

## FACULTY INFORMATION

Name : **Dr. Kshitij Deependra Wani**

Date of Birth & Age : **25/09/1994**

Present Designation : **Junior Resident**

Department : **Radio - Diagnosis**

College : **A. J. Institute of Medical Sciences & Research Centre**

City : **Mangaluru**

Campus Address of Resident : **Resident Quarters No.634  
AJIMS&RC Campus,  
Mangalore**

Permanent Address of Resident : **S/o Deependra Wani  
455, Shroj Villa  
New Colony  
Nagpur  
Maharashtra - 440001**

Phone & Fax Number With Code : Office : **0824 - 2225533(with STD code)**

E-mail address : **kshitij\_wani@hotmail.com**

Mobile Number : **9049167742**

Date of joining present institution : **May 10, 2019 as Junior Resident**



### **Qualifications:**

Qualification	College	University	Year	Registration No. of UG & PG with date	Name of the State Medical Council
MBBS	<b>Datta Meghe Institute of Medical Sciences</b>	<b>Datta Meghe Institute of Medical Sciences Deemed University, Wardha</b>	<b>March 2018</b>	<b>No: 2018/09/4602 Dt: 05/09/2018</b>	<b>Maharashtra Medical Council, Mumbai</b>

### **Details of the previous appointments/ experience**

Designation	Department	Name of Institution	From DD/MM/YY	To DD/MM/YY	Total Experience in years & months
<b>Junior Resident - 1</b>	<b>Radio – Diagnosis</b>	<b>A.J. Institute of Medical Sciences &amp; Research Centre, Mangalore</b>	<b>10/05/2019</b>	<b>Till Date</b>	