RESULT OF THE Ph.D. STUDENTS - SCREENING COMMITTEE – JANUARY 2026 SESSION

Sl.No.	NAMEOFTHE CANDIDATE	FACULTY	REMARKS OF THE SCREENINGCOMMITTEE	RESULT
1.	Dr. Neetu Prince	Medical	--	Accepted
2.	Dr. Sakthi Paargavi A.	Siddha	1. Include Phase II in Ph.D. title also. 2. Thalisathi and Ponmusuttai Botanical name to be corrected. Attach Pharmacognist Identification Certificate. 3. Better to do a case series with SOC as Comparator. 4. WHO-ICD-11 Terminologies should be included. 5. Asthma related Target protein to be included in Docking. 6. Hypersensitising to siddha should be included.	Accepted with Recommendation
3.	Dr. Sankar Devi S.	Siddha	A comprehensive tool for assessing including all Noinaadal Parameters, Standardized in FGD involving NIS/CCRS/ GSMC Chennai – Noinaadal measures to be presented as a tool in protocol.	Accepted with Recommendation
4.	Dr. Sivasankari D.	Siddha	--	Absent
5.	Dr. Srinivasan V.	Siddha	--	Accepted
6.	Dr. Abarna B.	Siddha	1. Term Vehicle to be changed as to drug. 2. ICD -11 - WHO Terminology should be included whenever appropriate.	Accepted with Recommendation
7.	Dr. Anitha V.	Siddha	Get the Candidate trained herself in Clinical Psychology tools in any of the Centres before Research methodology exam.	Accepted with Recommendation
8.	Dr. Preyadarsheni K.	Siddha	1.Better do the study as Crossover Study design to get the Real benefit of the Adjunct Drug. 2.Institute can write to National Ageing Centre for Compliance towards recruitment	Accepted with Recommendation

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9.	Dr. Rajeswari K.	Siddha	1. Better to do the study as Crossover Study design to get the Real benefit of the Adjunct. 2. Utilize GMP Pharmacy ACCRS for the Tablet making.	Accepted with Recommendation
10.	Ms. Mumtaj Begum M.	Pharmacy	1. Polymer Combination for the nanofiber Formulation to be specified clearly with evidence. 2. Need to describe the release profile of active constituent / extract 3. Jusification for Sustained, targeted drug delivery system and for enhancing therapeutic efficacy to be provided. 4. Plant names may be included in the title.	Accepted with Recommendation
11.	Ms. Indumathi M.L.	Pharmacy	--	Accepted
12.	Ms. Swathi S.	Pharmacy	1. Evaluation methods for Green Synthesis to be included. 2. Total Antioxidant capacity evaluation before assessing Liver fibrosis to be included.	Accepted with Recommendation
13.	Ms. Silpa Nandimandalam	Pharmacy	1. The proposal submitted is a routine study and there is no novelty.	Not Accepted
14.	Ms. Pushpamala M.	Pharmacy	1. Suggested to include drug name, ligand and drug delivery system in title (Targeted) as SLN formulation is already published. 2. Ligand Optimisation and assessment method to be included.	Accepted with Recommendation
15.	Ms. Parimala M.J.	Pharmacy	1. Rationale for pharmacological study as mentioned in objective 2 to be included. 2. One more species of Alstonia should be included in the study. 3. DNA Barcoding may be included.	Accepted with Recommendation
16	Ms. Seraphine Joyce J.	Pharmacy	1. The algae mentioned in the proposal have already been reported in earlier studies, which limits the novelty of proposed research. Hence the proposal to be modified with other marine products.	Accepted with Recommendation

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17.	Ms. Suganya Sri K.	Pharmacy	1. The proposal submitted is a routine study and there is no novelty.	Not Accepted
18.	Mr. Pradeep Rajkumar L.A.	Pharmacy	1. Validated Certificate from recognized authority / concerned authority for the CMCNIBP should be submitted before proceeding.	Accepted with Recommendation
19.	Mr. Venkatraman S.	Pharmacy	1. The Proposal does not include a detailed in – vivo studies and there is no AI driven discovery.	Not Accepted
20.	Ms. Shanmugapriya S.	Pharmacy	--	Absent
21.	Ms. Kamatchi A.	Pharmacy	1. Nanoformulation is mentioned in the title but the details of the same to be included in the methodology.	Accepted with Recommendation
22.	Ms. Sandhya R.	Pharmacy	--	Absent
23.	Ms. Veeranan M.	Pharmacy	1. There is no novelty in the proposed study	Not Accepted
24.	Ms. Mini Joshy T.	Nursing	Incorporate the following, 1. Change experimental group to interventional /study group. 2. Age criteria – 25 to 45 years. 3. Statistical analysis to be included. 4. Phase 2 – the number of days to be modified.	Accepted with Recommendation
25.	Ms. Bershlin Tafny I.A.	Nursing	1. Sample selection – matching between interventional group & control group. 2. Methodology and Intervention were not clearly presented, especially post – test data collection. 3. Sample education is planned both at hospital & home setup (needs clarity).	Accepted with Recommendation

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26.	Ms. Head Flower P.	Nursing	1. No clarity in presentation, Study is very preliminary. 2. Add intervention (let it be clear). 3. Selection of Sample is not clear. 4. No novel ideas incorporated in the study.	Not Accepted
27.	Ms. Sasikala R.	Nursing	1. Experimental group can be renamed as study group. 2. Samples for control and Study group can be selected from two branches of the hospital (CMC – Old Campus & CMC – Ranipet)	Accepted
28.	Ms. Joylin Sujina N.	Nursing	1. Operational definition on Imperiled individual – not clear, hence the presentation was vague. 2. Intension of the Candidate is good, but need to work more on the sample selection & Project Outcome. 3. No Novelty found in the Study.	Not Accepted
29.	Ms. Karthika N.	Nursing	1. Candidate was not clear in presenting the Content / Data collection Procedure. 2. No Novelty found in the Study. 3. Intervention needs practical possibility(Creative writing). 4. Outcome of study was not presented well / not able to defend. 5. Study & Control group in the same setting.	Not Accepted
30.	Ms. Prashi Antony	Nursing	--	Absent
31.	Ms. Suji D.	Nursing	1. To remove Randomised Control Trial from Problem statement. 2. Methodology not clear & not well presented. 3. Permission from settings for Hydrotherapy (with the risk involved) to be obtained. 4. No novelty found in the Study.	Accepted with recommendation

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32.	Ms. Jeyaslin Anisha J.	Nursing	1. Do not use the word experimental group – Change to Study group. 2. No novelty in the intervention Package (Stress, anxiety & resilence) – with Psychoeducation not adequate. 3. Course on Pyschoeducation to be done from a proper authorized institution needed for counselling.	Accepted with Recommendation
33.	Ms. Bhoshia D.	Nursing	1. Intervention not appropriate. 2. No novelty in the Study. 3. Not to the level of Ph.D. Study.	Not Accepted
34.	Ms. Jasmin Sheeba J.	Nursing	1. Study Presentation topic not innovative. 2. Feasibility of Study 3. Include newer intervention.	Not Accepted
35.	Ms. Rohini M.	Nursing	1. Topic chosen was not to the level of Ph.D. 2. Incorporate new Intervention which will bring solace to Patients. 3. No novelty found in Study.	Not Accepted
36.	Ms. Brinda N.V.	Nursing	1. Intervention package – lesson plan to be ready. 2. Data collection process to be streamlined (planned for 3 months) to be reduced to one month package. 3. Certificate for counseling / Yoga/ Diet Opinion to be sought.	Accepted with Recommendation
37.	Mr. Poovarasan M.	Nursing	1. No Novelty in the Study – not to the level of Ph.D. study .	Not Accepted

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38.	Ms. Renuka S.	Nursing	1. Research design to be changed to Quasi Experimental. 2. Data collection – include from the time of diagnosis – delivery to Postpartum. 3. Outcome – maternal & fetal to be modified (include relevant parameters) 4. With App – content lesson plan to be prepared. 5. Inclusion criteria – only first time GDM mothers to be included. 6. Exclusion criteria – co-morbid high risk factors.	Accepted with Recommendation
39.	Ms. Sheeba Jeni H.	Nursing	1. Settings/ sample selection – not clear. 2. B-care components – not well defined – not able to explain. 3. Counseling – Certification is needed. 4. Diet plan – dietician opinion. 5. Need a clear lesson plan. 6. Sample (clients) intervention to start pre-op (exercises / staging not clear)	Accepted with Recommendation
40.	Ms. Brindha M.	Nursing	1. Settings: Increase the number of settings (5-6 Orphanage) 2. Intervention – Frequency of Intervention to be made twice a week. 3. Intervention package details to be included.	Accepted with Recommendation
41.	Ms. Sathya P.	Nursing	1. No Novelty found in the study – mental health through App development not appropriate. 2. Not to the level of Ph.D. Study. 3. Objectives not framed appropriatively.	Not Accepted
42	Ms. Lavanya P.	Nursing	1. No Novelty in the study, inspite of repeated attempt only “Empowerment program” word added but intervention inappropriate.	Not Accepted
43	Ms. Shanmugapriya S.	Nursing	1. No Novelty in the Study for Ph.D. level. 2. No changes incorporated (III attempt) 3. Scope of Intervention is less.	Not Accepted

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44.	Ms. Punitha P.	Nursing	1. No Novelty for a Ph.D. study . 2. No changes made from previous study.	Not Accepted
45.	Ms. A. Sabitha	Nursing	1. The study is not to the level of Ph.D. study. 2. Study objectives not well framed. 3. Correction given not incorporated.	Not Accepted
46.	Ms. R. Jamunarani	Nursing	--	Absent
47.	Ms. Margret Nisha C.	Nursing	1. Not to the level of Ph.D. study – need to rework. 2. Critical competencies should be listed. 3. Scenario based competencies to be developed. 4. Setting should be similar (medical ICU). 5. Quasi experimental design suggested. 6. Feasibility to conduct study at Clinical area.	Not Accepted
48.	Ms. G. Devipriya	Nursing	1. Candidate was unable to defend or present the study. 2. Well bundles need to the level of Ph.D. study. 3. Objectives are not framed correctly. 4. No clarity on study outcome.	Not Accepted
49	Ms. Shanmuga Priya M.	Physiotherapy	1. To undergo a Course work in Yoga. 2. To make Pulmonary function as a Primary Outcome & Psychological variable as Secondary Outcome. 3. To have a Clinical Psychologist as a member of Internal Review Board.	Accepted with Recommendation
50	Ms. Janane S.S.	Physiotherapy	--	Accepted
51.	Ms. Elamathi R.	Physiotherapy	--	Accepted

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52.	Ms. Jyoti Subodh Sharma	Biomedical Sciences	1. Genotypes of Dengue that will be used for listing to be mentioned.	Accepted
53	Mr. Karthikeyan J.	Biomedical Sciences	--	Accepted
54	Mr. Syed Abdul Hakeem	Biomedical Sciences	Dengue Quantitative analysis may be done & incorporated in the Study.	Accepted
55	Mr. Solomon D. Cruz	Biomedical Sciences	1. Testing Methodology should be clearly defined & uniform. 2. Interval of Outcome analysis should be defined for all the Objectives 3. Study Proforma & Associated risk factor proforma should be attached with the proposal. 4. Gantt chart should be provided.	Accepted with Recommendation
56	Mr. Praveen T.	Biomedical Sciences	1. Define the study period of the proposal. 2. Sample size, location of collection of Livestock & Environmental Sources not defined. 3. Inclusion & Exclusion Criteria need to be defined seperately. 4. Methodology for all the Objectives need to be elaborated. 5. Gantt chart should be provided.	Accepted with Recommendation
57	Mr. Subbu Lakshmi R.	Biomedical Sciences	1. Objectives needs to be specific & methodology is not substantiating the objectives. Sample size calculation is wrong. For the other Objectives samplesize not mentioned. Study group not clearly defined.	Not Accepted
58.	Ms. Vaneesa Ravel	Biomedical Sciences	1. Clarify randomization & Participant allocation to both arms. 2. Recall bias is a limitation & it must be acknowledged. Mention steps to address this bias in the methodology. 3. Outcome assessment – How will you ensure blinding? Period of 4-8 weeks of intervention is too broad a range. How will you ensure that your intervention led to reduced glucose levels and not Physiological changes (i.e. delivery) 4. Budgetary considerations- for app development 5. Consent form to include consent for audio recording.	Accepted with Recommendation

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59.	Mr. Akash B.	Biomedical Sciences	1. Validation of Phase I need to be clearly delineated. Who's the Collaborator? Whom will you do Pre testing on? What are the safety metrics? Once it is Feasible & safe, would recommend Phase II. 2. Phase II – What is the randomization Plan? How will you ensure matching of stroke patients? 3. Who will assess outcomes in both arms? How will you ensure blinding? 4. Proposal mentions tertiary care hospitals, but presentation included home settings. Clarify where, how & when the recruitment will happen and where, how & when the intervention will be delivered. 5. Why age < 45 years is excluded? 6. Clearly explain how the intervention will be delivered in home settings. 7. Proposal mentions Primary & Secondary Objective, but both are same. 8. It is not clear what is Phase III "long term follow up of Outcomes" needs to be clarified.	Accepted with Recommendation
60.	Ms. Suchithra Lakshmi G.	Biomedical Sciences	1. As the study is among prison inmates, Protection of rights of vulnerable group need to be explicitly stated and followed. 2. WHO STEPS Questionnaire is intended for general population, it needs to be modified to suit incarcerated population (as many questions might not be applicable in prison context & need to be modified) 3. Interview guide for qualitative phases need to be submitted. 4. Not clear why DASS is being used, as it has no bearing on study objectives. 5. Kindly clarify if the study population is those with established diagnosis of DM & HTN or are you going to screen everyone for DM / HTN? Kindly ensure steps to validate medical diagnosis (perhaps by the prison medical officer.) 6. Would recommend clear delineation of phases Phase I → Phase II (Medical record review, Qualitative interviews) And specify variables, measures, sampling criteria for each phase. For e.g., What is "Treatment coverage"? How will you capture it?	Accepted with Recommendation

61.	Mr. Narayanaswamy K.	Biomedical Sciences	The entire Study proposal needs to be revisited in terms of Title, Methodology, Objectives & Outcome assessment. As per the presentation, AI -enabled phone based Screening is going to be developed based on data source from participants in Jawadhi hills & then tested again among same population. Proposal needs to clarify that model development and testing will be among which population. Further, the study involves Secondary Outcomes (change in awareness, referral completion etc.,) but these are not detailed in the proposal. We would strongly recommend having a strong focus & rigorously plan for AI – based model development & model testing first. Subsequently, you can plan for the next phase where you check other outcomes. Currently, the app does not involve any 'awareness' variables/ content. Hence, this proposal needs major modifications.	Accepted with Recommendation (Major modification)
62.	Ms. Nivetha R.S.	Biomedical Sciences	1. Question on 'impact of flood' need to be very specific. Currently, it is vague which will elicit responses that are vague. Would recommend specific items under 'impact' 2. Phase III – Effectiveness is not feasible under the current scope as it requires delivery of intervention and examine 'effectiveness' (which would require another flood). Would recommend Phase I, Phase II, then delivery the intervention to assessing improvement in awareness etc. after 6 months 3. Clarify what is the meaning of 'cases' in Acute Health outcomes & healthcare access. 4. 'Purposive' sampling is typically used for qualitative designs. Confirm if it's multi-stage Cluster sampling for this current proposal. 'multi – stage random sampling' also can be thought of.	Accepted with Recommendation

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63.	Mr. Mohammed Kufail Taquiuddin M.	Biomedical Sciences	1. 'Health economic evaluation' aspect of the study is not clearly explained. Operationalization of cost of AI, Cost of Standard care, Effect of AI& Effect of standard care is not sufficient & clear. Title to be revisited. 2. No details are available on how the last secondary objective will be met (Operational feasibility in PHC settings)	Accepted with Recommendation
64.	Ms. Dharani L.	Biomedical Sciences	1. Cost of drone development & Collaborator involved need to be included. 2. Clearly delineate the phases with variables & methods of assessment.	Accepted with Recommendation
65.	Ms.Vijayasankari A.	Biomedical Sciences	1. Control group needs to be an active Comparator group. PI needs to plan some engagement with teachers in Control arm. 2. Multiple confounding variables influence anxiety etc. over 8 weeks. How are you addressing these? 3. The 'app' is not 'Predicting' or 'Preventing'. Title needs to be revisited. 4. Clarify how will you employ multi-stage sampling. 5. Usability, Acceptability, impact & barriers etc. (the last 3 secondary Objectives) – no information is available on how to achieve these objectives. 6. Clearly explain what the app will contain, what elements are there in the app & the flow diagram of study need to be detailed.	Accepted with Recommendation

66.	Ms. Deepak M.	Biomedical Sciences	1. Co-guide from Participating hospitals need to be on the research team to provide research oversight, as this involves invasive procedures for Children & Adults presenting with fever. 2. Assent/consent procedures need to be clarified. 3. Clarify recruitment process, Place where gene sequencing will be done, etc. 4. On what basis is the sample size calculated? P = 72% - What is this percentage? On what basis is the age wise categorization done? 5. Confirm if your study procedure will interfere with blood collection &treatment planning of patients. 6. As per presentation, two pokes (blood collection twice) are presented. Check if this can be reduced to one poke (one invasive test). 7. Correct the term – 'Mixed' methods design. Edit as 'Multi – method' design. 8. Last secondary objective – "Compare and Validate AI model with standard technique" is not explained at all in the proposal. Who is the population for this comparison & Validation? 9. Where is the IRB approval going to be obtained from?	Accepted with Recommendation

REMARKS:

ACCEPTED : Candidates are instructed to submit the joining report along with Provisional Registration fees through the Guide within two weeks from the date of publication of result.

ACCEPTED WITH RECOMMENDATIONS : Candidates are instructed to submit the Compliance Report through the Guide (Compulsory as per the format enclosed) within two weeks from the date of publication of results. Further, the date and Session of the Provisional Registration will be fixed after the approval of your compliance report by the members of the Screening Committee.

NOT ACCEPTED : Candidates are instructed to submit proposals (Four copies) through the Guide for the next session.

Encl:

Compliance Format

Dr. K. NARAYANASAMY,
VICE-CHANCELLOR

/True Copy/

Sd/-
ACADEMIC OFFICER

Format for compliance to remarks of PhD Screening committee,

The TamilNadu Dr. MGR Medical University

Title of the Ph.D

Name of the candidate

Faculty

Compliance to remarks(PhD Screening Committee, dd/mm/yyyy)

#	Remarks	PhD Scholar's response	Page number(s)and Line number (s)
1			
2			
3			
4			
5			