

**PHARMACY COUNCIL OF INDIA**  
**Standard Inspection Format (S.I.F) for institutions conducting B. Pharm for 100 admsns.**

**(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**

|                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A – I.1</b><br>Name of the Institution:<br>Complete Postal address:<br>STD code<br>Telephone No.<br>Fax No.<br>E-mail                                                   | Bhaskar Pharmacy College ,<br>Bhaskar Nagar, Yenkapally (V), Moinabad (M), RR<br>Dist.<br>08413<br>235027<br>08413235685<br><a href="mailto:principal_bpc@ymail.com">principal_bpc@ymail.com</a> , <a href="mailto:principal@bpc.edu.in">principal@bpc.edu.in</a> .                                     |
| Year of Establishment                                                                                                                                                      | 2007                                                                                                                                                                                                                                                                                                    |
| Status of the course conducting body:<br>Government / University / Autonomous / Aided /<br>Private (Enclose copy of Registration documents of<br>Society/Trust)            | <b>PRIVATE</b><br>(Enclosed copy of Registration documents of Society/<br>Trust)                                                                                                                                                                                                                        |
| <b>A – I.2</b><br>Name, address of the Society/Trust/ Management<br>(attach documentary evidence)<br>STD Code:<br>Telephone No:<br>Fax No:<br>E-mail<br>Web Site:          | J B Educational Society<br>6-3-248/A, 4 <sup>th</sup> Floor, Bhaskar Plaza, Road No. 1,<br>Banjara Hills, Hyderabad, Pin: 500034<br>040 23301523<br>04023304036<br><a href="mailto:principal@bpc.edu.in">principal@bpc.edu.in</a><br><a href="http://www.bpc.edu.in">www.bpc.edu.in</a>                 |
| <b>A – I.3</b><br>Name, Designation and Address of person to be<br>contacted by phone<br>STD Code<br>Telephone No<br>Office<br>Residence<br>Mobile No.<br>Fax No<br>E-Mail | Dr A Srinivasa Rao<br>Principal, Bhaskar Pharmacy College, Yenkapally (V),<br>Moinabad (M), RR Dist.<br>08413<br>235027<br>235027<br>9704014333<br>08413235685<br><a href="mailto:principal_bpc@ymail.com">principal_bpc@ymail.com</a> , <a href="mailto:principal@bpc.edu.in">principal@bpc.edu.in</a> |
| <b>A – I.4</b><br>Name and Address of the Head of the Institution                                                                                                          | Dr A Srinivasa Rao<br>Principal, Bhaskar Pharmacy College,<br>Yenkapally (V), Moinabad (M), RR Dist.                                                                                                                                                                                                    |

**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           | 2016-2017                  | DD NO. 312990 | 24/08/2016 |                           |

**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- 2017     | Approval Letter No and Date   | 32-547/2013-PCI/49428-31 Dt: 11/02/2014 | G.O Rt.No.60 & Dated 04/08/2014 | Affiliation Letter Dated: 27/06/2016 |                           |
|                    |                | Approved                      | 100                                     | 120                             | 100                                  |                           |
|                    |                | Actually Admitted             | Admissions under process                | Admissions under process        | Admissions under process             |                           |

**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                   | No                          | 100            | 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 Details

No

**A-I.7**

| Status of the Pharmacy Course: |       |
|--------------------------------|-------|
| Independent Building           | : YES |
| Wing of another college        | : NO  |
| Separate Campus                | : YES |
| Multi Institutional Campus     | : YES |

Examining Authority: Degree Course  
 With complete postal Address,  
 Telephone No. and STD Code. : The Registrar, Jawaharlal Nehru Technological University  
 Kukatpally, Hyderabad – 500072.  
 040 – 32422253

Signature of the Head of the Institution

Signature of the Inspectors

## B - DETAILS OF THE INSTITUTION

|                                         |                       |                             |                                                           |                              |                                      |
|-----------------------------------------|-----------------------|-----------------------------|-----------------------------------------------------------|------------------------------|--------------------------------------|
| <b>B -I .1</b><br>Name of the Principal |                       | <b>Dr. A. Srinivasa Rao</b> |                                                           |                              |                                      |
| <b>Qualification/<br/>Experience</b>    | <b>Qualification*</b> |                             | <b>Teaching Experience<br/>Required</b>                   | <b>Actual<br/>experience</b> | <b>Remarks of the<br/>Inspectors</b> |
|                                         | M. Pharm              | Yes                         | 15 years, out of which 5 years<br>as Prof. / HOD          | <b>22 Years</b>              |                                      |
|                                         | PhD                   | Yes                         | 10 years, out of which at least<br>05 years as Asst. Prof |                              |                                      |

\* Documentary evidence should be provided

### B -I .2

For institution seeking continuation of affiliation

| Course          | Date of last<br>Inspection | Remarks of the<br>Previous Inspection<br>Report                           | Complied<br>/ Not Complied | Intake<br>reduced/Stopped in the<br>last 03 years* |
|-----------------|----------------------------|---------------------------------------------------------------------------|----------------------------|----------------------------------------------------|
| <b>B. Pharm</b> | <b>07/02/2013</b>          | <b>Recommended to<br/>implement sixth pay<br/>salary to all the staff</b> | <b>Yes</b>                 | <b>No</b>                                          |

|                                                      |                 |
|------------------------------------------------------|-----------------|
| <b>B- I.3</b>                                        |                 |
| <b>Status of Governing Council:</b>                  | <b>Society</b>  |
| <b>Details of the Governing Body</b>                 | <b>Enclosed</b> |
| <b>Minutes of the last Governing council Meeting</b> | <b>Enclosed</b> |

### B -I .4

Pay Scales:

| Staff                                                   | Scale of pay                  |     | PF  | Gratuity | Pension<br>benefit | Remarks of<br>the<br>Inspectors |
|---------------------------------------------------------|-------------------------------|-----|-----|----------|--------------------|---------------------------------|
| <b>Teaching<br/>Staff</b>                               | <b>AICTE /UGC/State Govt.</b> | Yes | No  | No       | No                 |                                 |
| <b><sup>Non-<br/>State</sup><br/>Teaching<br/>Staff</b> | <b>Government</b>             | Yes | Yes | No       | No                 |                                 |

### B -I .5

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

| ACADEMIC YEAR                       | Year 2013 – 14 | Year 2014 – 15 | Year 2015 – 16 |
|-------------------------------------|----------------|----------------|----------------|
| <b>Sanctioned</b>                   | <b>100</b>     | <b>100</b>     | <b>100</b>     |
| <b>No. of Admissions</b>            | <b>76</b>      | <b>56</b>      | <b>66</b>      |
| <b>Unfilled Seats</b>               | <b>24</b>      | <b>44</b>      | <b>34</b>      |
| <b>No. of Excess<br/>Admissions</b> | <b>0</b>       | <b>0</b>       | <b>0</b>       |

**B –I .6**

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

| <b>ACADEMIC YEAR</b>       | <b>Year 2013 – 14</b> | <b>Year 2014 – 15</b> | <b>Year 2015 – 16</b> |
|----------------------------|-----------------------|-----------------------|-----------------------|
| <b>1<sup>st</sup> year</b> | <b>65</b>             | <b>60</b>             | <b>55</b>             |
| <b>2<sup>nd</sup> year</b> | <b>60</b>             | <b>60</b>             | <b>72</b>             |
| <b>3<sup>rd</sup> year</b> | <b>62</b>             | <b>62</b>             | <b>67</b>             |
| <b>Final year</b>          | <b>85</b>             | <b>78</b>             | <b>72</b>             |
| <b>Pass % (Final Year)</b> | <b>85</b>             | <b>78</b>             | <b>72</b>             |

**B – II****Co – Curricular Activities / S<sup>P</sup>orts Activities**

|                                                                                                           |                                              |
|-----------------------------------------------------------------------------------------------------------|----------------------------------------------|
| Whether college has NSS Unit (Yes/No)?<br>If no give reasons                                              | NO<br>This year we are planning to start NSS |
| 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                                                                                             | Individual                                   |

**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 - 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     | 0.00               |                         |                             |                    |                          |
|                                                              | b. Others         | 0.00               |                         |                             |                    |                          |
| 2.                                                           | Tuition Fee       | 17221650.00        | 1.                      | Building                    | 0.00               |                          |
| 3.                                                           | Library Fee       | 0.00               | 2.                      | Equipment                   | 254673.00          |                          |
| 4.                                                           | Sports Fee        | 0.00               | 3.                      | Others                      | 265000.00          |                          |
| 5.                                                           | Union Fee         | 0.00               | REVENUE EXPENDITURE     |                             |                    |                          |
| 6.                                                           | Others            | 2658877.00         | 1.                      | Salary                      | 10945414.00        |                          |
|                                                              |                   |                    | Maintenance Expenditure |                             |                    |                          |
|                                                              |                   |                    | 2.                      | i. College                  | 2262844.00         |                          |
|                                                              |                   |                    |                         | ii. Others                  | 479942.00          |                          |
|                                                              |                   |                    | 3.                      | University Fee              | 1134353.00         |                          |
|                                                              |                   |                    | 4.                      | Apex Bodies Fee             | 0.00               |                          |
|                                                              |                   |                    | 5.                      | Government Fee              | 0.00               |                          |
|                                                              |                   |                    | 6.                      | Deposit held by the College | 0.00               |                          |
|                                                              |                   |                    | 7.                      | Others                      | 5057974.00         |                          |
| 8.                                                           | Misc. Expenditure | 0.00               |                         |                             |                    |                          |
| <b>Total</b>                                                 |                   | <b>19880527.00</b> | <b>Total</b>            |                             | <b>19880527.00</b> |                          |
| Note: Enclose relevant documents                             |                   |                    |                         |                             |                    |                          |

Signature of the Head of the Institution

Signature of the Inspectors 5

## PART- II PHYSICAL INFRASTRUCTURE

1. a. Availability of Land (B. Pharm courses) : **Available**
  - a) 2.5 acres District HQ/Corporation/Municipality limit
  - b) 0.5 acre for City / Metros
- b. Building : **Own**
- c. Land Details to be in name of Trust and Society  
Records to be enclosed  
Sale deed : **Enclosed**
- d. Building<sup>†</sup>:
  - i) Approved Building plan, to be Enclosed : **Enclosed**
- e. Total Built Area of the college building in Sq.mts : Built up Area - 6400

Amenities and Circulation Area - 1700

### 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<br>Or<br>4 of 150 sq.mts. with Public address System. | 480                      |                           |

(\*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<br>75 Sq. mts - Essential                                        | 12 & 1000                                                   |                     |
| 2       | Pharmaceutics<br>Pharmaceutical Chemistry<br>Pharmaceutical Analysis<br>Pharmacology<br>Pharmacognosy<br>Pharmaceutical Biotechnology (Including Aseptic Room)<br>Total no. Laboratories for B.Pharm course | 03 Laboratories<br>02 Laboratories<br>01 Laboratory<br>02 Laboratories<br>01 Laboratories<br>01 Laboratory<br>10 Laboratories * | 4 & 325<br>3 & 250<br>1 & 85<br>2 & 165<br>1 & 85<br>1 & 90 |                     |
| 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)                                                                                                             | 6 & 85                                                      |                     |
| 4       | Area of the Machine Room                                                                                                                                                                                    | 80-100 Sq.mts                                                                                                                   | 1 & 80                                                      |                     |
| 5       | Central Instrumentation Room                                                                                                                                                                                | 80 Sq.mts with A/ C                                                                                                             | 1 & 80                                                      |                     |
| 6       | Store Room – I                                                                                                                                                                                              | 1 (Area 100 Sq mts)                                                                                                             | 1 & 100                                                     |                     |
| 7       | Store Room – II (For Inflammable chemicals)                                                                                                                                                                 | 1 (Area 20 Sq mts)                                                                                                              | 1 & 20                                                      |                     |

\*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                        | 1         | 40              |                     |
| 2      | Office – I - Establishment | 01                                 | 60Sq.mts                          | 1         | 50              |                     |
| 3      | Office – II - Academics    |                                    |                                   | 1         | 30              |                     |
| 4      | Confidential Room          |                                    |                                   | 1         | 15              |                     |

**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                     | 5         | 100            |                     |
| 2       | Faculty Rooms for B.Pharm course |                                    | 10 Sq mts x n (n=No of teachers)  | 5         | 200            |                     |

**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         | 120             |                     |
| 2      | Library                                     | 01                                 | 150 Sq mts                                              | 1         | 180             |                     |
| 3      | Museum                                      | 01                                 | 50 Sq mts<br>(May be attached to the Pharmacognosy lab) | 1         | 50              |                     |
| 4      | Auditorium / Multi Purpose Hall (Desirable) | 01                                 | 250 – 300 seating capacity                              | 1         | 250             |                     |
| 5      | Seminar Hall                                | 01                                 |                                                         | 1         | 150             |                     |
| 6      | Herbal Garden (Desirable)                   | 01                                 | Adequate Number of Medicinal Plants                     | 1         | 180             |                     |

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                                                                  | 1         | 60              |                     |
| 2       | Boy's Common Room (Essential)                       | 01                                 | 60 Sq.mts                                                                  | 1         | 60              |                     |
| 3       | Toilet Blocks for Boys                              | 01                                 | 24 Sq.mts                                                                  | 3         | 90              |                     |
| 4       | Toilet Blocks for Girls                             | 01                                 | 24 Sq.mts                                                                  | 3         | 90              |                     |
| 5       | Drinking Water facility – Water Cooler (Essential). | 01                                 |                                                                            | 2         | 20              |                     |
| 6       | Boy's Hostel (Desirable)                            | 01                                 | 9 Sq .mts / Room Single occupancy                                          | 1         | 320             |                     |
| 7       | Girl's Hostel (Desirable)                           | 01                                 | 9 Sq .mts / Room (single occupancy)<br>20 Sq mts / Room (triple occupancy) | 1         | 320             |                     |
| 8       | Power Backup Provision (Desirable)                  | 01                                 |                                                                            | 1         | 10              |                     |

**8. Computer and other Facilities:**

| Name                             | Required                         | No. | Available       | Remarks of the Inspectors |
|----------------------------------|----------------------------------|-----|-----------------|---------------------------|
|                                  |                                  |     | Area in Sq. mts |                           |
| Computer Room for B.Pharm Course | 01<br>(Area 75 Sq mts)           | 1   | 100             |                           |
| Computer (Latest Configuration)  | 1 system for every 10 students   | 50  | 100             |                           |
| Printers                         | 1 printer for every 10 Computers | 6   | NA              |                           |
| Multi Media Projector            | 01                               | 1   | NA              |                           |
| Generator (5KVA)                 | 01                               | 1   | 10              |                           |

**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         | 150             | Available     |                     |
| Staff quarters                      | 16 x 80 Sq. mts                  | 1         | 1500            | Available     |                     |
| Canteen                             | 100 Sq. mts                      | 1         | 150             | Available     |                     |
| Parking Area for staff and students |                                  | 1         | 200             | Available     |                     |
| Bank Extension Counter              |                                  | 1         | 200             | Available     |                     |
| Co operative Stores                 |                                  | 1         | 150             | Available     |                     |
| Guest House                         | 80 Sq. mts                       | 1         | 250             | Available     |                     |
| Transport Facilities for students   |                                  | 6         | 60              | Available     |                     |
| Medical Facility (First Aid)        |                                  | 1         | 60              | Available     |                     |

## 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 | 649                                 | 4691                        |                           |
| 2       | Annual addition of books                                   |             | 150 to 200 books per year                                                                                 | 30                                  | 759                         |                           |
| 3       | Periodicals<br>Hard copies / online                        |             | 10 National<br>05 International periodicals                                                               | 112                                 | 112(online) /<br>30 (Print) |                           |
| 4       | CDS                                                        |             | Adequate Nos                                                                                              | 10                                  | 10                          |                           |
| 5       | Internet Browsing Facility                                 |             | Yes/No<br>(Minimum ten computers)                                                                         | Available                           |                             |                           |
| 6       | Reprographic Facilities:<br>Photo Copier<br>Fax<br>Scanner |             | 01<br>01<br>01                                                                                            | Available<br>Available<br>Available |                             |                           |
| 7       | Library Automation and Computerized System                 |             |                                                                                                           | Available                           |                             |                           |
| 8       | Library Timings                                            |             |                                                                                                           | 9:00AM – 5:00 PM                    |                             |                           |

## 10.B. Library Staff:

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

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 | Practicals | Remarks of the Inspectors |
|------------|--------|------------|---------------------------|
| B.Pharmacy | 60:1   | 30:2       |                           |

#### 2. Scheme of B. Pharm Course:

Semester

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

| Commencement | Completion |
|--------------|------------|
| 13/06/2016   | 12/05/2017 |

No of Days

No of Days

#### 4. Vacation:

Summer:

30

Winter: 7

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

230

#### 6. Time Table:

Time Table for B. Pharm course Enclosed

Yes

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

##### I B. Pharm:

| Subject                              | No of Theory Classes |                       | Practicals             |                       | No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5<br>No. of classes x hours per class | Remarks of the Inspectors |
|--------------------------------------|----------------------|-----------------------|------------------------|-----------------------|------------------------------------------------------------------------------------------------------------------|---------------------------|
|                                      | Prescribed No of Hrs | No of Hours Conducted | Prescribed No of Hours | No of Hours Conducted |                                                                                                                  |                           |
| 1                                    | 2                    | 3                     | 4                      | 5                     |                                                                                                                  |                           |
| Remedial Mathematics                 | 4                    | 4                     | 0                      | 0                     | 30 x 4 = 120                                                                                                     |                           |
| Remedial Biology                     | 3                    | 3                     | 3                      | 3                     | 30 x 6 = 180                                                                                                     |                           |
| Pharmaceutical Inorganic Chemistry   | 4                    | 4                     | 3                      | 3                     | 30 x 7 = 210                                                                                                     |                           |
| Pharmaceutical Organic Chemistry - I | 3                    | 3                     | 3                      | 3                     | 30 x 6 = 180                                                                                                     |                           |

Signature of the Head of the Institution

Signature of the Inspectors

|                                                    |          |          |          |          |                     |  |
|----------------------------------------------------|----------|----------|----------|----------|---------------------|--|
| <b>Anatomy,Physiology &amp; Health Education</b>   | <b>3</b> | <b>3</b> | <b>3</b> | <b>3</b> | <b>30 x 6 = 180</b> |  |
| <b>English Language &amp; Communication Skills</b> | <b>2</b> | <b>2</b> | <b>2</b> | <b>2</b> | <b>30 x 4 = 120</b> |  |
| <b>Dispensing &amp; Hospital Pharmacy</b>          | <b>3</b> | <b>3</b> | <b>3</b> | <b>3</b> | <b>30 x 6 = 180</b> |  |

## II B. Pharm:

| Subject<br>1                                           | No of Theory Classes      |                            | Practicals                  |                            | No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5<br>No. of classes x hours per class | Remarks of the Inspectors |
|--------------------------------------------------------|---------------------------|----------------------------|-----------------------------|----------------------------|------------------------------------------------------------------------------------------------------------------|---------------------------|
|                                                        | Prescribed No of Hrs<br>2 | No of Hours Conducted<br>3 | Prescribed No of Hours<br>4 | No of Hours Conducted<br>5 |                                                                                                                  |                           |
| <b>Pharmaceutical Unit Operations - I</b>              | <b>4</b>                  | <b>4</b>                   | <b>0</b>                    | <b>0</b>                   | <b>16 x 4 = 64</b>                                                                                               |                           |
| <b>Pharmaceutical Organic Chemistry – II</b>           | <b>4</b>                  | <b>4</b>                   | <b>3</b>                    | <b>3</b>                   | <b>16 x 7 = 112</b>                                                                                              |                           |
| <b>Statistical Methods &amp; Computer Applications</b> | <b>4</b>                  | <b>4</b>                   | <b>3</b>                    | <b>3</b>                   | <b>16 x 7 = 112</b>                                                                                              |                           |
| <b>Physical Pharmacy – I</b>                           | <b>4</b>                  | <b>4</b>                   | <b>3</b>                    | <b>3</b>                   | <b>16 x 7 = 112</b>                                                                                              |                           |
| <b>Anatomy,Physiology &amp; Pathophysiology</b>        | <b>4</b>                  | <b>4</b>                   | <b>3</b>                    | <b>3</b>                   | <b>16 x 7 = 112</b>                                                                                              |                           |
| <b>Pharmaceutical Unit Operations - II</b>             | <b>4</b>                  | <b>4</b>                   | <b>3</b>                    | <b>3</b>                   | <b>16 x 7 = 112</b>                                                                                              |                           |
| <b>Pharmaceutical Biochemistry</b>                     | <b>4</b>                  | <b>4</b>                   | <b>3</b>                    | <b>3</b>                   | <b>16 x 7 = 112</b>                                                                                              |                           |
| <b>Pharmacognosy – I</b>                               | <b>4</b>                  | <b>4</b>                   | <b>3</b>                    | <b>3</b>                   | <b>16 x 7 = 112</b>                                                                                              |                           |
| <b>Physical Pharmacy - II</b>                          | <b>4</b>                  | <b>4</b>                   | <b>3</b>                    | <b>3</b>                   | <b>16 x 7 = 112</b>                                                                                              |                           |
| <b>Environmental Sciences</b>                          | <b>4</b>                  | <b>4</b>                   | <b>0</b>                    | <b>0</b>                   | <b>16 x 4 = 64</b>                                                                                               |                           |

**III B. Pharm:**

| Subject                        | No of Theory Classes      |                            | Practicals                  |                            | No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5<br>No. of classes x hours per | Remarks of the Inspectors |
|--------------------------------|---------------------------|----------------------------|-----------------------------|----------------------------|------------------------------------------------------------------------------------------------------------|---------------------------|
|                                | Prescribed No of Hrs<br>2 | No of Hours Conducted<br>3 | Prescribed No of Hours<br>4 | No of Hours Conducted<br>5 |                                                                                                            |                           |
| Pharmaceutical Analysis I      | 4                         | 4                          | 3                           | 3                          | 16 x 7 = 112                                                                                               |                           |
| Pharmaceutical Microbiology    | 4                         | 4                          | 3                           | 3                          | 16 x 7 = 112                                                                                               |                           |
| Pharmacognosy - II             | 4                         | 4                          | 3                           | 3                          | 16 x 7 = 112                                                                                               |                           |
| Pharmaceutical Technology - I  | 4                         | 4                          | 3                           | 3                          | 16 x 7 = 112                                                                                               |                           |
| Pharmacology I                 | 4                         | 4                          | 0                           | 0                          | 16 x 4 = 64                                                                                                |                           |
| Medicinal Chemistry I          | 3                         | 3                          | 3                           | 3                          | 16 x 6 = 96                                                                                                |                           |
| Pharmaceutical Technology - II | 3                         | 3                          | 3                           | 3                          | 16 x 6 = 96                                                                                                |                           |
| Pharmacology II                | 4                         | 4                          | 3                           | 3                          | 16 x 7 = 112                                                                                               |                           |
| Chemistry of Natural Drugs     | 4                         | 4                          | 3                           | 3                          | 16 x 7 = 112                                                                                               |                           |
| Pharmaceutical Jurisprudence   | 4                         | 4                          | 0                           | 0                          | 16 x 4 = 64                                                                                                |                           |

**IV B. Pharm:**

| Subject                               | No of Theory Classes |                            | Practicals                  |                            | No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5<br>No. of classes x hours per | Remarks of the Inspectors |
|---------------------------------------|----------------------|----------------------------|-----------------------------|----------------------------|------------------------------------------------------------------------------------------------------------|---------------------------|
|                                       | Prescribed No of Hrs | No of Hours Conducted<br>3 | Prescribed No of Hours<br>4 | No of Hours Conducted<br>5 |                                                                                                            |                           |
| Pharmaceutical Analysis - II          | 3                    | 3                          | 3                           | 3                          | 16 x 6 = 96                                                                                                |                           |
| Biopharmaceutics and Pharmacokinetics | 3                    | 3                          | 3                           | 3                          | 16 x 6 = 96                                                                                                |                           |
| Pharmacology - III                    | 4                    | 4                          | 3                           | 3                          | 16 x 7 = 112                                                                                               |                           |
| Medicinal Chemistry - II              | 4                    | 4                          | 3                           | 3                          | 16 x 7 = 112                                                                                               |                           |

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|                              |   |   |   |   |              |  |
|------------------------------|---|---|---|---|--------------|--|
| Pharmacy Administration      | 4 | 4 | 0 | 0 | 16 x 4 = 64  |  |
| Novel Drug Delivery Systems  | 3 | 3 | 3 | 3 | 16 x 6 = 96  |  |
| Pharmaceutical Biotechnology | 4 | 4 | 3 | 3 | 16 x 7 = 112 |  |
| Pharmacognosy – III          | 3 | 3 | 3 | 3 | 16 x 6 = 96  |  |
| Medicinal Chemistry – III    | 4 | 4 | 3 | 3 | 16 x 7 = 112 |  |
| Clinical Pharmacy            | 4 | 4 | 0 | 0 | 16 x 4 = 64  |  |

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.

| Name of the Event | 2013 – 14 | 2014 – 15 | 2015 – 16 |
|-------------------|-----------|-----------|-----------|
| Guest Lectures    | 3         | 2         | 2         |
| Seminars          | 2         | 2         | 2         |
| Workshops         | 0         | 1         | 0         |
| Symposia          | 0         | 0         | 0         |

B. Papers Presented / Published during last three years

|           | 2013 – 14 |               | 2014 – 15 |               | 2015 – 16 |               |
|-----------|-----------|---------------|-----------|---------------|-----------|---------------|
|           | National  | International | National  | International | National  | International |
| Published | 6         | 4             | 5         | 9             | 6         | 3             |
| Presented | 5         | 0             | 10        | 0             | 12        | 0             |

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

| Class        | I Sessional Dates |            | II Sessional Dates |            | III Sessional Dates |            | Remarks of the Inspectors |
|--------------|-------------------|------------|--------------------|------------|---------------------|------------|---------------------------|
|              | Theory            | Practicals | Theory             | Practicals | Theory              | Practicals |                           |
| I B. Pharm   | 12/10/2015        | 05/10/2015 | 04/01/2016         | 11/01/2016 | 21/03/2016          | 14/03/2016 |                           |
| II B. Pharm  | 24/08/2015        | 31/08/2015 | 26/10/2015         | 12/10/2015 | 09/11/2015          | 02/11/2015 |                           |
| III B. Pharm | 24/08/2015        | 31/08/2015 | 26/10/2015         | 12/10/2015 | 09/11/2015          | 02/11/2015 |                           |
| IV B. Pharm  | 24/08/2015        | 31/08/2015 | 26/10/2015         | 12/10/2015 | 09/11/2015          | 02/11/2015 |                           |

11. Whether Evaluation of the internal assessments is Fair

Yes

| 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 Scored less than 50% |    | Remarks of the Inspectors |
|-------------|----------------------------------------|----|-------------------------------------------|----|------------------------------------------|----|----------------------------------------|----|---------------------------|
|             | Th                                     | Pr | Th                                        | Pr | Th                                       | Pr | Th                                     | Pr |                           |
| I B.Pharm   | 9                                      | 19 | 30                                        | 39 | 16                                       | 3  | 17                                     | 3  |                           |
| II B.Pharm  | 2                                      | 10 | 17                                        | 35 | 19                                       | 7  | 16                                     | 6  |                           |
| III B.Pharm | 0                                      | 37 | 14                                        | 35 | 30                                       | 22 | 30                                     | 2  |                           |
| IV B.Pharm  | 1                                      | 28 | 41                                        | 33 | 13                                       | 9  | 15                                     | 2  |                           |

## 12. Work load of Faculty members for B. Pharm

| S.No. | Name of Faculty           | Subjects Taught                                  | B. Pharm |    |    |    |     |    |    |    | Total Work Load | Remarks of the Inspectors |
|-------|---------------------------|--------------------------------------------------|----------|----|----|----|-----|----|----|----|-----------------|---------------------------|
|       |                           |                                                  | I        |    | II |    | III |    | IV |    |                 |                           |
|       |                           |                                                  | Th       | Pr | Th | Pr | Th  | Pr | Th | Pr |                 |                           |
| 1     | Dr. AV KISHORE BABU       | Clinical Research<br>Pharmacotherapeutics<br>III | 0        | 0  | 0  | 0  | 0   | 0  | 0  | 0  | 0               |                           |
| 2     | Dr. AVANAPU SRINIVASA RAO | Pharmacoepidemiology<br>and<br>Pharmacoeconomics | 0        | 0  | 0  | 0  | 0   | 0  | 0  | 0  | 0               |                           |
| 3     | Dr. B PREMKUMAR           | Pharmaceutical<br>Microbiology                   | 0        | 0  | 0  | 0  | 0   | 0  | 0  | 0  | 0               |                           |
| 4     | Dr. J DEVILAL             | Medicinal Chemistry II                           | 0        | 0  | 0  | 0  | 0   | 0  | 5  | 6  | 11              |                           |
| 5     | Dr. K SRINATH             | Clerkship<br>Pharmacotherapeutics<br>III         | 0        | 0  | 0  | 0  | 0   | 0  | 0  | 0  | 0               |                           |
| 6     | Dr. KEERTHI THATIKONDA    | CPK and PTDM<br>Pharmacotherapeutics<br>II       | 0        | 0  | 0  | 0  | 0   | 0  | 0  | 0  | 0               |                           |
| 7     | Dr. N ANUSHA              | Hospital Pharmacy<br>Pharmacotherapeutics I      | 0        | 0  | 0  | 0  | 0   | 0  | 0  | 0  | 0               |                           |
| 8     | Dr. P RAJESH KUMAR        | Pharmaceutics                                    | 0        | 0  | 0  | 0  | 0   | 0  | 0  | 0  | 0               |                           |
| 9     | Dr. R HEMALATHA           | Pharmaceutical<br>Organic Chemistry              | 0        | 0  | 0  | 0  | 0   | 0  | 0  | 0  | 0               |                           |
| 10    | Miss. K AVANTHI           | Pharmacology II                                  | 0        | 0  | 0  | 0  | 0   | 0  | 0  | 0  | 0               |                           |

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|    |                                |                                                                             |   |   |   |   |   |   |   |   |   |   |    |  |
|----|--------------------------------|-----------------------------------------------------------------------------|---|---|---|---|---|---|---|---|---|---|----|--|
| 11 | Miss. K MAMITHA                | Pharmaceutical<br>Inorganic Chemistry                                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
| 12 | Mrs. N KALPANA                 | Human Anatomy and<br>Physiology                                             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
| 13 | Miss. S LAKSHMI<br>KUMARI      | Pharmaceutical<br>Microbiology                                              | 0 | 0 | 0 | 0 | 5 | 6 | 0 | 0 | 0 | 0 | 11 |  |
| 14 | Miss. SARA<br>LAVANYA          | APHE I                                                                      | 2 | 6 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 8  |  |
| 15 | Miss. SOUJANYA<br>GORIPARTHI   | Pharmacology II                                                             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
| 16 | Mr. A ABHILASH                 | Pharmaceutical<br>Analysis I                                                | 0 | 0 | 0 | 0 | 5 | 6 | 0 | 0 | 0 | 0 | 11 |  |
| 17 | Mr. B DURGA<br>PRASAD          | Pharmaceutical<br>Organic Chemistry I                                       | 5 | 6 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 11 |  |
| 18 | Mr. G AVINASH                  | APHE 1                                                                      | 2 | 6 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 8  |  |
| 19 | Mr. M SRI<br>RAMACHANDRA       | Pharmacology I<br>Pharmacotherapeutics<br>II                                | 0 | 0 | 0 | 0 | 5 | 0 | 0 | 0 | 0 | 0 | 5  |  |
|    |                                |                                                                             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
| 20 | Mr. MARAPOGU<br>ANILKUMAR      | Dispensing and<br>General Pharmacy                                          | 5 | 6 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 11 |  |
| 21 | Mr. MOHD ABDUL<br>HADI         | Biostatistics and<br>Research Methodology<br>Pharmaceutical<br>Technology I | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
|    |                                |                                                                             | 0 | 0 | 0 | 0 | 2 | 6 | 0 | 0 | 0 | 0 | 8  |  |
| 22 | Mr.<br>MURARISHETTI<br>SAMPATH | Hospital Pharmacy<br>Pharmaceutical<br>Microbiology                         | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
|    |                                |                                                                             | 0 | 0 | 0 | 0 | 0 | 6 | 0 | 0 | 0 | 0 | 6  |  |
| 23 | Mr.<br>NAROTTAMPAL             | Pharmaceutical<br>Analysis                                                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
| 24 | Mr. SHAIK<br>SHEKSHAVALI       | Pharmacy<br>Administration<br>Physical Pharmacy I                           | 0 | 0 | 0 | 0 | 0 | 0 | 5 | 0 | 0 | 0 | 5  |  |
|    |                                |                                                                             | 0 | 0 | 0 | 6 | 0 | 0 | 0 | 0 | 0 | 0 | 6  |  |
| 25 | Mr. T<br>MADHUSUDHAN           | Pathophysiology<br>Pharmacology II                                          | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
|    |                                |                                                                             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
| 26 | Mr. TAPAN<br>KUMAR PATEL       | Physical Pharmacy I                                                         | 0 | 0 | 5 | 6 | 0 | 0 | 0 | 0 | 0 | 0 | 11 |  |

|    |                                   |                                                                        |   |   |   |   |   |   |   |   |    |  |
|----|-----------------------------------|------------------------------------------------------------------------|---|---|---|---|---|---|---|---|----|--|
| 27 | Mr. V<br>LOKESWARA<br>BABU        | Biopharmaceutics and<br>Pharmacokinetics                               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
| 28 | Mrs. C<br>NAGAMANI                | Pharmaceutical<br>Organic Chemistry II                                 | 0 | 0 | 5 | 6 | 0 | 0 | 0 | 0 | 11 |  |
| 29 | Mrs. G BHAVANI                    | Pharmaceutical<br>Formulations                                         | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
| 30 | Mrs. K DEVI                       | Medicinal<br>Biochemistry<br>Medicinal Chemistry                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
| 31 | Mrs. K<br>SUMALATHA               | Pharmacognosy II                                                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
| 32 | Mrs. K SUVARNA<br>LAXMI           | Clinical Pharmacy<br>Clinical Toxicology<br>Pharmacology I             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
| 33 | Mrs.<br>KATAKAMSHETTI<br>SONICA   | Pharmacognosy III                                                      | 0 | 0 | 0 | 0 | 0 | 0 | 3 | 6 | 9  |  |
| 34 | Mrs. N V B L A<br>Baby Kambampati | Pharmacology III                                                       | 0 | 0 | 0 | 0 | 0 | 0 | 5 | 6 | 11 |  |
| 35 | Mrs. P LATHA                      | Anatomy Physiology<br>and Pathophysiology                              | 0 | 0 | 5 | 6 | 0 | 0 | 0 | 0 | 11 |  |
| 36 | Mrs. P UDAYA<br>CHANDRIKA         | Pharmacognosy and<br>Phytopharmaceuticals<br>Pharmacognosy III         | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
| 37 | Mrs. R SUNITHA                    | Pharmaceutical<br>Technology I                                         | 0 | 0 | 0 | 0 | 3 | 6 | 0 | 0 | 9  |  |
| 38 | Mrs. SABITA<br>SAHOO              | Clinical Pharmacy<br>Community Pharmacy                                | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
| 39 | Mrs. V ABHINETRI                  | Pharmaceutical<br>Jurisprudance<br>Pharmaceutical Unit<br>Operations I | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |  |
| 40 | Mrs. Y SIRISHA                    | Biopharmaceutics and<br>Pharmacokinetics                               | 0 | 0 | 0 | 0 | 0 | 0 | 4 | 6 | 10 |  |

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

| <b>Details</b>            | <b>2013-14</b> | <b>2014-15</b> | <b>2015-16</b> |
|---------------------------|----------------|----------------|----------------|
| No. of students appeared  | 15             | 18             | 12             |
| No. of students Qualified | 4              | 8              | 2              |
| Percentage                | 27             | 44             | 17             |

**14. Whether the Institution has an Industry interaction Cell: Available**

| <b>Events</b>                                               | <b>Details For the previous Year</b> |
|-------------------------------------------------------------|--------------------------------------|
| No of Industrial Visits                                     | 3                                    |
| Industrials Tour                                            | 1                                    |
| Industrial Training                                         | 1                                    |
| No of resourse persons from the Industry for Guest Lectures | 2                                    |
| No. of collaboration projects with Industry                 | 0                                    |

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

| <b>Year</b>                                          | <b>2013-14</b> | <b>2014-15</b> | <b>2015-16</b> |
|------------------------------------------------------|----------------|----------------|----------------|
| <b>No. of students appeared for campus interview</b> | <b>40</b>      | <b>42</b>      | <b>49</b>      |
| <b>% Placed</b>                                      | <b>15</b>      | <b>25</b>      | <b>12</b>      |

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

: Yes

**PART IV - PERSONNEL**

**TEACHING STAFF:**

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

| S.No. | Name                  | Designation        | Qualification                 | Date of Joining | Teaching Experience After PG | State Pharmacy Coun. Reg No. | Signature of Faculty | Remarks of Inspector |
|-------|-----------------------|--------------------|-------------------------------|-----------------|------------------------------|------------------------------|----------------------|----------------------|
| 1     | AVANAPU SRINIVASA RAO | Principal/Director | B Pharm, M Pharm, PHD, F.I.C, | 22/09/2008      | 7.9 + 14.4                   | 18268A1                      |                      |                      |
| 2     | V LOKESWARA BABU      | Asstt. Professor   | B Pharm, M Pharm,             | 09/09/2009      | 7.0 + 1.1                    | 43828A1                      |                      |                      |
| 3     | M SRI RAMACHANDRA     | Asstt. Professor   | B Pharm, M Pharm,             | 01/12/2009      | 6.7 + 1.3                    | 36381A2                      |                      |                      |
| 4     | V ABHINETRI           | Lecturer           | B Pharm, M Pharm,             | 16/08/2010      | 6.0 + 0.0                    | 053590A1                     |                      |                      |
| 5     | NAROTTAMPAL           | Lecturer           | B Pharm, M Pharm              | 09/12/2010      | 5.7 + 0.0                    | A2165                        |                      |                      |
| 6     | K SUMALATHA           | Lecturer           | B Pharm, M Pharm,             | 13/12/2010      | 5.7 + 0.0                    | 43589A2                      |                      |                      |
| 7     | AV KISHORE BABU       | Lecturer           | B Pharm, Pharm D (PB)         | 21/12/2011      | 4.7 + 0.0                    | 051304A1                     |                      |                      |
| 8     | MOHD ABDUL HADI       | Lecturer           | B Pharm, M Pharm,             | 01/02/2012      | 4.6 + 0.6                    | 42171                        |                      |                      |
| 9     | Y SIRISHA             | Lecturer           | B Pharm, M Pharm,             | 25/01/2012      | 4.6 + 0.0                    | 061321A1                     |                      |                      |
| 10    | K DEVI                | Lecturer           | B Pharm, M Pharm,             | 12/03/2012      | 4.5 + 2.3                    | 053409A1                     |                      |                      |
| 11    | J DEVILAL             | Asstt. Professor   | B Pharm, M Pharm, PHD         | 01/11/2011      | 4.8 + 1.1                    | 039936A1                     |                      |                      |
| 12    | P UDAYA CHANDRIKA     | Lecturer           | B Pharm, M Pharm,             | 18/01/2012      | 4.6 + 0.4                    | 053654A1                     |                      |                      |
| 13    | SABITA SAHOO          | Asstt. Professor   | B Pharm, M Pharm,             | 18/07/2013      | 3.1 + 5.9                    | 8420                         |                      |                      |
| 14    | B PREMKUMAR           | Asstt. Professor   | B Pharm, M Pharm, PHD,        | 01/07/2013      | 3.1 + 0.0                    | 14223A1                      |                      |                      |
| 15    | C NAGAMANI            | Lecturer           | B Pharm, M Pharm,             | 17/01/2013      | 3.6 + 1.7                    | 047834A2                     |                      |                      |
| 16    | B DURGA PRASAD        | Asstt. Professor   | B Pharm, M Pharm,             | 04/03/2013      | 3.5 + 4.5                    | 042168A1                     |                      |                      |

|    |                              |                        |                              |            |           |          |  |  |
|----|------------------------------|------------------------|------------------------------|------------|-----------|----------|--|--|
| 17 | P LATHA                      | Lecturer               | B Pharm,<br>M Pharm,         | 05/07/2013 | 3.1 + 0.0 | 93491A1  |  |  |
| 18 | N V B L A BABY<br>KAMBAMPATI | Lecturer               | B Pharm,<br>M Pharm,         | 03/02/2014 | 2.6 + 1.1 | 52621A2  |  |  |
| 19 | N KALPANA                    | Lecturer               | B Pharm,<br>M Pharm,         | 01/05/2014 | 2.3 + 0.0 | 77808A1  |  |  |
| 20 | S LAKSHMI<br>KUMARI          | Lecturer               | B Pharm,<br>M Pharm,         | 02/06/2014 | 2.2 + 0.0 | 50194A2  |  |  |
| 21 | SOUJANYA<br>GORIPARTHI       | Lecturer               | B Pharm,<br>M Pharm,         | 04/08/2014 | 2.1 + 0.0 | 86257A1  |  |  |
| 22 | MARAPOGU<br>ANILKUMAR        | Lecturer               | B Pharm,<br>M Pharm,         | 01/12/2014 | 1.7 + 0.0 | 84410A1  |  |  |
| 23 | MURARISHETTI<br>SAMPATH      | Lecturer               | B Pharm,<br>M Pharm,         | 15/04/2015 | 1.4 + 0.0 | Applied  |  |  |
| 24 | SARA LAVANYA                 | Lecturer               | B Pharm,<br>M Pharm,         | 15/06/2015 | 1.2 + 0.0 | Applied  |  |  |
| 25 | A ABHILASH                   | Lecturer               | B Pharm,<br>M Pharm,         | 15/06/2015 | 1.2 + 0.0 | Applied  |  |  |
| 26 | KATAKAMSHETTI<br>SONICA      | Lecturer               | B Pharm,<br>M Pharm,         | 15/06/2015 | 1.2 + 0.0 | Applied  |  |  |
| 27 | P RAJESH KUMAR               | Associate<br>Professor | B Pharm,<br>M Pharm,<br>PHD, | 28/09/2015 | 0.9 + 9.7 | 40487    |  |  |
| 28 | T<br>MADHUSUDHAN             | Asstt. Professor       | B Pharm,<br>M Pharm,         | 07/12/2015 | 0.7 + 5.0 | 045284A1 |  |  |
| 29 | R SUNITHA                    | Asstt. Professor       | B Pharm,<br>M Pharm,         | 29/02/2016 | 0.5 + 3.6 | 79135A1  |  |  |
| 30 | TAPAN KUMAR<br>PATEL         | Asstt. Professor       | B Pharm,<br>M Pharm,         | 22/02/2016 | 0.5 + 5.3 | 21770    |  |  |

## 2. Qualification and number of Staff Members

|          |  | Qualification |                    |
|----------|--|---------------|--------------------|
| M. Pharm |  | PhD           | Others - Full Time |
| 34       |  | 6             | 3                  |

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

|                                       | <b>No. of staff required</b> |
|---------------------------------------|------------------------------|
| <b>1. Pharmaceutical Chemistry</b>    | <b>7</b>                     |
| <b>2. Pharmaceutical Analysis</b>     | <b>2</b>                     |
| <b>3. Pharmacology</b>                | <b>4</b>                     |
| <b>4. Pharmacognosy</b>               | <b>4</b>                     |
| <b>5. Pharmaceutics</b>               | <b>6</b>                     |
| <b>6. Pharmacy Practice</b>           | <b>1</b>                     |
| <b>7. Principal</b>                   | <b>1</b>                     |
| <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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**Signature of the Inspectors**

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                           |                            |
|                                        | Asst. Professor  | 2                            | 3                           |                            |
|                                        | Lecturer         | 3                            | 8                           |                            |
| Department of Pharmaceutical Chemistry | Professor        | 1                            | 1                           |                            |
|                                        | Asst. Professor  | 3                            | 3                           |                            |
|                                        | Lecturer         | 3                            | 3                           |                            |
| Department of Pharmacology             | Professor        | 1                            | 1                           |                            |
|                                        | Asst. Professor  | 2                            | 2                           |                            |
|                                        | Lecturer         | 1                            | 6                           |                            |
| Department of Pharmacognosy            | Professor        | 1                            | 1                           |                            |
|                                        | Asst. Professor  | 1                            | 1                           |                            |
|                                        | Lecturer         | 2                            | 2                           |                            |
| Department of Pharmacy Practice        | Asst. Professor  | 1                            | 1                           |                            |
|                                        | Lecturer         | 1                            | 5                           |                            |
| Department of Pharmaceutical Analysis  | Asst. Professor  | 1                            | 1                           |                            |
|                                        | Lecturer         | 1                            | 1                           |                            |

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                        | Percentage |
|--------------------------------------------------------------------------------------------------------------------|-------------------------------|------------|
|                                                                                                                    | Duration of 15 year and above |            |
|                                                                                                                    | Duration of 10 year and above |            |
| Dr. A. Srinivasa Rao Mr. V.Lokeswara Babu Mr. M.Srirama Chandra Mr. Narottam Pal Mrs. K Sumalatha Mrs. V Abhinetri | Duration of 5 year and above  | 15         |
| Remaining all the faculty members are retained in this organization for less than 5 Years.                         | Less than 5 years             | 85         |

7. **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            |

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

| Sl No. | Designation                      | Required Number          | Required Qualification              | Available |               | Remarks of the Inspectors |
|--------|----------------------------------|--------------------------|-------------------------------------|-----------|---------------|---------------------------|
|        |                                  |                          |                                     | Number    | Qualification |                           |
| 1      | Laboratory technician            | 1 for each Dept          | D. Pharm                            | 6         | Diploma/BSc   |                           |
| 2      | Laboratory Assistants/ Attenders | 1 for each Lab (minimum) | SSLC                                | 7         | Diploma/SSC   |                           |
| 3      | Office Superintendent            | 1                        | Degree                              | 1         | MCom          |                           |
| 4      | Accountant                       | 1                        | Degree                              | 1         | MCom          |                           |
| 5      | Store keeper                     | 1                        | D. Pharm/ Degree                    | 1         | BSc           |                           |
| 6      | Computer Data Operator           | 1                        | BCA / Graduate with Computer Course | 1         | BCom          |                           |
| 7      | First Division Assistant         | 1                        | Degree                              | 1         | BA            |                           |
| 8      | Second Division Assistant        | 2                        | Degree                              | 2         | SSC           |                           |
| 9      | Peon                             | 2                        | SSLC                                | 2         | SSC           |                           |
| 10     | Cleaning personnel               | Adequate                 | ---                                 | 5         | V             |                           |
| 11     | Gardener                         | Adequate                 | ---                                 | 1         | V             |                           |

## PART V - DOCUMENTATION

### Records Maintained: Essential

| Sl. No | Records                                                                | Yes | No | Remarks of the Inspectors |
|--------|------------------------------------------------------------------------|-----|----|---------------------------|
| 1      | Admissions 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                                     | YES |    |                           |

Signature of the Head of the Institution

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)

| Sl | Expenditure in Rs. 2013-14 |                         |           | Expenditure in Rs. 2014-15 |                         |           | Expenditure in Rs. 2015-16 |                         |           | Remarks of the Inspectors* |
|----|----------------------------|-------------------------|-----------|----------------------------|-------------------------|-----------|----------------------------|-------------------------|-----------|----------------------------|
|    | No.                        | Total budget sanctioned | Recurring | Non Recurring              | Total budget sanctioned | Recurring | Non Returning              | Total budget sanctioned | Recurring |                            |
| 1  | 1100000                    | 850000                  | 250000    | 850000                     | 650000                  | 200000    | 850000                     | 600000                  | 250000    |                            |
|    |                            |                         |           |                            |                         |           |                            |                         |           |                            |

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

| Sl | Expenditure in Rs. 2013-14 |                        |            | Expenditure in Rs. 2014-15 |                        |            | Expenditure in Rs. 2015-16 |                        |            | Remarks of the Inspectors* |
|----|----------------------------|------------------------|------------|----------------------------|------------------------|------------|----------------------------|------------------------|------------|----------------------------|
|    | No.                        | Total budget allocated | Sanctioned | Incurred                   | Total budget allocated | Sanctioned | Incurred                   | Total budget allocated | Sanctioned |                            |
|    | Chemicals                  | 65000                  | 45000      | Chemicals                  | 90000                  | 62858      | Chemicals                  | 90000                  | 58645      |                            |
|    | Glassware                  | 75000                  | 40000      | Glassware                  | 100000                 | 85926      | Glassware                  | 100000                 | 87416      |                            |

**3. Total amount spent on equipments for the past three years:**

(Enclose purchase invoice)

| Sl | Expenditure in Rs. 2013-14 |                        |            | Expenditure in Rs. 2014-15 |                        |            | Expenditure in Rs. 2015-16 |                        |            | Remarks of the Inspectors* |
|----|----------------------------|------------------------|------------|----------------------------|------------------------|------------|----------------------------|------------------------|------------|----------------------------|
|    | No.                        | Total budget allocated | Sanctioned | Incurred                   | Total budget allocated | Sanctioned | Incurred                   | Total budget allocated | Sanctioned |                            |
|    | Equipment                  | 300000                 | 214980     | Equipment                  | 300000                 | 214673     | Equipment                  | 300000                 | 262190     |                            |

Signature of the Head of the Institution

Signature of the Inspectors



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

| Sl No.   | Expenditure in Rs. 2013-14 |            |          | Expenditure in Rs. 2014-15 |            |          | Expenditure in Rs. 2015-16 |            |          | Remarks of the Inspectors* |
|----------|----------------------------|------------|----------|----------------------------|------------|----------|----------------------------|------------|----------|----------------------------|
|          | Total budget allocated     | Sanctioned | Incurred | Total budget allocated     | Sanctioned | Incurred | Total budget allocated     | Sanctioned | Incurred |                            |
| <b>1</b> | <b>Books</b>               | 550000     | 468874   | <b>Books</b>               | 300000     | 245009   | <b>Books</b>               | 240000     | 139614   |                            |
| <b>2</b> | <b>Journals</b>            | 110000     | 10800    | <b>Journals</b>            | 60000      | 39500    | <b>Journals</b>            | 100000     | 66000    |                            |

**\*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

**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                                                                                       | 1              | Yes              |                           |
| 5       | Sphygmomanometer                            | 10                                                                                       | 10             | Yes              |                           |
| 6       | Stethoscope                                 | 10                                                                                       | 10             | Yes              |                           |
| 7       | Permanent Slides for various tissues        | One pair of each tissue<br>Organs and endocrine glands<br>One slide of each organ system | 10             | Yes              |                           |
| 8       | Models for various organs                   | One model of each organ system                                                           | 10             | Yes              |                           |
| 9       | Specimen for various organs and systems     | One model for each organ system                                                          | 15             | Yes              |                           |
| 10      | Skeleton and bones                          | One set of skeleton and one spare bone                                                   | 1              | Yes              |                           |
| 11      | Different Contraceptive Devices and         | One set of each device                                                                   | 10             | 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<br>Polyrite | 10                                                                                       | 10             | Yes              |                           |
| 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                                                                          | 10             | Yes              |                           |
| 26      | Actophotometer                              | 01                                                                                       | 1              | Yes              |                           |
| 27      | Rotarod                                     | 01                                                                                       | 1              | Yes              |                           |
| 28      | Pole climbing apparatus                     | 01                                                                                       | 1              | Yes              |                           |
| 29      | Analgesiometer (Eddy's hot plate            | 01                                                                                       | 1              | Yes              |                           |
| 30      | Convulsiometer                              | 01                                                                                       | 1              | Yes              |                           |
| 31      | Plethysmograph                              | 01                                                                                       | 1              | Yes              |                           |
| 32      | Digital pH meter                            | 01                                                                                       | 1              | Yes              |                           |

**Apparatus:**

| Sl. No. | Name                                               | Minimum required Nos. | 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 1 5,24,26G | 10                    | 10             | 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              |                           |
| 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  | 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              |                           |
| 4       | Analytical Balances for demonstration | 05                    | 5              | Yes              |                           |
| 5       | Digital balance 10mg sensitivity      | 10                    | 10             | Yes              |                           |
| 6       | Digital Balance (1mg sensitivity)     | 01                    | 1              | 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                    | 2              | 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 | 20                    | 20             | Yes              |                           |
| 4       | Burettes                                   | 100                   | 100            | Yes              |                           |
| 5       | Arsenic Limit Test Apparatus               | 25                    | 25             | 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              |                           |
| 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,  | 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     | 05 EACH | 10 | Yes |  |
| 30 | Digital pH meter                        | 01      | 1  | Yes |  |
| 31 | All purpose equipment with all          | 01      | 1  | Yes |  |
| 32 | Aseptic Cabinet                         | 01      | 1  | Yes |  |
| 33 | BOD Incubator                           | 02      | 2  | 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/      | 10      | 10 | Yes |  |
| 38 | Capsule Counter                         | 02      | 2  | Yes |  |
| 39 | Energy meter                            | 02      | 2  | Yes |  |
| 40 | Hot Plate                               | 02      | 2  | Yes |  |
| 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                    | 20             | Yes              |                           |
| 2       | Stalagmometer                          | 20                    | 20             | Yes              |                           |
| 3       | Desiccator*                            | 10                    | 10             | Yes              |                           |
| 4       | Suppository moulds                     | 20                    | 20             | Yes              |                           |
| 5       | Buchner Funnels (Small, medium, large) | 05 each               | 15             | 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              | No               |                           |
| 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              | No               |                           |
| 7       | Tissue culture station                        | 01                    | 1              | Yes              |                           |
| 8       | Laminar airflow unit                          | 01                    | 1              | Yes              |                           |
| 9       | Diagnostic kits to identify                   | 01                    | 1              | Yes              |                           |
| 10      | Rheometer                                     | 01                    | 1              | Yes              |                           |
| 11      | Viscometer                                    | 01                    | 1              | Yes              |                           |
| 12      | Micropipettes (single and multi               | 01 each               | 2              | 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:**

| Sl. No. | Name                                     | Minimum required Nos. | Available Nos. | Working Yes / No | Remarks of the Inspectors |
|---------|------------------------------------------|-----------------------|----------------|------------------|---------------------------|
| 1       | Colorimeter                              | 01                    | 1              | Yes              |                           |
| 2       | Digital pH meter                         | 01                    | 1              | Yes              |                           |
| 3       | UV- Visible Spectrophotometer            | 01                    | 1              | Yes              |                           |
| 4       | Flourimeter                              | 01                    | 1              | Yes              |                           |
| 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 | 01                    | 0              | No               |                           |
| 11      | HPLC                                     | 01                    | 1              | Yes              |                           |
| 12      | HPTLC (Desirable)                        | 01                    | 0              | No               |                           |
| 13      | Atomic Absorption and Emission           | 01                    | 0              | No               |                           |
| 14      | Biochemistry Analyzer (Desirable)        | 01                    | 1              | Yes              |                           |

|    |                                                 |    |   |     |  |
|----|-------------------------------------------------|----|---|-----|--|
| 15 | Carbon, Hydrogen, Nitrogen Analyzer (Desirable) | 01 | 0 | No  |  |
| 16 | Deep Freezer (Desirable)                        | 01 | 1 | Yes |  |
| 17 | Ion- Exchanger                                  | 01 | 1 | Yes |  |
| 18 | Lyophilizer (Desirable)                         | 01 | 0 | No  |  |

**Observation of the Inspectors:**

**Compliance of the last recommendations by Inspectors**

**Specific observations if not complied**

**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**