## FACULTY PROFILE

TITLE & NAME	Dr. SHIVASHANI	KAR V.			
Designation	Associate Professor				
Field of specialization	Pharmacy Practice				
Dept. Name	Pharmacy Practice				
Phone No.	Office	422-4500164			
	Mobile	0487874891			
Email	1. v.shivshan@gam	il.com shivashankar@sripmscop.com			
Subjects Taught	Pharmacotherapeutics, Pathophysiology, Clinical Pharmacy, Pharmacoepidemiology				
Areas of Interest	Patient Counseling, Drug Interaction monitoring, Rational Drug Use and Drug Utilization Evaluation.				
Experience (in years)	Total	19			
	Industry				
	Teaching	19			
	Research	16			
Educational Qualifications	UG B Pharm-2002	Cherrans College of Pharmacy, Coimbatore Affiliated to THE TN Dr MGR MEDICAL UNIVERSITY CHENNAI			
	PG M pharm-2004	College of Pharmacy, Sri Ramakrishna Inst of Paramedical Sciences, Coimbatore. Affliated to / THE TN Dr MGR MEDICAL UNIVERSITY CHENNAI			
	Doctorate 2017	College of Pharmacy, Sri Ramakrishna Inst of Paramedical Sciences, Coimbatore. Affliated to THE TN Dr MGR MEDICAL UNIVERSITY CHENNAI			
	Any other	-			
Research Publications in Journals	National: 10 International: 15				

Papers Published in					
Conference Proceedings(last					
5 years)					
Books Authored/Book					
Volume Chapters					
votanic chapters					
No. of Conferences	Attended Once				
No. of Conferences	National	Attended		Organized	
	National	1.			
		15		-	
	International 05		)5	-	
			1		
Research/Projects	Completed	UG	PG	Doctorate	
Guidance					
		10	26		
	Undergoing				
Awards & Distinctions M.Pharm - Distinction					
Association with	Registered Pharmacist TN State Pharmacy council 7822 A1				
Professional Bodies					
Any other Achievements					
Any other Memovements					