

Professional Teaching Experience Certificate for Fellowship/Certificate Courses Director/Mentor

Title of the Course applied for:- **Fellowship Course in Rehabilitation Surgery**

This to Certify that **Dr. Anil Kumar Gaur** has worked in the Department of Physical Medicine and rehabilitation Training Centre as per following details

A) General Experience

Designation	From	To	Total period Year/Months

B) Actual experience in the subject of concerned Fellowship/Certificate Course applied for :-

Designation	From	To	Total period Year/Months	
Senior Resident, Sardarjang Hospital	06/10/1990	05/12/1993	3 yrs	2 months
Senior Resident, St. Stephen's Hospital, Delhi	22/07/1996	21/01/1997	-	6 months
Junior Specialist (PMR), St. Stephen's Hospital, Delhi	22/01/1997	21/01/1999	2 years	-
Specialist (PMR), St. Stephen's Hospital, Delhi	22/01/1999	05/10/2000	1 year	8 months
Specialist (PMR) Grade II, AIIPMR, Mumbai	09/07/2003	08/07/2009	6 years	-
Specialist (PMR) Grade I / Professor , AIIPMR, Mumbai	09/07/2009	08/07/2016	7 years	-
Consultant / Professor, AIIPMR, Mumbai	09/07/2016	13.10.2017	1 year	3 months
Director/ Professor, AIIPMR, Mumbai	14.10.2017	Till date	4 years	7 months

(It is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)

Sign & Stamp



Head of the Department
Date **14/10/2017** **AMIT S. MHAMBRE**

कायदा (शास्त्रज्ञ) / DNB (PMR)

पदवी सं. / REGISTRATION / PROFESSOR & HOD (PMR)

पदवी सं. / REG. NO. - 2002/06/2832

कायदा शा. वि. सु. सं. / AIIPMR

मुंबई / MUMBAI-400 034.

Sign & Stamp



Dean/Principal/Head of Institute
Date **14/10/2017** **DR. ANIL K. GAUR**

कायदा (शास्त्रज्ञ) / DNB (PMR)

पदवी सं. / REGISTRATION / PROFESSOR & HOD (PMR)

पदवी सं. / REG. NO. - 2002/06/2832

कायदा शा. वि. सु. सं. / AIIPMR

मुंबई / MUMBAI-400 034.

(INSTITUTIONAL INFORMATION)

1. Particulars of Director / Dean / Principal: (Who so ever is Head of Training Centre)

Name: Dr. Anil Kumar Gaur Age: 58 (Date of Birth) 19/06/1964

PG Degree	Subject	Year	Institution	University
<i>Recognized / Not-Recognized</i>	Physical Medicine & Rehabilitation	1991	Safdarjung Hospital, New Delhi	National Board of Examination, New Delhi

Teaching Experience

Designation	Institution	From	To	Total Exp.
Senior Resident	Safdarjung Hospital	06/10/1990	05/12/1993	3 years 2 months
Senior Resident	St. Stephen's Hospital, Delhi	22/07/1996	21/01/1997	6 months
Junior Specialist (PMR)	St. Stephen's Hospital, Delhi	22/01/1997	21/01/1999	2 years
Specialist (PMR)	St. Stephen's Hospital, Delhi	22/01/1999	05/10/2000	1 year 8 months
Specialist (PMR) Grade II /	AIIPMR, Mumbai	09/07/2003	08/07/2009	6 years
Specialist (PMR) Grade I /	AIIPMR, Mumbai	09/07/2009	08/07/2016	7 years
Professor	AIIPMR, Mumbai	09/07/2016	13.10.2017	1 year 3 months
Consultant / Professor	AIIPMR, Mumbai	14.10.2017	Till date	4 years 7 months
Director/ Professor	AIIPMR, Mumbai	14.10.2017	Till date	4 years 7 months

2. Management/Society/Inst. Information:

01	i) Name of the Society/Institution/ Training Centre/University Dept.: ii) Postal Address, with PIN: iii) Contact Details:	All India Institute of Physical Medicine and Rehabilitation K. Khade Marg, Haji Ali, Mahalaxmi, Mumbai-400034. Mob:9769416932 Tele:- 022-23528834	i) Public Trust Act 1950:.....	
			ii) Society's Registration Act.1860:.....	
			iii) Year of establishment: 1955	
			iv) Copies of Registration, Constitution and Memorandum of Association attached? *Yes/No-Marked as Appendix 'A'	
02	Society/Institution/ Training Centre Registration Number and date:	All India Institute of Physical Medicine and Rehabilitation Central Government Institute 1955 -Mark as Appendix 'B'	Hospital Information : (It is mandatory for Training Centre/applying Institute to have their own functional Hospital as per norms)	
			i) Name of the Hospital ii) Nursing Home Registration No. iii) Establishment Year	
03	i) Name of the Training Centre /Institute where course is to be conducted: ii) Postal Address, with PIN: iii) Contact Details: iv) E-mail ID:	All India Institute of Physical Medicine and Rehabilitation K. Khade Marg, Haji Ali, Mahalaxmi, Mumbai-400034. Mob: director@aiipmr.gov.in Tele: 022-23544341	Name of the Course(s) :	
			1) Fellowship Course in Rehabilitation Surgery	
			2) Fellowship Course in Rehabilitation Physiotherapy	
			3) Fellowship Course in Rehabilitation Occupational Therapy	
			Approved Intake Capacity: 03 Affiliated Since 2021 (if necessary Attach separate List)	
04	v) List of University approved Fellowship/Certificate Course(s) conducted / already running at Training Centre with Intake Capacity	Name of the Course(s) :	Approved Intake Capacity: 03 Affiliated Since 2021 (if necessary Attach separate List)	
			Approved Intake Capacity: 03 Affiliated Since 2021 (if necessary Attach separate List)	

	vi) Training Centre / Institute willing/desirous to Start/Open Fellowship/Certificate Course(s) (For New Opening Purpose only)	Name of the Course(s) Required Required Required Intake Capacity:
		(if necessary Attach separate List)
05	Affiliation Fees details: (Bank/DD no./ date/amount/ NEFT/RTGS)	Paid Fees details Attached: *Yes/No. (Pending Fees, if any;)
06	Financial position of the Society/ Institute in the preceding 03 years:	Audited Statements of Accounts for *Yes/No- * This is a Central Government Institute
07	Budgetary provision for the FC/CC/DC for the next 03 years	i) 2020-21 – Rs. 24,05,00,000 ii) 2021-22- Rs. 32,42,00,000 iii) 2022-23- Rs. 35,00,00,000
08	Management Resolution seeking Recognition of Institute for FC/EC/DC of MUHS, Nashik:	Resolution No: File No. Z.28016/21/2018-MH-II, Dated: 9 th April 2019 Copy of Management Resolution attached? *Yes/No – Mark as Appendix 'D'

Other Information:		
a) Land:		*Yes/No. If yes, then Area: 11128.8 sq.m
i) Whether the land is owned by the Applicant Institute/Training Centre/ Trust:		Copy of land documents i.e. 7/12 extract, Property Card, etc. attached? *Yes/No- Mark as Appendix 'E'
ii) Whether the land is registered?		*Yes/No. If yes, Registration Number: Dated: At (Place):
09	iii) Any loans, mortgage, etc. shown against the title of the land:	Copy of Land Registration Certificate attached? *Yes/No- Mark as Appendix 'F'
		*Yes/No. If yes, amount of loan Rs. /mortgaged for Rs. Copy of Loan/Mortgage Deed attached? *Yes/No. - Mark as Appendix 'G'
	b) Building:	9290.304 sq. ft.
	i) Total built-up area:	Certified copy of Building Plan attached? *Yes/No
		- Mark as Appendix 'H'

3. Central Library

- Total number of Books in library: **4831**
- Books pertaining to concerned Fellowship subject: **PMR-584**
- Purchase of latest editions of concerned books in last 3 years: - **Total 602, PMR book 48**

• Journals:		
1	Journals	Total
2	Indian	22
3	Foreign	89
		concerned Fellowship subject
		1
		3

- Year / Month up to which latest Indian Journals available : Current issue 2021
- Year / Month up to which latest Foreign Journals available : Current issue 2021
- Internet / Med pub / Photocopy facility: available / ~~not available~~
- Library opening times: 11 am to 7 pm (Monday to Friday)
11 am to 6 pm (Saturday)
available / ~~not available~~
- Reading facility out of routine library hours: available / ~~not available~~
(Obtain list of books & journals duly signed by Dean)

Available / Not available

4. Recreational facilities:

- Play grounds Gymnasium

Hostel Accommodation:

Particulars	UG		PG		Interns	
	Boys	Girls	Boys	Girls	Boys	Girls
No. of Rooms	06	06	06	05	06	05
No. of Students	20	31	03	06	-	-
Status of Cleanliness	Good					

5. Residential accommodation for Staff / Paramedical staff : Available /Not Available

6. Ethical Committee (Constitution) : YES / NO

7. Medical Education Unit (Constitution) : YES /NO-one per year
(Specify number of meetings held annually & minutes thereof)

8. Any other faculty specific information required : Not Applicable
(such as Herbal garden / Panchakarma Unit/Pharmacy / Dental Chairs and Units/as per the requirement of concerned Course) Attach details)

HOSPITAL INFORMATION

1. Name of the Hospital: All India Institute of Physical Medicine and Rehabilitation

Total number of OPD, IPD in the Institution and concerned department during the last one year (January to December 2021):

In the entire hospital	In the department of concerned Fellowship subject
OPD 24030	OPD 24030
IPD (Total No. of Patients admitted) 94	IPD (Total No. of Patients admitted) 94

2. Hospital Beds Distribution & No of O.T.:

	In the entire hospital
No of Beds	55
No of Beds in ICU	-
No of Beds in IRCU	-
No of Beds in SICU	-
No of Major O.T.	02
No of Minor O.T.	02

3. Available Clinical Material: (Give the data only for the department of concerned Fellowship subject)

- No. of available for clinical service on inspection day:

	On Inspection day	Average of random 3 days
• Daily OPD – 2 PM	202
• Daily admissions	03
• Daily admissions in Dept.
• Through casualty at 10am
• Bed occupancy in the Dept.
• Number of patients in ward (IPD) at 10AM	28
• Percentage bed occupancy at 10Am	69 %

- Clinical Procedure(s) & Operative Details related to Fellowship subject/ Specialty :

(For further details in this concern, kindly peruse the Guidelines information sheet supplied herewith)

	On Inspection day	Average of random 3 days
• Major OT		03
• Minor OT		08

4 Casualty/ Emergency Department :

Space	# please see the note below
Number of Beds	
No. of cases (Average daily OPD and Admissions):	
Emergency Lab in Casualty (round the clock):	
Emergency OT and Dressing Room	
Staff (Medical/Paramedical) Equipment available	

#Arrangement made with B.Y.L Nair Hospital to provide emergency facilities

5 Blood Bank :

(i) Valid FDA License(copy of certificate be annexed)	# please see the note below	
(ii) Blood component facility available		
(iii) All Blood Units tested for Hepatitis C,B, HIV		
(iv) Nature of Blood Storage facilities (as per specifications)		
(v) Number of Blood Units available on inspection day		
(vi) Average blood units consumed daily and on inspection day in the entire Hospital (give distribution in various specialties)		Average daily

Arrangement with 'Indian Red Cross Society, Bombay City Branch' & B.Y.L Nair Hospital * to provide blood bank facility

6 Central Laboratory: Institute laboratory temporary closed awaiting for new staff. The other facility is out sourced to HAL laboratory catering to patients and providing facilities for all biological and immunological test. Total area 37.16 sq.m

- Controlling Department: _____
- No of Staff : _____
- Equipment Available : Attach separate List
- Working Hours: _____

- | | |
|---|---|
| <p>7 Central supply of Oxygen / Suction: Available / Not available</p> <p>8 Central Sterilization Department Available / Not available</p> <p>9 Ambulance (Functional) Available / Not available (purchase under process)</p> <p>10 Laundry: Manual/Mechanical/Outsourced:</p> <p>11 Kitchen Available /Outsourced/Not Available</p> <p>12 Incinerator: Functional / Non functional Capacity:...../Outsourced</p> <p>13 Bio-Medical waste disposal Outsourced /any other method</p> <p>14 Generator facility Available / Not available</p> <p>15 Medical Record Section: Computerized / Non computerized</p> <ul style="list-style-type: none"> • ICD X classification Used / Not used | <p>Sign & Stamp
Dean/ Principal/ Director of Training Centre</p> <p style="text-align: center;"><i>Pracaris</i></p> |
|---|---|

Head of the Department
Date: 05/11/22
Dr. Anil R. Khande / DR. AMIT S. MHAMBRE
डीएनडी (श्रीरंजनाय) / DNB (PMR)



Sign & Stamp
Director of Training Centre
Dr. Hajj Ali, K. Khadye Mg.,
Hajj Ali, K. Khadye Mg.,
Mahaalaxmi
Mumbai - 400 034.

REG.NO.- 2002/06/2932
Dr. Hajj Ali, K. Khadye Mg.,
Mahaalaxmi
Mumbai - 400 034.

DEPARTMENTAL INFORMATION

(If required Use Separate Sheet for each Department / Fellowship/Certificate Course)

1. Fellowship Specialty Department to be inspected: Physical Medicine and Rehabilitation
2. Date on which independent department of: functioning concerned specialty was created and started
1st November 1955

3. Mentor's details (From start of department till date) :

Sr. No.	Name	Full Time/ Part Time	Designation	Qualification	Experience in Yrs. (after acquiring PG Qualification in concerned Subject)
1	Dr. Anil Kumar Gaur	Full time	Director	DNB (PMR)	25 years 3 months
2	Dr. Vivek Purnake	Full time	Consultant (Ortho)	MS (Ortho)	23 years 11 months
3	Dr. Amit Mhambre	Full time	Professor HOD PMR	DNB (PMR)	11 years 11 month
4	Dr. Vinay Goyal	Full time	Associate Professor	DNB (PMR)	11 years 03 month
5	Dr. Sumedh More	Full time	Associate Professor	DNB (PMR)	09 years 3 months
6	Dr. Mahesh Choudhary	Full time	Specialist GR- II	MS (Ortho)	4 years

4. Whether Independent Department of concerned Fellowship subject exists in the Institution :

Yes/No:

Since when: 1st November 1955

5. Specialty Department Infrastructure Details :

Facility	Area (sq.ft.)	Available	Not Available
Faculty rooms	1) 212.051 sq.ft	Yes	
	2) 191.75 sq.ft		
	3) 182.81 sq.ft		
	4) 191.75 sq.ft		
Clinics	934.95 sq.ft	Yes	
Laboratory Space	399.98 sq.ft	Yes	
Seminar room	1) 475.22 sq.ft	Yes	
	2) 337.34 sq.ft		
	3) 288.36 sq.ft		
Department Library	1440 sq.ft	Yes	
PG common room	Proposed in new building	Yes	
Pre-clinical lab (where ever applicable)	-		At Nair Hospital
Patient waiting room	1500 sq.ft	Yes	
Total area	6154.211 sq.ft		

6. If course already started, year wise number of students admitted and available Mentors to teach students admitted to Fellowship / Certificate Course during the last 3years:

Year	Name of the Course	No. of students admitted	No. of Valid Mentors available in the dept. (give names)
			Dr. Anil Kumar Gaur
			Dr. Vivek Purnake
			Dr. Amit Mhambre
			Dr. Vinay Goyal
			Dr. Sumedh More
			Dr. Mahesh Choudhary
2021-22	Fellowship Course in Rehabilitation Surgery	1	

(Local Inquiry Committee shall specifically ensure about availability of eligible/validated Mentor(s) and shall check whether the Training Center met with the Student: Mentor Ratio for the permitted Intake Capacity for each course or else it shall be reported in the Overall Remark Option.)

7. List of Non-teaching Staff in the department: List Attached

Sr. No.	Name	Designation
PROSTHETICS & ORTHOPTICS		
1	Mr. A.G.Indalkar	Lecturer & HOD P&O
2	Mr.D.P. Prabhu	Lecturer P&O
3	Mr.H.S.Dongare	Lecturer P&O
4	Mr. Makarand Saraf	Sr. Prosthetist
5	Mr. Manoj Tiwari	Sr. Orthotist
6	Mrs. Urmila Naukudkar	Jr. Prosthetist
7	Ms. Vaishali Nimje	Jr. Orthotist
8	Mr. Lukesh Bhuyar	Brace maker & Fitter
9	Mr. Kishan Singh	Asst. Brace maker
10	Mr. Devidas Thakre	Asst. Brace maker
11	P&O Workshop workers: 57	
OCCUPATIONAL THERAPY		
1	Mrs. Smita Jayavant	Lecturer & HOD OT
2	Mrs. Anita Gupta	Lecturer
3	Mrs. Vishakha Meshram	Asst.Lecturer O.T.
4	Mr.Sandeep Duphare	Occupational Therapist
5	Mrs. Swati Kurne	Occupational Therapist
PHYSIOTHERAPY		
1	Ms. Sandhya Wasnik	Lecturer & HOD Physiotherapy
2	Mr. R. Ravindran	Lecturer Physiotherapy
3	Mr. Vaibhav Dolas	Physiotherapist
4	Mrs. Sneha Saravana Kumar	Physiotherapist
5	Ms. Anita S	Physiotherapist
6	Mrs. Shweta Mahashur	Physiotherapist
7	Mr. Abdul Shaikh	Physiotherapy
8	Ms. Divya Sawant	Physiotherapy
9	Ms. Mansi Kochare	Physiotherapy
10	Ms. Pallavi Kasture	Physiotherapy
SPEECH THERAPY		
1	Mrs. Archana Acharya	Lecturer Speech Therapy
MEDICAL SOCIAL WORKS		
1	Mrs. Anjana Neglur	Lecturer (M.S.W.)
NURSING DEPARTMENT		
1	Smt. Kamal Waghmare	Sister Tutor
2	Mrs. Geeta Sharma	Staff Nurse
3	Mrs. Bharti Ukey	Senior Nursing Officer/ HOD Nursing Dept.
4	Mrs. Sajana James	Senior Nursing Officer
5	Mrs. Sharda Kamble	Nursing Officer
6	Mrs. Ranjita Kadam	Nursing Officer
7	Mrs. Sneha Waigankar	Nursing Officer
8	Mrs. Sakshi Patkar	Nursing Officer

9	Mrs. Sneha Golapkar	Nursing Officer
10	Mrs. Minal Mhapuskar	Nursing Officer
11	Mrs. Tresa Shaji	Nursing Officer
12	Mrs. Jinsi Wargis	Nursing Officer
13	Miss. Veena Pardhi	Nursing Officer

V.T.W

1	Mr. Uday Tambe	Manager V.T.W
2	Mr. Rajesh Pawar	Instructor
3	Mr. Ajit Bordavekar	Instructor
4	Mrs. Sulbha Joshi	Instructor
5	Mr. Chaitanya Patil	Photographer

BIO-MEDICAL ENGINEERING DEPARTMENT

1	Mr. Mangesh Mhatre	Bio-Medical Engineer
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Sr. No	Names	Post
ACADEMIC SECTION		
1	C.M.O. (SAG) Academic Incharge (Addl. Charge)	1
2	S.M.O./Dy Academic Incharge (Addl. Charge)	1
3	Lecturer & H.O.D. PT /Dy. Academic Incharge (Addl. Charge)	1
4	Lecturer & H.O.D. OT /Dy. Academic Incharge (Addl. Charge)	1
5	H.O.D. (P&O) /Dy. Academic Incharge (Addl. Charge)	1
6	UDC	1
7	LDC	1
8	Peon	1
9	Sweeper	1

ESTABLISHMENT

1	Administrative officer	1
2	Assistant workshop manager	1
3	Assistant Administrative Officer	1
4	UDC	3
5	LDC	4
6	Peon	2
7	Daftary	1
8	Private secretary to the director	1
9	Stenographer grade – II	1
10	Stenographer grade III	1
11	Assistant public relation officer	1
12	Librarian (grade III)	1

ACCOUNT SECTION		
1	Accountant	1
2	UDC (Cashier)	1
3	UDC	3
4	LDC	1
5	Peon	2

8. List of Equipment(s) in the department of concerned Fellowship subject: Equipment's: List of Important equipment's available and their functional status (List here only- No annexure to be attached)

Sr. No.	Name of the Equipment	Specification	Functional / Not Functional	Qty.
Equipment's for OPD				
	BP apparatus	Pneumatic	Functional	05
	Stethoscope		Functional	05
	Neurological examination try	Stainless steel	Functional	05
	Measuring Tape	Plastic	Functional	05
	Goniometer	Stainless steel	Functional	05
Equipment's for Operation Theatre				
	Surgical Drill Machine	ManMan	Functional	01
	Electrocautery machine	Shayla	Functional	01
	C Arm image intensifier	Adonis	Functional	01
	Tourniquet	Electronic	Functional	02
	C Arm compatible OT table		Functional	01
	Nerve stimulator	Brawn/ Inmed	Functional	09
	Autoclave	Stainless steel	Functional	01
	Scissor (curved)	Stainless steel	Functional	10
	Scissor (straight)	Stainless steel	Functional	10
	Scissor (suture removal tray)	Stainless steel	Functional	10
	Masquito	Stainless steel	Functional	10
	Artery forcep (medium)	Stainless steel	Functional	10
	Hammer	Stainless steel	Functional	03
	Osteotome no 5	Stainless steel	Functional	05
	Osteotome no 10	Stainless steel	Functional	05
	Osteotome no 15	Stainless steel	Functional	05
	Osteotome no 20	Stainless steel	Functional	05
	Stenman pins 2	Stainless steel	Functional	05
	Stenman pins 2.5	Stainless steel	Functional	05
	Stenman pins 3	Stainless steel	Functional	05
	Stenman pins 3.5	Stainless steel	Functional	05
	K wire 1 mm	Stainless steel	Functional	05
	K wire 1.5 mm	Stainless steel	Functional	05
	K wire 1.8 mm	Stainless steel	Functional	05
	K wire 2 mm	Stainless steel	Functional	05
	K wire 2.5 mm	Stainless steel	Functional	05
	K wire 3 mm	Stainless steel	Functional	05
	K wire 3.5 mm	Stainless steel	Functional	05
	Cancellous Screw	Stainless steel	Functional	10
	Cautery Points	Stainless steel	Functional	20
	Drill Sleeves Small size	Stainless steel	Functional	02
	Drill Sleeves Large size	Stainless steel	Functional	02

Drill bits 2	Stainless steel	Functional	10
Drill bits 2.5	Stainless steel	Functional	10
Drill bits 3.2	Stainless steel	Functional	10
Drill bits 3.5	Stainless steel	Functional	10
Drill bits 4	Stainless steel	Functional	10
Drill bits 4.5	Stainless steel	Functional	10
Reconstruction Plate 10 holes	Stainless steel	Functional	05
Reconstruction Plate 12 holes	Stainless steel	Functional	05
Harrington rod cutter	Stainless steel	Functional	05
Plyer	Stainless steel	Functional	03
Big Right angle Retractor	Stainless steel	Functional	03
Medium Right angle Retractor	Stainless steel	Functional	03
Small Right angle Retractor	Stainless steel	Functional	03
Head ring	Cloth	Functional	02
OT Gowns	Cloth	Functional	20
Lead Gown Stand	Stainless steel	Functional	06
C- Arm Cover	Cloth	Functional	02

9. Intensive care Service provided by the Department: (Emergency)

10. Specialty clinics being run by the department and number of patients in each :

Sr. No.	Name of the clinic	Days on which held	Timings	Average No. of cases attended	Name of Clinic In-charge
1	P & O Clinic	Tuesday, Friday	2.30 pm	4	Dr. Mahesh Choudhary
2	Case Conference Clinic	Wednesday	2.30 pm	1	Dr. Vinay Goyal
3	Diabetic Foot Clinic	Saturday	9.30 pm	2	Dr. Sumeeth More
4	Obesity Clinic	Thursday	3.00 pm	2	Dr. Sumeeth More
5	Cerebral Palsy Clinic	Thursday	2.30 pm	4	Dr. Amit Mhambre

11. Services provided by the Department:

- a) **Services**
 - i. **OPD services:** The department caters to persons with locomotor impairment like stroke, spinal cord injury, cerebral palsy, amputees, post-polio residual paralysis, and musculoskeletal conditions.
 - ii. **Inpatient services:** The department provides inpatient services to patients with locomotor impairment like stroke, spinal cord injury, cerebral palsy, amputees, post-polio residual paralysis, and musculoskeletal conditions.
 - iii. **Clinics:** The department also assesses patients with interdisciplinary approach in various clinics in various clinics like P&O clinic, Case conference clinic, Diabetic foot clinic, Obesity clinic, Cerebral palsy clinic.
 - iv. **Facilities:** The department has facilities for assessment of Body fat composition, urodynamic assessment, foot pressure analysis.
 - v. **Surgery :** The department provides surgical services for congenital deformity patients like CTEV, Cerebral palsy patients,
 - vi. **Spasticity management:** The department provides services like phenol motor point block and botulinum toxin injection in spastic muscles for reduction in spasticity and improvement in function.
 - vii. **Injections:** The department provides services like intraarticular injections, nerve blocks, radiofrequency ablation procedures for relief of musculoskeletal pain.
 - viii. **Certification:** The department issues disability certificates for persons with locomotor impairment through UDID portal, certificates for locomotor impairment for school exam benefits, income tax benefits and also participates in driving vehicular modification certification.

(b) Ancillary Services

(f) Others: _____

12. Space:

Sr. No	Details	In OPD	In IPPD
1	Patient Examination/ Checking Arrangement	603.37 sq.ft	100 sq.ft
2	Equipment's	Cupboard Available	Cupboard Available
3	Teaching Space	1500 sq.ft	100 sq.ft
4	Waiting area for patients	1500 sq.ft	150 sq.ft

13. Office space:

Department Office		Office Space for Teaching Faculty	
Space (Adequate)	Yes/No	HOD	191.75 sq.ft
Staff (Steno /Clerk).	Yes/No	Professors	191.75 sq.ft
Computer/ Typewriter	Yes/No	Associate Professors	182.81 sq.ft
Storage space for files	Yes/No	Assistant Profess or	191.75 sq.ft
		Residents	190.83 sq.ft (5 Rooms)

14. Clinical Load of Dept.: No of Surgeries / Procedures 04 Per week

15. Submission of data to National Authorities if any : Data is submitted to concerned Ministry.

(b) Ancillary Services

(f) Others: _____

12. Space:

Sr. No	Details	In OPD	In IPD
1	Patient Examination/ Checking Arrangement	603.37 sq.ft	100 sq.ft
2	Equipment's	Cupboard Available	Cupboard Available
3	Teaching Space	1500 sq.ft	100 sq.ft
4	Waiting area for patients	1500 sq.ft	150 sq.ft

13. Office space:

Department Office		Office Space for Teaching Faculty	
Space (Adequate)	Yes/No	HOD	191.75 sq.ft
Staff (Steno /Clerk).	Yes/No	Professors	191.75sq.ft
Computer/ Typewriter	Yes/No	Associate Professors	182.81 sq.ft
Storage space for files	Yes/No	Assistant Profess or	191.75 sq.ft
		Residents	190.83 sq.ft (5 Rooms)

14. Clinical Load of Dept.: No of Surgeries / Procedures 04 Per week

15. Submission of data to National Authorities if any : Data is submitted to concerned Ministry.

ANNEXURE - "E"

Information of Director of Training Centre

It shall be verified by the Head of the concerned Training Center,

Sr. No.	Particular	Information to be filled
01.	Name of the Director	: Dr. Anil Kumar Gaur
02.	Date of Birth	: 19/06/1964
03.	Address	: AIIPMR, K.Khade Marg, Haji Ali, Mahalaxmi, Mumbai-400034.
04.	Tel. No./ Mob. No.	: 022-23544341
05.	E-mail id	: director@aiipmr.gov.in
06.	Nationality	: Indian
07.	Qualification in details : (attach documentary proof)	: MBBS, DPMR, DNB (PMR) 1991, Safdarjung Hospital, New Delhi
08.	Teaching Experience / Health Sciences: Profession Experience (Attached document proof with signature of Head of the Institute. Also it is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)	: 25 years 03 months
09.	Present Appointment	: Director, AIIPMR, Mumbai
10.	Publications (List & Proof)	: List Attached
11.	Post Graduate Teaching experience (Attach documentary evidence)	: 25 years 03 months
12.	Any other relevant information	: -

Date: - ११/१२

Dr. Anil Kumar Gaur
Name & Sign. of Director

For the use of affiliated Training Center:

I have verified the eligibility of the above Director as per the criteria of eligibility prescribed by the University vide clause no. 7 of the University Direction No. 05/2017 (Amended).

Sign & Stamp
Head of the Department

Date: ०५/११/२२
DR. AMIT S. KHAMBARE

(Assistant Professor) / ONS (PMR)

REGISTRATION (AIIPMR) / PROFESSOR 1 (NS) (PMR)

REG. NO. / REG.NO.- 2002/05/2032

Dr. Anil Kumar Gaur / AIIPMR

Mumbai / MUMBAI-400 034



Sign & Stamp
Dean/Principal/Director of Training Centre

Date: ११/१२

Dr. Anil Kumar Gaur / AIIPMR

Haji Ali, K. Khadye Mg., Mahalaxmi

Mumbai - 400 034.

Publication of Dr. Anil Kumar Gaur-

1. Indexed in Medline, Dr. Sudhir Mishra, Dr. Anil Kumar Gaur, Dr. Mahesh Choudhary, Dr. Ramesh Jaysree , Percutaneous A1 Pulley Release by Tip of 20-Gauge Hypodermic Needle Before Open Surgical Procedure in Trigger Finger Management - 'Techniques in Hand and Upper Extremity Surgery' Volume 17, Number 2, June 2013
2. Indexed in Scopus, Dr. Parul Agarwal, Dr. Anil Gaur, Effect of obesity on Median nerve conduction at carpal tunnel in Indian females - National Journal of Physiology and Pharmacology, Volume -5, Issue 2, January 2015
3. Indexed in Pubmed, Scopus, Dr. Priyanka Saikia, Dr. Rajlaxmi Hariharan, Dr. Nachiket Shankar Dr. Anil Kumar Gaur, Dr. Naveen Mathew Jose, "Effective and economic offloading of diabetic foot ulcers in India with the Bohler Iron Plaster cast" - Indian Journal of Surgery First Online : 26th August 2015 (DOI : 10.1007/S12262-015-1327-3)
4. Indexed in Copernicus International, Dr. Sandip Rameshtrao Dhole, Dr. Anil Kumar Gaur, Study of Locomotor disability due to various types of trauma NJMR|Volume 5|Issue3|July-Sept 2015
5. Dr. Swapnil Sonune, Dr. Anil Kumar Gaur Comparison of USG guided suprascapular nerve block vs intraarticular steroid in Frozen Shoulder, International Journal of Research in Orthopedics, December 2016
6. Dr. Harshanand Popalwar, Dr. Anil Kumar Gaur, Dr. B.D.Athani, Dr. Jaysree Ramesh, Clinical examination and foot pressure analysis of Diabetic foot:- Tetrispective analytic study in Indian diabetic patients, National Journal of Medical research NJMR/ Volume 6/ Issue 1/Jan-Mar 2016; 17-22.
7. Dr. Amit Mhambre, Dr. Vivek Chawathe, Dr. Anil Kumar Gaur, Dr. Rajendra Sharma, Dr. Vivek Pusnake, Dr. Amey Joshi., The Institutional Demographic Profile of Amputation in Mumbai, Indian Journal of Applied Research/Vol-7/Issue 8/August-2017.
8. Dr. Vivek Chawathe, Dr. Amit Mhambre, Dr. Anil Kumar Gaur, Dr. Vivek Pusnake, Dr. Rajendra Sharma, Dr. Nima Wangdi, Prevalance of pain in Medical representatives using two wheeler for daily commute, Journal on Recent Advance in Pain, May- Aug-2017; 3(2) :61-65.
9. Dr. Vivek Chawathe, Dr. Anil Kumar Gaur, Dr. Amit Mhambre, Dr. Vivek Pusnake, Dr. Amey Joshi, Dr. Shaily Shah., The Role of Intra-Articular Injection Sodium Hyaluronate in Rehabilitation of Osteoarthritis Knee.,Vol-8,Issue-10, October-2018.
10. Dr. Mahesh Choudhary, Dr. Aradhana Shukla, Dr. Amit Mhambre, Dr. Anil Kumar Gaur., Osteoarthritis Knee Pain:- An unjustified diagnosis, International Journal of Healthcare and Biomedical Research, Volume-06, Issue 04 july,2018. 64-70.
11. Dr. Aradhana Shukla, Dr. Mahesh Choudhary(Corrsp),Dr. Anil Kumar Gaur, Offloading only as a means of Management of Neuropathic ulcers: a case series International Journal of Medical Science and Diagnosis Research (IJMSDR), Vol-2, Issue 04, July-Aug,2018 141-147.

Information of Mentor of Training Centre

It shall be verified by the Head of the concerned Training Center,

Sr. No.	Particular	Information to be filled
01.	Name of the Mentor	: Dr. Amit Mhambre
02.	Date of Birth	: 14/02/1979
03.	Address	: AIIPMR, K.Khadde Marg, Haji Ali, Mahalaxmi, Mumbai-400034.
04.	Tel. No./Mob. No.	: 022-23544341
05.	e-mail id	: drasm4u_gmc@hotmail.com
06.	Nationality	: Indian
07.	Qualification in details : (attach documentary proof)	: MBBS, DNB (PMR), 2009, AIIPMR
08.	Teaching Experience / Health Sciences: Profession Experience (Attached document proof with signature of Head of the Institute. Also it is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)	: 14 years 01Month
09.	Present Appointment	: Professor, HOD(PMR)
10.	Publications (List & Proof)	: List Attached
11.	Post Graduate Teaching experience (Attach documentary evidence)	: 11 Years and 02 month
12.	Any other relevant information	:

Date: - 15/11/20

Name & Sign. of Mentor

For the use of affiliated Training Center:

I have verified the eligibility of the above Mentor as per the criteria of eligibility prescribed by the University vide clause no.7 of the University Direction No. 05/2017 (Amended) and University Circular No. MUHS/UDC/FCCC/736/2019 dated 30/09/2019.

Sign & Stamp

Head of the Department

Date: 15/11/20

Dr. Amit S. Mhambre

Dr. Amit S. Mhambre (PMR) / DNB (PMR)

Professor & HOD (PMR)

REG.NO. 2002/08/2832

AIIPMR

MUMBAI-400 034.



Training Centre Rajiv Seal

Sign & Stamp

Dean/Principal/ Director of Training Centre

Date: 17/11/20

Dr. H. S. Joshi

Dr. H. S. Joshi (AIIPMR)

Haji Ali, K. Khadye Mg., Mahalaxmi

Mumbai - 400 034.

Publications of Dr. Amit Mhambre

1. Dr. Amit Mhambre, Dr. B.D.Athani, Comparison of pre operative and post operative clinical and radiological angels of foot in equinovarus deformity in cerebral palsy hemiplegic., Indian Journal of Applied Research/Vol-7/Issue 4/April-2017.
2. Dr. Amit Mhambre, Dr. Vivek Chawathe, Dr. Anil Kumar Gaur, Dr. Rajendra Sharma, Dr. Vivek Pūsnake, Dr. Amey Joshi., The Institutional Demographic Profile of Amputation in Mumbai, Indian Journal of Applied Research/Vol-7/Issue 8/August-2017.
3. Dr. Vivek Chawathe, Dr. Amit Mhambre, Dr. Anil Kumar Gaur, Dr. Vivek Pūsnake, Dr. Rajendra Sharma, Dr. Nima Wangdi, Prevalance of pain in Medical representatives using two wheeler for daily commute, Journal on Recent Advance in Pain, May- Aug-2017; 3(2) :61-65.
4. Dr. Vivek Chawathe, Dr. Anil Kumar Gaur, Dr. Amit Mhambre, Dr. Vivek Pūsnake, Dr. Amey Joshi, Dr. Shaily Şhah., The Role of Intra-Articular Injection Sodium Hyaluronate in Rehabilitation of Osteoarthritis Knee., Vol-8, Issue-10, October-2018.
5. Dr. Mahesh Choudhary, Dr. Aradhana Shukla, Dr. Amit Mhambre, Dr. Anil Kumar Gaur., Osteoarthritis Knee Pain:- An unjustified diagnosis, International Journal of Healthcare and Biomedical Research, Volume-06, Issue 04 July, 2018. 64-70.

ANNEXURE - "F"

Information of Mentor of Training Centre
It shall be verified by the Head of the concerned Training Center,

Sr. No.	Particular	Information to be filled
01.	Name of the Mentor	: Dr. Vivek Pusnake
02.	Date of Birth	: 21/02/1970
03.	Address	: AIIPMR, K.Khade Marg, Haji Ali, Mahalaxmi, Mumbai-400034.
04.	Tel. No./ Mob. No.	: 022-23544341
05.	e-mail id	: drvivek.pusnake@gmail.com
06.	Nationality	: Indian
07.	Qualification in details : (attach documentary proof)	: MBBS, MS(Ortho), JD Ortho
08.	Teaching Experience / Health Sciences: (Attached document proof with signature of Head of the Institute. Also it is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)	: 28 years
09.	Present Appointment	: Consultant (Ortho)
10.	Publications (List & Proof)	: List Attached
11.	Post Graduate Teaching experience (Attach documentary evidence)	: 14 years 5 months
12.	Any other relevant information	:

Date: -5/7/22

Name & Sign. of Mentor

For the use of affiliated Training Center:

I have verified the eligibility of the above Mentor as per the criteria of eligibility prescribed by the University vide clause no.7 of the University Direction No. 05/2017 (Amended) and University Circular No. MUHS/UDC/FCCC/736/2019 dated 30/09/2019.

Sign & Stamp
Head of the Department



Sign & Stamp
Dean/Principal/ Director of Training Centre

Date: 5/7/22
Dr. Amit Pusnake / DR. AMIT S. MHAMBRE

Training Centre Round Seal

Date: 8/7/22
Dr. S.K. Chitambar / DIRECTOR

REG. NO. - 2002/08/2032
A.I.I.P.M.R.
MUMBAI - 400 034

Haji Ali, K. Khadye Mg.-
Mahalaxmi/
Mumbai - 400 034.

Publications of Dr. V.J.Pusnake-

1. Dr. Amit Mhambre, Dr. Vivek Chawathe, Dr. Anil Kumar Gaur, Dr. Rajendra Sharma, Dr. Vivek Pusnake, Dr. Amey Joshi,, The Institutional Demographic Profile of Amputation in Mumbai, Indian Journal of Applied Research/Vol-7/Issue 8/August-2017.
2. Dr. Vivek Chawathe, Dr. Amit Mhambre, Dr. Anil Kumar Gaur, Dr. Vivek Pusnake, Dr. Rajendra Sharma, Dr. Nima Wangdi, Prevalance of pain in Medical representatives using two wheeler for daily commute, Journal on Recent Advance in Pain, May- Aug-2017; 3(2) :61-65.
3. Dr. Vivek Chawathe, Dr. Anil Kumar Gaur, Dr. Amit Mhambre, Dr. Vivek Pusnake,Dr. Amey Joshi, Dr. Shaily Shah., The Role of Intra-Articular Injection Sodium Hyaluronate in Rehabilitation of Osteoarthritis Knee.,Vol-8,Issue-10, October-2018.

Information of Mentor of Training Centre

It shall be verified by the Head of the concerned Training Centre,

Sr. No.	Particular	Information to be filled
01.	Name of the Mentor	: Dr. Mahesh Choudhary
02.	Date of Birth	: 03/08/1981
03.	Address	: AIIPMR, K. Khade Marg, Haji Ali, Mahalaxmi, Mumbai-400034.
04.	Tel. No./ Mob. No.	: 022-23544341
05.	e-mail id	: drmahichoudhary@gmail.com
06.	Nationality	: Indian
07.	Qualification in details : (attach documentary proof)	: MBBBS, MS(Ortho)
08.	Teaching Experience / Health Sciences: (Attached document proof with signature of Head of the Institute. Also it is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)	: 15 years 8 ½ month
09.	Present Appointment	: Specialist Grade-II PMR/Assistant Professor
10.	Publications (List & Proof)	: List Attached
11.	Post Graduate Teaching experience (Attach documentary evidence)	: 11 years 01 month
12.	Any other relevant information	: -

Date: - 5/11/22

Name & Sign. of Mentor

For the use of affiliated Training Center:

I have verified the eligibility of the above Mentor as per the criteria of eligibility prescribed by the University vide clause no.7 of the University Direction No. 05/2017 (Amended) and University Circular No. MUHS/UDC/FCCC/736/2019 dated 30/09/2019.

Sign & Stamp
Head of the DepartmentDate: 5/11/22
Dr. Amit S. Mhambre
(DNB (PMR))

PROFESSOR & HOD (PMR)

REG.NO. - 2002/08/2932

Dr. A. S. Mhambre / A.I.P.M.R.

Mumbai / Mumbai-400 034

Sign & Stamp
Dean/Principal/ Director of Training CentreDate: 8/11/22
Dr. A. S. Mhambre
(A.I.P.M.R.)
Haji Ali, K. Khade Marg,
Mahalaxmi
Mumbai - 400 034.

Publications of Dr. Mahesh choudhary

1. Indexed in Medline, Dr. Sudhir Mishra, Dr. Anil Kumar Gaur, Dr. Mahesh Choudhary, Dr. Ramesh Jaysree , Percutaneous A1 Pulley Release by Tip of 20-Gauge Hypodermic Needle Before Open Surgical Procedure in Trigger Finger Management - 'Techniques in Hand and Upper Extremity Surgery' Volume 17, Number 2, June 2013
2. Dr. Mahesh Choudhary, Dr. Aradhana Shukla, Dr. Amit Mhambre, Dr. Anil Kumar Gaur,, Osteoarthritis Knee Pain:- An unjustified diagnosis, International Journal of Healthcare and Biomedical Research, Volume-06, Issue 04 July,2018. 64-70.
3. Dr. Aradhana Shukla, Dr. Mahesh Choudhary(Corrsp),Dr. Anil Kumar Gaur, Offloading only as a means of Management of Neuropathic ulcers: a case series International Journal of Medical Science and Diagnosis Research (IJMSDR), Vol-2, Issue 04, July-Aug,2018 141-147.

ANNEXURE – “F”

Information of Mentor of Training Centre

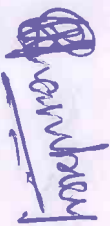
It shall be verified by the Head of the concerned Training Center,

Sr. No.	Particular	Information to be filled
01.	Name of the Mentor	: Dr. Vinay Goyal
02.	Date of Birth	: 13/08/1980
03.	Address	: AIIPMR, K.Khade Marg, Haji Ali, Mahalaxmi, Mumbai-400034.
04.	Tel. No./ Mob. No.	: 022-23544341
05.	e-mail id	: vinaygoyal80@gmail.com
06.	Nationality	: Indian
07.	Qualification in details : (attach documentary proof)	: MBBS, DPMR DNB(PMR) 2011 Safdarjung Hospital
08.	Teaching Experience / Health Sciences: Profession Experience (Attached document proof with signature of Head of the Institute. Also it is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)	: 13 years 04 month
09.	Present Appointment	: Associate Professor
10.	Publications (List & Proof)	: List Attached
11.	Post Graduate Teaching experience (Attach documentary evidence)	: 09 years 06 month
12.	Any other relevant information	: -

Date: - 31/12/22

For the use of affiliated Training Center:

I have verified the eligibility of the above Mentor as per the criteria of eligibility prescribed by the University vide clause no.7 of the University Direction No. 05/2017 (Amended) and University Circular No. MUHS/UDC/FCCC/736/2019 dated 30/09/2019.



Sign & Stamp

Head of the Department

Date: 31/12/22

डॉ. अमित स. खोबर / DR. AMIT S. KHAMBARE

डीन/सी. प्रिन्सिपल / DNB (PMR)

प्रधान एवं शिक्षण (विषय) / PROFESSOR & HOD (PMR)

पंजीयन / REG.NO.- 2002/08/2032

अ.प्र.सी.वि.सं. / AIIPMR



Sign & Stamp

Dean/ Principal/ Director of Training Centre

Date: 31/12/22

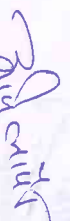
अ.प्र.सी.वि.सं./AIIPMR

डीन/सी. प्रिन्सिपल / DNB (PMR)

अ.प्र.सी.वि.सं./AIIPMR

पंजीयन / REG.NO.- 2002/08/2032

अ.प्र.सी.वि.सं. / AIIPMR



Name & Sign. of Mentor

Publications of Dr. Vinay Goyal

1. Mathew AJ, Chopra A, Thekkemuriylil DV, George E, Goyal V, Jayakumar B; Trivandrum COPCORD Study Group. Impact of musculoskeletal pain on physical function and health-related quality of life in a rural community in south India: AWHO-ILAR-COPCORD-BID India Study. Clin Rheumatol 2011 Nov; 30(11):1491-7
2. Mathew AJ, Goyal V, George E, Thekkemuriylil DV, Jayakumar B, Chopra A; Trivandrum COPCORD Study Group. Rheumatic-musculoskeletal pain and disorders in a naive group of individuals 15 months following a Chikungunya viral epidemic in south India: a population based observational study. Int J Clin Pract; 65(12):1306-1312
3. Goyal V, Laisram N, Wadhwa RK, Kothari SY. Comparative study of oral Diazepam and Baclofen on spasticity in Cerebral Palsy - Journal of Clinical Diagnosis and Research2016;10(16):RC01-RC05
4. Parakadi, Goyal V, Menon S. Quality of Life in Spinal Cord Injured patients with Neurogenic Bladder. IJAR 2017; 7(4):192-194
5. Goyal V, Laisram N, Muzaffar T, Bhatnagar S. Changing Trends in Clinical Profile of Cerebral Palsy. Indian J Phy Med Rehab 2016; 27 (1):10-13.
6. Goyal V, Sreekala VK. Institutional Clinical Profile of Hemophilic Arthropathy in Trivandrum. Indian Journal of Applied Research 2019 Oct;9(10)
7. Laisram N, Goyal V. Grading of Adductor Spasticity in Cerebral Palsy - A New Approach. IJPMR 2015; 26 (1):2-5

ANNEXURE - "F"

**Information of Mentor of Training Centre
It shall be verified by the Head of the concerned Training
Center,**

Sr. No.	Particular	Information to be filled
01.	Name of the Mentor	: Dr. Sumedh More
02.	Date of Birth	: 07/07/1981
03.	Address	: AIIPMR, K.Khade Marg, Haji Ali, Mahalaxmi, Mumbai-400034.
04.	Tel. No./ Mob. No.	: 022-23544341
05.	e-mail id	: drsumedhmore@gmail.com
06.	Nationality	: Indian
07.	Qualification in details : (attach documentary proof)	: MBBS, D Ortho DNB(PMR)
08.	Teaching Experience / Health Sciences: Profession Experience (Attached document proof with signature of Head of the Institute. Also it is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)	: 12 years 01 month
09.	Present Appointment	: Associate Professor
10.	Publications (List & Proof)	: List Attached
11.	Post Graduate Teaching experience (Attach documentary evidence)	: 09 years 01 month
12.	Any other relevant information	: -

Date: - 5/3/22

Name & Sign. of Mentor

For the use of affiliated Training Center:

I have verified the eligibility of the above Mentor as per the criteria of eligibility prescribed by the University vide clause no.7 of the University Direction No. 05/2017 (Amended) and University Circular No. MUHS/UDC/FCCC/736/2019 dated 30/09/2019.

Sign & Stamp
Head of the Department

(Signature)

Sign & Stamp
Dean/Principal/ Director of Training Centre

(Signature)

Date: 5/3/22
DR. AMIT S. KHAMBHARI

श्री. अमित प्र. खंबहरी / DR. AMIT S. KHAMBHARI
डीन/प्रिन्सिपल (पीएचआर) / DNB (PMR)
प्रोफेसर अथवा प्रोफेसर (पीएचआर) / PROFESSOR & HOD (PMR)



श्री. अमित प्र. खंबहरी / AIIPMR
डॉ. अमी. अ. खंबहरी मग.,
हाजी अली, क. खंबहरी मग.,
महालाक्ष्मी/ Mahalaxmi
मुंबई/ Mumbai - 400 034.

योजना / REG.NO.- 2002/08/2932
अ.भा.श्री.वि.मु.सं. / AIIPMR

Publications of Dr. Sumedh More-

1. NATIONAL JOURNAL OF MEDICAL RESEARCH

Print ISSN: 2249 4995 | eISSN: 2277 8810 NIMR Volume 5 | Issue 3 July -- Sept 2015 Page 194

STUDY OF LOCOMOTOR DISABILITY DUE TO VARIOUS TYPES OF TRAUMA

Sandip Ramesh Rao Dhole1, Anil Kumar Gaur2,

Sumedh Narayan More 3, Harshanand Popalwar4, Vaibhav Lokhande 5

Author's Affiliations:

1Senior Resident, Post Graduate Institute of Medical Education & Research, Chandigarh;

2Deputy Director and Head of Department,

5 Registrar, All India Institute of Physical Medicine & Rehabilitation, Haji Ali, Mumbai; 3Senior Resident, All India Institute of Medical Sciences, New Delhi; 4Senior Resident, All India Institute of Medical Sciences, Bhopal, India.

2. International Journal of Research in Medical Sciences.

2020 Apr; 8(4): xxx-xxx www.msjonline.org pISSN 2320-6071 | eISSN 2320-6012

Received: 22 January 2020 Revised: 05 February 2020 Accepted: 28 February 2020

Original Research Article Comparison of urodynamic parameters with respect to neurological levels in post-traumatic spinal cord injury patients

Rohit Ramesh Gaikar1*,

Anil Kumar Gaur1,

Sumedh Narayan More1, Vaibhav Shivram Lokhande2, Amol Babanrao Khade3

1 Department of Physical Medicine and Rehabilitation, All India Institute of Physical Medicine and Rehabilitation, Mumbai, Maharashtra, India

2Department of Physical Medicine and Rehabilitation, Sakara World Hospital, Bengaluru, India

3Department of Physical Medicine and Rehabilitation, Lakhiram Agarwal Memorial, Government Medical College, Raigarh, Chhattisgarh, India

Received: 22 January 2020 Revised: 05 February 2020 Accepted: 28 February 2020

3.Treatment of chronic, non-healing ulcer Neuropathic ulcer in a pediatric patient with spinal dysraphism: Case report.

Wound management and prevention2020;66(12):29-33doi:10.25270/wmp.2020.12.2933

Dr. Ameya Joshi, Dr. Sumedh More, Dr. Amit Subhash Mhambre

Received: 22 January 2020 Revised: 05 February 2020 Accepted: 28 February 2020

4. Improvement in quality of life after Ultrasound guided Saphenous Nerve Block in Patients with Knee Osteoarthritis

Cureus 14(5) : e25060 doi: 10.7759/cureus.25060

ANNEXURE - "G"

Information of Co-ordinator of Training Centre

It shall be verified by the Head of the concerned Training Center,

Sr. No.	Particular	Information to be filled
01.	Name of the Co-ordinator	: Dr. Nima Wangdi
02.	Date of Birth	: 11/04/1965
03.	Address	: AIIPMR, K.Khade Marg, Haji Ali, Mahalaxmi, Mumbai-400034.
04.	Mob. No.	: 022-23544341
05.	E-mail id	: drnimawangdi@gmail.com
06.	Nationality	: Indian
07.	Qualification in details : (attach documentary proof)	: MBBS, MDD(PSM)
08.	Present Appointment	: Additional Director
09.	Any other relevant information	-

Date: 5/11/22



N L Wangdi
Sign. of Co-ordinator

Sign & Stamp

Head of the Department

Date: 5/11/22

डॉ. अमित राज. शर्मा / DR. AMIT S. MHAMBRE

डीन/डी (पीएमआर) / DNB (PMR)

प्रोफेसर डॉ. विभागाध्यक्ष (पीएमआर) / PROFESSOR & HOD (PMR)

फोन नं. / REG.NO. - 2002/08/2032

अ.स.स.सि.पु.सं. / AIIPMR

मुंबई / MUMBAI- 400 034.



Sign & Stamp

Dean/Principal/ Director of Training Centre

Date: 8/11/22

निदेशक/DIRECTOR

अ.स.स.सि.पु.सं./AIIPMR.

बाजी अली, के. खादये मार्ग,

Haji Ali, K. Khadye Mg.,

महालाक्ष्मी/Mahalaxmi

मुंबई/Mumbai - 400 034.



ANNEXURE - "G"

Information of Co-ordinator of Training Centre

It shall be verified by the Head of the concerned Training Centre,

Sr. No.	Particular	Information to be filled
01.	Name of the Co-ordinator	: Dr. Nima Wangdi
02.	Date of Birth	: 11/04/1965
03.	Address	: AIIPMR, K.Khade Marg, Haji Ali, Mahalaxmi, Mumbai-400034.
04.	Mob. No.	: 022-23544341
05.	E-mail id	: drnimawangdi@gmail.com
06.	Nationality	: Indian
07.	Qualification in details : (attach documentary proof)	: MBBS, MDD(PSM)
08.	Present Appointment	: Additional Director
09.	Any other relevant information	-

Date: ११/०४/२०२२

N L Wangdi
Sign. of Co-ordinator

Sign & Stamp

Head of the Department

Date: ११/०४/२०२२

डॉ. अमित एस. खादे / DR. AMIT S. KHADGE

डॉ. अमित एस. खादे (पीएमआर) / DNB (PMR)

गणपत स्व विभागाध्यक्ष (पीएमआर) / PROFESSOR & HOD (PMR)

पंजीयन / REG.NO. - 2002/08/2932

अ.भा.सौ.चि.मु.सं. / A.I.I.P.M.R.

मुंबई / MUMBAI-400 034.



Sign & Stamp

Dean/ Principal/ Director of Training Centre

Date: ११/०४/२०२२

निदेशक/DIRECTOR

अ.भा.सौ.चि.मु.सं./A.I.I.P.M.R.

हाजी अली, क. खादे मार्ग,

हाजी अली, K. Khade Marg,

महालाक्ष्मी/Mahalaxmi

मुंबई/Mumbai - 400 034.

DECLARATION

I, the Dean / Director/ Principal of the **All India Institute of Physical Medicine and Rehabilitation, Haji Ali, Mumbai**, Institute solemnly states on affirmation, that the information provided by me in Inspection Format as well as uploaded on Training Centre Website along with all Annexures is true and correct to the best of my knowledge. The said information is provided to me by the concerned teachers and duly verified by me. It is further submitted the teacher's information attached in respective **Annexure-F** are not working in / at any other Training Centre /Institute or presented themselves at any inspection for the Academic Year **2022-2023**, as per my knowledge and information provided by the concerned teachers. The teachers in the **Annexure-F** are staying in the same city where the Institute is situated or adjacent to the city where the Institute is situated and having the valid proof of residence of the said city. The teachers in the **Annexure- F** are not practicing in Training Centre working hours or out-side the City where the Institute is situated.

I am further hereby declare that every information or contents in this LIC Format is based on the information provided by the concerned teachers and endorsed by me after due verification and the same are absolutely true and correct. If at any stage it is revealed that any information or content given in this declaration is not true and correct, in such event the undersigned/ the concerned teacher as the case may be, shall be liable for disciplinary action or penal action or Affiliation of the Training Centre shall be withdrawal, as the case may be.

This declaration is voluntarily signed by me on **8th** Day of **July**...**2022** At **Mumbai**

Date: **Member**

Place: **8/7/22**

Member

Dr. Anil Kumar Gade

Signature of Dean/Principal/Director/Name of the Signatory
(With Seal of the Training Centre)

निदेशक/डायरेक्टर

डॉ. आ. सी. वि. सु. सं. /A.I.I.P.M.R.

हाजी अली, क. खाद्ये मंग.

Haji Ali, K. Khadye Mg.,

मंगलेशी/ Mahalaxmi

मुंबई/ Mumbai - 400 034.