NA	NA	NA	20/05/1976	orthodrsanjay@gmail.com	9167988349	308845019054	NO	



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ANNEXURE-VII-G

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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College :
RAJIV GANDHI MEDICAL
COLLEGE, KALWA,
THANE Phone/Mobile
No. 022-25304139
Name of the Subject :
ENT

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Specialty	Type of Appointment (Regular / Temp. / Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (In Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date Issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Signature of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	DR AMOL KHALE	PROFESSOR (Additional)	ENT	REGULAR	MS	MUHS/ E- 1/1109/ 5545/2 003 DATE- 17/07/20 03	27 YEARS	-	-	-	02/11/ 1968	khalemels ter@gmail .com	982 0136 054	289604 NO 297912	-	<i>Amol</i>
2	DR SHWETA BAWISKAR	ASSOCIATE PROFESSOR	ENT	REGULAR	MS	MUHS/ UG/E- 1/0576 0/480/ 2012 DATE- 03/12/20 12	14 YEARS	-	-	-	09/01/ 1982	drshwet a.katna @gmail .com	989 2253 728	754589 NO 078554	-	<i>Shweta</i>
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Department Specific Information In the Hospital

ANNEXURE-IV-C

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College : Rajiv Gandhi Medical College ,Kalwa,Thane
Phone/Mobile No. : 022-25347784/85/86/87
Name of the Subject : Ophthalmology

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date Issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign.. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr Rakesh Barot	Professor and HOD	Ophthalmology	REGULAR	MS	MBBS 1990	29 years 9 months 21days	Yes	MUHS/E/1/109/54052003 dated 7/7/2006	10	1/22/1968	rakeshbarot47@gmail.com	9820545386	905248769876	No	
2	Dr Rohit Tiwari	Assistant professor	Ophthalmology	REGULAR	MS	MBBS 2008	08 years 3 Months	NO		10	12/3/1986	drrohitptiwari@gmail.com	8975785188	557042559376	No	



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ANNEXURE-IV-C

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College: RGM & CSMH
 Kalwa Phone/Mobile No. : 022-25347784/85/86/87

Name of the Subject: Anaesthesiology

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E- Mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/ No)	Sign. Of Teacher
1	DR PATIL VIJAY BALARAM	PROFESSOR	ANAESTHESIOLOGY	REGULAR	MBBS, MD ANAESTHESIA	Yes	18Y	YES	MUHS/PG/E-1/1109/679/19	0	19/03/1975 (49 y)	medrvijaypatil@gmail.com	9920787516	405323913060	No	<i>[Signature]</i>
2	DR NIKHI KETAKI ANIRUDDHA	ASSOCIATE PROFESSOR	ANAESTHESIOLOGY	REGULAR	MBBS, MD ANAESTHESIA	Yes	17Y	YES	MUHS/PG/E-1/1109/679/19	0	18/08/1982 (42y)	ketaki_p18@yahoo.co.in	9869750121	555850241041	No	<i>[Signature]</i>
3	DR LALWANI ANMOL BHARAT	ASSOCIATE PROFESSOR	ANAESTHESIOLOGY	REGULAR	MBBS, CPS DA, DNB(ANAES)	Yes	11Y	NO	NA	0	01/04/1984 (40 y)	deepa.jrh@gmail.com	9167655045	505203976620	No	<i>[Signature]</i>
4	DR SAMTANI PRADEEP MAHESH	ASSISTANT PROFESSOR	ANAESTHESIOLOGY	TEMPORARY	MBBS MD Anaesthesia FELLOWSHIP in UGRA.	No	4Y	NO	NA	0	31/01/1994 (30y)	samprati234@gmail.com	8850914924	287666503161	No	<i>[Signature]</i>
5	Dr.SUSHANT PANDURANG BHABAL	ASSISTANT PROFESSOR	ANAESTHESIOLOGY	TEMPORARY	M.D. D.N.B. F.A.O.R.A	No	3 Y	NO	NA	0	05/03/1993	Sushantbhabal05@gmail.com	8928814179	366267391068	No	<i>[Signature]</i>
6	Dr. PRATIMA KUMARI	ASSISTANT PROFESSOR	ANASTHESIOLOGY	TEMPORARY	MBBS, MD ANAESTHESIA	No	3 YRS	NO	NA	0	25/02/1989	Pratimakum3@gmail.com	9431395672	931979789299	NO	<i>[Signature]</i>
7	DR SANJANA NITIN MAHAJAN	ASSISTANT PROFESSOR	ANAESTHESIOLOGY	TEMPORARY	MBBS, MD ANAESTHESIOLOGY	No	2.5 YEARS	NO	NA	0	25/11/1993	Chinar2511@gmail.com	9022355534	450952877379	no	<i>[Signature]</i>
8	DR SUPRIYA RATHOD	ASSISTANT PROFESSOR	ANAESTHESIOLOGY	TEMPORARY	MBBS, MD ANAESTHESIOLOGY	No	2 YEARS	NO	NA	0	13/05/1995	Supriyarathod1995@gmail.com	9766513671	471974440968	NO	<i>[Signature]</i>
9	DR ASAWARI WAGH	ASSISTANT PROFESSOR	ANAESTHESIOLOGY	TEMPORARY	MBBS, MD ANAESTHESIOLOGY	Yes	3 YEARS	NO	NA	0	01/06/1992	Asawari92wagh@gmail.com	9082436473	910346298923	NO	<i>[Signature]</i>



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ANNEXURE-IV-C

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECT WISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College: **Rajiv Gandhi Medical College and Chhatrapati Shivaji Maharaj Hospital, Thane**

Phone/ Mobile No. :

Name of the Subject: **General Medicine**

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No.	PAN NO	Signature of Teacher
1	Dr. Yogesh Sharma	Prof & HOD	MED	permanent	MBBS, MD	yes	17 yrs	yes	MUHS/PG/E-1/1109/27/3119/14-24/11/2014	-	25/8/1962	dryogeshsharma@gmail.com	9820192192	835964044710	ACEPS2523C	
2	Dr. Deepa Banjan	Adnl Professor	MED	permanent	MBBS, MD	yes	17	yes	Muhs/E-1/PG/1109/1874/2007-10-4-2007		18/05/1971	deepa.banjan@gmail.com	9833347738	569448708835	AKYPB6257C	
3	Dr. Suman Rathod	Adnl Professor	MED	permanent	MBBS, MD	yes	11	yes	MUHS/UG/E-1/1109/1869/2014		01/01/1975	Suman2rathod@gmail.com	9768727282	991700877757	APHPR2116Q	
4	Dr. Alaka Hegde	Associate Prof	MED	contractual	MBBS, MD	yes	7y 7m	yes	AWAIED		04/03/1985	raoalaka@gmail.com	9819340135			
5	Dr. Mahesh More	Assistant Prof	MED	permanent	MBBS, DNB	yes	8 yrs	yes	AWAIED MUHS/UG/E-1/53/1109/4411/2016		06/04/1982	Maheshmore007@gmail.com	9960384166	641273309426	BFBPM2438F	
	Dr. Shweta Borkar	Assistant Prof	MED	Contract	MBBS, DNB	yes	8yrs	Yes	awaited		21/11/1984	drshwetaborkar@gmail.com	9819423980	945286035254	ALZPB7495C	
	Dr. Mayur Tayade	Asst professor	MED	Contract	MBBS, MD	yes	2 yr	Yes	awaited		17/11/1992	Drmayur.tayade@gmail.com	8600274008	346212225298	BFEPT8814B	
8	Dr. Mamata Gayakwad	Assistant Prof	MED	Contract	MBBS, MD	yes	1 yr	Yes	awaited		12/8/1992	drmvga9224240@gmail.com	9224240697			

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ANNEXURE-IV-C

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECT-WISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College: Rajiv Gandhi Medical College
 Phone/Mobile No. : 02225347784

Name of the Subject: Pediatrics

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approx (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No.	Debarred (Yes/No)	Signature
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	DR. SHAILAJA MILIND POTDAR	PROF. ADDITIONAL	PEDIATRICS	REGULAR	DCH & MD PEDIATRICS	YES	19Y	YES	MUHS/E-1/PG/1109/5896/2006 DATE: 16/12/2006	2	08/06/68	shailaja_potdar@yahoo.com	9820922849	979015896215	NO	<i>[Signature]</i>
2	DR. SUNIL VIJAY JUNAGADE	PROF. ADDITIONAL	PEDIATRICS	REGULAR	DCH & DNB- PEDIATRICS	YES	19Y	YES	MUHS/E-1/PG/1109/5896/2006 DATE: 16/12/2006	2	08/07/71	suniljunagade@gmail.com	9820239737	797951433979	NO	<i>[Signature]</i>
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ANNEXURE-IV-C

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECT WISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College: *RGMC & CSMH*

Phone/ Mobile No. :

Name of the Subject: *DVL (Dermatology)*

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Appox at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr Pradnya Joshi	HOD & Associate professor	Dermatology	Regular	MD	Yes	11 years 10m	No			16/11/1996	drpradnyajoshi@gmail.com	8108735566	783872977988	No	<i>Sadhu</i>
2	Dr Tejas Vishwanath	Assistant professor	Dermatology	Temporary	MD	No	4 years 6 months	No			8/10/1991	Mbbs90023@keem.edu	9920402705	700423878115	No	<i>Tejas</i>
3	Dr Isha Kane	Assistant professor	Dermatology	Temporary	MD, DNB	No	2 years 4 months	No			30/11/1996	ishakanee30@gmail.com	9987031382	675107324372	No	<i>Isha Kane</i>



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08/01/26
 Dean
 R. G. M. College &
 C. S. M. Hospital

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES,
NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG
Courses)**

Name of the College : Rajiv Gandhi Medical College

Name of the Subject : Psychiatry Department

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Appoint at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobil e No.	Aadha r Card No	If Debar red (Yes/No)	Sign- of Teache r
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Vivek Vyankatesh Chincholkar	Associate Professor	Psychiatry	Regular	MBBS, DPM, MD, DNB Psychiatry	MUHS/E-1/1109/5545/2003 dated 17/07/2003	20years	Yes	MUHS/E1/PG/01109/5896/2006 dated 16/12/2006		27/10/1970	viveksc@ gmail .com	9820404412	213936040181	no	Dr. Vivek C. V. Chincholkar
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69/10/26
Dean
R. G. M. College &
C. S. M. Hospital

Dr. Vivek Chincholkar
DPM, DNB, MD (psychiatry)
Reg No-75823
Associate professor

ANNEXURE-IV-C

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College : Rajiv Gandhi Medical College ,Kalwa Phone/Mobile No. : +91-22-25347784

Name of the subject : Radio-Diagnosis

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approved (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Signature of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Chillashetti Uma Basaprabhu	HOD/Professor	Radio-Diagnosis	Regular	DMRD DNB	-	29 Years 05 Months	Yes	MUHS/E-1/PG/1109/1874/2007 DATE :10/04/2007	5	10-10-1968	Umachillalshetti@gmail.com	9820022909	8.34953E+11	No	
2	Kalmath Veena Basavaraj	Associate Professor Associate Professor	Radio-Diagnosis	Regular	MD	-	24 YEARS	Yes	MUHS/E-1/PG/1109/1874/2007 DATED 10/04/2007	5	17-03-1972	Veena_kalmath@yahoo.co.in	9820344232	8.52705E+11	No	



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 Dean
 R. G. M. College &
 C. S. M. Hospital