





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

Name of the College: **SINHGAD DENTAL COLLEGE & HOSPITAL, PUNE**
 Phone/Mobile No.: 020 - 24351307/05/03
 Name of the Subject: **Oral Pathology & Microbiology**



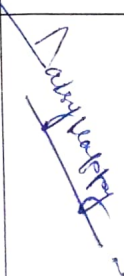

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/Te mp. / Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in Years) after PG/M	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Signs of Teacher
1	Dr. Sangeeta Palaskar	Professor and Head	Oral Pathology & Microbiology	Regular	MDS & Ph.D	Yes	26 yrs	Yes	MUHS/PG/E-2/5/3/13, dt 05/01/2013	5	10/05/1968	palaskarsangeeta@gmail.com	9021715510	XXXXXXXXXX8155	No	
2	Dr. Bartakke Anrudha Ratnadeep	Professor (Approved as Reader)	Oral Pathology	Regular	MDS	Yes	09 years	Yes	MUHS/PG/E-2/2206/1807/2017 dated 12/07/2017	2	22/05/1983	dranb3@gmail.co m	9552570722	XXXXXXXXXX0842	No	
3	Dr. Kapoor Prakash Karnal	Professor (Approved as Reader)	Oral Pathology	Regular	MDS	Yes	09 years	Yes	MUHS/E-2/PG/2639/2023 dated 27/09/2023	2	08/01/1982	doctor.prakashar@gmail.com	7354001041	XXXXXXXXXX6250	No	

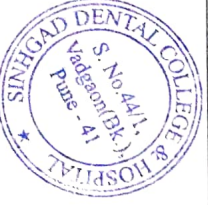



Dr. Samcer Patil
 Principal

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






Name of the College: **SINHGAD DENTAL COLLEGE & HOSPITAL, PUNE**
 Phone/Mobile No.: **020 - 24351307/05/03**
 Name of the Subject: **Periodontology**

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular, Temporary, Honorary)	Qualification	University Approved at (UG)	PG Teaching Experience (in Years) after PCM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign. of Teacher
1	Dr. Nihal Dattaraya Deokar	Professor & In-Charge	Periodontology	Regular	MDS	Yes	11 yrs 09 month 10 days	Yes	MUHS/PGE-2/2206/1807/2017, dated 12/07/2017	7	17/03/1978	drdevkar@gmail.com	9420481441	XXXXXXXXXX7618	No	
2	Dr. Raghavendra Shrishail Medikeri	Professor	Periodontology	Regular	MDS	Yes	11 yrs 09 month 10 days	Yes	MUHS/E-2/P/G/2639/2023 Dated 27/09/2023	5	25/01/1978	raghu.medikeri15@gmail.com	9766337620	XXXXXXXXXX7377	No	
3	Dr. Daisy Happy	Professor (Approved as Reader)	Periodontology	Regular	MDS	Yes	08 years 10 months	Yes	MUHS/PGE-2/2206/1807/2017 dated 12/07/2017	4	30/08/1978	drdaisyhappy@gmail.com	9595612095	XXXXXXXXXX0953	No	
4	Dr. Vinayak Maharwade	Professor (Approved as Reader)	Periodontology	Regular	MDS	Yes	07 years 07 months 15 days	Yes	MUHS/E-2/P/G/3890/2022, dt. 25/10/2022	1	26/09/1976	drvinayak@gmail.com	9422304567	XXXXXXXXXX3416	No	



Dr. Sameer Patil
Principal

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

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp./ Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in Years) after PCM	PG Teacher Recognition Yes/No	PG (Recognition Letter Date issued by University-)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign. of Teacher
1	Dr. Suryavanshi Rajendrakumar Krishnaji	Professor & HOD	Oral and Maxillofacial Surgery	Regular	MDS	Yes	24 Year	Yes	MUHS/E-2/P/G/3890/2022, dt. 25/10/2022	5	05/06/1967	suryavanshrajuk@gmail.com	9922994797	XXXXXXXXXX7555	No	
2	Dr. Sanjay Shaligram Chandan	Professor	Oral and Maxillofacial Surgery	Regular	MDS	Yes	12 Year	Yes	MUHS/E-2/U/G/53/2206/3505/2017	5	14/06/1996	sanjaychandana@hognmail.com	9860532325	XXXXXXXXXX4548	No	
3	Dr. Pushkar Devdas Gavande	Professor (Approved as Reader)	Oral and Maxillofacial Surgery	Regular	MDS	Yes	10 years 3months	Yes	MUHS/PG/E-2/2206/1807/2017, dated 12/07/2017	3	25/08/1980	rawandepushkar@gmail.com	9890983498	XXXXXXXXXX9604	No	
4	Dr. Vikramsinh Babasaheb Deshmukh	Professor (Approved as Reader)	Oral and Maxillofacial Surgery	Regular	MDS	Yes	9 years 10 months	Yes	MUHS/E-2/P/G/3890/2022	1	02/03/1978	vikram_759@rediffmail.com	9423223766	XXXXXXXXXX3615	No	
5	Dr. Kanchari Nimje	Professor (Approved as Reader)	Oral and Maxillofacial Surgery	Regular	MDS	Yes	09 years 4 months	Yes	MUHS/PG/E-2/112105/34522019, dated 17/09/2019	1	20/06/1981	kancharinimje99@gmail.com	9371460469	XXXXXXXXXX1857	No	


Dr. Sameer Patil
 Principal



Name of the College: **SINHGAD DENTAL COLLEGE & HOSPITAL, PUNE**
 Phone/Mobile No.: 020 - 24351307/05/03
 Name of the Subject: **Conservative Dentistry Endodontics**

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

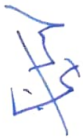



1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/Temporary/Honorary)	Qualification	University Approval (U/G)	PG Teaching Experience (in Years) After PGM	PG Teacher Recognition Yes/No	PG Teacher (Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Author Card No	If Debarred (Yes/No)	Sign. of Teacher
1	Dr. Shah Dipati Yogesh	Professor & HOD	Conservative Dentistry	Regular	MDS	Yes	10 years	Yes	MUHS/E-2/P/G/3890/2022, dt: 25/10/2022	7	25/12/1971	dipati_magdala@yahoo.com	9890195100	XXXXXXXXXX3163	No	
2	Dr. Desai Niranjan Nanasahab	Professor	Conservative Dentistry	Regular	MDS	Yes	8 Years	Yes	MUHS/E2/P/G/3890/2022 dt: 25/10/2022	5	01/05/1982	nirdesai1982@gmail.com	9637801919	XXXXXXXXXX2599	No	
3	Dr. Prathiba Shekar	Professor (Approved as Reader)	Conservative Dentistry	Regular	MDS	Yes	6 Years	Yes	MUHS/PG/E-2/2206/1807/2017, dt: 12/07/2017 (Approved as Reader)	3	15/11/1977	prathi511@gmail.com	9860079472	XXXXXXXXXX6734	No	
4	Dr. Ashwini Manish Dapde	Professor (Approved as Reader)	Conservative Dentistry	Regular	MDS	Yes	4 Years	Yes	MUHS/E-2/P/G/3890/2022, dt: 25/10/2022 (Approved as Reader)	2	23/10/1983	ash21_smile@yahoo.com	99660924066	XXXXXXXXXX7174	No	

Dr. Sameer Prati
Principal



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

Name of the College: **SINHGAD DENTAL COLLEGE & HOSPITAL, PUNE**
 Phone/Mobile No: **020 - 24351307/0503**
 Name of the Subject: **Orthodontics Dentofacial Orthopedics**




Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/Temporary/Honorary)	Qualification	University Approved at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University-)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign of Teacher
1	Dr. Pail Samteer Sidhagouda	Principal, Professor & HOD	Orthodontics Dentofacial Orthopedics	Regular	MDS	Yes	22 years 05 months	Yes	MUHS/GE-2/53/13, dt: 05/01/2013	7	23/10/1971 53 Years	dsameerpatiil@gmail.com	8550990110	XXXXXXXXXX3084	No	
2	Dr. Poinis Sheetal Samteer	Professor	Orthodontics Dentofacial Orthopedics	Regular	MDS	Yes	16 years 3 months	Yes	MUHS/E-2/R/G/2639/2023, dt: 27/09/2023	5	03/10/1977 46 Years	dsheetalpoins@gmail.com	9890799594	XXXXXXXXXX6951	No	
3	Dr. Jaimenis Shilpa Chawla	Professor (Approved as Reader)	Orthodontics Dentofacial Orthopedics	Regular	MDS	Yes	9 years	Yes	MUHS/E-2/R/G/3890/2022, dt: 25/10/2022	1	22/09/1979 44 Years	shilpajaimenis@gmail.com	9975708475	XXXXXXXXXX2277	No	
4	Dr. Shilpa Pharande	Professor (Approved as Reader)	Orthodontics Dentofacial Orthopedics	Regular	MDS	Yes	07 years 03 months	Yes	MUHS/E-2/R/G/2639/2023, dt: 27/09/2023	2	14/05/1980	drshilpapharande@gmail.com	9890166582	XXXXXXXXXX1682	No	

Dr. Samteer Paili
Principal




MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINEES LIST (PG Courses)

Name of the College: **SINHGAD DENTAL COLLEGE & HOSPITAL, PUNE**
 Phone/Mobile No.: **020 - 24351307/05/03**
 Name of the Subject: **Prosthodontics and Crown & Bridge**



Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular, Temp./ Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign of Teacher
1	Dr Hindocha Amit Dhansukhal	Professor	Prosthodontics and Crown & Bridge	Regular	MDS	Yes	10 years 6 months	Yes	MUHS/E- 2/R/G/3890/2022, dt 25/10/2022	5	24/05/1980	amithindochaia@gmail.com	9822553276	XXXXXXXXXX8161	No	
2	Dr Anupama Suresh Patankar-Gorde	Professor (Approved as Reader)	Prosthodontics and Crown & Bridge	Regular	MDS	Yes	9 Year 3 month 3 days	Yes	MUHS/E- 2/R/G/3890/2022, dt 25/10/2022	4	20/10/1984	dpnankar02@yahoo.in	9096934846	XXXXXXXXXX1336	No	
3	Dr Prashant Dattatray Jadhav	Professor (Approved as Reader)	Prosthodontics and Crown & Bridge	Regular	MDS	Yes	5 Years	Yes	MUHS/E- 2/R/G/3890/2022, dt 25/10/2022	2	01/07/1986	prashant_01pune@yahoo.co.in	9764450478, 7972586010	XXXXXXXXXX6731	No	




 Dr. Sameer Patil
 Principal

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

Name of the College: **SINHGAD DENTAL COLLEGE & HOSPITAL, PUNE**
 Phone/Mobile No.: **020 - 24351307/05/03**
 Name of the Subject: **Pedodontics and Preventive Dentistry**



Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/Temporary/Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years) after PGD	PG Teacher Recognition Year/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign. of Teacher
1	Dr. Paul Raju Umaji	Professor & Head	Pedodontics and Preventive Dentistry	Regular	BDS(2000), MDS 2005 (Pedo)	Yes	13.6 years	Yes	MUHS/PG/E-2/2206/1807/2017 Dated 12/07/2017	8	13/11/1976	rupal13@yahoo.com	8871963896	XXXXXXXXXX8637	No	
2	Dr. Jathar Prasad Narayan	Professor	Pedodontics and Preventive Dentistry	Regular	MDS	Yes	10.5 years	Yes	MUHS/PG/E-2/2206/1807/2017 Dated 12/07/2017	5	03/08/1981	prasad.jathar@gmail.com	9545047035	XXXXXXXXXX6401	No	



Dr. Sanjeev Patil
Principal

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

Name of the College: **SINHGAD DENTAL COLLEGE & HOSPITAL, PUNE**
 Phone/Mobile No.: 020 - 24351307/0503
 Name of the Subject: **Oral Medicine & Radiology**



Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/Temporary/Honorary)	Qualification	University Approved at (UG)	PG Teaching Experience (in Years) after FGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University.)	No. of PG Students Guided last 5 Year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign. of Teacher
1	Dr. Charvan Mahesh Shivaji	Professor & Head	Oral Medicine & Radiology	Regular	BDS, MDS, Ph.D	Yes	10 Years 3Months 15 days	Yes	MUHS/Acad/Appraisal/UG&PG/2563/2023, dated 21/9/2023	6	06/12/1982	dmaheshchavan@gmail.com	9823623445	XXXXXXXXXX8262	No	
2	Dr. Wairagade Manjunatri	Professor	Oral Medicine & Radiology	Regular	BDS, MDS	Yes	9 years	Yes	MUHS/PG/E-2/2206/1807/2017, dated 12/07/2017	4	20/04/1983	manju.wairagade@gmail.com	7875044983	XXXXXXXXXX3415	No	



Dr. Sameer Paul
Principal

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College - **SINHGAD DENTAL COLLEGE & HOSPITAL, PUNE**
 Phone/Mobile No. - 020 - 24351307/8503
 Name of the Subject - **Public Health Dentistry**

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Specialty	Type of Appointment (Regular/Temporary/Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in Years) after PCH	PG Teacher Recognition (in Years)	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	IT Barred (Yes/No)	Sign. of Teacher
1	Dr. Shetye Vitaldas Babu	Professor AIHOD	Public Health Dentistry	Regular	MDS	Yes	25 years-4 months	Yes	MUHS/PGCE-2/2823, dated 03/10/10/2013	11	25/12/1962	vital2562@yahoo.co.in	9881366035	XXXXXXXXXX874	No	
2	Dr. Vikram Carcha	Professor	Public Health Dentistry	Regular	MDS	Yes	11 years-5 months	Yes	MUHS/PGCE-2/3551/14, dated 29/12/2014	5	19/08/1977	drvikramcarcha38@gmail.com	9822418316	XXXXXXXXXX625	No	

Dr. Sanjeev Patil
Principal

