Monthly Teaching Schedule Web Request form (MCI Compliance) month wise (add the contents in the Department page)

Name of Teacher:

Dr. Jai Prakash, MD DM

Designation:

Professor

Department:

Nephrology

Month:

December 2016

| | | | Teachir | ıg | | | |
|----------------------|-------------------------------|-----------|---------------|--------------|---|---|--|
| | Under Graduate | | Post Graduate | | | | |
| Theory Lecture | Practical/Clinical Session | Tutorials | Seminar | Journal Club | Case Discussion/Practical Demonstration | Any Other | |
| MBBS as per schedule | Two per week | - | One per week | One per week | One per week | Nephropathology Nephroradiology. Renal Transplantation clinic | |

Signature of Head

Signature of the HOD with Seal

विभागाध्यक्ष/ Head
वृक्क रोग विभाग/Deptt. of Nephrology
चिकित्सा विज्ञान संस्थान/Instt. of Medical Sciences
काशी हिन्दू विश्वविद्यालय/Banaras Hindu University
वाराणसी-221005/Varanasi-221005

Monthly Teaching Schedule Web Request form (MCI Compliance) month wise (add the contents in the Department page)

Name of Teacher:

Dr. J.P. Tiwari, MD DM

Designation:

Professor

Department:

Nephrology

Month:

December 2016

| | | | Teachir | ıg | | | |
|----------------------|----------------------------|-----------|---------------|--------------|---|--|--|
| Under Graduate | | | Post Graduate | | | | |
| Theory Lecture | Practical/Clinical Session | Tutorials | Seminar | Journal Club | Case Discussion/Practical Demonstration | Any Other | |
| MBBS as per schedule | Two per week | - | One per week | One per week | One per week | Nephropathology Nephroradiology Renal Transplantation clinic | |

Signature of Head

Signature of the HOD with Seal विभागाध्यम् Head

वृक्क रोग विभाग/Deptt. of Nephrology चिकित्सा विज्ञान संस्थान/Instt. of Medical Sciences काशी हिन्दू विश्वविद्यालय/Banaras Hindu University चाराणसी-221005/Varanasi-221005

Monthly Teaching Schedule Web Request form (MCI Compliance) month wise (add the contents in the Department page)

Name of Teacher:

Dr. Shivendra Singh, MD DM

Designation:

Associate Professor

Department:

Nephrology

Month:

December 2016

| | | | Teachi | ng | | | |
|----------------------|----------------------------|-----------|---------------|--------------|---|---|--|
| Under Graduate | | | Post Graduate | | | | |
| Theory Lecture | Practical/Clinical Session | Tutorials | Seminar | Journal Club | Case Discussion/Practical Demonstration | Any Other | |
| MBBS as per schedule | Two per week | - | One per week | One per week | One per week | Nephropatholog Nephroradiolog Renal | |
| | | | | | | Transplantatio clinic | |

Signature of Head

Signature of the HOD with Seal विभागाध्यस/ Head

वृक्क रोग विभाग/Deptt. of Nephrology चिकित्सा विज्ञाम संस्थान/Instt. of Medical Sciences काशी किन्यू मिश्चमिद्यालय/Banaras Hindu University वारागसी-221005/Varanasi-221005