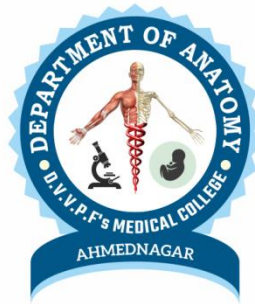


DR. VITHALRAO VIKHE PATIL FOUNDATION'S
MEDICAL COLLEGE & HOSPITAL



DEPARTMENT OF ANATOMY

**INFORMATION
BOOKLET**

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1. INTRODUCTION

Department of Anatomy is developed when Dr. Vithalrao Vikhe Patil medical college is well established under the long-term and prosperous distant vision of Dr. Vithalrao Vikhe Patil Foundation in August 2004 after fulfilment of all norms and guidelines prescribed by the Medical Council of India. Being a basic science subject it is the first department required and developed accordingly under the eminent guideline and capacity of our previous Heads of department Dr.M.S.Farooqui (From 3/08/2004 to 3/01/2005) and Dr.B.R.Zambare (From 4/01/2005 to 6/11/2016). Under their tremendous efforts and excellence guidelines department reached such a competent level to give basic knowledge of anatomy. Presently the department is developing under the leadership of Dr. Pawar Sudhir E. (From 7.11.2016 to till date).Being newly established in early budding phase department established and shifted from one building to another as per need of new development , but later on stabilized and developed to its full extent in Medical college Block II on the ground floor, with a special feature that Dissection hall is isolated from the main building (so that minimum disturbance of formalin to rest of departments and faculties). Now every year department is gradually upgraded with the help of experienced faculty so that advanced updated knowledge will be available. Initially, the main focus was on undergraduates' (100 intake Capacity till 2010). Later on, undergraduates' intake capacity increased to 150 since 2011-12. Now recently college received the permission for 200 intake capacity by NMC after doing proper inspection. Meanwhile the department developed keeping in mind postgraduate as well as Ph.D. students. Being a basic science subject we know the need for anatomy knowledge not only to medical students but also to paramedical faculty students from Physiotherapy, General and Post basic BSc Nursing. Keeping in mind we have developed all required things in our department. Now we are providing teaching to 200 medical students. 50-Physiotherapy students, 100-General nursing, and 50-Post Basic B.Sc. Nursing students. Till now 4 students have been awarded PhD from our department which is affiliated to MUHS. Now we are confident that we can provide sound knowledge platform to all kinds of students with a maximum depth of concepts with well-experienced faculty members and good quality infrastructure.

2. VISION & MISSION:



Vision:

“To inculcate the sound knowledge and confidence of anatomy to all students and to promote application of anatomy in clinical experience.”

Mission:

- To make Anatomy easier and interesting from its tedious and complex present Existence by teaching topic-wise knowledge and skills
- To impact research-oriented teaching along with regular text teaching on the Students.
- To involve students as well as teachers for more number of projects and research Work.
- To nurture the minds of students for all competitive examinations globally.
- To develop more comfortable and easier online teaching platform for both students and teaching staff to face any Pandemic situations.
- To broaden and fasten the body donation awareness among all age groups of people in society by giving continuous counseling and using various other social media.
- To develop due respect towards the cadavers by applying AETCOM modules (1.1&1.5)
- In the present era of CBME and student centric education to motivate students by Early Clinical Exposure (ECE), Self-Directed Learning (SDL), and Integrated Teaching (IT)
- To educate the student to function as an efficient and competent physician
- To develop academically stronger to make them competent concern with slow learners

3. LIST OF HODS

Sr.No.	Name of the HOD's	From	To
1.	Dr.M.S.Farooqui 	3/08/2004	3/01/2005
2.	Dr.B.R.Zambare 	4/01/2005	6/11/2016
3.	Dr.S.E.Pawar 	7/11/2016	Till date

4. INFRASTRUCTURE OF THE DEPARTMENT

Department of anatomy is fully developed and established in Block II on the ground floor of Medical college. It is occupying 2534 sq.mtrs. area. It has all basic amenities required for teaching as per norms of NMC. Following infrastructure is available in the department of Anatomy-

Teachers Rooms -

- | | | |
|----|--|--|
| a) | Professor and HOD: | 18 sq.mtrs |
| b) | Associate Professors/s: | i) 16.10 sq.mtrs
ii) 17.13 sq.mtrs |
| c) | Asst. Professors/s: | i) 17.88 sq.mtrs
ii) 13.46 sq.mtrs
iii) 12.18 sq.mtrs
iv) 12.18 sq.mtrs |
| d) | Tutors/Demonstrators/Senior Residents: | i) 25.02 sq.mtrs
ii) 25.02 sq. mtrs
iii) 10.51 sq.mtrs
iv) 10.51 sq.mtrs
vi) 12 sq. mtrs |
| e) | Non-teaching and clerical staff: | 13.79 sq. mtrs |

Demonstration Room:



- a) Number : 02
- b) Accommodation (of each demonstration room)
 - i) Size - 1) 68.05 sq. meter 2) 98.36 sq.meter
 - ii) Capacity - 80 each
- c) Audio-visual equipment available. - Yes
 - ✓ Slide projector
 - ✓ View box
 - ✓ LCD
 - ✓ Black board
 - ✓ Skeleton

Departmental Library-cum-Seminar Room:



b) Accommodation – 30

c) Size : 33.00 sq. mtrs

ii) Capacity : 30

c) Number of books in Anatomy and allied subjects : 125

d) List of Journals : 01

Indian - Journal of Anatomical Society of India

Practical Laboratories

A) Dissection Hall



a) **Accommodation: 200**

b) Size : 463 sq. mtrs.

c) Capacity : 200

d) Number and arrangement of tables

i) Big : 20 ii) Small : 05

e) Hygiene and Drainage facilities for Disposal of Discarded parts. - Yes

f) Mode of disposal of discarded parts: BIOCLEAR Systems Pvt. Ltd through Ahmednagar Municipal Corporation.

g) Washing arrangement : Yes

No. of washbasins provided : 16

h) No. of lockers provided for students : 200

i) Lighting and exhaust arrangements : Yes

j) Special Instruments other than routine Dissection sets (Such as Electric saw etc.)

- Meat cutting machine with band saw



-Body embalming machine -02

-Cooling cabinets -02

k) Extra Learning Aids provided in the Dissection Hall :

-Skeleton 04

-Charts - 61

- Blackboard

-X –ray view box

-Specimens/organs for revision (Skeleton, Charts, Black Board etc.)

l) Cadaver Preservation Facilities :



i) Embalming room

- Size : 26.62 sq. meter
- Location : Attached to Dissection Hall

ii) Storage Tanks



- Number :Total 09 i) 7 movable ii) 2 Fixed
- Size : i) Movable – 06'5 x 3'11 x 3'11 ii) Fixed – 7 x 3'5 x 3'5

iii) Cold room/cooling cabinets



- Size - 26.72 sq. mtrs
- Capacity – 15 – 18 bodies

iv) No. of Cadavers available - 40

v) No. of students allotted per cadaver -10

Histology Laboratory -



(a) Accommodation

- Size - 218.25 sq. mtrs
- Capacity : 60

(b) Working arrangement

- a. Seats available - 60
- b. Cupboard for storage of microscope slides etc. - 04
- c. Number of Microscopes - i) Monocular -130 ii) Dissecting - 05
- d. Number of students to each Microscope – One student per microscope

(c) Preparation room

- Size : 13.36 sq. meter
- Location : Attached to Histology laboratory

(d) Whether Laboratory Manuals kept by students? - Yes

(e) **Teaching aids available :**

- **Demonstration Microscopes**
- **Micro slide projector**
- **Histology slides**
- **LCD projector**
- **Black board**
- **Charts on wall**
- **Display of Atlas histological diagrams for revision/small group teaching**

Instruments:

1. Monocular Microscope – 130
2. Binocular Microscope -- 02
3. Dissecting Microscope -- 05
4. Double Demo Eye Piece – 02
5. Projection Microscope (Acculab) -- 01
6. Wide Field Pointer Eyepiece -- 04

Research Laboratory:



a) Size ; 56.29 sq. mtrs

b) Equipment :

1. Autoclave -- 01
2. Centrifuge Machine –01
3. Hot Air Oven –01
4. Hot plate - 01
5. Incubator – 01
6. Incubator (Bacteriological) --01
7. Thermostatic Water Bath –01
8. Microtome – 03

Anthropometric Laboratory :



Area = 33.00 sq meter

Accommodation = 30

Instruments =

1. Anthropometric Tape – 01
2. Goniometer 360 degrees –01
3. Harpenders Calliper (for skin fold thickness) –01
4. Mollison Craniophor combined -- 01
5. Sliding Caliper Martin Type – 01
6. Spreading Caliper pointed – 01
7. Vernier Caliper – 01
8. Weighing Machine Cap 5 kg -- 01
9. Weight Machine Adult – 01

Museum:





- a) Size : 233.77 sq. mtrs
- b) How many specimens : 520
- c) No. of catalogues of the specimens available to the students. : 720
- d) Specimens in Embryology, Neuroanatomy, Histology, Gross Anatomy
 - Gross Anatomy - 358
 - Embryology – 57
 - Neuroanatomy – 64
 - Cranial nerves - 49
- a) Display of Microscopic sections of normal developing tissues – system wise.
 - Charts, Models, Histology slides are available.
- b) Are the microscopic sections of the specimens available for study to the students?
 - Yes
 - Histology slides
- c) Number of Microscopes & X-ray view Boxes available to students in the Museum.



- ✓ 05
- ✓ 03 X –ray view box
- ✓ 03 Rotational Hexagonal drums (capacity of 12 each)
- d) List of exhibits other than the specimens. – Yes
 - ✓ Models – 201
 - ✓ Charts -48
 - ✓ X – rays plates -101
 - ✓ CT & MRI plates - 35
- e) Radiological & specialized imaging exhibits :
- Number Adequate
- Type
 - ✓ X – rays plates -101
 - ✓ CT & MRI plates - 35
- f) Charts, Skeletons etc. Charts : 48
 - ✓ Skeletons – Articulated 09
 - ✓ -Disarticulated 35
- g) Seating arrangement for students - Yes
 - ✓ Number 50
 - ✓ Type - Writing chairs & Stools available
- h) Preparation and storage rooms – Yes
- i) Attached rooms – Yes
 - i. 15 sq.mtrs.
 - ii. 13 sq.mtrs.

5. FACILITIES AVAILABLE IN THE DEPARTMENT

Department of anatomy provides following facilities-

Academic:






- Teaching for Undergraduate MBBS students.
- Teaching for Ph.D. students
- Teaching for Paramedical students from Physiotherapy, General nursing & Post basic nursing
- Provision of specimens for development of museums /skill lab at other departments.
- Provision of cadavers to orthopaedics and ENT department for various workshops.
- Provision of cadaver for Mock Autopsy to pathology department for PG teaching.
- Provision of cadavers/body parts (like Skin) to other authorized institutes for research /teaching purposes only.


Non-Academic:

- Body donation for voluntary donors and unclaimed bodies referred from police station.
- Organ donation awareness counseling for organ donors.
- Embalming for the dead bodies on request for distant traveling.
- Providing cold storage facilities to keep dead bodies for some hours before shifting to their native concerned place.
- Providing formalin to various departments as per their need.
- School children visits Anatomy museum.
- Museum visits to interested common man in society.

6. LIST OF TEACHING STAFF

Sr No	Name Of Staff	Designation	Total teaching experience	Photo
1	DR. PAWAR SUDHIR EKNATH R. No. 8712 Dt: 13/07/ 1998	Professor And Head	22Years	
2	DR. MRS. JADHAV SUREKHA DILIP R. No. 55543 Dt: 14/01/1986	Professor	16 Years	
3	DR. MS. FATING ANITA SHRIRAM R. No. 2002/02/636 Dt: 21/02/2002	Asso.Prof. (04/05/2015 to 31/5/2021)	17 years	
4.	DR. MRS. MARATHE NAMRATA PIYUSH R. No. 2006/11/3425 Dt: 07/11/2006	Asso.Prof.	11 years	
5	MR. LINGASWAMY VEERAMALLA	Asst.Prof.	13 years	
6	MR. RAJESWARA RAO N	Asst.Prof.	10 years	

7	MR. GUNTHA CHINNA NAGARAJU	Asst.Prof.	8 years	
8.	Dr Archana Patil	Assistant professor	4 years	
9.	Dr Gavhane Ganesh	Tutor	1 year	
10	Dr Rahul Kahar	Tutor	2 months	
11	Dr Dhanorkar Nilofer	Tutor	1 year	
12	Dr Parjane Gayatri	Tutor	1year	
13	Dr Patil P.D.	Tutor	5 years	

14	Dr Bohari A. A	Tutor	17 years	
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RESPONSIBILITIES

Sr No	Name Of Staff	Designation	Responsibilities
1	DR. PAWAR SUDHIR EKNATH	Professor And Head	<ul style="list-style-type: none"> Administration of department MBBS teaching(Embryology) Teaching Planning of MBBS, BPTH & Nursing Finalizing duties of teaching & body donation. Organization of CME/Workshops/Body donation programs Museum upgradation Planning of all Internal UG examinations Paper setting Motivation of staff for research . Motivation of staff for preparation of specimens. Cranial nerve Museum Incharge In-charge of Anti-ragging committee Member secretary of foudation course In-charge of Examination Cell Member of Right to information committee CAP director for UG/PG/MMSPCC/MPCC
2	DR. MRS. JADHAV SUREKHA DILIP	Professor	<ul style="list-style-type: none"> Time table preparation for MBBS MBBS teaching (Gross Anatomy) &Paramedical teaching Museum specimen preparation Cranial nerve museum related work







			<ul style="list-style-type: none"> ▪ Paper setting ▪ conduction of examinations internal/universities ▪ NAAC departmental coordinator ▪ Criteria VI coordinator ▪ Social cell coordinator ▪ Body donation related work ▪ Research cell member ▪ Dissection Hall incharge
3	DR. MS. FATING ANITA SHRIRAM	Associate Professor	<ul style="list-style-type: none"> ▪ MBBS Teaching (Histology) & Paramedical teaching ▪ Integrated teaching in charge ▪ NAAC III criteria member ▪ Paper setting ▪ Member food committee ▪ Member Academic cell ▪ Body donation Related work ▪ Foundation course member
4.	DR. MRS. MARATHE NAMRATA PIYUSH	Associate Professor	<ul style="list-style-type: none"> ▪ MBBS Teaching (Histology) & Paramedical teaching ▪ Integrated teaching incharge ▪ NAAC all criteria Feedback incharge ▪ Paper setting ▪ Member food committee ▪ Member Academic cell ▪ Body donation Related work ▪ Cranial nerve museum related work. ▪ Research lab incharge ▪ Bone bank incharge



5	MR. LINGASWAMY VEERAMALLA	Assistant Professor	<ul style="list-style-type: none"> ▪ MBBS teaching (Gross Anatomy & Embryology Models) & Paramedical teaching ▪ BPTH teaching schedule in-charge ▪ Paper setting for BPTH ▪ Body donation related work ▪ NAAC III criteria Coordinator ▪ Muhs IVS/ Relieving supervisor work ▪ Museum specimen preparation ▪ Gross anatomy museum in-charge ▪ Cranial Nerve Museum related Work
6	MR. RAJESWARA RAO N	Assistant Professor	<ul style="list-style-type: none"> ▪ MBBS teaching (Gross anatomy) & Paramedical teaching ▪ GNM teaching shedule incharge ▪ Museum specimen preparation ▪ Cranial nerve museum related work ▪ Gross Anatomy museum incharge ▪ Body donation related work ▪ Muhs exam Jr. supervisor. work
7	MR. GUNTHA CHINNA NAGARAJU	Assistant Professor	<ul style="list-style-type: none"> ▪ MBBS teaching (Gross anatomy) & Paramedical teaching ▪ PBBSc Nursing teaching shedule in charge ▪ Departmental Library incharge ▪ Anti-ragging committee member ▪ Cranial nerveMuseum related work ▪ Asst. custodian for CAP, junior supervisor and IVS for MUHS exams ▪ Social cell member ▪ Total Quality Managemet (TQM)

			committee- Secretary
8.	Dr Archana Patil	Associate professor	<ul style="list-style-type: none"> ▪ MBBS Teaching (Gross anatomy) & Paramedical Teaching ▪ Body donation related Work ▪ Museum specimen preparation ▪ Cranial nerve museum related work ▪ MUHS Exam Jr Supervisor
9.	Dr Gavhane Ganesh	Tutor	<ul style="list-style-type: none"> ▪ MBBS small group teaching (Osteology Teaching) ▪ Conduction of UG dissection/Histology practical's ▪ Assisting to prepare Museum specimens. ▪ MUHS University Jr. supervisor. ▪ Assisting senior teachers in various work.
10	Dr Rahul Kahar	Tutor	<ul style="list-style-type: none"> ▪ MBBS small group teaching (Osteology Teaching) ▪ Conduction of UG dissection/Histology practical. ▪ Assisting to prepare Museum specimens. ▪ MUHS University Jr. supervisor. ▪ Assisting senior teachers in various work
11	Dr Dhanorkar Nilofer	Tutor	<ul style="list-style-type: none"> ▪ MBBS small group teaching (Osteology Teaching) ▪ Conduction of UG dissection/Histology practical ▪ Assisting to prepare Museum

			specimens. <ul style="list-style-type: none"> ▪ MUHS University Jr supervisor. ▪ Assisting senior teachers in various work
12	Dr Parjane Gayatri	Tutor	<ul style="list-style-type: none"> ▪ MBBS small group teaching (Osteology Teaching) ▪ Conduction of UG dissection/Histology practical. ▪ Assisting to prepare Museum specimens. ▪ MUHS University Jr. supervisor. ▪ Assisting senior teachers in various work
13	Dr Patil P.D.	Tutor	<ul style="list-style-type: none"> • MBBS small group teaching (Osteology Teaching) • Conduction of UG dissection/Histology practical • Assisting to prepare Museum specimens. • MUHS University Jr. supervisor. • Assisting senior teachers in various work
14.	Dr Bohari A. A	Tutor	<ul style="list-style-type: none"> • MBBS small group teaching (Osteology Teaching) • Conduction of UG dissection/Histology practical • Assisting to prepare Museum specimens. • MUHS University Jr. supervisor. • Assisting senior teachers work

7. NON-TEACHING STAFF

Sr No.	Name	Designation	Photo
1	Mrs Sonali Bhadange	Technician	
2	Ms Pramila Shinde	Clerk	
3.	Mr Balu Chavan	Attendant	
4.	Mr Raju Kadam	Attendant	
5`	Mr raosaheb Angre	Attendant	
6	Mr Shyam Sulakhe	Attendant	

7.	Mr Sathe Deepak	Attendant	
8.	Mr.Laxman Kadam	Sweeper	

RESPONSIBILITIES

Sr. No.	Name	Designation	Responsibility
1	Mrs.Sonali Bhadange	Technician	<ul style="list-style-type: none"> -Preparation of histology slides for practical -Care of Microscopes in histology laboratory -Preparation of new histology slides in research laboratory. -Keeping all donated /unclaimed bodies record -Body donation related work. -Maintaining attendance in histology practical -Helping to keep files updated in office. -Helping to conduct internal/University exams. -Helping for NAAC related work of criteria
2	Ms Pramila Shinde	Clerk	<ul style="list-style-type: none"> -To keep documentation in office file update- -To see all circulars coming from dean office/student/HR section -To keep attendance record of all students. -To keep leave records of all teaching staff. -To send Maintenance call to concerned departments through protocol. -To send monthly attendance record of staff for salary purposes. -To calculate internal assessment marks and to send to student section. -Helping for body donation related work. -Helping for internal /MUHS exam related work. -Helping for NAAC related work of criteria
3.	Mr Balu Chavan	Attendant	<ul style="list-style-type: none"> -To take out /keeping back cadavers from tanks for dissection. -To do cleaning in dissection hall. -to take care of formalin level in storage tanks

			<p>and museum specimens jars.</p> <p>-To give formalin to required department as per need.</p> <p>-To help during internal/ university practical exams.</p> <p>-To collect bodies for donations/ from Shirdi police station.</p> <p>-To help in departmental office work as per need.</p> <p>-To help in MUHS CAP related work.</p>
4.	Mr Raju Kadam	Attendant	<p>-To take out /keeping back cadavers from tanks for dissection.</p> <p>-To do cleaning of Teachers rooms/department office/HOD Room</p> <p>-To help during internal/ university practical exams.</p> <p>-To collect bodies for donations/ from Shirdi police station.</p> <p>-To help in departmental office work as per need.</p> <p>-To help in MUHS CAP related work.</p>
5	Mr Raosaheb Angre	Attendant	<p>-To take out /keeping back cadavers from tanks for dissection.</p> <p>-To do cleaning in Histology/Demo Rooms</p> <p>-to take care of formalin level in museum specimens jars.</p> <p>-To help during internal/ university practical exams.</p> <p>-To collect bodies for donations/ from Shirdi police station.</p> <p>-To help in departmental office work as per need.</p> <p>-To help in MUHS CAP related work.</p>
6	Mr Shyam Sulakhe	Attendant	<p>-To take out /keeping back cadavers from tanks for dissection.</p>

			<ul style="list-style-type: none"> -To do cleaning in dissection hall. -to take care of formalin level in storage tanks and museum specimens jars. -To give formalin to required department as per need. -To help during internal/ university practical exams. -To collect bodies for donations/ from Shirdi police station. -To help in departmental office work as per need. -To help in MUHS CAP related work.
7.	Mr Sathe Deepak	Attendant	<ul style="list-style-type: none"> -To take out /keeping back cadavers from tanks for dissection. -To do cleaning in dissection hall. -to take care of formalin level in storage tanks and museum specimens jars. -To give formalin to required department as per need. -To help during internal/ university practical exams. -To collect bodies for donations/ from Shirdi police station. -To help in departmental office work as per need.
8.	Mr.Laxman Kadam	Sweeper	<ul style="list-style-type: none"> -To do cleaning of Gents/Ladies toilets twice a day. -To clean toilet of HOD room twice a day.

8. VARIOUS COURSES TAUGHT IN THE DEPARTMENT

Department of Anatomy Provides teaching for various courses students as follows-

- For 200 Undergraduate MBBS students
- For 50 BPTH students
- For 100 General nursing students
- For 50 Post basic nursing students

9. TOPPERS / DISTINCTION HOLDERS IN ANATOMY

Year	Name of Student	Marks Obtained
2008	Nair Suraj Surendran	148/200
2009	Dugad Anand Rikhabchand	140/200
2010	Mishra Rahul Ashok	141/200
2011	Telang Bhushan Milind	149/200
2012	Vadke Shantanu Satish	149/200
2013	Modak Aditya Prasad	151/200
2014	Upadhyaya Prabhakar Indrajeet	151/200
2015	Binayke Mitali Vinay	151/200
2016	Chavan Shubham Rakesh	159/200
	Ghogare Mansi Ravindrakumar	157/200
	Arote Devyani Vijay	155/200
	Khande Siddheshwor Gorakshanath	154/200
	Motiwalu Dhruvi Prayesh	154/200
2017	Kshirsagar Trisha Anay	153/200
	Patil Rishabh Shankar	150/200
	Sahani Varsha Ramjatan	151/200
2018	Lande Sagar Janardhan	159/200
	Pandey Surabhi Yogendra	151/200
2019	Vaishnavi Ravi	171/300

10. STANDARD OPERATING PROCEDURES OF DEPARTMENT (SOP)

1. SOP for Dissection Hall:

- Usually, one teacher is given responsibility for control and smooth functioning of dissection hall activity.
- Being very important and more activities in dissection hall one junior assistant is allotted to help senior responsible person in dissection hall.
- Two attendants are allotted for cleaning and other helping purposes under the guidance of senior teachers including maintenance of dissection hall regularly.
- Following are most important activities carried out in dissection hall.
 - ✓ 1. Dissection of cadavers by phase –I students
 - ✓ 2. Prosection for paramedical students
 - ✓ 3. Receiving of cadavers
 - ✓ 4. Embalming
 - ✓ 5. Storage of cadavers
 - ✓ 6. Section taking for learning purpose.
 - ✓ 7. Storage of Organs/specimens
 - ✓ 8. Disposal of remains at the end of year.

SOP for dissection by phase –I students:

- When newly admitted students enter in dissection hall usually after Dean's address in afternoon, all are asked to seat on one side.
- Allotment of roll number is done. Also students are allotted there dissection tables as per there roll numbers and asked not to change this seating arrangement throughout year.

- Once all students get settled down on their allotted dissection table number. Welcome speech is given by HOD and introduction of all staff members is done.
- All rules regarding discipline in dissection hall is instructed by senior teachers which should be followed throughout years. Instructions are –
 - ✓ to take care of hairs and nails
 - ✓ To wear formal decent dress codes for boys and girls
 - ✓ To wear black shoes for boys and sports shoes for girls
 - ✓ To fold long sleeves up to elbow jt. for boys and to wear rubber band/hair band for girls with long hairs.
 - ✓ Requirement of dissection box with instruments and Cunningham manual volume (required volume only)
 - ✓ Requirement and to procure bone sets individually or among two students only.
 - ✓ Any type of photography is strictly prohibited. Mobiles are not allowed.
 - ✓ Respectful behavior with teachers and attendants for any help.
- Time table and all teaching activities in department are explained properly. Then campus visit is arranged to have campus orientation with the help of one teacher from each departments of phase I
- Information regarding required books is given. In the next 2-3 days Medical book seller is introduced and arrangement of copies of books is done to show the students required available books and instruments.
- For the first 10 to 15 days students are asked to sit as per allotted arrangement on their dissection tables and asked to read first introductory pages of Cunningham volume -I
- On second day batch teachers are allotted and introduced to batch once again. Batch teachers are rotated after completion of two region dissection.
- One teacher per four tables as per availability allotted as batch teacher who will guide students through year for dissection, histology practical and any other difficulties.

- For small group discussion i.e. demonstration four teachers are allotted per 37 students.
- All senior teachers will be present during dissection hours in dissection hall to help batch teachers and students with any difficulties. They will take round on all tables.
- Region-wise time table will be prepared and displayed in notice board by one responsible senior teacher after discussion and confirmation by HOD.
- Once schedule is confirmed, hard copies of this schedule are given to each teacher to know his activity properly. One copy is displayed on office notice board and one copy on student notice board.
- Day wise dissection scheduled topic is written by clerk on black board every day for easy lookout.
- All students are asked to follow this schedule strictly so as to finish dissection in time.
- Before starting of actual dissection, cadaveric oath is given to all students which explains importance of cadavers and due respect to cadavers. Then actual dissection schedule starts. First information and function of all instruments explained by batch teachers and then incision is taken to explain technique and skill of dissections. All safety pre cautioned during dissection explained well to avoid unwanted injuries.
- At the end of every region revision, part end examination is arranged to have practice of oral viva.

SOP for emergencies in Dissection Hall:

- Emergencies can occur in dissection hall –
 - ✓ Student may fall down due to dizziness may be due to hypoglycaemia, medical illness, allergy to formalin or first fear of cadavers.
 - ✓ Nausea due to formalin
 - ✓ Skin allergies due to formalin
 - ✓ Sudden contamination of eye with formalin
 - ✓ Cut injuries during routine dissection or during handling of meat cutting machine
- Whenever students fall down, with the help of wheel chair he/she brought to ventilated area under Fan.
- Tightened Apron is made loose. With the help of senior persons his/her vital signs are checked. Short history is taken regarding morning breakfast, any treatment going on for present illness, sweating and monitored further for some time,
- If looking like hypoglycaemia, then immediate Glucon-D with clean water and available sweets in form of biscuits/Chocolate is given to maintain sugar levels. If he/she felt better and improved with this then some more rest is given and then asked to join the table.
- Cases of nausea are counselled not eat excess in breakfast or avoid oily food. If not cured referred to medicine OPD for underline illness treatment.
- If history of previous illness and little worsened condition then emergency ambulance is called from hospital and case is informed to CMO casualty immediately to check it on prior basis for further line of treatment. He/she will be accompanied by either roommate or table colleagues.
- If sudden contamination by strong formalin in eyes, then immediately asked to wash eyes with running clean water for more time, so formalin may get diluted will stop irritation. If it is more irritating after first aid treatment then asked to report to ophthalmology department for further guidelines.

- Cases of skin allergies identified and referred to skin department for further guidelines.
- Cases of first fear of cadavers given counselling, not to worry about it and assured that slowly this fear will go on.
- Cases of cut injuries given first aid treatment of cleaning by antiseptic solution and dressing and asked to take T.T. injections from casualty on that day only.
- If cut injury is of large scale and looking like serious, then referred to surgery department for further treatment.
- Intercom facility is available continuously in dissection hall for contacts in various parts of department and hospital.

2. SOP for Prosection for paramedical course students:

- Apart from phase I MBBS course teaching, paramedical students from Physiotherapy, B.Sc., and General nursing students also taught anatomy for prescribed hours.
- For B.PTh. course total 210 hours (150 didactic lectures & 60 practical) are allotted and for B.Sc. Nursing course 30 lectures and for General nursing 23 lectures are allotted.
- As dissection is not a part of their curriculum, so already dissected parts done by phase I MBBS students preserved in storage tanks for teaching purposes. These dissected parts are shown as per schedule to the students is called prosection.
- After every prosection Attendant will keep that dissected parts back in storage tanks.
- Examinations are also arranged on this dissected part for these paramedical course students especially for B.P.Th. students.

3. SOP for Receiving of Cadavers:

- As we know that dead body what we call 'Cadaver' is the only source to understand the anatomy practically by doing dissection. Without cadaveric dissection it will be incomplete anatomy. So requirement of enough number of cadavers is most important. We have two sources for this-
 - i) Unclaimed bodies
 - ii) Voluntary body donation
- We do regular body donation camps to increase awareness of peoples in society towards body donation. Now a day we get average 8 to 10 cadavers per year by voluntary donation.
- Other source is unclaimed bodies which we get from police station, Shirdi, Ahmednagar. Under the Maharashtra anatomy act 1949 (Bombay Anatomy act 1949), Shirdi police station after doing Panchnama handover the unclaimed bodies of beggars to us for teaching and research purposes. By this we get average 6 to 8 cadavers per year. So, totally approximately 16 to 18 cadavers are received per year by us. After receiving cadavers we keep all documentary record for it in department by maintaining Body stock register.

SOP for Unclaimed Bodies:

- First on-duty police havaladar from Shirdi police station informs to our hospital operator regarding bewaras (i.e. unclaimed) dead body. They want to handover it to medical college for education purpose.
- At department level we make duty list of faculty for every month in rotation for body donation work. Their contact details are provided to hospital operators for 24 hours service. We send name of faculty & his/her details who is on duty to the operator on the 1st day of that month.
- Hospital operator informs to on call faculty member of department of anatomy regarding donation of unclaimed body from Shirdi police station.

- On duty faculty member call back to Shirdi police station and confirms that death is of natural type and what is probable time of death.
- If death is of natural type and within 4 to 5 hours, then on duty faculty member informs and assured them regarding further arrangement for collection of dead body from our hospital team.
- He makes arrangement for ambulance with driver and our departmental two attendants for collection of dead body.
- After arrival at Shirdi police station, they send this unclaimed dead body with their reference letter towards Primary health center, Rahata for declaration of death by govt. medical officer and for record purpose.
- Then Xerox copy of reference letter to PHC, Panchnama & dead body are handover to our attendants and ambulance driver.
- That unclaimed dead body is brought to department of anatomy.
- All police documents are kept properly, once again confirmed and signed by on duty faculty member. Later on all documents are shown to HOD.
- If dead body arrived at odd time then it is kept in Cold storage at 4° temperature.
- On duty faculty member will submit all these documents in department office to concerned technician.
- Concerned technician keep all this documents in record file and do entry in body stock register which is maintained in department and take signatures of concerned on duty faculty member and HOD.
- This body stock record book is certified by HOD at the end of every academic year.
- After completion of all this procedure, embalming is carried out and specific number (sequence number/year) in sequence written on manjarpat cloth with election ink is stitched to ear for identification purpose.
- Then body is shifted to storage tank which contains 10% formalin solution.

- This body is under observation for next six to seven days to see whether embalming is done proper and body is preserved well or not.
- If embalming is not proper may be due to internal pathologies, then it get Putrefied. Such cadavers smells very badly and we have to buried deeply in burial ground immediately with the help of garage department by arranging vehicle for transport up to burial ground.
- These storage tanks are always under observation of dissection hall in charge for proper maintenance of cadavers.
- If there is fungal growth or water become dark yellow means formalin strength is reduced, then water has to be changed for such tanks and new strong formalin has to be add into them.
- If relatives afterwards came in search of their missing nearby to confirm the received body from police station through police permission letter, we allow to see the received cadavers. If they confirmed with birth marks, then after informing to police station we return it to their relatives. We took detailed information and signatures of relatives who are taking that body for further vidhis.

SOP for Voluntary Donation:

- Body donation forms are freely available at department of anatomy during working hours.
- Donors or his/her relatives can collect this form on their request from our department in working hours.
- Our trained on duty faculty member and concerned technician give all information regarding body donation form and procedure to person who want to donate his/her body and their relatives.

- Relatives can submit that completely filled form with two ID card photo and aadhar card document Xerox copy within next 7 days personally or through relatives or by post also.
- After checking all detailed information, entry is done in office register. Abhar patra is handed back to them which is signed by HOD and stating thanks for their great will to donate his /her body to institute for teaching purpose.
- Now whenever death occurs, relatives are asked to call to hospital operator immediately within max 4 to 5 hours. Service is available 24 hours.
- Hospital operator informs on duty faculty member regarding this voluntary body donation and gives contact numbers of relatives to him.
- On duty faculty member will contact this relative and confirms regarding natural death and time of death. If death is of natural type and within 4 to 5 hours then he will ask them to arrange Death certificate from their family physician, which confirms cause of death is natural. This certificate is must.
- If all this is assured from relatives then he arranges team for collection of that body.
- Address and contacts numbers handed over to team member and asked to collect body within short time.
- We provide our facilities of transport free of cost up to 75 km distance. If distance is more then we ask relatives to arrange their own vehicle. As technically it is difficult to go and come back within time.
- Then that body along with some relatives brought to department and kept in cold storage at 4° temperature.
- If Body donation form is not filled previously, then it is asked to relatives to fill it newly with all documents.
- If some relatives are coming from distant place, then on their request body is kept for further 6 to 8 hours in cold storage till relatives comes for Antim darshan.

- Once it is over then body is taken for embalming and specific numbered manjarpat cloth written by election ink mentioning number and year is stitched to ear for identification purpose. Then body is shifted to storage tank.
- Relatives informed that afterward legally body is not allowed to see.
- On request of relatives we arrange for body part like great toe or thumb of donor body for further religious Vidhi.
- Then all documents with death certificate submitted in department office for record purpose.
- The concerned technician does all entries and took signature of on duty faculty member and then of HOD in body stock register.
- On next day relatives are asked to collect Body donation certificate (abhar patra) duly signed by respected DEAN and HOD from department office during working hours.
- It is handed over after doing outward entry in office register and taking signature of relatives who is collecting that certificate.

4. SOP for Embalming:

- Embalming is must to avoid decomposition and to preserve cadavers for longer time in good condition.
- Every cadaver is embalmed after receiving and completing documentary record procedure in department.
- Embalming is done in two ways:
 - i) By Embalming Machine
 - ii) By Natural Gravity method (if electricity supply/machine problem)

- For embalming we appoint our trained faculty members on monthly rotation. Under the guideline of such trained staff and with help of attendants embalming is carried out.
- There are two embalming machine in department which are regularly maintained. Near about 8 litres of embalming solution is prepared and filled in machine.
- Embalming solution (8 Litres):
 - Formalin (6 lit)
 - Spirit (1 .5 lit)
 - Glycerin (0.5 lit)
- Embalming is done through either Femoral or carotid artery. Here we usually do it through Femoral artery which is easier.
- Every time machine is cleaned with plain water after procedure to avoid blockage due to dried formaldehyde powder.
- When electricity or machine problem is there, then we follow the natural gravity method, in which big size drum containing 8 litres of embalming solution is kept at higher level so that due to gravity force fluid is injected within cadavers. It takes 12 to 14 hours to complete it. By embalming machine procedure is completed within 15 to 20 minutes.
- After that, we keep the cadaver in storage tank.
- We provide the facility of embalming if required for those dead bodies which have to travel long distance.

5. SOP for Storage of Cadavers

- Once we receive cadaver either by donation or from Shirdi police station i.e. unclaimed, first we do documentary record procedures.
- If cadaver is received at odd time then we keep it in cold storage at 4° temperature.
- During working hours our trained dissection attendants under the guideline of on duty faculty member remove it from cold storage, clean that body and do embalming with embalming solution.
- Embalming solution consists of formalin, spirit and glycerine. After confirming complete embalming then cadaver is shifted to storage tanks.
- We have total 9 storage tanks each having capacity of storing 7 cadavers.
- There are 2 fixed cement tanks and 7 movable S.S. tanks. Within the tank cadavers are kept in 10% formalin solution.

Maintenance of Tanks:

- All tanks are regularly checked (once a week) for solution level or any fungus growth. If fungus growth is there then we use Thymol to control it.
- Tanks are cleaned after 4-5months. First we take out all cadavers from the tank. Each cadaver is washed with clean water. Tank is washed with soap powder & water. After proper cleaning of tank, it is filled by 10% formalin & bodies are kept in tank.

Safety Measures:

1. Persons shall wear disposable gown, long pants, safety glasses or goggles and appropriate gloves when working with cadavers.
2. Closed toed Gum shoes (no sandals or open-toed shoes)
3. Additional barriers like safety glasses, masks, and face shields should be wearing when ever required.

4. Gloves are to be worn while cleaning the tank. Gloves are to be disposed of when overtly contaminated or torn, and removed when work with cadaveric materials is completed or when the integrity of the glove is compromised.
5. Hands must be washed thoroughly with soap and water following removal of gloves.
6. Do not touch electronics, door knobs, models, X-rays etc. with soiled gloves.
7. All attendants are asked to take TT injections as per schedule.

6. SOP for Meat cutting Machine:

- One meat cutting machine is present in dissection hall.
- It is mainly for taking various sections of body as per need to learn anatomy.
- Only trained mama is allowed to operate machine.
- Time to time cleaning and maintenance done from maintenance department of College.
- First planning of section is done with the help of dissection hall in-charge, senior teachers as per need.
- Marking is done on that part and explained to mama in what plane section is to be taken.
- Necessary adjustment is done on machine by trained person and then under supervision of teachers, various sections are taken.
- During sectioning all safety measures precautions are taken. No one is allowed to stand nearby of machine.
- After sections machine is again cleaned.

7. SOP for Storage of organs/specimens:

- Organs are needed for study, revision and examination purpose.
- During the process of dissection this organs and specimens are collected and stored in storage tanks separately.
- Amongst this all, good specimens and organs are preserved for longer duration in storage tank first and then in separate big drums on which labelling is done for easy identification.

- These organs and specimens are utilized for various teaching, examination and project purpose.
- Every year destroyed organs and specimens are replaced by other new good organs and specimens.

8. SOP for Disposal of cadaveric parts:

- For disposal of whatever parts remains after dissection at the end of year, first we sort out it. The parts which we can use for revision, examination or museum are kept back in storage drums in 10% formalin solution.
- Then we hand over small parts (not useful) material through black color plastic bags toward contracted "Bio-clean India private Ltd" agency which work for Ahmednagar corporation.
- This agency vehicle comes every day to collect all this Bio-medical waste material removed during dissection.
- Their contract is renewed every year.
- There is provision of incineration chimney also for disposal of waste product in campus.
- The extremities and bony parts are collected separately and with the help of attendants they are buried at well protected burial ground place for further maceration which is present within the campus under guidelines of faculty member.
- The bodies which get decomposed if embalming is not occurred properly due to vascular pathology, such cadavers also buried at burial place for further maceration under proper guidelines.
- After 5 to 6 months regularly that buried place is reopened to see maceration is completed or not.
- If bones are cleared, then such material is brought to department and once again kept for further maceration in maceration tank for 4 to 5 months again.

- When all soft tissue is removed, then bones are prepared by further procedure in department which is required for teaching purposes.

9. SOP for Preparation of Bones:

- We try at our level to prepare skeleton in department.
- First if body gets decomposed may be due to unsuccessful embalming due to any vascular problem within cadaver. Such decomposed cadavers are buried at burial place which is within the campus at one corner for maceration purposes.
- This place is always under supervision. After 6 to 8 months we remove it if maceration is completed.
- All bones with mass are brought to department with the help of attendants and under guideline of appointed faculty this material cleaned with water and again kept in maceration tanks for further maceration.
- Also the maggots in this tanks help to clean mass and bones become clearly visible.
- Once again all bones with mass washed in clean running water and mass tried to remove from bones. If needed then again we keep it back in maceration tank.
- After removing almost all mass from bones , we keep it to dry under fan (sunlight is avoided as bones get cracks)
- Then we keep all these bones in 10% hydrogen peroxide for 24 to 48 hours for more clearing and to get rid of bad smell. 1 lit Hydrogen peroxide (30%) in 50 lit of water.
- This procedure is under continuous supervision. Bones are observed in between to see progress of action of hydrogen peroxide. Excess exposure is avoided as bones get brittle.
- Then bones are identified and once again dried under fan for one to two days and then painted with touchwood and allowed to air dry.

- Numbers are given to bones and kept in departmental bone bank. Also, at the end of academic year whatever hard material remains after dissection we get, we buried it and follow the same procedure to procure bones.
- These bones from departmental bone bank can be utilized for teaching, museum and project purposes under the guideline of bone bank in charge.

10. SOP for Body donation Camp:

- Body donation is an important movement that we should promote it on priority.
- We do regular body donation camps in society to increase interest of people towards body donations. Cadaveric dissection is must to understand practical anatomy.
- We organize our team to arrange for body donation camps as per request by NGOs in society.
- Our body donation team consists of two senior teachers, two junior teachers, two attendants and one technician with hospital ambulance and driver.
- At department level we appoint faculty teachers every month in rotation for body donation work. Their contact details are provided to hospital operators for 24 hours service.
- During camp, importance of body donation, doubts, myths and body donation procedures are explained with the help of Power Point presentation by senior faculty member.
- At the end we distribute body donation forms. We explains them how to fill it and necessary documents required during submitting it. Even they can submit it afterwards.
- Some time local media peoples are also invited by organizing NGO to give its broad coverage, where interactive interviews are given to peoples doubts regarding donations

- We also provide telephonic guidelines on hospital contact numbers with departmental extension numbers (307/308) or directly on personal mobile numbers with help of operator.
- At department level we allot duties to faculty members month-wise for body donation work and accordingly inform to hospital operator every month for 24 hours help in issues regarding body donation.
- Body donation forms are available free of cost in our department during working hours.
- After receiving completely filled form, first we register it in our body donation book. After that Abhar patra which duly signed by HOD is given to them.
- We give body donation certificate after actual body donation which is duly signed by respected Dean and HOD to their close relatives expressing thankful wishes for their great work of donating body to our institute.
- Gradually the awareness regarding body donation is increasing and people giving more response for donating their body.
- But we have to do continuous efforts to promote and involve them in more number for this great noble work.

11. SOP of Dead Body Stock Register:

- Department of Anatomy maintains the dead body stock record which is checked by every month by senior faculty & HOD.
- At the end of every academic year body stock register is verified and certified by HOD with the help of technician and senior teacher.
- Following information is filled in this register
 1. Body number (number /year)
 2. Date of body received
 3. Name (Donated body)/ unclaimed

4. Sex- M/F
 5. Panchanama/ Death certificate
 6. Name of the Police station/ Hospital
 7. Names of the driver/ Attendant
 8. Name & signature of on duty faculty
 9. Name & signature of HOD
1. Balance of dead bodies
 - Also entries are done if any cadaver is buried /utilized for dissection / handed over to other most needed nearby medical college for academic education purpose only.
 - Physical verification of dead bodies has been done on 30 & 31 December every year by HOD & all faculty members.

DISSECTION HALL SAFETY RULES:

- The following is a list of rules that is designed to ensure safety for those who are working in dissection hall.
 - Failure to follow these safety rules may result in immediate removal from the dissection hall.
 - In addition, violation of the rules may result in a referral to the Dean's Office for disciplinary action.
1. Treat all specimens and cadavers with respect.
 2. Access to the dissection hall is only to faculty, working departmental staff and 1st year students.
 3. Photography and videos of human cadavers are NOT permitted under any circumstances. It will be considered a serious disciplinary offence for a student to take pictures or possess pictures of the College's human cadavers.
 4. Eating, drinking, or gum chewing is not permitted anywhere in the interior of the of the dissection hall.

5. During dissection -closed-toe shoes, gloves, apron and name plate must be worn.
6. No ornaments, mobiles in dissection hall.
7. Gloves must be disposed of properly before leaving the lab.
8. When students are not using the scalpel, the scalpel must be placed with the blade down on table.
9. Use extreme care when using sharp instruments. Keep all dissection instruments in the dissection box.
10. Dispose of scalpel blades ONLY in biohazard containers.
11. At the end of the dissection period, wash your hands with hand soap and water at the designated sink area.
12. The cadaver tanks must be closed at the end of each dissection.
13. If any student splashes with preservative fluid, disinfectant, or specimen fragments into their eyes, immediately notifies their teacher for assistance in thoroughly rinsing them with the water.
14. Teacher will coordinate first aid efforts, including notification to senior professor who will call for emergency medical assistance if needed.
15. If you cut, puncture, or wound yourself with any instruments, notify your teacher for assistance in thoroughly washing and dressing the wound.

12. SOP for maintenance of dissection Hall:

- Two attendants are separately allotted for cleaning and to take care of cadavers other help in dissection hall.
- Every morning first they do dry mop and then wet mop to clean all dissection hall.
- Availability of water is confirmed early in the morning, if not then inform the person concerned with civil department for necessary arrangements.

- All cadavers required for dissection are removed every day from tank by mamas early in morning and again kept back in tank in afternoon.
- All biomedical waste is collected in black coloured plastic bags and proper coordination is done with biomedical waste collection vehicle and handed over to them for further disposal from Ahmednagar Corporation.
- If any machine is not working properly then maintenance call form is sent to concerned department through Administrative Officer.
- Every week soaps and disposable gloves and required other stationary things collected from central store and medical store through proper protocol.

2. SOP For Departmental Library

Index

1. Resources
2. Collection
3. Access and circulation management
4. Donation I Gift I Damage policy
5. Conservation policy
6. Statistics
7. Audit
8. Vision

Definition:

A room containing collections of books, periodicals, for use or borrowing by the members of our department

1. Resources:

Procurement of learning resources constitutes the primary responsibility of library. The Library makes a systematic effort in building up the collection development by identifying, evaluating, selecting, processing and making it available to the users. Since this collection building requires a huge sum of money and has long-lasting repercussions, it is very much essential that libraries have a well thought out collection development policy.

- Printed books from the publishers
- Compact Discs

2. Collection:

The Library aims to acquire collection materials in support of teaching, learning and research.

Materials are selected on the basis of their subject content, following the collection development policies which are agreed in consultation with the academic community.

Total collection: 125

Special collection:

- Complementary 38
- Donation(Books):48
- Donation Journal : 64

Access and circulation management Accessioning:

- ✓ Every document added to the library collection will have an Accession Number. This is a unique number for that document. These numbers are assigned in a bound register called Accession Register
- ✓ The details are entered into the register

Circulation Management

Major activities of the circulation section are:

- ✓ Issue and return of books
- ✓ Attending the user query for effective interpretation of library rules and regulations
- ✓ Registration of new members
- ✓ Sending reminders to over-due documents
- ✓ Maintenance of circulation module of library management, maintenance and updating of all data related to library users
- ✓ Maintaining records related to lost of the book(s)
- ✓ No due issuing
- ✓ Assisting the user's for accessing
- ✓ Managing counter operations during weekends/holidays
- ✓ Attending the users query for effective interpretation of library rules and regulations
- ✓ Granting permission to outsiders to use the library
- ✓ Generating reports and statistics for the circulation
- ✓ Library orientation information

Circulation Timings

Sl.No.	Description	Timing
1	Weekdays (Monday to Friday)	09:00a.m.-05:00p.m.
2	Saturday	09:00a.m.-01:00p.m.
3	Weekends and Public Holidays	No Issue

Issue / Return Procedures

Issue/Return of library materials is the routine operation of any library. The proper sequence of activities for issue and receipt of library books is defined as follows:

While Issuing Book:

- A quick glance is cast while issuing the book for any damage
- Details into issue register are entered
- The books are handed over to the users.

While receiving the books:

- A quick glance is cast while receiving the book for any damage
- Due dates are checked for necessary action
- The books are sent to stack for shelving.

Membership

- All the faculty members are entitled to the membership of the library

Donation / Gift /Damage Policy Gifts/ Donations:

- ✓ Books/journal gifted/donated from the individuals are accepted and accessioned and placed along with other books for references.
- ✓ Some books donated by individuals are accepted based on the physical condition of the book.

Damage Policy:

- ✓ No book in damaged condition will be accepted by the users on return. Damaged books will have to be replaced by the borrower.
- ✓ The new book of same edition or higher edition has to be replaced if the issued book has lost.

Conservation policy:

Library Rules & Regulations

1. No member will be allowed to avail library facility without valid ID card.
2. Users should maintain peace in the library & should not disturb other readers in the library otherwise library facility will be withdrawn.
3. Unauthorized removal of books or damaging the property of library or misbehaviour with library in-charge staff shall be considered as an act of indiscipline, which will call for strict action.
4. Books must be return on or before the due date otherwise the Books will not be reissued
5. Inspite of repeated reminders, if the book is not returned, the borrowing facility

may be withdrawn for a period decided by the authority.

6. While entering the library, users are not allowed to keep all the belongings with them
7. One should take care of cleanliness of the library.
8. One should not disturb the arrangements of the library furniture.
9. Books issued on ID card are only for reference
10. Outsiders are not allowed in the library without the permission of the authority concerned.
11. Mobile use is strictly prohibited in Library.
12. It is mandatory for all members who are using facilities to follow the library rules & regulations. For any dispute or problem, Library in-charge may be contacted.
13. Library in-charge is available for any assistance you may need in using the library resources, facilities & services. Library will welcome any suggestion for better use of library facilities.

Statistics:

Library Collection Statistics (Subject wise) as on 31-07-2021 (Last audited)

Subject	Total Vols.	Subject	Total Vols.
Faculty of Anatomy		Faculty of Anatomy	
Embryology	(5) 5	Radiology	(2) 2
Gross	(48) 63	Surgery	(3)4
Histology	(16) 17	Reference books	(1)
Osteology	(3)5	Dissection atlas & Manual	(13) 19
Neuroanatomy	(6)9		

Audit: Every 3 to 6 months

Vision:

To explore and implement innovative services to deliver information and scholarly resources that can be accessed easily in the department.

Cleanness and Maintenance:

- ✓ One attendant is appointed along with in-charge of library.
- ✓ Clerk is also directed to help in-charge of library as per need.
- ✓ Every day morning library is cleaned by attendant.
- ✓ Central library peoples will do audit randomly to see departmental library books.
- ✓ Central library arranges books exhibitions usually at the starting of new academic year and ask for reference of new books.
- ✓ On requesting central library provides whichever book required.

3. SOP For The Anatomy Museum:

I – Mission & Establishment

1. Anatomy Education
2. Appointment of Museum council Members
3. Annual Meeting

II -Policies and Museum Procedures

1. Authorized access to human anatomical specimens
2. Preparation of human anatomical specimens

III – Protocol for Anatomy Teaching & safety measures

1. Access to Teaching Museum Facilities
2. Universal Precautions
3. Injuries in the Museum

IV- Maintenance & Tracking the specimens

1. Region wise jar maintenance
2. Catalogues and coding the jars

I – Mission & Establishment

1. Anatomy Education-

The museum of anatomy department is the benchmark of our renowned College. It is a treasure of Anatomy Department where all aspects of anatomy can be studied, appreciated & applied to our medical knowledge & training. It holds a large collection of anatomical specimens and models, radiological films, genetics charts and embryology models etc.

Anatomy museum situated on first floor of college within the premises of the anatomy dept. established in 2004 and it is been serving all the health care professionals & school students. It is a big space fully ventilated, well illuminated & Informative.

2. Appointment of Museum council Members-

The Museum Council bearing chairman and the members (anatomy department faculties) appointed by Chairman (Head Of Department). The members of Museum council will select and finalise the specimens / exhibits to be displayed in the museum .Apart from this The council members will look after the access to the museum by the medical students (MBBS, B.P.Th, B.Sc. –Nursing and GNM Students) and visitors, separate registers were maintained for each course and visitors .The register for visitors will have feedback from them which will be useful for the further development of the museum.

Museum council members will maintain a record of wet specimens Added and replaced on yearly basis according to region wise .Any of the activities and specimen mounted in the museum should come under the purview of the council members.

3. Annual meetings –

Annual meetings will be held by our chairman, Museum council .The council is very particular & keen to keep this museum updated with the latest equipment & learning material for which we shall always remain highly thankful & obliged. This Standard Operating Procedures document will be dated approved for a period of three years. It must then be re-reviewed and approved. Amendments may be agreed upon by members at the annual meeting of the museum council.

And our (museum council) mission is to enhance the anatomy learning through the museum with the help of wet specimens and other teaching material provided for the budding health professionals.

II -Policies and Procedures

1. Authorized access to human anatomical specimens-

In this Policies and Procedures Manual, the term "Human Anatomical Specimens" is defined as donated whole human bodies, or portions thereof derived from the cadavers, which are used for education, research, and related scholarly purposes.

After the approval of the museum council the specimens are dissected properly and mounted in the jar made by acrylic sheet. The size of jar and the formalin solution used for mounting also selected by the council.

Method of preservation of specimens: The Specimens are preserved in 10% formalin solution

Method of display of specimens: The specimens are displayed in Acrylic jars in small and big size as per need.

2. Preparation of human anatomical specimens-

- Museum specimens are generally mounted in acrylic jars using centre plates or rods to which the specimen is fixed or sutured.
- Use of Perspex sheets as a centre plate requires the use of power tools (saw, drills, vice etc.), which in turn require time and skill to produce good results.
- A more feasible alternative would be polyethylene terephthalate (PET, PETE or polyester) that is commonly used for carbonated beverage and water bottles. PET provides sufficient alcohol and essential oil barrier properties, generally good chemical resistance (although acetones and ketones will attack PET) and a high degree of impact resistance and tensile strength.
- These bottles are translucent, thin and inert, and can easily be cut with scissors or a blade in order to adapt properly to the size of the jar.

- This sheets can be easily cut, sutured to the specimens (multiple if needed) and does not visually hinder the display. For a smaller jar, a hinge-like preparation of these plastic bottles gives a stable support to the specimen. The Plastic sheets may be covered by a black polythene sheet to enhance the contrast of the specimen being displayed.
- The PET sheets used in our department for mounting specimens have not lost integrity, color or contour over a period of 12 months.
- For highlighting different components of a specimen, colored gem clips, thermocol balls, beads and pins were used.
- To obtain the best results, specimens must be immersed in a fixative immediately. Kaiserling's technique advocates the use of a solution of formalin, water, potassium nitrate, and potassium acetate for fixation, the immersion in ethyl alcohol to restore color and preservation in a solution of glycerine, aqueous arsenious acid, water, potassium acetate and thymol.
- The use of 10% neutral-buffered formalin as a fixative has given us satisfactory results to preserve the specimen. Formalin fixative should be replenished to ensure that the fluid does not dry out as it may lead to deposition of paraformaldehyde crystals on the specimen.
- These simple techniques of mounting when supplemented by clinical, radiographic and histopathological photographs alongside make for a wonderful museum display

III -Gross Anatomy Teaching & Museum Procedures

1. Access to Teaching Museum Facilities-

- Access to the museum is permitted to designated students, staff and faculty. These individuals will have access during times specified by each facility.
- Visitors: Visitors are allowed in the facilities at any time, except by permission of an accompanying faculty member or designated staff, or permission from Chairman Museum council or their appointed representative.

- Visitor's register: A register should be kept outside to get the opinions and views from the visitors after their visit to the museum
- Code of conduct: All individuals requesting access to the museum must promise to follow the rules governing in use of museum specimens for learning and research
- Required Training: Entrants to the Museum are required to have taken all training on the Museum techniques associated with the work involved.
- All students must be informed prior to enter the museum that any non-educational video or photography of any type of anatomical specimen in the anatomy museum is not allowed under any circumstances.
- Video or still photography by faculty or students is permissible for educational purposes only or to document findings related to research using the following guidelines
- Students or faculty are informed that under no circumstances should videos or photographs be allowed to be put on to the public internet or any other public venue. They can only be used within the institutions password protected intranet that is only accessible by students, faculty, and designated staff (i.e. for video editing).
- Videos or photographs used for educational purposes must not display any identifiable features such as tattoos and face (full or side profiles).
- Activities not permitted in the Museum: eating, drinking, applying cosmetics including lip balm, handling contact lenses, gum chewing.
- NOTE: Food or drink cannot be stored within the museum. Contact lenses: it is encouraged that students, faculty, and staff not wear contact lenses in the museum and potential hazards should be made clear.
- For the purpose of studying anatomy, we have assigned various sections in the museum. They are:

1. Embryology section
2. Cross-sectional anatomy section
3. Special osteology section
4. Section on teratology
5. Section on Genetics
6. Other rare anatomical variations

Various Informative Facilities Available In The Museum

***Total no of wet specimens:** more than 500 specimens with 450 catalogues

***Models:** Total no of gross anatomy models more than 106

***Total no of embryology models more than 95**

***Radiology display:**

- X-Rays plate 100
- C-T-Scan films 35
- MRI films 35

*** Osteology:**

1. Total number of articulated skeletons 9
2. Total number of disarticulated skeletons 35
3. total no of disarticulated individual bones more than 300

***REGULAR SECTIONS**

The formalin-fixed specimens are arranged in six sections:

1. Thorax
2. Abdomen and pelvis
3. Upper extremities
4. Lower extremities
5. Head & Neck
6. Neuroanatomy

Universal Precautions-

- Two attendants are allotted for cleaning and maintenance purpose.
- Attendant will always present in museum.
- If any jar is broken and unfortunate injury is happened then in emergency first aid kit is made available for treatment purpose.
- If it is of serious grade then it is referred to Casualty by calling Ambulance.
- Additional barriers (safety glasses, masks, face shields) should be added when appropriate for use against anticipated splashes or splatters to the face.
- Special at-risk individuals: Persons with medical conditions (allergies, pregnancy) or who are at increased risk of acquiring infection are not allowed inside the museum
- Museum safety procedures will be provided in writing and verbally communicated to every incoming group of students or visitors prior to the first museum visit.
- Gloves: are to be worn when hands may contact potentially infectious materials, contaminated surfaces or equipment. Gloves are to be disposed of when overtly contaminated, and removed when work with cadaveric materials is completed
- Hands must be washed thoroughly with soap and water following removal of gloves
- Spills from the jars and accidents that result in overt exposures to infectious materials are to be reported immediately to the museum in charge

Injuries in the Museum

- If serious illness or injury occurs to the students or visitors should report immediately .shift them immediately to the location where aid is needed, specific location within the building, type of problem, individual's condition, sequence of events, and medical history if known. Have somebody stay with the person until help arrives.
- Do not move the person keep him still and comfortable. Once help arrives, stay out of the way unless assistance is requested.
- All injuries in the museum must be reported immediately to the faculty, staff or Council members. In all cases, a written report, documenting the injury should be made according to Environmental Health and Safety protocol in place at each facility.

IV- Maintenance & Tracking the Specimens:

1. Museum and Region wise jar maintenance

- As per the guidelines from the museum council, Museum cleaning is being done by the attendants on rotation basis, All the racks and shelves in the museum are cleaned twice in a month.
- The museum council members were asked to check the level of formalin in the jars, the turbidity of fluid and if any replacement is required with the permission of council the specimen is replaced and recorded in the register.
- Proper cleaning should be done using disinfectants and do not use the spray directly on the exhibits /specimens that might damage it.
- A Maintenance log book should be kept for regular check on cleaning by the museum attendants and they should take care of the lights, fans to be switched off after the visiting hours.
- After the visiting hours the last person who leaves the museum should make sure that all the windows are closed
- Proper care should be taken while cleaning, any damages occur at the time of cleaning should be informed to the council members in time.
- Museum attendants should take care of themselves by wearing gloves and mask at the time of cleaning

2. Catalogues and coding the jars-

- Catalogue and Specimen tracking :- All the specimens in the museum should be labelled properly
- Its informative separate catalogue is maintained with 15 copies of each in every rack.
- It is useful to describe that particular specimen so that the students /visitors will get more information and will have better understanding.

4. SOP for Teachers /Teaching Rooms Cleaning and Maintenance

In the department there are three types of rooms-

- i) For Teaching and non-teaching staff
- ii) For Teaching
- iii) Departmental store.

Rooms For teaching and Non-teaching staff-

In this category following rooms are available-

- ✓ Professor and Head of Department room -01
 - ✓ Departmental office -01
 - ✓ Associate professor room -02
 - ✓ Assistant professor room – 04
 - ✓ Tutor rooms - 05
 - ✓ Non –teaching staff room-01
-
- All these rooms are present on one floor i.e. ground floor of Block –I where anatomy department is situated.
 - For these rooms cleaning one mama is allotted
 - His work is monitored by senior teachers including Head of department and clerk/technician of department regularly.
 - Every day morning cleaning by dry mop and wet mop is done.
 - Every teacher will take care of his/her room regarding lights and Fan in sight the room.
 - Non-teaching, HOD and Office room will be monitored by Clerk/Technician.
 - At the end of day, during closing of department mama will once again confirm regarding switching off the light and fan buttons.

- At the end of day care to shut down computers in office and HOD room will be taken by clerk.
- Regarding any difficulty concerned room staff inform in office and then through HOD , maintenance call form is sent to concern maintenance authority through proper protocol
- Time to time feedback is taken by clerk/technician and HOD regarding any maintenance of department.

i) Rooms for Teaching :

- There are two rooms in department which are utilized for small group teaching (SGT)
- Previously these rooms were called as Demo rooms.
- Teaching room I -
 - ✓ Size – 98 sq.mtrs.
 - ✓ Benches –40
 - ✓ Tube lights-
 - ✓ Fans-
 - ✓ LCD wall mount Screen-01
- This room is utilized for teaching to paramedical courses B.P.Th and Nursing students also.
- Teaching Room – II
 - ✓ Size – 68 sq.mtrs.
 - ✓ Benches –35
 - ✓ Tube lights-
 - ✓ Fans-
 - ✓ LCD wall mount Screen-01
- Every day morning dry mop cleaning is done by allotted mama.
- Twice a week wet moping of these rooms is done by allotted mama.
- Mama will take care of lights and fans during working time and during closure of department.

- His work will be monitored by Mr Lingaswamy sir.
- Histology lab and Research Lab cleanliness work is monitored by Dr Marathe N.
- Museum cleanliness work is monitored under supervision of Mr Rao R.
- Library and Anthropometric lab care cleanliness work is monitored by Mr GCN Raju.
- Any maintenance notified by mamas or concerned responsible teacher is sent through Maintenance call form signed by Concerned teacher and HOD signature to concerned Authority for repair.
- Time to time follow up is taken for concerned maintenance.
- Monthly twice round is taken by Head of Department with concerned teacher and mama to look out the infrastructure and cleanliness.
- There is provision of Male and Female urinals for staff and students on the floor of department of anatomy
- Maintenance of urinals is taken by sweepers under guideline of supervisors.
- Also the cleanliness of passage is done by separate mamas and Mavashis supervised by Supervisor who work under the power of A.O.

ii) Departmental store :

- There is one room allotted for storing of extra and unrequired materials in the department.
- It is situated near Gross anatomy museums.
- It is under supervision of Head of department, technician and Mamas.
- All things kept in this room including various Jars inspected time to time for its usage
- Every year at the end things which are not required are listed and transferred or handed over to Central store for its further process.
- Its cleanliness is done under supervision as per need.
- It is always closed and opened whenever needed.

5. SOP for Anthropometry Lab:

Index

1. Introduction
2. Equipment
3. Calibration
4. Procedures
5. Care and Maintenance

1. Introduction

- Anthropometry is the study of the measurement of the human body in terms of the dimensions of bone, muscle, and adipose (fat) tissue.
- Measures of subcutaneous adipose tissue are important because individuals with large values are reported to be at increased risks for hypertension, adult-onset diabetes mellitus, cardiovascular disease, gallstones, arthritis, and other disease, and forms of cancer

Purpose of Anthropometrics

- Actual stature, weight, and body measurements including skin folds, girths, and breadths will be collected for purposes of assessing growth, body fat distribution, and for provision of reference data.
- Measurements of stature and weight will allow for a revision of the growth charts which are based in part on data collected in Study.
- Anthropometric measurements such as skin folds and circumferences will allow analysis of the relationship between obesity and risk of disease.

2. Equipment:

The equipment and supplies necessary for body measurements are as follows:

1. Weighing machine (Adult)-01
2. Weighing machine (Capacity 5kg)-01
3. Goniometer 360(metallic)-01
4. Mollison's Craniophore-01
5. Anthropometric tape, hook-01
6. Harpenden calliper-01
7. Sliding(Martin's) caliper-01
8. Vernier Calliper-01
9. Gouge-01
10. Spreading caliper-01
- 11 . Osteometric board -01

3. Equipment Calibration Log

- Daily equipment checks and calibrations of the anthropometric equipment done before its use.
- Skin fold callipers, the infant measuring board, the weight scale, and all require daily checks before the first examination session each day.

4. Procedures:

1. Weighing machine (Adult):

Have the sampled person stand on the center of the weight scale platform. Record the weight

2. Weighing machine (Capacity 5kg):

Have the sampled child put on the center of the weight scale platform. Record the weight

3. Goniometer:

- It is necessary that a single notation system is used in goniometry. The neutral zero method (0 to 180- degree system) is the most widely used method.
- The same goniometer should always be used to reduce the chances of instrumental error.
- The part of the body to be measured using a goniometer should be reasonably exposed and free.
- The range of motion of each joint should be measured in isolation, to avoid trick movement (simultaneous movement of another joint) and muscle insufficiency which may alter the reading.
- Both active and passive range of motion should be measured and recorded respectively.

4. Mollison Craniophore:

- To place the skull in the Frankfurt line, the craniophore is also equipped with a block containing a pointer that moves in the horizontal and vertical planes, allowing allocating the bottom verge of the orbit.
- The Frankfurt plane is allocated by horizontal lines running on the skull's lateral surface, from the bottom contour of both orbits to the upper contour of the acoustic external foramen.
- The Frankfurt line also runs through the bottom edge of the left orbit and the upper edge of the external acoustic meatus.
- In order to recurrently place all analyzed skulls in the frontal view (norma frontalis) the skulls were suspended with the upper verge of the metal spigot lodged in the external acoustic meatus, which was established as the upper edge of the orbit.
- On the skulls, the frontal view bregma point (b) was marked, which is necessary for further studies.

5. Anthropometric tape:

Most anthropometric tape measures were first intended circumference measurement. "Diameter" indicates that the tape will have secondary set of numbers, usually on the

reverse side of the tape, that shows the diameter calculation that corresponds to length measurement. This number is irrelevant for body measurement.

6. Harpenden (Skin fold) Callipers:

- Before each examining session, the callipers should be "zeroed." Check to make sure the pointer is clearly reading zero. If not, loosen the flat screw on top of the dial, turn the dial slowly and gently until the pointer reads zero and then turn the screw tight again.
- Gently pull the skin fold away from the body.
- The Callipers should be placed perpendicular to the fold, on the site marked, dial up, at approximately 1 cm below the finger and thumb.
- While maintaining the grasp of the skin fold, allow the Callipers to be released so that full tension is placed on the skin fold.

7. Sliding (Martin's) calliper:

- A sliding calliper featuring a double sided measuring scale from 0 to 230 mm and two measuring arms (with rounded and sharp ends).
- The slot of the sliding section (containing an arresting bolt) features a highlighted index that provides the measured value.
- The instrument is designed to determine selected dimensions of the head (e.g. morphological facial height, nasal height and width, the distance between the inner/outer eye corners, lower jaw height, mouth width, physiognomic ear length, etc.), hand width, foot width, etc.
- The rounded ends serve for measurements carried out on live bodies, while the sharp ends are used for determining the dimensions of skeletal material

8. Vernier callipers:

- Vernier callipers are measuring tools used mainly for measuring linear dimensions.

- These callipers come handy in measuring the diameter of circular objects.
- Their circular jaws fit securely on either side of the circumference of round objects.
- Vernier callipers have two types of scales- a fixed main scale and a moving Vernier scale.
- The main scale is normally in millimetres or 1/10th of an inch.
- Vernier callipers score well over standard rulers because they can measure precise readings up to 0.001 inches.
- Vernier scales are used along with the Vernier calliper for accurate measurements.

9. Gouge: Used to clean the bones

10. Spreading Callipers:

- Spreading Callipers with pointed ends provides accurate measurement of the distance between two points, where one or both points may not be on a flat surface.
- This Large Spreading Callipers can also be used for the measurement of Anterior-Posterior chest depth.

Osteometric Board :

- This is used to measure the length of long bones.
- Before using it all proper calibration is checked.
- Wooden plate is used to mark as end point to be measured.

Care and Maintenance:

Cleaning of Equipment

- At the beginning of each stand and during the stand as necessary, wipe the surfaces of the sliding callipers, skin fold callipers, and tape measures with alcohol.
- Clean the equipment with alcohol at the end of each examining day.

6. SOP for Bone Bank

- In department one separate section is created for the purpose of record of all bones in department called as 'Bone Bank'
- One teacher is made in charge to take care of all activities under Bone bank.
- He will maintain record of all bones utilized for various purposes in department in one separate record book.
- He will also help to prepare new bones from the remains of dissected parts at the end of Year.

Preparation of bones:

1. At the end of year after completion of full dissection we keep some good specimens for museum/revision/examination purpose and unused or unrequired parts are buried on well protected burial ground within campus for decomposition purpose regularly.
2. Even when if any cadaver is not embalmed well due to any reason get putrefied also buried at burial ground and utilized to prepare bones from it for study purpose in bone bank.
3. After 3-4 yrs buried specimens are reopened, the decomposed material is collected and brought back to department.
4. It is then put in running water for cleaning purpose and kept in clean water for some days to become smooth.
5. Then they are shifted to other tank (containing cow dung and drainage water for maggot formation) for maceration purpose around 6-8 months.
6. Once maggots get formed, they will eat all flesh keeping hard bony parts behind.
 - Location of tank-on the terrace of dissection hall, so that bad smell will not disturb routine activity.

- Continuous watch is kept with the help of attendants on this maceration procedure.
- 7. If the procedure is not completed then we can extend same for next 2-3 months.
- 8. After that all material is washed under running water, bones are cleaned from soft tissues and dried for 4-5 days(sunlight exposure is avoided)
- 9. Then all bones are kept in tank for hydrogen peroxide wash for 48-72 hours depending on need and again dry it.
- 10. After hydrogen peroxide washes all bones looks well and are off from bad smells.
- 11. After complete drying we give touchwood paint over bones. Then they are suitable for handling for study purpose.
- 12. After completing this procedure, numbering of bones is done for record purpose.

Storage of Bones:

1. Then these bones are kept collectively in bone bank.
2. Record is maintained with bone bank in charge as number of each bone, issue of these bones to teachers for teaching purpose or research/project purpose.
3. Whenever required these bones are utilized for study purpose and for teaching purpose.
4. Yearly we plan to add new bones as possible as to this bone bank, so that our stock will increase.

7. SOP for Histology Practical

Usually one senior teacher is appointed by Head of department as an in charge of histology section.

He has to arrange all lectures, practical & examination with the help of batch teacher after discussing schedule with head of department.

1. Histology practical is conducted for 150 students from Monday to Wednesday.
2. Each practical day 50 students accommodated batch wise (A, B&C) in histology lab; so three days of histology practical per week.
3. Material required for each practical:- Histology journal (MUHS), histology manual (diagram book), histology textbook, H&E pencil & eraser.
4. Before beginning of each practical, technician takes round to check working condition of all microscopes and takes care of all microscopes with time to time repairing of defective microscopes.
5. Separate attendant is allotted to take care of histology laboratory, who cleans histology lab regularly and take care of all instruments in lab.
6. During each practical, practical briefing is taken to explain slides of practical by histology in charge senior teacher, followed by mounting of demonstration slides.
7. Practical slides are given in one folder to study and practice on microscope to group of 8 students during practical 2 hours duration.
8. During practical hour histology in charge and batch in charge interact with students to explain slides and to solve their difficulties as in adjusting microscope.
9. At the same time slides of previous practical are displayed on one side for revision and also for those who were absent for last practical and we call students according to their roll number to see it till end of practical.
10. In between during practical time 'revision test' is taken to evaluate student and to increase confidence of students to identify the slide.

11. At the end of practical these folders are collected back as per allotted numbers.
12. Signature is taken during handing over and returning of folder for discipline purpose.(missing/breaking)
13. If there is any breakage of slide, responsible student is then counselled & trained about handling slides.
14. During last 30 minutes of practical; journals for previous practical are corrected by respected batch teacher. Wrong diagrams were asked to redraw and students are allowed to draw diagrams of same day practical in journal.
15. Attendance is taken compulsorily at the end of practical hours and record is maintained separately.
16. After this students are asked to cover the microscope and leave the practical hall.
17. At the end of year servicing of microscopes done for cleaning and replacement of spare parts of damaged/faulty microscope through management.

8. SOP for Research Lab

- One teacher is appointed in research lab to take care of all activities in research laboratory.
- One separate attendant is there to take care of cleaning and one technician to take care of all instruments present in lab.
- If any instrument not working properly found by technician and in charge teacher then it is reported to maintenance department through Head of department for its repairing.
- Timely as per need required chemicals list made by technician sent to purchase department through head of department, dean sir and central store in-charge.

In Research lab along with other research histology slides are prepared and the procedure is as follows:

Tissue processing

- **Collection of tissue**

1. Tissue for slide preparation is obtained, usually collected from mutton shops. It should be freshly cut without any chemical process. Can be taken from Guinea pigs, rats or dogs if available.
2. Fixation of tissue in formalin 10% for 48 hrs.
3. Wash the tissue in running water for 15 min.

- **Dehydration stage**

1. Put the tissue in 70% alcohol for 1 hour.
2. Transfer the tissue in 80% and then 90% alcohol for 1 hour each.
3. Then transfer the tissue to absolute alcohol I for 1 hr and absolute alcohol II for 1 hr each.

- **Dealcoholisation /cleaning**

4. Transfer then to Xylene I for 1 & 1/2 hour and Xylene II for 1 & 1/2 hour each.

- **Embedding the tissue**

1. Now put in the paraffin wax bath for 1 hour and shift to another wax bath for 1 hour again.

- **Paraffin block making**

1. Paraffin blocks are prepared with L moulds.
2. Blocks are dried and then cut on microtome in sections (5-6u).
3. Cut sections are put in hot water bath and sections are taken on slide, dried and taken for staining.

- **Haematoxylin & Eosin Staining**

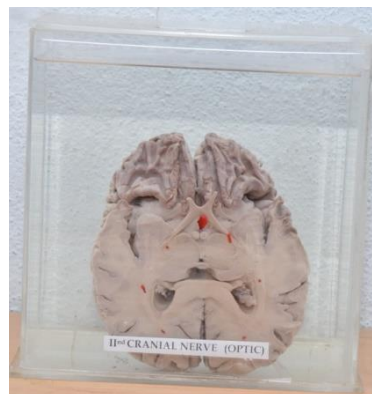
1. Put the dried slide in Xylene solution I for 2 minute and then to Xylene solution II for 2 min.
2. Then the slide is shifted to absolute alcohol I for 2 min and absolute alcohol II for 2 min.
3. Slide is put in 90% alcohol, 80% alcohol and 70% alcohol each for 2 min each.
4. Slide is now washed under running water and now it is ready for staining.
5. Slide is inserted in haematoxylin stain for 5-6 minutes.
6. Put the slide in acid alcohol (just deep and take out).
7. Wash the slide under running water for 5 minutes to remove excess stain.
8. Slide is now inserted in eosin stain for 1-2 minutes.
9. Shift the slide from 70%,80% and 90% alcohol for 2 min each.
10. Then again to absolute alcohol I and II for 2 min each.
11. Transfer to Xylene I and II for 2 min each for clearing.
12. Now the slide is ready for mounting.
13. Mount the slide with DPX mount and put cover slip without creating bubbles.
14. Now the slide is ready for visualization under microscope.

11. UNIQUE FEATURE OF THE DEPARTMENT

- In the department of Anatomy following many things are required being basic science subject.
- Being a basic science subject and due to toughness and volatile nature of subject we have to make it easier with the help of teaching aids.
- We have developed such teaching aids in the form of dissection techniques and its systematic plan, preparing museums with the help of cadavers and models of fibres and pop.
- Among these under the heading of Museum we have developed like-
 - Gross anatomy museum having 500 + wet and dry specimens.
 - Radiology section with enough X-ray and CT & MRI plates.
 - Sectional Anatomy for post graduate teaching for radiology and anatomy PG scholars.
 - Embryology section to explain developmental anatomy.
 - Collection of rare variations specimens to understand variations.
 - Cranial nerve museum which is Unique feature of Museum and department to explain all 12 cranial nerves.

CRANIAL NERVE MUSEUM IS AN UNIQUE FEATURE OF DEPARTMENT





- This is a new and a very innovative concept developed in our department under the immense continuous guidelines of our Respected honourable Secretary General Lt.General retired Dr B. Sadananda sir.
- Under his guideline all our departmental staff has worked on development of this unique Cranial nerve museum.
- Here concept is developed to explain all cranial nerves individually under the following headings-

- ✓ Origin (nucleus level)
 - ✓ Surface attachment level on Brain
 - ✓ Intracranial course
 - ✓ Exit
 - ✓ Extra cranial course and distribution.
 - ✓ Applied clinical anatomy
- Here we all tried these concepts by doing actual dissection on brain specimen and mounting it in proper way in suitable size jars.
 - Then with the help of this actual dissected and well mounted specimens and detailed informative charts we tried to explain each cranial nerve individually in details.
 - For every cranial nerve a separate catalogue containing its detailed information with the help of elaborative diagrams is prepared and maintained.
 - Responsibility of this museum is kept with senior teacher and help of junior teacher under the guideline of Head of department.
 - Time to time care is taken of all specimens for formalin and water level.
 - For more and detailed explanations we have arranged big size magnifying lens for each nerve as structures are very small at brain surface attachment and difficult to show it.
 - As per our knowledge, such type of a separate museum is not developed anywhere in state or national level.
 - So that this is a unique feature of Our department.
 - This can be utilized as a teaching tool to undergraduates and post graduate students when we teach cranial nerves.
 - Student understands it more as they see actual specimens and charts at a time which is more important.

12. PUBLICATIONS:

S.No	Title	Authors	Journal name	Indexed
2006				
1	Estimation of crown rump length from external surface area of frontal and parietal foetal skull bones	Dr. Zambare B R	JASI. 2006; 55 (1)	Yes
2007				
2.	A case study of fine needle aspiration cytology and histology of pancreas	Dr. Zambare B R	Indian Science Abstracts. 2007: 43	Yes
2010				
3.	Accessory renal arteries and its clinical significance.	Dr. Zambare B R	The Antiseptic. 2010; 107(9):422	Yes
2011				
4	The Retro – articular Ring of Atlas and its clinical Significance	Dr. Zambare B R	Anatomica Karnataka 2011;5(2);74-76	Yes
5	Determination of sex from Sacrum: - It's Forensic Utility.	Dr. Zambare B R	Indian Jr of Forensic Medicine and Pathology. 2011; 4 (1):	Yes
6	Determination of personal height from the foot length in Maharashtra Region	Dr. Pawar S E & Dr. Zambare B R	Indian Jr of forensic medicine and pathology. 2011;4(2):	Yes
7	Growth Pattern in School Children of 9-12 years age	Dr. Zambare B R & Dr. Pawar S E	The Antiseptic. 2011; 7(2): 90-93.	Yes
2012				
8	Body donation: a gift today for better tomorrow – review article.	Dr. Surekha D Jadhav & Dr. Zambare B R	Journal of Anatomica Karnataka. 2012; 6(1): 57 -61	Yes

9	Physical growth pattern for girls (9-12yrs) from western Maharashtra.	Dr. Zambare B R & Dr. Pawar S E	Journal of Anatomica Karnataka. 2012; 6(1):	Yes
10	Accessory Renal Arteries and Its Clinical Significance: A Case Report and Literature Review.	Dr. Surekha D Jadhav & Dr. Zambare B R	National Journal of Medical Sciences. 2012; 1(2):69 – 72).	Yes
11	Deep Transverse Metacarpal Ligament: A cadaveric study.	Dr. Surekha D Jadhav & Dr. Zambare B R	JDMS. 2012; 2(6):1-3	Yes
12	Location of Axillary nerve in relation to acromian process of Scapula: a Cadaveric study.	Dr. Surekha D Jadhav & Dr. Zambare B R	JDMS. 2(1): 1-3.	Yes
13	Extensor Digitorum Brevis Manus: a Cadaveric Study and Review.	Dr. Surekha D Jadhav & Dr. Zambare B R	Int J Biol Med Res. 2012; 3(3):1952-1954.	Yes
14	The Suprascapular notch: its various shapes in Indian dry scapulae..	Dr. Surekha D Jadhav	RJPBCS. 3 (4):1085-87.	Yes
15	The foramen meningo-orbital in Indian dry skulls	Dr. Surekha D Jadhav	NJIRM. 2012;3(4):46-49.	yes
16	Supra-scapular foramen in Indian dry scapulae	Dr. Surekha D Jadhav	National Journal of clinical anatomy. 2012; 1(3); 133-135	
17	Foramen Ovale & Foramen Spinosum: A Morphometric Study	Dr. Surekha D Jadhav	Anatomica Karnataka. 2012; 6, (3): 68-72.	
18	Assimilation of Atlas in Indian Dry Skulls.	Dr. Surekha D Jadhav	JKIMSU. 2012; 1 (1): 102-106	
19	Variations in Bifurcation Point and Branching Pattern of Common Carotid Arteries: A Cadaveric Study.	Dr. Surekha D Jadhav	J Pharm Biomed Sci. 2012, December; 25(25); 147-151.	
2013				
20	Sex Determination from femur using Length of femur in Maharashtra	Dr. Zambare B R	JDMS. 2013; 2(3): 1-3.	Yes

21	A Rare Variation of Extensor Carpi Ulnaris.	Dr. Surekha D Jadhav & Dr B R Zambare	RRJMHS.2013; 2(3):5-7	Yes
22	An Anomalous Branching of Coeliac Trunk.	Dr. Surekha D Jadhav & Dr. Zambare B R	Jr.KIMSDU. 2013; 2(2)	Yes
23	Study of peroneus digiti minimi quinti in Indian population: a cadaveric study	Dr. Surekha D Jadhav & Dr. Zambare B R	Rev Arg de AnatClin; 2013, 5 (2): 67-72.	Yes
24	Anomalous Branching Pattern of the Axillary Artery.	Dr. Surekha D Jadhav & Dr. Zambare B R	NJIRM. 2013; 4 (3):162-165	Yes
25	Prevalence and identification of risk factor for knee osteoarthritis among elderly men and women.	Dr. Zambare B R	Scholar jr of applied medical sciences. 2013; 1 (3): 700-703.	Yes
26	Comparative study of the dermatographic pattern in type ii diabetes mellitus patients with non diabetics	Dr. Zambare B R	Int. J Med Res Health Sci. 2013;2(4):955-959	Yes
27	Sex and side determination of human hip bone by metric parameters of its posterior border.	Dr.Surekha D.Jadhav	National journal of clinical anatomy. 2013; vol 2 (1): 16-21.	Yes
28	Study of Prehilar Branches of Splenic Artery By Dissection Method	Mr.V.Lingaswamy	IJMRHS. 2013;2(3)620-623	Yes
2014				
29	A study of orbital morphometry in Indian dry skulls.	Dr. Surekha D Jadhav & Dr.B R Zambare	Asian J of biomedical & Pharmaceutical sciences.	Yes
30	Cataechu Stain for Parasympathetic Ganglia	Dr.B R Zambare & Dr. Surekha D Jadhav	Journal of Anatomica Karnataka. 2014	Yes
31	An Ossified Pterygospinous ligament.	Dr Pawar S E & Dr.B R Zambare	VIMS Health Science Jr. 2014; 1(4):178-81.	Yes

32	Orbital Morphology with reference to bony landmarks	Dr. Surekha D Jadhav & Dr. B R Zambare	Rev Arg de AnatClin.	Yes
33	Morphometric study of Scapular glenoid cavity in Indian population.	Dr Surekha D Jadhav	IOSR Journal of Dental and Medical Sciences. 2014; 13(9): 67-69.	Yes
34	Morphology of pronator Quadrates muscle: a cadaveric study.	Dr Surekha D Jadhav & Dr. B R Zambare	IJMRHS. 2014; 3(4): 876-879.	Yes
35	Is Sustened natural apophyseal glides cobined with conventional physiotherapy effective for patients with facet joint syndrome? A case series	Dr. B R Zambare	IJMRS. 2014; 4: 1066-1071	Yes
36	Fingertip patterns: A diagnostic tool to predict diabetes mellitus	Dr. B R Zambare	N J of medical & Dental Research. 2014; 2(3): 49-53	Yes
37	Maitland mobilisation along with conventional physiotherapy in lumbar facet joint syndrome- A case series	Dr. B R Zambare	VIMS Health Sciences Journal. 2014; 1(3): 130-135	Yes
38	Variations in anatomical features of the sacral hiatus in Indian dry sacra.	Dr Surekha D Jadhav	Int J Med Res Health Sci. 2014; 3(3): 634-638.	Yes
39	Variation in the position shape and direction of mental foramen in dry mandible.	Dr Surekha D Jadhav	Int J Anat Res. 2014: 2(2); 418-20.	Yes
40	Variations of Lung Fissures: A Cadaveric Study.	Dr Surekha D Jadhav	JKIMSU. 2014; 3 (1) : 85-89.	Yes
41	Ossification of Stylohyoid Ligament and its Clinical Significance: Case Report.	Dr Surekha D Jadhav	Asian Journal of Biomedical and Pharmaceutical Sciences; 4 (33); 2014; 24-26.	Yes

42	Variations in branching pattern of Radial Artery	Mr.Mithil	National Journal of Medical Sciences. 2014. 3(1) :94-97	Yes
43	Effectiveness of sustained natural apophyseal glides and maitland mobilization in facet joint syndrome:A single blind randomized control pilot study	Dr.B.R.Zambare	IJHSR.2014;4(10)142-150	Yes
2015				
44	FibularisTertius Muscle: Cadaveric Study in Indians	Dr Surekha D Jadhav & Dr.B R Zambare	JKIMSU. 2015; 4, (1): 64-69.	Yes
45	Cataechu Stain for spinal cord and cerebellum	Dr.B R Zambare & Dr S D Jadhav	Anatomica Karnataka.2015; 9(1): 25-27.	Yes
46	Accessory head of flexor pollicis longus muscle and its clinical importance.	Dr Surekha D Jadhav & Dr.B R Zambare	International Journal of Current Research. 2015; 7(5): 16540-43.	Yes
47	Anatomical study of arrangement of renal hilar structures in Indian adult human cadavers.	Dr Surekha D Jadhav & Dr.B R Zambare	NJIRM 2015; 6(3): 49-52	Yes
48	An Aberrant artery arising from common hepatic artery.	Dr Surekha D Jadhav & Dr.B R Zambare	JKIMSU. 2015; 4(3):1-3.	Yes
49	Cadaveric study of origin and branching pattern of external carotid artery.	Mr.Lingaswami & Dr Surekha D Jadhav	NJMS. 2015; 4(1):77-80	Yes
50	Body Donation: an "anatomical gift".	Dr B R Zambare & Dr Surekha D Jadhav	VIMS Health Science Journal. 2015; 2(1):	Yes
51	Supratrochlear foramen and its clinical significance	Dr Surekha D Jadhav& Dr.B R Zambare	Asian Journal of Biomedical and Pharmaceutical Sciences, 5(46), 2015,13-15.	Yes

52	Effects of open chain exercise on muscle strength & function in elderly patients with knee osteoarthritis	Dr.B R Zambare	Internatinal archeives of integrated medicine. 2015; 2(4): 5-10.	Yes
53	Gastrocnemius tubercle in Indian population: A new anatomical entity?	Dr Surekha D Jadhav	Rev Arg de Anat Clin. 2015; 7(2): 107-111.	Yes
54	Morphometry of Acromion Process: A Study of Indian Scapulae.	Dr Surekha D Jadhav	International Journal of Pharma Research and Health Sciences. 2015; 3 (5): 831-835.	Yes
55	Morphometric study of styloid process of temporal bone in Indian adult dry skull.	Dr Surekha D Jadhav	Int J Res Med Sci. 2015;3(6):1348-1352.	Yes
56	Morphometric Analysis of Supraorbital and Infraorbital Foramen in Maharastrian Skulls.	Dr Surekha D Jadhav	RJPBCS. 2015 ; 6(4) :2036-41	Yes
57	Unilateral Triple Renal Veins with Anomalous Drainage of Right Testicular Vein:A Rare Case Report	Dr.Fating A.S.	IJHSR .2015;5(8):622-626	Yes
58	Double Right Testicular Arteries with its Embryological Basis:A case Report	Dr.Fating A.S.	J of Evolution of Med and Dent Sci.2015;04(53): 9272-9275	Yes
59	Variations in Extra heads of biceps brachii muscle:A cadaveric study	Mr. Lingaswamy	Vims Health Science journal. 2015; 2 (3): 89-93.	Yes
60	Transposition of External and Internal Carotid Arteries:Clinical Significance	Dr Surekha D Jadhav& Dr B R Zambare	Indian Journal of Anatomy. 2015; 4 (3): 161-163.	Yes
2016				

61	Estimation of personal height from the percutaneous length of Ulna in Maharashtra region (Regression analysis)	Dr.Pawar SE	Indian journal of forensic medicine and Pathology vol 9 No.3, Jul/Sep 2016: 115-119	yes
62	An anatomical study of proximal attachment of long head of biceps tendon	Dr.SD Jadhav	Int J Anat Res. 2016;4(2):2354-57.	yes
63	Sphenoidal emissary foramen and its clinical consideration	Dr.SD Jadhav	Int J Research in Med Sci. 2016; 4 (7): 2926- 2929.	yes
64	Variation of the left gastric & right inferior phrenic arteries: It's clinical Implication.	Dr.SD Jadhav	Indian Jr of Anatomy 2016; 5 (2):	yes
65	To Study The Anatomical Variations Of Mental Foramen In Indian Mandibles	Veeramalla Lingaswamy	VIMS Health Science Journal Volume-4Number-2-June,2017:pp 7-10	yes
66	An Anatomical study of coraco-acromial falx in Indian population	Dr.SD Jadhav	IJCAP2017; 4(1): 104-105	Yes
67	A CADAVERIC STUDY OF MORPHOLOGY OF HUMAN SPLEEN	Dr.ASFating	National Journal of Evolution of Medical & Dental Sciences Aug. 07, 2017 Vol.6Issue63	Yes
2018				
68	High Division of Brachial Artery and Its Clinical Insight: A Case Report.	Dr.SD Jadhav	International Journal of Current Medical And Applied Sciences, 2018;19(1): 27-29	Yes
69	Morphological variations of coraco-acromial ligament: a cadaveric study	Dr. S.D Jadhav	Int Jr Anat Res;2018,6(3.3), 5621-24	yes
2020				
70	Brachio-radial and brachio-ulnar arteries in	Dr.S.D.Jadhav,	International journal of scientific research,2020,9	Yes

	upper 1/3rd part of arm: a case report.	Dr.S.E.Pawar	(6),1-2	
71	Anatomical variation of profunda femoris artery in two cadavers	Dr.S.D.Jadhav, Dr.S.E.Pawar	EJPMR. 2020,7(6) ,743-745	Yes
72	Cephalic Index And Head Shape In Western Maharashtra Students.	Dr.S.D.Jadhav	RJPBCS,2020,11(3) 220-224	Yes
73	Facial index in western maharashtra students	Dr.S.D.Jadhav	GJRA.2020,9(6),1-2	Yes
74	Morphology and morphometry of glenoid cavity and it's clinical significance.	Aakkanksha A Khalkar, Dr.SD Jadhav, Dr. S E Pawar.	Indian journal of applied research,2020,10(6),1-3	Yes
75	Anatomical variations of foramen transversarium of 7 th cervical vertebrae and its clinical significance	Dr.S.D.Jadhav	International Journal of Research in Pharmaceutical Sciences.,2020,11(3),4902-4907	Yes
76	Prevalence of Epipteric Bones in Central Indian Adult dry skulls	Dr.S.D.Jadhav	Journal of Krishna Institute of Medical Sciences University,October-November,2020,9(4),38-43	Yes
77.	Parietal Foramina in adult human skulls:An anatomical study	Dr. A.S. Fating Dr Pawar S E	Medica Innovatica,Jul.-December,2020,10(2),46-48	Yes
78.	Study of Arteries supplying body of Pancreas and their variable pattern	Dr.N.P.Marathe Dr Pawar S E	Applied Physiology and Anatomy Digest ,Sep.2020,5(2),13-23	Yes

13. DEPARTMENTAL LIBRARY

Books concerned for departmental subject issued to department from central library. Every Year Audit is done and if needed and as per availability and demand they update the new editions book. One separate teacher has given responsibility concerned it. He maintains the register in which record is kept of issued/return books.

Data:

Present total number of books = 125

Complimentary Books = 38

Donated books = 48

Donated Journals = 87

LIST OF HEALTH SCIENCE BOOKS ISSUED DEPT LIBRARY: ANATOMY

SR.	BOOK TITLE	AUTHOR	ED	YEAR	ACC. NO	COPIES
1	TB. Of human anatomy vol. I, 2, & 3	Singh IB.	2	1999	113, 114, 115,	03
2	A TB. Of anatomy today vol. 1 & 2.	Anand M.K.	1	2002	120, 121	02
3	Hollinsheads TB. Of anatomy	Rosse G.	5	1997	140	01
4	Clinical neuroanatomy for medical students	Snell R.S.	6	2001	122, 123	02
5	Clinically oriented anatomy	Moore K.L.	3	1999	125	01
6	Essential of human anatomy Vol. II & I	Datta A.K.	3	1999	137, 138, 131	03
7	Approach to anatomy Vol. I, II& III	Kadasane D.K.	4	2000	103, 105	02
8	Gray's anatomy 38 th	Williams P.L.	38	2000	75	01
9	Cunninghams manual of practical anatomy Vol. I	Romanes G.J	15	1993	91	01
10	Cunninghams manual of practical anatomy Vol. II	Romanes G.J	15	1993	88	01
11	Cunninghams manual of practical anatomy Vol. III	Romanes G.J	15	1993	94, 309	02
12	Human Osteology	Faruqi N.A.	2	2002	127	01
13	Surface & radiological Anatomy	Halim A.	2	2001	111	01
14	Handbook of general anatomy	Chaurasia B.D.	3	2002	78	01
15	Anatomy central nervous system	Poddar S.	7	2001	84	01
16	Textbook of human neuroanatomy	Singh I.B.	4	2002	67, 68	02
17	Essentials of neuroanatomy	Datta A.K.	2	2000	112, 147	02
18	Essentials of human embryology	Datta A.K.	4	2000	65	01
19	Human embryology	Singh I.B.	7	2002	64	01
20	Difore's atlas of histology with functional correlations	Eroschenko	9	1999	101	01
21	Functional histology a text & colour atlas	Young B.	4	2001	61	01

22	TB. Of human histology	Singh IB	4	2002	966, 967	02
23	Color TB. Of histology	Garnter L.P.	2	2001	129	01
24	Bloom & fawcett's concise histology	Fawcett	2	2002	86	01
25	Histology text & atlas	Ghosh S.	1	1998	81	01
26	Essentials of human genetics	Bhatnagar	4	1999	83	01
27	Human genetics	Gangane	2	2001	63	01
28	Human anatomy regional & applied vol. 1	Chaurasia B.D.	3	1995	790	01
29	Cunningham's manual of practical anatomy vol. 3	Romanes G.J.	5	1996	302, 303, 310	03
30	Cunningham's manual of practical anatomy vol. 2	Romanes G.J.	15	1996	707	01
31	Cunningham's manual of practical anatomy vol. 1	Romanes G.J.	15	1986	307, 299	02
32	Textbook of human osteology	Singh Inderbir	2	2002	809, 808, 807	03
33	Chest X-ray made easy	Corne J.			734	01
34	Clinical neuroanatomy & related neuroscience	Fitzgerald	4	2002	557	01
35	Mcmanns color atlas of human anatomy with CD	Abrahams	5	2003	2216	01
36	The developing human clinically oriented physiology	Moore	7	2003	2217	01
37	Atlas of human anatomy	Netter	3	2003	2218	01
38	Grants atlas of anatomy with CD	Agur	11	2005	2220	01
39	Atlas of histology with functional correlations with CD	Eroschenko U.	10	2005	2222	01
40	Grays anatomy for students	Drake R.L.	1	2005	2225	01
41	Color atlas of anatomy : A photographic study of human body	Rohan	5	2003	2226	01
42	Clinical anatomy	Snell R.S.	7	2004	2239	01
43	Wheater's functional histology	Yound B.	4	2000	2244	01
44	Bloom & fawcett's concise histology with CD	Fawcett p	2	2002	2245	01
45	A TB of histology: A colour atlas & Text.	Garg	3	2002	2248	01

46	Human Anatomy Vol-I, II & III	Chaurasia B.D.	4	2004	1632	01
47	Histology picture tests	Stevens Alan	1	1998	804	01
48	Anatomy & human movement	Palastanga	5	2006	4950	01
49	Surgical anatomy	Shah	1	98	132	01
50	Emery's elements of medical genetics	Peter	12	2005	1679	01
51	Langman's medical embryology	Sadler T.W.	10	2004	4356	01
52	Textbook of histology with a practical manual & colour atlas	Bharihoke veena	2	2005	4715	01
53	Human anatomy	Datta A.K.	5	2000	130	01
54	TB of Medical Laboratory Technology	Godkar P.B	2	2005	3552	01
55	Embalming principles and legal aspects	Ajmani	1	1998	430	01
56	MBBS made easy	Vimal M.	1	2002	1346	01
57	Mcqs in Anatomy	Bhatnagar	3	2006	3460	01
58	Mcqs in Anatomy	Chopade D.K.	1	2009	6822	01
59	Viva voce in Anatomy	Gangane S	2	2006	4997	01
60	Mcqs in Anatomy	Lumley J.S.	3	1999	77	01
61	Color atlas of histology	Gartner	4	2000	4998	01
62	Cell biology & histology	Gartner L.	5	2007	4944	01
63	Essentials of Human Anatomy	Datta A.K.	3	2004	4977,4578	02
64	Handbook of osteology	Poddar S.1	1	1994	803	01
65	Living surface anatomy	Patankar	1	2009	7156	01
66	Anatomy at a glance	Mazumdar	1	2009	7159	01
67	Essential clinical anatomy	Moore	4	2007	7541	01
68	Principles of anatomy	Tortora	12	2009	7579	01
69	Essentials of human anatomy	Tendon	2	2009	7132	01
70	Grays Anatomy	Standring s.	40	2008	7004	01
71	Clinical anatomy vol-1	kulkarni	3	2016	12265	01
72	Clinical anatomy vol-2	Kulkarni	3	2016	12268	01
73	Textbook of anatomy vol-1	Seshayyan	6	2016	12270	01
74	Textbook of anatomy vol-2	Seshayyan	6	2016	12272	01
75	Textbook of anatomy vol-3	Seshayyan	6	2016	12277	01

76	TB of human neuroanatomy	Singh I	6	2005	3840	01
77	Principles of general anatomy	Data A.K	5	2001	270	01
78	Lee McGregor's synopsis of surgical anatomy	Decker G	12	1999	2183,4480	02
79	Clinical anatomy	Zargar R.K	1	2007	9500	01
80	Essentials of human genetics	Kothari M	5	2009	8074,8069	02
81	Mcqs in anatomy	Arole vasanti	1	2011	9214	01
82	Selective anatomy vol.II	Singh V	1	2015	12597	01
83	Manual of histological techniques	Mondal S.K	1	2017	12833	01
84	Langman's medical embryology	Sadler T.W	13	2017	12830	01
85	Gray's anatomy for students	Drake R.L	3	2017	12828	01
86	Grant's atlas of anatomy	Agur A.	14	2017	12827	01
87	Cunningham's manual of practical anatomy vol. 1	Koshi R	16	2017	12993,12994	02
88	Cunningham's manual of practical anatomy vol. 2	Koshi R	16	2017	12825,12824	02
89	Human Anatomy vol. 1	Chaurasia B.D	7	2016	13021,13017,13020	03
90	Human Anatomy vol. 2	Chaurasia B.D	7	2016	13027,13031,13032	03
91	Human Anatomy vol. 3	Chaurasia B.D	7	2016	13034,13036,13039	03
92	Surgical anatomy	Muzumdar S	1	2018	13005	01
93	Histology practical manual	Shetty B	3	2018	12997	01
94	B.D.Chaurasia General Anatomy	Garg K	5	2018	13051,13055	02
95	TB of Anatomy Vol.1,2, & 3	Singh V.	3	2020	13560,13555,13566	03
	Total Books					125

Total 125 books issued from Central Library to Anatomy Department.

COMPLIMENTARY COPY BOOK LIST

S.No.	Title	Author	Edition
1.	General Anatomy	S.Rawlani	2 nd
2.	Textbook of Anatomy with colour Atlas	Inderbir Singh	4 th
3.	Textbook of General Anatomy	S.Rawlani	6 th
4.	Textbook of Human Neuroanatomy	Inderbir Singh	7 th
5.	Textbook of Human Histology with colour Atlas	Inderbir Singh	5 th
6.	Textbook of Human Osteology	Inderbir Singh	2 nd
7.	Manipal Manual of Anatomy	Dr.Sampath Madhyastha	2 nd
8.	General Anatomy	Vishram Singh	2 nd
9.	Textbook of Neuroanatomy	Kishna Garg	3 rd
10.	Anatomy of Head, Neck & Brain	Vishram Singh	2009
11.	Textbook of Anatomy Vol1	Inderbir Singh	5 th
12.	Textbook of Anatomy Vol 2	Inderbir Singh	5 th
13.	Textbook of Anatomy Vol 3	Inderbir Singh	5 th
14.	Anatomy at a Glance	Sibani Mazumdar	1 st
15.	Textbook of Human Osteology	Inderbir Singh	3 rd
16.	Essentials of Human Anatomy	BK Tandon	2 nd
17.	Textbook of Anatomy	DK Kadasne	1 st
18.	Textbook of Anatomy	DK Kadasne	1 st
19.	Essentials of Anatomy	Inderbir Singh	2 nd
20.	Textbook of Anatomy	DK Kadasne	1 st
21.	Human Anatomy	H.C.Srivastava	1 st
22.	Textbook of Anatomy Vol1	Inderbir Singh	5 th
23.	Textbook of Anatomy Vol2	Inderbir Singh	5 th
24.	Textbook of Anatomy Vol3	Inderbir Singh	5 th
25.	Human Anatomy	H.C.Srivastava	1 st
26.	Embryology for Medical Students	Sudhir Sant	2 nd
27.	Textbook of Embryology	DK Kadasne	1 st
28.	Textbook of Embryology	DK Kadasne	1 st
29.	Textbook of Human Osteology	Inderbir Singh	3 rd
30.	Textbook of Human Osteology	Inderbir Singh	3 rd
31.	Textbook of Human Neuroanatomy	Inderbir Singh	8 th
32.	Textbook of Neuroanatomy	Inderbir Singh	8 th
33.	Grant's Dissector	Patrick W.Tank	15 th
34.	Grant's Dissector	Patrick W.Tank	15 th
35.	Cunningham's Manual of Practical Anatomy	G.J.Romanes	15 th
36.	Cunningham's Manual of Practical Anatomy	G.J.Romanes	15 th

37.	The Practice Manual of Illustrative Anatomy	Smita Kakar	1 st
38.	National Ethical Guidelines for Biomedical and Health Research Involving Human Participants	Dr.Roli Mathur	2017

List Of Donated Books By Dr Bohari A. A.

Sr.No.	Name of the Book	Author	Vol.	Total Book
1.	Human Anatomy	B.D.Chaurasia	1,2,3,4	4
2.	Human Embryology	Yogesh Sontakke		1
3.	General Anatomy	Vishram Singh		1
4.	Text book of Anatomy – Abdomen & Lower Limb	Vishram Singh	2	1
5.	Human Anatomy –A Dissection Manual	Sujata Kiran		1
6.	Oriented section & surface Anatomy of Living Person	K.H.Sit		1
7.	Cunningham Manual of Practical Anatomy –Thorax & Abdomen	G.J.Romanes	2	1
8.	Essentials of Human Anatomy	N.Chakraborty	1	1
9.	Text Book of Human Histology	Yogesh Sontakke		1
10.	Text Book of Neuroanatomy (Fundamental & Clinical)	I.B.Singh		1
11.	Text Book Histology 3 rd edition	G.P.Pal		1
12.	Thieme Dissector –Head ,Neck & Brain	Vishrm Singh,G.P.Pal,S.D.Gangane	3	1
13.	Atlas of Anatomy			1
14.	Human Histology -6 th edition	I.B.Singh		1
15.	Thieme Dissector – Abdomen & Lower Limb	I.B.Singh	2	1
16.	Human Embryology -6 th Edition	I.B.Singh	1	1
17.	Thieme Dissector –Upper Limb & Thorax	I.B.Singh	1	1
18.	Kadasanes Textbook Embryology	Kadasanes	1	1
19.	General Anatomy 2 nd Edition	Shobha Rawlani ,Shivlal Rawlani		1
20.	Human Osteology -3 rd Edition	I.B.Singh		1
21.	Histology –A Text & Practical Record Book	Sangita Chauhan,Seema Gupta		1
22.	Reminiscence of A human Surgeon	Mehru Jal mehta		1
Total				25

Additional Books -----

- 1) Human Histology with colour atlas and Practical guide ---Inderbir singh -7th Edition
- 2) Dissection Manual with regions & applied Anatomy ----Mercy Navis –Vol.1,2,3

List of donated books by Dr Fating Anita:

S.No.	Name of book	Author	Edition/Year	Total books
25	Histology Text and Atlas	Brijesh kumar	2013	2
26	Text book of Histology	IB Singh	8 th	1
27	Text book of Osteology	IB Singh	3 rd	1
28	Text book of Histology	JP Gunasegaran	2 nd	1
29	Handbook of General Anatomy	BDC	6 th	1
30	Text book of General Anatomy	Shobha Rawlani	2 nd	1
31	Text book of Histology	GP Pal	3 rd	1
32	Text book of Human Histology	IB Singh	5 th	1
33	Handbook of General Anatomy	BDC	3 rd	1
34	Text book of Histology	Vasudeva Mishra	7 th	1
35	Thieme's Atlas of Anatomy	Anne M.Gilroy	2008	1
36	Text book of Human Neuroanatomy	IB Singh	8 th	1
37	Histology Practical Manual	BK Shetty	3 rd	2
38	Text book of Anatomy	IB Singh	4 th	3 (Vol 1,2 &3)
39	Anatomy of Abdomen&L.Limb	Vishram Singh	2011	1
40	Anatomy of Head Neck & Brain	Vishram Singh	2009	1
41	Human Anatomy	BDChaurasia	4 th	1
42	Human Anatomy	BDChaurasia	6 th	2 (Vol 2 &3)
				23

Journal Donated by Dr.Bohari A.A.:

Sr.No.	Title	Issue & Vol.	Month	Year
1	Vims Health Science	Vol.(01),Number (02)	June	2014
2	Vims Health Science	Vol.01,Number (01)	March	2014
3	Vims Health Science	Vol.01,Number (03)	September	2014
4	Vims Health Science	Vol.01,Number (03)	September	2014
5	Vims Health Science	Vol.01,Number (04)	December	2014
6	Vims Health Science	Vol.06,Number (01)	March	2014
7	Vims Health Science	Vol.01,Number (03)	September	2019
8	Vims Health Science	Vol.05,Number (04)	December	2018
9	Vims Health Science	Vol.05,Number (03)	September	2018
10	Vims Health Science	Vol.05,Number (02)	June	2018
11	Vims Health Science	Vol.05,Number (01)	March	2018
12	Vims Health Science	Vol.05,Number (01)	March	2018
13	Vims Health Science	Vol.02,Number (02)	June	2015
14	Vims Health Science	Vol.02,Number (03)	September	2015
15	Vims Health Science	Vol.01Number (04)	December	2014
16.	Vims Health Science	Vol.02,Number (04)	December	2015
17	Vims Health Science	Vol.03,Number (01)	March	2016
18	Vims Health Science	Vol.03Number (02)	June	2016
19	Vims Health Science	Vol.02,Number (01)	March	2015
20	Vims Health Science	Vol.04,Number (04)	December	2017
21	Vims Health Science	Vol.04,Number (03)	September	2017
22	Vims Health Science	Vol.04,Number (02)	June	2017
23	Vims Health Science	Vol.04,Number (01)	March	2017
24	Vims Health Science	Vol.03,Number (04)	December	2016

Journals List Donated by Dr. Jadhav S. D.

Sr.No.	Name of the Journal	Month & Year	Vol.& Issue
1.	Journal of Krishna Institute of Medical Sciences University	January to March 2019	Vol.8,Issue-1
2.	Journal of Krishna Institute of Medical Sciences University	April to June 2019	Vol.8,Issue-2
3.	Journal of Krishna Institute of Medical Sciences University	April to June 2018	Vol.7,Issue-2
4.	Journal of Krishna Institute of Medical Sciences University	January to March 2018	Vol.7,Issue-1
5.	Journal of Krishna Institute of Medical Sciences University	July to September 2016	Vol.5,Issue-3
6.	Journal of Krishna Institute of Medical Sciences University	July to December	Vol.2,Issue-2
7.	Journal of Krishna Institute of Medical Sciences University	October to December 2020	Vol.9,Issue-4
8.	Journal of Krishna Institute of Medical Sciences University	July to September 2020	Vol.9,Issue-3
9.	Journal of Krishna Institute of Medical Sciences University	July to September 2019	Vol.8,Issue-3
10.	Journal of Krishna Institute of Medical Sciences University	July to September 2015	Vol.4,Issue-3
11.	Journal of Krishna Institute of Medical Sciences University	October to December 2019	Vol.8,Issue-4
12.	Journal of Krishna Institute of Medical Sciences University	January to March 2020	Vol.9,Issue-1
13.	Indian Journal of Applied Research	June-2020	Vol.10,Issue-6
14.	Global Journal for Research Analysis	June-2020	Vol.9,Issue-6
15.	Indian Medical Gazette for development of Modern Medicine & Surgery	June-2010	Vol.CXLIV.Issue-6
16.	National Journal of Integrated Research in Medicine	September-October 2012	Vol.3,Issue-4
17.	National Journal of Medical Sciences	July-2012	Vol.1,Issue-2
18.	Journal of Clinical And Biomedical Sciences	Jan.-March -2011	Vol.1,Issue-1
19.	National Journal of Medical Sciences	January-2014	Vol.3,Issue-1
20.	MAHACON-1 2014 Souvenir of 1 st Maharashtra State Anatomy Conference	19 th to 20 th Sep.2014	NKP Salve MC Nagpur

21.	54 th NATCON-06	27 th to 30 th Dec.2006	AIMS,Kochi
22.	Journal of The Anatomical Society of India	June -1998	Vol.-47,Issue-1
23.	Journal of The Anatomical Society of India	December-1995	Vol.-44
24.	Journal of The Anatomical Society of India	June-1990	Vol.39
25.	Journal of The Anatomical Society of India	June-2000	Vol.-49,Issue-1
26.	Journal of The Anatomical Society of India	June-2012	Vol.61,Issue-1
27.	Journal of The Anatomical Society of India	December-2015	Vol.64,Issue-2
28.	National Journal of Clinical Anatomy	July-2015	Vol.4,Issue-3
29.	Journal of The Anatomical Society of India	June-2010	Vol.59,Issue-1
30.	VIMS Health Science Journal	March -2014	Vol.1,Issue-1
31.	VIMS Health Science Journal	December-2016	Vol.3,Issue-4
32.	VIMS Health Science Journal	September-2017	Vol.4,Issue-3
33.	VIMS Health Science Journal	June-2018	Vol.5,Issue-2
34.	VIMS Health Science Journal	June-2014	Vol.1,Issue-2
35.	VIMS Health Science Journal	September-2018	Vol.5,Issue-3
36.	VIMS Health Science Journal	June-2017	Vol.4,Issue-2
37.	VIMS Health Science Journal	December-2018	Vol.5,Issue-4
38.	National CME on Recent Advances in Embalming and Museum Techniques	11 th Dec.2010	B.S.K.2 nd Stage, Bengaluru
39.	VIMS Health Science Journal	June-2016	Vol.3,Issue-2
40.	VIMS Health Science Journal	September-2016	Vol.3,Issue-3
41.	VIMS Health Science Journal	March - 2018	Vol.5,Issue-1
42.	VIMS Health Science Journal	June-2015	Vol.2,Issue-2
43.	VIMS Health Science Journal	September-2015	Vol.2,Issue-3
44.	VIMS Health Science Journal	March - 2019	Vol.6,Issue-1
45.	VIMS Health Science Journal	March - 2017	Vol.4,Issue-1
46.	VIMS Health Science Journal	December -2014	Vol.1,Issue-4
47.	VIMS Health Science Journal	September-2014	Vol.1,Issue-3
48.	VIMS Health Science Journal	March-2015	Vol.2,Issue-1
49.	VIMS Health Science Journal	March-2016	Vol.3,Issue-1
50.	VIMS Health Science Journal	December -2015	Vol.2,Issue-4
51.	VIMS Health Science Journal	December -2017	Vol.4,Issue-4
52.	Journal of The Anatomical Society of	June-2009	Vol.58,Issue-1

	India		
53.	Journal of The Anatomical Society of India	June-2011	Vol.60,Issue-1
54.	Journal of The Anatomical Society of India	December -2010	Vol.59,Issue-2
55.	Journal of The Anatomical Society of India	June-2005	Vol.54,Issue-1
56.	VIMS Health Science Journal	March-2014	Vol.1,Issue-1
57.	Indian Journal of Anatomy	May-August 2016	Vol.5,Issue-2
58.	Journal of The Anatomical Society of India	December -2014	Vol.63,Issue-2
59.	National Journal of Clinical Anatomy	July-2012	Vol.1,Issue-3
60.	Anatomica Karnataka-an International Journal	April-2015	Vol.9,Issue-1
61.	Anatomica Karnataka-an International Journal	December-2011	Vol.5,Issue-3
62.	Anatomica Karnataka-an International Journal	August-2015	Vol.9,Issue-2
63.	Anatomica Karnataka-an International Journal	August-2013	Vol.7,Issue-2

14. REVENUE GENERATED BY THE DEPARTMENT OF ANATOMY

Department of anatomy provides following facilities and as per policy decided.

List of Facilities with charges:

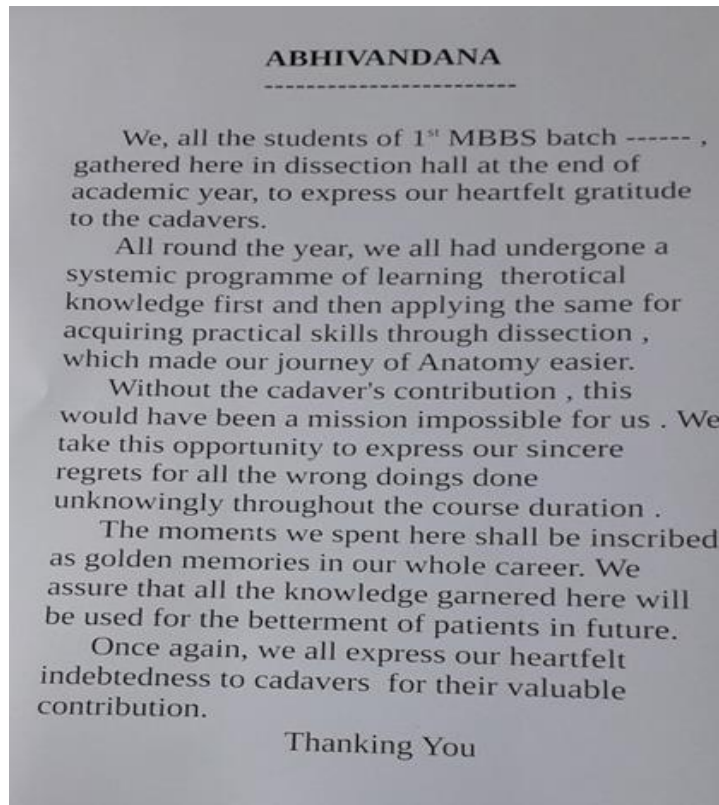
Sr No	Facility	Maintenance charges
1	Keeping dead body in cold	Rs. 500/- for 12 hrs.
2.	Doing only Embalming for long distance transport of cadaver	Rs. 2000/ per cadaver
3.	If unclaimed body come from Shirdi, identified before embalming and to return back as per demand of relatives with police permission	Rs. 3000/- cadaver
4.	If unclaimed body coming from Shirdi identified after embalming and to return back as per demand of relatives with police permission	Rs. 5000/- cadaver
5.	Temporal bone	Rs. 1000/per temporal bone
6.	Cadaver for dissection to other institute as per demand and availability	Rs. 10,000/- per cadaver

Till Now revenue generated by Department of Anatomy = Rs. 8,34,300/-

15. DEPARTMENTAL ACTIVITIES

Abhivandana:

Abhivandana is carried at the end of Academic session after finishing all dissection to express gratitude and thankfulness towards cadavers for their great role in making anatomy more easier by doing dissection on them.



Body Donation Camps:



At Rahuri Body donation camp with Sharadchandra sanstha



At Birewadi Sakur, Taluka - Sangamner Body donation camp with Youth sena sangathan.



स्नेहालया | Snehalaya
 कार्यालय - पथ 239, ए.ब्लॉक, ए.आय.डी.सी., निमब्लक,
 ता.वि. अहमदनगर - 414 111 (महाराष्ट्र)
 पृथ्वी क्र. 0241-2778353 मो. नं. +91-9011020176, 77, 78, 80
 Office : Survey No. 239, F-Block, M.I.D.C., Nimblak,
 Tal & Dist. - Ahmednagar - 414 111 (M.S.) India.
 E-mail : info@snehalaya.org Website : www.snehalaya.org

प्रति,
 मा.डॉ.बी.आर.झांबरे,
 प्रोफेसर व हेड ऑफ डिपार्टमेंट,
 पद्मश्री विठ्ठलराव विखे पाटील फाऊंडेशन वैद्यकीय महाविद्यालय व रुग्णालय यांच्या शरीर शास्त्र विभाग, शासकीय
 डेअरी समोर, एम.आय.डी.सी., वडगाव गुप्ता, अहमदनगर - ४१४१११ मो. ९४२२०६५६७१.

म.न.वि.वि.,
 सोबत आम्हा उभयतांच्या देह विनियोगाचे फॉर्म जोडले आहेत. चंद्र, शुद्ध प्रतिपदा या मुहूर्तावर
 भरले आहेत व इच्छापत्रही याच दिवशी केले असून त्यात स्पष्ट सूचना दिल्या आहेत.
 आपल्या कार्यालयात आपण स्वतः, डॉ.सुरेखा जाधव व श्रीमती.एस.आर.भडणे व आपला कार्य
 सहकारी यांनी चांगले स्वागत करून उपयुक्त माहिती दिली याबद्दल आपले हार्दिक आभार व वार्षिक शुभेच्छा !
 आपल्या फॉर्ममध्ये देहदान हा शब्द वापरला आहे. यात दानाची भावना दिसून येते. वास्तविक हे
 व ईश्वरीय कार्य आहे. कारण शरीराची मालकी हिच ईश्वराची मालकी आहे. त्यात दानाची भावना असू नये. उ
 देहाचा उपयोग वैद्यकीय अभ्यासाबरोबरच शरिरातील अवयवांचा उपयोग गरजू रुग्णांना झाला तर फार बरे
 लवकरात लवकर त्वचा बँक उभी करावी. डोळे काढण्याची व्यवस्था आपल्याकडे झाली तर सोयीचे होईल. अ
 निर्णय केवळ आपलाच असेल.

या उपक्रमाकरीता सविस्तर माहितीफलक संदर्भ, नाव, फोन.नं. रावी - अपराधी याकरीता संपर्क, प
 तसेच जनजागृती याकरीता आपण प्रयत्न करावे. त्यात निरनिराळ्या संस्था, सार्वजनिक वाचनालये, सामाजिक
 ज्येष्ठ नागरिक याद्वारे प्रयत्न करता येईल. मृत्यूनंतर दहनाकरीता एक मध्यम झाड नाहिसे करणे. अगर विद्यु
 वाचविणे हे प्रत्येक नागरिकांचे कर्तव्य आहे. ही जनजागृती सर्वदूर व वेगाने व्हावी व अहमदनगरमधील
 संस्था आदर्श ठरावी असे वाटते.

आपल्या सहकार्याबद्दल आभारी आहे.

रामकान्त ताम्बोली
 पत : - फ्लॅट नं. १/५, कमला रेसिडेन्सी, बडो गल्ली, नवीपेठ, अहमदनगर - ४१४००१,
 ई - मेल : ramakant.tamboli@gmail.com मो. ९०११०२६४९७९.

आपला स्नेहा
 (रमाकान्त ताम्बोली)
 विश्वस्त स्नेहा

कार्यालय - स्नेहालया भवन, चिंचा विठ्ठलराव विखे, महात्मा गांधी मैदान जवळ, अहमदनगर - ४१४ ४०१ (महाराष्ट्र)
 क्र. - 0241-2327593, 2327555
 CS
 ations to Snehalaya are exempted from Income Tax under
 tion 80 G No. Pn/CIT-112(a)80G/135/2008-09/1916
 Society Reg. No. 2220
 Trust Reg. No. F-2169
 PAN : AASST3384 M
 TAN : PNE5 19093 E
 F.C.R. Reg. No. 083720087/20-10-199

At Snehalaya body donation camp.



With Jyeshtha nagric sangh , Bhingar body donation camp.



With Sankalp Foundation, Ahmednagar Body donation camp.



With Andha shradha nirmoolan samity, body donation camp.



Memorable moment when our respected dean sir filled up body donation form for himself.



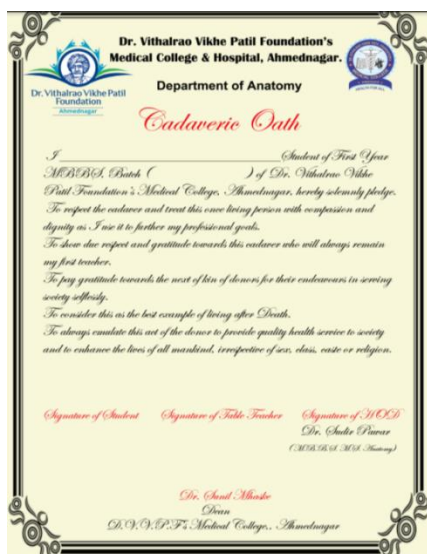
With Mr Bharule Family in Ahmednagar body donation camp.

Cadaveric Oath

Before the starting of actual dissection every year we conduct cadaveric oath function. This is to give due respect towards cadavers for their great role in anatomy and students should know it. In this we give printed copy to each student.



"Cadaveric Oath" ceremony batch 2020-2021



Printed copy of Cadaveric Oath

CME/WORKSHOPS:

We conduct Various CME/Workshops to update latest knowledge of students as well as Teaching staff and other medical practitioners.

CME conducted on Topic "Organ Donation – Life goes on" dated – 13th October 2018





CME with ENT Department on Topic "Endoscopic approach and detailed anatomy of nose, PNS and Anterior skull base with cadaveric dissection" dated 7.2.2021







CISP workshop at MUHS Nashik.



Prizes to toppers in internal examinations:





Models making and poster drawing:



Microscope Model made by students



The Cell Model



Charts drawn displayed in Notice board

Farewell to Ex-Head of Department Dr.B.R. Zambare sir



Farewell to Ex-faculty Mr. Mithil Potugunti...



Farewell to Ex-faculty Dr. Bohari sirVoluntary retirement.



Farewell to Ex-faculty Dr Fating Anita



Cranial Nerve Museum

Visit By Hon'ble secretary Lt.General Dr.B.Sadananda



Other visitors to museum



Dr. Deepak Joshi, Professor and Head, GMC Mumbai



Poster Exhibition



Departmental Proud Moment



Departmental opening of RO water purifier Unit by Respected Dean

Dr.Sunil Natha Mhaske

First B.P.TH Students Welcome



First B.P.TH parent Teacher Meet



Photo with Distinction Holders with Batch 2017-18



Photo with Hon'ble Minister Mr.Ramdas Athawale at NATCON Of ASI Delhi
Vardhman Medical College, Delhi.



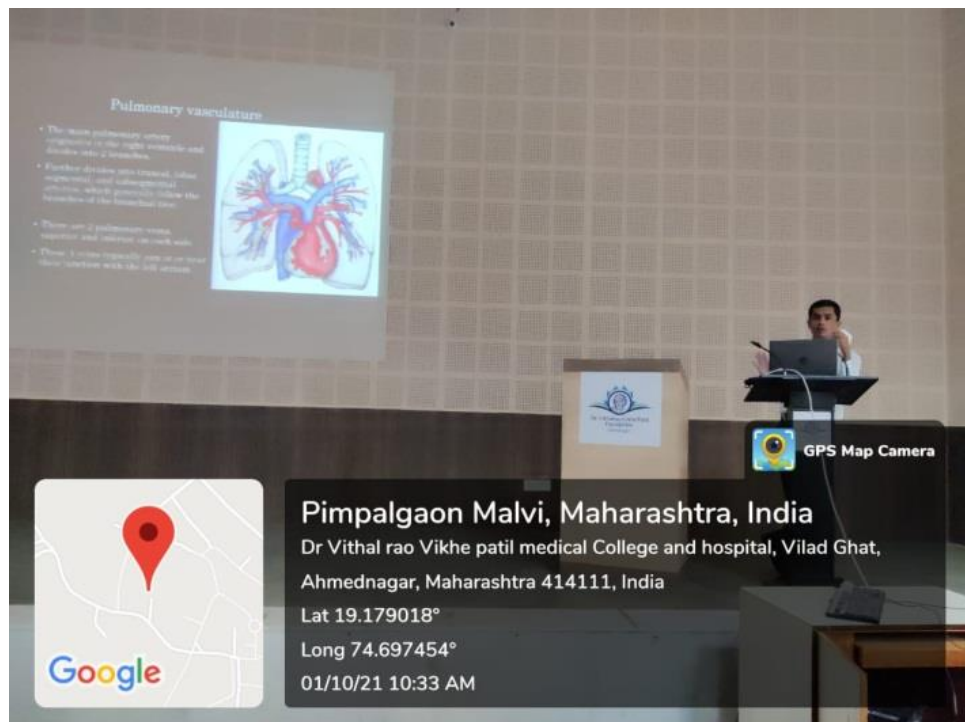
Visit to Casualty.....ECE Activity



Visit to ENT Department -----ECE Activity



Integrating teaching with Paediatric department.....



Integrated Teaching with Medicine Department

Sometime with External Examiners (MUHS)



Others

At NATCON-ASI Delhi



At Symbiosis institute's Women medical college,
Pune as staff selection committee member.



At D.Y. Patil Pune with Respected Dean



At D.Y. Patil Pune with Respected HOD Anatomy



At NATCON-ASI Delhi



INFORMATION BOOKLET

DR. VITHALRAO VIKHE PATIL FOUNDATION'S MEDICAL COLLEGE & HOSPITAL

📍 Dr. Vithalrao Vikhe Patil Foundation's,
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Ahmednagar - 414111 (M.S.) India.

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