

LTH/ 95 /Anaes  
 Date 29/01/2025

ANNEXURE-VIII-A

Information to be submitted with respect to newly appointed mentors  
 Professional Teaching Experience Certificate for Fellowship/Certificate Courses Director/Mentor

Title of the Course applied for: - Postdoctoral Fellowship Course in Critical Care Medicine  
 This is to Certify that Dr. APARNA ASHAY NERURKAR has worked in the Department of Anaesthesiology,  
 LOKMANYA TILAK MUNICIPAL MEDICAL COLLEGE / Institutes as per following details.

A) General Experience:-

Designation	From	To	Total period	
			Year / Month	
Assistant Professor (TNMC)	12/08/1999	29/09/2006	7	1 month
Associate Professor(Adhoc)	30/09/2006	31/05/2010	3 years	8 months
Associate Professor (Regular)	01/06/2010	31/05/2013	3 years	
Additional Professor	01/06/2013	Till Date	11 years	7 months
<b>Total</b>			<b>25 years</b>	<b>4 month</b>

B) Actual Experience in the Subject of concerned Fellowship/Certificate Course applied for:-

Designation	From	To	Total period	
			Year / Month	
Addl. Professor SOT & SOTRR EMS & E Ward EMS & E Ward	16/02/2022	till date	2year	11 months
	06/02/2018	15/02/2022	4yrs	
	01/06/2013	12/07/2013		1 month
Associate Professor SOT & SOTRR EMS & E Ward	01/02/2011	31/01/2012	1year	
	01/02/2013	31/05/2013		3 months
<b>Total</b>			<b>8years</b>	<b>3month</b>

Made on 29.01.2025  
 Sign & Rubber Stamp  
 Head of Department  
 Dept. of Anaesthesiology  
 Date: L.T.M.M.C./L.T.M.G.H  
 Sion-22

Sign. & Rubber Stamp  
 Head of Institute  
 DEAN  
 Lokmanya Tilak Municipal  
 Date: 30 JAN 2025  
 Hospital & General  
 Sign. Jamba 400 22

Name of Inspectors		Signature of Inspectors
1)	Chairman	
2)	Member	
3)	Member	
4)	Member	

LTH/ 95 /Anaes (2)  
Date 29/01/2025

ANNEXURE-VIII-A

Information to be submitted with respect to newly appointed mentors  
Professional Teaching Experience Certificate for Fellowship/Certificate Courses Director/Mentor

Title of the Course applied for: - Postdoctoral Fellowship Course in Critical Care Medicine

This is to Certify that **Dr. Deepali Thakur** has worked in the Department of ANAESTHESIOLOGY, LOKMANYA TILAK MUNICIPAL MEDICAL College / Institutes as per following details.

A) General Experience:-

Designation	From	To	Total period	
			Year / Month	
Assistant Professor	24/08/2006	24/10/2011	5yrs	2 months
Associate Professor (Adhoc)	25/10/2011	08/02/2021	10yrs	3 months
Associate Professor (Regular)	09/02/2021	Till date	2yrs	11 month
<b>Total</b>			<b>18 Years</b>	<b>4 months</b>

B) Actual Experience in the Subject of concerned Fellowship/Certificate Course applied for:-

Designation	From	To	Total Experience	
			Years	Months
<b>Assistant Professor</b>				
Surg. OT/ PACU/ SICU	01/06/2006	04/08/2006		8 Months
	01/01/2010	01/06/2011		
EMS /Trauma ICU	04/01/2009	02/07/2009		6 Months
<b>Associate Professor (Adhoc)</b>				
Surg. OT/ PACU/ SICU	1/02/2011	30/06/2012	1 Year	
	01/07/2012	31/01/2013		
EMS /Trauma ICU	01/02/2016	31/01/2020	4 Year	
Cardiac OT/CathLab/	01/02/2012	30/06/2012	1 Year	
	01/02/2013	01/06/2013		
Neuro Surg. OT	02/6/2013	29/06/2014	1 Year	
<b>Associate Professor (Regular)</b>				
Surg. OT/ PACU/ SICU	2/03/2020	30/06/2022	2 years	5 months
Neurosurg. OT/ NeuroICU	01/07/2022	30/06/2023		9 Months
EMS /Trauma ICU	01/07/2024	Till date		6 months
<b>Total Experience</b>			<b>11 years</b>	<b>8 months</b>
3 Certificate course in critical (ISCCM)		From 1/04 / 2022 to 31/09/2022		6 Months

Handwritten Signature  
Sign & Rubber Stamp  
Head of Department  
Dept. of Anaesthesiology  
L.T.M.M.C./L.T.M.G.H  
Date: 29.1.2025  
Sign-22

Handwritten Signature  
Sign. & Rubber Stamp  
DEAN  
Head of Institute  
Lokmanya Tilak Municipal General Hospital & Medical College  
Date: 30/01/2025  
Mumbai - 400 022.

Name of Inspectors	Signature of Inspectors
1) Chairman	
2) Member	
3) Member	
4) Member	

LTH/ 295 /Anaes (3)  
Date 29/01/2025

ANNEXURE-VIII-A

Information to be submitted with respect to newly appointed mentors  
Professional Teaching Experience Certificate for Fellowship/Certificate Courses Director/Mentor

Title of the Course applied for: - Postdoctoral Fellowship Course in Critical Care Medicine

This is to Certify that **Dr. Urvi Desai** has worked in the Department of Anaesthesiology, Lokmanya Tilak Municipal Medical College / Institutes as per following details.

A) General Experience:-

Designation	From	To	Total period
Lecturer Anaesthesiology	05/08/2008	09/01/2017	8yrs 5 months
Associate Professor anaesthesiology	10/1/2017	Till date	8 yrs
<b>TOTAL</b>			<b>16 yrs 5 months</b>

B) Actual Experience in the Subject of concerned Fellowship/Certificate Course applied for:-

Designation	From	To	Total period
Associate Professor SOT/SOTRR Trauma ICU	01/02/2019	30/06/2021	2yrs 6 months 4 months
Trauma ICU	01/07/2023	30/06/2024	1 year
SOTRR/PCCU	01/07/2024	Till date	6 months
Lecturer SOT/SOTRR	05/08/2008 EMS 01/06/2009 01/02/2010 01/02/2011	06/09/2008 EMS 31/09/2009 30/07/2010 31/07/2011	2yrs 9 months
EMS	01/05/2013 01/07/2013	30/06/2013 31/04/2014	
<b>TOTAL</b>			<b>6 years 9 months</b>

Urvi Desai  
Sign & Rubber Stamp  
Head of the Department  
Date: 29.1.2025  
Head of Department  
Dept. of Anaesthesiology  
L.T.M.M.C./L.T.M.G.H  
Sion-22

Signature  
Sign. & Rubber Stamp  
Head of Institute  
Date: 30 JAN 2025  
Signature of Inspectors  
Lokmanya Tilak Municipal General  
Hospital & Medical College,  
Sion, Mumbai - 400 022

Name of Inspectors		Signature of Inspectors
1)	Chairman	
2)	Member	
3)	Member	
4)	Member	

LTH/ 95 /Anaes (4)  
Date 29/01/2025

ANNEXURE-VIII-A

Information to be submitted with respect to newly appointed mentors  
Professional Teaching Experience Certificate for Fellowship/Certificate Courses Director/Mentor

Title of the Course applied for: - Postdoctoral Fellowship Course in Critical Care Medicine  
This is to Certify that **Dr. Shweta Pravin Mhambrey** has worked in the Department of Anaesthesiology,  
Lokmanya Tilak Municipal Medical College / Institutes as per following details.

A) General Experience:-

Designation	From	To	Total period Year / Month	
Assistant Professor Anaesthesiology	22/06/2011	21/06/2022	11 years	0 months
Associate Professor (Addl)	22/06/2022	Till date	2 year	6 months
<b>Total</b>			<b>13 years</b>	<b>6 months</b>

B) Actual Experience in the Subject of concerned Fellowship/Certificate Course applied for:-

Designation	From	To	Total period Year / Month	
Asst. Professor anaesthesiology	07/04/2012	01/12/2012		8months
Trauma ICU	02/01/2013	30/10/2013		9months
Trauma ICU	30/11/2013	28/02/2015		15months
Cardiac OT & ICU	01/03/2015	31/01/2016		10months
Trauma ICU	01/03/2017	08/07/2017		4months
PACU	01/09/2017	31/10/2018		13month
PACU	02/01/2019	03/06/2020		17months
Trauma ICU				
Associate Professor				10 months
PCCU	01/07/2023	31/05/2024		
<b>Total</b>			<b>7 years</b>	<b>2 months</b>

made by Head of Department  
Sign & Rubber Stamp of Anaesthesiology  
Head of the Department  
Date: 29.01.2025  
Lokmanya Tilak Municipal General Hospital & Medical College,  
Sion-22

Signature  
Sign. & Rubber Stamp  
Head of Institute  
Date: 30 JAN 2025

Name of Inspectors		Signature of Inspectors
1)	Chairman	Lokmanya Tilak Municipal General Hospital & Medical College, Sion, Mumbai - 400 022.
2)	Member	
3)	Member	
4)	Member	

TH/ 95 /Anaes 5  
 Date 29/01/2025

ANNEXURE-VIII-A

Information to be submitted with respect to newly appointed mentors  
 Professional Teaching Experience Certificate for Fellowship/Certificate Courses Director/Mentor

Title of the Course applied for: - Postdoctoral Fellowship Course in Critical Care Medicine  
 This is to Certify that **Dr. Ruchi Jain** has worked in the Department of ANAESTHESIOLOGY,  
 LOKMANYA TILAK MUNICIPAL MEDICAL College / Institutes as per following details.

A) General Experience:-

Designation	From	To	Total period Year / Month	
Asst Medical Officer	01/08/2011	11/09/2011		1.5
Adhoc assistant professor (Anaesthesiology)	12/09/2011	31/07/2012		10.5 months
Clinical Assistant	01/08/2012	31/12/2012		5 months
Assistant Professor (Anaesthesiology)	1-1-2013	31/12/2023	10	0 months
Associate Professor (Additional)	01/01/2023	Till date	2 year	0 months
<b>Total</b>			<b>13</b>	<b>5 months</b>

B) Actual Experience in the Subject of concerned Fellowship/Certificate Course applied for:-

Designation	From	To	Total period Year / Month	
Assistant Professor anaesthesiology	01/04/2013	30/07/2013		3
	01/07/2013	06/10/2013		3
	29/9/2014	2/11/2014		1
	1/12/2014	4/1/2015		1
	5/1/2015	3/5/2015		5
	8/6/2015	30/8/2015		3
	28/11/2016	28/01/2017		2
	26/2/2018	27/01/2019		4
	28/1/2019	31/3/2019		11
	01/04/2019	28/04/2019		1
	3/6/2019	29/12/2019		6
	19/7/2021	31/12/2022	1	5
	Associate (Additional)	01/01/2023	30/06/2023	
<b>Total</b>			<b>6 yrs</b>	<b>3 months</b>

Head of Department  
 Sign & Rubber Stamp  
 Head of the Department  
 Date: 29.01.2025

Sign. & Rubber Stamp  
 Head of Institute: Municipal General  
 Date: 30 JAN 2025  
 Hospital & Medical  
 - 400 022.

Name of Inspectors		Signature of Inspectors
1)	Chairman	
2)	Member	
3)	Member	
4)	Member	