



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's
AYURVED MAHAVIDYALAYA, RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)
Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.
Email: principal@csmsayurved.com
(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 27/01/21

APPLICATION

I Dr. Rajendra Bhagwan Thakare P.G. Student of
Dnd Year from Kaumarbhitya Dept. want to investigate

The patient for my research purpose. So please allow and guide me for the same.

I will pay the decided expenses for the investigation.

7039315911 / 989486611

Sr.No.	No. of Investigation	Actual Charges	50% Charges
1	CBC	100	50
2	stool exam ⁿ	60	30
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will be Rs.20/- per patient.

Titel: Prospective Randomised Controlled Clinical study to evaluate the efficacy of Vidanga-Saindhovadi churna in the management of Kaphaja Kimi W.J.R. To Ascaris Lumbricoidis.

[Signature]
Guide

[Signature]
Student Sign

[Signature]
H.O.D.

[Signature]
Rogidan Dept

[Signature]
I/C Academic

[Signature]
Principal



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's
AYURVED MAHAVIDYALAYA, RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email: principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 27/01/2021

APPLICATION

I Dr. Chetan Pandurang Landkar P.G. Student of
IInd year Year from Kaumarbhintya Dept. want to investigate

The patient for my research purpose. So please allow and guide me for the same.
I will pay the decided expenses for the investigation.

Sr.No.	No. of Investigation	Actual Charges	50% Charges
1	STOBI Routine & Microsc- opie	50/-	30/-
2			
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will be Rs.20/- per patient.

Title: Clinical study to evaluate the Efficacy of Shreerasadi
Churna in the management of Atisra w.s.R. to
diarrhea in children

Landkar
Student Sign

[Signature]
Guide

[Signature]
H.O.D.

[Signature]
Rognidan Dept

[Signature]
I/C Academic

[Signature]
Principal



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's
AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)
Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.
Email : principal@csmsayurved.com
(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 25/06/2021

Inter Department Collaborative Research Activity Form

I Dr. Prasanna Rajendra Pawar P.G. Student of
Panchakozma Department IInd Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student :

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	<u>Ser. Uric Acid</u>	<u>100 /-</u>	<u>50 /-</u>
2			
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will be Rs.20/- per patient.

Title of Research Study
<u>clinical study of Dashmool Ghrita Parisheka and Amrut Guggul in the management of Vat-rakta wsr to Gout.</u>

[Signature]
Student Sign

[Signature]
Guide

[Signature]
H.O.D.

[Signature]
HOD of Rognidan Dept.

[Signature]
Academic In-charge

[Signature]
Principal



ISO 9001-2015 CERTIFIED
ChhatrapatiShahuMaharajShikshanSanstha's

AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 06/07/21

Inter Department Collaborative Research Activity Form

I Dr. Neha Singh P.G. Student of
Prasuti Tantra & Stri Roga Department 2019-20 Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student :

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	ANC Profile	730	365
2	UPT	90	45
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will
be Rs.20/- per patient.

Title of Research Study

Randomized Controlled Clinical Study To Evaluate The Efficacy Of
Panchamuladi Kashayam In The Management Of Garbhini Chhardi
w.s.r. To Emesis Gravidarum.

Neha
Student Sign

Hemant
Guide

[Signature]
H.O.D.

[Signature]
HOD of Rognidan Dept.

[Signature]
Academic In-charge

[Signature]
27/07/2021
Principal



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's

AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 09/07/2024

Inter Department Collaborative Research Activity Form

I Dr. Darshani Navneet Kale P.G. Student of
Perasuti tantra & Sri Rogga Department PG - 2nd Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student : 975454059

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	CBC	100	50
2	Total cholesterol level	70	35
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will
be Rs.20/- per patient.

Title of Research Study

Randomised controlled clinical study To evaluate
The effect of Vamana Karma followed By Kuberalesh
Vah in The Management of Polycystic Ovarian Syndrome.

Darshani
Student Sign

Yash
Guide

[Signature]
H.O.D.

[Signature]
HOD of Rognidan Dept.

[Signature]
Academic In-charge

[Signature]
Principal



ISO 9001-2015 CERTIFIED
ChhatrapatiShahuMaharajShikshanSanstha's

AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 15/08/21

Inter Department Collaborative Research Activity Form

I Dr. Sayali Gajanan Deokar P.G. Student of
Shoerog & Prasuti Tantra Department III Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student :

Mob. No. - 8275331949

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	ANC Profile	Rs. 780/-	Rs. 390/-
2			
3			
4			


If the kit will be made available by the student, then the collection & processing Charges will
be Rs.20/- per patient.

Title of Research Study


Randomized controlled clinical trial to
evaluate the efficacy of Chandanadi Churna
& Chaturjatak churna in the management of
Garbhini Chhardi w.s.r. emesis gravidarum.

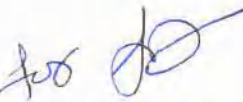

Student Sign


Guide


H.O.D.


HOD of Rognidan Dept.


Academic In-charge


Principal



ISO 9001-2015 CERTIFIED
ChhatrapatiShahuMaharajShikshanSanstha's

AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 20/7/21

Inter Department Collaborative Research Activity Form

I Dr. Kalyani Yashwant Khazad P.G. Student of
Prasutitantra Department 2nd Year want to investigate The patient for my
50000 research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student : 7972787837

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	CBC	100	50
2	HIV	300	150
3	AbsAg	60	30
4	Blood group	60	30

If the kit will be made available by the student, then the collection & processing Charges will be Rs.20/- per patient.

Title of Research Study

Randomized Controlled Clinical study to evaluate
the efficacy of Ayurved nadiyog in the managem
ent of gaubhini Pandu w.s.R. to Iron deficiency Anemia in preg

Kaer
Student Sign

[Signature]
Guide

[Signature]
H.O.D.

[Signature]
HOD of Rognidan Dept.

[Signature]
Academic In-charge

[Signature]
Principal



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's
AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 22/07/21

Inter Department Collaborative Research Activity Form

I Dr. RUTUJA SHRIKANT KALE P.G. Student of
KAUMAR BHARTYA Department IInd Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student : 880599 2930

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	<u>CBC</u>	<u>100/-</u>	<u>50/-</u>
2			
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will
be Rs.20/- per patient.

Title of Research Study

Randomized Controlled Clinical Trial To study the Efficacy of
Badaryadi Churna in the management of Balshosha
with Special Reference to Protein Energy malnutrition

Rutuja
Student Sign

[Signature]
Guide

[Signature]
H.O.D.

[Signature]
HOD of Rognidan Dept.

[Signature]
Academic In-charge

[Signature]
Principal



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's

AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 22/07/21

Inter Department Collaborative Research Activity Form

I Dr. RUCHIRA BALASHEB GAIKWADE..... P.G. Student of
KAUMARBHRITYA Department 2nd Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student : 9922 477498


Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	Urine Routine & Microscope	60/-	30/-
2			
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will
be Rs.20/- per patient.

Title of Research Study

Randomised controlled clinical study to Evaluate The Efficacy
of Eladi Yoga In The Management of Pittaj Mutakurchha IN
children with special Reference To Urinary Tract Infection.....

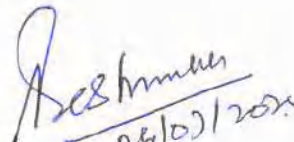

Student Sign


Guide


H.O.D.


HOD of Rognidan Dept.


Academic In-charge


Principal
24/07/2021



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's
AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)
Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.
Email : principal@csmsayurved.com
(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 23/07/2021

Inter Department Collaborative Research Activity Form

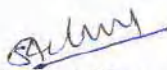
I Dr. Gaikwad Sachin Ravindra P.G. Student of
Rognidan & V.V. Department P.G. IInd Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student : 7499855123

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	saliva uric acid	100/-	50/-
2			
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will be Rs.20/- per patient.

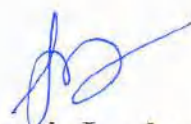
Title of Research Study
<u>An observational descriptive study of</u> <u>Tivhapariksham in Aamayirna by evaluating</u> <u>saliva uric acid.</u>

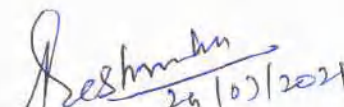

Student Sign


Guide


H.O.D.


HOD of Rognidan Dept.


Academic In-charge


Principal
23/07/2021



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's
AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 10/8/21

Inter Department Collaborative Research Activity Form

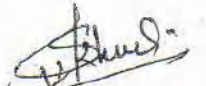
I Dr. Nishranti Vasantree Khandekar P.G. Student of
2nd yr. Department Shalya 2nd Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

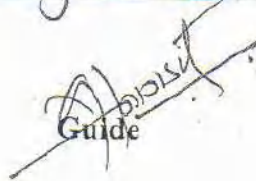
Contact Number of PG Student : 8600678776

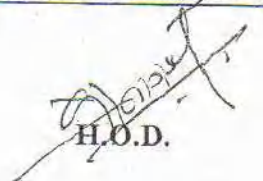
Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	HB %	70	35
2	BT, CT	60	30
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will
be Rs.20/- per patient.

Title of Research Study
<u>clinical study on chirbilwadi churna in the management of Raktorsha with special reference to first degree internal haemorrhoids</u>



Student Sign


Guide


H.O.D.


HOD of Rognidan Dept.


Academic In-charge


Principal



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's
AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 27/9/2021

Inter Department Collaborative Research Activity Form

I Dr. Meghna Vishnu Gaikwad P.G. Student of
Kayachikitsa DepartmentII..... Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student :

mob NO - 9699305034

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	<u>CBC</u>	<u>100</u>	<u>50</u>
2			
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will
be Rs.20/- per patient.

Title of Research Study
Randomized controlled clinical study to evaluate
the efficacy of vasadi kashaya in the management
of tamaka shwasa with special reference to Bronchial
Asthma.

Malkwad
Student Sign

[Signature]
Guide

[Signature]
H.O.D.

[Signature]
HOD of Rognidan Dept.

[Signature]
Academic In-charge

[Signature]
Principal 04/10/2021



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's

AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 27/9/21

Inter Department Collaborative Research Activity Form

I Dr. Budde Tanuja Narsing P.G. Student of Kayachikitsa Department 2nd Year want to investigate The patient for my research purpose. So please allow and guide me for the same. I will pay the decided expenses for the investigation.

Contact Number of PG Student : Mob.No - 7709255901

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	<u>Lipid profile.</u>	<u>350/-</u>	<u>175/-</u>
2			
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will be Rs.20/- per patient.

Title of Research Study
<u>CLINICAL STUDY TO EVALUATE THE EFFICACY OF</u> <u>GUDDUCHYADI YOGA IN THE MANAGEMENT OF</u> <u>STHAULYA</u> <u>W.S.R. TO OBESITY.</u>

Tanuja
Student Sign

[Signature]
Guide

[Signature]
H.O.D.

[Signature]
HOD of Rognidan Dept.

[Signature]
Academic In-charge

[Signature]
Principal



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's
AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)
Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.
Email : principal@csmsayurved.com
(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 8/10/21

Inter Department Collaborative Research Activity Form

I Dr. Nisha Dajale Vasave P.G. Student of
Panchakosha Dept.1st Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student : 7798287105

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	<u>ser. creatinine level</u>	<u>90 /-</u>	<u>45 /-</u>
2			
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will
be Rs.20/- per patient.

Title of Research Study
<u>Randomized controlled clinical study to evaluate niryundi fail matso basti & dashmool fail matso basti in the management of sandhiyatro. w.s.s to osteoarthritis</u>

Nisha Dajale Vasave
Student Sign

[Signature]
Guide
08/10/2021

[Signature]
H.O.D.

[Signature]
HOD of Rognidan Dept.

[Signature]
Academic In-charge

[Signature]
Principal



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's
AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002. (M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi & Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 27/11/2021

Inter Department Collaborative Research Activity Form

I Dr. Sbadigaonkar, Dipal Hanuman P.G. Student of
Kayachikitsa Department 2nd Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student :

Mob. NO - 7083653732

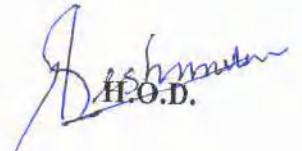
Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	BSL - Fasting	60/-	30/-
2	Post Meal	60/-	30/-
3			
4			

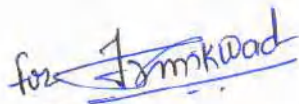
If the kit will be made available by the student, then the collection & processing Charges will be Rs.20/- per patient.

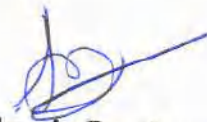
Title of Research Study
CLINICAL STUDY TO EVALUATE EFFICACY OF SHUKRAMATRUKA VATI AND THE METFORMIN IN THE MANAGEMENT OF PRAMEH W-S-R-TO DIABETES MELLITUS TYPE-II

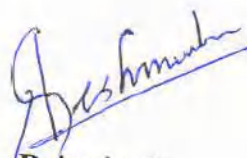

Student Sign


Guide


H.O.D.


HOD of Rognidan Dept.


Academic In-charge


Principal



AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi & Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 08/12/2021

Inter Department Collaborative Research Activity Form

I Dr. Shekhar Dattabaya Shejul P.G. Student of KAYACHIKITSA Department MD-2nd Year want to investigate The patient for my research purpose. So please allow and guide me for the same. I will pay the decided expenses for the investigation.

Contact Number of PG Student : 9730323055, 9604790848.

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	<u>Serum Uric acid</u>	<u>100 Rs.</u>	<u>50 Rs.</u>
2			
3			
4			


If the kit will be made available by the student, then the collection & processing Charges will be Rs.20/- per patient.

Title of Research Study

CLINICAL STUDY TO EVALUATE THE EFFI-
CACY OF VATSADNYADI KASHAYA IN THE
MANAGEMENT OF VATARAKTA W.S.P. TO GOUT.

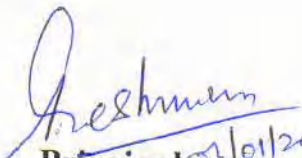

Student Sign


Guide


H.O.D.


HOD of Rognidan Dept.


Academic In-charge


Principal 03/01/2022



AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi & Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 15/12/21

Inter Department Collaborative Research Activity Form

I Dr. Manjushree Shriram Patil P.G. Student of Shalyatantra Department IInd Year want to investigate The patient for my research purpose. So please allow and guide me for the same. I will pay the decided expenses for the investigation.

Contact Number of PG Student : 8668974135

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	CBC	100	50
2	BT/CT	60	30
3	HIV, HBs Ag	360	175
4	BSL (R)	60	30

If the kit will be made available by the student, then the collection & processing Charges will be Rs.20/- per patient.

Title of Research Study

Randomised Controlled clinical study to evaluate efficacy of 'Kalanusaryadi tailam' as vrana ropan in the management of 'Parikartika' with ref. to Aute fissue in Ano.

Student Sign

Guide

H.O.D.

HOD of Rognidan Dept.

Academic In-charge

Principal 15/12/2021



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's

AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 15/12/2021

Inter Department Collaborative Research Activity Form

I Dr. Sate Surekha Dnyandeo P.G. Student of
Shalyatantra Department IInd Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student : 7588644814

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	<u>urine R/M</u>	<u>60</u>	<u>30</u>
2			
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will
be Rs.20/- per patient.

Title of Research Study
<u>"Clinical study to evaluate the efficacy of shwadanstradi kwath in the management of Mootraśhmari' w.s.R To Renal calculus A Randomized, controlled study.</u>

Sate
Student Sign

Principals
Guide

Principals
H.O.D.

Principals
HOD of Rognidan Dept.

Principals
Academic In-charge

Principals
Principal 27/12/2021



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's

AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmssayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 16/11/2021

Inter Department Collaborative Research Activity Form

I Dr. Amar Madan Shinde P.G. Student of
Shalya Tantra Department ... M.S. D.Y.P. Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student : 8308074768

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	Haemoglobin .	60	30
2	BT / CT .	60	30
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will
be Rs.20/- per patient.

Title of Research Study
<u>clinicle study To evaluate the efficacy of</u> <u>Phanamkuthar rasa in the management of Abhyanta</u> <u>Asha w.s.r PU internal Haemorrhoids.</u>

Ashwale
Student Sign

[Signature]
Guide

[Signature]
H.O.D.

[Signature]
HOD of Rognidan Dept.

[Signature]
Academic In-charge

[Signature]
Principal



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's
AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002. (M.S.)
Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmssayurved.com
(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 20/12/2021

Inter Department Collaborative Research Activity Form

I Dr. Kavita Mukund Urhe P.G. Student of
Shalyatantra Department2nd..... Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student : 8459227496

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	<u>cbc</u>	<u>100</u>	<u>50</u>
2	<u>BSL-R</u>	<u>60</u>	<u>30</u>
3	<u>BT/CT</u>	<u>60</u>	<u>30</u>
4	<u>EE</u>		

If the kit will be made available by the student, then the collection & processing Charges will
be Rs.20/- per patient.

Title of Research Study
<u>Randomized controlled clinical trial of</u> <u>vranopak yog in the management of</u> <u>chhshtra vrana.</u>

Urhe
Student Sign

Urhe
Guide

Urhe
H.O.D.

Urhe
HOD of Rognidan Dept.

Urhe
Academic In-charge

Urhe
Principal 21/12/2021



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's
AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)
Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.
Email : principal@csmsayurved.com
(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 27/12/21

Inter Department Collaborative Research Activity Form

I Dr. AVINASH VITTHALRAO KAWARE, P.G. Student of
ROGNIDAN, EVAM Department 2nd Year want to investigate The patient for my
VIKRUTI VADHAN research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student : 9689987692

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	SERUM URIC ACID.	100/-	50/-
2			
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will be Rs.20/- per patient.

Title of Research Study
<u>An observational study of Vyadhija hetu Yanayan. Peavas and Vidahi Ampan in Vatasakta w.s.e. to Gout in Bus Drivers by evaluating serum uric acid level.</u>

Kaware
Student Sign

[Signature]
Guide

[Signature]
H.O.D.

[Signature]
HOD of Rognidan Dept.

[Signature]
Academic In-charge

[Signature]
Principal



ISO 9001-2015 CERTIFIED
ChhatrapatiShahuMaharajShikshanSanstha's

AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 3.01.2022

Inter Department Collaborative Research Activity Form

I Dr. Sumit Bhaskar Shewale P.G. Student of
Kaumarbharya Department 2021-2022 Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student : 8446230913

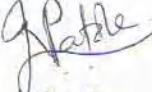
Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	<u>CBC & ESR</u>	<u>100</u>	<u>50</u>
2			
3			
4			

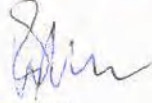
If the kit will be made available by the student, then the collection & processing Charges will
be Rs.20/- per patient.


Title of Research Study

Randomized controlled clinical study to evaluate
the efficacy of Dhananjayadi Yog in Kaphaj Kasa in
children.


Student Sign


Guide


H.O.D.


HOD of Rognidan Dept.


Academic In-charge


Principal



ISO 9001-2015 CERTIFIED
ChhatrapatiShahuMaharajShikshanSanstha's

AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 10/01/2022

Inter Department Collaborative Research Activity Form

I Dr. SUHAS DHANAJI VEER P.G. Student of
KUAMARSHIJA Department 2nd yr Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student : 97 665 665 97

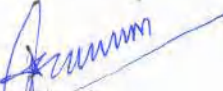
Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	CBC	100/-	50/-
2			
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will
be Rs.20/- per patient.


Title of Research Study

RANDOMIZED CONTROLLED CLINICAL STUDY TO EVALUATE
THE EFFICACY OF MUSTADI CHOORNA IN THE MANAGEMENT
OF KAPHAJ CHHARDI IN CHILDREN


Student Sign


Guide


H.O.D.


HOD of Rognidan Dept.


Academic In-charge


Principal



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's

AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 27/11/22

Inter Department Collaborative Research Activity Form

I Dr. Kiran Padmakar Kadam P.G. Student of
Rog Nidan Department 2019-20 Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

Contact Number of PG Student : 8007615438

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	Absolute Eosinophilic Count (AEC)	100	50
2			
3			
4			

If the kit will be made available by the student, then the collection & processing Charges will
be Rs.20/- per patient.

Title of Research Study

An Observational Study of Sanyog Viruddha
Aahara As a hetu in pinas w.r.t. to
Allergic Rhinitis by evaluating Absolute Eosinophilic Count

Kiran Padmakar Kadam
Student Sign

J. M. Kadam
Guide

[Signature]
H.O.D.

[Signature]
HOD of Rognidan Dept.

[Signature]
Academic In-charge

[Signature]
Principal



ISO 9001-2015 CERTIFIED
Chhatrapati Shahu Maharaj Shikshan Sanstha's

AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 23/02/2023

Inter Department Collaborative Research Activity Form

I Dr. Mayawati Yadavrao Pow P.G. Student of
Prosthodontics Department IIIrd Year want to investigate The patient for my
research purpose. So please allow and guide me for the same. I will pay the decided expenses
for the investigation.

9284503408

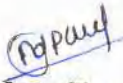
Contact Number of PG Student :

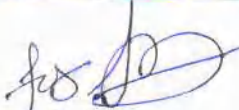
Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	CBC & ESR,	100 Rs	50 Rs
2	Serology (HIV, HBsAg,	1300 , 60	150 - 30
3	NDRL)	90	45
4	BTCT	60	30


If the kit will be made available by the student, then the collection & processing Charges will
be Rs.20/- per patient.

Title of Research Study

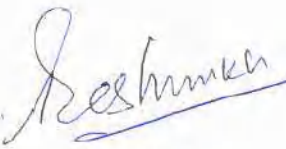
Randomized controlled clinical study of Rupan yog in
the management of vituperated wound w.s.r. to episiotomy
wound.

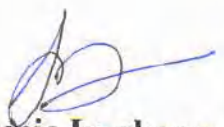

Student Sign


Guide


H.O.D.


HOD of Rognidan Dept.


Principal


Academic In-charge



ISO 9001-2015 CERTIFIED
ChhatrapatiShahuMaharajShikshanSanstha's

AYURVED MAHAVIDYALAYA & RUGNALAYA

KANCHANWADI, PAITHAN ROAD, AURANGABAD-431002.(M.S.)

Tel: (0240) 2379248, 2379053, Fax No. (0240) 2379355, 2646222.

Email : principal@csmsayurved.com

(Recognized by Central Council of Indian Medicine, New Delhi &
Affiliated to Maharashtra University of Health Sciences, Nashik.)

AMA/

Date: 21/2/2021

Inter Department Collaborative Research Activity Form

I Dr. SHUBHAM BHARAT NIFAM P.G. Student of Kaumarbhanga Department 3rd year. Year want to investigate The patient for my research purpose. So please allow and guide me for the same. I will pay the decided expenses for the investigation.

Contact Number of PG Student : 9637816919

Sr.No.	Name of Investigation	Actual Charges	50% Charges
1	Urinary Protein	80	30
2	Sr. Creatinine	70	35
3	Sr. Albumin	90	45
4	Urinary Pr/cr. ratio		

If the kit will be made available by the student, then the collection & processing Charges will be Rs.20/- per patient.


Title of Research Study

Role of Punarnavagava in the manage-
ment of Vrikkaroga w.r.o. to nephrotic
Syndrome - Randomized controlled study.

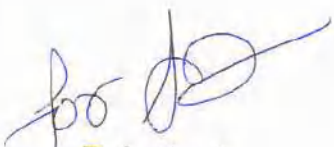

Student Sign


Guide


H.O.D.


HOD of Rognidan Dept.


Academic In-charge


Principal