

PHARMACY COUNCIL OF INDIA

Standard Inspection Format (S.I.F) for institutions conducting
D Pharm

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

(SIF-A)

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.
(IN BLOCK LETTERS)

2.

PART-1

A-GENERAL INFORMATION

A - I.1

| | |
|--------------------------------------|--|
| Name of the institution | Govt. Polytechnic, Champawat |
| Complete postal address: | Govt. Polytechnic Lohaghat (Champawat) - 262 524 |
| Telephone number with STD Code | 05965 234535 |
| Fax No | 05965234535 |
| Email | gplpoly1975@gmail.com |
| Year of establishment | 1975 |
| Status of the course conducting body | Government |

A - I.2

| | |
|--------------------------------------|--|
| Name of the Society/Trust/Management | DIRECTOR |
| Address | DIRECTORATE OF TECHNICAL EDUCATION SRINAGAR GARHWAL UTTARAKHAND |
| Telephone Number with STD Code | 01346 250169 |
| Fax No | 250169 |
| Email | dte2003@rediffmail.com |
| Website | www.ukdte.org |

A - I.3

| | |
|---|--|
| Name of the person to be contacted by phone | MR R P GUPTA |
| Designation | PRINCIPAL |
| Address | Govt. Polytechnic Lohaghat (Champawat) - 262 524 |
| STD Code | 05962 |
| Telephone Number | |
| Office | 234535 |
| Residence | 234535 |
| Mobile | 9411353490 |
| Fax No | 234535 |
| Email | gplpoly1975@gmail.com |

A - I.4

| | |
|-------------------------------------|--|
| Name of the Head of the Institution | PRINCIPAL |
| Address | Govt. Polytechnic Lohaghat (Champawat) - 262 524 |

Signature of the Head of the
Institution

Signature of the Inspectors

A - I.5

FOR INSTITUTION SEEKING CONTINUATION OF APPROVAL

a. DETAILS OF AFFILIATION FEE PAID

| Name of the Course | Affiliation Fee Paid Upto | Receipt No. | Dated | Remarks of the Inspectors |
|--------------------|---------------------------|-------------|------------|---------------------------|
| D Pharm | 2015-2016 | 26082 | 22/05/2015 | |

b. APPROVAL STATUS

| Name of the Course | Approved Upto | Intake Approved and Admitted | PCI | State Govt | University | Remarks of the Inspectors |
|--------------------|---------------|------------------------------|---|------------|------------|---------------------------|
| D Pharm | 2015-2016 | Approved Letter No & Date | 17-256/2010-PCI/59836-38 DATE 24.3.2015 | 0 | 0 | |
| | | Approved Intake | 40 | 0 | 0 | |
| | | Actually Admitted | 38 | 0 | 0 | |

c. STATUS OF APPLICATION

| Course | Extension of Approval | Increase in Intake of Seats | Remarks | |
|---------|-----------------------|-----------------------------|----------------|-----------------------------|
| | | | Current Intake | Proposed increase in Intake |
| D Pharm | Yes | No | 40 | 0 |

Note: Enclose relevant documents

A - I.6

Whether other educational institutions/courses are also being run by the trust/institution in the same building/campus?

If yes, give status

Yes

A - I.6 a

| Status of the Pharmacy Course: | |
|--------------------------------|-----|
| Independent Building | Yes |
| Wing of Another College | No |
| Separate Campus | Yes |
| Multi Institutional Campus | No |

| | |
|--|---|
| Examining Authority: | Diploma Course |
| Name with Complete Postal address, telephone No. and STD Code. | The Secretary Uttaranchal Board of Tech. Education 37 -3, Civil Lines, Opp. Shiv Mandir Roorkee â€ 247 667, Distt. Haridwar |

Signature of the Head of the Institution

Signature of the Inspectors

B - DETAILS OF THE INSTITUTION**B - I.1**

Name of the Principal

MR R P GUPTA

| Qualification/ Experience | Qualification* | | Teaching Experience Required | Actual experience | Remarks of the Inspectors |
|------------------------------|--------------------|----|------------------------------------|----------------------|---------------------------------|
| | M. Pharm | No | 05 Years | | |
| | PhD (Desirable) | No | 02 Years | | |

* Documentary evidence should be provided

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* |
|---------|-------------------------------|--|--------------------------|---|
| D Pharm | 09/01/2015 | Deficiency Projection Microscope and Digital Balance | Yes | Yes |

* Enclose Documents

B - I.3

Pay Scales

| Staff | Scale of pay | PF | Gratuity | Pension benefit | Remarks of the Inspectors |
|---------------------------|--------------------------|-----|----------|--------------------|------------------------------|
| Teaching Staff | AICTE/UGC/State Govt. | Yes | Yes | Yes | |
| Non- Teaching Staff | State Government | Yes | Yes | Yes | |

B - I.4

D Pharm Course: Admission statement for the past three years

| ACADEMIC YEAR | 2013- 2014 | 2014-2015 | 2015-2016 |
|------------------------|---------------|-----------|-----------|
| Sanctioned | 40 | 40 | 40 |
| No. of Admissions | 39 | 37 | 38 |
| Unfilled Seats | 1 | 3 | 2 |
| No of Excess Admission | 0 | 0 | 0 |

B - I.5

Academic information: Percentage of D Pharm results for the past three years:

| ACADEMIC YEAR | 2013-2014 | 2014-2015 | 2015-2016 |
|---------------|-----------|-----------|-----------|
| D Pharm | 87 | 84 | |

Signature of the Head of the
Institution

Signature of the Inspectors

B - II**Co-Curricular Activities / Sports Activities**

| | |
|--|--|
| Whether college has NSS Unit(Yes/No)? | Yes |
| If no give reasons | N.A. |
| NSS Program Officer's Name | MR RAJENDRA NATH |
| Programme Conducted Details | ORGANIZATION OF CAMP, SOCIAL ACTIVITIES. |
| Whether students participating in University level cultural activities/Co-curricular/Sports activities | Yes |
| Physical Instructor | Not Available |
| Sports Ground | Individual |
| Are you Associated with other Organization/Institution/Trust/Society Running Pharmacy Course | Yes |
| Organization/Institution/Trust/Society Name | |
| Complete Postal Address. | |
| Telephone No. | |
| Nature of Association | |

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 Inspector |
|----------|---------------|--------------------|---------------------|-----------------------------|-------------------|--------------------------|
| Sl. No. | Particulars | Amount | Sl. No. | Particulars | Amount | |
| 1. | Grants | | CAPITAL EXPENDITURE | | | |
| | a. Government | 14900000.00 | | | | |
| | b. Others | 0.00 | | | | |
| 2. | Tuition Fee | 1303000.00 | 1. | Building | 0.00 | |
| 3. | Library Fee | 44600.00 | 2. | Equipment | 15000.00 | |
| 4. | Sports Fee | 55750.00 | 3. | Others | 0.00 | |
| 5. | Union Fee | 0.00 | REVENUE EXPENDITURE | | | |
| 6. | Others | 0.00 | 1. | Salary | 5512303.00 | |
| | | | 2. | Maintenance Expenditure | | |
| | | | | i. College | 0.00 | |
| | | | | ii. Others | 20000.00 | |
| | | | 3. | University Fee | 0.00 | |
| | | | 4. | Apex Bodies Fee | 0.00 | |
| | | | 5. | Government Fee | 0.00 | |
| | | | 6. | Deposit held by the College | 1303000.00 | |
| | | | 7. | Others | 906250.00 | |
| | | | 8. | Misc. Expenditure | 0.00 | |
| | Total | 16303350.00 | | Total | 7741553.00 | |

Note: Enclose relevant documents

Signature of the Head of the Institution

Signature of the Inspectors

PART- II PHYSICAL INFRASTRUCTURE

| | |
|---|-----------------|
| a. Building | Own |
| b Land: | |
| c. Building | Own |
| i) Leased or own | Own |
| Sale / Agreement deed (records to be enclosed) | -- |
| i) Leased/Rented â€ (Record to be enclosed) | Enclosed |
| ii) If Own (Approved Building plan & sale deed to be enclosed) | Enclosed |
| d. Total Area of the college building in Sq.mts | |
| Built up Area | 6580 |
| Amenities and Circulation Area | 334 |

2. Class Rooms

| Total Number of Class rooms provided | | | | | |
|--------------------------------------|----------|-------------------|-------------------------------------|---------------------------|---------------------------|
| Class | Required | Available Numbers | Required Area * for each class room | Available Area in Sq. mts | Remarks of the Inspectors |
| D.Pharm | 02 | 2 | 90 sq. mts each | 133 | |

[* To accomodate 60 students]

3. Laboratory requirement

| Sl.No. | Infrastructure for | Available No. | Area in Sq. mts | Remarks |
|--------|-------------------------------------|---------------|-----------------|---------|
| 1 | Laboratory Area for D.Pharm Course | 5 | 410 | |
| 2 | Pharmaceutics | 1 | 80 | |
| 3 | Pharmaceutical Chemistry | 1 | 100 | |
| 4 | Physiology and Pharmacology | 1 | 70 | |
| 5 | Pharmacy Practice | 1 | 80 | |
| 6 | Pharmacognosy | 1 | 80 | |
| 7 | Animal House | 0 | 0 | |
| 8 | Preparation Room for each lab | 5 | 56 | |
| 9 | Area of the Machine Room | 1 | 89 | |
| 10 | Aseptic Room | 1 | 11 | |
| 11 | Store Room I | 1 | 65 | |
| 12 | Store Room II Inflammable chemicals | 1 | 10 | |

Signature of the Head of the Institution

Signature of the Inspectors

The Institutes will not be permitted to run the courses in the 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 fuming chamber to reduce the pollution whenever necessary.
3. The workbenches should be smooth and easily cleanable preferably made of non-absorbant material.
4. The water taps should be non-leaking and directly installed on skins Drainage should be efficient.
5. Balance room should be attached to the cocerned laboratories.

4. Administration Area

| Sl. No. | Name of Infrastructure | Requirements as per Norms (in Number) | Requirements as per Norms (in Area) | Available | | Remarks/Deficiency |
|---------|---|---------------------------------------|--|-----------|----------------|--------------------|
| | | | | No. | Area in Sq.mts | |
| 1 | Principal's Chamber | 01 | 20 Sq. mts | 1 | 65 | |
| 2 | Office - I (including confidential room) | 01 | 40 Sq. mts | 1 | 80 | |
| 3 | Staff / Faculty Rooms for D. Pharm course | 01 | 30 Sq. mts | 0 | 0 | |
| 4 | Library with computer and reprographic facilities | 01 | 100 Sq. mts | 1 | 362 | |
| 5 | Museum | 01 | 30 Sq. mts (Maybe attached to the Pharmacognosy lab) | 1 | 40 | |
| 6 | Auditorium/ Multi Purpose Hall (Desirable) | 01 | 250 - 300 seating capacity | 0 | 0 | |
| 7 | Herbal Garden (Desirable) | 01 | Adequate Number of Medical Plants | 1 | 50 | |

5. Student Facilities

| Sl. No. | Name of Infrastructure | Requirements (in Number) | Requirements (in Area) | Available | | Remarks/Deficiency |
|---------|--|--------------------------|---|-----------|----------------|--------------------|
| | | | | No. | Area in Sq.mts | |
| 1 | Girls's Common Room (Essential) | 01 | 40 Sq. mts | 1 | 90 | |
| 2 | Boy's Common Room (Essential) | 01 | 40 Sq. mts | 1 | 50 | |
| 3 | Toilet Blocks for Girls | 01 | 25 Sq. mts | 1 | 25 | |
| 4 | Toilet Blocks for Boys | 01 | 25 Sq. mts | 1 | 25 | |
| 5 | Drinking Water facility - Water cooler (Essential) | 01 | -- | 1 | 2 | |
| 6 | Boy's Hostel (Desirable) | 01 | 9 Sq. mts/Room Single occupancy | 1 | 732 | |
| 7 | Girls's Hostel (Desirable) | 01 | 9 Sq.mts/Room (Single occupancy) or 20 Sq.mts/Room (Triple occupancy) | 1 | 340 | |
| 8 | Power Backup Provision (Desirable) | 01 | -- | 2 | 2 | |
| 9 | Canteen | 01 | 100 sq mts. | 1 | 100 | |

6. Computer and other Facilities

| Name | Required | Available | | Remarks of the Inspectors |
|---------------------------------|--|-----------|----------------|---------------------------|
| | | No. | Area in Sq.mts | |
| Computer (Latest Configuration) | 1 syste, for every 10 students (UG & PG) | 16 | 40 | |
| Printers | 1 Printer for every 10 computers | 2 | 0 | |
| Xerox Machine | 01 | -- | -- | |
| Multi Media Projector | 02 | 1 | 0 | |

7. Amenities(Desirable)

| Name | Requirment as per Norms in area | Available | | Not Available | Remarks/Deficiency |
|-------------------------------------|---------------------------------|-----------|----------------|-------------------|--------------------|
| | | No. | Area in Sq.mts | | |
| Principal Quarters | 80 Sq. Mtr. | 1 | 80 | | |
| Staff Quarters | 6 x 80 Sq. mts | 16 | 960 | | |
| Parking Area fro staff and students | | 1 | 100 | | |
| Bank Extension Counter | | 0 | 0 | AVAILABL E NEARBY | |
| Cooperative Stores | | 0 | 0 | AVAILABL E NEARBY | |
| Guest House | 80 Sq. mts | 1 | 80 | | |
| Transport Facility for students | | 0 | 0 | | |
| Medical Facilities(First Aid) | | 1 | 25 | | |

8.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 | No. | |
| 1 | Number Of Books | 75 | 750 adequate coverage of a large number of standard text books and titles in all disciplines of pharmacy | 281 | 1156 | |
| 2 | Annual Addition of Books | | 75 books per year | 66 | 162 | |
| 3 | Periodicals Hard Copies/Online | | 06 National Journals Indian Journal of Pharmaceutical Sciences Indian Journal of Pharmaceutical Education and Research Journal of Hospital Pharmacy Indian Journal of Pharmacology CIMS, MIMS Indian Journal of Experimental Biology. | 15 | 15 | |
| 4 | Library timings | | | 10-17 | | |

8.B. Subject wise Classification

| Sl. No. | Subject | Available Titles | Available Numbers | Remarks of the Inspectors |
|---------|---|------------------|-------------------|---------------------------|
| 1 | Pharmaceutics 1 | 16 | 47 | |
| 2 | Pharmaceutical Chemistry 1 | 22 | 75 | |
| 3 | Pharmacognosy | 14 | 105 | |
| 4 | Biochemistry and Clinical Pathology | 12 | 64 | |
| 5 | Human Anatomy and Physiology | 14 | 78 | |
| 6 | Health Education and Community Pharmacy | 12 | 123 | |
| 7 | Pharmaceutics II | 19 | 67 | |
| 8 | Pharmaceutical Chemistry II | 20 | 76 | |
| 9 | Pharmacology and Toxicology | 17 | 175 | |
| 10 | Pharmaceutical Jurisprudence | 10 | 40 | |
| 11 | Drug Store and Business Management | 9 | 71 | |
| 12 | Hospital and Clinical Pharmacy | 11 | 61 | |

8.C. Library Staff

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

Note: The information provided will be assessed in giving the period of approval

Signature of the Head of the Institution

Signature of the Inspectors

PART III ACADEMIC REQUIREMENTS

Course Curriculum

1. Student Staff Ratio:

(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.

| Class | Theory | Practicles | Remarks of the Inspectors |
|----------|--------|------------|---------------------------|
| D. Pharm | 1:40 | 1:20 | |

2. Date of Commencement of session

| Commencement | Completion |
|--------------|------------|
| 01/08/2015 | 31/05/2015 |

3. Vacation

| | No of Days | | No of Days |
|----------|------------|----------|------------|
| Summer : | 30 | Winter : | 12 |

4. Total No. of working days

200

5. Time Table copy Enclosed

Yes

6. Whether the prescribed numbers of classes are being conductud as per PCI norms

I D.Pharm

| Class/Subject | Theory | | Practicals | | | | Remark of the Inspector |
|---|------------------------|-----------------------|------------------------|-----------------------|--------------------------|-------------------------|-------------------------|
| | Prescribed No of Hours | No of Hours Conducted | Prescribed No of Hours | No of Hours Conducted | Prescribed No of Classes | No of Classes Conducted | |
| Pharmaceutics -I | 75 | 92 | 100 | 105 | 25 | 35 | |
| Pharmaceutics Chemistry - I | 75 | 84 | 75 | 75 | 25 | 25 | |
| Pharmacognosy | 75 | 86 | 75 | 75 | 25 | 25 | |
| Biochemistry and Clinical Pathology | 50 | 62 | 75 | 75 | 25 | 25 | |
| Human Anatomy and Physiology | 75 | 93 | 50 | 75 | 25 | 25 | |
| Health Education and Community Pharmacy | 50 | 54 | -- | 0 | -- | 0 | |

II D.Pharm

| Class/Subject | Theory | | Practicals | | | | Remarks of the Inspector |
|------------------------------------|------------------------|-----------------------|------------------------|-----------------------|--------------------------|-------------------------|--------------------------|
| | Prescribed No of Hours | No of Hours Conducted | Prescribed No of Hours | No of Hours Conducted | Prescribed No of Classes | No of Classes Conducted | |
| Pharmaceutics -II | 75 | 91 | 100 | 111 | 25 | 37 | |
| Pharmaceutics Chemistry - II | 100 | 111 | 75 | 75 | 25 | 25 | |
| Pharmacology and Toxicology | 75 | 91 | 50 | 66 | 25 | 22 | |
| Pharmaceutical Jurisprudence | 50 | 50 | -- | 0 | -- | 0 | |
| Drug Store and Business Management | 75 | 75 | -- | 0 | -- | 0 | |
| Hospital and Clinical Pharmacy | 75 | 76 | 50 | 75 | 25 | 25 | |

7. Whether Internal Assessments are conducted periodically as per PCI norms -

8. Whether Evaluation of the internal assessments is Fair --

| Class | No of Candidates scored more than 80% | | No of Candidates scored 60% - 80% | | No of Candidates scored 50% - 60% | | No of Candidates scored less than 50% | | Remarks of the Inspectors |
|------------|---------------------------------------|------------|-----------------------------------|------------|-----------------------------------|------------|---------------------------------------|------------|---------------------------|
| | Theory | Practicals | Theory | Practicals | Theory | Practicals | Theory | Practicals | |
| I D.Pharm | 4.00 | 20.00 | 23.00 | 21.00 | 9.00 | 0.00 | 5.00 | 0.00 | |
| II D.Pharm | 3.00 | 19.00 | 24.00 | 19.00 | 10.00 | 0.00 | 1.00 | 0.00 | |

9. Work load of Faculty members for D. Pharm

| S.No. | Name of Faculty | Subjects Taught | D. Pharm | | | | Total Work Load | Remarks of the Inspectors |
|-------|------------------------|--------------------------------------|-------------|--------------|-------------|--------------|-----------------|---------------------------|
| | | | I D. Ph | | II D. Ph | | | |
| | | | Th | Pr | Th | Pr | | |
| 1 | Mr. MANISH KUMAR BHATT | HAP HCP P CEUTICS II | 3 0 0 | 6 0 0 | 0 3 3 | 0 6 12 | 9 9 15 | |
| 2 | Mr. RAJENDRA NATH | DSBM P CEUTICS I P COLOGY | 0 3 0 | 0 12 0 | 3 0 3 | 0 0 6 | 3 15 9 | |
| 3 | Mr. VIVEK KUMAR MOURYA | HECP P CHEM I P CHEM II | 2 3 0 | 0 6 0 | 0 0 4 | 0 0 6 | 2 9 10 | |
| 4 | Mrs. ANJALI AGARWAL | BIOCHEMISTRY P COGNOSY P JURIS | 3 3 0 | 6 6 0 | 0 0 2 | 0 0 0 | 9 9 2 | |

Signature of the Head of the Institution

Signature of the Inspectors

**IV - PERSONNEL
TEACHING STAFF**

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

2. Qualification and Number of Staff Members

Number of staff members required: 07

| Qualification | | | | | | |
|---------------|---------|-----|--------|-----------|--|--|
| B Pharm | M Pharm | PhD | Others | | | |
| 11 | 2 | 0 | 0 | Part Time | | |

3. Details of Faculty Retention for:

| Name of Faculty Member | Period | Percentage |
|--|-------------------------------|------------|
| 00 | Duration of 15 year and above | 0 |
| 00 | Duration of 10 year and above | 0 |
| | Duration of 5 year and above | 00 |
| MRS. ANJALI AGRAWAL MR. VIVEK KUMAR MOURYA MR. RAJENDRA NATH MR. MANISH BHATT | Less than 5 years | 100 |

4. Details of Faculty Turnover

| Name of Faculty Member | Period | More than 50% | 50% | 25% | Less than 25% |
|------------------------|-------------------------------------|---------------|-----|-----|---------------|
| | % of faculty retained in last 3 yrs | Yes | No | No | No |

5. Number of Non-teaching staff available for D. Pharm course for intake of 60 students:

| Sl No. | Designation | Required Number | Required Qualification | Available Number Qualification | Remarks of the Inspectors |
|--------|----------------------------------|-----------------|-----------------------------|--------------------------------|---------------------------|
| 1 | Laboratory technician | 02 | D. Pharm | 2 MSc ORG CHEM | |
| 2 | Laboratory Assistants/ Attenders | 04 | SSLC | 0 | |
| 3 | Office Superintendent | 1 | Degree | 0 | |
| 4 | Accountant cum Clark | 1 | Degree | 1 BA | |
| 5 | Store keeper | 1 | D. Pharm | 0 | |
| 6 | Computer Data Operator | 1 | 10+2 with computer training | 0 | |
| 7 | Peon | 2 | SSLC | 3 10TH | |
| 8 | Cleaning personnel | 04 | --- | 0 | |
| 9 | Gardener | 01 | --- | 1 8TH | |

6. Scale of pay for Teaching faculty (to be enclosed):

| S. No. | Name | Qualification | Designation | Basic Pay | D. P. | DA | H R A | CCA & Additional Pay | Other Allowances | Deductions | | | Bank A/C No | PAN No | EPF A/C No | Total | Signature |
|--------|--------------------|---------------|-------------|-----------|-------|-------|-------|----------------------|------------------|------------|------|------|------------------|------------|--------------|-------|-----------|
| | | | | | | | | | | P | T | S | | | | | |
| 1 | MANISH KUMAR BHATT | B Pharm, | Lecturer | 30000 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 30997740742 | BNOPM4215M | | 30000 | |
| 2 | RAJENDRA NATH | B Pharm, | Lecturer | 21000 | 0 | 23730 | 0 | 0 | 0 | 0 | 2000 | 0 | 717302010001186 | AQEPN2029G | 00 | 50503 | |
| 3 | VIVEK KUMAR MOURYA | B Pharm, | Lecturer | 21000 | 0 | 23730 | 0 | 0 | 0 | 0 | 2000 | 0 | 717302010001167 | CCQPM3105G | 00 | 50503 | |
| 4 | ANJALI AGARWAL | B Pharm, | Lecturer | 26630 | 0 | 30092 | 0 | 0 | 0 | 0 | 3000 | 5672 | 0262000400310244 | AHIPT8532D | 110070970789 | 62394 | |

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

Yes No

(Inspectors to verify documents pertaining to the above)

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

Yes No

(Inspectors to verify documents pertaining to the above)

9. Scope for the promotion for faculty: Promotions

Yes No

10. Gratuity Provided

Yes No

11. Details of Non-teaching staff members (list to be enclosed)

| Name | Designation | Qualification | DOJ | Experience |
|-------------------|---------------------------|---------------|------------|------------|
| MR. D. K. SHARMA | Laboratory Technician | MSc ORG CHEM | 04/04/2005 | 10 |
| MR. D. C. LOHAMI | Laboratory Technician | BSc | 02/01/1981 | 34 |
| MR B C RAI | Administrative Officer | MA ENG | 02/12/1976 | 39 |
| MR. C S BISHT | Accountant | BA | 16/02/1981 | 34 |
| MR R D RAJBHAR | Librarian | M LIB | 19/01/2000 | 15 |
| Mr. Harish Rai | Gardener | 8TH | 19/09/1989 | 26 |
| SMT. Pusha Joshi | Second Division Assistant | 12TH | 18/03/2004 | 11 |
| MR. KAILASH SINGH | Peon | 10TH | 10/03/2005 | 10 |
| MR. DEEPAK BHATT | Peon | 12TH | 14/03/2005 | 10 |
| SMT. PUSPA DEVI | Peon | 5TH | 02/01/1992 | 23 |

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

Yes No

Signature of the Head of the Institution

Signature of the Inspectors

PART V - DOCUMENTATION

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

PART - VI

Financial Resource Allocation and Utilization for the past Three years (Audited Accounts for the previous year to be enclosed)

| Expenditure in Rs. 2013-2014 | | | Expenditure in Rs. 2014-2015 | | | Expenditure in Rs. 2015-2016 | | | Remarks of the Inspectors* |
|-------------------------------------|------------------|----------------------|-------------------------------------|------------------|----------------------|-------------------------------------|------------------|----------------------|-----------------------------------|
| Total budget sanctioned | Recurring | Non Recurring | Total budget sanctioned | Recurring | Non Recurring | Total budget sanctioned | Recurring | Non Recurring | |
| 110000 | 110000 | 0 | 145000 | 145000 | 0 | 50000 | 50000 | 0 | |

Total amount spent on Chemical, Glassware, Equipments, Books and Journals for the past Three Years (Enclose purchase invoice)

| Total budget allocated | Sanctioned | Incur red | Total budget allocated | Sanctioned | Incur red | Total budget allocated | Sanctioned | Incur red | Remarks of the Inspectors* |
|-------------------------------|-------------------|------------------|-------------------------------|-------------------|------------------|-------------------------------|-------------------|------------------|-----------------------------------|
| Chemicals | 90705 | 90705 | Chemicals | 109710 | 109710 | Chemicals | 50000 | 0 | |
| Glassware | 0 | 0 | Glassware | 0 | 0 | Glassware | 0 | 0 | |
| Equipment | 0 | 0 | Equipment | 0 | 0 | Equipment | 0 | 15000 | |
| Books | 0 | 0 | Books | 100000 | 113203 | Books | 2880 | 0 | |
| Journals | 0 | 15000 | Journals | 0 | 0 | Journals | 18600 | 0 | |

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

Signature of the Head of the Institution

Signature of the Inspectors

PART VII – EQUIPMENT AND APPARATUS

1 . Department wise List of Minimum equipments required for D Pharm

Pharmaceutics

Equipments:

| Sl. No. | Name | Minimum required Nos. | Available Nos. | Working | Remarks of the Inspectors |
|---------|--|-----------------------|----------------|---------|---------------------------|
| 1 | Continuous Hot Extraction Equipment | 5 | 5 | Yes | |
| 2 | Conical Percolator | 5 | 20 | Yes | |
| 3 | Tincture Press | 1 | 1 | Yes | |
| 4 | Hand Grinding Mill | 1 | 5 | Yes | |
| 5 | Disintegrator | 1 | 1 | Yes | |
| 6 | Ball mill | 1 | 1 | Yes | |
| 7 | Hand operated Tablet machine | 1 | 3 | Yes | |
| 8 | Tablet Coating Pan unit with hot air blower laboratory size | 1 | 1 | Yes | |
| 9 | Polishing pan laboratory size | 1 | 1 | Yes | |
| 10 | Monsanto's hardness tester | 1 | 3 | Yes | |
| 11 | Pfizer type hardness tester | 1 | 4 | Yes | |
| 12 | Tablet disintegration test apparatus IP | 1 | 2 | Yes | |
| 13 | Tablet dissolution test apparatus IP | 1 | 1 | Yes | |
| 14 | Granulating sieve set | 10 | 30 | Yes | |
| 15 | Tablet counter – small size | 5 | 5 | Yes | |
| 16 | Friability tester | 1 | 1 | Yes | |
| 17 | Collapsible tube – Filling and sealing equipment | 1 | 3 | Yes | |
| 18 | Capsule filling machine – Lab size | 1 | 2 | Yes | |
| 19 | Digital balance | 1 | 1 | Yes | |
| 20 | Distillation unit for distilled water | 2 | 2 | Yes | |
| 21 | Deionisation unit | 1 | 1 | Yes | |
| 22 | Glass distillation unit for water for injection | 1 | 2 | Yes | |
| 23 | Ampoule washing machine | 1 | 1 | Yes | |
| 24 | Ampoule filling and sealing machine | 1 | 1 | Yes | |
| 25 | Sintered glass filters for bacteria proof filtration (four different grades) | 0 | 2 | Yes | |
| 26 | Millipore filter (3 grades) | 0 | 1 | Yes | |
| 27 | Autoclave | 1 | 2 | Yes | |
| 28 | Hot air sterilizer | 1 | 2 | Yes | |
| 29 | Incubator | 1 | 2 | Yes | |
| 30 | Aseptic cabinet | 1 | 2 | Yes | |
| 31 | Ampoule clarity test equipment | 1 | 2 | Yes | |
| 32 | Blender | 1 | 2 | Yes | |
| 33 | Sieves set (Pharmacopoeial standard) | 2 | 10 | Yes | |
| 34 | Lab Centrifuge | 1 | 2 | Yes | |
| 35 | Ointment slab | 0 | 40 | Yes | |
| 36 | Ointment spatula | 0 | 40 | Yes | |
| 37 | Pestle and mortar porcelain | 0 | 40 | Yes | |
| 38 | Pestle and mortar glass | 0 | 40 | Yes | |
| 39 | Suppository moulds of three sizes | 0 | 10 | Yes | |
| 40 | Refrigerator | 1 | 1 | Yes | |

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

Pharmaceutical Chemistry

Equipments:

| Sl. No. | Name | Minimum required Nos. | Available Nos. | Working | Remarks of the Inspectors |
|---------|---------------------------|-----------------------|----------------|---------|---------------------------|
| 1 | Refractometer | 1 | 1 | Yes | |
| 2 | Polarimeter | 1 | 1 | Yes | |
| 3 | Photoelectric colorimeter | 1 | 1 | Yes | |
| 4 | Ph meter | 1 | 1 | Yes | |
| 5 | Atomic model set | 2 | 2 | Yes | |
| 6 | Electronic balance | 1 | 1 | Yes | |
| 7 | Periodic table chart | 0 | 2 | Yes | |

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

Physiology & Pharmacology Laboratory**Equipments:**

| Sl. No. | Name | Minimum required Nos. | Available Nos. | Working | Remarks of the Inspectors |
|---------|--|-----------------------|----------------|---------|---------------------------|
| 1 | Haemoglobinometer | 20 | 28 | Yes | |
| 2 | Haemocytometer | 10 | 18 | Yes | |
| 3 | Student's organ bath | 1 | 5 | Yes | |
| 4 | Sherington's rotating drum | 1 | 7 | Yes | |
| 5 | Frog board | 0 | 10 | Yes | |
| 6 | Tray (dissecting) | 0 | 10 | Yes | |
| 7 | Frontal writing lever | 0 | 5 | Yes | |
| 8 | Aeration tube | 0 | 5 | Yes | |
| 9 | Telethermometer | 1 | 1 | Yes | |
| 10 | Pole climbing apparatus | 1 | 1 | Yes | |
| 11 | Histamine chamber | 1 | 1 | Yes | |
| 12 | Simple lever | 0 | 5 | Yes | |
| 13 | Sterling heart lever | 0 | 5 | Yes | |
| 14 | Aerator | 0 | 5 | Yes | |
| 15 | Histological Slides | 0 | 80 | Yes | |
| 16 | Sphygmomanometer (B.P. apparatus) | 5 | 5 | Yes | |
| 17 | Stethoscope | 5 | 5 | Yes | |
| 18 | First aid equipment | 0 | 2 | Yes | |
| 19 | Contraceptive device | 0 | 5 | Yes | |
| 20 | Dissecting (surgical) instruments | 0 | 2 | Yes | |
| 21 | Balance for weighing small Animals | 1 | 1 | Yes | |
| 22 | Kymograph paper | 0 | 1 | Yes | |
| 23 | Actophotometer | 1 | 1 | Yes | |
| 24 | Analgesiometer | 1 | 1 | Yes | |
| 25 | Thermometer | 0 | 5 | Yes | |
| 26 | Plastic animal cage | 0 | 5 | Yes | |
| 27 | Double unit organ bath with thermostat | 1 | 3 | Yes | |
| 28 | Refrigerator | 1 | 1 | Yes | |
| 29 | Digital balance | 1 | 1 | Yes | |
| 30 | Charts | 0 | 50 | Yes | |
| 31 | Human skeleton | 1 | 1 | Yes | |
| 32 | Anatomical specimen (Heart, brain, eye, ear, reproductive system etc.) | 0 | 20 | Yes | |
| 33 | Electro-convulsimeter | 1 | 1 | Yes | |
| 34 | Stop watch | 0 | 10 | Yes | |
| 35 | Clamp, boss heads, screw clips | 0 | 5 | Yes | |
| 36 | Syme's Cannula | 0 | 5 | Yes | |

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

Pharmacognosy Laboratory**Equipments:**

| Sl. No. | Name | Minimum required Nos. | Available Nos. | Working | Remarks of the Inspectors |
|---------|--------------------------|-----------------------|----------------|---------|---------------------------|
| 1 | Projection Microscope | 1 | 0 | Yes | |
| 2 | Charts (different types) | 0 | 50 | Yes | |
| 3 | Models (different types) | 0 | 10 | Yes | |
| 4 | Permanent Slides | 0 | 50 | Yes | |
| 5 | Slides and Cover Slips | 0 | 50 | Yes | |

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

Pharmacy Practice Laboratory

Equipments:

| Sl. No. | Name | Minimum required Nos. | Available Nos. | Working | Remarks of the Inspectors |
|---------|---|-----------------------|----------------|---------|---------------------------|
| 1 | Colorimeter | 2 | 2 | Yes | |
| 2 | Microscope | 0 | 40 | Yes | |
| 3 | Permanent slides (skin, kidney, pancreas, smooth muscle, liver etc..) | 0 | 0 | Yes | |
| 4 | Watch glass | 0 | 10 | Yes | |
| 5 | Centrifuge | 1 | 1 | Yes | |
| 6 | Biochemical reagents for analysis of normal and pathological constituents in urine and blood facilities | 0 | 0 | Yes | |
| 7 | Filtration equipment | 2 | 2 | Yes | |
| 8 | Filling Machine | 1 | 2 | Yes | |
| 9 | Sealing Machine | 1 | 2 | Yes | |
| 10 | Autoclave sterilizer | 1 | 1 | Yes | |
| 11 | Membrane filter | 0 | 1 | Yes | |
| 12 | Sintered glass funnel with complete filtering assemble | 0 | 5 | Yes | |
| 13 | Small disposable membrane filter for IV admixture filtration | 0 | 0 | Yes | |
| 14 | Laminar air flow bench | 1 | 1 | Yes | |
| 15 | Vacuum pump | 1 | 1 | Yes | |
| 16 | Oven | 1 | 2 | Yes | |
| 17 | Surgical dressing | 0 | 0 | Yes | |
| 18 | Incubator | 1 | 1 | Yes | |
| 19 | PH meter | 1 | 1 | Yes | |
| 20 | Disintegration test apparatus | 1 | 1 | Yes | |
| 21 | Hardness tester | 1 | 1 | Yes | |
| 22 | Centrifuge | 1 | 1 | Yes | |
| 23 | Magnetic stirrer | 1 | 1 | Yes | |
| 24 | Thermostatic bath | 1 | 1 | Yes | |

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

Signature of the Head of the Institution

Signature of the Inspectors

Observations of the Inspectors:

| | |
|--|----|
| Compliance of the last recommendations by Inspectors | |
| Specific observations if not compiled | |
| Signature of Inspectors: | 1. |
| | 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