ANNEXURE - "B"

(INSTITUTIONAL INFORMATION)

1. Particulars of Director / Dean / Principal: (Who so ever is Head of Training Centre)

Name: Dr. Niraj Uttamani Age: 56(Date of Birth) 27.02.1969

PG Degree	Subject	Year	Institution	University
Recognized / Not Recognized	MBBS	1992	Pandit JNM Medical College	Raipur
Recognized / Not Recognized	21.2	2001	NBE	Delhi
Recognized / Not Recognized	Cert. Critical Care	1997	Breach Candy Hospital	Mumbai

Teaching Experience

Designation	Institution	From	То	Total Exp.
Asst. Professor				
Asso. Professor/Reader				
Professor				
Any Other			Gran d Total	

2. Management/Society/Inst. Information:

	i) Name of the Society/Institution/	Lilavati Hospital & Research Centre				
	Training Centre /University Dept.:					
01	ii) Postal Address, with PIN:	A-791, Bandra Reclamation, Bandra West, Mumbai				
	iii) Contact Details:	Mob: 9869436379	Tele:022069318000			
		i) Public Trust Act 1950: E-6892				
		ii) Society's Registration Act.1860: E-6892				
02	Society/Institution/ Training Centre	iii) Year of establishment:1996				
	Registration Number and date:	iv) Copies of Registration, Consti				
		Memorandum of Association atta	ched? *Yes/No			
		Marked as Appendix 'A'				
	Hospital Information : (It is mandatory for Training					
03	Centre/applying Institute to have their					
	own functional Hospital as per norms)					
0.5	i) Name of the Hospital	Lilavati Hospital & Research Cen	tre			
	ii) Nursing Home Registration No.	761405739 Dated:29.03.1996				
	iii) Establishment Year	1996 - Mark as Appendix'B'				
	i) Name of the Training Centre /Institute	Lilavati Hospital & Research Centre	2			
	where course is to be conducted:					
	ii) Postal Address, with PIN: 400 050	16 1 0000 12 0270	T. I. 000 (001000			
	iii) Contact Details: 022 69318000	Mob: <u>9869436379</u> Tele: <u>022 6931800</u>				
	iv) E-mail ID: academics.lilavati@gmail.com					
	v) List of University approved	Name of the Course(s) 07 - Seven				
04	Fellowship/Certificate Course(s)	Approved Intake Capacity 07 - Seve				
	conducted / already running at	(ifnecessary Attach separate List				
	vi) Training Centre with Intake Capacity vi) Training Centre / Institute					
	willing/desirous to Start/Open	Name of the Course(s) Required Intake Capacity (if				
	Fellowship/Certificate Course(s)	Necessary Attach separate List)				
	(For New Opening Purpose only)	,				
	Affiliation Fees details: (Bank/DD no./	Paid Fees details Attached: *Ye	s/No (Pending Fees if			
05	date/amount/ NEFT/RTGS)	any;) (Annexure 2)	orrio.(1 chang 1 ccs, 11			

Many;) (Anno

Kranghyla

06	Financial position of the Society/ Institute in the preceding 03 years:	Audited Statements of Accounts for *Yes/No Mark as Appendix 'C'		
07	Budgetary provision for the FC/CC/DC for the next 03 years	i) 2024-25 - 3100000 ii) 2025-26- 3100000 iii) 2026-27 - 3100000 Mark as Appendix C.1		
	Management Resolution seeking Recognition of Institute for FC/CC/DC of MUHS, Nashik:	Resolution No: Chronic Pain Medicine Dated 08 th Nov 2014 Clinical Haematology Dated 08 th Nov 2014 GI & HPB Pathology Dated 04 th Oct 2018 Infectious Diseases Dated 17 th Aug 2018 Assisted Reproduction Techniques 25 th Nov 2021 Minimal Access Surgery – Gynecology 16 th March 2022 Body Imaging (CT & MRI of chest and Abdomen) Dated 5 th April 2023		
		Copy of Management Resolution attached? *Yes/No – Mark as Appendix 'D'		
	Other Information:			
	a) Land:	*Yes/No. If yes, then Area: <u>310300</u>		
	i) Whether the land is owned by the Applicant Institute/Training Centre/Trust:	Copy of land documents i.e. 7/12 extract, Property Card, etc. attached? *Yes/No Mark as Appendix 'E'		
09	ii) Whether the land is registered?	*Yes/No. If yes, Registration Number: E-6892 Dated At (Place): Mumbai Copy of Land Registration Certificate attached? *Yes/No. – Mark as Appendix 'F'		
	iii) Any loans, mortgage, etc. shown against the title of the land:	*Yes/No. If yes, amount of loan Rs. /mortgaged for Rs Copy of Loan/Mortgage Deed attached? *Yes/No. — Mark as Appendix G		
	b) Building: i) Total built-up area:	310300 sq. ft. Certified copy of Building Plan attached? *Yes/No		
		- Mark as Appendix 'H'		

3. Central Library

Total Number of Books in Library:- 1500

Books pertaining concerned fellowship subject: Available

Purchase of latest editions of concerned books in last 3 years: will be subscribed

Journals:

1	Journals	Total	concerned Fellowship subje	ect (Books)
2	Indian	11	Chronic Pain Medicine	Indian - 1
3	Foreign	14		Foreign – 1
			Clinical Haematology	Indian – 5
		11		Foreign – 5
			GI & HPB Pathology	Indian – List attached
				Foreign - List attached
			Infectious Diseases	Indian – 12
				Foreign – 12
			Assisted Reproduction	Indian – List attached
			Techniques	Foreign - List attached
			Minimal Access Surgery -	Indian - List attached

hard S:

S. Hharelein

Kroward

Gynecology	Foreign – List attached
Body Imaging CT & MRI	Indian - 01
of Chest and Abdomen	Foreign - 04

- Year / Month up to which latest Indian Journals available: 31st Dec 2025
- Year / Month up to which latest Foreign Journals available: 31st Dec 2025

Internet / Med pub / Photocopy facility:

available / notavailable

- Library opening times: 7am
- Reading facility out of routine library hours: available / notavailable

(Obtain list of books & journals duly signed by Dean)

4. Recreational facilities:

Available / Not available

- Play grounds Gymnasium
- 5. Hostel Accommodation:

Particular	UG		PG		Interns	
	Boys	Girls	Boys	Girls	Boys	Girls
No. of Rooms	-	-	17	09		
No. of Students	-	-	63	38		
Status of Cleanliness	-	-				

- 6. Residential accommodation for Staff / Paramedical staff : Available / Not Available
- 7. Ethical Committee (Constitution):

YES/NO

8. Medical Education Unit (Constitution): YES / NO Constituted on 01.07.2017

(Specify number of meetings held annually & minutes thereof)

9. Any other faculty specific information required:

(such as Herbal garden / PanchakarmaUnit/Pharmacy / Dental Chairs and Units/as per the requirement of concerned Course) Attach details)

NOT APPLICABLE

S. Darden

reamy krandhyh.