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**THE TAMIL NADU DR.M.G.R.MEDICAL UNIVERSITY, CHENNAI**

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**RESULT OF THE Ph.D. SCREENING COMMITTEE – JANUARY 2017 SESSION**

| Sl. No. | NAME OF THE CANDIDATE  | SPECIALITY | REMARKS OF THE SCREENING COMMITTEE  | RESULT                       |
|---------|------------------------|------------|---|------------------------------|
| 1.      | Dr.S.Vijaya            | Medical    | <p>The Proposal needs to be re-written completely taking into account.</p> <p>a) Sample size / Inclusion Criteria / Methodology.<br/> b) 2 arms<br/> - Control Group<br/> - Interventional Group<br/> c) Type of intervention planned and clear method of evaluation of benefit.<br/> d) Addition of Adiponectin estimation.</p> <p>Not Accepted in its current format.</p>   | Not Accepted                 |
| 2.      | Dr.Sudha Rathna Prabhu | Medical    | <p>1. The study Population needs to be redefined for generalisability of the result, the Population should be</p> <p>i. Community derived.<br/> ii. In various levels of settings (PHC, District Hospitals and Medical Colleges)<br/> iii. From different geographical background (where iodine deficiency prevalence might differ).<br/> iv. Should consist of pregnant woman from diverse socio economic background (attending Private / Public Hospitals).<br/> v. Various levels of routine thyroid screen testing.</p> <p>2. The validity of 'spot estimation of Urinary iodine levels' especially in a modified physiological state of pregnancy – as the gold standard for iodine estimation – needs to be shown in pilot testing before the main trial.</p> | Accepted With Recommendation |

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| 3.      | Dr.S.Malini           | Medical    | <p>a) The study design needs to be a two arm study:<br/>                     - Arm 1 – Depressive disorder with diabetes mellitus<br/>                     - Arm 2 – Depressive disorder without diabetes mellitus.<br/>                     In both groups, the patient should have :<br/>                     No/mild Cognitive impairment.</p> <p>b) She should recruit only new patients with depressive disorder.</p> <p>c) Age criteria should be 50 years and above.</p> <p>d) For detection of diabetes mellitus: HBA1C and GTT needs to be monitored every 6 months.</p> <p>e) She should also record all the medications that the patients are receiving and should assess the effect of theses on cognitive changes.</p> <p>Not Accepted in its current format.</p> | Not Accepted                 |
| 4.      | Dr.K.N.Chella Sindhu  | Medical    | It is recommended to follow up the children up to the first diarrhoeal episode or a maximum of two years and analyse the diarrhoeal stool for various serotypes of Rotavirus   | Accepted With Recommendation |
| 5.      | Dr.I.Nithyamala       | Siddha     | <ol style="list-style-type: none"> <li>1. Animal dose should be fixed after completion of toxicity study.</li> <li>2. For each pharmacological activity, the standard drug (Allopathic drug) should be mentioned.</li> </ol>   | Accepted                     |
| 6.      | Dr.K.Rajamaheswari    | Siddha     | <p>The study proposal is Not Accepted.</p> <ol style="list-style-type: none"> <li>1. Title of the proposed research is <b>NOT</b> clear. It has been mentioned in the title that '<b>Chemo-protective</b>' role of Sangu parpam against carcinoma stomach will be studied. But, in presentation, she mentioned that '<b>Chemo-preventive</b>' role of the study formulation will be analyzed.</li> <li>2. The candidate was <b>NOT</b> able to provide clear description of the methodology.</li> </ol>  | Not Accepted                 |

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|         |                       |                | <p>a) <b>NOT</b> sure about method of stratification of subgroups of the study.</p> <p>b) <b>NO</b> clarity of dose and route of administration of the carcinogen.</p> <p>c) <b>NO</b> clarity on duration of administration of the study formulation.</p> <p>d) The candidate lacks insight as to how to devise observations of the study – how the anti-carcinogenic effect of the study formulation will be studied? - Whether by histopathology alone and/or by analysis of gastric tissue/serum markers?</p> <p>3. Since both objectives and methodology are lacking clarity, the research proposal is '<b><u>NOT ACCEPTED</u></b>'.</p> |                              |
| 7.      | Mr.Amrit Koirala      | Basic Sciences | <p>1. MOU/Relevant documents between CMC, Vellore and the hospital for study Population.</p> <p>2. Title should be limited to “Hospital in Assam”.</p>  | Accepted With Recommendation |
| 8.      | Mr.Narendra Kumar     | Basic Sciences | <ul style="list-style-type: none"> <li>• To change the name of the topic to suit the aims of the study.</li> <li>• To increase the sample size.</li> <li>• To change the protocol for the post CI study years.</li> <li>• To include the Cortical EP.</li> <li>• To have inclusions &amp; exclusions criteria.</li> <li>• To expand aims of study.</li> <li>• To expand the purpose of outcome response testings esp. speech perception.</li> <li>• To work (Expand) on interior to be used for spectral &amp; temporal codings.</li> <li>• To show studies or international studies.</li> </ul>  | Accepted With Recommendation |
| 9.      | Mr.S.Murugan          | Pharmacy       | Work to include identification of the products of forced degradation  | Accepted With Recommendation |

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| 10.     | Mr.K.Arjunan          | Pharmacy   | Candidate to clarify on the following:<br>a) Expected accumulation of Ag in the lungs.<br>b) Excretion process of silver (Justify with references)   | Accepted With Recommendation |
| 11.     | Mrs.B.Kumudhaveni     | Pharmacy   | Needs to submit Animal Ethical Committee certificate.  | Accepted                     |
| 12.     | Mr.Ravi Kumar Rajan   | Pharmacy   |  | Accepted                     |
| 13.     | Ms.Deepika Patel      | Pharmacy   |  | Absent                       |
| 14.     | Ms.P.N.Viji           | Nursing    |  | Absent                       |
| 15.     | Ms.G.Angel Rajakumari | Nursing    |  | Absent                       |
| 16.     | Ms.Beutlin            | Nursing    | <ol style="list-style-type: none"> <li>1. Spearmint tea therapy does not come under Nursing interventions.</li> <li>2. Screening the PCOS among high school students (15 yrs – 17 yrs) is not feasible as diagnosis is to be confirmed only by USG finding and not by clinical manifestations.</li> <li>3. It is unethical to keep the PCOS students only on spearmint tea therapy, restricting them to undergo the regular / evidence based treatment.</li> <li>4. Follow up / intervention clarity is not provided.</li> </ol> <p><b><u>Recommendation :</u></b><br/>It will be better to conduct the study among college students, who are already diagnosed and under treatment for PCOS, using life-style modification or other modalities excluding spearmint tea therapy.</p> | Not Accepted                 |
| 17.     | Ms.S.K.Kavitha        | Nursing    | <ul style="list-style-type: none"> <li>• No clarity on the research title.</li> <li>• Title says that patients with lower respiratory tract infection (LRTI) will be studied.</li> <li>• In the presentation, various respiratory diseases (asthma etc.) are categorised under LRTI.</li> <li>• LRTI &amp; other lower respiratory diseases cannot be considered together!</li> <li>• There is no role of incentive spirometry in LRTI and balloon therapy.</li> </ul>   | Not Accepted                 |

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| 18.            | Ms.Anbuselvi Chellappan      | Nursing           | <ul style="list-style-type: none"><li>• The feasibility of the study and follow up of all the interventions will be a major challenge.</li><li>• The possibility of all Antenatal mothers coming to the Government Hospital having a Android / Smart Phone is questionable.</li><li>• Ethically not educating a group of mothers with required information may not be acceptable.</li><li>• The strength of interventions and its impact was not clear.</li><li>• The same type of study if it is community based where follow up by the researcher or trained assistants is undertaken, then the same might seem feasible.</li></ul> | Not Accepted  |

**ACCEPTED** : Candidates are instructed to submit the joining report through the Guide within 10 working days from the date of publication of result along with the necessary fees.

**ACCEPTED WITH RECOMMENDATION:** Candidates are instructed to submit the Compliance Report through the Guide within 30 working days from the date of publication of results.

**NOT ACCEPTED** : Candidates are instructed to submit proposals (Four copies) through the Guide within three months from the date of publication of this result.