

FOR Ph.D. COURSE(S) FOR A.Y. 2024-2025
(Please submit separate report for each subject)

Date of Inspection	:	
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Faculty: Medical

Subject/Specialty: Microbiology

1. Name & Address of the College/Research Centre: -

**MAHARASHTRA INSTITUTE OF MEDICAL
SCIENCES & RESEARCH(MEDICAL) COLLEGE,
VISHWANATHPURAM, AMBAJOGAI ROAD,
LATUR.**

Name of Head of the Department : Dr. Aasha Pandharinath Pichare

Designation : Professor

2. Department / Subject wise details of available PhD Guides: -
(Attach Annexure "A")

Sr. No.	Name of Ph.D. Guide	Designation	Date of Birth	Date of Retirement	Total No. of PhD Scholars Registered till date	Has completed six days Research Methodology Workshop? Yes/No	PhD Recognition No. and Date
1	Dr. Basavraj Saybanna Nagoba	Professor	16-04-1962	30-04-2032	02	Yes	जा. क्र. मआविवि / वि. वि. कक्ष/ पीएच. डी/ २४/८३/२००७, दिनांक १६.०७.२००७

4. Details of available infrastructure for Research:

- i) Adequate number of Computers with Internet facility is available? Yes / No
ii) Adequate number of Books / Journals are available? Yes / No
iii) Any other specific thing available at the Department:.....
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5. Details of Central Research Laboratory:

- i) Available Area (in sq. ft) :
ii) Is Drugs/Medicines/Chemicals etc. are available for research? Yes / No
iii) Is Adequate number of Instruments are available? Yes / No
iv) Is Records of Stock book available? Yes / No

6. Details of Central Animal House:

- i) Available Area in sq. ft:
ii) Functioning Central Animal House? Yes / No

7. Details of Institutional Ethical Committee:

(Attach Annexure "B")

- i) Date of Composition :
ii) Total Number of Members : 11
iii) Number of meetings held in previous year: : 02
iv) Whether Records of proceedings are maintained properly? Yes / No
v) Is Human and Animal Ethics Committee, registered under the appropriate authority? Yes / No

8. **Details of Research Advisory Committee:** (Attach Annexure "C")
- i) Date of Composition : 10.08.2022
- ii) Total number of Members : 12
- iii) Number of meetings held in previous year: : 02
- iv) Whether records of proceedings are maintained properly? Yes / No
9. **Is Doctoral Committee constituted in the lines of RAC?** Yes / No
- i) If Yes, Date of Composition : 10.08.2022
- ii) Total number of Members : 12
- iii) Name of External Subject Expert : --
10. **Is Plagiarism detection software facility available?** Yes / No
If Yes, Name of the Software.....
11. **Is attendance of the Ph.D. Scholar maintained properly?** Yes / No
12. **Whether Research Centre is registered under MPCB provisions?** Yes / No
13. **Whether BMW facility is available?** Yes / No
14. **Any other important thing related to Research/Department/Facilities, which will be helpful to carry out good quality research under this department:**
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DECLARATION BY LIC

We, the LIC Members, hereby certify that, we have thoroughly inspected and verified the Department/College/Research Centre, the available other facilities, required instruments and equipment, available at the research centre. The overall observations of the Inspection Committee are as follows: -

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Name of Inspectors		Sign. of Inspectors with Date
1)	Chairman	
2)	Member	
3)	Member	
4)	Member	


DEAN
 M.I.M.S.R. Medical College
 LATUR-413531

FOR Ph.D. COURSE(S) FOR A.Y. 2024-2025
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Faculty: Medical

Subject/Specialty: ENT

1. **Name & Address of the College/Research Centre: -**

**MAHARASHTRA INSTITUTE OF MEDICAL
SCIENCES & RESEARCH(MEDICAL) COLLEGE,
VISHWANATHPURAM, AMBAJOGAI ROAD,
LATUR.**

Name of Head of the Department : Dr. Sham Satyanarayan Somani

Designation : Professor

2. **Department / Subject wise details of available PhD Guides: -**
(Attach Annexure 'A')

Sr. No.	Name of Ph.D. Guide	Designation	Date of Birth	Date of Retirement	Total No. of PhD Scholars Registered till date	Has completed six days Research Methodology Workshop? Yes/No	PhD Recognition No. and Date
1	Dr. Sham Satyanarayan Somani	Professor	13-03-1963	30-03-2033	--	Yes	--

4. **Details of available infrastructure for Research:**

- i) Adequate number of Computers with Internet facility is available? **Yes / No**
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 iv) Is Records of Stock book available? **Yes / No**

6. **Details of Central Animal House:**

- i) Available Area in sq. ft:
- ii) Functioning Central Animal House? **Yes / No**

7. **Details of Institutional Ethical Committee:** (Attach Annexure 'B')

- i) Date of Composition :
- ii) Total Number of Members : 11
- iii) Number of meetings held in previous year: : 02
- iv) Whether Records of proceedings are maintained properly? **Yes / No**
 v) Is Human and Animal Ethics Committee, registered under the appropriate authority? **Yes / No**

8. **Details of Research Advisory Committee:** *(Attach Annexure "C")*
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3)		Member	
4)		Member	



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**M.I.M.S.R. Medical College
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Date of Inspection	:	
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Faculty: Medical

Subject/Specialty: OBGY

1. Name & Address of the College/Research Centre: -

**MAHARASHTRA INSTITUTE OF MEDICAL
SCIENCES & RESEARCH(MEDICAL) COLLEGE,
VISHWANATHPURAM, AMBAJOGAI ROAD,
LATUR.**

Name of Head of the Department : Dr. Chandrakala Shivajirao Patil

Designation : Professor

2. Department / Subject wise details of available PhD Guides: -
(Attach Annexure 'A')

Sr. No.	Name of Ph.D. Guide	Designation	Date of Birth	Date of Retirement	Total No. of PhD Scholars Registered till date	Has completed six days Research Methodology Workshop? Yes/No	PhD Recognition No. and Date
1	Dr. Chandrakala Shivajirao Patil	Professor	27-04-1956	30-04-2026	01	Yes	MUHS/UDC/(Ph.D)/Guide/67/2021, Dated 01.04.2021

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(Attach Annexure 'B')

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