

## ANNEXURE- VIII-A

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Name of the College: P. R. Pote Patil College of Medical Sciences Ayurved, Amravati

Phone/Mobile No. : 9422140500

Name of the Subject : Samhita Siddhant

Sr. No.	College Name	Subject	Name of Teacher (Last Name, First Name Middle Name)	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	P. R. Pote Patil College of Medical Sciences Ayurved, Amravati	Samhita Siddhant	Vd. Bhutada Shyamsunder Liladharji	Professor /Principal	01-02-22	BAMS 1985	MD 1996	24 Years	Yes	MUHS/E-3/UG/964/2023 06/04/2023	2950 9108 5716	AGNPB 2890A	31-05-61	drshyambhutada@gmail.com	94221 40500	NO
2	P. R. Pote Patil College of Medical Sciences Ayurved, Amravati	Samhita Siddhant	Vd. Ashwini Ashokrao Wani	Assistant Professor	04-12-24	BAMS 2016	MD 2021	0.1 Year	No	-	3107 5783 2557	ACHPW 8945P	23-04-91	drashwiniawani@gmail.com	70575 97422	NO
3	P. R. Pote Patil College of Medical Sciences Ayurved, Amravati	Samhita Siddhant	Dr. Pragati P. Wajire	Assistant Professor	17-10-23	BAMS 2018	MD 2023	1.9 Year	Yes	MUHS/E-3/UG/125124/62/2023 24/05/2024	2498 0866 0949	ADNPW 7658L	09-08-94	pragatiwajire@gmail.com	89998 02520	NO
4	P. R. Pote Patil College of Medical Sciences Ayurved, Amravati	Sanskrit	Jain Neelima Atul	Assistant Professor	01-04-22	BA 2004	MA Sanskrit 2008	08 Years	Yes	MUHS/E-3/UG/964/2023 06/04/2023	6977 1267 0676	ALWPJ 4151E	21-04-84	neelima21amt@gmail.com	98344 25439	NO

Signature &amp; Seal of Dean/Principal

P.R. Pote Patil College of Medical Sciences  
Ayurved, Amravati

**ANNEXURE- VIII-A****MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK****SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)****Name of the College: P. R. Pote Patil College of Medical Sciences Ayurved, Amravati****Phone/Mobile No. : 9422140500****Name of the Subject : Kriya Sharir**

Sr. No.	College Name	Subject	Name of Teacher (Last Name, First Name Middle Name)	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	P. R. Pote Patil College of Medical Sciences Ayurved, Amravati	Kriya Sharir	Dr. Tappe Bhargav Gangadhar	Associate Professor (Reader)	28-03-23	BAMS 2009	MD Kriya Sharir 2015	8.1 Years	Yes	MUHS/E-3/UG/12512 4/62/2023 24/05/2024	9340 6170 1347	AUTPT 5541L	06-01-87	tappe.bhargav@gmail.com	99227 97054	No
2	P. R. Pote Patil College of Medical Sciences Ayurved, Amravati	Kriya Sharir	Vd. Korde Ankita Vinayakrao	Assistant Professor	24-02-23	BAMS 2014	MD Kriya Sharir 2019	2.5 Years	Yes	MUHS/E-3/UG/12512 4/1037/2023 19/04/2023	9672 3203 3707	DNUPK 7863R	06-08-90	kordeankita22@gmail.com	95274 96168	No

Signature &amp; Seal of Dean/Principal

Principal  
P.R. Pote Patil College of Medical Sciences  
Ayurved, Amravati

**ANNEXURE- VIII-A**

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**

**SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

**Name of the College: P. R. Pote Patil College of Medical Sciences Ayurved, Amravati**

**Phone/Mobile No. : 9422140500**

**Name of the Subject : Rachana Sharir**

Sr. No.	College Name	Subject	Name of Teacher (Last Name, First Name Middle Name)	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	P. R. Pote Patil College of Medical Sciences Ayurved, Amravati	Rachana Sharir	Vd. Deshmukh Ranjit Anil	Professor	01-04-22	BAMS 2007	MD Rachana Sharir 2011	12.6 Years	Yes	MUHS/E-3/UG/964/2023 06/04/2023	8773 8797 6698	ASYPD 4499C	08-05-83	dranjitanils@gmail.com	98340 73280	NO
2	P. R. Pote Patil College of Medical Sciences Ayurved, Amravati	Rachana Sharir	Vd. Bhairavi Ravindra Desshmukh	Assistant Professor	27-08-24	BAMS 2017	MD Rachana Sharir 2022	1.5 Years	NO	-	6764 3461 1687	EJCPD 3668E	29-06-93	bhairavideshmukh26@gmail.com	91756 91857	NO

Signature & Seal of Dean/Principal

**Principal**

P.R. Pote Patil College of Medical Sciences  
Ayurved, Amravati

**ANNEXURE- VIII-A**

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**Name of the College: P. R. Pote Patil College of Medical Sciences Ayurved, Amravati**

**Phone/Mobile No. : 9422140500**

**Name of the Subject : Dravyaguna Vigyana**

Sr. No.	College Name	Subject	Name of Teacher (Last Name, First Name Middle Name)	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	P. R. Pote Patil College of Medical Sciences Ayurved	Dravyaguna Vigyana	Vd. Ovi Nandkishor Shinde	Asso. Prof	27-09-24	BAMS 2007	MD 2016	7.0 Year	No	-	9883 8565 6830	HCZPS 7675R	20-05-1985 (39)	dr.ovishinde11@gmail.com	99704 63890	NO
2	P. R. Pote Patil College of Medical Sciences Ayurved	Dravyaguna Vigyana	Dr. Parul P. Nandgaonkar	Asst. Prof.	11-11-23	BAMS 2015	MD 2019	2.6 Year	Yes	MUHS/E-3/UG/12512 4/62/2023 24/05/2024	6817 9787 3626	ALXPN4 877G	04-10-1992 (32)	nandgaonkarpp@gmail.com	94043 01648	NO

  
 Signature & Seal of Dean/Principal  
**Principal**  
 P.R. Pote Patil College of Medical Sciences  
 Ayurved, Amravati

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**SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

**Name of the College: P. R. Pote Patil College of Medical Sciences Ayurved, Amravati**

**Phone/Mobile No. : 9422140500**

**Name of the Subject : Rasashastra evam Bhaisajya Kalpana**

Sr. No.	College Name	Subject	Name of Teacher (Last Name, First Name Middle Name)	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	P. R. Pote Patil College of Medical Sciences Ayurved	Rasashastra evam Bhaisajya Kalpana	Vd. Gaurkhede Megha Anil	Associate Professor	19-12-23	BAMS 2012	MD 2017	6.6 Years	Yes	MUHS/E-3/UG/1251 24/62/2024 24/05/2024	4365 6256 3321	BRLPG8 599M	14-09-89	gaurkhede.megha4@gmail.com	94225 41687	No
2	P. R. Pote Patil College of Medical Sciences Ayurved	Rasashastra evam Bhaisajya Kalpana	Vd. Shailendradatta Anildatta Mishra	Assistant Professor	01-01-25	BAMS 2012	MD 2017	1.7 Years	No	-	7548 7717 1501	CPMPM 3772E	27-08-88	shailendra.mishra1988@gmail.com	84840 41193	No

Signature & Seal of Dean/Principal

**Principal**  
P.R. Pote Patil College of Medical Sciences  
Ayurved, Amravati



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**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**


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**Name of the College: P. R. Pote Patil College of Medical Sciences Ayurved, Amravati**

**Phone/Mobile No. : 9422140500**

**Name of the Subject : Roga Nidan evam Vikriti vigyana**

Sr. No.	College Name	Subject	Name of Teacher (Last Name, First Name Middle Name)	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	P. R. Pote Patil College of Medical Sciences Ayurved, Amravati	Roga Nidan evam Vikriti vigyana	Dr. Swati R. Dhamnikar	Associate Professor	30-12-23	BAMS 2013	MD 2017	7.2 Years	Yes	MUHS/E-3/UG/1251 24/62/2024 24/05/2024	5637 3955 0586	DFVPD0 955N	24-12-88	swatirdham24@gmail.com	95792 92134	No
2	P. R. Pote Patil College of Medical Sciences Ayurved, Amravati	Roga Nidan evam Vikriti vigyana	Dr. Bharti V. Bire	Assistant Professor	02-12-23	BAMS 2012	MD 2016	4.11 Years	Yes	MUHS/E-3/UG/1251 24/62/2024 24/05/2024	8406 3152 9041	BPIP75 64Q	29-07-88	dr.bhartibire@gmail.com	90965 96605	No

  
 Signature & Seal of Dean/Principal  
**Principal**  
 P.R. Pote Patil College of Medical Sciences  
 Ayurved, Amravati

**ANNEXURE- VIII-A****MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK****SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)****Name of the College: P. R. Pote Patil College of Medical Sciences Ayurved, Amravati****Phone/Mobile No. : 9422140500****Name of the Subject : Swasthavritta and Yoga**

Sr. No.	College Name	Subject	Name of Teacher (Last Name, First Name Middle Name)	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	P. R. Pote Patil College of Medical Sciences Ayurved	Swasthavritta and Yoga	Vd. Manoday Purushottam Mohod	Associate Professor	27-11-24	BAMS 2013	MD 2018	6 years	No	-	3398 8228 1604	CMIPM 9542D	02-12-88	manodaymohod@gmail.com	94217 88006	No
2	P. R. Pote Patil College of Medical Sciences Ayurved	Swasthavritta and Yoga	Vd. Thakare Sonali Shridharrao	Assistant Professor	03-01-23	BAMS 2007	MD 2019	2.1	Yes	MUHS/E-3/UG/1251 24/62/2023 24/05/2024	6232 5202 5541	ABJPI58 96E	14-09-83	dr.sonalthakre@gmail.com	96892 20453	No

Signature &amp; Seal of Dean/Principal

**Principal**P.R. Pote Patil College of Medical Sciences  
Ayurved, Amravati

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**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**


**SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

**Name of the College: P. R. Pote Patil College of Medical Sciences Ayurved, Amravati**

**Phone/Mobile No. : 9422140500**

**Name of the Subject : Agad Tantra evam Vidhi Vaidyaka**

Sr. No.	College Name	Subject	Name of Teacher (Last Name, First Name Middle Name)	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	P. R. Pote Patil College of Medical Sciences Ayurved, Amravati	Agad Tantra evam Vidhi Vaidyaka	Vd. Charandas Govindrao Gadekar	Associate Professor	31-08-24	BAMS 2013	MD 2017	6.7 Years	-	-	7239 3583 7878	BQAPG07 58C	08-10-88	dr.charandasgadekar@gmail.com	89567 13541	No
1	P. R. Pote Patil College of Medical Sciences Ayurved, Amravati	Agad Tantra evam Vidhi Vaidyaka	Dr. Swati A. Sawarkar	Assistant Professor	03-01-23	BAMS	MD	3.10 Years	Yes	MUHS/E 3/UG/1 25124/6 2/2023 24/05/2024	2373 0022 4734	CONPB33 22R	03-06-88	swatisawarkar07@gmail.com	86689 63868	No

  
 Signature & Seal of Dean/Principal  
**Principal**  
 P.R. Pote Patil College of Medical Sciences  
 Ayurved, Amravati