

Serial No.

Form No. 1

**APPLICATION FOR REGISTRATION
AND TRANSFER OF COLLEGE / INSTITUTION
2023 - 24**



ODISHA UNIVERSITY OF HEALTH SCIENCES, BHUBANESWAR

Sishu Bhawan Square, Bhubaneswar - 751009

Website: www.ouhs.ac.in e-mail: ouhs@ouhs.ac.in Tel: 0674-2917266

**APPLICATION FOR
REGISTRATION AND TRANSFER OF COLLEGE / INSTITUTION, 2023-24**

(Fill all the columns. Mention "NA" where not applicable. Use additional sheets where necessary)

Code			
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1. College / Institution

- (i) Name -----

- (ii) Postal Address with PIN Code -----

- (iii) Web Portal -----
- (iv) Official e-mail -----
- (v) Fax -----
- (vi) Land Phone & Mobile Number -----

2. Principal / Director of the College / Institution

- (i) Name -----
- (ii) Postal Address with PIN Code -----

- (iii) Official e-mail -----
- (iv) Fax -----
- (v) Land Phone & Mobile Number -----

**3. Type of College / Institution
(Please tick Mark)**

- (i) Govt Pvt. Aided Private
- If Govt (Please specify) Central / State
- If Private (Please specify) Trust Society Other (s)

(ii) Name of Trust / Society / Others -----

(iii) Postal address of Registered Office -----

(iv) Land Phone & Mobile Number -----

4. Last Affiliating University Details

4.1

(i) Name -----

(ii) Postal Address with PIN Code -----

(iii) Official e-mail -----

(iv) Fax -----

(v) Year of 1st Affiliation -----

(vi) Course (s) -----

**4.2 Affiliating University Details
(If more than one University)**

(i) Name -----

(ii) Postal Address with PIN Code -----

(iii) Official e-mail -----

(iv) Fax -----

(v) Year of 1st Affiliation

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(vi) Course (s)

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5. National / International Collaboration details:

(i) Name

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(ii) Postal Address with PIN Code

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(iii) Official e-mail

(iv) Any type of Collaboration

Academic

Training

Others

6.	Course Details				
6.1	Name of Faculty	Modern Medicine			
6.1.1	Name of the Course	Duration	Academic Session of 1 st Affiliation	Annual Intake Capacity	UG / PG
A.	MBBS				
B.	MD				
i.	Anatomy				
ii.	Anesthesiology				
iii.	Biochemistry				
iv.	Community Medicine				
v.	Dermatology				
vi.	Emergency Medicine				
vii.	Family Medicine				
viii.	Forensic Medicine & Toxicology				
ix.	Geriatrics				
x.	General Medicine				
xi.	Hospital Administration				
xii.	Microbiology				
xiii.	Paediatrics				

xiv.	Palliative Medicine				
xv.	Pathology				
xvi.	Pharmacology				
xvii.	Physiology				
xviii.	Physical Medicine and Rehabilitation				
xix.	Psychiatry				
xx.	Radio- Diagnosis				
xxi.	Radiation Oncology				
xxii.	Respiratory Medicine				
xxiii.	Sports Medicine				
xxiv.	Transfusion Medicine				
C.	MS				
i.	Ear, Nose & Throat				
ii.	General Surgery				
iii.	Obstetrics and Gynecology				
iv.	Ophthalmology				
v.	Orthopedics				
vi.	Traumatology and Surgery				
D.	DM				
I.	Cardiology				
II.	Clinical Hematology				
III.	Clinical Immunology and Rheumatology				
IV.	Clinical Pharmacology				
V.	Endocrinology				
VI.	Gastroenterology				
VII.	Hepatology				
VIII.	Medical Oncology				
IX.	Neurology				
X.	Nephrology				
XI.	Onco-Pathology				
XII.	Pulmonary Medicine				
E.	MCh				
i.	Cardio Thoracic and Vascular Surgery				
ii.	Endocrine Surgery & Breast				
iii.	Gynecological Oncology				
iv.	Head and Neck Surgery				
v.	Neuro Surgery				
vi.	Pediatric Surgery				
vii.	Plastic Surgery				
viii.	Surgical Gastroenterology				
ix.	Surgical Oncology				

	x.	Urology			
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6.2		Name of Faculty	Dental Science			
6.2.1		Name / Nomenclature of the Course	Duration	Academic Session of 1 st Affiliation	Annual Intake Capacity	UG / PG
	A.	BDS				
	B.	MDS				
	i.	Orthodontics & Dentofacial Orthopaedics				
	ii.	Periodontology				
	iii.	Conservative Dentistry & Endodontics				
	iv.	Oral & Maxillofacial Surgery				
	v.	Public Health Dentistry				
	vi.	Oral Medicine & Radiology				
	vii.	Prosthodontics and Crown & Bridge				
	viii.	Paediatric and Preventive Dentistry				
	ix.	Oral Pathology & Oral Micro Biology				

6.3		Name of Faculty	Ayurveda			
6.3.1		Name / Nomenclature of the Course	Duration	Academic Session of 1 st Affiliation	Annual Intake Capacity	UG / PG
	A.	BAMS				
	B.	MD (Ayurveda)				
	i.	Pharmaceutical (Ayurveda Vachaspati – Rasashastra & Bhaishajya Kalpana)				
	ii.	Medicine (Ayurveda Vachaspati – Kayachikitsa)				
	iii.	Pediatrics (Ayurveda Vachaspati - Kaumarbhritya)				
	iv.	Diagnostic Procedure & Pathology (Roga Nidana evum Viikrit Vigyan)				
	v.	Compendium and Basic Principles (Ayurveda Vachaspati, Ayurveda Samhita and Siddhanta)				
	C.	MS (Ayurveda)				
	i.	Dhanwantari - Shalya- Samanya, (Ayurveda General Surgery)				
	ii.	(Ayurveda Dhanwantari) – Prasuti evum Striroga (Ayurveda Gynaecology & Obstetrics)				

6.4		Name of Faculty	Homoeopathy			
6.4.1		Name / Nomenclature of the Course	Duration	Academic Session of 1st Affiliation	Annual Intake Capacity	UG / PG
	A.	BHMS				
	B.	MD (Homoeopathy)				
	i.	Materia Medica				
	ii.	Organon of Medicine				
	iii.	Repertory				
	iv.	Homeopathic Pharmacy				
	v.	Practice of Medicine				
	vi.	Psychiatric Medicine				
	vii.	Pediatric Medicine				

6.5		Name of Faculty	Nursing			
6.5.1		Name / Nomenclature of the Course	Duration	Academic Session of 1st Affiliation	Annual Intake Capacity	UG / PG
	A.	B.Sc. (Nursing)				
	B.	B.Sc. (Nursing) Post Basic				
	C.	M.Sc. (Nursing)				
	i.	Medicine & Surgery				
	ii.	Paediatrics				
	iii.	Obstetrics & Gynaecology				
	iv.	Community Medicine				
	v.	Psychiatric				

6.6		Name of Faculty	Pharmacy			
6.6.1		Name / Nomenclature of the Course	Duration	Academic Session of 1st Affiliation	Annual Intake Capacity	UG / PG
	A.	B. Pharm				
	B.	M. Pharm				
	i.	Pharmaceutics				
	ii.	Pharmacology				
	iii.	Pharmacognosy				
	iv.	Pharma Analysis				

	v.	Pharma Chemistry			
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6.7		Name of Faculty	Allied Health Sciences			
6.7.1		Name / Nomenclature of the Course	Duration	Academic Session of 1 st Affiliation	Annual Intake Capacity	UG / PG
	A.	M.Sc.				
	i.	Master of Science in Biochemistry				
	ii.	Master of Science in Medical Microbiology				
	B.	B.Sc. Physiotherapy				
	i.	Bachelor of Physiotherapy				
	ii.	Bachelor of Occupational Therapy				
	iii.	Bachelor in Prosthetics & Orthotics				
	C.	Master of Physiotherapy				
	i.	Master of Physiotherapy				
	D.	B.Sc. Medical Lab Technology				
	1.	Bachelor in Medical Laboratory Technology (BMLT)				
	2.	Master of Science in Medical Laboratory Technology (MMLT)				
	3.	Bachelor in Medical Radiography & Imaging Technology (BMRT)				
	4.	Bachelor of Anesthesia & Operation Theatre Technology (BAOT)				
	5.	Bachelor of Optometry (BO)				
	6.	Bachelor of Anaesthesiology (BAT)				
	7.	Bachelor of Emergency Medical Technology (BEMT)				
	8.	Bachelor of Audiology & Speech Language Pathology (BASLP)				
	9.	Master of Audiology & Speech Language Pathology (MASLP)				
	10.	Master in Public Health				
	11.	Master Sc. in Microbiology				

7.	Information on Pledge Money with the last affiliating University; if any					
		Name of Bank	FDR (s) No	Date of Pledging	Amount	University
	1					
	2					
	3					
4						

DECLARATION

I do hereby declare that the particulars furnished above are true & correct and have not suppressed any information to the best of my knowledge and belief.

Date:

Principal / Director
(Name of the College with Seal)

N. B.: ***Attach a Soft copy of the duly filled in Application Form at the time of submission.***