

FACULTY INFORMATION

Name : **Dr. Pramodha M.S.**

Date of Birth & Age : **03/01/1974**

Present Designation : **Assistant Professor**

Department : **OBG**

College : **A. J. Institute of Medical Sciences & Research Centre**

City : **Mangaluru**

Residential Address of employee : **W/o Laxman Suvarna
#3/29 Sai Kripa House
Beeri, Kotekar
Mangalore-575 022**

Phone & Fax Number With Code : Office : **0824 - 2211876**

E-mail address : **dr_pramodha@rediffmail.com**

Mobile Number : **8095393777**

Date of joining present institution : **February 11, 2015 as Assistant Professor**



Qualifications:

Qualification	College	University	Year	Registration No. of UG & PG with date	Name of the State Medical Council
MBBS	J.N.Medical College, Belgaum	Karnatak University	Mar 1998	49,175 Dt:16.04.1998	Karnataka Medical Councils
D.G.O	M.R.Medical College, Gulbarga	RGUHS, Bangalore	Sep 2002	49,175 Dt:06.03.2007	Karnataka Medical Council
D.N.B (Obst & Gynae)	K.S.Hegde Medical Academy, Deralakatte	N.B.E., New Delhi	Sep 2007	49,175 Dt:02.01.2015	Karnataka Medical Council

Details of the teaching experience

Designation	Department	Name of Institution	From DD/MM/YY	To DD/MM/YY	Total Experience in years & months
Resident	OBG	M.R. Medical College, Gulbarga	2000	2002	2 Years
Resident	OBG	K.S.Hegde Medical Academy, Deralakatte	15/02/2005	14/02/2007	2 Years
Senior Resident	OBG	MES Medical College, Perinthalmanna	10/08/2007	17/06/2010	2 Years 10 Months 7 Days
Assistant Professor	OBG	A.J Institute of Medical Sciences & Research Centre, Mangaluru	11/02/2015	Till Date	