

**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 for the course)

(SIF-A)

*To be filled up by P.C.I.*

*To be filled up by inspectors*

**Inspection No. :**

**Date of Inspection:**

**FILE No. : 17-1272/2016-PCI**

**NAME OF THE INSPECTORS: 1.**

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	Bhagwant College of Pharmacy, 17 <sup>th</sup> mile stone, Bijnor Delhi Highway, Bhagwantpuram Distt.-Muzaffarnagar(U.P.)-251315 01342 265341, 265410 01342-264775 <a href="mailto:bhagwant_society@rediffmail.com">bhagwant_society@rediffmail.com</a>
Year of Establishment	2017-18
Status of the course conducting body: Government / University / Autonomous / Aided / Private (Enclose copy of Registration documents of Society/Trust)	<b>Registered Society (Annexure-A)</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:	Bhagwant Education Development Society, 50, Avas Vikas Colony, Bijnor -246701 (U.P.)  01342 265341, 265410 01342-264775 <a href="mailto:bhagwant_society@rediffmail.com">bhagwant_society@rediffmail.com</a> <a href="http://www.bhagwantgroup.com">www.bhagwantgroup.com</a> (Annexure-1)
<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	Dr. Ajay Gupta, Management Nominee, Bhagwant Education Development Society, 50, Avas Vikas Colony, Bijnor (U.P.) 01342 0975912000 08859901119   01342-264775 <a href="mailto:Bhagwant_society@rediffmail.com">Bhagwant_society@rediffmail.com</a>

**Signature of the Head of the Institution**

**Signature of the Inspectors**

<b>A – I. 4</b> Name and Address of the Head of the Institution	Dr. K.Sarvanan Officer Apartments, Bhagwant College of Pharmacy, Bhagwantpuram, 17 <sup>th</sup> Milestone, Bijnor-Delhi Highway, Distt-Muzaffarnagar (U.P.) 251315
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**A –I. 5**

**FOR INSTITUTION SEEKING CONTINUATION OF APPROVAL**

**a. Details of Affiliation Fee Paid (Annexure-B)**

Name of the Course	Affiliation Fee paid up to	Receipt No	Dated	Remarks of the Inspectors
D.Pharma	2017-18	DD No. 053757, Amount 50,000, Bank Name- PNB, Kaithora	30.08.2016	

**b. APPROVAL STATUS: Annexure-C**

Name of the Course	Approved up to	In take Approved and Admitted	PCI	STATE GOVERNMENT	UNIVERSITY	Remarks of the Inspectors
D. Pharm	Approved for conduction	Approval Letter No and Date	277 EC/item No.9/Diploma /IR No.1 <sup>st</sup> surprise (Jan, 2017)	प्राशिप / परिषद / 2016 / 10115, दिनांक-14.10.2016	प्राशिप / परिषद सम्बद्धता / 2017 / 1475, दिनांक-15.05.2017	
		Approved Intake	60	50	50	
		Actually Admitted	50	50	50	

**c. STATUS OF APPLICATION**

COURSES INSPECTED FOR						
Faculty / Subject	Extension of Approval		Increase in Intake of Seats		Remarks	
					Current Intake	Proposed increase in Intake
D. Pharm	Extension of Approval	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 Details**

Yes

No

**Signature of the Head of the Institution**

**Signature of the Inspectors**

**A – I. 6 a**

<b>Status of the Pharmacy Course:</b>	
<b>Independent Building</b>	<input checked="" type="checkbox"/>
<b>Wing of another college</b>	<input type="checkbox"/>
<b>Separate Campus</b>	<input type="checkbox"/>
<b>Multi Institutional Campus</b>	<input type="checkbox"/>

**Examining Authority : Board of Technical Education**  
**With complete postal : 1, Guru Govind Singh Marg, Bas Mandi Chowk, Lucknow (U.P.)**  
**Address, Telephone No. : 0522-2630243, 2630063**  
**and STD Code.**

**B - DETAILS OF THE INSTITUTION**

<b>B –I.1</b>		<b>Dr. K.Sarvanana</b>			
<b>Name of the Principal</b>					
<b>Qualification/ Experience</b>	<b>Qualification*</b>		<b>Teaching Experience Required</b>	<b>Actual experience</b>	<b>Remarks of the Inspectors</b>
	M. Pharm		05	8	
	Ph.D.		02		

\* Documentary evidence should be provided (Details submitting with SDF) Annexure-D

**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>D. Pharm</b>	January, 2017	NA	NA	NA

\* Enclose Documents

**B –I.3**  
**Pay Scales: (To be proposed as per norms)**

Staff	Scale of pay	PF	Gratuity	Pension benefit	Remarks of the Inspectors
<b>Teaching Staff</b>	<b>AICTE /UGC/State Govt.</b>	As Per Rule	As Per Rule	As Per Rule	
<b>Non- Teaching Staff</b>	<b>State Government</b>	As Per Rule	As Per Rule	As Per Rule	

**Signature of the Head of the Institution**

**Signature of the Inspectors**

**B –I .4****D. Pharm Course: Admission Statement for the Past Three Years**

<b>ACADEMIC YEAR</b>	<b>Year 2017</b>	<b>Year 20</b>	<b>Year 20</b>
<b>Sanctioned</b>	<b>50</b>		
<b>No. of Admissions</b>	<b>50</b>		
<b>Unfilled Seats</b>	<b>00</b>		
<b>No. of Excess Admissions</b>	<b>00</b>		

**B –I .5**

**Academic information: Percentage of D.Pharm results for the past three years:  
(Examination still not conducted by Board)**

<b>ACADEMIC YEAR</b>	<b>Year 20</b>	<b>Year 20</b>	<b>Year 20</b>
<b>D.Pharm</b>			

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

Whether college has NSS Unit (Yes/No)? If no give reasons	Proposed
NSS Programme Officer's Name	Proposed
Programme conducted (mention details)	Proposed
Whether students participating in University level cultural activities / Co- curricular/sports activities	Yes
Physical Instructor	Proposed
Sports Ground	Basket ball, foot ball, tennis, badminton and cricket, Athletics and other Indoor games

**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) : Bhagwant Education Development Society**

**C .2 Please provide following Information**

*Annexure -E*

Receipts			Expenditure			Remarks of the Inspectors
Sl. No.	Particulars	Amount Rs.	Sl. No.	Particulars	Amount Rs	
1.	Grants a. Government b. Others	-	<b>CAPITAL EXPENDITURE</b>			
2.	Tuition Fee	1800000	1.	Building		
3.	Library Fee	-	2.	Equipment	546708	
4.	Sports Fee	-	3.	Others	617201	
5.	Union Fee	-	<b>REVENUE EXPENDITURE</b>			
6.	Others	418000	1	Salary		
7	Interest on FDR		2.	<b>MAINTENANCE EXPENDITURE</b>		
				i	College	278205
8	Misc. Receipts	254118		ii	Others	
			3.	University Fee (If any)		
			4.	Apex Bodies Fee	790000	
			5.	Government Fee		
			6.	Deposit held by the College		
			7.	Others		
			8.	Misc.Expenditure	80256	
			<b>Total</b>		<b>2312370</b>	
	<b>Total</b>	<b>2472118</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 : 2.01 Acer  
 Leased or own : Own  
 Sale/Agreement deed (record to be enclosed) (**Annexure-F**)  
 c) Building : Leased Rented  
 i- Leased/Rented (Record to be enclosed) Own Building  
 ii- If own (Approved Building plan & sale deed to be enclosed) (**Annexure-G**)

7506
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d. Total Built Area of the college building in Sq.mts : Built up Area

Amenities and Circulation Area 920
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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
D. Pharm	02	02	90 Sq. mts each	As per AICTE Norms	

(\*To accommodate 60 students).

3. Laboratory requirement at the end of 4 Years

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 Sq .mts x n (n=05)	5	75 Sqm. Each	
2	Pharmaceutics Pharmaceutical Chemistry Physiology and Pharmacology Pharmacy Practice Pharmacognosy Total no of labs for D.Pharm course *Animal House	01 Laboratories 01 Laboratories 01 Laboratory 01 Laboratories 01 Laboratories  05 Laboratories 1 (10 Sq.Mt.)	5	75 Sqm. Each	
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	10 Sqm.	
4	Area of the Machine Room	100 Sq.mts	1	Available	
5	Aseptic Room	25 Sq.Mts.	1	Available	
6	Store Room – I	1 (Area 20 Sq mts)	1	Available	
7	Store Room - II (For Inflammable chemicals)	1 (Area 20 Sq mts)	1	Available	

\*Not required if computer simulated software are available.

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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 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	20 Sq .mts	1	30 Sq.mt.	
2	Office – I - Including confidential room	01	40 Sq. mts	1	150 Sq.Mt.	
3	Staff/Faculty Rooms for D.Pharm course	01	30 Sq.Mts	1	50 Sq.mt.	
4	Library with computer and reprographic facilities	01	100 Sq.Mt.	1	154 Sq.mt.	
5	Museum	01	30 sq mts (May be attached to the pharmacognosy lab)	1	35 sqmt.	
6	Auditorium/Multi Purpose Hall (Desirable)	01	250-300 seating capacity	1	Available	
7	Herbal Garden (Desirable)	01	Adequate Number of Medicinal Plants	1	Available	

**5. 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	40 Sq.mts	01	76 sqm	
2	Boy's Common Room (Essential)	01	40 Sq.mts	01	76 sqm	
3	Toilet Blocks for Boys	01	25 Sq.mts	01	33 sqm	
4	Toilet Blocks for Girls	01	25 Sq.mts	01	33 sqm	

**Signature of the Head of the Institution**

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5	Canteen (Desirable)	01	100 Sq.mts	Yes	201	
6	Drinking Water facility – Water Cooler (Essential).	01		Yes	Water cooler	
7	Boy’s Hostel (Desirable)	01	9 Sq .mts / Room Single occupancy	Available as per norms		
8	Girl’s Hostel (Desirable)	01	9 Sq .mts / Room (single occupancy) 20 Sq mts / Room (triple occupancy)	Available as per norms		
9	Power Backup Provision (Desirable)	01		Available		

**5. Computer and other Facilities:**

Name	Required	Available		Remarks of the Inspectors
		No.	Area in Sq. mts	
Computer (Latest Configuration)	1 system for every 10 students	20		
Printers	1 printer for every 10 computers	05		
Xerox Machine	01	01		
Multi Media Projector	02	04		

**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	-		Yes	
Staff quarters	6 x 80 Sq. mts	-		Yes	
Parking Area for staff and students		Yes	500 sqm	-	
Bank Extension Counter		-		Yes	
Co operative Stores		Yes		-	
Guest House	80 Sq. mts	Yes	100 sqm	-	
Transport Facilities for students		Yes		-	
Medical Facility (First Aid)		Yes		-	

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**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
				Title	Numbers	
1	Number of books	75	750 adequate coverage of a large number of standard text books and titles in all disciplines of pharmacy	110	731	
2	Annual addition of books		75 books per year	Yes	Yes	
3	Periodicals Hard copies / online		06 National Journals Indian Journal of Pharmaceutical Sciences Indian Journal of Pharmaceutical Education and Reserch Journal of Hospital Pharmacy Indian Journal of Pharmacology CIMS, MIMS Indian Journal of Experimental Biology.	Available	Available	
4	<b>Library Timings</b>			<b>09:00 am to 5:00 p.m</b>		

### 8.B. Subject wise Classification:

	Staff	Available Titles	Available Numbers	Remarks of the Inspectors
1	Pharmaceutics-I	10	60	
2	Pharmaceutical Chemistry-I	10	60	
3	Pharmacognosy	10	60	
4	Biochemistry and Clinical Pathology	10	60	
5	Human Anatomy and Physiology	10	60	
6	Health Education and community Pharmacy	10	60	
7	Pharmaceutics-II	10	60	
8	Pharmaceutical Chemisty-II	10	60	
9	Pharmacology and Taxicology	10	60	
10	Pharmaceutical jurisprudence	10	60	
11	Drug Store and Business Management	10	60	
12	Hospital and Clinical Pharmacy	10	60	

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**8.C. Library Staff:**

	<b>Staff</b>	<b>Qualification</b>	<b>Required</b>	<b>Available</b>	<b>Remarks of the Inspectors</b>
1	Librarian	D. Lib	1	1	
2	Library Attenders	10 +2 / PUC	1	2	

**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:** Theory Practical's  
as per norms

(Required ratio --- Theory → 60:1 and Practicals → 20:1) If more than 20 students in a batch 2 staff members to be present provided the lab is spacious.

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

Commencement	Completion
As per BTE Notification	As per BTE Exam Schedule

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

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

**5. Time Table:**

Time Table for I and II D.Pharm Enclosed Yes  No

**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 Hrs	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	90	100	100	25	25	
Pharmaceutical Chemistry-I	75	90	75	75	25	25	
Pharmacognosy	75	90	75	75	25	25	
Biochemistry and Clinical Pathology	50	55	75	75	25	25	
Human Anatomy and Physiology	75	90	50	50	25	25	
Health Education and Community Pharmacy	50	55	--		--		

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<b>II D.Pharm</b>							
Pharmaceutics-II							
Pharmaceutical Chemistry-II							
Pharmacology and Toxicology							
Pharmaceutical Jurisprudence							
Drug Store and Business Management							
Hospital and Clinical Pharmacy							

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

Yes  No

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

yes  No

Class*	No. of Candidates scored more than 80%		No. of Candidates scored between 60 - 80%		No. of Candidates scored between 50 - 60%		No. of Candidates Less than 50%		Remarks of the Inspectors
	Th	Pr	Th	Pr	Th	Pr	Th	Pr	
I D.Pharm									
II D.Pharm									

**12. Work load of Faculty members for D. Pharm**

Sl. No	Name of the Faculty*	Subjects taught	D. Pharm		Total work load	Specific Remarks of the Inspector
			Th	Pr		
1	Dr. Saravana K	Pharmacognosy	3	3	6	
2	Ms. Sheeba Naaj	Pharmaceutics-I	3	4	7	
3	Mr. Salman	Human Anatomy & Physiology Health Education & Community pharmacy	3 2	2 -	7	
4	Mr. Ishtiyah Ahamad	Pharmaceutical Chemistry-I Biochemistry & Clinical Pathology	3 2	3 3	11	

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Signature of the Inspectors



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

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

- Annexure-H

**Signature of the Head of the Institution**

**Signature of the Inspectors**

**9. Scale of pay for Teaching faculty (As per AICTE Norms):**

Sl. No	Name	Qualification	Designation	Basic pay+ AGP Rs.	DA Rs. @20%	HR A Rs. @15%	C C A R S.	Other allowance Rs.	Deductions			Bank A/C No	PAN No	EPF A/c n	
									P T	TDS	EPF				
1	Dr. K.Saravanan	M.Pharm, Ph.D	Principal	20574	5315	3986									
2	Ms.Sheeba Naaj	B.Pharm	Lecturer	15600	3120	2340									
3	Mr. Salman Khan	B.Pharm	Lecturer	15600	3120	2340									
4	Mr. Ishtiyaq Ahamad	B.Pharm	Lecturer	15600	3120	2340									
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15															
16															
17															

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

(Inspectors to verify documents pertaining to the above)

N/A

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

(Inspectors to verify documents pertaining to the above)

N/A

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

Yes

 Yes

No

**13. Gratuity Provided**

Yes

No

 Yes

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

Sl No	Name	Designation	Qualification	Date of Joining	Experience	Signature	Remarks of the Inspectors
1							
2							
3							

Signature of the Head of the Institution

Signature of the Inspectors

**PART V - DOCUMENTATION****Records Maintained: Essential**

<b>Sl. No</b>	<b>Records</b>	<b>Yes</b>	<b>No</b>	<b>Remarks of the Inspectors</b>
1	Admissions Registers	Yes		
2.	Individual Service Register	Yes		
3.	Staff Attendance Registers	Yes		
4.	Sessional Marks Register	Yes		
5.	Final Marks Register	Plan		
6.	Student Attendance Registers	Yes		
7.	Minutes of meetings- Teaching Staff	Yes		
8.	Fee paid Registers	Yes		
9.	Acquaintance 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	Plan		
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	Plan		

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Signature of the Inspectors

**PART - VI**

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

Sl	Expenditure in Rs. 2014-15			Expenditure in Rs 2015-16			Expenditure in Rs 2016-17			Remarks of the Inspectors*
No.	Total budget sanctioned	Recurring	Total budget sanctioned	Total budget sanctioned	Recurring	Total budget sanctioned	Total budget sanctioned	Recurring	Total budget sanctioned	
1	-	-	-	-	-	-	1200000	650000	1200000	

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

Sl	Expenditure in Rs.			Expenditure in Rs.			Expenditure in Rs			Remarks of the Inspectors*
No.	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	
	Chemicals	-	-	Chemicals	-	-	Chemicals	150000	142500	
	Glassware			Glassware			Glassware			

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

Sl	Expenditure in Rs.			Expenditure in Rs.			Expenditure in Rs			Remarks of the Inspectors*
No.	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	Total budget allocated	Sanctioned	Incurred	
	Equipment	-	-	Equipment	-	-	Equipment	600000	546000	

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**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	-	-	Books	-	-	Books	300000	240000	
2	Journals			Journals			Journals			

\*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**

**PART VII – EQUIPMENT AND APPARATUS**

**Department wise List of Minimum equipments required for D. Pharm**

**PHARMACEUTICS**

**Equipment:**

<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	Continuous Hot Extraction Equipment	05	05	Yes	
2	Conical Percolator	05	05	Yes	
3	Tincture Press	01	01	Yes	
4	Hand Grinding Mill	01	01	Yes	
5	Disintegrator	01	01	Yes	
6	Ball mill	01	01	Yes	
7	Hand operated Tablet machine	01	01	Yes	
8	Tablet Coating Pan unit with hot air blower laboratory size	01	01	Yes	
9	Polishing pan laboratory size	01	01	Yes	
10	Monsanto's hardness tester	01	01	Yes	
11	Pfizer type hardness tester	01	01	Yes	
12	Tablet disintegration test apparatus IP	01	01	Yes	
13	Tablet dissolution test apparatus IP	01	01	Yes	
14	Granulating sieve set	10	10	Yes	
15	Tablet counter – small size	05	05	Yes	
16	Friability tester	01	01	Yes	

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17	Collapsible tube – Filling and sealing equipment	01	01	Yes	
18	Capsule filling machine – Lab size	01	01	Yes	
19	Digital balance	01	01	Yes	
20	Distillation unit for distilled water	02	02	Yes	
21	Deionisation unit	01	01	Yes	
22	Glass distillation unit for water for injection	01	01	Yes	
23	Ampoule washing machine	01	01	Yes	
24	Ampoule filling and sealing machine	01	01	Yes	
25	Sintered glass filters for bacterial proof filtration (four different grades)	Adequate	Adequate	Yes	
26	Millipore filter (3 grades)	Adequate	Adequate	Yes	
27	Autoclave	01	01	Yes	
28	Hot air sterilizer	01	01	Yes	
29	Incubator	01	01	Yes	
30	Aseptic cabinet	01	01	Yes	
31	Ampoule clarity test equipment	01	01	Yes	
32	Blender	01	01	Yes	
33	Sieves set (Pharmacopoeial standard)	02	02	Yes	
34	Lab Centrifuge	01	01	Yes	
35	Ointment slab	Adequate	Adequate	Yes	

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36	Ointment spatula	Adequate	Adequate	Yes	
37	Pestle and mortar porcelain	Adequate	Adequate	Yes	
38	Pestle and mortar glass	Adequate	Adequate	Yes	
39	Suppository moulds of three sizes	Adequate	Adequate	Yes	
40	Refrigerator	01	01	Yes	

**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	Yes	
2	Polarimeter	01	01	Yes	
3	Photoelectric colorimeter	01	01	Yes	
4	pH meter	01	01	Yes	
5	Atomic model set	02	02	Yes	
6	Electronic balance	01	01	Yes	
7	Periodic table chart	Adequate	Adequate	Yes	

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

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**PHYSIOLOGY & PHARMACOLOGY LABORATORY****Equipment:**

SI No.	Name	Minimum required Nos.	Available Nos.	Working Yes / No	Remarks of the Inspectors
1	Haemoglobinometer	20	20	Yes	
2	Haemocytometer	10	10	Yes	
3	Student's organ bath	1	1	Yes	
4	Sherington's rotating drum	1	1	Yes	
5	Frog board	Adequate	Adequate	Yes	
6	Tray (dissecting)	Adequate	Adequate	Yes	
7	Frontal writing lever	Adequate	Adequate	Yes	
8	Aeration tube	Adequate	Adequate	Yes	
9	Telethermometer	1	1	Yes	
10	Pole climbing apparatus	1	1	Yes	
11	Histamine chamber	1	1	Yes	
12	Simple lever	Adequate	Adequate	Yes	
13	Staring heart lever	Adequate	Adequate	Yes	
14	Aerator	Adequate	Adequate	Yes	
15	Histological Slides	Adequate	Adequate	Yes	
16	Sphygmomanometer (B.P. apparatus)	5	5	Yes	
17	Stethoscope	5	5	Yes	
18	First aid equipment	Adequate	Adequate	Yes	

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19	Contraceptive device	Adequate	Adequate	Yes	
20	Dissecting (surgical) instruments	Adequate	Adequate	Yes	
21	Balance for weighing small Animals	1	1	Yes	
22	Kymograph paper	Adequate	Adequate	Yes	
23	Actophotometer	1	1	Yes	
24	Analgesiometer	1	1	Yes	
25	Thermometer	Adequate	Adequate	Yes	
26	Plastic animal cage	Adequate	Adequate	Yes	
27	Double unit organ bath with thermostat	1	1	Yes	
28	Refrigerator	1	1	Yes	
29	Single pan balance	1	1	Yes	
30	Charts	Adequate	Adequate	Yes	

31	Human skeleton	1		Yes	
32	Anatomical specimen (Heart, brain, eye, ear, reproductive system etc.,)	1 set		Yes	
33	Electro-convulsimeter	1		Yes	
34	Stop watch	Adequate		Yes	
35	Clamp, boss heads, screw clips	Adequate		Yes	
36	Signature of the Head of the Institution	Signature of the Inspectors	Adequate	Yes	

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

### **PHARMCOGNOSY LABORATORY**

#### **Equipment:**

<b>SI 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	Projection Microscope	01	01	Yes	
2	Charts (different types)	Adequate	Adequate	Yes	
3	Models (different types)	Adequate	Adequate	Yes	
4	Permanent Slides	Adequate	Adequate	Yes	
5	Slides and Cover Slips	Adequate	Adequate	Yes	

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

### **PHARMACY PRACTICE LABORATORY**

#### **Equipment:**

<b>SI 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	2	2	Yes	
2	Microscope	Adequate	Adequate	Yes	
3	Permanent slides (skin, kidney, pancreas, smooth muscle, liver etc.,)	Adequate	Adequate	Yes	
4	Watch glass	Adequate	Adequate	Yes	
5	Centrifuge	1	1	Yes	
6	Biochemical reagents for analysis of normal and pathological constituents in urine and blood facilities	Adequate	Adequate	Yes	
7	Filtration equipment	2	2	Yes	

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8	Filling Machine	1	1	Yes	
9	Sealing Machine	1	1	Yes	
10	Autoclave sterilizer	1	1	Yes	
11	Membrane filter	1 Unit	1 Unit	Yes	
12	Sintered glass funnel with complete filtering assemble	Adequate	Adequate	Yes	
13	Small disposable membrane filter for IV admixture filtration	Adequate	Adequate	Yes	
14	Laminar air flow bench	1	1	Yes	
15	Vacuum pump	1	1	Yes	
16	Oven	1	1	Yes	
17	Surgical dressing	Adequate	Adequate	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.**

**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.

**Signature of the Head of the Institution**

**Signature of the Inspectors**

**Observation of the Inspectors:**

<b>Compliance of the last recommendations by Inspectors</b>
<b>Specific observations if not complied</b>

<b>Signature of Inspectors:</b>	<b>1.</b>
	<b>2.</b>

**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**