

## PHARMACY COUNCIL OF INDIA

**Standard Inspection Format (S.I.F) for institutions conducting B. Pharm for 100 adms.**

(To be filled and submitted to PCI by an organization seeking approval of the course / continuation of the approval)

(SIF-B-1)

*To be filled up by P.C.I.*

*To be filled up by inspectors*

**Inspection No. :**

**Date of Inspection:**

**FILE No. :**

**NAME OF THE INSPECTORS: 1.  
(BLOCK LETTERS)**

2.

### PART – I

#### A - GENERAL INFORMATION

<p><b>A – I.1</b> Name of the Institution: Complete Postal address:  STD code Telephone No. Fax No. E-mail</p>	<p>Amity Institute of Pharmacy Amity University Uttar Pradesh Amity Lucknow Campus Malhaur (Near Railway Station) Gomti Nagar Extension, Lucknow – 226028 (UP) 0522 2399606 05222399610 sdhaneshwar1@lko.amity.edu</p>
<p>Year of starting of the course</p>	<p>2007</p>
<p>Status of the course conducting body: <del>Government/</del> <del>University / Autonomous / Aided / Private</del> (Enclose copy of Registration documents of Society/Trust)</p>	<p>Amity University Uttar Pradesh (AUUP) Amity University Uttar Pradesh is established vide the Amity University Uttar Pradesh Act, 2005 (U.P. Act No.11 of 2005). A copy of the AUUP Act is enclosed.</p>
<p><b>A – I.2</b> Name, address of the <del>Society/Trust/ Management</del> (attach documentary evidence) STD Code: Telephone No: Fax No: E-mail Web Site:</p>	<p>Amity University Uttar Pradesh Sector-125, Noida, Uttar Pradesh 0120 4392815 0120 2431870 blarya@amity.edu <a href="http://www.amity.edu">www.amity.edu</a></p>
<p><b>A – I.3</b>  Name, Designation and Address of person to be  contacted by phone STD Code Telephone No Office Residence  Mobile No. Fax No E-Mail</p>	<p>Prof. (Dr.) Suneela Dhaneshwar Director &amp; Dy. Dean Research Amity Institute of Pharmacy, Amity University Uttar Pradesh, Lucknow Campus, Near Malhaur Railway Station, Post Office-Chinhat, Lucknow-226028 (UP) 0522 2399606 --  9850125430 05222399610 sdhaneshwar1@lko.amity.edu</p>

<b>A – I. 4</b> Name and Address of the Head of the Institution	Prof. (Dr.) Suneela S Dhaneshwar Director & Dy. Dean Research Amity Institute of Pharmacy, Amity University Uttar Pradesh, Lucknow Campus, Near Malhaur Railway Station, Post Office-Chinhat, Lucknow- 226028(UP)
<b>A – I. 4 a)</b> Whether the Jan Aushadhi Medical Store has been opened by your institution	No Will be started soon (Please tick (✓) the relevant portion)

**A – I. 5**

**FOR INSTITUTION SEEKING CONTINUATION OF APPROVAL**

**Signature of the Head of the Institution**

**Signature of the Inspectors**

**a. Details of Affiliation Fee Paid**

Name of the Course	Affiliation Fee paid up to	Receipt No	Dated	Remarks of the Inspectors
B. Pharm	2017-18	DD No. 000357 File no.: 32-653/2014-PCI	30.08.16	

**b. APPROVAL STATUS:**

Name of the Course	Approved up to	In take Approved and Admitted	PCI	STATE GOVT	UNIVERSITY	Remarks of the Inspectors
B. Pharm	2016- 17	<b>Approval Letter No and Date</b>	17-1/2014-PCI/19558-727 date 9 July 2014	NA	Approved	
		<b>Approved Intake</b>	60	NA	60	
		<b>Actually Admitted</b>	46 (2016-17) 57 (2017-18)	NA	46 (2016-17) 57 (2017-18)	

**c. STATUS OF APPLICATION**

COURSES INSPECTED FOR						
Faculty / Subject	Extension of Approval	Increase in Intake of Seats	Remarks			
			Current Intake	Proposed increase in Intake		
B. Pharm	Yes	B.Pharm.	Yes	60	100	

**Note: Enclose relevant documents (Appendix A)**

**A –I. 6**

**Whether other Educational Institutions/Courses are also being run by the Trust / Institution in the same Building / campus? If Yes, Give Details (Appendix B)**

Yes  No

**A – I. 6 a**

Status of the Pharmacy Course:	
Independent Building	<input type="checkbox"/>
Wing of another college	<input type="checkbox"/>
Separate Campus	<input type="checkbox"/>
Multi Institutional Campus	<input checked="" type="checkbox"/>

**Examining Authority** : Dean Examination, Amity University Uttar Pradesh, Noida  
**With complete postal Address, Telephone No. and STD Code.** Sector-125, Noida- 201303, U.P  
 0120- 4392821 & 4395670

**Signature of the Head of the Institution**

**Signature of the Inspectors**

## B - DETAILS OF THE INSTITUTION

<b>B -I .1</b> <b>Name of the Principal</b>		Prof. (Dr.) Suneela Dhaneshwar			
<b>Qualification/ Experience</b>	<b>Qualification*</b>		<b>Teaching Experience Required</b>	<b>Actual experience</b>	<b>Remarks of the Inspectors</b>
	M. Pharm	Yes	15 years, out of which 5 years as Prof. / HOD	23 Years	
	PhD	Yes	10 years, out of which at least 05 years as Asst. Prof		

\* Documentary evidence should be provided (Appendix C)

### B -I .2

For institution seeking continuation of affiliation

Course	Date of last Inspection	Remarks of the Previous Inspection Report	Complied / Not Complied	Intake reduced/Stopped in the last 03 years*
<b>B. Pharm</b>	19-21 July 2017	Report awaited	Report awaited	No

\* Enclose Documents (Appendix D)

### B -I .3

<b>Status of Governing Council:</b>	<b>Government/Trust/Society/Individual/ University</b>
<b>Details of the Governing Body</b>	<b>Enclosed</b>
<b>Minutes of the last Governing council Meeting</b>	<b>Enclosed</b>

(Appendix E)

### B -I .4

Pay Scales:

Staff	Scale of pay	PF	Gratuity	Pension benefit	Remarks of the Inspectors
<b>Teaching Staff</b>	UGC Yes	No	No	No	
<b>Non- Teaching Staff</b>	State Government Yes	Yes	No	No	

### B -I .5

**B. Pharm Course: Admission Statement for the Past Three Years**

ACADEMIC YEAR	Year 2014-15	Year 2015- 16	Year 2016- 17
<b>Sanctioned</b>	60	60	60
<b>No. of Admissions</b>	16	20	44
<b>Unfilled Seats</b>	44	40	16
<b>No. of Excess Admissions</b>	0	0	0

Signature of the Head of the Institution

Signature of the Inspectors

**B –I .6**

**Academic information: Percentage of UG results for the past three years based on University Calendar**

<b>ACADEMIC YEAR</b>	<b>Year 2014- 15</b>	<b>Year 2015-16</b>	<b>Year 2016- 17</b>
<b>1<sup>st</sup> year</b>	100	100	100
<b>2<sup>nd</sup> year</b>	100	100	80.95
<b>3<sup>rd</sup> year</b>	100	100	85.71
<b>Final year</b>	100	100	85.71
<b>Pass % (Final Year)</b>	100	100	85.71

**B – II**

**Co – Curricular Activities / Sports Activities**

Whether college has NSS Unit (Yes/No)? If no give reasons	NO
NSS Programme Officer's Name	-
Programme conducted (mention details)	-
Whether students participating in University level cultural activities / Co- curricular/sports activities	Yes
Physical Instructor	Available
Sports Ground	Available

**Signature of the Head of the Institution**

**Signature of the Inspectors**

**C - FINANCIAL STATUS OF THE INSTITUTION**

**Audited financial Statement of Institute should be furnished**

**C .1 Resources and funding agencies (give complete list)**

**C .2 Please provide following Information**

Receipts			Expenditure			Remarks of the Inspectors
Sl. No.	Particulars	Amount	Sl. No.	Particulars	Amount	
1.	Grants a. Government b. Others	NIL	<b>CAPITAL EXPENDITURE</b>			
2.	Tuition Fee	1,60,41,500.00	1.	Building	4,88,799.00	
3.	Library Fee	NIL	2.	Equipment	3,86,742.00	
4.	Sports Fee	NIL	3.	Others	1,48,675.00	
5.	Union Fee	NIL	<b>REVENUE EXPENDITURE</b>			
6.	Others	NIL	1	Salary	1,24,72,293.00	
			2.	<b>MAINTENANCE EXPENDITURE</b>		
				i	College	8,73,288.00
				ii	Others	
			3.	University Fee (If any)	2,00,000.00	
			4.	Apex Bodies Fee	NIL	
			5.	Government Fee	NIL	
			6.	Deposit held by the College	NIL	
			7.	Others	NIL	
			8.	Misc.Expenditure	NIL	
			<b>Total</b>			
					1,35,45,581.00	
	<b>Total</b>	1,60,41,500.00				

**Note: Enclose relevant documents**

**Signature of the Head of the Institution**

**Signature of the Inspectors**

## PART- II PHYSICAL INFRASTRUCTURE

1. a. Availability of Land (B. Pharm courses) : **Available / ~~Not Available~~**  
 a) 2.5 acres District HQ/Corporation/Municipality limit  
 b) 0.5 acre for City / Metros
- b. Building : **Own/Rented/Leased**
- c. Land Details to be in name of Trust and Society  
 Records to be enclosed  
 Sale deed : **Enclosed (Appendix F)**
- d. Building<sup>†</sup>:  
 i) Approved Building plan, to be Enclosed : **Enclosed (Appendix G)**
- e. Total Built Area of the college building in Sq.mts : Built up Area 2646  
 Amenities and Circulation Area 1181

### 2. Class rooms:

#### Total Number of Class rooms provided at the end of 4 Year Course

Class	Required Nos	Available Nos	Required Area * for each class room	Available Area in Sq.mts	Remarks of The Inspectors
B. Pharm	06	06	6 of 90 Sq. mts Or 4 of 150 sq.mts. with Public address System.	6 of 90 sq mts each	

(\*To accommodate 100 students).

### 3. Laboratory requirement at the end of 4 Years

Sl. No.	Infrastructure for	Requirement as per Norms	Available No. & Area in Sq Mts	Remarks/ Deficiency
1	Laboratory Area for B.Pharm Course (12 Labs)	90 Sq .mts x n (n=10) - Including Preparation room - Desirable 75 Sq. mts – Essential	10x75 sq mts =750sq mts	
2	Pharmaceutics Pharmaceutical Chemistry Pharmaceutical Analysis Pharmacology Pharmacognosy Pharmaceutical Biotechnology (Including Aseptic Room) Total no. Laboratories for B.Pharm course	03 Laboratories 02 Laboratories 01 Laboratory 02 Laboratories 01 Laboratories 01 Laboratory	03 02 01 02 01 01	
3	Preparation Room for each lab (One room can be shared by two labs, if it is in between two labs)	10 sq mts (minimum)	10 sq mtr	
4	Area of the Machine Room	80-100 Sq.mts	80 sq mtr	
5	Central Instrumentation Room	80 Sq.mts with A/ C	80 Sq.mts with A/C	
6	Store Room – I	1 (Area 100 Sq mts)	100 sq mts	
7	Store Room – II (For Inflammable chemicals)	1 (Area 20 Sq mts)	20 sq mts	

\*Number of laboratories required for entire course of 4 years.

Signature of the Head of the Institution

Signature of the Inspectors

† **The Institutions will not be permitted to run the courses in rented building on or after 31.12.2008**

1. All the Laboratories should be well lit & ventilated
2. All Laboratories should be provided with basic amenities and services like exhaust fans and fume chamber to reduce the pollution wherever necessary.
3. The work benches should be smooth and easily cleanable preferably made of non-absorbent material.
4. The water taps should be non-leaking and directly installed on sinks. Drainage should be efficient.
5. Balance room should be attached to the concerned laboratories.

**4. Administration Area:**

Sl.No.	Name of infrastructure	Requirement as per Norms in number	Requirement as per Norms, in area	Available		Remarks/ Deficiency
				No.	Area in Sq .mts	
1	Principal's Chamber	01	30 Sq .mts	01	30 Sq. mts	
2	Office – I - Establishment	01	60 Sq. mts	01	60 Sq. mts	
3	Office – II - Academics					
4	Confidential Room					

**5. Staff Facilities:**

Sl. No.	Name of infrastructure	Requirement as per Norms in number	Requirement as per Norms, in area	Available		Remarks/ Deficiency
				No.	Area in Sq mts	
1	HODs for B.Pharm Course	Minimum 4	20 Sq mts x 4	3	60 Sq mts	
2	Faculty Rooms for B.Pharm course		10 Sq mts x n (n=No of teachers)	14	140 Sq mts	

**6. Museum, Library, Animal House and other Facilities**

Sl.No.	Name of infrastructure	Requirement as per Norms in number	Requirement as per Norms, in area	Available		Remarks/ Deficiency
				No.	Area in Sq. mts	
1	Animal House	01	80 Sq mts	1	40 Sq mts	
2	Library	01	150 Sq mts	1	150 Sq mts	
3	Museum	01	50 Sq mts (May be attached to the Pharmacognosy lab)	1	50 Sq mts	
4	Auditorium / Multi Purpose Hall (Desirable)	01	250 – 300 seating capacity	1	Adequate	
5	Seminar Hall	01		1	75 sq mts	
6	Herbal Garden (Desirable)	01	Adequate Number of Medicinal Plants	1	80 sq mts	

Signature of the Head of the Institution

Signature of the Inspectors



**7. Student Facilities:**

Sl. No.	Name of infrastructure	Requirement as per Norms in number	Requirement as per Norms, in area	Available		Remarks/ Deficiency
				No.	Area in Sq .mts	
1	Girl's Common Room (Essential)	01	60 Sq.mts	01	60	
2	Boy's Common Room (Essential)	01	60 Sq.mts	01	60	
3	Toilet Blocks for Boys	01	24 Sq.mts	01	24	
4	Toilet Blocks for Girls	01	24 Sq.mts	01	24	
5	Drinking Water facility – Water Cooler (Essential).	01		02	Adequate	
6	Boy's Hostel (Desirable)	01	9 Sq .mts / Room Single occupancy	01	Adequate	
7	Girl's Hostel (Desirable)	01	9 Sq .mts / Room (single occupancy) 20 Sq mts / Room (triple occupancy)	01	Adequate	
8	Power Backup Provision (Desirable)	01		1	Adequate	

**8. Computer and other Facilities:**

Name	Required	Available		Remarks of the Inspectors
		No.	Area in Sq. mts	
Computer Room for B.Pharm Course	01 (Area 75 Sq mts)	1	75	
Computer (Latest Configuration)	1 system for every 10 students	50	-	
Printers	1 printer for every 10 Computers	1	-	
Multi Media Projector	01	3	-	
Generator (5KVA)	01	1	-	

Signature of the Head of the Institution

Signature of the Inspectors

### 9. Amenities (Desirable)

Name	Requirement as per Norms in Area	Available		Not Available	Remarks/ Deficiency
		No.	Area in Sq. mts		
Principal quarters	80 Sq. mts	1	80		
Staff quarters	16 x 80 Sq. mts	20	160		
Canteen	100 Sq. mts	1	150		
Parking Area for staff and students		Yes			
Bank Extension Counter		Yes			
Co operative Stores		Yes			
Guest House	80 Sq. mts	Yes	200		
Transport Facilities for students		Yes			
Medical Facility (First Aid)		Yes			

### 10. A. Library books and periodicals

The minimum norms for the initial stock of books, yearly addition of the books and the number of journals to be subscribed are as given below:

Sl. No.	Item	Titles (No)	Minimum Volumes (No)	Available		Remarks of the Inspectors
				Title	Numbers	
1	Number of books	150	2000 adequate coverage of a large number of standard text books and titles in all disciplines of pharmacy	489	2307	
2	Annual addition of books		150 to 200 books per year	57	241	
3	Periodicals Hard copies / online		10 National 05 International periodicals		10 05	
4	CDS		Adequate Nos	30	20	
5	Internet Browsing Facility		Yes/No (Minimum ten computers)	Yes	Adequate	
6	Reprographic Facilities: Photo Copier Fax Scanner		01 01 01		01 01 01	
7	Library Automation and Computerized System: yes					
8	<b>Library Timings:</b> 9.15am-9 pm					

### 10.B. Library Staff:

	Staff	Qualification	Required	Available	Remarks of the Inspectors
1	Librarian	M. Lib	1	1	
2	Assistant Librarian	D. Lib	1	1	
3	Library Attenders	10 +2 / PUC	2	2	

Signature of the Head of the Institution

Signature of the Inspectors

**PART III ACADEMIC REQUIREMENTS**

**Course Curriculum:**

**1. Student Staff Ratio:** Theory 60:1      Practicals 20:1      Remarks of the Inspectors

(Required ratio --- Theory → 60:1 and Practicals → 20:1) If more than 20 students in a batch 2 staff members to be present provided the lab is spacious.

**2. Scheme of B. Pharm Course:** **Annual**

**3. Date of Commencement of session / sessions:**

<b>Commencement</b>	<b>Completion</b>
13/07/16	23/05/17

**4. Vacation:** Summer:       Winter:

**5. Total No. of working days:**

**6. Time Table:**

Time Table for B. Pharm course Enclosed      Yes       No

(Appendix H)

**7. Whether the prescribed numbers of classes are being conducted as per university norms**

**I B. Pharm:**

Subject	No of Theory Classes		Practicals			Remarks of the Inspectors
	Prescribed No of Hrs	No of Hours Conducted	Prescribed No of Hours	No of Hours Conducted	No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5 No. of classes x hours per class	
1	2	3	4	5		
Intro. Pharmaceutics	3	3	3	3X2 Batches	90	
Ele. Maths	3	3	-	-	-	
Pharm. Org. Chem -1	3	3	3	3X2 Batches	90	
Pharm. Inorg Chem	3	3	3	3X2 Batches	90	
Cell & Mol Biology	3	3	-	-	-	
Ana & Physiology I	3	3	3	3X2 Batches	90	
Env. Study I	2	2	-	-	-	

**II B. Pharm:**

Subject 1	No of Theory Classes		Practicals			Remarks of the Inspectors
	Prescribed No of Hrs 2	No of Hours Conducted 3	Prescribed No of Hours 4	No of Hours Conducted 5	No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5 No. of classes x hours per Class	
Pharm. Operations I	3	3	3	3	45	
Pathology I	3	3	-	-	-	
Theory in Physical Chemistry	3	3	3	3	45	
Pharmacog nosy II	3	3	3	3	45	
Phar Ana Chem II	3	3	3	3	45	
Pharm Microbiolo gy	3	3	3	3	45	
Behavioral Sciences I	1	1	-	-	-	
German I	1	1	-	-	-	
Commun. Skill	1	1	-	-	-	

Signature of the Head of the Institution

Signature of the Inspectors

Subject	No of Theory Classes		Practicals			Remarks of the Inspectors
	Prescribed No of Hrs 2	No of Hours Conducted 3	Prescribed No of Hours 4	No of Hours Conducted 5	No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5 No. of classes x hours per Class	
Pharmacognosy IV	3	3	3	3	45	
Pharm Med Chem I	3	3	4	4	45	
Community Pharm.	3	3	3	3	45	
Pharmacology II	3	3	4	4	60	
Phar Tech I	3	3	3	3	45	
Behavioral Sciences	1	1	-	-	-	
German	1	1	-	-	-	
Commun. Skill	2	2	-	-	-	

## IV B. Pharm:

Subject	No of Theory Classes		Practicals			Remarks of the Inspectors
	Prescribed No of Hrs 2	No of Hours Conducted 3	Prescribed No of Hours 4	No of Hours Conducted 5	No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5 No. of classes x hours per class	
Biophar. & Pharmacokinetics	3	3	3	3	45	
Pharmacology IV	3	3	4	4	60	
Pharm Med Chem III	3	3	4	4	60	
Chem of Natural Pds.	3	3	3	3	45	
Phar Instru Tech	3	3	3	3	45	
Behavioral Sciences	1	1	-	-	-	
German	1	1	-	-	-	
Commun. Skill	2	2	-	-	-	

8. Whether Tutorials are being conducted  
(if any, as per university norms)

 Yes

9. Number of Guest Lectures / Seminars / Work shops / Symposia / Presentations conducted during last three years

**A.**

<b>Name of the Event</b>	<b>Year 2014- 15</b>	<b>Year 2015- 16</b>	<b>Year 2016- 17</b>
Guest Lectures	2	5	12
Seminars	0	0	1
Workshops	0	0	1
Symposia	1	1	1

**B. Papers Presented / Published during last three years**

	<b>Year 2014- 15</b>		<b>Year 2015- 16</b>		<b>Year 2016- 17</b>	
	<b>National</b>	<b>International</b>	<b>National</b>	<b>International</b>	<b>National</b>	<b>International</b>
<b>Published</b>	6	16	10	21	6	14
<b>Presented</b>	15	0	12	0	19	0

Signature of the Head of the Institution

Signature of the Inspectors

**10. Whether Internal Assessments are conducted periodically as per university norms**

Yes  No

Class	I Sessional Dates DD/MM/YY		II Sessional Dates DD/MM/YY		III Sessional Dates DD/MM/YY		Remarks of the Inspectors
	Theory	Practicals	Theory	Practicals	Theory	Practicals	
I B. Pharm	05/09/16	15/09/16	22/10/16	18/10/16	08/11/16	18/11/16	
II B. Pharm	05/09/16	15/09/16	22/10/16	18/10/16	08/11/16	18/11/16	
III B. Pharm	05/09/16	15/09/16	22/10/16	18/10/16	08/11/16	18/11/16	
IV B. Pharm	05/09/16	15/09/16	22/10/16	18/10/16	08/11/16	18/11/16	

**11. Whether Evaluation of the internal assessments is Fair** Yes  No

Class	No. of Candidates scored more than 80%		No. of Candidates scored between 60 - 80%		No. of Candidates scored between 50 - 60%		No. of Candidates Less than 50%		Remarks of the Inspectors
	Th	Pr	Th	Pr	Th	Pr	Th	Pr	
I B. Pharm	7	7	20	20	7	7	12	12	
II B. Pharm	8	8	7	7	3	3	3	3	
III B. Pharm	4	4	8	8	5	5	3	3	
IV B. Pharm	4	4	9	9	4	4	4	4	

**12. Work load of Faculty members for B. Pharm Odd sem**

S No.	Name of Faculty	Subjects Taught	B. Pharm								Total Work Load	Remarks of the Inspectors
			I		III		V		VII			
			Th	Pr	Th	Pr	Th	Pr	Th	Pr		
1	Dr. Sajal Srivastava	Pharmaceutical Instrument Techniques	0	0	0	0	0	0	3	3	6	
2	Dr. Zeeshan Fatima	Introductory Pharmaceutical Chemistry Inorganic I	3	6	0	0	0	0	0	0	9	
3	Dr. Mohini Chaurasia	Biopharmaceutics and Pharmacokinetics	0	0	0	0	0	0	3	3	6	
4	Dr. Neha Mathur	Theory in Physical chemistry	0	0	3	3	0	0	0	0	6	
5	Ms. Dipti Srivastava	Community Pharmacy	0	0	0	0	3	3	0	0	6	
6	Ms. Nimisha	Pharmaceutical Technology	0	0	0	0	3	3	0	0	6	
7	Dr. Parmesh Kumar Dwivedi	Pharmaceutical Medicinal Chemistry I	0	0	0	0	3	4	0	0	7	
		Pharmaceutical Medicinal Chemistry III	0	0	0	0	0	0	3	4	7	

8	Mr. Prakash Deep	Pharmaceutical Microbiology Pharmacognosy IV	0 0	0 0	3 0	3 0	0 3	0 3	0 0	0 0	6 6	
9	Dr. Rahul Shukla	Chem of Natural Products CMB Pharmacognosy II	0 3 0	0 0 0	0 0 3	0 0 3	0 0 0	0 0 0	3 0 0	3 0 0	6 3 6	
10	Mr. Pragyandip Parthasarathi Dash	Introductory Pharmaceutical Chemistry- Organic Pharmaceutical Analytical Chemistry- II	3 0	6 0	0 3	0 3	0 0	0 0	0 0	0 0	9 6	
11	Mr. Vivek Srivastava	Anatomy Physiology Pharmacology IV	3 0	6 0	0 0	0 0	0 0	0 0	0 3	0 4	9 7	
12	Mr. Saikat Sarkar	Pathology I Pharmacology II	0 0	0 0	3 0	0 0	0 3	0 4	0 0	0 0	3 7	
13	Ms. Richa Srivastava	Pharm Operation I Introductory Pharmaceutics	0 3	0 6	3 0	3 0	0 0	0 0	0 0	0 0	6 9	

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### Work load of Faculty members for B. Pharm Even sem

SNo.	Name of Faculty	Subjects Taught	B. Pharm								Total Work Load	Remarks of the Inspectors
			II		IV		VI		VIII			
			Th	Pr	Th	Pr	Th	Pr	Th	Pr		
1	Dr. Sajal Srivastava	Pharmaceutical Clinical Research Pharmaceutical Medicinal Chemistry-II	0 0	0 0	0 0	0 0	0 3	0 4	5 0	0 0	5 7	
2	Dr. Zeeshan Fatima	Environmental studies Pharmaceutical Drug Designing	2 0	0 0	0 0	0 0	0 3	0 2	0 0	0 0	2 5	
3	Dr. Neha Mathur	Pharmaceutical Jurisprudence	0	0	3	0	0	0	0	0	3	
4	Ms. Dipti Srivastava	Physical Pharmacy	0	0	3	3	0	0	0	0	6	
5	Ms. Nimisha	Pharmaceutical Technology I Pharmaceutical Technology II	0 0	0 0	0 0	0 0	3 3	3 3	0 0	0 0	6 6	
6	Dr. Parmesh Kumar Dwivedi	Pharmaceutical Chemistry- Organic	3	0	0	0	0	0	0	0	3	
7	Mr. Prakash Deep	Anatomy Physiology Pharmacognosy-III	2 0	0 0	0 3	0 3	0 0	0 0	0 0	0 0	2 6	



8	Dr. Rahul Shukla	Hospital Pharmacy Pharmacognosy I	3 3	0 6	0 0	0 0	0 0	0 0	0 0	0 0	3 9	
9	Mr. Pragyandip Parthasarathi Dash	Pharmaceutical Analytical Chemistry- I Biochemistry	3 0	6 0	0 0	0 0	0 0	0 0	0 5	0 0	9 5	
10	Dr. Anupam Dhasmana	Pharmaceutical Biotechnology Pharmaceutical Industrial Management	0 0	0 0	0 0	0 0	2 0	0 0	0 3	0 0	2 3	
11	Mr. Vivek Srivastava	Pharmacology I	0	0	3	3	0	0	0	0	6	
12	Mr. Saikat Sarkar	Pathology II Pharmacology III	0 0	0 0	3 0	0 0	0 3	0 4	0 0	0 0	3 7	
13	Ms. Richa Srivastava	Novel Drug Delivery Systems Pharm Operation II	0 0	0 0	0 3	0 4	0 0	0 0	5 0	0 0	5 7	
14	Mr. Shikhar Verma	Pharmaceutical Biotechnology Pharmaceutical Packaging & Labeling	0 0	0 0	0 0	0 0	2 0	0 0	0 4	0 0	2 4	

6

### 13. Percentage of students qualified in GATE in the last Three Years

Details	Year 2014-15	Year 2015-16	Year 2016-17
No. of Students Appeared	0	2	0
No. of Students Qualified	0	1	0
Percentage	0	50%	0

14. Whether the Institution has an Industry – Institution Interaction cell Yes  No   
If applicable please give the details for the previous Year

Events	Details for the Previous Year
No. of Industrial visits	2
Industrial Tour	1
Industrial Training	1
No. of Resource Persons from the Industry for Guest Lectures	10
No. of Collaboration projects with Industry	Nil

Signature of the Head of the Institution

Signature of the Inspectors

**15. Percentage of students Placed through the College Placement Cell in the Last Three Years**

<b>Year</b>	<b>Year 2014- 15</b>	<b>Year 2015- 16</b>	<b>Year 2016-17</b>
<b>No. of students appeared for campus interview</b>	19	21	18
<b>% Placed</b>	100 %	100 %	100 %

**16. Whether Professional Society Activities are Conducted (Enclose Details)  
(ISTE, IPA, APTI, ICTA and Related Societies)**

**Yes**

**Signature of the Head of the Institution**

**Signature of the Inspectors**

**PART IV - PERSONNEL**

**TEACHING STAFF:**

**1. Details of Teaching Faculty for B.Pharm Course to be enclosed in the format mentioned below:**

Sl No.	Name	Designation	Qualification	Date of joining	Teaching Experience	State Pharmacy Council Registration No.	Signature of the faculty
					After PG		
1	Prof. (Dr.) Suneela Dhaneshwar	Professor, Director,	M Pharm, Ph D	04 Jan 2017	23 Years	Applied	
2	Dr. Sajal Srivastava	Asst Professor G-III Dy Director	M Pharm, Ph D	29 Dec 2009	13 Yrs 6 months	KSPC 33348	
3	Dr Zeeshan Fatima	Asst Professor G-II	M Sc (Tech), Ph D	10-Aug-2007	9 years 7 months	Not Registered	
4	Dr. Mohini Chaurasia	Asst Professor G-II	M Pharm, Ph D	21-Jan-2010	11 years 3 months	MPSPC 11063	
5	Dr. Rahul Shukla	Asst Professor G-II	M Pharm, Ph D	27-Apr-2011	10 years 1 month	UPPC 35040	
6	Dr. Himani Awasthi	Asst Professor G-II	M Pharm, Ph D	24-Dec-2014	6 years 8 months	UPPC 39283	
7	Dr. Neha Mathur	Asst Professor G-II	M Pharm, Ph D	10-Jun-2013	9 years 7 months	UPPC 32567	
8	Dr. Parmesh Kumar Dwivedi	Asst Professor G-II	M Pharm, Ph D	26-Oct-2009	8 years 5 months	UPPC 34481	
9	Mr Vivek Srivastava	Asst Professor G-II	M Pharm	05 Aug 2016	11 years 1 months	UPPC 31066	
10	Ms. Nimisha	Asst Professor G-II	M Pharm	14-Aug-2008	9 years 8 months	UPPC 35006	
11	Mr. Pragyandip Parthasarathi Dash	Asst Professor G-II	M Pharm	23-Aug-2011	8 years 9 months	OSPC 23401	
12	Ms. Dipti Srivastava	Asst Professor G-II	M Pharm	29-Jul-2008	8 years	UPPC 56043	
13	Mr. Prakash Deep	Asst Professor G-II	M Pharm	18-Nov-2010	7 years 8 months	UPPC 45563	
14	Ms Pranati Srivastava	Asst Professor G-II	M Pharm	10 April 2017	6 Years 5 months	UPPC 55956	

15	Mr. Saikat Sarkar	Asst Professor G-I	M Pharm	25-Jul-2011	6 years 8 months	A-10176	
16	Ms. Richa Srivastava	Asst Professor G-I	M Pharm	23-Sep-2013	3 years 6 months	UPPC 53006	
17	Ms Supriya Roy	Asst Professor G-I	M Pharm	20 March 2017	1 year 6 months	UPPC 55735	
18	Mr Shikhar Verma	Asst Professor G-I	M Pharm	03 October 2016	1 year 3 months	UPPC 44195	

## 2. Qualification and number of Staff Members

Qualification		
M. Pharm	PhD	Others - Full Time
10	8	-----

## 3. Teaching Staff required year wise exclusively for B.Pharm for intake of 100 Students.

	No. of staff required
1. Pharmaceutical Chemistry	7
2. Pharmaceutical Analysis	2
3. Pharmacology	4
4. Pharmacognosy	4
5. Pharmaceutics	6
6. Pharmacy Practice	1
7. Principal	1
<b>Total</b>	<b>25</b>
<b>*Part time teaching Staff</b>	<b>3</b>
<b>Remarks of the Inspection Team</b>	

**\*Part time teaching staff for Mathematics, Biology and Computer Science can be appointed.**

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4. **Staff Pattern for B. Pharm courses Department wise / Division wise:**

Professor: Asst. Professor: Lecturer

Department / Division	Name of the post	For strength of 100 students	Provided by The Institution	Remarks of inspection team
Department of Pharmaceutics	Professor	1	1 Professor (Identified)	
	Asst. Professor	2	5	
	Lecturer	3	0	
Department of Pharmaceutical Chemistry	Professor	1	1	
	Asst. Professor	3	5	
	Lecturer	3	1(Identified)	
Department of Pharmacology	Professor	1	1 professor (Identified)	
	Asst. Professor	2	3	
	Lecturer	1	0	
Department of Pharmacognosy	Professor	1	1 Associate Professor (Identified)	
	Asst. Professor	1	3	
	Lecturer	2	0	
Department of Pharmacy Practice	Asst. Professor	1	1(Identified)	
	Lecturer	1	1(Identified)	
Department of Pharmaceutical Analysis	Asst. Professor	1	1(Identified)	
	Lecturer	1	1(Identified)	

5. **Selection criteria and Recruitment Procedure for Faculty:**

a.	Whether Recruitment Committee has been formed	Yes
b.	Whether Advertisement for vacancy is notified in the Newspapers	Yes
c.	Whether Demonstration Lecture has been conducted	Yes
d.	Whether opinion of Recruitment Committee Recorded	Yes

6. **Details of Faculty Retention for:**

Name of Faculty Member	Period	%
Nil	Duration of 15 years and above	0
Dr Zeeshan Fatima	Duration of 10 years and above	5.5%
Dr Sajal Srivastava, Dr Neha Mathur, Dr Mohini Chaurasia, Dr Rahul Shukla, Dr Parmesh K Dwivedi, Mr Saikat Sarkar, Mr Prakash Deep, Ms Nimisha, Mr Pragyaandip P Dash, Ms Dipti Srivastava	Duration of 5 years and above	55.5%
Prof.(Dr. )Suneela Dhaneshwar , Ms Richa Srivastava, Mr Shikhar Varma, Ms Supriya Roy, Mr Vivek Srivastava, Dr Himani Awasthi, Ms Pranati Srivastava	Less than 5 years	38.88%

**7. Details of Faculty Turnover:**

<b>7. Details of Faculty turnover</b>					
Name of Faculty Member	Period	More than 50 %	50%	25%	Less than 25%
Dr Sajal Srivastava, Dr Zeeshan Fatima, Dr Parmesh K Dwivedi, Dr Mohini Chaurasia, Dr Neha Mathur, Dr Rahul Shukla, Mr Saikat Sarkar, Mr Prakash Deep, Ms Nimisha, Mr Pragyandip P Dash, Ms Dipti Srivastava, Ms Richa Srivastava,	% of faculty retained in last 3 years	66.66%	-	-	-

**Signature of the Head of the Institution****Signature of the Inspectors**

**8.Number of Non-teaching staff available for B. Pharm course for intake of 100 Students:**

Sl. No.	Designation	Required (Minimum)	Required Qualification	Available		Remarks of the Inspection team
				Number	Qualification	
1	Laboratory Technician	1 for each Dept	D. Pharm	02	D. Pharm	
2	Laboratory Assistants / Attenders	1 for each Lab (minimum)	SSLC	09	SSLC	
3	Office Superintendent	1	Degree	01	MBA	
4	Accountant	1	Degree	01	Degree	
5	Store keeper	1	D. Pharm/ Degree	01	D Pharm	
6	Computer Data Operator	1	BCA / Graduate with Computer Course	1	Graduate With Computer Course	
7	Office Staff I	1	Degree	1	Degree	
8	Office Staff II	2	Degree	1	Degree	
9	Peon	2	SSLC	2	SSLC	
10	Cleaning personnel	Adequate	---	Adequate		
11	Gardener	Adequate	---	Adequate		

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**10. Whether facilities for Research / Higher studies are provided to the faculty?**

YES

(Inspectors to verify documents pertaining to the above)

**11. Whether faculty members are allowed to attend workshops and seminars?**

YES

(Inspectors to verify documents pertaining to the above)

**12. Scope for the promotion for faculty: Promotions**

Yes

No

**13. Gratuity Provided**

Yes

No

**14. Details of Non-teaching staff members (enclosed in Appendix J):**

Sl No	Name	Designation	Qualification	Date of Joining	Experience	Signature	Remarks of the Inspectors

**15. Whether Supporting Staff (Technical and Administrative) are encouraged for skill up gradation programs.** Yes

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## PART V - DOCUMENTATION

### Records Maintained: Essential

Sl. No	Records	Yes	No	Remarks of the Inspectors
1	Admissions Registers	√		
2.	Individual Service Register	√		
3.	Staff Attendance Registers	√		
4.	Sessional Marks Register	√		
5.	Final Marks Register	√		
6.	Student Attendance Registers	√		
7.	Minutes of meetings- Teaching Staff	√		
8.	Fee paid Registers	√		
9.	Acquittance Registers	√		
10.	Accession Register for books and Journals in Library	√		
11.	Log book for chemicals and Equipment costing more than Rupees one lakh	√ √		
12.	Job Cards for laboratories	√		
13.	Standard Operating Procedures (SOP's) for Equipment	√		
14.	Laboratory Manuals	√		
15.	Stock Register for Equipment	√		
16.	Animal House Records as per CPCSEA	√		

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Signature of the Inspectors

**PART - VI**

**1. Financial Resource allocation and utilization for the past three years: (Audited Accounts for previous year to be enclosed) (Appendix K)**

Sl	Expenditure in Rs. 2014-15			Expenditure in Rs. 2015-16			Expenditure in Rs. 2016-17			Remarks of the Inspectors*
No.	Total budget sanctioned	Recurring	Non Recurring	Total budget sanctioned	Recurring	Non Returning	Total budget sanctioned	Recurring	Non Returning	
1	1245377	124760	1120617	418410	212166	206244	527469	470272	57197	

**2. Total amount spent on chemicals and glassware for the past three years:**

Sl	Expenditure in Rs. 2014-15			Expenditure in Rs. 2015-16			Expenditure in Rs. 2016-17			Remarks of the Inspectors*
No.	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	Total Budget Allocated	Sanctioned	Incurred	
	<b>Chemicals</b>	77566	77566	<b>Chemicals</b>	165031	165031	<b>Chemicals</b>	2777766	277766	
	<b>Glassware</b>	47194	47194	<b>Glassware</b>	47135	47135	<b>Glassware</b>	192506	192506	

**3. Total amount spent on equipments for the past three years:  
(Enclose purchase invoice)**

Sl	Expenditure in Rs. 2014-15			Expenditure in Rs. 2015-16			Expenditure in Rs. 2016-17			Remarks of the Inspectors*
No.	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	Total Budget Allocated	Sanctioned	Incurred	
	<b>Equipment</b>	1120617	1120617	<b>Equipment</b>	206244	206244	<b>Equipment</b>	57197	57197	

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**4. Total amount spent on Books and Journals for the past three years:**

SI No.	Expenditure in Rs.			Expenditure in Rs.			Expenditure in Rs.			Remarks of the Inspectors*
	2014-15			2015-16			2016-17			
	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	Total Budget Allocated	Sanctioned	Incurred	
<b>1</b>	<b>Books</b>	46685	44659	<b>Books</b>	Nil	Nil	<b>Books</b>	217707	79216	
<b>2</b>	<b>Journals</b>	57850	57850	<b>Journals</b>	68550	68550	<b>Journals</b>	68050	68050	

\*Last three years including this academic year till the date of inspection

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## PART VII – EQUIPMENT AND APPARATUS

Department wise list of minimum equipments required for B. Pharm (for a batch of 20 students)

### DEPARTMENT OF PHARMACOLOGY

#### Equipment:

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Microscopes	20	20	Yes	
2	Haemocytometer with Micropipettes	20	20	Yes	
3	Sahli's haemocytometer	20	20	Yes	
4	Hutchinson's spirometer	01	10	Yes	
5	Spygmomanometer	10	10	Yes	
6	Stethoscope	10	10	Yes	
7	Permanent Slides for various tissues	One pair of each tissue Organs and endocrine glands One slide of each organ system	6	Yes Yes Yes Yes Yes	
8	Models for various organs	One model of each organ system	5	Yes	
9	Specimen for various organs and systems	One model for each organ system	4	Yes Yes	
10	Skeleton and bones	One set of skeleton and one spare bone	1	Yes Yes	
11	Different Contraceptive Devices and Models	One set of each device	1	Yes	
12	Muscle electrodes	01	1	Yes	
13	Lucas moist chamber	01	1	Yes	
14	Myographic lever	01	1	Yes	
15	Stimulator	01	1	Yes	
16	Centrifuge	01	1	Yes	
17	Digital Balance	01	1	Yes	
18	Physical /Chemical Balance	01	1	Yes	
19	Sherrington's Kymograph Machine / Polyrite	10	10	Yes	

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20	Sherrington Drum	10	10	Yes	
21	Perspex bath assembly (single unit)	10	10	Yes	
22	Aerators	10	10	Yes	
23	Computer with LCD	01	1	Yes	
24	Software packages for experiment	01	1	Yes	
25	Standard graphs of various drugs	Adequate number	Adequate	Yes	
26	Actophotometer	01	1	Yes	
27	Rotarod	01	1	Yes	
28	Pole climbing apparatus	01	1	Yes	
29	Analgesiometer (Eddy's hot plate and radiant heat methods)	01	1	Yes Yes	
30	Convulsiometer	01	1	Yes	
31	Plethysmograph	01	1	Yes	
32	Digital pH meter	01	1	Yes	

**Apparatus:**

Sl. No.	Name	Minimum required No.s	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Folin-Wu tubes	60	60	Yes	
2	Dissection Tray and Boards	10	10	Yes	
3	Haemostatic artery forceps	10	10	Yes	
4	Hypodermic syringes and needles of size 15,24,26G	10	10	Yes Yes	
5	Levers, cannulae	20	20	Yes	

**NOTE: Adequate number of glassware commonly used in the laboratory should be provided in each laboratory and department.**

**DEPARTMENT OF PHARMACOGNOSY**

**Equipment:**

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Microscope with stage micrometer	20	20	Yes	
2	Digital Balance	02	2	Yes	
3	Autoclave	02	2	Yes	
4	Hot air oven	02	2	Yes	

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5	B.O.D. incubator	01	1	Yes	
6	Refrigerator	01	1	Yes	
7	Laminar air flow	01	1	Yes	
8	Colony counter	02	2	Yes	
9	Zone reader	01	1	Yes	
10	Digital pH meter	01	1	Yes	
11	Sterility testing unit	01	1	Yes	
12	Camera Lucida	20	20	Yes	
13	Eye piece micrometer	20	20	Yes	
14	Incinerator	01	1	Yes	
15	Moisture balance	01	1	Yes	
16	Heating mantle	20	20	Yes	
17	Flourimeter	01	1	Yes	
18	Vacuum pump	02	2	Yes	
19	Micropipettes (Single and multi channeled)	05	5	Yes	
20	Micro Centrifuge	01	1	Yes	
21	Projection Microscope	01	1	Yes	

**Apparatus:**

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Reflux flask with condenser	20	20	Yes	
2	Water bath	20	20	Yes	
3	Clavengers apparatus	10	10	Yes	
4	Soxhlet apparatus	10	10	Yes	
6	TLC chamber and sprayer	10	10	Yes	
7	Distillation unit	01	1	Yes	

**NOTE: Adequate number of glassware commonly used in the laboratory should be provided in each laboratory and department.**

**DEPARTMENT OF PHARMACEUTICAL CHEMISTRY**

**Equipment:**

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Hot plates	05	5	Yes	
2	Oven	03	3	Yes	
3	Refrigerator	01	1	Yes	

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4	Analytical Balances for demonstration	05	5	Yes	
5	Digital balance 10mg sensitivity	10	01	Yes	
6	Digital Balance (1mg sensitivity)	01	01	Yes	
7	Suction pumps	06	6	Yes	
8	Muffle Furnace	01	1	Yes	
9	Mechanical Stirrers	10	10	Yes	
10	Magnetic Stirrers with Thermostat	10	10	Yes	
11	Vacuum Pump	01	1	Yes	
12	Digital pH meter	01	1	Yes	
13	Microwave Oven	02	1	Yes	

**Apparatus:**

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Distillation Unit	02	2	Yes	
2	Reflux flask and condenser single necked	20	20	Yes	
3	Reflux flask and condenser double / triple Necked	20	20	Yes Yes	
4	Burettes	100	100	Yes	
5	Arsenic Limit Test Apparatus	25	2	Yes	
6	Nessler's Cylinders	50	50	Yes	

**NOTE: Adequate number of glassware commonly used in the laboratory should be provided in each laboratory and department.**

**DEPARTMENT OF PHARMACEUTICS**

**Equipment:**

Sl. No.	Name	Minimum Required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Mechanical stirrers	20	20	Yes	
2	Homogenizer	10	10	Yes	
3	Digital balance	05	5	Yes	
4	Microscopes	10	10	Yes	
5	Stage and eye piece micrometers	15	15	Yes	
6	Brookfield's viscometer	01	1	Yes	
7	Tray dryer	01	1	Yes	
8	Ball mill	01	1	Yes	

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9	Sieve shaker with sieve set	01	1	Yes	
10	Double cone blender	01	1	Yes	
11	Propeller type mechanical agitator	05	5	Yes	
12	Autoclave	01	1	Yes	
13	Steam distillation still	01	1	Yes	
14	Vacuum Pump	01	1	Yes	
15	Standard sieves, sieve no. 8, 10, 12,22,24, 44, 66, 80	10 sets	10	Yes	
16	Tablet punching machine	01	1	Yes	
17	Capsule filling machine	01	1	Yes	
18	Ampoule washing machine	01	1	Yes	
19	Ampoule filling and sealing machine	01	1	Yes	
20	Tablet disintegration test apparatus IP	02	2	Yes	
21	Tablet dissolution test apparatus IP	01	1	Yes	
22	Monsanto's hardness tester	02	2	Yes	
23	Pfizer type hardness tester	01	1	Yes	
24	Friability test apparatus	01	1	Yes	
25	Clarity test apparatus	01	1	Yes	
26	Ointment filling machine	01	1	Yes	
27	Collapsible tube crimping machine	01	1	Yes	
28	Tablet coating pan	01	1	Yes	
29	Magnetic stirrer, 500ml and 1 liter capacity with speed control	05 EACH 10	- -	No No	
30	Digital pH meter	01	2	Yes	
31	All purpose equipment with all accessories	01	1	Yes	
32	Aseptic Cabinet	01	1	Yes	
33	BOD Incubator	02	1	Yes	
34	Bottle washing Machine	01	1	Yes	
35	Bottle Sealing Machine	01	1	Yes	
36	Bulk Density Apparatus	02	2	Yes	
37	Conical Percolator (glass/ copper/ stainless steel)	10	10	Yes	
38	Capsule Counter	02	2	Yes	
39	Energy meter	02	2	Yes	
40	Hot Plate	02	2	Yes	

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41	Humidity Control Oven	01	1	Yes	
42	Liquid Filling Machine	01	1	Yes	
43	Mechanical stirrer with speed regulator	02	2	Yes	
44	Precision Melting point Apparatus	01	1	Yes	
45	Distillation Unit	01	1	Yes	

**Apparatus:**

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Ostwald's viscometer	20	27	Yes	
2	Stalagmometer	20	40	Yes	
3	Desiccator*	10	5	Yes	
4	Suppository moulds	20	20	Yes	
5	Buchner Funnels (Small, medium, large)	05 each	5	Yes	
6	Filtration assembly	01	1	Yes	
7	Permeability Cups	05	5	Yes	
8	Andreason's Pipette	05	5	Yes	
9	Lipstick moulds	10	10	Yes	

**NOTE: Adequate number of glassware commonly used in the laboratory should be provided in each laboratory and department.**

**PHARMACEUTICAL BIOTECHNOLOGY**

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Orbital shaker incubator	01	1	Yes	
2	Lyophilizer (Desirable)	01	0	-	
3	Gel Electrophoresis (Vertical and Horizontal)	01	1	Yes	
4	Phase contrast/Trinocular Microscope	01	1	Yes	
5	Refrigerated Centrifuge	01	1	Yes	
6	Fermenters of different capacity (Desirable)	01	0	-	
7	Tissue culture station	01	1	Yes	
8	Laminar airflow unit	01	1	Yes	

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9	Diagnostic kits to identify infectious Agents	01	1	Yes	
10	Rheometer	01	1	Yes	
11	Viscometer	01	1	Yes	
12	Micropipettes (single and multi-channeled)	01 each	1	Yes	
13	Sonicator	01	1	Yes	
14	Respinometer	01	1	Yes	
15	BOD Incubator	01	1	Yes	
16	Paper Electrophoresis Unit	01	1	Yes	
17	Micro Centrifuge	01	1	Yes	
18	Incubator water bath	01	1	Yes	
19	Autoclave	01	1	Yes	
20	Refrigerator	01	1	Yes	
21	Filtration Assembly	01	1	Yes	
22	Digital pH meter	01	1	Yes	

**NOTE: Adequate number of glassware commonly used in the laboratory should be provided in each laboratory and department.**

#### **CENTRAL INSTRUMENTATION ROOM:**

<b>Sl. No.</b>	<b>Name</b>	<b>Minimum required Nos.</b>	<b>Available Nos.</b>	<b>Working Yes / No</b>	<b>Remarks of the Inspectors</b>
1	Colorimeter	01	1	Yes	
2	Digital pH meter	01	1	Yes	
3	UV- Visible Spectrophotometer	01	2	Yes	
4	Flourimeter	01	0	-	
5	Digital Balance (1mg sensitivity)	01	1	Yes	
6	Nephelo Turbidity meter	01	1	Yes	
7	Flame Photometer	01	1	Yes	
8	Potentiometer	01	1	Yes	
9	Conductivity meter	01	1	Yes	
10	Fourier Transform Infra Red Spectrometer (Desirable)	01	0	-	
11	HPLC	01	1	Yes	
12	HPTLC (Desirable)	01	0	-	

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13	Atomic Absorption and Emission spectrophotometer (Desirable)	01	0	-	
14	Biochemistry Analyzer (Desirable)	01	0	-	
15	Carbon, Hydrogen, Nitrogen Analyzer (Desirable)	01	0	-	
16	Deep Freezer (Desirable)	01	0	-	
17	Ion- Exchanger	01	1	Yes	
18	Lyophilizer (Desirable)	01	0	-	

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**Signature of the Inspectors**

**Observation of the Inspectors:**

**Compliance of the last recommendations by Inspectors**

**Specific observations if not complied**

<b>Signature of Inspectors:</b>	<b>1</b>

**2.**

**Note:**

- 1. The Inspection Team is instructed to physically verify the details and records filled up by the college in the application form submitted by the college, which is with you now and record the observations, opinions and recommendations in clear and explicit terms.**
- 2. The team is requested to record their comments only after physical verification of records and details.**

**Signature of the Head of the Institution**

**Signature of the Inspectors**