

FACULTY INFORMATION

Name : **Dr. Akshatha S**

Date of Birth & Age : **09/11/1988**

Present Designation : **Junior Resident**

Department : **General Medicine**

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

City : **Mangaluru**

Campus Address of Resident : **Resident Quarters No.109
AJIMS&RC Campus,
Mangalore**

Permanent Address of Resident : **D/o Late Dr. B V Suresh Rao
#16/5, Vyasa Meenakshi Nilaya
BIPS Road, Gowdanapalya
Subramanya Pura Post, Uttarahalli
Bangalore - 560061**

Phone & Fax Number With Code : Office : **0824 - 2225533(with STD code)**
E-mail address : **drakshatha.rao@gmail.com**
Mobile Number : **9480701649**

Date of joining present institution : **May 02, 2019 as Junior Resident**



Qualifications:

Qualification	College	University	Year	Registration No. of UG & PG with date	Name of the State Medical Council
MBBS	Mandya Institute of Medical Sciences, Mandya	RGUHS University	March 2012	No:96009 Dt: 12/04/2012	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 Medicine	A.J. Institute of Medical Sciences & Research Centre, Mangalore	02/05/2019	01/05/2020	1 Year
Junior Resident - 2	General Medicine	A.J. Institute of Medical Sciences & Research Centre, Mangalore	02/05/2020	01/05/2021	1 Year
Junior Resident - 3	General Medicine	A.J. Institute of Medical Sciences & Research Centre, Mangalore	02/05/2021	Till Date	