

FACULTY INFORMATION

Name : **Dr. Shetty Suraj Ravindra**

Date of Birth & Age : **28/04/1989**

Present Designation : **Senior Resident**

Department : **Orthopaedics**

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

City : **Mangaluru**

Campus Address of Resident : **Residents Quarters No - 702
AJIMS Campus
Mangalore-575004**



Permanent Address of Resident: **S/o Mr. Ravindra V. Shetty
#9-37A, Sri Kripa
Kadekar Post, Kannarpady Road
Ambalpady, Udupi -576103**

Contact Particulars : Office : **0824-2225533**
E-mail address : **surajrshetty994@gmail.com**
Mobile Number: **9820017655**

Date of joining present institution : **January 13, 2021 as Senior Resident**

Qualifications:

Qualification	College	University	Year	Registration No. of UG & PG with date	Name of the State Medical Council
MBBS	JSS Medical College, Mysore	Rajiv Gandhi University of Health Sciences, Bangalore	April 2016	No: 115119 Dt: 18/05/2016	Karnataka Medical Council
MS Orthopaedics	A.J. Institute of Medical Sciences & Research Centre, Bangalore	Rajiv Gandhi University of Health Sciences, Bangalore	2019	No: 115119 Dt: 11/01/2021	Karnataka Medical Council

Details of the teaching experience

Designation	Department	Name of Institution	Joining Date	Relieving Date	Total Experience in years & months
Junior Resident- 1	Orthopaedics	A. J. Institute of Med. Sciences & Research Centre, Mangaluru	02/05/2016	01/05/2017	1 Year
Junior Resident- 2	Orthopaedics	A. J. Institute of Med. Sciences & Research Centre, Mangaluru	02/05/2017	01/05/2018	1 Year
Junior Resident- 3	Orthopaedics	A. J. Institute of Med. Sciences & Research Centre, Mangaluru	02/05/2018	28/05/2019	1 Year 26 Days
Senior Resident	Orthopaedics	A. J. Institute of Med. Sciences & Research Centre, Mangaluru	13/01/2021	Till Date	