

FACULTY INFORMATION



Name : **Dr. Aishwarya S. Pai**
Date of Birth & Age : **10/07/1993**
Present Designation : **Junior Resident**
Department : **General Surgery**
College : **A. J. Institute of Medical Sciences & Research Centre**
City : **Mangaluru**
Campus Address of Resident : **Resident Quarters No.608
AJIMS&RC Campus,
Mangalore**
Permanent Address of Resident : **D/o Mr. Subhaschandra Pai
704, Heritage Apartments
Near Barke Police Station
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Phone & Fax Number With Code : Office : **0824 - 2225533(with STD code)**
E-mail address : **aish.pai@gmail.com**
Mobile Number : **8904002978**
Date of joining present institution : **August 26, 2020 as Junior Resident**

Qualifications:

Qualification	College	University	Year	Registration No. of UG & PG with date	Name of the State Medical Council
MBBS	Yenepoya Medical College, Mangalore	Yenepoya University	March 2018	No: 125221 Dt: 15/05/2018	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
Junior Resident - 1	General Surgery	A.J. Institute of Medical Sciences & Research Centre, Mangalore	26/08/2020	Till Date	