

## FACULTY INFORMATION

Name : Dr. PRASHANT .S.SAGARE  
Date : 20-10-1974 ( 41 yrs )  
Present Designation : Senior Resident  
Department : Dermatology  
College : M.R .MEDICAL COLLEGE  
City : Gulbarga



Residential Address of employee : S.B.Sagare H.No 11-442, Shah Hussain Chilla Brahmipur , Gulbarga

Contact Particular : Tel (Office ) :

E-mail address : sagareprashant@yahoo.com

Mobile Number : 9844403484

Date of joining present Institution :


Qualifications :

| Qualification | College | University | Year | Registration No.of UG & PG with date | Name of the State Medical Council |
|---------------|---------|------------|------|--------------------------------------|-----------------------------------|
| MBBS          | MRMC    | RGUHS      | 1999 | KMC -55421                           | K.M.C                             |
| DVD           | JNMC    | RGUHS      | 2003 | KMC -55421                           | K.M.C                             |

Details of the previous appointment /teaching experience

| Designation     | Department  | Name of Institution | From DD/MM/YY | To DD/MM/YY | Total Experience In years & Months |
|-----------------|-------------|---------------------|---------------|-------------|------------------------------------|
| Junior Resident | Dermatology | MRMC                |               |             |                                    |
| Senior Resident | Dermatology | MRMC                | 01-08-2006    | Till date   | 10yr 4months                       |
|                 |             |                     |               |             |                                    |

Achievements :  
Awards :  
Guest Speaker :  
Paper Presentation :  
1. National : 1 (one)  
2. International :  
3. State : 2 (two)  
4. Others :  
Poster presentation :  
Publications :  
1. Indexed : ~~None~~  
2. Non Indexed :  
3. Original Article :  
4. Case Report :  
Other specify :

*Verified*  


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