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**Tracking Number: SIF/2017/100735**

**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**

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**A - I.1**

<b>Name of the institution</b>	srinivasa college of pharmacy
<b>Complete postal address:</b>	# 33/1, Byrathi Extn., Kothanur Post, Hennur-Baglur Main Road, Bangalore - 560 077 Karnataka.
<b>Telephone number with STD Code</b>	080 28443064
<b>Fax No</b>	08028443064
<b>Email</b>	scpbangalore@yahoo.com
<b>Year of establishment</b>	2004
<b>Status of the course conducting body</b>	Trust

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**A - I.2**

<b>Name of the Society/Trust/Management</b>	Indira Priyadarshini Education Trust
<b>Address</b>	# 30/2, 8th Cross, 5th Main, Krishnappa Block, Ganganagar, R.T. Nagar, Bangalore-560 032.
<b>Telephone Number with STD Code</b>	080 23535248
<b>Fax No</b>	08023535248
<b>Email</b>	indirapriyadarshineducationtrust.com
<b>Website</b>	underconstruction

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**A - I.3**

<b>Name of the person to be contacted by phone</b>	Sanjeev Chincholi
<b>Designation</b>	Secretary
<b>Address</b>	# 30/2, 8th Cross, 5th Main, Krishnappa Block, Ganganagar, R.T. Nagar, Bangalore-560 032.
<b>STD Code</b>	080
<b>Telephone Number</b>	
<b>Office</b>	08028443064

Residence 28443064  
 Mobile 9880462926  
 Fax No 08028443064  
 Email Sanjeev\_chincholi@yahoo.com  
 <Sanjeev\_chincholi@yahoo.com>

**A - I.4**

**Name of the Head of the Institution** Mr AMARNATH REDDY ALLA Principal  
**Address** "Shivalaya", KPT Road, K R Puram Extn., Bangalore-560036.

**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	2018-2019	384128	29/08/2017	

**b. APPROVAL STATUS**

Name of the Course	Approved Upto	Intake Approved and Admitted	PCI	State Govt	University	Remarks of the Inspectors
D Pharm	2017-18	Approved Letter No & Date	17-621/2012-PCI	HFV/182/PTD/97	0	
		Approved Intake	60	60	0	
		Actually Admitted	60	60	0	

**c. STATUS OF APPLICATION**

Course	Extension of Approval	Increase in Intake of Seats	Remarks	
			Current Intake	Proposed increase in Intake
D Pharm	Yes	No	60	60

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 Yes

**A - I.6 a**

<b>Status of the Pharmacy Course:</b>	
<b>Independent Building</b>	Yes
<b>Wing of Another College</b>	No
<b>Separate Campus</b>	Yes
<b>Multi Institutional Campus</b>	No

<b>Examining Authority:</b>	<b>Diploma Course</b>
<b>Name with Complete Postal address, telephone No. and STD Code.</b>	The Member Secretary, O/o the Board of Examining Authority, State of Karnataka, III Floor, Govt. College of Pharmacy, No.2, Subbaiah Circle, Dr. P.Kalinga Rao Road, Bangalore - 560 027

**Signature of the Head of the Institution**

**Signature of the Inspectors**

**B - DETAILS OF THE INSTITUTION**

**B - I.1**

**Name of the Principal**

AMARNATH REDDY ALLA

Qualification/ Experience	Qualification*		Teaching Experience Required	Actual experience	Remarks of the Inspectors
	M. Pharm	Yes	05 Years	8	
	PhD (Desirable)	No	02 Years		

\* Documentary evidence should be provided

**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*
D Pharm	31/07/2015	nil	No	No

\* Enclose Documents

**B - I.3**

**Pay Scales**

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

**B - I.4**

**D Pharm Course: Admission statement for the past three years**

<b>ACADEMIC YEAR</b>	<b>2015-2016</b>	<b>2016-2017</b>	<b>2017-2018</b>
<b>Sanctioned</b>	60	60	60
<b>No. of Admissions</b>	60	60	60
<b>Unfilled Seats</b>	0	0	0
<b>No of Excess Admission</b>	0	0	0

**B - I.5**

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

<b>ACADEMIC YEAR</b>	<b>2015-2016</b>	<b>2016-2017</b>	<b>2017-2018</b>
<b>D Pharm</b>	70	65	60

**Signature of the Head of the Institution**

**Signature of the Inspectors**

**B - II**

**Co-Curricular Activities / Sports Activities**

<b>Whether college has NSS Unit(Yes/No)?</b>	No
<b>If no give reasons</b>	Management has decided to open NSS unit from the academic year 2015-16
<b>NSS Program Officer's Name</b>	No
<b>Programme Conducted Details</b>	No
<b>Whether students participating in University level cultural activities/Co-curricular/Sports activities</b>	No
<b>Physical Instructor</b>	Not Available
<b>Sports Ground</b>	Shared
<b>Are you Associated with other Organization/Institution/Trust/Society Running Pharmacy Course</b>	Yes
<b>Organization/Institution/Trust/Society Name</b>	
<b>Complete Postal Address.</b>	
<b>Telephone No.</b>	
<b>Nature of Association</b>	

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			Remarks of the Inspector
Sl. No.	Particulars	Amount	Sl. No.	Particulars	Amount	
1.	Grants		CAPITAL EXPENDITURE			
	a. Government	0.00				
	b. Others	400000.00				
2.	Tuition Fee	1395000.00	1.	Building	0.00	
3.	Library Fee	93000.00	2.	Equipment	86000.00	
4.	Sports Fee	46500.00	3.	Others	0.00	
5.	Union Fee	0.00	REVENUE EXPENDITURE			
6.	Others	113955.00	1.	Salary	1779720.00	
			2.	Maintenance Expenditure		
				i. College	8600.00	
				ii. Others	2600.00	
			3.	University Fee	0.00	
			4.	Apex Bodies Fee	116600.00	
			5.	Government Fee	0.00	
			6.	Deposit held by the College	200000.00	
			7.	Others	113955.00	
			8.	Misc. Expenditure	0.00	
	<b>Total</b>	<b>2048455.00</b>		<b>Total</b>	<b>2221475.00</b>	

**Note: Enclose relevant documents**

Signature of the Head of the Institution

Signature of the Inspectors

**PART- II PHYSICAL INFRASTRUCTURE**

<b>a. Building</b>	<b>Own</b>
<b>b Land:</b>	
<b>c. Building</b>	<b>Own</b>
<b>i) Leased or own</b>	<b>Own</b>
<b>Sale / Agreement deed (records to be enclosed)</b>	<b>--</b>
<b>i) Leased/Rented â€ (Record to be enclosed)</b>	<b>Enclosed</b>
<b>ii) If Own (Approved Building plan &amp; sale deed to be enclosed)</b>	<b>Enclosed</b>
<b>d. Total Area of the college building in Sq.mts</b>	
<b>Built up Area</b>	<b>1930</b>
<b>Amenities and Circulation Area</b>	<b>240</b>

## 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	100	

[\* To accomodate 60 students]

## 3. Laboratory requirement

Sl.No.	Infrastructure for	Available No.	Area in Sq. mts	Remarks
1	Laboratory Area for D.Pharm Course	5	120	
2	Pharmaceutics	1	100	
3	Pharmaceutical Chemistry	1	120	
4	Physiology and Pharmacology	1	100	
5	Pharmacy Practice	1	100	
6	Pharmacognosy	1	120	
7	Animal House	1	0	
8	Preparation Room for each lab	3	20	
9	Area of the Machine Room	1	120	
10	Aseptic Room	1	25	
11	Store Room I	1	60	
12	Store Room II Inflammable chemicals	1	60	

**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**

- All the Laboratories should be well lit & ventilated.
- All Laboratories should be provided with basic amenities and services like exhaust fans and fuming chamber to reduce the pollution whenever necessary.
- The workbenches should be smooth and easily cleanable preferably made of non-absorbant material.
- The water taps should be non-leaking and directly installed on skins Drainage should be efficient.
- Balance room should be attached to the cocerned laboratories.

## 4. Administration Area

Sl.	Name of	Requirement	Requirement	Available	Remarks/Deficienc
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No.	Infrastructure	s as per Norms (in Number)	s as per Norms (in Area)	No.	Area in Sq.mts	y
1	Principal's Chamber	01	20 Sq. mts	1	60	
2	Office - I (including confidential room)	01	40 Sq. mts	1	100	
3	Staff / Faculty Rooms for D. Pharm course	01	30 Sq. mts	0	0	
4	Library with computer and reprographic facilities	01	100 Sq. mts	1	150	
5	Museum	01	30 Sq. mts (Maybe attached to the Pharmacognosy lab)	1	60	
6	Auditorium/ Multi Purpose Hall (Desirable)	01	250 - 300 seating capacity	0	390	
7	Herbal Garden (Desirable)	01	Adequate Number of Medical Plants	1	10	

#### 5. Student Facilities

Sl. No.	Name of Infrastructure	Requirements (in Number)	Requirements (in Area)	Available		Remarks/Deficiency
				No.	Area in Sq.mts	
1	Girls's Common Room (Essential)	01	40 Sq. mts	1	100	
2	Boy's Common Room (Essential)	01	40 Sq. mts	1	120	
3	Toilet Blocks for Girls	01	25 Sq. mts	1	50	
4	Toilet Blocks for Boys	01	25 Sq. mts	1	20	
5	Drinking Water facility - Water cooler (Essential)	01	--	1	5	
6	Boy's Hostel (Desirable)	01	9 Sq. mts/Room Single occupancy	0	120	
7	Girls's Hostel (Desirable)	01	9 Sq.mts/Room (Single occupancy) or 20	0	700	



			Sq.mts/Room (Triple occupancy)			
8	Power Backup Provision (Desirable)	01	--	1	5	
9	Canteen	01	100 sq mts.	1	0	

#### 6. Computer and other Facilities

Name	Required	Available		Remarks of the Inspectors
		No.	Area in Sq.mts	
Computer (Latest Configuration)	1 syste, for every 10 students (UG & PG)	7	120	
Printers	1 Printer for every 10 computers	2	5	
Xerox Machine	01	--	--	
Multi Media Projector	02	1	1	

#### 7. Amenities(Desirable)

Name	Requirment as per Norms in area	Available		Not Availabl e	Remarks/Deficienc y
		No.	Area in Sq.mt s		
Principal Quarters	80 Sq. Mtr.	0	0	is a localite	
Staff Quarters	6 x 80 Sq. mts	0	0	staff members are localites	
Parking Area fro staff and students		1	10	Available in the campus	
Bank Extension Counter		1	240	Available in the campus	
Cooperative Stores		1	0	available in the near vicinity	
Guest House	80 Sq. mts	1	10	Available in the nea	
Transport Facility for students		0	0	Hostel available in	
Medical Fecilities(First Aid)		1	0	Available in the campus	

**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:

Sl. No	Item	Titles(No)	Minimum Volumes(No)	Available		Remarks of the Inspectors
				Title	No.	
1	Number Of Books	75	750 adequate coverage of a large number of standard text books and titles in all disciplines of pharmacy	259	1296	
2	Annual Addition of Books		75 books per year	20	100	
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.	5	2	
4	Library timings			9 am to 4 pm		

**8.B. Subject wise Classification**

Sl. No.	Subject	Available Titles	Available Numbers	Remarks of the Inspectors
1	Pharmaceutics 1	12	125	
2	Pharmaceutical Chemistry 1	13	118	
3	Pharmacognosy	19	171	
4	Biochemistry and Clinical Pathology	11	117	
5	Human Anatomy and Physiology	13	103	
6	Health Education and Community Pharmacy	45	92	
7	Pharmaceutics II	55	132	
8	Pharmaceutical Chemistry II	29	139	
9	Pharmacology and Toxicology	19	64	
10	Pharmaceutical Jurisprudence	13	112	
11	Drug Store and Business Management	17	88	
12	Hospital and Clinical Pharmacy	13	35	

**8.C. Library Staff**

Staff	Qualification	Required	Available	Remarks of the
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					<b>Inspectors</b>
1	Librarian	D.Lib.	1	Available	
2	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	60:01	20:01	

##### 2. Date of Commencement of session

Commencement	Completion
01/08/2017	14/03/2018

##### 3. Vacation

	No of Days		No of Days
Summer :	15	Winter :	0

##### 4. Total No. of working days

180

##### 5. Time Table copy Enclosed

Yes

##### 6. Whether the prescribed numbers of classes are being conductud as per PCI norms

##### I D.Pharm

Class/Subject	Theory		Practicals				Remark of the Inspector
	Prescribed No of Hours	No of Hours Conducted	Prescribed No of Hours	No of Hours Conducted	Prescribed No of Classes	No of Classes Conducted	
Pharmaceutics -I	75	79	100	104	25	26	
Pharmaceutics Chemistry -I	75	80	75	78	25	26	
Pharmacognosy	75	83	75	81	25	27	
Biochemistry and Clinical Pathology	50	57	75	78	25	26	
Human Anatomy	75	80	50	52	25	26	

and Physiology							
Health Education and Community Pharmacy	50	56	--	0	--	0	

#### II D.Pharm

Class/Subject	Theory		Practicals				Remark of the Inspector
	Prescribed No of Hours	No of Hours Conducted	Prescribed No of Hours	No of Hours Conducted	Prescribed No of Classes	No of Classes Conducted	
Pharmaceutics -II	75	82	100	108	25	27	
Pharmaceutics Chemistry -II	100	104	75	78	25	26	
Pharmacology and Toxicology	75	82	50	52	25	26	
Pharmaceutical Jurisprudence	50	52	--	0	--	0	
Drug Store and Business Management	75	81	--	0	--	0	
Hospital and Clinical Pharmacy	75	82	50	54	25	27	

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

8. Whether Evaluation of the internal assessments is Fair --

Class	No of Candidates scored more than 80%		No of Candidates scored 60% - 80%		No of Candidates scored 50% - 60%		No of Candidates scored less than 50%		Remarks of the Inspectors
	Theory	Practicals	Theory	Practicals	Theory	Practicals	Theory	Practicals	
I D.Pharm	0.00	0.00	4.00	4.00	6.00	6.00	11.00	11.00	
II D.Pharm	0.00	0.00	1.00	1.00	15.00	15.00	2.00	2.00	

#### 9. Work load of Faculty members for D. Pharm

S.No.	Name of Faculty	Subjects Taught	D. Pharm		Total Work Load	Remarks of the Inspectors
			I D. Ph	II D. Ph		

			Th	Pr	Th	Pr	
1	Dr. ARCHANA KAUL	HAP Pharmacology	3 0	6 0	0 3	0 4	9 7
2	Mr. PRAVEEN KUMARA M N	Bio Chemistry Clinical Pathology Hospital and Clinical Pharmacy	2 0	9 0	0 3	0 4	11 7
3	Mrs. DIVYASHREE J						
4	Mrs. LALITHA R						
5	Mrs. RADHA R						

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	PRAVEEN KUMARA M N	Lecturer	B Pharm,	01/08/2014	3.2	0.0	46162		

2. Qualification and Number of Staff Members

Number of staff members required: 07

Qualification							
B Pharm		M Pharm		PhD		Others	
13		1		0		1	Part Time

3. Details of Faculty Retention for:

Name of Faculty Member	Period	Percentage
	Duration of 15 year and above	0
Praveen M J Sanjeev Chincholi	Duration of 10 year and above	35%
Balakishore G	Duration of 5 year and above	25%
Mrs. Vandana Mrs. Archana Kaul Mr. K. Sreekar Mr. Praveen Kumara M N	Less than 5 years	40%

4. Details of Faculty Turnover

Name of Faculty Member	Period	More than 50%	50%	25%	Less than 25%
Ramesh Chinni Jayachandra Naidu K Madhu Raghavendra Prasad Buragadda	% of faculty retained in last 3 yrs	No	Yes	No	No

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

Sl	Designation	Required	Required	Available	Remarks of

No.		Number	Qualification	Number Qualification	the Inspectors
1	Laboratory technician	02	D. Pharm	2 D Pharm	
2	Laboratory Assistants/ Attenders	04	SSLC	0	
3	Office Superintendent	1	Degree	1 MA	
4	Accountant cum Clark	1	Degree	0	
5	Store keeper	1	D. Pharm	0	
6	Computer Data Operator	1	10+2 with computer training	0	
7	Peon	2	SSLC	1 8th Std	
8	Cleaning personnel	04	---	2 0	
9	Gardener	01	---	0	

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

S.No.	Name	Qualification	Designation	Basic Pay	D.P.	DA	HRA	CCA & Additional Pay	Other Allowances	Deductions			Bank A/C No	PAN No	EP F A/ C No	Total	Signature
										P T	T D S	E P F					
1	ARCHANA KAUL	B Pharm,	Lecturer	9400	0	940	470	100	0	0	150	0	10118872578	ASKPV6557F	00	10760	
2	PRAVEEN KUMARAMN	B Pharm,	Lecturer	8800	0	880	440	100	0	0	150	0	0	ATRPC5587E	0	10070	
3	DIVYASHREE J	B Pharm,	Lecturer	9000	0	7380	3500	200	0	0	200	0	0	BXDPD4111J	0	19880	
4	RADHAR	B Pharm,	Lecturer	9000	0	7380	3500	200	0	0	200	0	0	ANRPP7175B	0	19880	
5	LALITHAR	B Pharm,	Lecturer	9000	0	7380	3500	200	0	0	200	0	0	BJRCP1004K	0	19880	

**7. Whether facilities for Research / Higher studies are provided to the faculty?**

Yes  No

(Inspectors to verify documents pertaining to the above)

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

Yes  No

(Inspectors to verify documents pertaining to the above)

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

Yes  No

**10. Gratuity Provided**

Yes  No

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

Name	Designation	Qualification	DOJ	Experience
Regi Jose	Office Superintendent	MA	28/04/2011	4
Tejavathi G	First Division Assistant	BA	02/09/2013	12
Nalina Kumari	Laboratory Technician	D Pharm	01/08/2014	0
Dilip	Laboratory Technician	D Pharm	01/08/2014	2
Santhosh	Peon	8th Std	05/03/2012	2
Rathnamma	Cleaning personnel	0	04/02/2013	1
Renuka	Cleaning personnel	0	06/01/2014	0

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

Yes  No

**Signature of the Head of the Institution**

**Signature of the Inspectors**

**PART V - DOCUMENTATION**

Records Maintained (Essential)			
Sl. 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 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	No	

**PART - VI**

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

Expenditure in Rs. 2015-2016	Expenditure in Rs. 2016-2017	Expenditure in Rs. 2017-2018	Remarks of the
------------------------------	------------------------------	------------------------------	----------------

									Inspectors*
Total budget sanctioned	Recurring	Non Recurring	Total budget sanctioned	Recurring	Non Recurring	Total budget sanctioned	Recurring	Non Recurring	
150000	100000	100000	250000	100000	100000	200000	100000	100000	

Total amount spent on Chemical, Glassware, Equipments, Books and Journals for the past Three Years  
(Enclose purchase invoice)

Total budget allocated	Sanctioned	Incur red	Total budget allocated	Sanctioned	Incur red	Total budget allocated	Sanctioned	Incur red	Remarks of the Inspectors*
Chemicals	30000	18000	Chemicals	30000	18000	Chemicals	30000	18000	
Glassware	30000	15000	Glassware	25000	15000	Glassware	40000	15000	
Equipment	40000	60000	Equipment	40000	60000	Equipment	45000	50000	
Books	20000	15000	Books	20000	10000	Books	20000	15000	
Journals	10000	10000	Journals	10000	8000	Journals	10000	9000	

\*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

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

Pharmaceutics

**Equipments:**

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working	Remarks of the Inspectors
1	Continuous Hot Extraction Equipment	5	5	Yes	
2	Conical Percolator	5	5	Yes	
3	Tincture Press	1	1	Yes	
4	Hand Grinding Mill	1	1	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	10	Yes	
15	Tablet counter " small size	5	5	Yes	
16	Friability tester	1	1	Yes	
17	Collapsible tube " Filling and sealing equipment	1	1	Yes	
18	Capsule filling machine " Lab size	1	1	Yes	
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	1	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	10	Yes	
26	Millipore filter ( 3 grades)	0	3	Yes	
27	Autoclave	1	2	Yes	
28	Hot air sterilizer	1	2	Yes	
29	Incubator	1	2	Yes	
30	Aseptic cabinet	1	1	Yes	
31	Ampoule clarity test equipment	1	2	Yes	
32	Blender	1	1	Yes	
33	Sieves set (Pharmacopoeial standard)	2	2	Yes	
34	Lab Centrifuge	1	2	Yes	
35	Ointment slab	0	20	Yes	
36	Ointment spatula	0	20	Yes	
37	Pestle and mortar porcelain	0	20	Yes	
38	Pestle and mortar glass	0	5	Yes	
39	Suppository moulds of three sizes	0	30	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:**

Sl. 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	10	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:**

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working	Remarks of the Inspectors
1	Haemoglobinometer	20	20	Yes	
2	Haemocytometer	10	10	Yes	
3	Student's organ bath	1	2	Yes	

4	Sherington's rotating drum	1	1	Yes	
5	Frog board	0	5	Yes	
6	Tray (dissecting)	0	5	Yes	
7	Frontal writing lever	0	5	Yes	
8	Aeration tube	0	5	Yes	
9	Telethermometer	1	1	Yes	
10	Pole climbing apparatus	1	1	Yes	
11	Histamine chamber	1	1	Yes	
12	Simple lever	0	5	Yes	
13	Sterling heart lever	0	5	Yes	
14	Aerator	0	2	Yes	
15	Histological Slides	0	1	Yes	
16	Sphygmomanometer (B.P. apparatus)	5	5	Yes	
17	Stethoscope	5	5	Yes	
18	First aid equipment	0	1	Yes	
19	Contraceptive device	0	1	Yes	
20	Dissecting (surgical) instruments	0	1	Yes	
21	Balance for weighing small Animals	1	1	Yes	
22	Kymograph paper	0	1	Yes	
23	Actophotometer	1	1	Yes	
24	Analgesiometer	1	1	Yes	
25	Thermometer	0	10	Yes	
26	Plastic animal cage	0	5	Yes	
27	Double unit organ bath with thermostat	1	1	Yes	
28	Refrigerator	1	1	Yes	
29	Digital balance	1	1	Yes	
30	Charts	0	50	Yes	
31	Human skeleton	1	1	Yes	
32	Anatomical specimen (Heart, brain, eye, ear, reproductive system etc.,)	0	10	Yes	
33	Electro-convulsimeter	1	1	Yes	
34	Stop watch	0	5	Yes	
35	Clamp, boss heads, screw clips	0	1	Yes	
36	Syme's Cannula	0	5	Yes	

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

#### **Pharmacognosy Laboratory**

##### **Equipments:**

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working	Remarks of the Inspectors
1	Projection Microscope	1	25	Yes	
2	Charts (different types)	0	50	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:**

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working	Remarks of the Inspectors
1	Colorimeter	2	2	Yes	

2	Microscope	0	1	Yes	
3	Permanent slides (skin, kidney, pancreas, smooth muscle, liver etc..)	0	50	Yes	
4	Watch glass	0	25	Yes	
5	Centrifuge	1	1	Yes	
6	Biochemical reagents for analysis of normal and pathological constituents in urine and blood facilities	0	1	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	1	Yes	
13	Small disposable membrane filter for IV admixture filtration	0	1	Yes	
14	Laminar air flow bench	1	1	Yes	
15	Vacuum pump	1	1	Yes	
16	Oven	1	1	Yes	
17	Surgical dressing	0	1	Yes	
18	Incubator	1	1	Yes	
19	PH meter	1	1	Yes	
20	Disintegration test apparatus	1	1	Yes	
21	Hardness tester	1	1	Yes	
22	Centrifuge	1	1	Yes	
23	Magnetic stirrer	1	1	Yes	
24	Thermostatic bath	1	1	Yes	

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**

**Observations of the Inspectors:**

Compliance of the last recommendations by Inspectors

Specific obserations if not compiled

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**