Tracking Number: SIF/2013/100540

PHARMACY COUNCIL OF INDIA

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

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

(SIF-A)

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

Inspection No.: Date of Inspection:

FILE No. NAME OF THE INSPECTORS: 1.

(IN BLOCK LETTERS)

2.

PART-1

A-GENERAL INFORMATION

A - I.1

Name of the institution Priyadarshni Institute of Paramedical Sciences, Medical

College, A

Complete postal address: Professor, Dept. of Pharmacy, PIPMS, Medical College,

Thiruvananthapuram 695 011

Telephone number with STD Code 0471 2528364

Fax No 04712440395

Email pipmspharmacy@gmail.com

Year of establishment 1984

Status of the course conducting body Government

A - I.2

Name of the Society/Trust/Management Government of Kerala

Address Government of Kerala

 Telephone Number with STD Code
 0471 2528364

 Fax No
 04712440395

Email pipmspharmacy@gmail.com

Website

A - I.3

Name of the person to be contacted by

phone

AJITHA H S

Designation ASSOCIATE PROFESSOR OF PHARMACY

Address AJITHA.H.S ASSOCIATE PROFESSOR OF PHARMACY

Professor, Dept. of Pharmacy, PIPMS, Medical College,

Thiruvananthapuram 695 011

STD Code 0471

Telephone Number

Office 04712528364

 Residence
 2528414

 Mobile
 9495902116

 Fax No
 04712440395

Email pipmspharmacy@gmail.com

A - I.4

Name of the Head of the Institution DR S SANKAR

Address Director and Head PIPMS, Medical College,

Thiruvananthapuram 695 011

Signature of the Head of the Institution

Signature of the Inspectors

A - I.5

FOR INSTITUTION SEEKING CONTINUATION OF APPROVAL

a. DETAILS OF AFFLIATION FEE PAID

Name of the Course	Affiliation Fee Paid Upto	Receipt No.	Dated	Remarks of the Inspectors
D Pharm	2013-2014	72272	08/05/2013	

b. APPROVAL STATUS

Name of the Course	Approved Upto	Intake Approved and Admitted	PCI	State Govt	University	Remarks of the Inspectors
		Approved Letter No & Date	17- 357/9522/06/2010	Approved	0	
D Pharm		Approved Intake	40	40	0	
		Actually Admitted	40	40	0	

c. STATUS OF APPLICATION

Course	Extension of Approval	Increase in Intake of Seates		arks roposed increase in Intake
D Pharm	Yes	No	40	40

Note: Enclose relevant documents

A - I.6

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

If yes, give status

A - I.6 a

Status of the Pharmacy Cou	ırse:
Independent Building	No
Wing of Another College	No
Separate Campus	Yes
Multi Institutional Campus	Yes

Examining Authority:	Diploma Course
Name with Complete Postal address, telephone No. and STD Code.	The Chairman Board of D.Pharm. Examinations, Dte.of Medical Education, C o College of Pharm.Sciences, P.O.Medical College,Thiruvananthapuram– 695 011.

Signature of the Head of the Institution

Signature of the Inspectors

B - DETAILS OF THE INSTITUTION

B - I.1

Name of the Principal

DR S SANKAR

Qualification/	Qualification*	Qualification*		Actual experience	Remarks of the Inspectors
Experience	M. Pharm	No	05 Years	24	
	PhD (Desirable)	No	02 Years		

^{*} Documentary evidence should be provided

B - I.2

For institution seeking continuation of affliation

Course	Date of last Inspection	Inspection	Intake reduced/Stopped in the last 03 years*
D Pharm	14/05/2011	principal post for conducting pharmacy course	Yes
		2 Two posts of faculty members is to be created	

^{*} Enclose Documents

B - I.3

Pay Scales

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

B - I.4

D Pharm Course: Admission statement for the past three years

ACADEMIC YEAR	2011- 2012	2012-2013	2013-2014
Sanctioned	40	40	0
No. of Admissions	33	40	0
Unfilled Seats	7	0	0
No of Excess Admission	0	0	0

B - I.5

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

ACADEMIC YEAR	2011-2012	2012-2013	2013-2014
D Pharm	54	42	

Signature of the Head of the Institution

Signature of the Inspectors

B-II

Co-Curricular Activities / Sports Activities

Whether college has NSS Unit(Yes/No)?	Yes
If no give reasons	
NSS Program Officer's Name	SreeKumar
Programme Conducted Details	
Whether students participating in University level cultural activities/Co-curricular/Sports activities	Yes
Physical Instructor	Available
Sports Ground	Shared
Are you Associated with other Organization/Institution/ Trust/Society Running Pharmacy Course Organization/Institution/Trust/Society Name Complete Postal Address.	Yes
Telephone No.	

Signature of the Head of the Institution

Signature of the Inspectors

C - FINANCIAL STATUS OF THE INSTITUTION

Audited financial Statement of Institute should be furnished

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

C .2 Please provide following Information

Receipts				Expenditure	Dama da af tha			
SI. No.	Particulars	Amount	SI. No.	Particulars	Amount	Remarks of the Inspector		
1.	Grants			CAPITAL	EXPENDITU	JRE		
	a. Government	0.00						
	b. Others	0.00						
2.	Tuition Fee	160000.00	1.	Building	0.00			
3.	Library Fee	0.00	2.	Equipment	0.00			
4.	Sports Fee	0.00	3.	Others	0.00			
5.	Union Fee	0.00	REVENUE EXPENDITURE					
6.	Others	60400.00	1.	Salary	0.00			
	<u>-1</u>	· ·	2.	Maintenance Expendi	ture			
				i. College	0.00			
				ii. Others	0.00			
			3.	University Fee	0.00			
			4.	Apex Bodies Fee	15000.00			
			5.	Government Fee	0.00			
			6.	Deposit held by the College	0.00			
			7.	Others	0.00			
			8.	Misc. Expenditure	0.00			
	Total	220400.00		Total	15000.00			

Note: Enclose relevant documents

PART- II PHYSICAL INFRASTRUCTURE

a. Building Own

b Land:

c. Building Own

i) Leased or own Own

Sale / Agreement deed (records to be enclosed)

i) Leased/Rented †(Record to be enclosed) **Enclosed** ii) If Own (Approved Building plan & sale deed to be enclosed) **Enclosed** d. Total Area of the college building in Built up Area 1076

Sq.mts

Amenities and

Circulation Area

2. Class Rooms

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

1100

3. Laboratory requirement

SI.No.	Infrastructure for	Available No.	Area in Sq. mts	Remarks
1	Laboratory Area for D.Pharm Course	5	435	
2	Pharmaceutics	1	8715	
3	Pharmaceutical Chemistry	1	8715	
4	Physiology and Pharmacology	1	8715	
5	Pharmacy Practice	1	8715	
6	Pharmacognosy	1	8715	
7	Animal House	1	10	
8	Preparation Room for each lab	3	34	
9	Area of the Machine Room	1	129	
10	Aseptic Room	1	25	
11	Store Room I	1	43	
12	Store Room II Inflammable chemicals	1	43	

Signature of the Head of the Institution

Signature of the Inspectors

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

- 1. All the Laboratories should be well lit & ventilated.
- 2. All Laboratories should be provided with basic amenities and services like exhaust fans and fuming chamber to reduce the pollution whenever necessary.
- 3. The workbenches should be smooth and easily cleanable prefebly made of nonabsorbant material.
- 4. The water taps should be non-leaking and directly installed on skins Drainage should be efficient.

^{[*} To accomodate 60 students]

5. Balance room should be attached to the cocerned laboratories.

4. Administration Area

SI	Name of	Requirement	Requirement	Ava	ilable	
No	Infrastructur e	s as per Norms (in Number)	s as per Norms (in Area)	No.	Area in Sq.mts	Remarks/Deficienc y
1	Principal's Chamber	01	20 Sq. mts	28	28	
	Office - I (including confidential room)	01	40 Sq. mts	39	39	
	Staff / Faculty Rooms for D. Pharm course	01	30 Sq. mts	0	0	
	Library with computer and reprographic facilities	01	100 Sq. mts	129	129	
5	Museum	01	30 Sq. mts (Maybe attached to the Pharmacognos y lab)	32	32	
	Auditorium/ Multi Purpose Hall (Desirable)	01	250 - 300 seating capacity	173	173	
7	Herbal Garden (Desirable)	01	Adequate Number of Medical Plants	39	39	

5. Student Facilities

SI.	Name of	Requirement	Dagwiyamant	Ava	ilable	Domesta / Doficiona
	Infrastructur e	s (in Number)	Requirement s (in Area)	No.	Area in Sq.mts	Remarks/Deficienc y
	Girls's Common Room (Essential)	01	40 Sq. mts	1	43	
	Boy's Common Room (Essential)	01	40 Sq. mts	1	42	
	Toilet Blocks for Girls	01	25 Sq. mts	1	25	
	Toilet Blocks for Boys	01	25 Sq. mts	1	25	
	Drinking Water facility - Water cooler (Essential)	01		1	2	
6	Boy's Hostel (Desirable)	01	9 Sq. mts/Room Single occupancy	1	200	

	Girls's Hostel (Desirable)	01	9 Sq.mts/Room (Single occupancy) or 20 Sq.mts/Room (Triple occupancy)	1	250	
	Power Backup Provision (Desirable)	01		0	0	
9	Canteen	01	100 sq mts.	1	0	

6. Computer and other Facilities

		Ava	ilable	Remarks of the
Name	Required	No.	Area in Sq.mts	Inspectors
Computer (Latest Configuration)	1 syste, for every 10 students (UG & PG)	3	0	
Printers	1 Printer for every 10 computers	3	0	
Xerox Machine	01			
Multi Media Projector	02	0	0	

7. Amenities(Desirable)

		Availabl	е		
Name	Requirment as per Norms in area	No.	Area in Sq.mt s	Not Availabl e	Remarks/Deficienc y
Principal Quarters	·	0		all amenities are available for the entire medical college campus but not separatel y for this instit	
Staff Quarters	6 x 80 Sq. mts	0	0	available	
Parking Area fro staff and students		1	200	available	
Bank Extension Counter		1	0	available	
Cooperative Stores		0	0	available	

Guest House	80 Sq. mts	0	0		
Transport Facility for students		0	0	available	
Medical Fecilities(First Aid)		0	0	avaialable	

8.A. Library Books and Periodicals
The minimum norms for the initial stock of books, yearly addition of the books and the number of journals to be subscribed are as given below:

SI.		given below:	Minimum	Ava	ilable	Remarks of the
No	Item	Titles(No)	Volums(No)	Title	No.	Inspectors
1	Number Of Books	75	750 adequate coverage of a large number of standard text books and titles in all disciplines of pharmacy	1265	1750	
2	Annual Addition of Books		75 books per year	75	50	
3	Periodicals Hard Copies/Online		06 National Journals Indian Journal of Pharmaceutical Sciences Indian Journal of Pharmaceutical Education and Research Journal of Hospital Pharmacy Indian Journal of Pharmacology CIMS, MIMS Indian Journal of Experimental Biology.	25	25	
4	Library timings		<u> </u>		9am	to 4pm

8.B.Subject wise Classification

SI. No.	Subject	Available Titles	Available Numbers	Remarks of the Inspectors
1	Pharmaceutics 1	260	348	
2	Pharmaceutical Chemistry 1	165	239	
3	Pharmacognosy	76	110	
4	Biochemistry and Clinical Pathology	59	80	
5	Human Anatomy and Physiology	54	130	
6	Health Education and Community Pharmacy	31	36	
7	Pharmaceutics II	120	200	
8	Pharmaceutical Chemistry II	100	150	

9	Pharmacology and Toxicology	297	391	
10	Pharmaceutical Jurisprudence	22	54	
11	Drug Store and Business Management	25	30	
12	Hospital and Clinical Pharmacy	39	60	

8.C.Library Staff

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

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

Signature of the Head of the Institution

Signature of the Inspectors

PART III ACADEMIC REQUIREMENTS

Course Curriculum

1. Student Staff Ratio:

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

Class	Theory	Practicles	Remarks of the Inspectors
D. Pharm	60:1	20:1	

2. Date of Commencement of session

Commencement	Completion
04/11/2012	04/11/2013

3. Vacation		No of Days		No of Days	
	Summer :	10	Winter:	10	

4. Total No. of working days

185

5. Time Table copy Enclosed

Yes

6. Whether the prescribed numbers of classes are being conducted as per ${\sf PCI}$ norms

I D.Pharm

	The	ory		Pract	ticals		Remark
Class/Subj ect	Prescrib ed No of Hours		Prescrib ed No of Hours	HOURS	Prescrib ed No of Classes	No of Classes Conduct ed	of the Inspect or
Pharmaceuti cs -I	75	75	100	100	25	25	
Pharmaceuti cs Chemistry -I	75	75	75	75	25	25	

Pharmacogn osy	75	75	75	75	25	25	
Biochemistry and Clinical Pathology	50	50	75	75	25	25	
Human Anatomy and Physiology	75	75	50	50	25	25	
Health Education and Community Pharmacy	50	50		0		25	

II D.Pharm

	The	ory		Pract	ticals		Remark
Class/Subj ect	Prescrib ed No of Hours	No of Hours Conduct ed	Prescrib ed No of Hours	No of Hours Conduct ed	Prescrib ed No of Classes	No of Classes Conduct ed	of the Inspect or
Pharmaceuti cs -II	75	75	100	100	25	25	
Pharmaceuti cs Chemistry -II	100	100	75	75	25	25	
Pharmacolog y and Toxicology	75	75	50	50	25	25	
Pharmaceuti cal Jurisprudenc e	uti 50 50 0			0			
Drug Store and Business Management	75	75		0		0	
Hospital and Clinical Pharmacy	75	75	50	50	25	25	

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

8. Whether Evaluation of the internal assessments is Fair

Class	Cano score	o of didates ed more n 80%	Cano score	No of Candidates cored 60% - 80%		60%		didates	Remarks of the Inspecto rs
	Theo ry	Practica Is	Theo ry	Practica Is	Theo ry	Practica Is	Theo ry	Practica Is	
I D.Phar m	3.00	3.00	7.00	18.00	27.00	16.00	0.00	0.00	
II	1.00	3.00	25.00	29.00	6.00	3.00	0.00	0.00	

D.Phar					
m					

9. Work load of Faculty members for D. Pharm

S.No.	Name of Faculty	Subjects Taught	D. Pharm			n	Total Work Load	Remarks of the Inspectors
			I [II D. Ph			
			Th	Pr	Th	Pr		
1	Dr. Ajitha H S	Pharmacognosy	3	0	0	0	3	
2	Mr. RAJMOHANAN T P	BIO CHEMISTRY PHARMACOLOGY AND TOXICOLOGY	0	3	0	0	3 12	
3	Mrs. Geetha P Nair	PHARMACEUTICAL CHEMISTRY PHARMACOGNOSY	3	4	0	0	7 9	
4	Mrs. Roma Mathews	DRUG STORE BUSSINESS MANAGEMENT PHARMACEUTICS 1 PHARMACEUTICS 11	3 3 3	3 6 0 0		0	3 9 9	

Signature of the Head of the Institution

Signature of the Inspectors

IV - PERSONNEL TEACHING STAFF

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

S.No.	Name	Designation	Qualification	Date of Joining	Teaching Experience		-		State Pharmacy Council Reg No.	Signature of the Faculty	Remarks of the Inspectors
					After UG In Years	After PG In Years					
1	Ajitha H S	Associate Professor	B Pharm, M Pharm,	23/07/2013	0.1	36.0	10812				

2. Qualification and Number of Staff Members

Number of staff members required: 07

Qualification								
B Pharm M Pharm			Pł	۱D	Others			
13		8		1		0	Part Time	

3. Details of Faculty Retention for:

Name of Faculty Member	Period	Percentage
	Duration of 15 year and above	
	Duration of 10 year and above	
	Duration of 5 year and above	
AJITHA.H.S GEETHA P NAIR ROMA MATHEW RAJMOHANAN.T.P	Less than 5 years	100

4. Details of Faculty Turnover

Name of Faculty	Period	More than	50 %	25%	Less than
-----------------	--------	-----------	-------------	-----	-----------

Member		50%			25%
	% of faculty retained in last 3 yrs	Yes	No	No	No

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

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

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

S.N o.	Name	Qualifica tion	4:	Bas ic Pay	D	DA	HR A	CCA & Additi onal Pay	Other Allowan ces	Ded	uctio	ons	Bank A/C No	PAN No	EF A C S	al	Signat ure
										PT	TD S	EP F					
1	RAJMOHA NAN T P	B Pharm,	Asstt. Professo r	258 40	70 00	1476 5	14 00	350	0	500 0	400 0	10 00	1375	ADEPT9 963A		510 00	
2	Geetha P Nair	B Pharm,	Asstt. Professo r	156 00	60 00	8110 16	12 00	350	0	100 00	300 0	0	5703631 2166		00 0	338 06	
3	Roma Mathews	B Pharm,	Asstt. Professo r	156 00	60 00	1101 6	84 0	350	0	500 0	100 0	0	2619		0	338 06	
4	Ajitha H S	B Pharm, M Pharm,	Associat e Professo r		90 00	3824 0	16 80	350	0	100 00	100 00	0	1027085 5577		0	880 70	

7. Whether facilities for Research / Higher studies are provided to the faculty?	0	Yes C	No
(Inspectors to verify documents pertaining to the above)			
8. Whether faculty members are allowed to attend workshops and seminars?	0	Yes	No

(Inspectors to verify documents pertaining to the above)

9. Scope for the promotion for faculty: Promotio
--

Yes No

10. Gratuity Provided

Yes No

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

Name	Designation	Qualification	DOJ	Experience
SINDHU K J	Laboratory Technician	DMLT	29/05/2012	12
TITUS L	Labortory Assistants	всом	21/10/1999	13
Kalpana S. Vijayakumar	Librarian	BLISc	24/11/2000	10yr
Subha.S	Laboratory Technician	BPharm	03/02/2011	6
SAJIKUMAR.C.L	Labortory Assistants	SSLC	13/05/2005	08 y
SUJA.T	Cleaning personnel	SSLC	01/08/2012	5 y
HAJI CHANDRAKUMAR	Accountant	SSLC	20/11/1997	17
USHA KUMARI.S	Typiest	DEGREE	10/12/2012	4

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

0	Yes	No

Signature of the Head of the Institution

Signature of the Inspectors

PART V - DOCUMENTATION

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

PART - VI

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

-	diture 11-201		Expenditure in Rs. 2012-2013			-	Expenditure in Rs. 2013-2014		
Total budget sancti oned	Recur ring	Non Recur ring	Total budget sancti oned		Non Recur ring	Total budget sancti oned	Recur ring	Non Recur ring	
0	0	0	0	0	0	0	0	0	

 ${\bf Total\ amount\ spent\ on\ Chemical,\ Glassware,\ Equipments,\ Books\ and\ Journals\ for\ the\ past\ Three\ Years$

(Enclose purchase invoice)

Total budge Sanctio Incur alloca ted	Total budge t Sanctio ned ted	Incur red	Total budge t alloca ted	nctio ned	Incur red	Remark s of the Inspect ors*
Chemicals 0 0	Chemicals 0	0	Chemical	s 0	0	
Glassware 0 0	Glassware 0	0	Glasswar	e 0	0	
Equipment 0 0	Equipment 0	0	Equipme	nt 0	0	
Books 0 0	Books 0	0	Books	0	0	_
Journals 0 0	Journals 0	0	Journals	0	0	_

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

Signature of the Head of the Institution

Signature of the Inspectors

PART VII â€" EQUIPMENT AND APPARATUS

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

Pharmaceutics

Equipments:

SI. No.	Name	Minimum required Nos.	Available Nos.	Working	Remarks of the Inspectors
1	Continuous Hot Extraction Equipment	5	3	Yes	
2	Conical Percolator	5	10	Yes	
3	Tincture Press	1	1	Yes	
4	Hand Grinding Mill	1	2	Yes	
5	Disintegrator	1	1	Yes	

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

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

Pharmaceutical Chemistry

Equipments:

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

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

Physiology & Pharmacology Laboratory

Equipments:

SI. No.	Name	Minimum required Nos.	Available Nos.	Working	Remarks of the Inspectors
	Haemoglobinometer	20	20	No	
	Haemocytometer	10	10	No	
	Student's organ bath	1	10	No	
	Sherington's rotating drum	1	10	No	
5	Frog board	0	30	No	
6	Tray (dissecting)	0	30	No	
7	Frontal writing lever	0	15	No	
8	Aeration tube	0	20	No	
9	Telethermometer	1	1	No	
10	Pole climbing apparatus	1	1	No	
11	Histamine chamber	1	1	No	
12	Simple lever	0	15	No	
13	Sterling heart lever	0	10	No	
14	Aerator	0	5	No	
15	Histological Slides	0	100	No	
16	Sphygmomanometer (B.P. apparatus)	5	5	No	
17	Stethoscope	5	5	Yes	
18	First aid equipment	0	1	Yes	
19	Contraceptive device	0	10	Yes	
20	Dissecting (surgical) instruments	0	10	Yes	
21	Balance for weighing small Animals	1	5	Yes	
22	Kymograph paper	0	2	Yes	
23	Actophotometer	1	1	Yes	
24	Analgesiometer	1	1	Yes	
25	Thermometer	0	20	Yes	
26	Plastic animal cage	0	10	Yes	
27	Double unit organ bath with thermostat	1	1	Yes	
28	Refrigerator	1	1	Yes	
	Digital balance	1	1	Yes	
30	Charts	0	10	Yes	
31	Human skeleton	1	1	Yes	
	Anatomical specimen (Heart, brain, eye,,ear,,reproductive system etc.,)	0	1	Yes	
33	Electro-convulsiometer	1	1	Yes	
34	Stop watch	0	1	Yes	
35	Clamp, boss heads, screw clips	0	20	Yes	
36	Syme's Cannula	0	20	Yes	

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

Pharmacognosy Laboratory

Equipments:

SI. No.	Name	Minimum required Nos.	Available Nos.	Working	Remarks of the Inspectors
1	Projection Microscope	1	5	Yes	
2	Charts (different types)	0	10	Yes	
3	Models (different types)	0	10	Yes	
4	Permanent Slides	0	100	Yes	_
5	Slides and Cover Slips	0	100	Yes	

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

Pharmacy Practice Laboratory

Equipments:

SI. No.	Name	Minimum required Nos.	Available Nos.	Working	Remarks of the Inspectors
1	Colorimeter	2	2	Yes	
2	Microscope	0	20	Yes	
	Permanent slides (skin, kidney, pancreas, smooth muscle, liver etc.,)	0	100	Yes	
4	Watch glass	0	100	Yes	
5	Centrifuge	1	1	Yes	
	Biochemical reagents for analysis of normal and pathological constituents in urine and blood facilities	0	0	Yes	
7	Filtration equipment	2	2	Yes	
8	Filling Machine	1	1	Yes	
9	Sealing Machine	1	1	Yes	
10	Autoclave sterilizer	1	1	Yes	
11	Membrane filter	0	1	Yes	
12	Sintered glass funnel with complete filtering assemble	0	10	Yes	
13	Small disposable membrane filter for IV admixture filtration	0	10	Yes	
14	Laminar air flow bench	1	1	Yes	
15	Vacuum pump	1	1	Yes	
16	Oven	1	1	Yes	
17	Surgical dressing	0	0	Yes	
18	Incubator	1	1	Yes	
19	PH meter	1	1	Yes	
20	Disintegration test apparatus	1	1	No	
21	Hardness tester	1	1	Yes	
22	Centrifuge	1	1	Yes	
23	Magnetic stirrer	1	1	Yes	
24	Thermostatic bath	1	1	Yes	

 $\label{eq:NOTE:Adequate numbers of glassware commonly used in the laboratory should be provided in each laboratory and the department.$

Signature of the Head of the Institution

Signature of the Inspectors

C	Observations of the Inspectors:
C	Compliance of the last recommendations by Inspectors
	Specific obserations if not compiled
Ī	1.

Signature of Inspectors:	

- 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.