

FACULTY INFORMATION

Name : **Dr. Nishita Shettian Fernandes**
Date of Birth & Age : **19/05/1985**
Present Designation : **Assistant Professor**
Department : **OBG**
College : **A. J. Institute of Medical Sciences & Research Centre**
City : **Mangaluru**
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Date of joining present institution : **June 18, 2013 as Assistant Professor**

Qualifications:

Qualification	College.	University	Year	Registration No. of UG & PG with date	Name of the State Medical Council
MBBS	Fr. Muller Medical College, Mangalore	RGUHS,	Aug 2008	85554 dt. Sep 07, 2009	Karnataka Medical Council
MS (OBG)	A.J.Institute of Medical Sciences, Mangalore	RGUHS	May 2013	85554	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
Jr. Resident	OBG	A. J. Institute of Medical Sciences, Mangalore	10/05/2010	31/05/2013	3 Years 21 Days
Assistant Professor	OBG	A. J. Institute of Medical Sciences & Research Centre, Mangaluru	18/06/2013	Till Date	