

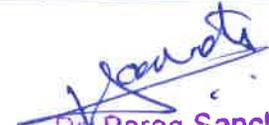
**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK  
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG COURSES)**

**Name of the College** - Sancheti Institute for Orthopaedics & Rehabilitation, Post Graduate College,16, Shivajinagar, Pune - 411005.

**Office No.** 020 - 25536262 / 28999134

**Name of the Subject** - Orthopaedics

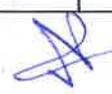
Sr. No.	Name of Teacher (Last Name, First Name, Middle Name)	Designation	Subject / Speciality	Type of Appointment (Regular / Temp. Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years) (After PG)	PG Teacher Recognition (Yes / No)	Recognition letter Date issued by University	No. of PG Students guided last 5 Year	Date of Birth	Email ID	Mobile No.	Aadhar Card No.	If debarred, specify with details (Yes /No)	Signature of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Sancheti Parag Kantilal	Professor & Dean	Orthopaedics	Regular	M.S.Ortho., DNB (Ortho), F.ASIF (SWISS), M.Ch. (Ortho.)		32	Yes	MUHS/PG/E-1/ Sancheti Inst/54/08 Date – 25/01/2008  MUHS/PG/E-1/ 6202/1521/13 Date – 11/06/2013  MUHS/PG/E-1/6202/2599/14 Date – 29/09/2014	14	19/05/1967	parag@sanchetihospital.org	8888553333	562815497060	No	

  
Dr. Parag Sancheti  
Dean



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 PG)	PG Teacher Recognition (Yes / No)	Recognition letter Date issued by University	No. of PG Students guided last 5 Year	Date of Birth	Email ID	Mobile No.	Aadhar Card No.	If debarred, specify with details (Yes / No)	Signature of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
2	Dr. Joshi Rajeev Shriprakashchandra	Professor	Orthopaedics	Regular	M.S.Ortho.		34	Yes	MUHS/PG/E-1/Sancheti Inst/430/2008 Date – 15/04/2008  MUHS/PG/E-1/6202/1521/13 Date – 11/06/2013	14	21/10/1960	orthojoshi@gmail.com	9922742610	602476619099	No	
3	Dr. Patwardhan Sandeep Arvind	Professor	Orthopaedics	Regular	M.S. Ortho., D'Ortho. (CPS)		28	Yes	MUHS/PG/E-1/PG/6202/1267/08 Date – 10/10/2008  MUHS/PG/E-1/6202/27/2392/18 Date – 14/06/2018	14	1/8/1969	sandappa@gmail.com	9823063989	275830014723	No	
4	Dr. Pradhan Chetan Vijay	Professor	Orthopaedics	Regular	M.S.Ortho.		28	Yes	MUHS/PG/E-1/PG/6202/1267/08 Date – 10/10/2008  MUHS/PG/E-1/6202/1521/13 Date – 11/06/2013 MUHS/PG/E-1/6202/27/2392/18 Date - 14/06/2018	14	11/11/1969	pradhanchetan@hotmail.com	9823030657	576076289370	No	

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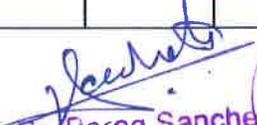


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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	15	17
5	Dr. Patil Atul Ashok	Professor	Orthopaedics	Temp	M.S. Ortho.		24	Yes	MUHS/PG/E-1/6202/789/10 Date - 05/05/2010  MUHS/PG/E-1/6202/1521/13 Date - 11/06/2013  MUHS/PG/E-1/102110/5631/2022 Date- 22/12/2022 MUHS/UG/E-1/53/1301/702/2024 Date - 26/03/2024	11	27/06/1974	atulapatil@hotmail.com	9545457660	286539384628	No	
6	Dr. Puram Chetan Prabhakar	Professor	Orthopaedics	Temp	M.S.Ortho.		22	Yes	MUHS/PG/E-1/6202/789/10 Date - 05/05/2010  MUHS/PG/E-1/6202/1521/13 Date - 11/06/2013  MUHS/PG/E-1/102110/5631/2022 Date- 22/12/2022 MUHS/UG/E-1/53/1301/702/2024 Date - 26/03/2024	11	4/3/1974	chetanpuram@yahoo.com	9822055873	770973003480	No	



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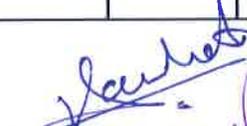
Sr. No.	Name of Teacher (Last Name, First Name, Middle Name)	Designation	Subject / Speciality	Type of Appointment (Regular / Temp. Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years) (After PG)	PG Teacher Recognition (Yes / No)	Recognition letter Date issued by University	No. of PG Students guided last 5 Year	Date of Birth	Email ID	Mobile No.	Aadhar Card No.	If debarred, specify with details (Yes/No)	Signature of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
7	Dr. Ashok Kumar Shyam Murari	Associate Professor	Orthopaedics	Regular	M.S.Ortho.		15	Yes	MUHS/PG/E-1/6202/2599/14 Date – 29/09/2014  MUHS/PG/E-1/6202/27/2392/18 Date - 14/06/2018	5	6/2/1978	drashokshyam@yahoo.co.uk	9833110366	920799328447	No	
8	Dr. Kothari Ajay Ramesh	Associate Professor	Orthopaedics	Temporary	DNB Ortho.		15	Yes	MUHS/PG/E-1/6202/27/75/21 Date – 07/01/2021  MUHS/PG/E-1/102110/5631/2022 Date- 22/12/2022	4	24/09/1981	drjaykothari@gmail.com	9324963536	738498591823	No	
9	Dr. Kailas Dilip Patil	Associate Professor	Orthopaedics	Temporary	D'Ortho., DNB Ortho.		16	Yes	MUHS/PG/E-1/6202/27/75/21 Date – 07/01/2021  MUHS/PG/E-1/102110/5631/2022 Date- 22/12/2022  MUHS/UG/E-1/53/1301/702/2024 Date - 26/03/2024	4	17/07/1979	drkailashpatil@yahoo.com	9890496959	948742527694	No	

  
**Dr. Parag Sanche**  
 Dean





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 PG)	PG Teacher Recognition (Yes / No)	Recognition letter Date issued by University	No. of PG Students guided last 5 Year	Date of Birth & Age	Email ID	Mobile No.	Aadhar Card No.	If debarred, specify with details (Yes /No)	Signature of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
10	Dr. Sunny Gugale	Assistant Professor	Orthopaedics	Temporary	DNB Ortho.		13	Yes	MUHS/PG/E-1/6202/27/75/21 Date – 07/01/2021  MUHS/PG/E-1/102110/5631/2022 Date-22/12/2022	---	24/09/1984	dr.sunnygugale@gmail.com	9766304876	306776072586	No	
11	Dr. Siddharth Aiyer	Assistant Professor	Orthopaedics	Temporary	M.S.Ortho.		5	Yes	MUHS/PG/E-1/102110/5631/2022 Date-22/12/2022	--	12/7/1983	aiyer.siddharth@gmail.com	9566908772	804150989949	No	
12	Dr. Warid Altaf	Assistant Professor	Orthopaedics	Temporary	D'Ortho. DNB Ortho.		9	Yes	MUHS/UG/E-1/53/1301/702/2024	---	9/12/1983	waridaltaf@gmail.com	9674015581	264355753555	No	

  
**Dr. Parag Sancheti**  
 Dean





Data Verified by the Committee Members :

Member

Member

Chariman