

FOR Ph.D COURSE(S) FOR A.Y. 2026-2027

(Please submit separate report for each subject)

Date of Inspection :

Faculty : DENTAL . Subject/Specialty: Conservative Dentistry & Endodontics

1. Name & Address of the College/Research Centre: - Dr. G.D.Pol Foundation
Y.M.T. Dental College & Hospital,
Institutional Area, Sector-4,
Kharghar, Navi Mumbai-410210

Name of Head of the Department: - Dr. Vibha Hegde

Designation: Professor & HOD

2.Department / Subject wise details of available PhD Guides: -
(Attach Annexure "A")

Sr. No.	Name of Ph.D. Guide	Designation	Date of Birth	Date of Retirement	Total No. of PhD Scholars Registered till date	Has completed six days Research Methodology Workshop? Yes/No	PhD Recognition No. and Date
1	DR.VIBHA HEGDE	PROFESSOR & HOD	26.01.1971	26.01.2036	6	YES	MUHS/UDC//Ph.D/E-2/1213/2017 Dt. 03/11/2017

4. Details of available infrastructure for Research:

- i) Adequate number of Computers with Internet facility is available? **Yes**
ii) Adequate number of Books / Journals are available ? **Yes**
iii) Any other specific thing available at the Department: **Yes**
...Advanced Restorative & Endodontics Armamentarium

5. Details of Central Research Laboratory:

- i) Available Area (in sq. ft) : . . 200 Sq.ft.. .
ii) Is Drugs/Medicines/Chemicals etc. are available for research? **Yes**
iii) Is Adequate number of Instruments are available? **Yes**
iv) Is Records of Stock book available? **Yes**

6. Details of Central Animal House: Not Applicable

- i) Available Area in sq. ft:
ii) Functioning Central Animal House? **Yes**

A. Deepa Dan
DEAN

Y.M.T. Dental College
& Hospital Kharghar,
Navi Mumbai - 410 210

7. **Details of Institutional Ethical Committee: (Attach Annexure "B")**
- i) Date of Composition: **01/11/2023**
 - ii) Total Number of Members:**8**.....
 - iii) Number of meetings held in previous year:**7**.....
 - iv) Whether Records of proceedings are maintained properly? **Yes**
 - v) Is Human and Animal Ethics Committee, registered under the appropriate authority? **Yes**

8. **Details of Research Advisory Committee: (Attach Annexure "C")**
- i) Date of Composition: **20/11/2020**.
 - ii) Total number of Members:**5**.....
 - iii) Number of meetings held in previous year:**8**.....
 - iv) Whether records of proceedings are maintained properly? **Yes**

9. **Is Doctoral Committee constituted in the lines of RAC?** **Yes**
- i) If Yes, Date of Composition: . **20/11/2020**
 - ii) Total number of Members:**5**.....
 - iii) Name of External Subject Expert...**Dr. Aarti Bohra ,Dr. Aditya Patel**

10. **Is Plagiarism detection software facility available?** **No**

If Yes, Name of the Software Drill Bit

11. **Is attendance of the Ph.D. Scholar maintained properly?** **Yes**

12. **Whether Research Centre is registered under MPCB provisions?** **Yes**

13. **Whether BMW facility is available?** **Yes**

14. **Any other important thing related to Research/Department/Facilities, which will be helpful to carry out good quality research under this department:**

- 1. Trained & Experienced Faculty
- 2. Good Patient OPD
- 3. Stereo Microscope, Microscope, Centrifugal Machine,

DECLARATION BY LIC

We, the LIC Members, hereby certify that, we have thoroughly inspected and verified the Department/College/Research Centre, the available other facilities, required instruments and equipment, available at the research centre. The overall observations of the Inspection Committee are as follows: -

.....

.....

Name of Inspectors		Sign. of Inspectors with Date
1)	Chairman	
2)	Member	
3)	Member	
4)	Member	<i>A. Gupta</i> DEAN

FOR Ph.D COURSE(S) FOR A.Y. 2026-2027

(Please submit separate report for each subject)

Date of Inspection	:	
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Faculty : DENTAL . Subject/Specialty: Oral Pathology & Microbiology

1. Name & Address of the College/Research Centre: - Dr. G.D. Pol Foundation's
Y.M.T. Dental College & Hospital,
Institutional Area, Sector-4,
Kharghar, Navi Mumbai-410210

Name of Head of the Department: - Dr. Sheetal Choudhari

Designation: Professor & HOD

2.Department / Subject wise details of available PhD Guides: -

(Attach Annexure "A")

Sr. No.	Name of Ph.D. Guide	Designation	Date of Birth	Date of Retirement	Total No. of PhD Scholars Registered till date	Has completed six days Research Methodology Workshop? Yes/No	Ph D Recognition No. and Date
1	DR.SHEETAL CHOUDHARI	PROFESSOR & HOD	08.09.1979	15.03.2044	2	YES	MUHS/Ph.D/Guide/266/2025 Dt. 16/10/2025

4.Details of available infrastructure for Research:

i) Adequate number of Computers with Internet facility is available? **Yes**ii) Adequate number of Books / Journals are available ? **Yes**

iii) Any other specific thing available at the Department:.....

Pentahead microscope, Research microscope with polarising attachment, phase contrast attachment, dark field attachment, Fluorescence microscope, Ez- retriever system, Polymer and antibody kit (IHC)

5.Details of Central Research Laboratory:

i) Available Area (in sq. ft) : . **200 Sq.ft**ii) Is Drugs/Medicines/Chemicals etc. are available for research? **Yes**ii) Is Adequate number of Instruments are available? **Yes**iv) Is Records of Stock book available? **Yes**

6.Details of Central Animal House: Not Applicable

i) Available Area in sq. ft:

ii) Functioning Central Animal House?

A. Sheetal Choudhari
DEAN
Y.M.T. Dental College
& Hospital Kharghar,
Navi Mumbai - 410 210

7. Details of Institutional Ethical Committee: (Attach Annexure "B")

- i) Date of Composition: **01/11/2023**
- ii) Total Number of Members:**8**
- iii) Number of meetings held in previous year:**5**
- iv) Whether Records of proceedings are maintained properly? **Yes**
- v) Is Human and Animal Ethics Committee, registered under the appropriate authority? **Yes**

8. Details of Research Advisory Committee: (Attach Annexure "C")

- i) Date of Composition: **02/12/2022**
- ii) Total number of Members:**5**
- iii) Number of meetings held in previous year:**2**
- iv) Whether records of proceedings are maintained properly? **Yes**

9. Is Doctoral Committee constituted in the lines of RAC? **Yes**

- i) If Yes, Date of Composition: **02/12/2022**.
- ii) Total number of Members:**5**
- iii) Name of External Subject Expert...**Dr. Sangeeta Palaskar**

10. Is Plagiarism detection software facility available?

If Yes, Name of the Software... **Drill Bit** **Yes**

11. Is attendance of the Ph.D. Scholar maintained properly? **Yes**

12. Whether Research Centre is registered under MPCB provisions? **Yes**

13. Whether BMW facility is available? **Yes**

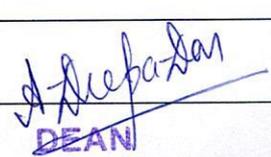
14. Any other important thing related to Research/Department/Facilities, which will be helpful to carry out good quality research under this department:

Pentahead microscope, Research microscope with polarising attachment, phase contrast attachment, dark field attachment, Fluorescence microscope, Ez- retriever system, Polymer and antibody kit (IHC)

DECLARATION BY LIC

We, the LIC Members, hereby certify that, we have thoroughly inspected and verified the Department/College/Research Centre, the available other facilities, required instruments and equipment, available at the research centre. The overall observations of the Inspection Committee are as follows: -

.....

Name of Inspectors		Sign. of Inspectors with Date
1)	Chairman	
2)	Member	
3)	Member	
4)	Member	 DEAN



DR. G. D. POL FOUNDATION Y.M.T. DENTAL COLLEGE AND HOSPITAL

Institutional Area, Sector-4, Kharghar, Navi Mumbai - 410210.

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ENRICHING MINDS, EMPOWERING FUTURE

Ref No. YMTDC/211/2026

Date. 04/02/2026

ANNEXURE-XVII-B

List of Ph.D. Guides Available at Ph.D. Research Centre

Sr. No.	Name of Ph.D. Guide	Designation	Date of Birth	Date of Retirement	Total No. of Ph.D. Scholars Registered till date	Has completed six days Research Methodology Workshop? Yes/No	Ph.D Recognition No. and Date
1	Dr. Deepa Das	Dean Professor & HOD	09.05.1972	09.05.2037	0	YES	MUHS/UDC(Ph.D.) /Guide/421/2021 Dated 31/12/2021
2	Dr. Meghna Vandekar	Professor & HOD	21.07.1974	21.07.2039	0	NO	MUHS/UDC(Ph.D.) /Guide/421/2021 Dated 31/12/2021
3	Dr. Vibha Hegde	Professor & HOD	26.01.1971	26.01.2036	4	YES	MUHS/UDC//Ph.D / E-2/1213/2017 Dt. 03/11/2017
4	Dr. Saloni Mistry	Professor & HOD	14.12.1974	14.12.2039	0	NO	MUHS/UDC(Ph.D.) /Guide/421/2021 Dated 31/12/2021
5	Dr. Shreyas Gupte	Professor & HOD	06.01.1975	06.01.2040	0	NO	MUHS/UDC(Ph.D.) /Guide/421/2021 Dated 31/12/2021
6	Dr. Amar Katre	Professor & HOD	04.01.1978	04.01.2043	0	NO	MUHS/UDC(Ph.D.) /Guide/421/2021 Dated 31/12/2021
7	Dr. Sheetal Choudhari	Professor & HOD	07.09.1979	08.09.2044	2	YES	MUHS/Ph.D/Guide/266 /2025 Dt. 16/10/2025
8	Dr. Rizwan Sanadi	Professor	28.04.1977	28.04.2042	0	NO	MUHS/Ph.D/Guide/266 /2025 Dt. 16/10/2025

Date: 4/02/2026

Signature, Name and stamp of

Dean/Principal/Director

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Date. 04/02/2026

ANNEXURE-XVII-C

Details of Institutional Ethical Committee

A) Details of Institutional Ethical Committee

Sr.No.	Name of Ethical Committee Member	Designation
1	Dr. Deepa Das	Authority under which IEC is Constituted
2	Dr. Deepak Langade	Chairperson
3	Dr. Amar Katre	Member Secretary
4	Dr. Shreyas Gupte	Dental Scientist/Expert
5	Dr. Pradnya Deolekar	Medical Scientist/Expert
6	Adv.Suresh Pawar	Lawyer
7	Mr. Samir More	Social Worker
8	Mrs.Archana Chile	Lay person

Dr. Deepa Das

Date: 04/02/2026

Signature, Name and stamp of
Dean/Principal/Director

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Date. 04/02/2026

ANNEXURE-XVII-D

Details of Research Advisory/ Doctoral Committee
Subject : Conservative Dentistry & Endodontics

Sr.No.	Name of Research Advisory/ Doctoral Committee/Subject expert Member	Designation
1	Dr. Deepa Das	CHAIRPERSON
2	Dr. Vibha Hegde	PH.D. GUIDE
3	Dr. Aarti Bohra	SUBJECT EXPERT
4	Dr. Aditya Patel	SUBJECT EXPERT
5	Dr. Dheeraj Kalra	RESEARCH METHODOLOGY EXPERT

Date: 04/02/2026

Dr. Deepa Das
Signature, Name and stamp of
Dean/Principal/Director

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& Hospital Kharghar,
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Ref No. YMTDC/273/2026

Date. 04/02/2026

ANNEXURE-XVII-D

Details of Research Advisory/ Doctoral Committee

Subject : Oral Pathology & Microbiology

Sr.No.	Name of Research Advisory/ Doctoral Committee/Subject expert Member	Designation
1	Dr. Deepa Das	CHAIRPERSON
2	Dr. Sheetal Choudhari	PH.D. GUIDE
3	Dr. Sangeeta Palaskar	SUBJECT EXPERT
4	Dr. Jigna Pathak	SUBJECT EXPERT
5	Dr. Dheeraj Kalra	RESEARCH METHODOLOGY EXPERT

Dr. Deepa Das

Date: 04/02/2026

Signature, Name and stamp of
Dean/Principal/Director

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