

# PHARMACY COUNCIL OF INDIA

Standard Inspection Format (S.I.F) for institutions conducting D. Pharm course

(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.  
(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	Sai College of Pharmacy Sikti, Khawajahapur, Distt-Mau, 275101, (U.P) 0547-2536042 <u>Corresponding Address</u> Akhilesh Kumar Rai, Manish Medical, Near New District Hospital, Narai Bondh, Distt-Mau, 275101, (U.P) akhileshprakashmau@gmail.com
Year of starting of the course	2018-2019
Status of the course conducting body: Government / University / Autonomous / Aided / Private (Enclose copy of Registration documents of Society/Trust)	Private Trust
<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:	Shree Sai JansevaNyas Trust Vill and P.o – Sahraoj, Distt-Mau, (U.P) 0547 2536042
<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	Akhilesh Kumar Rai, Manish Medical Near New District Hospital, NaraiBondh Distt-Mau, 275101, (U.P)  9839612875 8115947730 scp.002017@gmail.com
<b>A - I. 4</b> Name and Address of the Head of the Institution	Dr. V. P. Dubey Manish Medical, Narai Bondh, Mau, 275101, (U.P)
<b>A - I. 4 a)</b> Whether the Jan Aushadhi Medical Store has been opened by your institution	Yes, prosposed

Signature of the Head of the Institution

Signature of the Inspectors



A-I.5

**FOR INSTITUTION SEEKING CONTINUATION OF APPROVAL**

**a. Deta of Affiliation Fee Paid**

1. Inspection fee paid: Rs 25,000/-
  2. Affiliation feepaid:Rs 50,000/-
- Total fee paid:Rs 75,000/-

Name of the Course	Affiliation Fee paid up to	Receipt No	Dated
D. Pharm	2018-2019	003966	21-08-2017

State Bank of India D.D No- 003966  
Dated 21-08-2017 payable at New Delhi

**b. APPROVAL STATUS:**

Name of the Course	Approved up to	Intake Approved and Admitted	PCI	STATE GOVERNMENT	Remarks of the Inspectors
D. Pharm		Approval Letter No and Date Approved Intake Actually Admitted		Approved	

**c. STATUS OF APPLICATION**

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

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  No

A-I.6a

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: Board of Technical Education,  
With complete postal Guru Govind Singh Marg  
Address, Telephone No. Bans mandi chauraha, Charbagh,  
and STD Code. Lucknow, U.P-226001

Signature of the Head of the Institution

Signature of the Inspectors



**B - DETAILS OF THE INSTITUTION (Annexure- IV)**

<b>B-I.1</b> Name of the Principal		Dr. V. P. Dubey			
Qualification/ Experience	Qualification*		Teaching Experience Required	Actual experience	Remarks of the Inspectors
	M. Pharm		05 years	7 years	
	PhD (Desirable)		02 years		

\* Documentary evidence should be provided

**B-I.2**

For institution seeking continuation of approval

Course	Date of last Inspection	Remarks of the Previous Inspection Report	Complied / Not Complied	Intake reduced/Stopped in the last 03 years*
D. Pharm	N.A	N.A	N.A	N.A

**B-I.3**

Pay Scales:N.A for proposed Institute

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

**B-I.4**

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

ACADEMIC YEAR	200-	200-	200-
Sanctioned			
No. of Admissions			
Unfilled Seats			
No. of Excess Admissions	N.A	N.A	N.A

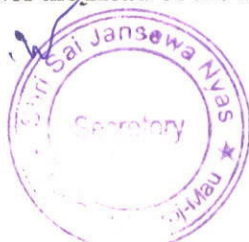
**B-I.5**

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

ACADEMIC YEAR	Year 200-	Year 200-	Year 200-
D. Pharm	N.A	N.A	N.A

Signature of the Head of the Institution

Signature of the Inspectors



B - II

**Co - Curricular Activities / Sports Activities**

Whether college has NSS Unit (Yes/No)? If no give reasons	N.A
NSS Programme Officer's Name	N.A
Programme conducted (mention details)	N.A
Whether students participating in University level cultural activities / Co- curricular/sports activities	N.A
Physical Instructor	Available / N.A(Under Recruitment)
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)

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	N.A	CAPITAL EXPENDITURE			
2.	Tuition Fee	N.A	1.	Building	1,07,00,000/-	
3.	Library Fee	N.A	2.	Equipment	15,88,000/-	
4.	Sports Fee	N.A	3.	Others	9,80,000/-	
5.	Union Fee	N.A	REVENUE EXPENDITURE			
6.	Others	N.A	1.	Salary	N.A	
			2.	MAINTENANCE EXPENDITURE		
				i	College	N.A
				ii	Others	N.A
			3.	University Fee (If any)	N.A	
			4.	Apex Bodies Fee	N.A	
			5.	Government Fee	N.A	
			6.	Deposit held by the College	N.A	
			7.	Others	N.A	
			8.	Misc. Expenditure	N.A	
				<b>Total</b>	<b>13268000.00</b>	
	<b>Total</b>					

Note: Enclose relevant documents

Signature of the Head of the Institution



Signature of the Inspectors

**PART- II PHYSICAL INFRASTRUCTURE**

1.a. Building : **Own**

b. Land:

i) Leased or own : **2 Acre**

Sale / Agreement deed (records to be enclosed) : **✓Enclosed**

c. Building:

i) Leased/Rented † (Record to be enclosed) :

ii) If Own (Approved Building plan & sale deed to be enclosed) : **✓Enclosed**

d. Total Area of the college building in Sq.mts : Built up Area 1796 m<sup>2</sup>

Amenities and Circulation Area 17069 m<sup>2</sup>

**2. Class rooms:**

**Total Number of Class rooms provided**

Class	Required	Available	Required Area * for each class room	Available Area in Sq. mts	Remarks of the Inspectors
D. Pharm	02		90 Sq. mts	90.02 x 2m <sup>2</sup>	

(\* To accommodate 60 students)

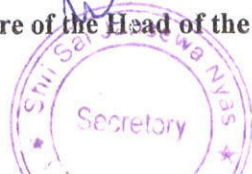
**3. Laboratory requirement**

Sl. No.	Name of Infrastructure	Requirement as per Norms	Available		Remarks/ Deficiency
			No.	Area in Sq. mts	
1	Laboratory Area for D.Pharm Course	50 Sqmts x n (n=05)			
2	Pharmaceutics Pharmaceutical Chemistry Physiology and Pharmacology Pharmacy Practice Pharmacognosy <b>Total no. of Labs for D. Pharm Course</b>  *Animal House	01 Laboratory  01 Laboratory 01 Laboratory 01 Laboratory <b>05 Laboratories</b> 01 (10 sq.mts)	1  1 1 1  1	54 m <sup>2</sup>  54 m <sup>2</sup> 54 m <sup>2</sup> 56 m <sup>2</sup> 54 m <sup>2</sup>  21 m <sup>2</sup>	
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)	5	11 x 3 = 33m <sup>2</sup>	
4	Area of the Machine Room	100 Sqmts	1	112 m <sup>2</sup>	
5	Aseptic Room	25 Sqmts	1	43.9m <sup>2</sup>	
6	Store Room – I	1 (Area 20 Sqmts)	1	21.19m <sup>2</sup>	
7	Store Room – II (For Inflammable chemicals)	1 (Area 20 Sqmts)	1	21.09m <sup>2</sup>	

\* Not required if computer simulated software are available

Signature of the Head of the Institution

Signature of the Inspectors



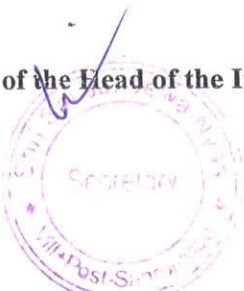
The Institutions will not be permitted to run the courses in rented building on or after 31.12.2008

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 workbenches 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	20 Sqmts	1	23.69m <sup>2</sup>	
2	Office – I Including Confidential Room	01	40 Sqmts	1	40.5m <sup>2</sup>	
3	Staff / Faculty Rooms for D. Pharm course	01	30 Sqmts	3	23.69m <sup>2</sup> x3	
4	Library with computer and reprographic facilities	01	100 Sqmts	1	112.31m <sup>2</sup>	
5	Museum	01	30 Sqmts (May be attached to the Pharmacognosy Lab)	1	43.9m <sup>2</sup>	
6	Auditorium / Multi Purpose Hall (Desirable)	01	250 – 300 seating capacity			
7	Herbal Garden (Desirable)	01	Adequate Number of Medicinal Plants			

Signature of the Head of the Institution



Signature of the Inspectors

5. Student Facilities:

S' No.	Name of infrastructure	Requirement in number	Requirement in area	Available		Remarks/ Deficiency
				No.	Area in Sq. mts	
1	Girl's Common Room (Essential)	01	40 Sqmts	1	43.9m <sup>2</sup>	
2	Boy's Common Room (Essential)	01	40 Sqmts	1	43.9m <sup>2</sup>	
3	Toilet Blocks for Boys	01	25 Sqmts	3	29×3m <sup>2</sup>	
4	Toilet Blocks for Girls	01	25 Sqmts	3	29×3m <sup>2</sup>	
5	Canteen (Desirable)	01	100 Sqmts		N.A	
6	Drinking Water facility Water Cooler (Essential)	01			available	
7	Boy's Hostel (Desirable)	01	9 Sqmts / Room Single occupancy		N.A	
8	Girl's Hostel (Desirable)	01	9 Sqmts / Room (single occupancy) 20 Sqmts/room (triple occupancy)		N.A	
9	Power Backup Provision (Desirable)	01		1	500 KVA	

6. Computer and other Facilities:

Name	Required	Available	Available		Remarks of the Inspectors
			No.	Area in Sq. mts	
Computer (latest Configuration)	1 system for every 10 students	12	1 2		
Printers	1 printer for every 10 computers	2	2		
Xerox Machine	01	1	1		
Multi Media Projector	02	1	1		

7. Amenities (Desirable)

Name	Requirement as per Norms in area	Available		Not Available	Remarks/ Deficiency
		No.	Area in Sq. mts		
Principal quarters	80 Sq. mts				
Staff quarters	6 x 80 Sq. mts				
Parking Area for staff and students					
Bank Extension Counter					
Co operative Stores					
Guest House	80 Sq. mts				
Transport Facilities for students					
Medical Facility (First Aid).		N.A		N.A	

Signature of the Head of the Institution



Signature of the Inspectors



### 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
				Titles	Numbers	
1	Number of books	75	750 adequate coverage of a large number of standard text books and titles in all disciplines of pharmacy			
2	Annual addition of books		75 books per year		N.A	
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.		N.A	
4	Library Timings					

### 8.B. Subject wise Classification:

Sl. No	Subject	Available		Remarks of the Inspectors
		Titles	Numbers	
1	Pharmaceutics – I			
2	Pharmaceutical Chemistry – I			
3	Pharmacognosy			
4	Biochemistry and Clinical Pathology			
5	Human Anatomy and Physiology			
6	Health Education and Community Pharmacy			
7	Pharmaceutics – II			
8	Pharmaceutical Chemistry – II			
9	Pharmacology and Toxicology			
10	Pharmaceutical Jurisprudence			
11	Drug Store and Business Management			
12	Hospital and Clinical Pharmacy	Quotation to be called		

### 8.C. Library Staff:

	Staff:	Qualification	Required	Available	Remarks of the Inspectors
1	Librarian	D. Lib	1	Under recruitment (advertisement in newspaper)	
2	Library Attenders	10+2 /PUC	1		

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: N.A.

Theory

Practicals

(Required ratio --- Theory → 60:1 and Practical → 20:1)N.A  
for Proposed Institute to be started from academic year 2018-2019

If more than 20 students in a batch 2 staff members to be present provided the lab is spacious

2. Date of Commencement of session:

<b>Commencement</b>	<b>Completion</b>
<b>DD/MM/YY</b>	<b>DD/MM/YY</b>

No of Days

No of Days

3. Vacation:

Summer:  N.A

Winter:  N.A

4. Total Number of working days:

N.A

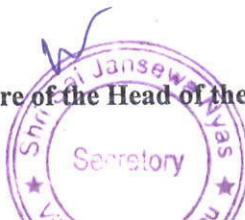
5. Time Table:

Time Table for I and II D. Pharm N.A

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

Class / Subject	Theory		Practicals				Remarks of the Inspectors
	Prescribed No of Hours	No of Hours Conducted	Prescribed No. of Hours	No of Hours Conducted	Prescribed Number of Classes	No of Classes conducted	
<b>I D. Pharm</b>							
Pharmaceutics – I	75		100		25		
Pharmaceutical Chemistry – I	75	N.A or proposed Institute to be started academic year 2018-2019	75	N.A	25	N.A	
Pharmacognosy	75		75		25		
Biochemistry and Clinical Pathology	50		75		25		
Human Anatomy and Physiology	75		50		25		
Health Education and Community Pharmacy	50		----		----		
<b>II D. Pharm</b>							
Pharmaceutics – II	75		100		25		
Pharmaceutical Chemistry – II	100		75		25		
Pharmacology and Toxicology	75		50		25		
Pharmaceutical Jurisprudence	50	N.A for proposed Institute to be started academic year 2018-2019	----	N.A for proposed Institute to be started academic year 2018-2019	----	N.A for proposed Institute to be started academic year 2018-2019	
Drug Store and Business Management	75		----		----		
Hospital and Clinical Pharmacy	75		50		25		

Signature of the Head of the Institution



Signature of the Inspectors

7. Whether Internal Assessments are conducted periodically as per PCI norms N.A  
 \*Proposed Institute

N.  
A

No

8. Whether Evaluation of the internal assessments is Fair Yes

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%		Remarks of the Inspectors
	Th	Pr	Th	Pr	Th	Pr	Th	Pr	
I D. Pharm									
II D. Pharm									N.A for proposed Institute to be started academic year 2018-2019

9. Workload of Faculty members for D. Pharm

Sl. No	Name of the Faculty	Subjects taught	D. Pharm				Total work load	Remarks of the Inspector
			I D. Ph		II D. Ph			
			Th	Pr	Th	Pr		
							N.A for proposed Institute to be started academic year 2018-2019	

Signature of the Head of the Institution



Signature of the Inspectors

**PART IV - PERSONNEL**

**TEACHING STAFF.**

1. Details of Teaching Faculty for D. 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 UG	After PG			
					Advertisement Published				

2. Qualification and number of Staff Members

Number of staff members required: 07

Qualification			
B. Pharm	M. Pharm	PhD	Others - Full Time

3. Details of Faculty Retention for:

N.A for proposed Institute to be started academic year 2018-2019

Name of Faculty Member	Period		Percentage
		Duration of 15 yrs. And above	
	Duration of 10 yrs. And above		
	Duration of 5 yrs. And above		
	Less than 5 yrs.		

4. Details of Faculty Turnover N.A

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

5. No. of Non-teaching staff available for D. Pharm course for intake of 60 Students:

Sl. No.	Designation	Required Number	Required Qualification	Available		Remarks of the Inspection team
				Number	Qualification	
1	Laboratory Technician	02	D. Pharm	N.A		
2	Laboratory Assistants/ Attenders	04	SSLC			
3	Office Superintendent	01	Degree			
4	Accountant cum Clark	01	Degree			
5	Store keeper	01	D. Pharm			
6	Computer Data Operator	01	10+2 with computer training			
7	Peon	02	SSLC			
8	Cleaning personnel	04	---			
9.	Gardener	01	---			



1. 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					
		Under Recruitment														

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

N.A.(Inspectors to verify documents pertaining to the above)

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

N.A.(Inspectors to verify documents pertaining to the above)

10. Scope for the promotion for faculty: Promotions

Yes  N.A

No  N.A

11. Gratuity Provided

Yes  N.A

No  N.A

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

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

13. Whether Supporting Staff (Technical and Administrative) are encouraged for Skill Upgradation Programs

Yes/ No



Signature of the Head of the Institution

Signature of the Inspectors

PART V - DOCUMENTATION

Records Maintained: (Essential)N.A

Sl. No	Records	Yes	No	Remarks of the Inspectors
1.	Admissions Registers	N.A for proposed Institute to be started academic year 2018-2019		
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			

Signature of the Head of the Institution

Signature of the Inspectors



1. Financial Resource allocation and utilization for the past three years:  
(Audited Accounts for the previous year to be enclosed)

Sl No.	Expenditure in Rs.			Expenditure in Rs.			Remarks of the Inspectors*
	Total budget sanctioned	Recurring	Non Recurring	Total Budget Sanctioned	Recurring	Non Returning	
	N.A						

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

Sl No.	Expenditure in Rs.			Expenditure in Rs.			Remarks of the Inspectors*
	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	
	Chemicals			Chemicals			
	Glassware	N.A		Glassware	N.A		

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

Sl No.	Expenditure in Rs.			Expenditure in Rs.			Remarks of the Inspectors*
	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	
	Equipment	N.A		Equipment	N.A		



Signature of the Head of the Institution

Signature of the Inspectors

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

Sl No.	Expenditure in Rs.			Expenditure in Rs.			Expenditure in Rs			Remarks of the Inspectors
	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	
1	Books									
2	Journals	N.A			N.A				N.A	

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



Signature of the Head of the Institution

Signature of the Inspectors



PAKTYII - EQUIPMENT AND APARATI JS

Department wise List of Minimum equipments required for D. Pharm

PHARMACEUTICS  
Equipment:

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Continuous Hot Extraction Equipment	05	05		
2	Conical Percolator	05	05		
3	Tincture Press	01	01		
4	Hand Grinding Mill	01	01		
5	Disintegrator	01	01		
6	Ball mill	01	01		
7	Hand operated Tablet machine	01	01		
8	Tablet Coating Pan unit with hot air blower laboratory size	01	01		
9	Polishing pan laboratory size	01	01		
10	Monsanto's hardness tester	01	01		
11	Pfizer type hardness tester	01	01		
12	Tablet disintegration test apparatus IP	01	01		
13	Tablet dissolution test apparatus IP	01	01		
14	Granulating sieve set	10	10		
15	Tablet counter - small size	05	05		
16	Friability tester	01	01		
17	Collapsible tube - Filling and sealing equipment	01	01		
18	Capsule filling machine - Lab size	01	01		
19	Digital balance	01	01		
20	Distillation unit for distilled water	02	02		
21	Deionisation unit	01	01		
22	Glass distillation unit for water for injection	01	01		
23	Ampoule washing machine	01	01		
24	Ampoule filling and sealing machine	01	01		
25	Sintered glass filters for bacterial proof filtration (four different grades)	Adequate	Adequate		
26	Millipore filter (3 grades)	Adequate	Adequate		

Signature of the Head of the Institution



Signature of the Inspectors

27	Autoclave	01	01
28	Hot air sterilizer	01	01
29	Incubator	01	01
30	Aseptic cabinet	01	01
31	Ampoule clarity test equipment	01	01
32	Blender	01	01
33	Sieves set (Pharmacopoeial standard)	02	02
34	Lab Centrifuge.	01	01
35	Ointment slab	Adequate	Adequate
36	Ointment spatula	Adequate	Adequate
37	Pestle and mortar porcelain	Adequate	Adequate
38	Pestle and mortar glass	Adequate	Adequate
39	Suppository moulds of three sizes	Adequate	Adequate
40	Refrigerator	01	01

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

#### PHARMACEUTICAL CHEMISTRY

Equipment:

Sl. No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Refractometer	01	01		
2	Polarimeter	01	01		
3	Photoelectric colorimeter	01	01		
4	pH meter	01	01		
5	Atomic model set	02	02		
6	Electronic balance	01	01		
7	Periodic table chart	Adequate	ADEQUATE		

**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

PHYSIOLOGY & PHARMACOLOGY LABORATORY

Equipment:

SI No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspector
1	Haemoglobinometer	20	20		
2	Haemocytometer	10	10		
3	Student's organ bath	1	1		
4	Sherington's rotating drum	1	1		
5	Frog board	Adequate	Adequate		
6	Tray (dissecting)	Adequate	Adequate		
7	Frontal writing lever	Adequate	Adequate		
8	Aeration tube	Adequate	Adequate		
9	Telethermometer	1	1		
10	Pole climbing apparatus*	1	1		
11	Histamine chamber	1	1		
12	Simple lever	Adequate	Adequate		
13	Staring heart lever	Adequate	Adequate		
14	Aerator	Adequate	Adequate		
15	Histological Slides	Adequate	Adequate		
16	Sphygmomanometer (B.P. apparatus)	5	5		
17	Stethoscope	5	5		
18	First aid equipment	Adequate	Adequate		
19	Contraceptive device	Adequate	Adequate		
20	Dissecting (surgical) instruments	Adequate	Adequate		
21	Balance for weighing small Animals	1	1		
22	Kymograph paper	Adequate	Adequate		
23	Actophotometer	1	1		
24	Analgesiometer	1	1		
25	Thermometer	Adequate	Adequate		
26	Plastic animal cage	Adequate	Adequate		
27	Double unit organ bath with thermostat	1	1		
28	Refrigerator	1	1		
29	Single pan balance	1	1		
30	Charts	Adequate	Adequate		

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31	Human skeleton	1	1	
32	Anatomical specimen (Heart, brain, eye, ear, reproductive system etc.,)	1 set	1 set	
33	Electro-convulsimeter	1	1	
34	Stop watch	Adequate	Adequate	
35	Clamp, boss heads, screw clips	Adequate	Adequate	
36	Syme's Cannula	Adequate	Adequate	

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

**PHARMCOGNOZY LABORATORY**

Equipment:

Sl No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Projection Microscope	01	01		
2	Charts (different types)	Adequate	Adequate		
3	Models (different types)	Adequate	Adequate		
4	Permanent Slides	Adequate	Adequate		
5	Slides and Cover Slips	Adequate	Adequate		

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

**PHARMACY PRACTICE LABORATORY**

Equipment:

Sl No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Colorimeter	2	2		
2	Microscope	Adequate	Adequate		
3	Permanent slides (skin, kidney, pancreas, smooth muscle, liver etc.,)	Adequate	Adequate		
4	Watch glass	Adequate	Adequate		
5	Centrifuge	1	1		
6	Biochemical reagents for analysis of normal and pathological constituents in urine and blood facilities	Adequate	Adequate		
7	Filtration equipment	2	2		

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8	Filling Machine	1	1
9	Sealing Machine	1	1
10	Autoclave sterilizer	1	1
11	Membrane filter	1 Unit	1 Unit
12	Sintered glass funnel with complete filtering assemble	Adequate	Adequate
13	Small disposable membrane filter for IV admixture filtration	Adequate	Adequate
14	Laminar air flow bench	1	1
15	Vacuum pump	1	1
16	Oven	1	1
17	Surgical dressing	Adequate	Adequate
18	Incubator	1	1
19	PH meter	1	1
20	Disintegration test apparatus	1	1
21	Hardness tester	1	1
22	Centrifuge	1	1
23	Magnetic stirrer	1	1
24	Thermostatic bath	1	1

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

**Museum:** Every Institution shall maintain a museum of crude drugs, herbarium sheets, botanical specimens of the drugs, and plants, mentioned in the course in addition the following are recommended.

1. Colored slides of medicine plants.
2. Display of popular patent medicines, and
3. Containers of common usage in medicines.



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Signature of the Inspectors

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



Signature of the Inspectors