

# PHARMACY COUNCIL OF INDIA

Standard Inspection Format (S.I.F) for institutions conducting B. Pharm for 100 admsns.

(To be filled and submitted to PCI by an organization seeking approval of the Course / continuation of the approval)

(SIF-B-1)

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

<b>A – I .1</b> Name of the Institution: Complete Postal address: STD code Telephone No. Fax No. E-mail	<b>Ram-Eesh Institute of Vocational &amp; Technical Education, Deptt. of Pharmacy</b> 3, Knowledge Park-1, Kasna Road, Greater Noida, U.P-201310 0120-2322657 0120-2322656 <a href="mailto:info@rameeshinstitutions.org">info@rameeshinstitutions.org</a>
Year of Establishment	<b>1999</b>
Status of the course conducting body: Government / University / Autonomous / Aided / Private (Enclose copy of Registration documents of Society/Trust)	<b>Private (Enclosure No.1)</b>
<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:	<b>Rama-Eesh Charitable Trust</b> 6, DDA(SFS), Hauz Khaz, New Delhi-110016 011 26962505 0120-2322656 <a href="mailto:info@rameeshinstitutions.org">info@rameeshinstitutions.org</a> <a href="http://www.rameeshinstitutions.org">www.rameeshinstitutions.org</a>
<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	<b>Prof.(Dr.) Jainendra Jain, Principal</b> 3, Knowledge Park-1, Kasna Road, Greater Noida, U.P-201310 0120 0120-2322658  9212449829 0120-2322656 <a href="mailto:principalrit@rameesh.org">principalrit@rameesh.org</a>
<b>A – I .4</b> Name and Address of the Head of the Institution	<b>Prof.(Dr.) Jainendra Jain, Principal</b> 3, Knowledge Park-1, Kasna Road, Greater Noida, U.P-201310

Signature of the Head of the Institutions

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Signature of the Inspectors

**A –I. 5**

**FOR INSTITUTION SEEKING CONTINUATION OF APPROVAL**

**a. Details of Affiliation Fee Paid**

Name of the Course	Affiliation Fee paid up to	Receipt No	Dated	Remarks of the Inspectors
B. Pharm	2016-2017	D.D. No. 961793	15-06-2016	

**b. APPROVAL STATUS:**

(Enclosure No. 2)

Name of the Course	Approved up to	In take Approved and Admitted	PCI	STATE GOVERNMENT	UNIVERSITY	Remarks of the Inspectors
B. Pharm	2016-2017	<b>Approval Letter No and Date</b>	32-237/2014-PCI/54179-81 Dated 22-01-15		ए.के.टी.यू. / कुस.का. / स.वि. / 2016 / 6726 – 7347 Date: 07-06-2016 AICTE Northern/1-2809237774/2016/EOA Date: 25-04-2016	
		<b>Approved Intake</b>	<b>100</b>	<b>100</b>	<b>100</b>	
		<b>Actually Admitted</b>	<b>100</b>	<b>100</b>	<b>100</b>	

**c. STATUS OF APPLICATION**

(Enclosure No. 3)

COURSES INSPECTED FOR				
Faculty / Subject	Extension of Approval	Increase in Intake of Seats	Remarks	
			Current Intake	Proposed increase in Intake
B. Pharm	Yes	No	100	-

Note: Enclose relevant documents

**A –I. 6**

Whether other Educational Institutions/Courses are also being run by the Trust / Institution in the same Building If Yes, Give Details

Yes

No

**A – I. 6 a**

**Status of the Pharmacy Course:**

Independent Building	<input checked="" type="checkbox"/>
Wing of another college	<input type="checkbox"/>
Separate Campus	<input type="checkbox"/>
Multi Institutional Campus	<input type="checkbox"/>

Examining Authority :  
With complete postal  
Address, Telephone No.  
and STD Code.

The Registrar  
Dr. A. P. J. Abdul Kalam Technical University  
I.E.T. Campus, Sitapur Road, Lucknow, U.P.  
0522-2732193

Signature of the Head of the Institutions

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Signature of the Inspectors

## B - DETAILS OF THE INSTITUTION

<b>B –I .1</b> Name of the Principal		Prof.(Dr.) Jainendra Jain			
Qualification/ Experience	<b>Qualification*</b>		<b>Teaching Experience Required</b>	<b>Actual experience</b>	<b>Remarks of the Inspectors</b>
	M.Pharm	M.Pharm (Pharm. Chemistry)	15 years, out of which 5 years as Prof./HOD	Total Exp. 17.5 years	
	PhD	Ph.D	10 years, out of which at least 08 years as Asst. Prof.	Asst. Prof. - 8 Years 9 Months	

\* Documentary evidence should be provided

(Enclosure No. 4)

### 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. Pharm	11-02-2014 & 12-02-2014	No Deficiency	NA	Yes

\* Enclose Documents

(Enclosure No. 5)

### B –I .3

<b>Status of Governing Council:</b>	<b>Trust</b>
<b>Details of the Governing Body</b>	<b>√ Enclosed / Not Enclosed</b> (Enclosure No. 6)
<b>Minutes of the last Governing council Meeting</b>	<b>√ Enclosed / Not Enclosed</b> (Enclosure No. 7)

### B –I .4

Pay Scales:

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

### B –I .5

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

ACADEMIC YEAR	Year 2014-15	Year 2015-16	Year 2016-17
Sanctioned	100	100	100
No. of Admissions	82	88	100
Unfilled Seats	15 (due to neutralization of admissions)	15 (due to neutralization of admissions)	Nil
No. of Excess Admissions	-	-	-

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

<b>ACADEMIC YEAR</b>	<b>Year 2013-14</b>	<b>Year 2014-15</b>	<b>Year 2015-16</b>
<b>1<sup>st</sup> year</b>	74.19	92.13	94.56
<b>2<sup>nd</sup> year</b>	98.14	95.12	96.00
<b>3<sup>rd</sup> year</b>	93.02	73.07	100
<b>Final year</b>	90.32	100	100
<b>Pass % (Final Year)</b>	90.32	100	100

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

Whether college has NSS Unit (Yes/No)? If no give reasons	Under Process
NSS Programme Officer's Name	Mr. Hemant Kumar
Programme conducted (mention details)	-
Whether students participating in University level cultural activities / Co- curricular/sports activities	√Yes/No
Physical Instructor	√ Available / Not available
Sports Ground	Individual / Shared √

**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**

**(Enclosure No. 8)**

<b>Receipts</b>			<b>Expenditure</b>			<b>Remarks of the Inspectors</b>
<b>Sl. No.</b>	<b>Particulars</b>	<b>Amount (in Rs. Lacs)</b>	<b>Sl. No.</b>	<b>Particulars</b>	<b>Amount (in Rs. Lacs)</b>	
<b>1.</b>	<b>Grants Government Others</b>	<b>1.00</b>	<b>CAPITAL EXPENDITURE</b>			
<b>2.</b>	<b>Tuition Fee</b>	<b>192.49</b>	<b>1.</b>	<b>Building</b>	<b>-</b>	
<b>3.</b>	<b>Library Fee</b>	<b>-</b>	<b>2.</b>	<b>Equipment</b>	<b>6.48</b>	
<b>4.</b>	<b>Sports Fee</b>	<b>-</b>	<b>3.</b>	<b>Others</b>	<b>0.64</b>	
<b>5.</b>	<b>Union Fee</b>	<b>-</b>	<b>REVENUE EXPENDITURE</b>			
<b>6.</b>	<b>Others</b>	<b>18.49</b>	<b>1</b>	<b>Salary</b>	<b>100.91</b>	
			<b>2.</b>	<b>MAINTENANCE EXPENDITURE</b>		
				<b>i</b>	<b>College</b>	<b>6.78</b>
				<b>ii</b>	<b>Others</b>	<b>0.79</b>
			<b>3.</b>	<b>University Fee (If any)</b>	<b>15.02</b>	
			<b>4.</b>	<b>Apex Bodies Fee</b>	<b>4.51</b>	
			<b>5.</b>	<b>Government Fee</b>	<b>0.03</b>	
			<b>6.</b>	<b>Deposit held by the College</b>	<b>11.62</b>	
			<b>7.</b>	<b>Others</b>	<b>16.88</b>	
			<b>8.</b>	<b>Misc.Expenditure</b>	<b>81.36</b>	
<b>Total</b>		<b>211.98</b>	<b>Total</b>			
					<b>237.90</b>	

**Note: Enclose relevant documents**

**Signature of the Head of the Institutions**

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**Signature of the Inspectors**

## PART- II PHYSICAL INFRASTRUCTURE

1. a. Availability of Land (B. Pharm courses) : **√ Available / Not Available**  
 a) 2.5 acres District HQ/Corporation/Municipality limit 2.5 Acres  
 b) 0.5 acre for City / Metros  
 b. Building : **√ Own/Rented/Leased**  
 c. Land Details to be in name of Trust and Society **(Enclosure No. 9)**

Records to be enclosed

Sale deed : **√ Enclosed/Not available**

d. Building<sup>†</sup>:

i) Approved Building plan, to be Enclosed : **√ Enclosed/Not available (Enclosure No. 10)**

e. Total Built Area of the college building in Sq.mts : Built up Area

**5200 Sq.mts**

Amenities and Circulation Area

**1344 Sq. mts**

### 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 Inspectors
B. Pharm	06	08	6 of 90 Sq.mts Or 4 of 150 sq.mts. with public address System.	625Sq.mts	

(\*To accommodate 100 students).

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

Sl. No.	Infrastructure for	Requirement as per Norms	Available No. & Area in Sq mts	Remarks/ Deficiency
1	Laboratory Area for B.Pharm Course (12 Labs)	90 Sq .mts x n (n=10) - Including Preparation room - Desirable 75 Sq. mts – Essential	(12 Labs) 1094 Sq.mts	
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 (Microbiology)  10 Laboratories *	(3) 228 Sq.mts (2) 152 Sq.mts (1) 76 Sq.mts (2) 176 Sq.mts (1) 76 Sq.mts (1) 105 Sq.mts  (10) 913 Sq.mts	
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)	100 Sq.mts	
4	Area of the Machine Room	80-100 Sq.mts	(1) 86 Sq.mts	
5	Central Instrumentation Room	80 Sq.mts with A/ C	(01) 101 Sq.mts with A/C	
6	Store Room – I	1 (Area 100 Sq mts)	100 Sq.mts	
7	Store Room - II (For Inflammable chemicals)	1 (Area 20 Sq mts)	20 Sq.mts	

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

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† **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
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	30.Sq.mts	
2	Office – I - Establishment	01	60 Sq. mts	01	38 Sq.mts	
3	Office – II - Academics			01	25 Sq.mts	
4	Confidential Room			01	20 Sq.mts	

**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	90 Sq.mts	
2	Faculty Rooms for B.Pharm course		10 Sq mts x n (n=No of teachers)	08	240 Sq.mts	

**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	83 Sq.mts	
2	Library	01	150 Sq mts	01	214 Sq.mts	
3	Museum	01	50 Sq mts (May be attached to the Pharmacognosy lab)	01	50 Sq.mts	
4	Auditorium / Multi Purpose Hall (Desirable)	01	250 – 300 seating capacity	01	315 Sq.mts	
5	Seminar Hall	01		01	168 Sq.mts	
6	Herbal Garden (Desirable)	01	Adequate Number of Medicinal Plants	01	500 Sq.mts	

### 7. Student 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	Girl's Common Room (Essential)	01	60 Sq.mts	01	76 Sq.mts	
2	Boy's Common Room (Essential)	01	60 Sq.mts	01	75 Sq.mts	
3	Toilet Blocks for Boys	01	24 Sq.mts	04	75 Sq.mts	
4	Toilet Blocks for Girls	01	24 Sq.mts	04	75 Sq.mts	
5	Drinking Water facility – Water Cooler (Essential).	01		04	30 Sq.mts	
6	Boy's Hostel (Desirable)	01	9 Sq .mts / Room Single occupancy	01	2971 Sq.mts	
7	Girl's Hostel (Desirable)	01	9 Sq .mts / Room (single occupancy) 20 Sq mts / Room (triple occupancy)	01	3528 Sq.mts	
8	Power Backup Provision (Desirable)	01		02	-	

### 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)	02	152 Sq.mts	
Computer (Latest Configuration)	1 system for every 10 students	65		
Printers	1 printer for every 10 computers	08		
Multi Media Projector	01	7		
Generator (5KVA)	01	02(82.5 KVA & 160 KVA)		



### 9. Amenities (Desirable)

Name	Requirement as per Norms in area	Available		Not Available	Remarks / Deficiency
		No.	Area in Sq. mts		
Principal quarters	80 Sq. mts	01	150 Sq. mts		
Staff quarters	16 x 80 Sq. mts	08	280 Sq.mts		
Canteen	100 Sq. mts	01	150 Sq.mts		
Parking Area for staff and students		04	2000 Sq.mts		
Bank Extension Counter		-	-		
Co operative Stores		-	-		
Guest House	80 Sq. mts	-	90 Sq. mts		
Transport Facilities for students		-	Public Transport		
Medical Facility (First Aid)		01	15 Sq. mts		

### 10. A. Library books and periodicals

(Enclosure No. 11)

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	2000 adequate coverage of a large number of standard text books and titles in all disciplines of pharmacy	2166	10202	
2	Annual addition of books		150 to 200 books per year	57	352	
3	Periodicals Hard copies / online		10 National/International periodicals	68	11 E-Joun.-1 Delnet	
4	CDS		Adequate Nos	15	128	
5	Internet Browsing Facility		Yes/No (Minimum ten computers)		Yes	
6	Reprographic Facilities: Photo Copier Fax Scanner		01 01 01		01 01 01	
7	Library Automation and Computerized System		Yes			
8	Library Timings		9:30 A.M– 5:30 P.M			

### 10.B. Library Staff:

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

Signature of the Head of the Institutions

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Signature of the Inspectors

## PART III ACADEMIC REQUIREMENTS

### Course Curriculum:

**1. Student Staff Ratio: Theory 60:1      Practicals 20:1      Remarks of the Inspectors**

(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	Practicals	Remarks of the Inspectors
B.Pharm	60:1	30:2	

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

### **3. Date of Commencement of Semester / sessions: 2015-2016**

	Commencement	Completion		Commencement	Completion
B.Pharm I	06/08/2015	28/11/2015	B.Pharm II	18/01/2016	07/05/2016
B.Pharm III	26/07/2015	28/11/2015	B.Pharm IV	18/01/2016	07/05/2016
B.Pharm V	26/07/2015	28/11/2015	B.Pharm VI	18/01/2016	07/05/2016
B.Pharm VII	26/07/2015	28/11/2015	B.Pharm VIII	18/01/2016	07/05/2016

**4. Vacation:**      Summer:       Winter:

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

Odd Sem. & Even Sem.	182 Days
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### **6. Time Table:**

Time Table for B. Pharm course Enclosed      Yes       No       (Enclosure No. 12)

### **7. Whether the prescribed numbers of classes are being conducted as per university norms** I B. Pharm:      (Enclosure No. 13)

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	
1	2	3	4	5		

### **II B. Pharm:**

Subject	No of Theory Classes	Practicals	Remarks of the Inspectors

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

### 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	
<b>1</b>						

### 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	
<b>1</b>						

8. Whether Tutorials are being conducted (if any, as per university norms) Yes  No

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

A.

Name of the Event	Year 2013-14	Year 2014-2015	Year 2015-2016
Guest Lectures	07	04	03
Seminars	04	01	04
Workshops	01	02	01
Symposia	-	-	-

B. Papers Presented / Published during last three years

	Year 2013-14		Year 2014-2015		Year 2015-2016	
	National	International	National	International	National	International
Published	03	03	08	12	4	4
Presented	-	-	-	-	1	1

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

Yes  No

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(Enclosure No. 14)

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							
II B. Pharm							
III B. Pharm							
IV B. Pharm							

11. Whether Evaluation of the internal assessments is Fair Yes

No

Class (2015-16)	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%		Remarks of the Inspectors
	Th	Pr	Th	Pr	Th	Pr	Th	Pr	
I B.Pharm	56	68	34	24	02	00	01	01	
II B.Pharm	31	35	45	41	02	02	00	00	
III B.Pharm	29	56	51	25	01	00	00	00	
IV B.Pharm	26	29	24	21	00	00	00	00	

12. Work load of Faculty members for B. Pharm

(Enclosure No. 15)

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 2013-14	Year 2014-2015	Year 2015-2016
No. of Students Appeared	15	05	08
No. of Students Qualified	08	01	01
Percentage	53%	20%	12.5%

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	02
Industrial Tour	01
Industrial Training	B.Pharm III Year
No. of Resource Persons from the Industry for Guest Lectures	08
No. of Collaboration projects with Industry	01

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

<b>Year</b>	<b>Year 2013-14</b>	<b>Year 2014-2015</b>	<b>Year 2015-2016</b>
<b>No. of students appeared for campus interview</b>	<b>50</b>	<b>32</b>	<b>38</b>
<b>% Placed</b>	<b>70%</b>	<b>75%</b>	<b>71%</b>

**16. Whether Professional Society Activities are Conducted (Enclose Details)  
(ISTE, IPA, APTI, ICTA and Related Societies)**

<b>Yes/</b>	<b>No</b>
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**PART IV - PERSONNEL**

**TEACHING STAFF:**

**(Enclosure No. 16)**

**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			

**2. Qualification and number of Staff Members**

Qualification		
M. Pharm	PhD	Others
17	04	03

**3. Teaching Staff required year wise exclusively for B.Pharm for intake of 100 Students.**

	No. of staff required for 4 Years	Available 2016-2017
1. Pharmaceutical Chemistry	7	06
2. Pharmaceutical Analysis	2	00
3. Pharmacology	4	02
4. Pharmacognosy	4	03
5. Pharmaceutics	6	07
6. Pharmacy Practice	1	02
7. Principal	1	01
Total	25	21
Part time teaching Staff	3	03
Remarks of the Inspection Team		
<b>(100 in I<sup>st</sup>+ 88 in II<sup>nd</sup>+ 78 in III<sup>rd</sup>+ 85 in IV<sup>th</sup> year ) Total 351 intake</b>		

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

**4. Staff Pattern for B. Pharm courses Department wise / Division wise:**

Professor: Asst. Professor: Lecturer

Department / Division	Name of the post	For strength of 100 students for 4 Years	Provided by the institution for 2016-2017	Remarks of inspection team
Department of Pharmaceutics	Professor	1		
	Asst. Professor	2	07 (1 Asso. Prof)	
	Lecturer	3		
Department of Pharmaceutical Chemistry	Professor	1	01	
	Asst. Professor	3	06(1 Asso. Prof)	
	Lecturer	3		
Department of Pharmacology	Professor	1		
	Asst. Professor	2	02	
	Lecturer	1		
Department of Pharmacognosy	Professor	1		

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**Signature of the Inspectors**

	Asst. Professor	1	03 (01 Asso. Prof)
	Lecturer	2	
Department of Pharmacy Practice	Asst. Professor	1	02
	Lecturer	1	
Department of Pharmaceutical Analysis	Asst. Professor	1	00
	Lecturer	1	00

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

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

### 6. Details of Faculty Retention for:

Name of Faculty Member	Period	%
	<b>Duration of 15 yrs. and above</b>	<b>NA</b>
	<b>Duration of 10 yrs. and above</b>	<b>NA</b>
Mrs. Chitra Gupta, Mr. Pankaj Kumar, Dr. Jainendra Jain, Mrs. Reema Sinha, Mr. Partha Chowdhury, Mr. Niyaz Alam, Mr. Alok Bhardwaj, Mr Mukesh Gaur	<b>Duration of 5 yrs. and above</b>	<b>33.3%</b>
	<b>Less than 5 yrs.</b>	<b>66.6%</b>
Mr. Quaisul Hoda, Mr. Azhar Danish Khan, Mrs. Hema B, Mr. Ayan Giri, Mr. Lokesh Sharma, Mr. Vijay Vikram Singh, Ms. Vandana, Mr. Lubhan Singh, Mr. Krishan K. Verma, Mr. Rahul Kaushik, Mrs. Deepali, Dr. Pallavi Rai, Mr. Hemant Kumar, Mr. Sheodutt Maurya, Dr. Smriti Khatri, Dr. Sandeep Bansal,		

### 8. Details of Faculty Turnover:

Name of Faculty Member	Period	More than 50%	50%	25%	Less than 25%
	<b>% of faculty retained in last 3 yrs</b>		√		
Mrs. Chitra Gupta	09 Years				
Mr. Pankaj Kumar	08 Years				
Dr. Jainendra Jain	07.10 Years				
Mrs. Reema Sinha	07.10 Years				
Mr. Partha Chowdhury	07 Years				
Mr. Niyaz Alam	06 Years				
Mr. Alok Bhardwaj	06 Years				
Mrs. Hema B	03 Years				
Mr. Azhar Danish Khan	03 Years				
Mr. Quaisul Hoda	03 Years				
Mr. Ayan Giri	03 Years				
Mr. Mukesh Gaur	07 Years				

**8. Number of Non-teaching staff available for B. Pharm course for intake of 100 Students:**

Sl. No.	Designation	Required (Minimum)	Required Qualification	Available		Remarks of the Inspection team
				Number	Qualification	
1	Laboratory Technician	1 for each Dept	D. Pharm	06	01 (D.Pharm) 04(B.Sc)	
2	Laboratory Assistants / Attenders	1 for each Lab (minimum)	SSLC	08	SSLC	
3	Office Superintendent	1	Degree	01	B.B.A	
4	Accountant	1	Degree	01	B.Com	
5	Store keeper	1	D. Pharm/ Degree	01	B.Sc	
6	Computer Data Operator	1	BCA / Graduate with Computer Course	01	B.A., Diploma in Hardware & Networking	
7	Office Staff I	1	Degree	01	B.A	
8	Office Staff II	2	Degree	02	B.A., M.A	
9	Peon	2	SSLC	02		
10	Cleaning personnel	Adequate	---	Adequate		
11	Gardener	Adequate	---	Adequate		



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

(Enclosure No. 17)

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					

10. Whether facilities for Research / Higher studies are provided to the faculty? Yes

(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):

(Enclosure No. 18)

Sl No	Name	Designation	Qualification	Date of Joining	Experience	Signature	Remarks of the Inspectors

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	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	Yes		

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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)**

SI	Expenditure in Rs. 2012-2013 In Rs. Lacs			Expenditure in Rs. 2013-2014 In Rs. Lacs			Expenditure in Rs. 2014-2015 In Rs. Lacs			Remarks of the Inspectors*
No.	Total budget sanctioned	Recurring	Non Recurring	Total budget sanctioned	Recurring	Non Recurring	Total budget sanctioned	Recurring	Non Recurring	
	178.00	158.00	20.00	234.00	220.00	17.00	233.42	226.30	7.12	

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

SI	Expenditure in Rs. 2012-2013 In Rs. Lacs			Expenditure in Rs. 2013-2014 In Rs. Lacs			Expenditure in Rs. 2014-2015 In Rs. Lacs			Remarks of the Inspectors*
No.	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	
	Chemicals	3.00	2.69	Chemicals	6.00	6.00	Chemicals	4.00	3.99	
	Glassware			Glassware			Glassware			

**3. Total amount spent on equipments for the past three years:**

SI	Expenditure in Rs. 2012-2013 In Rs. Lacs			Expenditure in Rs. 2013-2014 In Rs. Lacs			Expenditure in Rs. 2014-2015 In Rs. Lacs			Remarks of the Inspectors*
No.	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	
	Equipment	6.00	6.09	Equipment	1.50	1.05	Equipment	5.00	5.83	

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

Sl No.	Expenditure in Rs. 2012-2013 In Rs. Lacs			Expenditure in Rs. 2013-2014 In Rs. Lacs			Expenditure in Rs. 2014-2015 In Rs. Lacs			Remarks of the Inspectors*
	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	
<b>1</b>	<b>Books</b>	<b>1.00</b>	<b>1.05</b>	<b>Books</b>	<b>1.00</b>	<b>0.98</b>	<b>Books</b>	<b>0.75</b>	<b>0.64</b>	
<b>2</b>	<b>Journals</b>	<b>1.00</b>	<b>1.07</b>	<b>Journals</b>	<b>1.00</b>	<b>0.69</b>	<b>Journals</b>	<b>0.75</b>	<b>0.67</b>	

\*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	20	20	Yes	
2	Haemocytometer with Micropipettes	20	20	Yes	
3	Sahli's haemocytometer	20	40	Yes	
4	Hutchinson's spirometer	01	01	Yes	
5	Spygmomanometer	10	16	Yes	
6	Stethoscope	10	13	Yes	
7	Permanent Slides for various tissues	One pair of each tissue Organs and endocrine glands One slide of each organ system	41	Yes	
8	Models for various organs	One model of each organ system	19	Yes	
9	Specimen for various organs and systems	One model for each organ system	07	Yes	
10	Skeleton and bones	One set of skeleton and one spare bone	01	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	01	Yes	
18	Physical /Chemical Balance	01	01	Yes	
19	Sherrington's Kymograph Machine / Polyrite	10	10	Yes	
20	Sherrington Drum	10	10	Yes	
21	Perspex bath assembly (single unit)	10	10	Yes	
22	Aerators	10	28	Yes	

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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	02	Yes	
28	Pole climbing apparatus	01	01	Yes	
29	Analgesiometer (Eddy's hot plate and radiant heat methods)	01	02	Yes	
30	Convulsiometer	01	01	Yes	
31	Plethysmograph	01	01	Yes	
32	Digital pH meter	01	01	Yes	

**Apparatus:**

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Folin-Wu tubes	60	80	Yes	
2	Dissection Tray and Boards	10	22	Yes	
3	Haemostatic artery forceps	10	10	Yes	
4	Hypodermic syringes and needles of size 15,24,26G	10	30	Yes	
5	Levers, cannulae	20	30	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	20	20	Yes	
2	Digital Balance	02	02	Yes	
3	Autoclave	02	02	Yes	
4	Hot air oven	02	03	Yes	
5	B.O.D. incubator	01	01	Yes	
6	Refrigerator	01	01	Yes	
7	Laminar air flow	01	01	Yes	
8	Colony counter	02	02	Yes	
9	Zone reader	01	01	Yes	

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10	Digital pH meter	01	01	Yes	
11	Sterility testing unit	01	01	Yes	
12	Camera Lucida	20	20	Yes	
13	Eye piece micrometer	20	20	Yes	
14	Incinerator	01	01	Yes	
15	Moisture balance	01	01	Yes	
16	Heating mantle	20	21	Yes	
17	Flourimeter	01	01	Yes	
18	Vacuum pump	02	02	Yes	
19	Micropipettes (Single and multi channeled)	05	15	Yes	
20	Micro Centrifuge	01	02	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	80	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	02	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	03	Yes	
3	Refrigerator	01	01	Yes	
4	Analytical Balances for demonstration	05	10	Yes	
5	Digital balance 10mg sensitivity	10	10	Yes	
6	Digital Balance (1mg sensitivity)	01	01	Yes	
7	Suction pumps	06	06	Yes	
8	Muffle Furnace	01	01	Yes	
9	Mechanical Stirrers	10	10	Yes	
10	Magnetic Stirrers with Thermostat	10	10	Yes	

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11	Vacuum Pump	01	01	Yes	
12	Digital pH meter	01	01	Yes	
13	Microwave Oven	02	02	Yes	

**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	20	Yes	
3	Reflux flask and condenser double / triple necked	20	30	Yes	
4	Burettes	100	130	Yes	
5	Arsenic Limit Test Apparatus	25	30	Yes	
6	Nessler's Cylinders	50	50	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	20	15	Yes	
2	Homogenizer	10	05	Yes	
3	Digital balance	05	05	Yes	
4	Microscopes	10	10	Yes	
5	Stage and eye piece micrometers	15	15	Yes	
6	Brookfield's viscometer	01	01	Yes	
7	Tray dryer	01	01	Yes	
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	05	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	05	Yes	

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17	Capsule filling machine	01	02	Yes	
18	Ampoule washing machine	01	01	Yes	
19	Ampoule filling and sealing machine	01	01	Yes	
20	Tablet disintegration test apparatus IP	02	02	Yes	
21	Tablet dissolution test apparatus IP	01	05	Yes	
22	Monsanto's hardness tester	02	02	Yes	
23	Pfizer type hardness tester	01	02	Yes	
24	Friability test apparatus	01	01	Yes	
25	Clarity test apparatus	01	01	Yes	
26	Ointment filling machine	01	01	Yes	
27	Collapsible tube crimping machine	01	02	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	02	Yes	
31	All purpose equipment with all accessories	01	01	Yes	
32	Aseptic Cabinet	01	01	Yes	
33	BOD Incubator	02	02	Yes	
34	Bottle washing Machine	01	01	Yes	
35	Bottle Sealing Machine	01	01	Yes	
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	02	Yes	
40	Hot Plate	02	02	Yes	
41	Humidity Control Oven	01	01	Yes	
42	Liquid Filling Machine	01	01	Yes	
43	Mechanical stirrer with speed regulator	02	02	Yes	
44	Precision Melting point Apparatus	01	03	Yes	
45	Distillation Unit	01	01	Yes	

**Apparatus:**

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Ostwald's viscometer	20	50	Yes	
2	Stalagmometer	20	50	Yes	
3	Desiccator*	10	10	Yes	

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4	Suppository moulds	20	50	Yes	
5	Buchner Funnels (Small, medium, large)	05 each	20	Yes	
6	Filtration assembly	01	01	Yes	
7	Permeability Cups	05	05	Yes	
8	Andreason's Pipette	05	05	Yes	
9	Lipstick moulds	10	10	Yes	

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

#### **PHARMACEUTICAL BIOTECHNOLOGY**

<b>Sl. No.</b>	<b>Name</b>	<b>Minimum required Nos.</b>	<b>Available Nos.</b>	<b>Working Yes / No</b>	<b>Remarks of the Inspectors</b>
1	Orbital shaker incubator	01	01	Yes	
2	Lyophilizer (Desirable)	01	-		
3	Gel Electrophoresis (Vertical and Horizontal)	01	01	Yes	
4	Phase contrast/Trinocular Microscope	01	-		
5	Refrigerated Centrifuge	01	01	Yes	
6	Fermenters of different capacity (Desirable)	01	-		
7	Tissue culture station	01	-		
8	Laminar airflow unit	01	01	Yes	
9	Diagnostic kits to identify infectious agents	01	05	Yes	
10	Rheometer	01	01	Yes	
11	Viscometer	01	25	Yes	
12	Micropipettes (single and multi channeled)	01 each	13	Yes	
13	Sonicator	01	01	Yes	
14	Respinometer	01	01	Yes	
15	BOD Incubator	01	01	Yes	
16	Paper Electrophoresis Unit	01	01	Yes	
17	Micro Centrifuge	01	01	Yes	
18	Incubator water bath	01	01	Yes	
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.**

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**CENTRAL INSTRUMENTATION ROOM:**

<b>Sl. No.</b>	<b>Name</b>	<b>Minimum required Nos.</b>	<b>Available Nos.</b>	<b>Working Yes / No</b>	<b>Remarks of the Inspectors</b>
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	02	Yes	
6	Nephelo Turbidity meter	01	01	Yes	
7	Flame Photometer	01	01	Yes	
8	Potentiometer	01	01	Yes	
9	Conductivity meter	01	02	Yes	
10	Fourier Transform Infra Red Spectrometer (Desirable)	01	01	Yes	
11	HPLC	01	02	Yes	
12	HPTLC (Desirable)	01	-		
13	Atomic Absorption and Emission spectrophotometer (Desirable)	01	-		
14	Biochemistry Analyzer (Desirable)	01	01	Yes	
15	Carbon, Hydrogen, Nitrogen Analyzer (Desirable)	01	-		
16	Deep Freezer (Desirable)	01	01	Yes	
17	Ion- Exchanger	01	01	Yes	
18	Lyophilizer (Desirable)	01	-		

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**Observation of the Inspectors:**

**Compliance of the last recommendations by Inspectors**

**Specific observations if not complied**

**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**

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**Signature of the Inspectors**