



Anurag Pharmacy College

Ananthagiri (V & M), Kodad, Suryapet (Dt.), T.S. India. PIN: 508 206.

FACULTY SELF APPRAISAL REPORT FOR THE A.Y. 2023 - 24

Name	: Dr. M. Chinna Eshwaraiiah	Department	pharmacognosy
Qualification	: Ph.D	Date of Joining	18-06-2009

1. Publications: (Max : 02)* [During: June 2023 - May 2024]

Faculty has to furnish Research Articles Published in UGC Listed Journal (CARE) or Indexed in SCOPUS/SCI/SCIE/ Web of Science and Books edited / Books or Book Chapters published. Any two publications as mentioned above with valid proofs to be submitted.

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- b) No. of Papers published as a second Author [Supervisor / Guide / Mentor] along with UG/PG Student or Research Scholar with Institution affiliation [70% Weightage] : —
- c) No. of Books published : —
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2. Patents: [Max: 02]* [During: June 2023 - May 2024]

- a) No. of patents published : —
- b) No. of patents granted : —

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FACULTY SELF APPRAISAL REPORT FOR THE A.Y. 2023 - 24

Name	: Dr. S. Jaya	Department	Pharmaceutics
Qualification	: M.Pharm., Ph.D.	Date of Joining	09.07.2007

1. Publications: (Max : 02)* [During: June 2023 - May 2024]

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FACULTY SELF APPRAISAL REPORT FOR THE A.Y. 2023 - 24

Name	:	K. Raveendra Babu	Department	Pharmacy
Qualification	:	M. Pharmacy	Date of Joining	01-01-2016

1. **Publications: (Max : 02)* [During: June 2023 - May 2024]**
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1	Phytochemical analysis of <i>in vitro</i> antimutagenic activity of methanolic extracts of <i>Salween Samon</i> (2019)	B. Srikala K. Ravendran S. Anandhan G. Manjula	Analysis of phytochemicals	UKra2 Publications	12	2	2393-9885	765-768	December 2023	doi: 10.24045/ukra2.v12i2.59 http://dx.doi.org/10.24045/ukra2.v12i2.59	Web of Science (WoS)
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Original Article : Open Access

Phytochemical analysis and *in vitro* anthelmintic activity of methanolic extract of *Samanea saman* (Jacq.) Merr. leaves

B. Srilekha, K. Raveendra Babu*, S.K. Naseer Jani, G. Navya Sri, Jahangir Alam and M. Chinnaeswaraiyah

Department of Pharmacy Practice, Anurag Pharmacy College, Kodad-50806, Telangana, India

Article Info

Article history

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Keywords

Samanea saman (Jacq.) Merr.,

Paralysis

Earthworm

Anthelmintic activity

Piperazine citrate

Abstract

Soil transmitted helminth (STH) infections are among the most common infections worldwide with an estimated 1.5 billion infected people or 24% of the world's population. The high cost of usual anthelmintic drugs and the development of anthelmintic resistance led to evaluation of remedial plants as an alternative source of anthelmintics. *Samanea saman* (Jacq.) Merr. is a popularly grown tropical avenue tree in Asia and Northern America, a member of the Fabaceae. It has antitumor, antibacterial, antimicrobial, anthelmintic properties. Current study, the methanol extract of leaves of *S. saman* shows anthelmintic activity and shows a positive correlation to the alcohol, and flavonoids contents. The present research aimed to assess the anthelmintic activity of methanolic extract of *S. saman* leaves by *Pheretima posthuma* as test worms. Piperazine citrate (15 mg/ml) used as standard. Paralysis and death times were examined, the activity was correlated with piperazine citrate. At higher doses (500 mg/ml), the shortest paralysis time was noted. The earthworm utilized in the study was significantly affected by the methanolic extract of *S. saman* leaves, correlated by earthworm's paralysis and death.

1. Introduction

Samanea saman (Jacq.) Merr., member of the fabaceae family, is used in herbal medicine as an analgesic, anti-inflammatory, diuretic, febrifuge, anthelmintic, and antifungal, as well as for digestive issues. Word "helminth" is originated from Greek word "helminthes," means "worm," refers to a large category of parasitic worms that live inside the body (Patel, et al., 2010). Over two billion people have parasitic worm diseases, according to the World Health Organization. By 2025, it is predicted that 57% of people living in developing nations would be affected (Mulla et al., 2010). Helminth infections are a major contributor to these, particularly in small ruminant production, which results in significant economic losses, including loss of production due to death, weight loss, and decreased milk and meat production (Ketzis et al., 2003; Giithioni et al., 2003). Anthelmintics are medicines that either eliminate or kill helminths that are present in gastrointestinal tract, despite the fact that certain species migrate inside tissues or reside there. They injure the host by depriving him of food, resulting in blood loss, organ damage, intestinal, secreting toxic substances, and causing injury to organs. Despite being a major cause of morbidity, helminthiasis seldom results in death (Bundy, 2004). In endemic locations, internal parasitic illnesses hit the population with relentless mortality. The abdomen, small intestine and large intestine are all infected by these parasites. The aim of research was to determine the anthelmintic activity of methanolic extract of leaves of *S. saman* by *P. posthuma* as test worms.

The popular names in english include saman, rain tree and monkey pod. Scientific classification of Taxonomy Kingdom: Plantae, Order: Fabales, Family: Fabaceae, Genus: *Samanea saman* (Jacq.) Merr.. It exhibits the synonym names of *Samanea saman* such as *Albizia saman*, *Enterolobium saman*, *Inga saman*, *Pithecellobium saman* and *Mimosa saman*. *S. saman* on the other hand, leaves are arranged next to twigs and have a noticeable enlargement at the base of the petiole. The leaf measures 2-4 cm when stretched and 1-2 cm when expanded. The largest apical flyers and foliage are grouped into 2-6 sets of pinnae, with each pinna containing 6-16 precious stone-shaped promotions and having stipules that resemble yarn in the leaves. The leaf appears to have sharp edges and is twice as intricately pinnate. The leaf has a spherical organ and a silky state. For a brief time, the leaf appears dry and dreary because of its lustrous green top and its meagerly bristly base. *S. saman* trees lose their leaves in the summer because they are semi deciduous is because of this that it remains leafless for a while before defoliating as soon as there is enough moisture. *S. saman* (rain tree), in most conditions, appears to be evergreen as a result. Piperazine citrate is the reference standard drug utilized in the study. As a result of the muscle being hyperpolarized, chloride channels are opened, which relaxes the muscle and reduces the ability of acetylcholine to contract the muscle, resulting in flaccid paralysis.

2. Materials and Methods

2.1 Drugs and chemicals

Each chemical employed in the investigation is of analytical quality such as piperazine citrate (SD Fine Chemicals Ltd., Mumbai) and Methanol (Merck, India).

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Name	:	Sudhakar Kommu	Department	Pharmacy
Qualification	:		Date of Joining	25-06-2012

1. Publications: (Max : 02)* [During: June 2022 - May 2023]

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1	In vitro anti-inflammatory activity of <i>Familinadia uliginosa</i> fruits extract	Sudhakar Kormuru	RJPT		16	4	0974-3618	2022-2024	April-2023	-	Scopus
2											

Table 2: Patent Details

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1	387454-001 Design patent	Sudhakar Kormuru	Liquid chromatography-phytochemical spectrophotometer.	01/06/23	17/8/23	387454-001	
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Name	: <u>D. Chinababu</u>	Department	<u>Pharmaceutics</u>
Qualification	: <u>M. Pharmacy</u>	Date of Joining	<u>12-10-2015</u>

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FACULTY SELF APPRAISAL REPORT FOR THE A.Y. 2023 - 24

Name	:	N. saxitha	Department	Pharmaceutics
Qualification	:	Asst. Professor	Date of Joining	2-1-2016

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FACULTY SELF APPRAISAL REPORT FOR THE A.Y. 2023 - 24

Name	: G. Sandhya Rani	Department	ph. Analysis
Qualification	: M-pharm	Date of Joining	20/06/2016

1. Publications: (Max : 02)* [During: June 2023 - May 2024]

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Name	:	V. Hema Bindu	Department	Pharmaceutics
Qualification	:	Assistant Professor	Date of Joining	22/02/2016

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Name	:	V. RAJASHAKAR	Department	PHARMACY
Qualification	:	M. Pharm	Date of Joining	03/06/2016

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Name	:	Vani M	Department	Pharmacy
Qualification	:	M.Pharmacy	Date of Joining	14/06/2016

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FACULTY SELF APPRAISAL REPORT FOR THE A.Y. 2023 - 24

Name	:	Venukuri Padmabhudana chary	Department	Pharmacy
Qualification	:	M.Pharm	Date of Joining	04/01/2017

1. Publications: (Max : 02)* [During: June 2023 - May 2023]

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1	UV spectrophotoformetric stability indicating method development & validation for the estimation of 5-Fluorouracil in the bulk	V. Padmabhavy -Shanmugam shankar B. Vamshi	Annals of Phyto - medicine	Ukaaz	12	1	Print- 2778-9839	565-572	June 2023	http://dx. doi.org/10. 54085109. 2023.12.1. 112	web of science
2	UV spectrophotoformetric method developments & validation for the estimation of Furose in the tablet & tablets storage form	V. Padmabhavy -Shanmugam Hameera Sushritha manj	Annals of Phyto - medicine	Ukaaz	12	1	2778-9839	580-594	June 2023	doi:10.54085109. 2023.12.1.169	web of science

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Name	:	Potlu Kalyani	Department	Pharmaceutical Analysis
Qualification	:	M. Pharmacy	Date of Joining	02-11-2017

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Name	:	D. Srikanth	Department	pharmacy
Qualification	:	M.Pharm [Pharmaceutics]	Date of Joining	11-01-2019

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Name	: S. NAGESWARAO	Department	Pharmacy
Qualification	: M. Pharmacy	Date of Joining	06-12-2017

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FACULTY SELF APPRAISAL REPORT FOR THE A.Y. 2023 - 24

Name	: Dr. M Prasad	Department	Pharmacy
Qualification	: Pharm.D. Ph.D	Date of Joining	03-7-2018

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FACULTY SELF APPRAISAL REPORT FOR THE A.Y. 2023 - 24

Name	:	L. Jagadish	Department	Pharmacy
Qualification	:	M. Pharmacy (Analysis)	Date of Joining	21-02-2019

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Name	: D. Shyamala	Department	pharmacy
Qualification	: M. Pharmacy	Date of Joining	05/03/2019

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1	UV spectrophotometric method developed and validation for the determination of metoprolol succinate in bulk and its pharmaceutical dosage form	D. Shyamala	Annals of pharmacy - drive		12	1	2393 - 9885	124	June 2023	https://dx.doi.org/10.54054/ajph.v12i06.2023.12.1.107	Emerging Journal of Arabian Index (web of science)
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Original Article : Open Access

UV spectrophotometric method development and validation for the determination of metoprolol succinate in bulk and its pharmaceutical dosage form

K. Abhinaya, D. Shyamala*, SD. Irfana, M. Pawan, G. Sahithi, A. Salkrishna and M. Chinnaeswaraiiah

Department of Pharmaceutical Analysis, Anurag Pharmacy College, Kodad-508206, Telangana, India

Article Info

Article history

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Keywords

UV-spectrophotometry

Metoprolol succinate

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Validation

ICH

Abstract

A simple, economical determination of metoprolol succinate based on the UV spectrophotometric with methanol reagent. The maximum absorbance intensity of metoprolol succinate was found to be 275 nm. The achieved linearity over the concentration range with a good correlation coefficient (R^2), as well as the limit of detection (LOD) and limit of quantification (LOQ), which were obtained as 0.098 $\mu\text{g/ml}$ and 0.297 $\mu\text{g/ml}$, respectively. As per International Conference on Harmonization (ICH) guidelines, all parameters have been calculated. The spectrophotometric method determination is successfully applicable to pharmaceutical dosage formulations. In the laboratories quality control test can be done. Since it is economical, perceptive and clear.

1. Introduction

It is possible to treat hypertension and lower blood pressure with beta-adrenergic blockers, such as the extended-release tablets of metoprolol succinate. Bringing down blood pressure reduces the risk of both fatal and non-fatal cardiovascular events, particularly strokes and myocardial infarctions. Its chemical name is 1-(isopropyl amino)-3-[p-(2-methoxyethyl) phenoxy] succinate of -2-propanol (Moreshwar and Rajeshwar, 2009). Metoprolol works by lessening the agonist effect that catecholamines have on the heart (Pagar *et al.*, 2013). As a result of the medication's high sensitivity, even a tiny dose can effectively block beta-adrenergic receptors. The medication also has benefits that are cardioprotective, insulin resistance-improving, cerebroprotective, and anti-atherosclerotic, as well as reno protective properties (such as lowering proteinuria via dilatation efferent arterioles). Azelnidipine has two enantiomers because the 1, 4-dihydropyridine ring has an asymmetric carbon at position four. Azelnidipine has two enantiomers because the 1, 4-dihydropyridine ring has an asymmetric carbon at position four (Dhruvin *et al.*, 2022).

A survey of literature revealed that two UV spectrophotometric methods (Moreshwar and Rajeshwar, 2009; Pagar *et al.*, 2013) were reported for the estimation of metoprolol in its pharmaceutical dosage form. There were few UV spectrophotometric (Ekta Patel *et al.*, 2016; Tushar *et al.*, 2014), RP-HPLC (Mihir *et al.*, 2012; Patel *et al.*, 2019) and HPTLC (Mital *et al.*, 2012) methods have been developed for simultaneous estimation of metoprolol succinate with other drug combination. For the purpose of determining the presence of metoprolol succinate in bulk samples; a accurate, affordable, and

sensitive spectrophotometric approach has been devised and is described in the current paper.

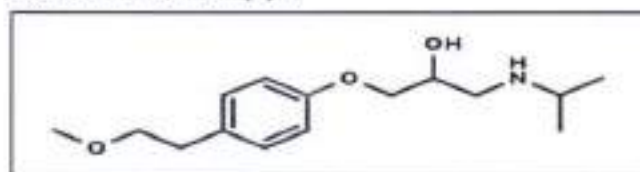


Figure 1: The structure of metoprolol succinate.

2. Materials and Methods

2.1 Instruments

The study was performed using a Shimadzu UV-visible spectrophotometer (UV-1800 series), which features a double beam and double detector arrangement with a 1 cm matched cell. The mobile phase was degassed using an ultrasonic cleaner. Electronic balance (Sansui Vibra DJ -150S-S) was used for the weighing.

2.2 Materials

Indian company Yarrow Chemicals Private Limited supplied the metoprolol succinate standard medication. All of the chemical and reagent materials of analytical grade were purchased. Calibrated glassware was used all throughout the analysis.

2.3 Selection of suitable solvent

Based on solubility property, methanol is selected for proper dissolving of metoprolol succinate.

2.4 Standard stock solution preparation

20 mg of metoprolol succinate that had been precisely measured was transferred to a 10 ml volumetric flask and then dissolved in methanol. To get the necessary final concentration of 2000 $\mu\text{g/ml}$, the final volume was then modified using the same amount of methanol.

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Name	:	T. Praveen Kumar	Department	Chemistry
Qualification	:	M. Pharmacy	Date of Joining	20-06-2017

1. Publications: [Max : 02]* [During: June 2022 - May 2023]

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1	A Prospective study on Risk factors, and possible pattern in utilization of technology can help reduce	A. Rajan J. S. Jeyaraj J. Tothman I. S. Iyer T. Praveen Kumar	IJPI		13	4	2130-973X	889-894	Sept 2023		
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A Prospective Study on Risk Factors, and Prescription Patterns in Urolithiasis Patients in Tertiary Care Hospitals of Khammam Region

Johurul Islam¹, Abdul Mannan¹, Ariful Islam¹, Thirunagiri Praveenkumar^{2*}, Maram Chinnaeswaraiah³

¹Department of Pharmacy Practice, Anurag Pharmacy College (Affiliated to JNTU Hyderabad), Ananthagiri, Kodad, Telangana, INDIA.

²Department of Pharmaceutics, Anurag Pharmacy College (Affiliated to JNTU Hyderabad), Kodad, Telangana, INDIA.

³Department of Pharmacognosy, Anurag Pharmacy College (Affiliated to JNTU Hyderabad), Kodad, Telangana, INDIA.

ABSTRACT

Introduction: Urolithiasis is a hard deposit of minerals and salts that form inside the kidney, ureter, and bladder in the urinary system. Kidney stones are a common disease of the urinary tract. Prevention of stones mainly depends on the mechanisms of the stone formation, daily water intake, and food habits. **Aim and Objectives:** A prospective observational study was conducted on risk factors, and prescription patterns in urolithiasis patients. **Materials and Methods:** The study was conducted from August 2022 to February 2023 in Khammam, Telangana. Men and women were included as a sample of subjects aged 18-60 years. The total number of samples was 200. **Results:** Urolithiasis was more commonly observed in males than females aged 18-60. Urolithiasis developed in individuals who consumed less water, frequently ate non-veg, and had a family history of calculi. Out of 200 patients, only 27 patients had complications like AKI, and abdominal pain and painful incomplete urination was the most reported symptoms. **Conclusion:** The prevalence, risk factors, and prescription pattern of urolithiasis were observed in this study. The Formation of Kidney stones may be due to diet, age progression, gender, obesity, genetics, and lifestyle factors. A better understanding of the epidemiology of urolithiasis is further essential to plan effective treatment and preventive strategies.

Keywords: Urolithiasis, Prevalence, Risk factors, Prescription pattern.

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INTRODUCTION

Urolithiasis is the most common urological disease in human beings in the world. It is the most painful and common urological disorder of the urinary system.¹ Now a day, kidney stone formation has significantly increased in all developed countries. Urolithiasis is a hard deposit of minerals and salts that form inside the kidney, ureter, and bladder in the urinary system.^{2,3} It is more critical to analyze stones in treating metaphylaxis of residual and repeated stones.⁴ In India, mainly calcium oxalate crystals had formed in living beings, and the composition of stones differs from Western countries. In the productive age group, kidney stone affects about 3% of the population.⁵ The prevalence means the number of calculi present in a masked population at a particular time. The incidence of stones is described as the number of new stone formations in patients in a given population in the same period.⁶

Males and females suffer from urolithiasis in their productive age group. Prevention of stones mainly depends on the mechanisms of the stone formation, daily water intake, and food habits.⁷ Urolithiasis is mainly associated with several risks of end-stage renal failure,⁸ end-stage of chronic kidney diseases,⁹ cardiovascular diseases,¹⁰ diabetes, and hypertension. Sometimes kidney stones are considered a systemic disorder linked to metabolic syndrome.¹¹ The common etiology of urolithiasis are the patient's occupation, dietary and lifestyle habits, previous medications history, family history of frequent attacks of UTI, and some underlying disorders predisposing to renal calculi formation.¹² Calcium is the main component of oxalate stone in human beings. Supplemental calcium plays a more significant function in kidney stone formation than high dietary calcium intake.

A kidney stone may exist asymptotically and painless until they travel from the kidney to the ureter and bladder.¹³ Based on the size and movement of stones through the urinary tract, signs and symptoms are sudden onset of severe pain, sharp pains in the back and side, lower abdominal pain, hematuria (red or brown blood in urine), constant urination, painful urination, inability to urinate or a small amount of urine, and The urine looks cloudy.



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FACULTY SELF APPRAISAL REPORT FOR THE A.Y. 2023 - 24

Name	:	Shaik Janimiya	Department	pharmacy
Qualification	:	m.pharmacy	Date of Joining	02/19/2019

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Name	:	B. Ravi	Department	Pharmacy (PharmD)
Qualification	:	M. Pharmacy	Date of Joining	16-02-2020

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Name	:	G. Sangeetha Kumari	Department	Pharmacy Practice
Qualification	:	Pharm D (P3)	Date of Joining	2/07/2020

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1	carbamazepine & clozapine induced severe Iron Deficiency Anemia - A rare Case report	A. Hemant Dr. S. Nikhita	International Journal of Medical Science & Innovative Research (IJSIR)	-	8	1	2458 ; 8697	229 - 231	Feb - 2023		Pub LM
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FACULTY SELF APPRAISAL REPORT FOR THE A.Y. 2023 – 24

Name	:	Y. Naraysh	Department	Pharmacy
Qualification	:	M.Ph.(Chemistry)	Date of Joining	08-01-2021

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Name	: MOHD- AZHARUDDIN	Department	Pharmacy Practice
Qualification	: Pharm.D (PB)	Date of Joining	20/10/2021

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1	Socio-economic status & depressive symptoms in diabetic patients: A cross-sectional study	M. Faruqul Islam A. Faruqul Islam M. H. A. Faruqul Islam	Int. J. Pharma Investigation		14	1		225 - 231	Jan - Mar 2024	10.5574/ijpi.v14.i1.225-231	Web of Science
2											

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S. No.	Patent Application Number	Inventor Name(s)	Title of the Patent	Patent filed date	Patent published / granted date	Patent publication number / granted number	attach source of proof i.e. URL / website links, etc.
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Socio-economic Status and Depressive Symptoms in Diabetes Patients: A Cross-Sectional Study

Pravalika Mupparapu, Afra Azeenath, Tahsina Firdous, Tamanna Yeasmin, Mohd Azharuddin*

Department of Pharmacy Practice, Anurag Pharmacy College (Affiliated to JNTU Hyderabad), Kodad, Telangana, INDIA.

ABSTRACT

Background: Diabetes is persistent illness that develops mostly when the body produces insufficient amount of the insulin hormone. The insulin hormone regulates blood glucose levels. In recent epidemiological research studies exposed that diabetes patients were likely to experience depression. Independent of glycomic control, insulin therapy, lifestyle variable and diabetes complications, severe hypoglycemia was strongly correlated with the intensity of depressive symptoms in individuals with DM2, who weren't taking any antidepressants. **Aim:** The present study aimed to assess the impact of socio-economic status in the elevation of depressive symptoms among diabetes patients. **Materials and Methods:** A prospective cross-sectional observational study was conducted for the age of >30 to 100 with sample size of 215. **Results:** In our study in age group of 51-70 (52.06%), (72.55%) males, people with positive family history (57.67%), people with co-morbidities (65.46%), illiterates (46.51%), skilled workers (37.67%) people with more than 1.80K (40%) showed major depressive symptoms, people with more than 1-5 years durations of disease (55.81%) showed major depression. According to socio-economic scale people belong to (40.93%) upper middle class are more prone to elevated depressive symptoms. According to PHQ-9 scale people showed more mild depression (38.13%). **Conclusion:** The study concludes that there are multiple factors like Age, Gender, Family history, Socio-economic status, can leads to depressive symptoms in diabetes patients.

Keywords: Diabetes, Depression, Socio-economic status, PHQ-9 Scale, Kuppaswamy scale, Quality of life.

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Received: 21-09-2023;

Revised: 16-10-2023;

Accepted: 30-11-2023.

INTRODUCTION

Diabetes is a persistent illness that develops mostly when the body produces insufficient or improper amounts of the hormone insulin or may be ineffective utilization of insulin. During uncontrolled condition that can gravely impair various body systems, including the neurons and blood vessels.^{1,2}

However, diabetic patients are prone to more stress compared with normal people because of maintaining a strict diet and regular exercise to stay in good health, monitoring blood glucose levels, regular follow-up, managing symptoms, and constantly keeping an eye out for complications. As a result, people experience stress, worry, and sadness.^{3,4}

Studies show some evidence that occurrence of depression in diabetes patients is associated with low socio-economic status.

The small evidence base that considers diabetes and depression in low and middle income countries is out of step with the scale of the burden of disease.^{5,6}

Irrespective of the fact that they received a diabetes diagnosis or not, 90686 participants in recent epidemiological research exposed that diabetes patients were more likely to experience depression. The same analysis revealed that those with diabetes who were aware of it had greater rates of anxiety;⁷ one argument are that anxiety and sadness are brought on by the psychological strain of having a disease. However, sadness was more common in individuals with previously undetected diabetes and brought on by an unhealthy lifestyle, such as sedentary behavior, a poor diet, or a demanding job.

Independent of glycomic control, insulin therapy, lifestyle variables, and diabetes complications, severe hypoglycemia was strongly correlated with the intensity of depressive symptoms in individuals with DM2, who weren't taking any antidepressants.⁸ in individuals with DM2; a meta-analysis study was assessing the connection between neuropathy and depression.^{9,10}



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Qualification	:	Pharm.D	Date of Joining	1-09-2022

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FACULTY SELF APPRAISAL REPORT FOR THE A.Y. 2023 - 24

Name	:	B. Lohitha	Department	Pharmaceutical Analysis
Qualification	:	M. Pharmacy	Date of Joining	01/04/2023

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FACULTY SELF APPRAISAL REPORT FOR THE A.Y. 2023 - 24

Name	:	K. Kavitha	Department	pharmacology
Qualification	:	M. Pharmacy	Date of Joining	June/18/23

1. **Publications: (Max : 02)* [During: June 2023 - May 2023]**
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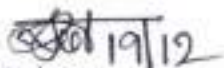
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Name	: T. Kavitha	Department	Pharmacology
Qualification	: Assistant Professor	Date of Joining	17.06.2024

1. **Publications: (Max : 02)* [During: June 2022 - May 2023]**
 Faculty has to furnish Research Articles Published in UGC Listed Journal (CARE) or Indexed in SCOPUS/SCI/SCIE/ Web of Science and Books edited / Books or Book Chapters published. Any two publications as mentioned above with valid proofs to be submitted.

- a) No. of Papers published as a First Author with Institution affiliation :
- b) No. of Papers published as a second Author [Supervisor / Guide / Mentor] along with UG/PG Student or Research Scholar with Institution affiliation [70% Weightage] :
- c) No. of Books published :
- d) No. of Book Chapters published :
- e) No. of Books edited :

*Any two publications as mentioned above with valid proofs to be submitted.

Furnish the publication(s) details in the **Annexure - Table 1** given overleaf

2. **Patents: [Max: 02]* [During: June 2023 - May 2024]**

- a) No. of patents published :
- b) No. of patents granted :

Furnish the patent(s) details in the **Annexure - Table 2** given overleaf



I'm aware of all the guidelines for the submission Self-Appraisal. I'll be ready to submit any additional details, if required.

Declaration

I,T. Kavitha....., declare that the data furnish is true to the best of my knowledge, I obey to the rules and regulations of the institution for any action to be taken, if the data found to be incorrect at any time.

Signature

* - Proofs to be enclosed

Annexure

Table 1: Publications Details

S. No.	Title of the Paper / Book / Chapter	Name of the Author(s)	Journal / Book Name	Publisher (in case of book / book chapter / book edited)	Vol	Issue	Print / Online ISSN	Page No.s	Mon and Year	doi	Indexed in
1											
2											

Table 2: Patent Details

S. No.	Patent Application Number	Inventor Name(s)	Title of the Patent	Patent filed date	Patent published / granted date	Patent publication number / granted number	attach source of proof i.e. URL, / website links, etc.
1							
2							

OK


Signature



Anurag Pharmacy College

Ananthagiri (V & M), Kodad, Suryapet (Dt.), T.S. India. PIN: 508 206.

FACULTY SELF APPRAISAL REPORT FOR THE A.Y. 2023 - 24

Name	:	K. Prasanna	Department	Pharmaceutics
Qualification	:	M. Pharmacy	Date of Joining	1/7/2023

1. Publications: (Max : 02)* [During: June 2022 - May 2023].

Faculty has to furnish Research Articles Published in UGC Listed Journal (CARE) or Indexed in SCOPUS/SCI/SCIE/ Web of Science and Books edited / Books or Book Chapters published. Any two publications as mentioned above with valid proofs to be submitted.

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- a) No. of patents published :
- b) No. of patents granted :

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I, K. Prasanna, declare that the data furnish is true to the best of my knowledge. I obey to the rules and regulations of the institution for any action to be taken, if the data found to be incorrect at any time.

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Anurag Pharmacy College

Ananthagiri (V & M), Kodad, Suryapet (Dt.). T.S. India. PIN: 508 206.

FACULTY SELF APPRAISAL REPORT FOR THE A.Y. 2023 - 24

Name	:	Sk. Nahced.	Department	Pharmaceutics
Qualification	:	M-pharmacy	Date of Joining	07/07/2023

1. Publications: (Max : 02)* [During: June 2022 - May 2023]

Faculty has to furnish Research Articles Published in UGC Listed Journal (CARE) or Indexed in SCOPUS/SCI/SCIE/ Web of Science and Books edited / Books or Book Chapters published. Any two publications as mentioned above with valid proofs to be submitted.

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Signature



Anurag Pharmacy College

Ananthagiri (V & M), Kodad, Suryapet (Dt.), T.S. India. PIN: 508 206.

FACULTY SELF APPRAISAL REPORT FOR THE A.Y. 2023 - 24

Name	: N. Suma	Department	Pharmacy
Qualification	: Pharm D	Date of Joining	01/11/2023

1. **Publications: (Max : 02)* [During: June 2022 - May 2023]**
Faculty has to furnish Research Articles Published in UGC Listed Journal (CARE) or Indexed in SCOPUS/SCI/SCIE/EX/Web of Science and Books edited / Books or Book Chapters published. Any two publications as mentioned above with valid proofs to be submitted.

- a) No. of Papers published as a First Author with Institution affiliation : —
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2. **Patents: [Max: 02]* [During: June 2022 - May 2023]**
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Declaration

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Suma
Signature

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Annexure

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