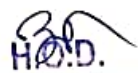


Sai Homoeopathy Medical College, Sasure (Vairag)

Department Of Repertory

Name	 Dr. Anpat Ashok Vishwambhar
Designation	PROFESSOR
Qualification	MD. (Hom)
Subject	Repertory
Full time/ Part Time	Full Time
Date of Appointment	23/08/2024
Latest University Approval Letter no. & Date	MUHS/ E-4/ UG/142109/34/2024 Date: 16/05/2024
Name of State Board & Registration No.	MCH Mumbai, 37030, 22/03/2004
Date of Birth	29/05/1981
Total Teaching Experience As on 31/12/2024	11 Year 11 Month

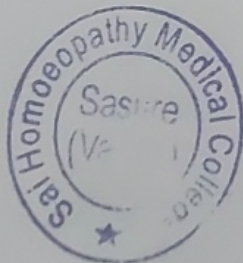


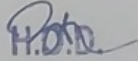

H.O.D.
Homoeopathic Repertory and Case Taking
Sai Homoeopathy Medical College
Sasure (Vairag)

Sai Homoeopathy Medical College, Sasure (Vairag)

Department Of Repertory

Name	
	Dr. Gangawane Swapnali Prabhakar
Designation	ASSOCIATE PROFESSOR
Qualification	MD. (Hom)
Subject	Repertory
Full time/ Part Time	Full Time
Date of Appointment	02/09/2024
Latest University Approval Letter no. & Date	MUHS/ E-4/ UQ/142109/34/2024 Date: 16/05/2024
Name of State Board & Registration No.	MCH Mumbai, 33207, 30/04/2002
Date of Birth	30/05/1979
Total Teaching Experience As on 31/12/2024	6 Years 10 Month




Homoeopathic Repertory and Case Taking
Sai Homoeopathy Medical College
Sasure (Vairag)

Sai Homoeopathy Medical College, Sasure (Vairag)

Department Of Repertory

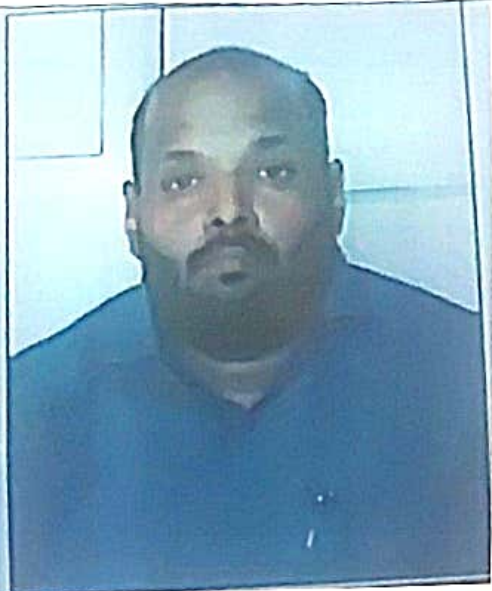
Name	
	Dr. Gangawane Swapnali Prabhakar
Designation	ASSOCIATE PROFESSOR
Qualification	MD. (Hom)
Subject	Repertory
Full time/ Part Time	Full Time
Date of Appointment	02/09/2024
Latest University Approval Letter no. & Date	MUHS/ E-4/ UG/142109/34/2024 Date: 16/05/2024
Name of State Board & Registration No.	MCH Mumbai, 33207, 30/04/2002
Date of Birth	30/05/1979
Total Teaching Experience As on 31/12/2024	6 Years 10 Month




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Sai Homoeopathy Medical College
Sasure (Vairag)

Sai Homoeopathy Medical College, Sasure (Vairag)

Department Of Repertory

Name	 Dr. Sathe Abhijeet Baliram
Designation	ASSOCIATE PROFESSOR
Qualification	MD. (Hom)
Subject	Repertory
Full time/ Part Time	Full Time
Date of Appointment	02/09/2024
Latest University Approval Letter no. & Date	MUHS/ E-4/ UG/4206/3405/2015 Date: 10/09/2015
Name of State Board & Registration No.	MCH Mumbai, 41010, 31/03/2006
Date of Birth	28/06/1983
Total Teaching Experience As on 31/12/2024	4 Year 2 Month



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Sasure (Vairag)

Sai Homoeopathy Medical College, Sasure (Vairag)

Department Of Repertory

Name	 Dr. Patil Snehal Jayant
Designation	ASSISTANT PROFESSOR
Qualification	MD. (Hom)
Subject	Repertory
Full time/ Part Time	Full Time
Date of Appointment	02/09/2024
Latest University Approval Letter no. & Date	--
Name of State Board & Registration No.	MCH Mumbai, 66352, 22/08/2012
Date of Birth	28/06/1983
Total Teaching Experience As on 31/12/2024	--




Homoeopathic Repertory and Case Taking
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