

## DEPARTMENTAL INFORMATION

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

1. Fellowship Specialty Department to be inspected:..... FETAL MEDICINE
2. Date on which independent department of: functioning concerned specialty was created and started  
..... PERINATOLOGY OPD FUNCTIONING SINCE 01/05/2010
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 P.R. SATSKAR   | FULL TIME            | PROFESSOR           | MD, DNB, FRUG                  | 34 yrs   |
| 2       | DR VANDANA BANSAL | FULL TIME            | ASSOCIATE PROFESSOR | MD, DGO, MRUG, FNB, DNB, FICDA | 20 yrs   |

4. Whether Independent Department of concerned Fellowship subject exists in the Institution :  
Yes/No: ..... Since when: .....
5. Specialty Department Infrastructure Details :

| Facility                                 | Area (sft.)   | Available | Not Available |
|--|---------------|-----------|---------------|
| Faculty rooms                            | 241 sq ft     | ✓         |               |
| Clinics                                  |               |           |               |
| Laboratory Space                         | 1627.75 sq ft | ✓         |               |
| Seminar room                             | 2140.99 sq ft | ✓         |               |
| Department Library                       | 1971.80 sq ft | ✓         |               |
| PG common room                           |               |           |               |
| Pre-clinical lab (where ever applicable) |               |           |               |
| Patient waiting room                     | 343.38 sq ft  | ✓         |               |
| Total area                               |               |           |               |

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 3 years:

| Year | Name of the Course | No. of students admitted | No. of Valid Mentors available in the dept. (give names) |
|------|--------------------|--------------------------|--|
| 2018 | FETAL MEDICINE     | 2                        | DR P.R. SATSKAR.   |
| 2019 |                    | 2                        |  |
| 2020 | FELLOWSHIP         | 2                        | DR VANDANA BANSAL  |
| 2021 |                    |                          |  |

(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 |
|---------|------|-------------|
|         |      |             |
|         |      |             |

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) LIST ATTACHED

| Sr. No. | Name of the Equipment | Specification | Functional / Not Functional | Qty. |
|---------|-----------------------|---------------|-----------------------------|------|
|         |                       |               |                             |      |
|         |                       |               |                             |      |

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

IN LABOUR WARD  
WHEN INDICATED

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       | PERINATOLOGY       | MON                | 9am-2pm | ≈ 10-12                       | DR VANDANA BANSAL        |
|         | OPD                | WED                | 9am-2pm | ≈ 10-12                       | DR P. R. SATOSKAR        |
|         |                    | FRI                |         | ≈ 10-12                       | DR G. D. BALSARKAR       |

11. Services provided by the Department:

a) Services

- i. OPD WITH COUNSELLING OF COUPLE
- ii. ULTRASONOGRAPHY (NT/NB SCAN, ANOMALY SCAN, COLOUR DOPPLER, USG ROUTINE, FETAL GROWTH)
- iii. USG GUIDED INVASIVE PROCEDURES

(b) Ancillary Services

(f) Others: \_\_\_\_\_

12. Space:

| Sr. No | Details                                   | In OPD | In IPD |
|--------|---|--------|--------|
| 1      | Patient Examination/ Checking Arrangement | ✓      | ✓      |
| 2      | Equipment's                               | ✓      | ✓      |
| 3      | Teaching Space                            | ✓      | ✓      |
| 4      | Waiting area for patients                 | ✓      | ✓      |

13. Office space:

| Department Office       |          | Office Space for Teaching Faculty |   |
|-------------------------|----------|-----------------------------------|---|
| Space (Adequate)        | ✓ Yes/No | HOD                               | ✓ |
| Staff (Steno /Clerk).   | ✓ Yes/No | Professors                        | ✓ |
| Computer/ Typewriter    | ✓ Yes/No | Associate Professors              | ✓ |
| Storage space for files | ✓ Yes/No | Assistant Profess or              | ✓ |
|                         |          | Residents                         | ✓ |

14. Clinical Load of Dept.: No of Surgeries / Procedures ..... 3-5 ..... Per day

15. Submission of data to National Authorities if any : PCPNDT ( DAILY + MONTHLY )  
MTP - (MONTHLY)