

ANNEXURE- VIII

FOR FELLOWSHIP/CERTIFICATE COURSE(S) FOR A.Y. 20.....-20.....

(As per provisions of the Maharashtra University of Health Sciences Act, 1998 and University Rule / Guidelines)

Date of Inspection	:	
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1. Name(s) of the Fellowship/Certificate Course(s)

Sr. No.	Name of the Fellowship/Certificate Course	Course Started from the Academic Year	Intake Capacity Sanctioned by the University	Name of Mentor and Contact Details
01	Fellowship in Infectious Disease	2019	10	Dr Kavita Joshi - 9869788359
02	Fellowship in Critical Care	2018	2	Dr Nitin Sarate- 9920920437

2. Year-wise number of students admitted to Fellowship/ Certificate course during last 5 years

Sr. No.	Academic Year	Name of Fellowship / Certificate Course	Intake Capacity	No. of Students Admitted (In figure only)
1	A.Y. 2021– 2022	Fellowship in Infectious Disease	10	0
		Fellowship in Critical Care	2	1
2	A.Y. 2022 – 2023	Fellowship in Infectious Disease	10	1
		Fellowship in Critical Care	2	1
3	A.Y. 2023 – 2024	Fellowship in Infectious Disease	10	1
		Fellowship in Critical Care	2	1
4	A.Y. 2024 – 2025	Fellowship in Infectious Disease	10	-
		Fellowship in Critical Care	2	-
5	A.Y. 2025 – 2026	Fellowship in Infectious Disease	10	-
		Fellowship in Critical Care	2	-

Department of Medicine
Seth G S Medical College & KEM Hospital, Mumbai 12

Date:-08.01.2026

Unit Composition

Sr. No	Unit Head	Designation
1	Dr. MYN Unit	
	Dr. M Y Nadkar	Professor & Head (Unit Head)
	Dr. Juhi Kawle	Associate Professor
	Dr. Vedant Chate	Senior Resident
	Dr. Vinayak Chandan	Senior Resident
2	Dr. AGR Unit	
	Dr. Anjali Rajadhyaksha	Professor (Unit Head)
	Dr. Nitin Sarate	Associate (Addl) Professor
	Dr. Diksha Samsukha	Senior Resident
	Dr. Vishal Bisht	Senior Resident
3	Dr. SBS Unit	
	Dr. Santosh Salagre	Professor (Unit Head)
	Dr. Shraddha More	Assistant Professor
	Dr. Nirmal Kothari	Senior Resident
4	Dr. AKS Unit	
	Dr. Archana Sonawale	Professor (Addl) (Unit Head)
	Dr. Vinayak Pai	Assistant Professor
	Dr. Sadik Shaikh	Senior Resident
5	Dr. KSJ Unit	
	Dr. Kavita Joshi	Professor (Addl) (Unit Head)
	Dr. Smrati Bajpai Tiwari	Associate Professor
	Dr. Shubhani Badole	Senior Resident
6	Dr. KDS Unit	
	Dr. Kaustubh Salagre	Associate Professor (Unit Head)
	Dr. Mahesh Gupta	Assistant Professor (Contractual)
	Dr. Juned Shaikh	Senior Resident
7	Dr. MSV Unit	
	Dr. Meghna Vaidya	Associate Professor (Unit Head)
	Dr. Satish Gosavi	Senior Resident
	Dr. Ganesh Marathe	Senior Resident
8	Dr. KBA Unit	
	Dr. Kiran Ahire	Associate Professor (Unit Head)
	Dr. Sanket Shinde	Senior Resident
	Dr. Shefali Shrivastav	Senior Resident

M.Y.N.
DR. MILIND Y. NADKAR
Professor & Head
Department of Medicine
Seth G. S. Medical College &
Hospital
Parel, Mumbai - 400 012.

Information to be submitted with respect to newly appointed mentors

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

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

This to Certify that Dr. Dr. Shilpa Rao has worked in the Department of General Surgery Training Centre as per following details

A) General Experience

Designation	From	To	Total period Year/Months	
			Year	Months
Assistant Professor	01.02.1994	20.02.2000	6 yrs	19 days
Associate Professor	21.02.2000	23.09.2008	8 yrs	7 month
Professor	24.09.2008	Till date	17 yrs	3 months

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

:-

Designation	From	To	Total period Year/Months	
			Year	Months
Professor	24.09.2008	Till date	17 yrs	3 months

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

Handwritten signature: K. M. Rao, 09/12/2026
Sign & Stamp
DR. VARSHA KULKARNI
Head of the Department
Date: / /
General Surgery
Seth G. S. Medical College
& K. E. M. Hospital
Parel, Mumbai - 400 012

Handwritten signature: P. S. Rao, 9/12/2026
Sign & Stamp
Dean/Principal/Head of Institute
Date: / /
Dean/(Academic)
Seth G. S. Medical College
& K. E. M. Hospital
Parel, Mumbai - 400 012.

Name of Inspectors		Signature of Inspectors
1)	Chairman	
2)	Member	
3)	Member	
4)	Member	

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FOR FELLOWSHIP/CERTIFICATE COURSE(S) FOR A.Y. 20.....-20.....

(As per provisions of the Maharashtra University of Health Sciences Act, 1998 and University Rule / Guidelines)

Date of Inspection	:	
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1. Name(s) of the Fellowship/Certificate Course(s)

Sr. No.	Name of the Fellowship/Certificate Course	Course Started from the Academic Year	Intake Capacity Sanctioned by the University	Name of Mentor and Contact Details
01				
02				
03				
04				
05				
06				
07				

(Attach separate List if necessary)

2. Year-wise number of students admitted to Fellowship/ Certificate course during last 5 years

Sr. No.	Academic Year	Name of Fellowship / Certificate Course	Intake Capacity	No. of Students Admitted (In figure only)
1	A.Y. 20..... – 20....			
2	A.Y. 20..... – 20....			
3	A.Y. 20..... – 20....			
4	A.Y. 20..... – 20....			
5	A.Y. 20..... – 20....			



ANNEXURE- VIII

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(As per provisions of the Maharashtra University of Health Sciences Act, 1998 and University Rule / Guidelines)

Date of Inspection	:	
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1. Name(s) of the Fellowship/Certificate Course(s)

Sr. No.	Name of the Fellowship/ Certificate Course	Course Started from the Academic Year	Intake Capacity Sanctioned by the University	Name of Mentor and Contact Details
01	Fellowship in Pediatric Intensive Care	2009	2	Dr. Milind S Tullu Ph: 9869469974 Dr. Jane J.E. David Ph: 9869146151
02	Fellowship in Pediatric Neurology and Epilepsy	2016	2	Dr. Rajwanti K Vaswani Ph: 9820879168 Dr. Jane.J.E.David 9869146151
03	Fellowship in Clinical Genetics	2009	2	Dr. Mamta N Muranjan 9920209036 Dr. Shrikant Jamdade 9930039145

(Attach separate List if necessary)

2. Year-wise number of students admitted to Fellowship/ Certificate course during last 5 years

Sr. No.	Academic Year	Name of Fellowship / Certificate Course	Intake Capacity	No. of Students Admitted (In figure only)
1	A.Y.2025-2026	Fellowship in Pediatric Intensive Care	2	0
2	A.Y.2024 –2025	Fellowship in Pediatric Intensive Care	2	0
3	A.Y.2023–2024	Fellowship in Pediatric Intensive Care	2	2
4	A.Y.2022 –2023	Fellowship in Pediatric Intensive Care	2	2
5	A.Y.2021 –2022	Fellowship in Pediatric Intensive Care	2	0



Dr. Rajwanti K. Vaswani
Professor & Head
Department of Pediatrics
Seth G. S. Medical College
& K.E.M. Hospital,
Parel, Mumbai - 400 012



FOR FELLOWSHIP/CERTIFICATE COURSE(S) FOR A.Y. 2026-2027

(As per provisions of the Maharashtra University of Health Sciences Act, 1998 and University Rule / Guidelines)

Date of Inspection	:	
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3. Name(s) of the Fellowship/Certificate Course(s)

Sr. No.	Name of the Fellowship/Certificate Course	Course Started from the Academic Year	Intake Capacity Sanctioned by the University	Name of Mentor and Contact Details
01	Fellowship in Pediatric Intensive Care	2009	2	Dr. Milind S Tullu Ph: 9869469974 Dr. Jane J.E. David Ph: 9869146151
02	Fellowship in Pediatric Neurology and Epilepsy	2016	2	Dr. Rajwanti K Vaswani Ph: 9820879168 Dr. Jane.J.E.David 9869146151
03	Fellowship in Clinical Genetics	2009	2	Dr. Mamta N Muranjan 9920209036 Dr. Shrikant Jamdade 9930039145

(Attach separate List if necessary)

4. Year-wise number of students admitted to Fellowship/ Certificate course during last 5 years

Sr. No.	Academic Year	Name of Fellowship / Certificate Course	Intake Capacity	No. of Students Admitted (In figure only)
1	A.Y.2025-2026	Fellowship in Clinical Genetics	2	1
2	A.Y.2024 -2025	Fellowship in Clinical Genetics	2	1
3	A.Y.2023-2024	Fellowship in Clinical Genetics	2	1
4	A.Y.2022 -2023	Fellowship in Clinical Genetics	2	1
5	A.Y.2021 -2022	Fellowship in Clinical Genetics	2	1




Dr. Rajwanti K. Vaswani
Professor & Head
Department of Pediatrics
Seth G. S. Medical College
& K.E.M. Hospital,
Parel, Mumbai - 400 012

ANNEXURE-VIII

FOR FELLOWSHIP/CERTIFICATE COURSE(S) FOR A.Y. 2026-2027

(As per provisions of the Maharashtra University of Health Sciences Act, 1998 and University Rule / Guidelines)

Date of Inspection	:	
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5. Name(s) of the Fellowship/Certificate Course(s)

Sr. No.	Name of the Fellowship/Certificate Course	Course Started from the Academic Year	Intake Capacity Sanctioned by the University	Name of Mentor and Contact Details
01	Fellowship in Pediatric Intensive Care	2009	2	Dr. Milind S Tullu Ph: 9869469974 Dr. Jane J.E. David Ph: 9869146151
02	Fellowship in Pediatric Neurology and Epilepsy	2016	2	Dr. Rajwanti K Vaswani Ph: 9820879168 Dr. Jane.J.E.David 9869146151
03	Fellowship in Clinical Genetics	2009	2	Dr. Mamta N Muranjan 9920209036 Dr. Shrikant Jamdade 9930039145

(Attach separate List if necessary)

6. Year-wise number of students admitted to Fellowship/ Certificate course during last 5 years

Sr. No.	Academic Year	Name of Fellowship / Certificate Course	Intake Capacity	No. of Students Admitted (In figure only)
1	A.Y.2025-2026	Fellowship in Pediatric Neurology and Epilepsy	2	1
2	A.Y.2024 -2025	Fellowship in Pediatric Neurology and Epilepsy	2	2
3	A.Y.2023-2024	Fellowship in Pediatric Neurology and Epilepsy	2	2
4	A.Y.2022 -2023	Fellowship in Pediatric Neurology and Epilepsy	2	2
5	A.Y.2021 -2022	Fellowship in Pediatric Neurology and Epilepsy	2	1

Dr. Rajwanti K. Vaswani
Professor & Head
Department of Pediatrics
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Parel, Mumbai - 400 012

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(As per provisions of the Maharashtra University of Health Sciences Act, 1998 and University Rule/Guidelines)

Date of Inspection	:	
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1. Name(s) of the Fellowship/Certificate Course(s)

Sr. No.	Name of the Fellowship/Certificate Course	Course Started from the Academic Year	Intake Capacity Sanctioned by the University	Name of Mentor and Contact Details
01	Cardiovascular Pathology	2008-09	2	Dr. Pradeep Vaideeswar 9833509435
02				

2. Year-wise number of students admitted to Fellowship/Certificate course during last 5 years

Sr. No.	Academic Year	Name of Fellowship/ Certificate Course	Intake Capacity	No. of Students Admitted (In figure only)
1	A.Y.2024-25		02	0
2	A.Y.2023-24		02	0
3	A.Y.2022-23		02	0
4	A.Y.2021-22		02	0
5	A.Y.2020-21		02	01


Professor & Head
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Seth GSMC & KEMH
Parel, Mumbai - 12.

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Date of Inspection	:	
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1.Name(s) of the Fellowship/Certificate Course(s)

Sr. No.	Name of the Fellowship/Certificate Course	Course Started from the Academic Year	Intake Capacity Sanctioned by the University	Name of Mentor and Contact Details
01	Uro pathology	2008-09	2	Dr.Gwendolyn Fernandes 9819218405
02				
03				
04				
05				
06				
07				

3. Year-wise number of students admitted to Fellowship/Certificate course during last 5 years

Sr. No.	Academic Year	Name of Fellowship/ Certificate Course	Intake Capacity	No. of Students Admitted (In figure only)
1	A.Y.2024-25	Uro pathology	02	01
2	A.Y.2023-24		02	02
3	A.Y.2022-23		02	02
4	A.Y.2021-22		02	02
5	A.Y.2020-21		02	02


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1. Name(s) of the Fellowship/Certificate Course(s)

Sr. No.	Name of the Fellowship/Certificate Course	Course Started from the Academic Year	Intake Capacity Sanctioned by the University	Name of Mentor and Contact Details
01	Gastrointestinal and Hepatopancreaticobiliary Pathology	2008-09	2	Dr.Rachana Chaturvedi 9967017267
02				Dr.Manujusha Karegar 9920270717
03				Dr. Ujwal Rathod 8169662116
04				
05				
06				
07				

2. Year-wise number of students admitted to Fellowship/Certificate course during last 5 years

Sr. No.	Academic Year	Name of Fellowship/ Certificate Course	Intake Capacity	No. of Students Admitted (In figure only)
1	A.Y.2024-25	Gastrointestinal and Hepatopancreaticobiliary Pathology	02	02
2	A.Y.2023-24		02	02
3	A.Y.2022-23		02	02
4	A.Y.2021-22		02	02
5	A.Y.2020-21		02	02


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Date of Inspection	:	
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1.Name(s) of the Fellowship/Certificate Course(s)

Sr. No.	Name of the Fellowship/Certificate Course	Course Started from the Academic Year	Intake Capacity Sanctioned by the University	Name of Mentor and Contact Details
01	Cytopathology	2008-09	2	Dr. Kanchan Kothari 9820056313
02				Dr. Mona Agnihotri 9987810111
03				Dr.Gwendolyn Fernandes 9819218405

4. Year-wise number of students admitted to Fellowship/Certificate course during last 5 years

Sr. No.	Academic Year	Name of Fellowship/ Certificate Course	Intake Capacity	No. of Students Admitted (In figure only)
1	A.Y.2024-25	Cytopathology	02	01
2	A.Y.2023-24		02	02
3	A.Y.2022-23		02	02
4	A.Y.2021-22		02	02
5	A.Y.2020-21		02	01


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FOR FELLOWSHIP/CERTIFICATE COURSE(S) FOR A.Y.2026-2027.....

(As per provisions of the Maharashtra University of Health Sciences Act, 1998 and University Rule/Guide lines)

Date of Inspection	:	
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5. Name(s) of the Fellowship/Certificate Course(s)

Sr. No.	Name of the Fellowship/Certificate Course	Course Started from the Academic Year	Intake Capacity Sanctioned by the University	Name of Mentor and Contact Details
01	Pediatric Pathology	2008-09	2	Dr. Pragari Sathe 9324045123
02				Dr. Annapurna Taware 9920344902

6. Year-wise number of students admitted to Fellowship/Certificate course during last 5 years

Sr. No.	Academic Year	Name of Fellowship/ Certificate Course	Intake Capacity	No. of Students Admitted (In figure only)
1	A.Y.2024-25	Pediatric Pathology	02	01
2	A.Y.2023-24		02	01
3	A.Y.2022-23		02	01
4	A.Y.2021-22		02	02
5	A.Y.2020-21		02	0


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Date of Inspection	:	
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1. Name(s) of the Fellowship/Certificate Course(s)

Sr. No.	Name of the Fellowship/Certificate Course	Course Started from the Academic Year	Intake Capacity Sanctioned by the University	Name of Mentor and Contact Details
01	DEADDICTION	2016	2	Dr Ajita Nayak-9870314844 Dr Kranti Kadam-9920969088 Dr Shilpa Adarkar-9820139158
02				
03				
04				
05				
06				
07				

(Attach separate List if necessary)

2. Year-wise number of students admitted to Fellowship/ Certificate course during last 5 years

Sr. No.	Academic Year	Name of Fellowship / Certificate Course	Intake Capacity	No. of Students Admitted (In figure only)
1	A.Y. 2021..... – 2022.....	Deaddiction	2	2
2	A.Y. 2022..... – 2023.....	Deaddiction	2	2
3	A.Y. 2023..... – 2024.....	Deaddiction	2	2
4	A.Y. 2024..... – 2025.....	Deaddiction	2	2
5	A.Y. 2025..... – 2026.....	Deaddiction	2	2