

**PHARMACY COUNCIL OF INDIA**  
**Standard Inspection Format (S.I.F) for institutions conducting B. Pharm**  
**(To be filled and submitted to PCI by an organization seeking approval of the**  
**Course / continuation of the approval)**

(SIF-B)

*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**

<p><b>A – I .1</b>  Name of the Institution:  Complete Postal address:  STD code  Telephone No.  Fax No.  E-mail</p>	<p>Shri Baba Mastnath Institute of Pharmaceutical Sciences &amp; Research  Asthil Bohar, Rohtak (Haryana)  01262  215727  01262 – 292359  sbmnipsr@gmail.com</p>
<p>Year of Establishment</p>	<p>November 1996</p>
<p>Status of the course conducting body:  Government / University / Autonomous / Aided / Private (Enclose copy of Registration documents of Society/Trust)</p>	<p>Private</p>
<p><b>A – I .2</b>  Name, address of the Society/Trust/ Management (attach documentary evidence)  STD Code:  Telephone No:  Fax No:  E-mail  Web Site:</p>	<p>Shri Baba Mastnath Ayurvedic &amp; Sanskrit Shikshan Sansthan  01262  215727  01262 – 292359  Mastnath_math@rediffmail.com  <a href="http://www.babamastnathuniversity.com">www.babamastnathuniversity.com</a></p>
<p><b>A – I .3</b>  Name, Designation and Address of person to be contacted by phone  STD Code  Telephone No  Office  Residence  Mobile No.  Fax No  E-Mail</p>	<p>Mr. Pawan Jalwal  01262  215727  215727  09812875605  01262 – 292359  sbmnipsr@gmail.com</p>
<p><b>A – I .4</b>  Name and Address of the Head of the Institution</p>	<p>Dr. Balvinder Singh, Professor &amp; Principal  Shri Baba Mastnath Institute of Pharmaceutical Sciences &amp; Research, Asthal Bohar, Rohtak</p>

**A –I. 5**

**Signature of the Head of the Institution**

**Signature of the Inspectors**

**FOR INSTITUTION SEEKING CONTINUATION OF APPROVAL**

**a. Details of Affiliation Fee Paid**

**ANNEXURE 1**

Name of the Course	Affiliation Fee paid up to	Receipt No	Dated	Remarks of the Inspectors
B. Pharm	2015-16 2016-17 2017-18	25354 Awaited Awaited	01/10/2014 Awaited Awaited	

**b. APPROVAL STATUS:**

**ANNEXURE 1a**

Name of the Course	Approved up to	In take Approved and Admitted	PCI	State Government	University	Remarks of the Inspectors
B. Pharm	2016-2017	Approval Letter No and Date	32-233/2012/- PCI/19499-503 Dated 09 July 2014	NR/1-9085821/2010 /EOA dt 03-08-2010	Copy Enclosed	
		Approved Intake	60	120	60	
		Actually Admitted	60	60	60	

**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	2018-19	60	60	00

**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**

Yes

No

**A – I. 6 a**

**Status of the Pharmacy Course:**

**Independent Building**

**Wing of another college**

**Separate Campus**

**Multi Institutional Campus**

**Signature of the Head of the Institution**

**Signature of the Inspectors**

Examining Authority with complete postal Address, Telephone No. and STD Code: The Registrar, BABA MASTNATH UNIVERSITY, Asthal Bohar, Rohtak-124021, Ph. 09813194651 (Copy Enclosed)

**B - DETAILS OF THE INSTITUTION**

<b>B –I .1</b>					
<b>Name of the Principal</b>		Dr. Balvinder Singh			
<b>Qualification/ Experience</b>	<b>Qualification*</b>		<b>Teaching Experience Required</b>	<b>Actual experience</b>	<b>Remarks of the Inspectors</b>
	M. Pharm	<b>M. Pharm</b>	15 years, out of which 5 years as Prof. / HOD	23 Yrs (Total)	
	PhD	<b>PhD</b>	10 years, out of which at least 05 years as Asst. Prof.		

\* Documentary evidence should be provided ANNEXURE-1b

**B –I .2**

For institution seeking continuation of affiliation

Course	Date of last Inspection	Remarks of the Previous Inspection Report	Complied / Not Complied	Intake reduced / Stopped in the last 03 years*
<b>B. Pharm</b>	22 Nov 2013	ANNEXURE-2	Complied	No

\* Enclose Documents

**B –I .3**

<b>Status of Governing Council:</b>	<b>Government/Trust/Society/Individual / University</b>
<b>Details of the Governing Body</b>	<b>Enclosed ANNEXURE-3</b>
<b>Minutes of the last Governing council Meeting</b>	<b>Enclosed ANNEXURE-4</b>

**B –I .4**

Pay Scales:

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

**B –I .5**

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

ACADEMIC YEAR	Year 2014-2015	Year 2015-2016	Year 2016-2017
<b>Sanctioned</b>	<b>60</b>	<b>60</b>	<b>60</b>
<b>No. of Admissions</b>	<b>60</b>	<b>60</b>	<b>60</b>
<b>Unfilled Seats</b>	<b>00</b>	<b>00</b>	<b>00</b>
<b>No. of Excess Admissions</b>	<b>No</b>	<b>No</b>	<b>No</b>

Signature of the Head of the Institution

Signature of the Inspectors

**B –I.6****Academic information: Percentage of UG results for the past three years based on University Calendar**

<b>ACADEMIC YEAR</b>	<b>Year 2014-2015</b>	<b>Year 2015-2016</b>	<b>Year 2016-2017</b>
<b>1<sup>st</sup> year</b>	<b>70</b>	<b>70</b>	<b>27</b>
<b>2<sup>nd</sup> year</b>	<b>65</b>	<b>55</b>	<b>31</b>
<b>3<sup>rd</sup> year</b>	<b>68</b>	<b>64</b>	<b>33</b>
<b>Final year</b>	<b>50</b>	<b>72</b>	<b>9</b>
<b>Pass % (Final Year)</b>	<b>50</b>	<b>72</b>	<b>9</b>

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

Whether college has NSS Unit (Yes/No)? If no give reasons	Yes
NSS Programme Officer's Name	Mr. Harish Kumar
Programme conducted (mention details)	Enclosed
Whether students participating in University level cultural activities / Co- curricular/sports activities	Yes
Physical Instructor	Available
Sports Ground	Shared

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)

ANNEXURE-4a

C .2 Please provide following Information

Receipts			Expenditure			Remarks of the Inspectors	
Sl. No.	Particulars	Amount	Sl. No.	Particulars	Amount		
1.	Grants a. Government b. Others	NIL	<b>CAPITAL EXPENDITURE</b>				
2.	Tuition Fee	127,25000	1.	Building	NIL		
3.	Library Fee	NIL	2.	Equipment	NIL		
4.	Sports Fee	NIL	3.	Others	NIL		
5.	Union Fee	NIL	<b>REVENUE EXPENDITURE</b>				
6.	Others (Hostel & Messing)	275000	1	Salary	4557798		
7.	Character Certificate	NIL	2.	<b>MAINTENANCE EXPENDITURE</b>			
8.	R.K Fund			i	College	110000	
9.	Fine			ii	Others	37000	
10.	Prospectus		3.	University Fee (If any)P.C.I. Affiliation	100000		
11.	NSS Fee	102000					
12.	Development Fund		4.	Apex Bodies Fee			
13.	Holiday Home		5.	Government Fee			
14.	Bank Interest		6.	Deposit held by the College (Excess over income)			
15.	Student Fund						
15.	Registration Fee		7.	Others (Depreciation)			
<b>Total</b>		<b>131,02000</b>	8.	Misc. Expenditure	NIL		
			<b>Total</b>			<b>48,04,798</b>	

Note: Enclose relevant documents

Signature of the Head of the Institution

Signature of the Inspectors

## 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 ANNEXURE-5**
- d. Building:
  - i) Approved Building plan, to be Enclosed : **Enclosed ANNEXURE-6**
- e. Total Built Area of the college building in Sq.mts : Built up Area 2830 Sq. mt.  
Amenities and Circulation Area 378.00 Sq. mt.

### 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 Inspect ors
B. Pharm	04	04	90 Sq. mts each (Desirable) 75 Sq. mts each (Essential)	300	

(\*To accommodate 60 students).

### 3. Laboratory requirement at the end of 4 Years

#### ANNEXURE V

Sl. No.	Infrastructure for	Requirement as per Norms	Available No. & Area in Sq mts	Rem arks/ Defic iency
1	Laboratory Area for B.Pharm Course (12 Labs)	90 Sq .mts x n (n=10) - Including Preparation room - Desirable 75 Sq. mts - Essential	<b>831.00(10)</b>	
2	Pharmaceutics Pharmaceutical Chemistry Pharmaceutical Analysis Pharmacology Pharmacognosy Pharmaceutical Biotechnology (Including Aseptic Room) Total no. Laboratories for B.Pharm course	03 Laboratories 02 Laboratories 01 Laboratory 02 Laboratories 01 Laboratories 01 Laboratory 10 Laboratories *	234 (03) 157 (02) 82 (01) 156 (02) 78 (01) 124 (01)	
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)	51 (05)	
4	Area of the Machine Room	80-100 Sq.mts	82 (01)	
5	Central Instrumentation Room	80 Sq.mts with A/ C	81 (01)	
6	Store Room – I	1 (Area 100 Sq mts)	100 (01)	
7	Store Room – II (For Inflammable chemicals)	1 (Area 20 Sq mts)	25 (01)	

\*Number of laboratories required for entire course of 4 years.

**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

**Signature of the Head of the Institution**

**Signature of the Inspectors**

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	01	50	
2	Office – I - Establishment	01	60 Sq. mts	01	60	
3	Office – II - Academics					
4	Confidential Room					

#### 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	04	80	
2	Faculty Rooms for B. Pharm course		10 Sq mts x n (n=No of teachers)	03	140	

#### 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	01	135.0	
2	Library	01	150 Sq mts	01	150.0	
3	Museum	01	50 Sq mts (May be attached to the Pharmacognosy lab)	01	50.0	
4	Auditorium / Multi Purpose Hall (Desirable)	01	250 – 300 seating capacity	01	500	
5	Seminar Hall	01		01	100	
6	Herbal Garden (Desirable)	01	Adequate Number of Medicinal Plants	01	2500	

#### 7. Student Facilities:

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Signature of the Inspectors

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	01	60.0	
2	Boy's Common Room (Essential)	01	60 Sq.mts	01	60.0	
3	Toilet Blocks for Boys	01	24 Sq.mts	01	25.0	
4	Toilet Blocks for Girls	01	24 Sq.mts	01	25.0	
5	Drinking Water facility – Water Cooler (Essential).	01		01	20.0	
6	Boy's Hostel (Desirable)	01	9 Sq.mts / Room Single occupancy	01	15/ Room (Double occupied)	
7	Girl's Hostel (Desirable)	01	9 Sq.mts / Room (single occupancy) 20 Sq.mts / Room (triple occupancy)	01	15/ Room (Double occupied)	
8	Power Backup Provision (Desirable)	01		01	15 KVA Generator	

### 8. Computer and other Facilities:

Name	Required	Available		Remarks of the Inspectors
		No.	Area in Sq. mts	
Computer Room for B.Pharm Course	01 (Area 75 Sq mts)	01	75	
Computer (Latest Configuration)	1 system for every 10 students	25	---	
Printers	1 printer for every 10 computers	03	----	
Multi Media Projector	01	01	----	
Generator (5KVA)	01	15 KVA	----	

### 9. Amenities (Desirable)

Signature of the Head of the Institution

Signature of the Inspectors



Name	Requirement as per Norms in area	Available		Not Available	Remarks/Deficiency
		No.	Area in Sq. mts		
Principal quarters	80 Sq. mts	01	80		
Staff quarters	16 x 80 Sq. mts	04	320		
Canteen	100 Sq. mts	01	120		
Parking Area for staff and students		01	500		
Bank Extension Counter		02	400		
Co operative Stores		--	--		
Guest House	80 Sq. mts	--	--		
Transport Facilities for students		05 Buses	--		
Medical Facility (First Aid)		01+ 01 (General Hospital + Eye Hospital)			

### 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	1500 adequate coverage of a large number of standard text books and titles in all disciplines of pharmacy	702	3300	
2	Annual addition of books		100 to 150 books per year	30	150	
3	Periodicals Hard copies / online		10 National 05 International periodicals	10(National) 05(International)		
4	CDS		Adequate Nos	Adequate		
5	Internet Browsing Facility		Yes/No (Minimum ten computers)	Yes	10	
6	Reprographic Facilities: Photo Copier Fax Scanner		01 01 01		01 01 01	
7	Library Automation and Computerized System : Yes					
8	<b>Library Timings: 8:00 am to 6:00 pm</b>					

### 10.B. Library Staff:

	Staff	Qualification	Required	Available	Remarks of the Inspectors
1	Librarian	M. Lib	1	01	
2	Assistant Librarian	D. Lib	1	01	
3	Library Attenders	10 +2 / PUC	2	02	

Signature of the Head of the Institution

Signature of the Inspectors

### PART III ACADEMIC REQUIREMENTS

**Course Curriculum:**

**1. Student Staff Ratio:** Theory                  Practicals                  Remarks of the Inspectors

**60:1                          20:1**

(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.

**2. Scheme of B. Pharm Course:**                  Annual                 

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

<b>Commencement</b>	<b>Completion</b>
27/07/2016	30/06/2017

**4. Vacation:**                                  Summer:                  No of Days                  Winter:                  No of Days

                                

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

**6. Time Table:**                                  ANNEXURE-7

Time Table for B. Pharm course Enclosed                  Yes                   No

**7. Whether the prescribed numbers of classes are being conducted as per university norms I B. Pharm:**                                  ANNEXURE-8

Subject	No of Theory Classes		Practicals			Remarks of the Inspectors
	Prescribed No of Hrs	No of Hours Conducted	Prescribed No of Hours	No of Hours Conducted	No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5 No. of classes x hours per class	
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>		

**II B. Pharm:**

Signature of the Head of the Institution

Signature of the Inspectors

Subject	No of Theory Classes		Practicals			Remarks of the Inspectors
	Prescribed No of Hrs 2	No of Hours Conducted 3	Prescribed No of Hours 4	No of Hours Conducted 5	No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5 No. of classes x hours per class	
1						

### III B. Pharm:

Subject	No of Theory Classes		Practicals			Remarks of the Inspectors
	Prescribed No of Hrs 2	No of Hours Conducted 3	Prescribed No of Hours 4	No of Hours Conducted 5	No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5 No. of classes x hours per class	
1						

### IV B. Pharm:

Subject	No of Theory Classes		Practicals			Remarks of the Inspectors
	Prescribed No of Hrs 2	No of Hours Conducted 3	Prescribed No of Hours 4	No of Hours Conducted 5	No of Classes Conducted to fulfill Prescribed Number of Hours as in Column 5 No. of classes x hours per class	
1						

8. Whether Tutorials are being conducted (if any, as per university norms)

Yes

9. Number of Guest Lectures / Seminars / Workshops / Symposia / Presentations conducted during last Three years.

A.

Name of the Event	Year 2014-15	Year 2015-16	Year 2016-17
Guest Lectures	2	5	3
Seminars	6	7	6
Workshops	-	-	-
Symposia	-	-	-

Signature of the Head of the Institution

Signature of the Inspectors

## B. Papers Presented during last three years

	Year 2014-15		Year 2015-16		Year 2016-17	
	National	International	National	International	National	International
<b>Published</b>	<b>02</b>	<b>07</b>	<b>120</b>	<b>06</b>	<b>17</b>	<b>14</b>
<b>Presented</b>	<b>04</b>	<b>04</b>	<b>15</b>	<b>02</b>	<b>03</b>	<b>0</b>

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

Yes  No

Class	I Sessional Dates DD/MM/YY		II Sessional Dates DD/MM/YY		III Sessional Dates DD/MM/YY		Remarks of the Inspectors
	Theory	Practicals	Theory	Practicals	Theory	Practicals	
I B. Pharm	25/11/2016	25/11/2016	01/04/2017	01/04/2017			
II B. Pharm	25/11/2016	25/11/2016	01/04/2017	01/04/2017			
III B. Pharm	25/11/2016	25/11/2016	01/04/2017	01/04/2017			
IV B. Pharm	25/11/2016	25/11/2016	01/04/2017	01/04/2017			

### 11. Whether Evaluation of the internal assessments is Fair Yes No

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 Less than 50%		Remark s of the Inspect ors
	Th	Pr	Th	Pr	Th	Pr	Th	Pr	
I B.Pharm	0	0	29	36	31	24	0	0	
II B.Pharm	0	0	30	32	36	34	0	0	
III B.Pharm	0	0	34	33	29	30	0	0	
IV B.Pharm	0	0	26	29	28	25	0	0	

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

ANNEXURE-9

Sl. No	Name of the Faculty	Subjects taught	B. Pharm		Total work load	Specific Remarks of the Inspector
			Th	Pr		

### 13. Percentage of students qualified in GATE/GPAT in the last Three Years

Details	Year 2014-15	Year 2015-16	Year 2016-17
No. of Students Appeared	<b>08</b>	<b>08</b>	<b>08</b>
No. of Students Qualified	<b>02</b>	<b>01</b>	<b>00</b>
Percentage	<b>25</b>	<b>20</b>	<b>00</b>

Signature of the Head of the Institution

Signature of the Inspectors

14. Whether the Institution has an Industry – Institution Interaction cell Yes  No

If applicable please give the details for the previous Year

Events	Details for the Previous Year
No. of Industrial visits	03
Industrial Tour	01
Industrial Training	05
No. of Resource Persons from the Industry for Guest Lectures	02
No. of Collaboration projects with Industry	-

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

Year	Year 2014-15	Year 2015-16	Year 2016-17
No. of students appeared for campus interview	10	6	10
% Placed	40	33	50

√

16. Whether Professional Society Activities are Conducted (Enclose Details)  Yes  No  
(ISTE, IPA, APTI, ICTA and Related Societies)

(a) Organise National Seminar of IPGA, Haryana Branch on “Pradhan Mantri Bhartiya Janaushadhi Pariyojana: Role of Pharmacist” at B M University, Rohtak, Haryana on 1<sup>st</sup> March, 2017 presided by Dr. B.Suresh, President, P. C. I.

(b) Organise Continuing Pharmacy Education (CPE) Programme of Haryana State Pharmacy Council, Panchkula at B M University, Rohtak, Haryana on 14<sup>th</sup> May, 2017.

Signature of the Head of the Institution

Signature of the Inspectors

## IV - PERSONNEL

### TEACHING STAFF:

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

Sl No	Name	Designation	Qualification	Date of Joining	Teaching Experience	State Pharmacy Council Reg No.	Signature of the faculty	Remarks of the Inspectors
					After PG			
ANNEXURE-10								

2. Qualification and number of Staff Members

Qualification		
M. Pharm	PhD	Others - Full Time
ANNEXURE-11		

3. Teaching Staff required year wise exclusively for B. Pharm for intake of 60 Students.

	No. of staff required for I *B. Pharm	Available	No. of staff required for II B. Pharm	Available	No. of staff required for III B. Pharm	Available	No. of staff required for IV B. Pharm	Available
Principal	1	1	1	1	1	1	1	1
Pharmaceutical Chemistry	1	1	2	2	3	3	4	4
Pharmaceutical Analysis	1	1	--	--	-	-	1	1
Pharmacology	1	1	2	2	3	3	4	4
Pharmacognosy	1	1	2	2	3	3	3	3
Pharmaceutics	1	1	2	2	3	3	4	4
<b>Total</b>	<b>6</b>	<b>6</b>	<b>9</b>	<b>9</b>	<b>13</b>	<b>13</b>	<b>17</b>	<b>17</b>
<b>Part time teaching Staff</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>2</b>	<b>-</b>		<b>-</b>	
<b>Remarks of the Inspection Team</b>								

\*Part time teaching staff for Mathematics, Biology and Computer Science can be appointed.

Signature of the Head of the Institution

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 60 students	Provided by the institution	Remarks of inspection team
Department of Pharmaceutics	Professor	1	-	
	Asst. Professor	1	3	
	Lecturer	2	6	
Department of Pharmaceutical Chemistry (Including Pharmaceutical Analysis)	Professor	1	-	
	Asst. Professor	1	-	
	Lecturer	3	4	
Department of Pharmacology	Professor	1	1	
	Asst. Professor	1	-	
	Lecturer	2	2	
Department of Pharmacognosy	Professor	1	-	
	Asst. Professor	1	-	
	Lecturer	1	1	

**5. Selection criteria and Recruitment Procedure for Faculty:**

<b>a.</b>	Whether Recruitment Committee has been formed	√ Yes / No
<b>b.</b>	Whether Advertisement for vacancy is notified in the Newspapers	√ Yes / No
<b>c.</b>	Whether Demonstration Lecture has been conducted	√ Yes / No
<b>d.</b>	Whether opinion of Recruitment Committee Recorded	√ Yes / No

**6. Details of Faculty Retention for:**

**ANNEXURE-12**

Name of Faculty Member	Period	%
--	Duration of 15 yrs. and above	--
--	Duration of 10 yrs. and above	--
	Duration of 5 yrs. and above	25%
	Less than 5 yrs.	75%

**7. Details of Faculty Turnover:**

**ANNEXURE-13**

Name of Faculty Member	Period	More than 50%	50%	25%	Less than 25%
	% of faculty retained in last 3 yrs	√			

**8. Number of Non-teaching staff available for B. Pharm course for intake of 60 Students:**

Signature of the Head of the Institution

Signature of the Inspectors

Sl. No.	Designation	Required (Minimum)	Required Qualification	Available		Remarks of the Inspection team
				Number	Qualification	
1	Laboratory Technician	1 for each Dept	D. Pharm	-	-	
2	Laboratory Assistants / Attenders	1 for each Lab (minimum)	SSLC	12	SSLC	
3	Office Superintendent	1	Degree	01	Degree	
4	Accountant	1	Degree	01	Degree	
5	Store keeper	1	D. Pharm/ Degree	01	Degree	
6	Computer Data Operator	1	BCA / Graduate with Computer Course	01	Graduate with Computer Course	
7	Office Staff I	1	Degree	01	Degree	
8	Office Staff II	2	Degree	02	Degree	
9	Peon	2	SSLC	02	Matric	
10	Cleaning personnel	Adequate	---	02	---	
11	Gardener	Adequate	---	01	---	

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

Sl. No	Name	Qualification	Designation	Basic pay Rs.	DA Rs.	HRA Rs.	CCA Rs.	Other allowance Rs.	Deductions			Bank A/C No	PAN No	EPF A/c no.	Total	Signature
									P T	TDS	EPF					
<b>ANNEXURE-14</b>																

**10. Whether facilities for Research / Higher studies are provided to the faculty? No**

(Inspectors to verify documents pertaining to the above)

**11. Whether faculty members are allowed to attend workshops and seminars? Yes**

(Inspectors to verify documents pertaining to the above)

**12. Scope for the promotion for faculty: Promotions**

Yes  No

**13. Gratuity Provided**

Yes  No

**14. Details of Non-teaching staff members (list to be enclosed):**

Sl No	Name	Designation	Qualification	Date of Joining	Experience	Signature	Remarks of the Inspectors
<b>ANNEXURE-15</b>							

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

√  
Yes/ No

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## PART V - DOCUMENTATION

### Records Maintained: Essential

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

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**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. 2014-15			Expenditure in Rs. 2015-16			Expenditure in Rs 2016-17			Remarks of the Inspectors*
No.	Total budget sanctioned	Recurring	Non Recurring	Total budget sanctioned	Recurring	Non Recurring	Total budget sanctioned	Recurring	Non Recurring	
	1100000	500000	600000	1000000	400000	600000	1000000	400000	600000	

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

Sl	Expenditure in Rs. 2014-15			Expenditure in Rs. 2015-16			Expenditure in Rs 2016-17			Remarks of the Inspectors*
No.	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	
	Chemicals	60000	20000	Chemicals	50000	15000	Chemicals	40000	12000	
	Glassware	40000	10000	Glassware	25000	10000	Glassware	25000	10000	

**3. Total amount spent on equipments for the past three years:  
(Enclose purchase invoice)**

Sl	Expenditure in Rs. 2014-15			Expenditure in Rs. 2015-16			Expenditure in Rs 2016-17			Remarks of the Inspectors*
No.	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	
	Equipment	300000	50000	Equipment	200000	50000	Equipment	200000	15000	

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

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Sl No.	Expenditure in Rs. 2014-15			Expenditure in Rs. 2015-16			Expenditure in Rs 2016-17			Remarks of the Inspectors*
	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	
1	Books	50000	20000	Books	50000	15000	Books	50000	15000	
2	Journals	25000	10000	Journals	25000	7000	Journals	25000	25000	

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

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## 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	15	15	Yes	
2	Haemocytometer with Micropipettes	20	20	Yes	
3	Sahli's haemocytometer	20	20	Yes	
4	Hutchinson's spirometer	01	01	Yes	
5	Sphygmomanometer	05	05	Yes	
6	Stethoscope	05	05	Yes	
7	Permanent Slides for various tissues	One pair of each tissue Organs and endocrine glands One slide of each organ system	Adequate	Yes	
8	Models for various organs	One model of each organ system	06	Yes	
9	Specimen for various organs and systems	One model for each organ system	Adequate	Yes	
10	Skeleton and bones	One set of skeleton and one spare bone	05	Yes	
11	Different Contraceptive Devices and Models	One set of each device	Adequate	Yes	
12	Muscle electrodes	01	01	Yes	
13	Lucas moist chamber	01	01	Yes	
14	Myographic lever	01	01	Yes	
15	Stimulator	01	01	Yes	
16	Centrifuge	01	01	Yes	
17	Digital Balance	01	03	Yes	
18	Physical /Chemical Balance	01	01	Yes	
19	Sherrington's Kymograph Machine / Polyrite	10	10	Yes	

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20	Sherrington Drum	10	25	Yes	
21	Perspex bath assembly (single unit)	10	25	Yes	
22	Aerators	10	25	Yes	
23	Computer with LCD	01	01	Yes	
24	Software packages for experiment	01	01	Yes	
25	Standard graphs of various drugs	Adequate number	Adequate	Yes	
26	Actophotometer	01	01	Yes	
27	Rotarod	01	01	Yes	
28	Pole climbing apparatus	01	01	Yes	
29	Analgesiometer (Eddy's hot plate and radiant heat methods)	01	01	Yes	
30	Convulsiometer	01	01	Yes	
31	Plethysmograph	01	02	Yes	
32	Digital pH meter	01	01	Yes	

**Apparatus:**

Sl. No.	Name	Minimum required No.s	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Folin-Wu tubes	60	60	Yes	
2	Dissection Tray and Boards	10	15	Yes	
3	Haemostatic artery forceps	10	15	Yes	
4	Hypodermic syringes and needles of size 15,24,26G	10	10	Yes	
5	Livers, 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	15	20	Yes	
2	Digital Balance	02	02	Yes	
3	Autoclave	02	01	Yes	
4	Hot air oven	02	02	Yes	

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5	B.O.D. incubator	01	01	Yes	
6	Refrigerator	01	01	Yes	
7	Laminar air flow	01	01	Yes	
8	Colony counter	02	01	Yes	
9	Zone reader	01	01	Yes	
10	Digital pH meter	01	01	Yes	
11	Sterility testing unit	01	01	Yes	
12	Camera Lucida	15	15	Yes	
13	Eye piece micrometer	15	10	Yes	
14	Incinerator	01	01	Yes	
15	Moisture balance	01	01	Yes	
16	Heating mantle	15	10	Yes	
17	Flourimeter	01	-	-	
18	Vacuum pump	02	02	Yes	
19	Micropipettes (Single and multi channeled)	02	01	Yes	
20	Micro Centrifuge	01	01	Yes	
21	Projection Microscope	01	01	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	15	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	01	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	05	Yes	
2	Oven	03	04	Yes	
3	Refrigerator	01	01	Yes	

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4	Analytical Balances for demonstration	05	10	Yes	
5	Digital balance 10mg sensitivity	10	03	Yes	
6	Digital Balance (1mg sensitivity)	01	01	Yes	
7	Suction pumps	06	02	Yes	
8	Muffle Furnace	01	01	Yes	
9	Mechanical Stirrers	10	05	Yes	
10	Magnetic Stirrers with Thermostat	10	05	Yes	
11	Vacuum Pump	01	01	Yes	
12	Digital pH meter	01	01	Yes	
13	Microwave Oven	02	-	-	

**Apparatus:**

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Distillation Unit	02	02	Yes	
2	Reflux flask and condenser single necked	20	10	Yes	
3	Reflux flask and condenser double / triple necked	20	10	Yes	
4	Burettes	40	40	Yes	
5	Arsenic Limit Test Apparatus	20	20	Yes	
6	Nessler's Cylinders	40	40	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	10	10	Yes	
2	Homogenizer	05	03	Yes	
3	Digital balance	05	01	Yes	
4	Microscopes	05	05	Yes	
5	Stage and eye piece micrometers	05	5	Yes	
6	Brookfield's viscometer	01	-	-	
7	Tray dryer	01	01	Yes	

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8	Ball mill	01	01	Yes	
9	Sieve shaker with sieve set	01	01	Yes	
10	Double cone blender	01	01	Yes	
11	Propeller type mechanical agitator	05	04	Yes	
12	Autoclave	01	01	Yes	
13	Steam distillation still	01	01	Yes	
14	Vacuum Pump	01	01	Yes	
15	Standard sieves, sieve no. 8, 10, 12,22,24, 44, 66, 80	10 sets	10 Sets	Yes	
16	Tablet punching machine	01	04	Yes	
17	Capsule filling machine	01	01	Yes	
18	Ampoule washing machine	01	01	Yes	
19	Ampoule filling and sealing machine	01	01	Yes	
20	Tablet disintegration test apparatus IP	01	02	Yes	
21	Tablet dissolution test apparatus IP	01	03	Yes	
22	Monsanto's hardness tester	01	02	Yes	
23	Pfizer type hardness tester	01	02	Yes	
24	Friability test apparatus	01	01	Yes	
25	Clarity test apparatus	01	02	Yes	
26	Ointment filling machine	01	01	Yes	
27	Collapsible tube crimping machine	01	01	Yes	
28	Tablet coating pan	01	01	Yes	
29	Magnetic stirrer, 500ml and 1 liter capacity with speed control	05 EACH 10	05	Yes	
30	Digital pH meter	01	01	Yes	
31	All purpose equipment with all accessories	01	-	-	
32	Aseptic Cabinet	01	01	Yes	
33	BOD Incubator	02	01	Yes	
34	Bottle washing Machine	01	-	-	
35	Bottle Sealing Machine	01	-	-	
36	Bulk Density Apparatus	02	02	Yes	
37	Conical Percolator (glass/ copper/ stainless steel)	10	20	Yes	
38	Capsule Counter	02	02	Yes	
39	Energy meter	02	--	--	

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40	Hot Plate	02	04	Yes	
41	Humidity Control Oven	01	01	Yes	
42	Liquid Filling Machine	01	-	-	
43	Mechanical stirrer with speed regulator	02	04	Yes	
44	Precision Melting point Apparatus	01	01	Yes	
45	Distillation Unit	01	02	Yes	

**Apparatus:**

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Ostwald's viscometer	15	15	Yes	
2	Stalagmometer	15	15	Yes	
3	Desiccator*	05	05	Yes	
4	Suppository moulds	20	15	Yes	
5	Buchner Funnels (Small, medium, large)	05 each	15	Yes	
6	Filtration assembly	01	-	-	
7	Permeability Cups	05	-	-	
8	Andreason's Pipette	03	08	Yes	
9	Lipstick moulds	10	-	-	

**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	00	--	
2	Lyophilizer (Desirable)	01	--	--	
3	Gel Electrophoresis (Vertical and Horizontal)	01	--	--	
4	Phase contrast/Trinocular Microscope	01	--	--	
5	Refrigerated Centrifuge	01	01	Yes	
6	Fermenters of different capacity (Desirable)	01	00	--	
7	Tissue culture station	01	00	--	
8	Laminar airflow unit	01	01	Yes	

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9	Diagnostic kits to identify infectious agents	01	--	--	
10	Rheometer	01	--	--	
11	Viscometer	01	01	Yes	
12	Micropipettes (single and multi channeled)	01 each	01	Yes	
13	Sonicator	01	01	Yes	
14	Respinometer	01	--	--	
15	BOD Incubator	01	01	Yes	
16	Paper Electrophoresis Unit	01	--	--	
17	Micro Centrifuge	01	--	--	
18	Incubator water bath	01	--	--	
19	Autoclave	01	01	Yes	
20	Refrigerator	01	01	Yes	
21	Filtration Assembly	01	01	Yes	
22	Digital pH meter	01	01	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	02	Yes	
2	Digital pH meter	01	02	Yes	
3	UV- Visible Spectrophotometer	01	02	Yes	
4	Flourimeter	01	01	Yes	
5	Digital Balance (1mg sensitivity)	01	01	Yes	
6	Nephelo Turbidity meter	01	-	-	
7	Flame Photometer	01	02	Yes	
8	Potentiometer	01	01	Yes	
9	Conductivity meter	01	01	Yes	
10	Fourier Transform Infra Red Spectrometer (Desirable)	01	-	-	
11	HPLC	01	-	-	
12	HPTLC (Desirable)	01	-	-	

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13	Atomic Absorption and Emission spectrophotometer (Desirable)	01	-	-	
14	Biochemistry Analyzer (Desirable)	01	-	-	
15	Carbon, Hydrogen, Nitrogen Analyzer (Desirable)	01	-	-	
16	Deep Freezer (Desirable)	01	-	-	
17	Ion- Exchanger	01	-	-	
18	Lyophilizer (Desirable)	01	-	-	

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**Signature of the Inspectors**

**Observation of the Inspectors:**

**Compliance of the last recommendations by Inspectors**

**ANNEXURE-2**

**Specific observations if not complied**

**NO**

**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**