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| 1. | Name of the Faculty | Dr. K M B V Saadhana |
| 2. | Department | Pediatrics |
| 3. | Current Designation | Junior Resident |
| 4. | Registration Number | APMC/FMR/93388 |
| Academic Qualifications | | |
| 5. | UG Qualification + Name of College/Institute | MBBS Kamineni Institute Of Medical Sciences Dr. NTRUHS |
| 6. | PG Qualification + Name of College/Institute | |
| 7. | Any Additional Qualifications | |

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| 8. | Number of Years of Experience | 02 year |
| 9. | Publications (in Vancouver Style) | |
| 10. | Presentations (in Conferences/ CMEs) | |

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| 11. | Projects (Ongoing & Completed) | |
| 12. | Positions Held / Accomplishments / Awards / Grants (if applicable) | |
| 13. | Areas of Interest | |