

Pro-Forma for Display of Information on the College Website (Annexure-A)
The Following Details are mandatory to be filled

MAY - 2026

S. No.	Information of the Hospital	Remarks
1	Date and Year of Registration of the Hospital (DD/MM/YYYY)	19/04/2016
2	Number of Beds	372 BEDS
3	Number of Beds for emergency	30 BEDS
4	Inpatients registered and admitted (Previous month record)	1727
5	Outpatients registered (Previous month record)	13925
6	Number of Deaths reported to the Municipality / village register(month-wise) (Previous month record)	35 DEATHS
7	Address and pin code of the Corporation / village where the Death records are reported	BDO OFFICE PANTHAL, 182320
8	Website link / email ID/ hyperlink of the corporation in case Death Records are reported	https://dc.crsorgi.gov.in
9	Number of Births reported(month-wise)	21 BIRTHS
10.	Name of the Grievance Redressal Officer (PIO & CPIO):	-----
11.	Grievances reported	NIL

30. Department Wise List of Faculty Members & Publications

S. No.	Departments	Link
1	Department Of Anaesthesiology	View
2	Department Of Anatomy	View
3	Department Of Biochemistry	View
4	Department Of Community Medicine	View
5	Department Of Dentistry	View
6	Department Of Dermatology	View
7	Department Of ENT	View
8	Department of Forensic Medicine	View
9	Department Of Hospital Administration	View
10	Department Of Medicine	View
11	Department Of Microbiology	View
12	Department Of Obstetrics & Gynaecology	View
13	Department Of Ophthalmology	View
14	Department Of Orthopaedics	View
15	Department Of Paediatrics	View
16	Department Of Pathology	View
17	Department Of Pharmacology	View
18	Department Of Physiology	View
19	Department of Psychiatry	View
20	Department Of Radiation Oncology	View
21	Department Of Radio-Diagnosis	View
22	Department Of Surgery	View
23	Department Of Transfusion Medicine	View