

FACULTY INFORMATION

Name : Dr.Preeti Allum

Date of Birth & Age : 05/03/1977 39 yrs 8 months

Present Designation : Assoc Prof

Department : Radio-diagnosis

College : M.R.Medical College

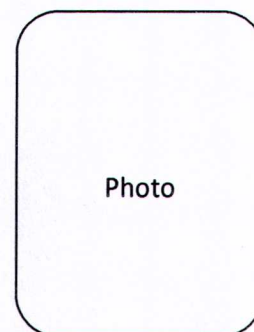
City : Kalaburagi

Residential Address of employee : "Shivanand Nilaya" Near Basavanna temple
Maktampura Kalaburagi

Contact Particulars : Tel (Office): 08472-220307
E-mail address:
Mobile Number: 9901350000

Date of joining present institution : 06/09/2016

Qualification : MBBS, MD



| Qualification | College | University | Year | Registration No. of UG & PG with date | Name of the state Medical Council |
|---------------|---------|------------|------|---------------------------------------|-----------------------------------|
| MBBS | MRMC | RGUHS | 2000 | 55835 date:08/05/2002 | KMC |
| MD | MRMC | RGUHS | 2010 | 55835 date:08/12/2010 | KMC |
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Details of the previous appointments/teaching experience

| Designation | Department | Name of Institution | From DD/MM/YY | To DD/MM/YY | Total Experience in year & months |
|-------------|-----------------|---------------------|---------------|-------------|-----------------------------------|
| Tutor | Radio-diagnosis | MRMC | 31/08/2006 | 17/05/2007 | 9 months |
| Jr.resident | Radio-diagnosis | MRMC | 18/05/2007 | 17/05/2010 | 3yrs |
| Sr.resident | Radio-diagnosis | MRMC | 01/07/2010 | 31/08/2011 | 1 yrs 1month |
| Asst.Prof | Radio-diagnosis | KIMS | 05/09/2011 | 01/06/2016 | 4 yrs 9 months |
| Assoc Prof | Radio-diagnosis | MRMC | 06/09/2016 | Till date | 3 months |

Achievements :

Awards :

Guest Speaker :

Paper presentation :

1. **National** :

2. **International** :

3. **State** :

4. **Others** :

Poster presentation :

Publications :

1. **Indexed** : 1 MRI evaluation of musculoskeletal tumors
2. High frequency sonographic evaluation of thyroid lesions

2. **Non Indexed** :

3. **Original Article** :

4. **Case report** :

Other specify :