

CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms	s./Dr	ANBARASI.	<u>, p</u>	
has participated in value add	ded cours	se on Hos	pital informa	tion
system conducted by NABH	I, at Sri M	anakula V	/inayagar Med	laoib
College and Hospital from	10/12/2021	to_	12/12/2021	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms	./Dr	MAHESH S	<u> </u>
has participated in value add	ded course	on Hos	oital information
system conducted by NABH,	, at Sri Mar	nakula V	inayagar Medical
College and Hospital from	19145031	to	12/12/2021

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr.___<u>BARSHALLS</u>
has participated in value added course on Hospital information
system conducted by NABH, at Sri Manakula Vinayagar Medical
College and Hospital from __<u>lofulsoso</u>_____to____to_____to_____to_____to_____

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. <u>GANGADHARAN.T</u>
has participated in value added course on Hospital information
system conducted by NABH, at Sri Manakula Vinayagar Medical
College and Hospital from <u>Joulago</u> to <u>22 III/2020</u>

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Dr. D. RajagovindanDirector



Kalitheerthalkuppam, Puducherry 605107

CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr.__ABINESH.P
has participated in value added course on Hospital information
system conducted by NABH, at Sri Manakula Vinayagar Medical
College and Hospital from ______to__21/07/2019______

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. <u>Padmappiya</u>.v has participated in value added course on **Hospital information system** conducted by **NABH**, at Sri Manakula Vinayagar Medical College and Hospital from <u>19107/2019</u> to <u>21/07/2019</u>

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. LOKETH R
has participated in value added course on Hospital information
system conducted by NABH, at Sri Manakula Vinayagar Medical
College and Hospital from 1910412019 to 211042019

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. POOBALAN. V
has participated in value added course on Hospital information
system conducted by NABH, at Sri Manakula Vinayagar Medical
College and Hospital from 20/07/2018 to 22/07/2018

Dr. D. Rajagovindan Director



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Dr. D. RajagovindanDirector



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Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr.__<u>RAJA RAJAN.N</u>
has participated in value added course on **Hospital information**system conducted by **NABH**, at Sri Manakula Vinayagar Medical
College and Hospital from __<u>ISJOF/LOIF</u>_______to__<u>IF/OF/LOIF</u>_______

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

> Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ Ms./Dr.		RASIKA - K	
has participated in	value added	course	on NABH For Hospit a	als
conducted by NABH	, at Sri Manak	kula Vir	nayagar Medical Colle	ge
and Hospital from	09-10-2021	to	10-10-2021	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	RAMYAA-B
has participated in value added cou	urse on NABH For Hospitals
conducted by NABH, at Sri Manakula	a Vinayagar Medical College
and Hospital fromt	O 10-10-2021

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that M	1r./ Ms./Dr		AMRUTHA .S	
has participated in va	lue added d	ourse	on NABH For	Hospitals
conducted by NABH, a	t Sri Manak	ula Vir	nayagar Medid	cal College
and Hospital from	10-10-2020	_to	11.10.2020	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mi	r./ Ms./Dr	KA	LAISEL VI. D. B
has participated in valu	ue added c	ourse or	NABH For Hospitals
conducted by NABH, at	Sri Manakı	ula Vinay	agar Medical College
and Hospital from	10.10.2020	_to	11-10-2020

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ Ms./Dr.	•	JEEVITHA-R	
has participated in v	alue added	course	on NABH For	Hospitals
conducted by NABH,	at Sri Mana	kula Vir	nayagar Medica	al College
and Hospital from	10.10.2020	to	11-10-2020	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that N	/lr./ Ms./Dr.		DHANYA - C	
has participated in va	lue added	course	on NABH For	Hospitals
conducted by NABH, a	at Sri Manak	ula Vin	ayagar Medic	al College
and Hospital from	10-10-2020	to	11.10-2020	_

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ Ms./Dr		MADHUNITA - A	
has participated in v	value added d	course	on NABH For He	ospitals
conducted by NABH,	at Sri Manak	ula Vir	nayagar Medical	College
and Hospital from	10-10-2020	to	11010-2020	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ M	s./Dr	VISHVA - C
has participated in value ad	dded course	on NABH For Hospitals
conducted by NABH, at Sri N	Manakula Vin	ayagar Medical College
and Hospital from	2019to	13-10-2019

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr.	SURYA.R	
has participated in value added of	course on NABH For I	Hospitals
conducted by NABH, at Sri Manak	kula Vinayagar Medica	al College
and Hospital from	to 13.10.2019	

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that M	/lr./ Ms./Dr		NEYA · K
has participated in va	lue added c	ourse o	on NABH For Hospitals
conducted by NABH, a	at Sri Manak	ula Vina	yagar Medical College
and Hospital from	12.10.2019	_to	13-100 2019

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	FA71MA
has participated in value added co	
conducted by NABH, at Sri Manaku	
and Hospital from	_to

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./DrARSHA-A-R
has participated in value added course on NABH For Hospitals
conducted by NABH, at Sri Manakula Vinayagar Medical College
and Hospital from 12-10-2019 to 13-10-2019

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr.		CHANITHA-C
has participated in value added	course	on NABH For Hospitals
conducted by NABH, at Sri Manal	kula Vir	nayagar Medical College
and Hospital from13-10-2018	to	14-10-2018

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	
has participated in value added cou	urse on NABH For Hospitals
conducted by NABH, at Sri Manakula	Vinayagar Medical College
and Hospital fromto-2018to	014-10-2018

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr	r./ Ms./Dr.		GURUCHARAN . R
has participated in valu	ue added	course	on NABH For Hospitals
conducted by NABH, at	Sri Manak	kula Vir	nayagar Medical College
and Hospital from	13-10-2018	to	14.10.2018

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to certify tha	t Mr./ Ms./Dr.		FYAZHINI-S
has participated in	value added	course	on NABH For Hospitals
conducted by NABH	I, at Sri Manal	kula Vi	nayagar Medical College
and Hospital from	13.10.2018	to	14-10-2018

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ Ms./Dr.		DIYYAS RI. M	
has participated in v	value added	course	e on NABH Fo i	r Hospitals
conducted by NABH	, at Sri Manal	kula Vi	nayagar Medid	cal College
and Hospital from	13-10-2018	to	14-10-2018	

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	VASUKI- M
has participated in value added cours	
conducted by NABH, at Sri Manakula V	inayagar Medical College
and Hospital fromtoto	15-10-2017

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr#ARINI-S
has participated in value added course on NABH For Hospitals
conducted by NABH, at Sri Manakula Vinayagar Medical College
and Hospital fromtotototo

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr ARCHANA - R
has participated in value added course on NABH For Hospitals
conducted by NABH, at Sri Manakula Vinayagar Medical College
and Hospital from

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr <i>Srihari - R</i>
has participated in value added course on NABH For Hospitals
conducted by NABH, at Sri Manakula Vinayagar Medical College
and Hospital fromtotototo

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertif	y th	at Mr./ Ms.,	/Dr	NIS	SHA .	<u>M.</u>		
has partici	pate	ed ir	Worksho	op on l	Basic	Me	dical	and Sur	gical
skill conducted by Department on General Surgery and General									
medicine,	at	Sri	Manakula	Vinaya	agar	Med	dical	College	and
Hospital fro	om _	11:	02.2022	to	19.02.	2022.			

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. MANICKAM R.M.

has participated in Workshop on Basic Medical and Surgical skill conducted by Department on General Surgery and General medicine, at Sri Manakula Vinayagar Medical College and Hospital from 11.02.2022 to 19.02.2022.

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms.	/Dr. GAU	THAM · M		
has participated in Worksho	op on Basic	Medical	and Sur	gical
skill conducted by Departmen	nt on Gener	al Surger	y and Ger	neral
medicine, at Sri Manakula	Vinayagar	Medical	College	and
Hospital from	_to <u>19.02</u>	. 2022	0	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. KATHIRAVAN. K has participated in Workshop on Basic Medical and Surgical skill conducted by Department on General Surgery and General medicine, at Sri Manakula Vinayagar Medical College and Hospital from 11.02.2022 to 19.02.2022

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. VINOTHINI. K
has participated in Workshop on Basic Medical and Surgical skill conducted by Department on General Surgery and General medicine, at Sri Manakula Vinayagar Medical College and Hospital from 11.02. 2022 to 19.02.2022

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

> Dr. D. Rajagovindan Director



Kalitheerthalkuppam, Puducherry 605107

CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. Sirpy . P
has participated in Workshop on Basic Medical and Surgical skill conducted by Department on General Surgery and General medicine, at Sri Manakula Vinayagar Medical College and Hospital from 12.02.2021 to 20.02.2021

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to ce	rtif	y tha	at Mr./ Ms.,	/Dr	SR	IRAM . M		
has particip	oate	ed ir	Worksho	op or	Basic	Medical	and Sur	gical
skill conduc	ctec	d by	Departmer	nt on	Gener	al Surger	y and Ger	neral
medicine,	at	Sri	Manakula	Vina	yagar	Medical	College	and
Hospital fro	m _	n	02.2022	_to	19.02.20	22		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

> Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. Padman Vathy . P has participated in Workshop on Basic Medical and Surgical skill conducted by Department on General Surgery and General medicine, at Sri Manakula Vinayagar Medical College and Hospital from 12.02.2021 to 20.02.2021.

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. MANOT PRABHA M has participated in Workshop on Basic Medical and Surgical skill conducted by Department on General Surgery and General medicine, at Sri Manakula Vinayagar Medical College and Hospital from 14.02.2020 to 21.02.2020

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

> Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to cert	ify that Mr./ Ms.	/Dr. Gok	ULAN R		
has participa	ted in Worksh	op on Basic	Medical	and Sur	gical
skill conducte	ed by Departme	nt on Gener	al Surger	y and Ger	neral
medicine, at	t Sri Manakula	Vinayagar	Medical	College	and
Hospital from	14.02.2020	_to_ <u>21.02.26</u>	معه		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	rtif	y tha	at Mr./ Ms.,	/Dr	HARIJ	2. AHC			
has particip	oate	ed in	Worksho	op on	Basic	Medical	and Sur	gical	
skill conducted by Department on General Surgery and General									
medicine,	at	Sri	Manakula	Vina	yagar	Medical	College	and	
Hospital fro	m _		.02.2020	_to	21.02.	2020.			

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

> Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. GEETHAVARSHINI
has participated in Workshop on Basic Medical and Surgical skill conducted by Department on General Surgery and General medicine, at Sri Manakula Vinayagar Medical College and Hospital from 12.02.2021 to 20.02.2021.

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. KAVIPRIYA K has participated in Workshop on Basic Medical and Surgical skill conducted by Department on General Surgery and General medicine, at Sri Manakula Vinayagar Medical College and Hospital from 58. 02. 2019 to 16.02. 2019

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

> Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ M	S./Dr. CHIRANJEEVI . G
has participated in Works	hop on Basic Medical and Surgical
	ent on General Surgery and General
	a Vinayagar Medical College and
Hospital from08.02.2019_	to <u>16.02.2019.</u>

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms.,	Dr. GIOMATHI.S								
has participated in Worksho	op on Basic Medical	and Surgica							
skill conducted by Department on General Surgery and General									
medicine, at Sri Manakula	Vinayagar Medical	College and							
Hospital from	_to								

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This	is to certify th	at Mr./ Ms./Dr		Naresh	. S		
has	participated	in Workshop	on	Basic	Presenta	ation	and
Tead	ching Skills co	onducted by M	EU,	at Sri	Manakula	Vinay	agaı
Med	ical College an	d Hospital from		11/10/	22		
to		12/10/22				Q	

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr.	. Sneha.T
has participated in Workshop	
Teaching Skills conducted by N	4EU, at Sri Manakula Vinayagaı
Medical College and Hospital from	n
to	A.

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This i	s to certify tl	nat Mr	./ Ms./Dr	}	Hema.S			
has	participated	in \	Workshop	on	Basic	Presenta	ation	and
Teac	hing Skills o	conduc	cted by M	EU,	at Sri	Manakula	Vinay	'agai
Medi	ical College a	nd Ho	spital from		11/10/22			
to		12/1	10/22			9		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This i	is to certify th	at Mr./ M	s./Dr		Kavill	ia.S		
has	participated	in Wor	kshop	on	Basic	Presenta	ation	anc
	ching Skills co						Vinay	'agar
Med	ical College ar	nd Hospita	al from		<u> 11/w</u>	122		
to		2/10/22				0		

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

Kalitheerthalkuppam, Puducherry 605107

This i	is to certify t	hat Mr	./ Ms./Dr		Vinitha	JA		
has	participated	in \	Workshop	on	Basic	Presenta	ation	anc
	ching Skills o		그런 그리, 얼마 보고 있어 없는 사람들이 없는 그들은 것이 없는 것이 없는 것이 없다.				Vinay	agar
Med	ical College a	nd Hos	spital from		11)10	22		
						0		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This i	s to certify th	nat Mr./ M	1s./Dr	<u>J</u>	Deepal	k.R		
has	participated	in Wor	kshop	on	Basic	Presenta	ation	anc
	ching Skills o						Vinay	agai
Med	ical College aı	nd Hospit	al from		19/11	121		
to	20lı	1/21					0	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This i	is to certify th	at Mr./ N	Ms./Dr		Fixdose	. S		
has	participated	in Wo	rkshop	on	Basic	Present	ation	and
Teac	ching Skills co	onducte	d by M	EU,	at Sri	Manakula	Vinay	agar
Med	ical College ar	d Hospi	tal from		19/11/	21		
to		20/11/21						

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This i	is to certify tl	hat Mr./	Ms./Dr.		Mithro	a. R		
has	participated	in W	orkshop	on	Basic	Presenta	ation	and
	ching Skills o						Vinay	agar
Med	ical College a	nd Hosp	ital from	ı <u></u>	19/11	121		
to		20/11/				٩		

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This i	is to certify	that M	r./ Ms./[Or	Soary	a.N		
has	participate	d in	Worksh	op on	Basic	Present	ation	and
	ching Skills					[[전기: [2]] [[전기: [2] [[2] [[2] [[2] [[2] [[2] [[2] [[2]	Vinay	agaı
Med	ical College	and Ho	spital fr	om	19 [11/21		
to		20/11	121				0	

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This	is to certify	that N	/lr./ Ms./Dr		Raja. M			
has	participate	d in	Workshop	on	Basic	Presenta	ation	and
			ucted by M				Vinay	'agaı
Med	ical College	and H	ospital from		8/8	/20		
	91	8/20					1	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This	is to certify t	hat M	r./ Ms./Dr		Rharat	tri. M		
	participated						ation	and
Tead	ching Skills	condu	icted by M	EU,	at Sri	Manakula	Vinay	agar
Med	ical College a	nd Ho	spital from		19/11/	21		
to		20/11/	21			0		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This	is to certify	that N	/lr./ Ms.,	/Dr	-	Induic	a.P		
has	participate	d in	Works	hop	on	Basic	Present	ation	anc
Tea	ching Skills	condi	ucted b	У М І	EU,	at Sri	Manakula	Vinav	'agai
Med	dical College	and H	ospital f	rom		8/8/	120		J
to_	9/8/	20							

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This i	s to certify	that M	1r./ Ms./	Dr.	Prest	thi.	9		
has	participate	d in	Worksh	10p c	n Ba	sic	Presenta	ation	
Teac	hing Skills	condu	ucted by	y MEU	J. at S	Sri N	1 robelita 1 anakula	Vinav	and
Medi	cal College a	and Ho	Ospital fr	om	,	5/8/	20	Villay	agai
to	9/8/20								
							0		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This	is to certify t	hat N	/lr./ Ms./D	r.	Sefai	n. A		
	participated						ation	and
Tead	ching Skills	condi	ucted by	MEU,	at Sri	Manakula	Vina	/agar
Med	ical College a	nd H	ospital fro	m	8/8	1/20		J
to	9/8	/20				0		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	Gomath. S
has participated in Workshop on	Basic Presentation and
Teaching Skills conducted by MEU,	at Sri Manakula Vinayagar
Medical College and Hospital from	8/8/20
to 9/8/20	g

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to certify th	nat Mr./ Ms./Dr.	Rockin	a F	
has participated	in Workshop	on Basic	Presenta	ation and
Teaching Skills C	onducted by M	1EU . at Sri	Manakula	Vinavada
Medical College ar	nd Hospital from	29/1	119	viilayaga
to	19			
			0	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./	/ Ms./Dr	Swith	i. R		
has participated in W	orkshop o	n Basic	Presenta	ation ar	_ าd
Teaching Skills conduct	ed by MEU	, at Sri N	Manakula	Vinayag	ar
Medical College and Hosp				, ,	
to					
)		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./D	ir. Dinesh. M.S.
	op on Basic Presentation and
	MEU, at Sri Manakula Vinayagai
Medical College and Hospital fro	
to	

Dr. D. Rajagovindan Director



	is to certify that	스마일이 아들다 내 시간에 그리는 내용을 하는데 그렇게 되었다면서 하는데 하는데 하는데 바람이 되었다. 그리는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하					
has	participated in	Workshop	on	Basic	Presenta	ation	and
	ching Skills cond					Vinay	⁄agaı
Med	ical College and I	Hospital from		29/1/10	1		
to	30/1/19				2		
	M						

Dr. D. Rajagovindan Director



			r./ Ms./Dr					
has par	ticipated	in	Workshop	on	Basic	Presenta	ation	and
			cted by M I				Vinay	agar
Medical (College an	d Ho	spital from		26/9	12017		
to	27/9/201	17				Q		

Dr. D. Rajagovindan Director



This is to	certify that	Mr./ Ms./Dr	0,	Divya. S			
has pa	rticipated ir	Workshop	on	Basic	Presenta	ation	and
		ducted by M				Vinay	/agai
Medical	College and	Hospital from		29/1/1	9		
to	30/1/19				2		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This i	is to certify th	at Mr./ Ms./Di	. Vignesh.	3		
has	participated	in Worksho	p on Basic	Present	ation a	and
Teac	ching Skills co	onducted by	MEU, at Sri	Manakula	Vinaya	gar
Med	ical College ar	nd Hospital fro	m	/2017		
to	20/9/20	27				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This	is to certify th	at Mr	./ Ms./Dr		Pooja.	R		
has	participated	in V	Norkshop	on	Basic	Presenta	ation	and
	ching Skills co						Vinay	agar
Med	ical College an	d Hos	spital from		26/9	12017		
to	27/9/201	7				4		

Dr. D. Rajagovindan Director



This i	is to certify th	at Mr./ Ms./Dr	•	Subha	. V		
has	participated	in Worksho	o on	Basic	Present	ation	and
	ching Skills co	H (CONTROL OF CONTROL				Vinay	agar
Med	ical College an	d Hospital from	m	19/9/	2017		<u> </u>
to	20/9/201	7			0		

Dr. D. Rajagovindan Director



Kalitheerthalkuppam, Puducherry 605107

CERTIFICATE OF PARTICIPATION

This is	s to certify that M	1r./ Ms./Dr		Ramya	. <u>R</u>		
has	participated in	Workshop	on	Basic	Presenta	ation	and
Teacl	hing Skills cond	ucted by M	EU,	at Sri N	M anakula	Vinay	agar
	cal College and H	ospital from		19/9	2017		
to	20/9/2017				4		
to	20/9/2017				5		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is	to certify th	at Mr.	/ Ms./Dr.	ADIT	HYA · R	
has p	articipated	in \	Workshop	on	Communication	skills
condu	cted by ME	J, at S	ri Manakula	a Vin	ayagar Medical C	ollege
					13.01.2019	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr.	ARUN	KUMAR. P	
has participated in Worksho	p on	Communication	skills
conducted by MEU , at Sri Manak			
and Hospital from	to	13.01.2019	

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certi	ify that M	1r./ Ms./Dr.	GA	OUTHEM. B.		
has participa	ated in	Workshop	on	Commun	ication	skills
conducted by						
and Hospital f	rom <u>12</u>	01.2019	to	13.01.2019		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. SHAHEEN BEGOM Shas participated in Workshop on Communication skills conducted by MEU, at Sri Manakula Vinayagar Medical College and Hospital from 13.01-2018 to 14.01-2018

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

> Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This i	s to certify th	at Mr./	Ms./Dr	MOH	ANDASS . M	
					Communication	
conc	lucted by ME	J, at Si	ri Manakul	a Vir	nayagar Medical C	ollege
and I	Hospital from	09.01	. 2021	to	10.01.2021	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. <u>Jayakrishnan Harishkumar</u> has participated in **Workshop on Communication skills** conducted by **MEU**, at Sri Manakula Vinayagar Medical College and Hospital from <u>M.O. 2021</u> to <u>10.01.2021</u>

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This	is to certify th	at Mi	r./ Ms./Dr	CHIN	MAYI	ANOOP		
	participated							
conducted by MEU, at Sri Manakula Vinayagar Medical College								
and	Hospital from	<u>PO</u>	· 01 · 2021	to	10.01.20	21		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

> Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

> Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

> Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This i	s to certify th	at Mr./ Ms.	/Dr	HARS	HITA S	JAIN	
	participated						skills
conducted by MEU, at Sri Manakula Vinayagar Medical College							
and	Hospital from .	11.01.2020		to	(2.01.202	0	

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

> Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

> Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is t	o certify th	at Mr./	Ms./Dr	TLA	MPARITH	11. 7	
has pa	articipated	in W	orkshop/	on	Comm	unicatio	n skills
conduc	ted by ME	J, at Sri	Manakula	a Vin	ayagar	Medical	College
and Hos	spital from	12,01.	2019	to	13.01.2019		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ Ms./Dr	CHERUKUMALLI	MAVYA	
has participated in	Workshop on	Epi-Info	Software for	Data
Entry & Analysis cond				
at Sri Manakula Vina	yagar Medical	College a	and Hospital	from
15104/18to	22 104/18	_	g	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ Ms./Dr	FIRDOSE S			
has participated in	Workshop or	n Epi-Info	Soft	ware for	Data
Entry & Analysis con					
at Sri Manakula Vina					
toto	22 104 / 18	<u></u>		2	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that N	4r./ Ms./Dr	MANIU PA	RKAVI	S	
has participated in	Workshop or	Epi-Info	Softv	vare for	Data
Entry & Analysis cond					
at Sri Manakula Vinay					
toto	22/04/18			Q	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify t	that Mr.	./ Ms./Dr <i></i>	DEROT	PARAMA	GURU	
has participated	in W	orkshop on	Epi-Info	Softw	vare for	Data
Entry & Analysis	conduc	cted by SMV	MCH Re	search	n Commi	ittee,
at Sri Manakula	Vinaya	gar Medical	College	and I	Hospital	from
15/04/18	_to	22 /04 /18			2	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Thi	s is to certify	that M	1r./ M	s./Dr.	ABI	MEE	NASH)	<u> </u>	
	s participated								
En	try & Analysis	condi	ucted	by SMV	MCH	H Res	searc	h Comm	ittee,
at	Sri Manakula	Vinay	agar	Medical	Col	lege	and	Hospital	from
	15/04/18	_to	22/04	/18				2	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. <u>kaussikasei</u> K	
has participated in Workshop on Epi-Info Software for Date	ta
Entry & Analysis conducted by SMVMCH Research Committe	
at Sri Manakula Vinayagar Medical College and Hospital fro	m

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ Ms./Dr	PREETHI. K			
has participated in	Workshop on	Epi-Info	Soft	ware for	Data
Entry & Analysis con	ducted by SMV	MCH Res	earc	h Commi	ittee,
at Sri Manakula Vina	yagar Medical	College	and	Hospital	from
15/04/18to	22 104/18	_		2	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ Ms./Dr	SUBHA.V			
has participated in	Workshop on	Epi-Info	Softv	ware for	Data
Entry & Analysis cond	ducted by SMV	MCH Res	searc	h Commi	ittee,
at Sri Manakula Vina	yagar Medical	College	and	Hospital	from
toto	22 104 /18			4	
				7	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify t	hat Mr./ Ms./Dr. Ramya · B	
has participated	in Workshop on Epi-Info	Software for Data
Entry & Analysis	conducted by SMVMCH Res	search Committee,
at Sri Manakula	Vinayagar Medical College	and Hospital from
15/04/18	to 22 106/18	9

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify t	hat Mr./ M	ls./Dr	Byu DR			
has participated	in Work	shop on	Epi-Info	Soft	ware for	Data
Entry & Analysis	conducted	by SMV	MCH Res	searc	h Comm	ittee,
at Sri Manakula	Vinayagar	Medical	College	and	Hospital	from
15/04/18	to <u>22/0</u>	4 [18			3	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. VENKATESH R	
has participated in Workshop on Epi-Info Soft	ware for Data
Entry & Analysis conducted by SMVMCH Research	ch Committee,
at Sri Manakula Vinayagar Medical College and	Hospital from
tototo	0

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ Ms./Dr/	RAMYA G			
has participated in	Workshop on	Epi-Info	Soft	ware for	Data
Entry & Analysis con	ducted by SMV	MCH Res	searc	h Commi	ittee,
at Sri Manakula Vina	ayagar Medical	College	and	Hospital	from
to	22 104 /18			4	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ Ms./Dr. Vig	NESWARA /	MOORTH	ıı V	
has participated in	Workshop on I	Epi-Info	Soft	ware for	Data
Entry & Analysis cond	ducted by SMVI	MCH Res	searc	h Commi	ittee,
at Sri Manakula Vina	yagar Medical	College	and	Hospital	from
15 104/18to	22/04/18			4	

Dr. D. Rajagòvindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ Ms./Dr			
has participated in	Workshop on Epi-Info	Software for Data		
Entry & Analysis conducted by SMVMCH Research Committee,				
at Sri Manakula Vina	yagar Medical College	e and Hospital from		
<u>15/04/18</u> to	22104118			

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ Ms./Dr	KAILASH .C			
has participated in	Workshop on	Epi-Info	Soft	ware for	Data
Entry & Analysis con					
at Sri Manakula Vina	ayagar Medical	College	and	Hospital	from
toto	22/04/18	_		0	
()				3	

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

Thi	s is to certif	y that N	/lr./ Ms./Dr	KALEESWAR	1N.V		
ha	s participate	ed in '	Workshop o	n Epi-Info	Soft	ware for	Data
En	try & Analys	is cond	ucted by SM	VMCH Res	searc	h Comm	ittee,
at	Sri Manaku	la Vinay	agar Medica	al College	and	Hospital	from
	15/04/18	to	22/04/18			Q	
						~	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ Ms./Dr	DIDEROT PA	RA MAG	URU	
has participated in	Workshop on	Epi-Info	Soft	ware for	Data
Entry & Analysis con					
at Sri Manakula Vina	yagar Medical	College	and	Hospital	from
toto	22/08/18			2	

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ Ms./Dr. PREETHI. K	
has participated in	Workshop on Epi-Info So	ftware for Data
Entry & Analysis con	ducted by SMVMCH Resea	rch Committee,
at Sri Manakula Vina	ayagar Medical College an	d Hospital from
toto	22 104 / 18	Q

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Thi	s is to certify	that M	1r./ M	1s./Dr	KONDRA N	<u>IHARIK</u>	}	
ha	s participated	lin \	V ork	shop on	Epi-Info	Soft	ware for	Data
En	try & Analysis	cond	ucted	d by SMV	MCH Res	searc	h Comm	ittee,
at	Sri Manakula	Vinay	agar	Medical	College	and	Hospital	from
	15/04/18	_to	22/0	4/18	_		2	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. Rys. V	
Workshop on Epi-Info Soft	ware for Data
The y & Analysis conducted by SMVMCH Research	ch Committee
at Sir Manakula Vinayagar Medical College and	Hospital from
15/04/18to22/04/18	sopredi iromi
	^

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./	Dr. SWATI N
	p on Epi-Info Software for Data
Entry & Analysis conducted by	SMVMCH Research Committee,
at Sri Manakula Vinayagar Me	edical College and Hospital from
15/04/18to22/04/18	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	PUGAZENDHI.S
has participated in Workshop o	n Epi-Info Software for Data
Entry & Analysis conducted by SM	
at Sri Manakula Vinayagar Medica	al College and Hospital from
toto	

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify t	that M	r./ Ms./Dr	KAVYA . DC		
has participated				ware for	Data
Entry & Analysis					
at Sri Manakula					
15/04/18	_to	22/04/18	<u>-</u>	0	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ Ms./Dr	MEERA M			
has participated in	Workshop on	Epi-Info	Soft	ware for	Data
Entry & Analysis cor	nducted by SMV	MCH Res	searc	h Comm	ittee,
at Sri Manakula Vin	ayagar Medical	College	and	Hospital	from
15/04/18to_	22/04/18	_		2	

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. <u>KAWIRAJ</u>	N
has participated in Workshop on Epi-Infe	o Software for Data
Entry & Analysis conducted by SMVMCH Re	esearch Committee,
at Sri Manakula Vinayagar Medical College	e and Hospital from
15/04/18to22/04/18	Q

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify the	at Mr./ Ms./Dr	ARIRAMI: D	
		ative Care conducted by	
Department of Con	nmunity Medicine,	at Sri Manakula Vinayaga	ar
Medical College an	d Hospital from	06.02.2020	_
to	8.02.2020	2	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	RAGIOL S
has participated in Workshop on Palli	iative Care conducted by
Department of Community Medicine,	, at Sri Manakula Vinayagar
Medical College and Hospital from	12.02.2021
to	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to	certify that Mr./ Ms./Dr	NANDANA-S
has part	icipated in Workshop on Palli	iative Care conducted by
Departm	nent of Community Medicine,	, at Sri Manakula Vinayaga
Medical	College and Hospital from	12.02.2021
to	14.02.2021	_ &

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	<u>KARTHIKA M</u>
has participated in Workshop on Pallia	ative Care conducted by
Department of Community Medicine,	at Sri Manakula Vinayagar
Medical College and Hospital from	12.02.2021
to	Q

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	DIVYA · C
has participated in Workshop on Pallia	ative Care conducted by
Department of Community Medicine,	at Sri Manakula Vinayagar
Medical College and Hospital from	12.02.2021
to	5

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	AGILAN: R
has participated in Workshop on Pallia	ative Care conducted by
Department of Community Medicine,	at Sri Manakula Vinayagar
Medical College and Hospital from	12.02.2021
to	4
46 MIN - "ATT (18 P. 19	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	SIRPY: P
has participated in Workshop on Pallia	ative Care conducted by
Department of Community Medicine,	at Sri Manakula Vinayagar
Medical College and Hospital from	06.02.2020
to	Q

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	RAMO R
has participated in Workshop on Pallia	ative Care conducted by
Department of Community Medicine,	at Sri Manakula Vinayagar
Medical College and Hospital from	06.02.2020
to	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./DrMITHRO: R	
has participated in Workshop on Palliative Care cond	ducted by
Department of Community Medicine, at Sri Manakula	a Vinayagar
Medical College and Hospital from	
to	0

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that Mr./ Ms./Dr	
has particip	ated in Workshop on Pallia	ative Care conducted by
Departmen	t of Community Medicine,	at Sri Manakula Vinayaga
Medical Co	llege and Hospital from	<u> </u>
to	68.02.2020	Q

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	MEENA . N
has participated in Workshop on Pal	lliative Care conducted by
Department of Community Medicine	e, at Sri Manakula Vinayaga
Medical College and Hospital from	19.01.2019
to	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	LAYANYA G
has participated in Workshop on Pallia	ative Care conducted by
Department of Community Medicine,	at Sri Manakula Vinayagar
Medical College and Hospital from	19.01. 2019
to	2

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	HAMIA.VT
has participated in Workshop on Pallia	ative Care conducted by
Department of Community Medicine,	at Sri Manakula Vinayagar
Medical College and Hospital from	19.01. 2019
to	Q

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	DEPIKA · B
has participated in Workshop on Pallia	
Department of Community Medicine,	at Sri Manakula Vinayagar
Medical College and Hospital from	19.01. 2019
to	4

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	ADARSH.J.S
has participated in Workshop on Pallia	
Department of Community Medicine,	at Sri Manakula Vinayagar
Medical College and Hospital from	19.01.2019
to	

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to	certify tha	nt Mr./ Ms./Dr	PREETHL C. B	
		Workshop on Palli		onducted by
Departn	nent of Com	munity Medicine,	at Sri Manal	kula Vinayagar
Medical	College and	d Hospital from	18.08.2018	
to		20.08.2018		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	KAYIVA · P
has participated in Workshop on Pallia	ative Care conducted by
Department of Community Medicine,	at Sri Manakula Vinayagar
Medical College and Hospital from	18.08. 2018
to	Q

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	GIOMATHI.S
has participated in Workshop on Pallia	ative Care conducted by
Department of Community Medicine,	at Sri Manakula Vinayagar
Medical College and Hospital from	18.08.2018
to	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	ESALVANAN. S
has participated in Workshop on Pallia	ative Care conducted by
Department of Community Medicine,	at Sri Manakula Vinayagar
Medical College and Hospital from	18.08.2018
to	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./DrABINDYA-GI
has participated in Workshop on Palliative Care conducted by
Department of Community Medicine, at Sri Manakula Vinayaga
Medical College and Hospital from
to

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to	certify th	at Mr./ Ms./Dr	HEMB. P.A
has part	icipated in	Workshop on Pallia	ative Care conducted by
			at Sri Manakula Vinayagar
Medical	College an	d Hospital from	11.05.2018
to	20.05-2018		

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	DINESH · S
has participated in Workshop on Pallia	ative Care conducted by
Department of Community Medicine,	
Medical College and Hospital from	11.05.2018
to	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	ARJUN:M
has participated in Workshop on Pallia	ative Care conducted by
Department of Community Medicine,	
Medical College and Hospital from	11.05.2018
to	Q

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	APARNA.S
has participated in Workshop on Pallia	ative Care conducted by
Department of Community Medicine,	at Sri Manakula Vinayagar
Medical College and Hospital from	11.05.2018
to	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	1r./ Ms./Di	. RAMASH	MY R		
has partici	pated in W o	orkshop o	n qualitat	ive me	ethods in h	nealth
research o	conducted k	y SMVMC	H Resear	ch Co	mmittee,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
03/01/0	2to	07/01/18				

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. VALETI MEGHANA
has participated in Workshop on qualitative methods in health
research conducted by SMVMCH Research Committee, at Sri
Manakula Vinayagar Medical College and Hospital from

03/01/18 to 07/01/18

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. <u>ARAVIND.P.S</u>
has participated in **Workshop on qualitative methods in health**research conducted by **SMVMCH Research Committee**, at Sri
Manakula Vinayagar Medical College and Hospital from
o3/01/18 to <u>07/01/18</u>

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	1r./ Ms./Dr	ASHAYA	.A.C		
has partici	pated in W o	orkshop o	n qualitat	ive me	ethods in h	nealth
research o	conducted b	y SMVMC	H Resear	ch Co	mmittee,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
03/01/1	<u> </u>	07/01/18				

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	1r./ Ms./Di	· KULAD	EEP . I		
	oated in W					
research o	onducted k	oy SMVMC	H Resear	ch Co	mmittee,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
03/01/18	to	07/01/18				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that N	1r./ Ms./Di	SANTH	HYA.R		
has particip	pated in W	orkshop o	n qualitat	ive m	ethods in h	nealth
research o	onducted l	oy SMVMC	H Resear	ch Co	mmittee,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
03/01/18	to	07/01/18				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to c	ertify that M	1r./ Ms./Di	r. RITVIK	C.R		
has participated in Workshop on qualitative methods in health						
research o	conducted k	by SMVMC	H Resear	ch Co	mmittee,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
03 /01/18	to	07/01/18				

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to co	ertify that N	/lr./ Ms./Di	. SHARAI	NI.B		
	pated in W					
research o	conducted l	oy SMVMC	H Resear	ch Co	mmittee,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
03/01/18	to	07/01/18				

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	1r./ Ms./D	r. SHAFN	A AZE	EZ_	
has partici	pated in W e	orkshop o	n qualitat	ive m	ethods in h	nealth
	conducted k					
Manakula	Vinayagar	Medical	College	and	Hospital	from
	to					

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to c	ertify that N	4r./ Ms./D	rNABEE	L. M.	V	
has partici	pated in W	orkshop o	n qualitat	ive m	ethods in h	nealth
research o	conducted I	by SMVMC	H Resear	ch Co	mmittee,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
03/01/18	to	07/01/18				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to co	ertify that N	1r./ Ms./D	r. Pravfe	N KI)	MAP D	
וסוז נוסו	pacea III VV	orksnop o	n qualitat	ive m	ethods in b	health
research o	conducted k	by SMVMC	CH Resear	ch Co	mmittee	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
03/01/18	to	07/01/18				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to co has partici	ertify that N	Mr./ Ms./D	r. <u>Jenifer</u>	FLORE	NCE MARY.	
has partici research o		O GOILGA O	n qualitat	IVA m	ethode in l	Saalth
ridilakula	vinayagar	Medical	College	and	Hospital	from
03/01/18	to	07/01/18				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that I	Mr./ Ms./D	r. SIVA	SANKAR	2 . S	
has participated in W	orkshop o	n qualitat	ive m	ethods in I	nealth
research conducted	by SMVMC	CH Resear	ch Co	mmittee,	at Sri
Manakula Vinayagar	Medical	College	and	Hospital	from
03101/18to	07/01/18			2	

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to c	ertify that M	1r./ Ms./D	r. Lokes	H. R.		
has partici	pated in W	orkshop o	n qualitat	ive m	ethods in I	nealth
research o	conducted k	y SMVMC	CH Resear	ch Co	mmittee,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
	<u> </u>					

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to c	ertify that M	1r./ Ms./D	rMADHA	VAN. M		
has partici	pated in W	orkshop o	n qualitat	ive m	ethods in h	nealth
research o	conducted k	y SMVMC	CH Resear	ch Co	mmittee,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
63/01/18	to	07/01/18				

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. PRIADHARSHNI @ PREETHY .R.
has participated in Workshop on qualitative methods in health
research conducted by SMVMCH Research Committee, at Sri
Manakula Vinayagar Medical College and Hospital from
03 (0) (18 to 07 (0) (18

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. KRITHIKA CHENTHIL
has participated in Workshop on qualitative methods in health
research conducted by SMVMCH Research Committee, at Sri
Manakula Vinayagar Medical College and Hospital from

03/01/18 to 07/01/18

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to co	ertify that N	4r./ Ms./Dr	- RAMAN	NV_		
has partici	pated in W	orkshop o	n qualitat	ive me	ethods in h	nealth
research o	conducted I	by SMVMC	H Resear	ch Co	mmittee,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
03/01/18	to	07/01/18			2	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	1r./ Ms./Di	LTARM	·D		
has partici	pated in W o	orkshop o	n qualitat	ive me	ethods in h	nealth
research conducted by SMVMCH Research Committee, at Sri						
Manakula	Vinayagar	Medical	College	and	Hospital	from
03/01/	<u>18</u> to	07/01/18				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. HEMALAKCHMT. R. has participated in Workshop on qualitative methods in health research conducted by SMVMCH Research Committee, at Sri Manakula Vinayagar Medical College and Hospital from 63 (01/18 to 07/01/18

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./DrP							
has participated in Workshop on qualitative methods in health							
research conducted by SMVMCH Research Committee, at Sri							
Manakula	Vinayagar	Medical	College	and	Hospital	from	
	to						

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	1r./ Ms./Dr	- GOMAT	THI.S			
has partici	pated in W e	orkshop o	n qualitat	ive me	ethods in h	nealth	
research conducted by SMVMCH Research Committee, at Sri							
Manakula	Vinayagar	Medical	College	and	Hospital	from	
03/01/1	§to	67/01/18			2		

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to co	ertify that M	Ir./ Ms./Dr	RAN	MYA . B		
has partic	ipated in W	orkshop o	on Resear	ch M	ethods fo	or Post
Graduates	conducted	by SMVM	CH Resear	rch Co	ommittee	, at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from

Dr. D. Rajagovindan Director

13.07-2017



CERTIFICATE OF PARTICIPATION

This is to c	ertify that M	Ir./ Ms./Dr	. HEMAI	VATHY.	<u>R</u> .	
has partic	ipated in W	orkshop o	on Resear	ch M	ethods fo	r Post
Graduates	conducted	by SMVM	CH Resear	rch Co	mmittee	, at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from

15-07-2017

Dr. D. Rajagovindan Director

to

13.07.2017



CERTIFICATE OF PARTICIPATION

This is to c	ertify that M	1r./ Ms./Dr	·vı	anesh.	\$.	
has partic	ipated in W	orkshop	on Resear	ch M	ethods for	Post
	conducted					
	Vinayagar					
13.4.17		15. 7.17			4	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to co	ertify that M	1r./ Ms./Dr		ANTO	NY. A	
has partic	ipated in W	orkshop o	on Resear	ch M	ethods for	Post
Graduates	conducted	by SMVM	CH Resear	ch Co	mmittee ,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
10 = 101=	to 16	7 2017				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to co	ertify that N	4r./ Ms./Dr	GAYA	THR? . S		
has partic	ipated in W	orkshop	on Resear	ch M	ethods for	Post
Graduates	conducted	by SMVM	CH Resear	rch Co	mmittee ,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
13.7.17	to	15.7.17			Q	
	M					

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to co	ertify that M	Ir./ Ms./Dr	pus	HPA 1	2AJ - R.	
	ipated in W					Post
	conducted					
Manakula	Vinayagar	Medical	College	and	Hospital	from
13.7.17	to	15. 7.17.			Q	
Dr. I			Dr. R. N. Ka Deputy Direc	gne ctor		

Director



CERTIFICATE OF PARTICIPATION

This is to c	ertify that M	1r./ Ms./Dr	KAN	aidi n	ISHORE -	
has partic	ipated in W	orkshop o	on Resear	ch M	ethods for	Post
Graduates	conducted	by SMVM	CH Resear	rch Co	ommittee ,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
		15.7.17.				
	<u></u>				1	

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	1r./ Ms./Dr	. MARI	e Jeff	PREY AMBRO	ise.		
has partic	ipated in W	orkshop o	on Resear	ch M	ethods for	r Post		
Graduates conducted by SMVMCH Research Committee, at Sri								
Manakula	Vinayagar	Medical	College	and	Hospital	from		
10.7.	19to	15.7.19			0			
	\sim							

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that N	/lr./ Ms./D	r. <u>Pren</u>	JITH. R	•	
has partici	pated in W	orkshop	on Resear	ch M	ethods for	Post
Graduates	conducted	by SMVM	CH Resear	rch Co	ommittee ,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
10.7.19	to	15- 7.19			4	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to c	ertify that M	1r./ Ms./Dr		ORTHY.S		
has partic	ipated in W	orkshop o	on Resear	ch M	ethods for	Post
Graduates	conducted	by SMVM	CH Resea	rch Co	mmittee ,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
10-7-19	to	5- 7.19			9	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	1r./ Ms./Dr	. CLIN	TON . J		
has partici	ipated in W	orkshop o	on Resear	ch M	ethods for	Post
Graduates	conducted	by SMVM	CH Resear	rch Co	ommittee ,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
10.7.19	to	15-7-19			1	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to co	ertify that M	1r./ Ms./Di	ſ	PREETH:	2 · M ·	
has partic	ipated in W	orkshop	on Resear	ch M	ethods for	Post
Graduates	conducted	by SMVM	CH Resear	rch Co	mmittee ,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
	7.19 to 1	5-7-19			9	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	1r./ Ms./Dr	·	RAJA·V	•		
has partic	ipated in W	orkshop o	on Resear	ch M	ethods for	Post	
Graduates	Fraduates conducted by SMVMCH Research Committee, at Sri						
Manakula	Vinayagar	Medical	College	and	Hospital	from	
10-7-1	<u>•</u> to	15. 7.19			0		
	\sim				1		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to co	ertify that M	1r./ Ms./Dr	·	IJU · R		
has partic	ipated in W	orkshop o	on Resear	ch M	ethods for	Post
Graduates	conducted	by SMVM	CH Resear	rch Co	mmittee ,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
13.07.2	oi≠to	15-07-2017				
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Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	rtify that M	Ir./ Ms./Dr		DHUMIT	۹	
has partici	pated in W	orkshop o	on Resear	ch M	ethods for	Post
Graduates	conducted	by SMVM	CH Resear	rch Co	mmittee ,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
13.07.2014	to	15-07-2017.			0	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to c	ertify that M	1r./ Ms./Dr	- SHARK	PAN : M		
	ipated in W					Post
Graduates	s conducted	by SMVM	CH Resear	rch Co	mmittee ,	at Sri
	Vinayagar 10/01/18 to		College	and	Hospital	from
					-5	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to c	ertify that M	1r./ Ms./Di	rMA	NOT . J		
has partic	pipated in W	orkshop o	on Resear	ch M	ethods for	Post
Graduates conducted by SMVMCH Research Committee, at Sri						
	Vinayagar		College	and	Hospital	from
	10/02/18 to	18/02/18			0	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to co	ertify that M	1r./ Ms./Dr	ADA	y Ki	NMAR	
	ipated in W					r Post
Graduates	conducted	by SMVM	CH Resear	rch Co	ommittee ,	, at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
10/02	/ ₁₈ to	(8/n/18			0	
					-)	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to c	ertify that M	1r./ Ms./Di	r <i>X</i>	AMAN	NV		
has partic	has participated in Workshop on Research Methods for Post						
Graduates conducted by SMVMCH Research Committee, at Sri							
Manakula	Vinayagar	Medical					
	06/22_to	15/08/22			2		

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that N	Mr./ Ms./D	r	PAU	(E)	
has partici	pated in W	orkshop	on Resear	ch M	ethods for	Post
Graduates conducted by SMVMCH Research Committee, at Sri						
Manakula	Vinayagar	Medical	College	and	Hospital	from
08/06/	<u> 21 to</u>	15/0,6/22			_2	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify	y that Mr	r./ Ms./Dr	KAVIRA	・ aナ	\sim	
has participate						Post
Graduates con						
Manakula Vina	ayagar	Medical				
00						

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	MAN	IJULA	N	
has participated in Workshop o				r Post
Graduates conducted by SMVM				
Manakula Vinayagar Medical				
			0	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that N	/r./ Ms./Di	r. KALAIM	ATHY	5	
has partici	pated in W	orkshop	on Resear	ch M	ethods for	Post
Graduates	conducted	by SMVM	CH Resear	rch Co	ommittee ,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
	<u> </u>	15 6 11	<u></u>		3	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that N	1r./ Ms./D	rME	ERA	М	
has participated in W	orkshop	on Resear	ch M	ethods for	r Post
Graduates conducted					
Manakula Vinayagar	Medical	College	and	Hospital	from
	13/ 06/ 22			0	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that N	1r./ Ms./D	r. VIVEK	. P		
has participated in W				ethods for	Post
Graduates conducted					
Manakula Vinayagar	Medical				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that N	Mr./ Ms./Dr	. POUTHRA	. R		
has partici	pated in va	lue added	course o	n Bas	ic Epidemi	iology
conducted	by Depa i	rtment of	Commun	nity N	Medicine,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
06/07/21	to	18/08/21			2	
	().				7	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

> Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	1r./ Ms./Dr	. SUBITSH	A.R		
has particip	oated in va	lue added	course o	n Bas i	ic Epidem	iology
conducted	by Depar	tment of	Commun	nity M	1edicine,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
06.07.21	to	18.08.21			2	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	lr./ Ms./Dr	. MALIKA	SINHA		
has particip	oated in val	ue added	course o	n Bas i	ic Epidem	iology
conducted	by Depar	tment of	Commun	nity M	1edicine,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
06/07/21	to	8/08/21			Q	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	lr./ Ms./Dr	. ANUSRE	<u> </u>		
has partici	pated in val	lue added	course o	n Bas i	ic Epidem	iology
conducted	by Depar	tment of	Commun	nity M	1edicine,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
06/07/21	to <u></u> _to <u>_</u> _	1/08/21			Q	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ M	s./DrCUBA	SRI. S	1	
has participated in value a	dded course d	n Basi	c Epidemi	ology
conducted by Departmen	t of Commu	nity M	ledicine,	at Sri
Manakula Vinayagar Med	dical College	and	Hospital	from
07/07/2020 to 10/08/2	020		Q	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

> Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. <u>karthika</u> · M has participated in value added course on **Basic Epidemiology** conducted by **Department of Community Medicine**, at Sri Manakula Vinayagar Medical College and Hospital from

07 07 2020 to 10 08 2020

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. Mahalakshmi Subramani has participated in value added course on Basic Epidemiology conducted by Department of Community Medicine, at Sri Manakula Vinayagar Medical College and Hospital from 17/07/2020 to 10/08/2020

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

> Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	1r./ Ms./Dr	SANJ	U. SS		
has partici _l	oated in va	lue added	course o	n Bas i	ic Epidem	iology
conducted	by Depar	tment of	Commun	nity M	1edicine,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
02/07/19	to13	108/19				
	1					

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	Ir./ Ms./Dr	·POOBA	LAN. Y	<u> </u>	
has particip	pated in val	ue added	course o	n Bas i	ic Epidem	iology
conducted	by Depar	tment of	Commun	nity M	1edicine,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
02/07/19	to_ <u></u>	108/19			2	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. HEMASRI.R.

has participated in value added course on Basic Epidemiology conducted by Department of Community Medicine, at Sri Manakula Vinayagar Medical College and Hospital from

10 13 | 02 | 19

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to ce	rtify that M	1r./ Ms./Dr	RAJKU	MAR B		and the second
has particip						
conducted	by Depar	tment of	Commun	nity M	1edicine,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
03/07/18	tou	4 108 18			0	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to c ϵ	ertify that M	1r./ Ms./Dr	Boome	SHWA	RI.A	
has partici	pated in va	lue added	course o	n Bas i	ic Epidem	iology
conducted	by Depar	tment of	Commun	nity M	ledicine,	at Sri
Manakula	Vinayagar	Medical	College			
03/07/18	tot	4/08/18.				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	lr./ Ms./Dr	. SRINE	TH.S		
	pated in va					iology
conducted	by Depar	tment of	Commun	nity M	ledicine,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
03/07/18	toto	08/18			Q	

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. ARUNKUMAR.A has participated in value added course on Basic Epidemiology conducted by Department of Community Medicine, at Sri Manakula Vinayagar Medical College and Hospital from to 4/08/18

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to c ϵ	ertify that M	Ir./ Ms./Dr	· CYNTHIX	A . N		
has partici	pated in val	ue added	course o	n Bas i	ic Epidem	iology
conducted	by Depar	tment of	Commun	nity M	1edicine,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
03/07/18	to	08/18			2	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	Ir./ Ms./Dr	. MACRIO	V.B		
	pated in val					iology
conducted	by Depar	tment of	Commun	nity M	1edicine,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
03/07/17	to_ <u>u</u> _	[08/17			2	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that M	1r./ Ms./Dr	JAYA C	URYA	. U	
has particip	pated in val	lue added	course o	n Bas	ic Epidem	iology
conducted	by Depar	tment of	Commun	nity M	1edicine,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
03/07/17	to <u>14</u>	108 117			0	

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. DAYASAGIARA SAYEE.N has participated in value added course on Basic Epidemiology conducted by Department of Community Medicine, at Sri Manakula Vinayagar Medical College and Hospital from to 4/08/17

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to ce	ertify that N	1r./ Ms./Dr	BALAN	NITHRA). <u>S</u>	
has partici	pated in va	lue added	course o	n Bas i	ic Epidem	iology
conducted	by Depar	tment of	Commun	nity M	1edicine,	at Sri
Manakula	Vinayagar	Medical	College	and	Hospital	from
03/07/17	to	14/08/17			Q	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This	is to certify th	nat M	1r./ M	1s./Dr	ABINAY	A.V.			
has	participated	in v	/alue	added	course	on	Fire	and	Safety
con	ducted by NA I	вн, а	at Sri	Manaku	la Vinay	aga	r Med	dical	College
and	Hospital from		23.12-2	021.	_to				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This	is to certify th	nat Mi	r./ M	s./Dr	SUVAN	<u>a1</u>	CHAND	<u> </u>	
has	participated	in va	lue	added	course	on	Fire	and	Safety
con	ducted by NA I	BH, at	Sri I	Manaku	la Vinay	aga	r Med	dical	College
and	Hospital from	ź	23. 12.	2021	_to				

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. <u>SARTHS REERTHANA-S.</u>
has participated in value added course on **Fire and Safety**conducted by **NABH**, at Sri Manakula Vinayagar Medical College
and Hospital from <u>23-12-2-021</u> to

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This	is to certify th	nat	Mr./ M	1s./Dr	ROHIN	IT R			
has	participated	in	value	added	course	on	Fire	and	Safety
con	ducted by NA	вн,	at Sri	Manaku	la Vinay	aga	r Med	dical	College
and	Hospital from		23-12-21		_to				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ M	1s./Dr	ARJUN	P		
has participated in						Safety
conducted by NABH,						
and Hospital from	23 12- 2	021.	_to		 	

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ M	1s./Dr	RASIKA-1	<u>.</u>		<u>, , , , , , , , , , , , , , , , , , , </u>	
has participated in					Fire	and	Safety
conducted by NABH,	at Sri	Manaku	ıla Vinay	aga	r Med	dical	College
and Hospital from	05. 12-20	20.	_to				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is	s to certify tha	at Mr./ Ms./D	r. CHEKKA	4 MRUDULA	4 SRJ.
has	participated i	n value add	ed course	on Fire	and Safety
cond	ucted by NAB	H, at Sri Mana	akula Vinay	agar Med	dical College
and H	Hospital from _	25.08.2014.	to		

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This	is to certify th	nat	Mr./ M	1s./Dr	TERU	SHA	SHARON	J ·	
	participated								Safety
cond	ducted by NA I	вн,	at Sri	Manaku	ıla Vinay	aga	r Med	dical	College
and	Hospital from		25.08	2019.	_to	- 11 - 12 - 12 - 1			

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This	is to certify th	hat Mr./ N	Ms./Dr	VARSE	11N9 - B		
	participated					and	Safety
cond	ducted by NA I	BH, at Sri	Manaku	ıla Vinay	agar Me	dical	College
and	Hospital from	25-08-26	019	_to			

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ M	1s./Dr	VANSHIT	H ISAKAPA	TLA.	
has participated in value					Safety
conducted by NABH , at Sri					
and Hospital from 25.08.20					

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This	is to certify th	nat Mr.	/ Ms./Dr	NENAVA	TA SONAL	1.	
has	participated	in valu	ue adde	d course	on Fir	e and	Safety
	ducted by NA I						
and	Hospital from	25-08	-2019	to			

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. SIVA RAMA KRISHNA TOTA
has participated in value added course on Fire and Safety
conducted by NABH, at Sri Manakula Vinayagar Medical College
and Hospital fromtototo

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This	is to certify th	nat Mi	r./ M	s./Dr	MINU).B			
has	participated	in va	lue	added	course	on	Fire	and	Safety
cond	ducted by NA I	BH, at	Sri I	Manaku	la Vinay	agai	r Med	dical (College
and	Hospital from	2	6-0r-20	018.	_to				

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This	is to certify th	nat	Mr./ M	1s./Dr	KRIPA	TAIS	WAL.R.		
	participated								
cond	ducted by NAI	ЗΗ,	at Sri	Manaku	ıla Vinay	aga	r Med	dical	College
and	Hospital from		26.08.20	18	_to				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This	is to certify th	hat Mr./	Ms./Dr	KATH	HIR VEL-R.		
	participated						Safety
cond	ducted by NA I	BH, at Sr	i Manaku	ıla Vinay	agar Me	dical	College
and	Hospital from	26.08.2	018 .	_to			

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	LEMHA. L.
has participated in value added of	
conducted by NABH, at Sri Manakula	a Vinayagar Medical College
and Hospital from26.08.2018t	O

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that	Mr./ M	1s./Dr	SHANAZ	Je	MIMA	RAFF	ſ.
has participated in	value	added	course	on	Fire	and	Safety
conducted by NABH,	at Sri	Manaku	ıla Vinay	agai	r Med	dical (College
and Hospital from	22-08-2	017.	_to				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is t	to certify tl	hat Mr./ I	Ms./Dr	RAGUL	PSR		
	articipated					e and	Safety
conduc	cted by NA	BH, at Sri	Manaku	ıla Vinay	agar M	edical	College
and Ho	spital from	22.05-2	· +10.	_to			

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This	is to certify th	nat Mr./ N	1s./Dr	BALLA	RAKE	ESH.		
	participated				And the Property of the Land of the Land	and the second discount of the second discount of the second of the seco	and	Safety
cond	ducted by NAE	BH, at Sri	Manaku	ıla Vinay	agai	r Med	dical (College
and	Hospital from	22.08	.2017.	_to				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr.____ANGELING FELIX has participated in value added course on **Fire and Safety** conducted by **NABH**, at Sri Manakula Vinayagar Medical College and Hospital from ___22_|08||2014___to____

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This	is to certify th	nat M	1r./ M	1s./Dr	CHINMA	<u>ly</u>	ANOOP		
has	participated	in v	⁄alue	added	course	on	Fire	and	Safety
con	ducted by NAI	3H, a	at Sri	Manaku	la Vinay	agai	r Med	dical (College
and	Hospital from	<u>à</u>	22.08.8	2017.	_to				

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr.	SUPBIKSHA. K
has participated in value added	course on Hospital Infection
Control conducted by NABH, at S	[2] : [4] [2] [2] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4
College and Hospital from	109/2017 to 18/09/2017

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms.	/Dr. BRIN	DA PA	NEER SELVAM	
has participated in value ad	ded course	on H c	spital Inf	ection
Control conducted by NABH,				1edical
College and Hospital from	15/09/2017	to	18/09/2027	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr. CHITTEMS ETTI FLEMASRI AKMILA
has participated in value added course on Hospital Infection
Control conducted by NABH, at Sri Manakula Vinayagar Medical
College and Hospital from 15 /09/ 2017 to 18/09/2017

Dr. D. RajagovindanDirector



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms.	/Dr	ANKIT	AZAR	BAGE	
has participated in value ad					
Control conducted by NABH,	at Sri N	1anakı	ula Vina	ayaga	r Medical
College and Hospital from	15/09/201	17	_to	18/09/	2017

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./	Dr. AVA	COLLIN	Juani	
has participated in value add				nfection
Control conducted by NABH,				
College and Hospital from	25/09/2018	to	28/09/20	18

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Di	· NENAVAT	TA SONALI	
has participated in value added			Infection
Control conducted by NABH, at			
College and Hospital from	25/09/2018	to 25/09	9/2018

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./D	r. NIVEDITHA	NANDAGOPAL
has participated in value adde		
Control conducted by NABH, at	Sri Manakula	a Vinayagar Medical
College and Hospital from	25) 09/ 2018 to	028/09/2018

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./D	r. VARSHI	TH ISAKAPA	TLA
has participated in value adde	ed course	on Hospita	al Infection
Control conducted by NABH, at	: Sri Manal	kula Vinaya	gar Medical
College and Hospital from	25/09/2018	to <i>20</i>	109/2018.

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms	s./Dr <i>Mag</i>	LIKA SI	KHA
has participated in value ad			
Control conducted by NABH			
College and Hospital from	25/09/2018	to	28/09/2018.

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./	Dr. ASHUAN	II SMUSBUTHI.	S
has participated in value add	ded course o	on Hospital	Infection
Control conducted by NABH,	[전문] [12] [12] [12] [12] [12] [12] [12] [12		ar Medical
College and Hospital from	24/09/2019	_to27/00	7/2019.

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./D	r. SARANK	RAT	ST
has participated in value adde	d course	on I	Hospital Infection
Control conducted by NABH, at			
College and Hospital from	24/09/2019	_to	27/09/2019.

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms.	/Dr	. Kumar	
has participated in value ad	ded course	on Hos	pital Infection
Control conducted by NABH,	at Sri Manak	ula Vina	ayagar Medical
College and Hospital from	24/09/2019	to	27/09/2019.

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./[Dr. AHILE	A RATESHWAKI	S
has participated in value add	ed course c	on Hospital	Infection
Control conducted by NABH, a	t Sri Manakı	ula Vinayaga	ar Medical
College and Hospital from	24/09/2019	_to21	109/2019

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./I	DrAKSHA	14A PK	
has participated in value add	ed course	on Hospita	I Infection
Control conducted by NABH, a			gar Medical
College and Hospital from	24/09/2019	to <i>2</i> a	109/2019.

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./D	rABIN	AYA V	
has participated in value added	d course c	n Hospital	Infection
Control conducted by NABH, at			
College and Hospital from	11/09/2020	_to	109/2020

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	. DEEPI	IKA	<u> </u>	
has participated in value added	d course	on	Hospital	Infection
Control conducted by NABH, at				
College and Hospital from	11/09/2020	tc	14/00	9/2020

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr.	TOSNUA	<i></i>
has participated in value added	course on	Hospital Infection
Control conducted by NABH, at S	ri Manakula	a Vinayagar Medical
College and Hospital from	09/2020 to	14/09/2020

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./	Dr. NAMB	v R		
has participated in value add	ded course o	n Hos	pital Infe	ction
Control conducted by NABH,	그렇게 그 그런 보면 없는 것 같아. 그는 사람들이 다른 것이 되는 것이 없는 것이 없는 것이 없는 것이 없어 없다.			edical
College and Hospital from	11/09/2020	_to	14/09/2020	

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./D	r. <u>Sin s</u>	VJA	S
has participated in value adde		on Ho	ospital Infection
Control conducted by NABH, at			
College and Hospital from	11/09/2020	_to	24/09/2020

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr	Anxa.	SH S	
has participated in value added	d course o	n Hos	pital Infection
Control conducted by NABH, at	Sri Manaku	ıla Vina	ayagar Medical
College and Hospital from	08/02/2022	_to	11/02/2022

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./D	r GONTHA	m S	
has participated in value adde	d course on	Hospital	Infection
Control conducted by NABH, at			
College and Hospital from	08/02/2022 t	0_21/02	12022

Dr. D. Rajagovindan
Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./D	r. MADU	MITTA	5
has participated in value adde	d course	on H o	ospital Infection
Control conducted by NABH, at	Sri Manak	kula Vi	inayagar Medical
College and Hospital from	00/02/2022	to	11/02/2022

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms.,	DrSRUTHI	
has participated in value add	ded course on Hos	spital Infection
Control conducted by NABH,		
College and Hospital from	41/0-08/02/22 to	1,102/22

Dr. D. Rajagovindan Director



CERTIFICATE OF PARTICIPATION

This is to certify that Mr./ Ms./Dr.	UDATA	
has participated in value added	course on	Hospital Infection
Control conducted by NABH, at S	ri Manakula	Vinayagar Medical
College and Hospital from	08/2/22 to	11/2/22

Dr. D. Rajagovindan Director