

RESULT OF THE Ph.D. STUDENTS - SCREENING COMMITTEE – JANUARY 2025 SESSION

Sl. No.	NAME OF THE CANDIDATE	FACULTY	REMARKS OF THE SCREENING COMMITTEE	RESULT
1.	Dr. Tejaswi Prasad P.V.	Medical	1. The study, study population expected outcome are satisfactory. The Committee recommended the following: a. Inclusion criteria refinements are needed in the size of the graft and the donor tissue screening to confirm the healthy cornea before grafting. b. With reference to host, before taking for TPK graft, latest molecular diagnostic methods for identifying / rule out the causative organism should be employed. c. Surgical techniques and surgical procedure – The inexperienced surgeon performing graft surgery should be excluded. d. Post operative care & Prophylactic treatment – The latest microbiology investigation, like PCR, metagenomic and CRISPE – CAS methodology to be employed to pick up the early stage of graft infection. e. Needs better definition and grading of graft infection for early identification and active intervention. Overall the committee feels the aim of the study, study design expected outcome are good. The committee strongly suggest to follow above recommendation / suggestion to incorporate and revise the proposal. They will approve after reviewing the revised proposal.	Accepted with Recommendation

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2.	Dr. Lalitha K.	Siddha	1. In Lab tests for inclusion Rheumatoid factor (RA) should be deleted. 2. If the safety study determined is lesser than the literature dose, safety study dose will be used for human dose calculation. 3. HAQ-D1- should be validated, Indianised and to be translated in Regional language after FGD.	Accepted with Recommendation
3.	Ms. Surya M.	Pharmacy	---	Accepted
4.	Ms. Gladys Gloria Grant C.J.	Pharmacy	---	Accepted
5.	Ms. Sankari E.	Pharmacy	---	Accepted
6.	Mr. Kavinkumar M.C.	Pharmacy	<u>Title change suggested:</u> “Phytochemical investigation and characterization of Pinus Roxburghii needles and evaluation of its neuroprotective effect in Alzheimer's rat model”.	Accepted with Recommendation
7.	Ms. Viji M.	Pharmacy	---	Accepted

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8.	Ms. Parvathi S.	Pharmacy	---	Accepted
9.	Ms. Umaparvathy S.	Pharmacy	---	Accepted
10.	Ms. Jayanthi B.	Pharmacy	---	Accepted
11.	Mr. Sattanathan K.	Pharmacy	---	Accepted
12.	Ms. Revathi L.	Nursing	1. Need clarity of intervention. Suggest “Peer driven psychological support” as intervention. Details to be given. 2. The intervention, the measures and the outcomes should match. 3. Objectives & Hypothesis have to be modified. 4. Sample size calculation should be 2 mean comparison. 5. At what point in time pre and post test are going to be done?? Explain. 6. Remove digital tool (App). 7. Include validity and reliability indices for tools. 8. Data analysis – Should clearly explain the statistical tests for each objectives.	Accepted with Recommendation

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13.	Ms. Sasikala G.	Nursing	1. Suggest changing to experimental design. 2. So the Objectives and Hypothesis will change. 3. The App based Intervention should be modified to include all aspects more than knowledge. 4. The Intervention should include aspects that you want to measure as outcome (match). 5. Sample size calculation should be for experimental design (Random allocation should be included) 6. Tool – Validation and Reliability measures needed. 7. How do you measure user feedback and satisfaction? 8. The development of APP need to be explained.	Accepted with Recommendation
14.	Ms. Dhanalakshmi R.	Nursing	1. Suggest to modify Intervention as 'Father as perinatal companion' and restrict to emotional support. 2. Modify objectives and hypothesis accordingly. 3. Reliability and validity indices for tools have to be included. 4. Sample size calculation to modify for experimental design. (Check previous study). 5. If mixed methods then Qualitative part has to be included or keep it as Quantitative only.	Accepted with Recommendation
15.	Ms. Janaki M.	Nursing	1. The Intervention is not a digital health tool Nurse led health education program. 2. Not able to explain intervention. 3. Sample size calculation – Formula should be corrected. 4. Objectives are wrong. Not able to defend proposal effectively / adequately. 5. Need complete revision of proposal.	Not Accepted

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16.	Ms. Girija S.	Nursing	Suggest to keep as experimental design and not mixed methods:- 1. Modify Statement, Objectives & Hypothesis. 2. Add control group. 3. Intervention – Beetroot juice (To ensure intake for rigor of study). 4. Sample Size calculation – Revise the formula 5. Clinical outcomes to be clarified 6. Who will pay for Lipid Profile. Permission to take blood – needed. 7. Remove self-care activity scale. 8. Ensure Intervention is implemented in both groups.	Accepted with Recommendation
17.	Ms. Beulah P.	Nursing	1. Will parents accept the diagnosis of problematic child? 2. Sampling & Sample size & Randomization need modification. 3. Suggest changing population to those who already are diagnosed (or) 4. Suggest modify to including teacher based Intervention. Good concept for study. But need major modification of proposal considering practicals.	Not Accepted
18.	Ms. Priyadharsini B.	Nursing	1. Hypothesis – Need revision. 2. Sample size calculation need to be modified with appropriate formula. 3. Sampling and randomization should be clarified. 4. Include a matching control. 5. Random allocation method should be included. 6. Analysis – Specify the statistical analysis methods for specific objectives.	Accepted with Recommendation

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19.	Ms. Rachel Stephen S.	Nursing	1. Hypothesis to be corrected. 2. To correct as experimental study with randomization of Centre & Block randomization of children. 3. Need training & certification for ASD & ACT before study.	Accepted with Recommendation
20.	Ms. Beryl Pandian Y.	Nursing	1. Edit and correct Hypothesis. 2. Suggest converting it to experimental study by including randomization / random allocation. 3. Include 6 semester.	Accepted with Recommendation
21.	Ms. Darbi D.R.	Nursing	- Suggestions 1. To include control group to make it experimental design. 2. To remove Objectives 2,3 & 4. 3. Revise Hypothesis. 4. Duration of each therapy can be 4 months.	Accepted with Recommendation
22.	Ms. Birgin R.	Nursing	- Intervention 1. Include regular education for all patients (Control & exp.). 2. The telecare can be the intervention. 3. Include random allocation. 4. App development – Budget to be checked.	Accepted with Recommendation

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23.	Ms.Shingare Satyabhama Bansi (Sr. Elsia)	Nursing	1. Remove the 4th objective. 2. Hypothesis to be modified. 3. Plan for saliva sample collection – 10 a.m. to 12 not good time. 4. Qualitative : To correct as Descriptive Qualitative minimum 20 samples. Data Collection method to be clarified. Include plan for qualitative data analysis content analysis. Plan to merge Quantitative and Qualitative findings / data in analysis.	Accepted with Recommendation
24.	Ms. Arul Sili Ninchal A.	Nursing	1. It will be Quasi Experimental study – Suggest trying to include random allocation to make it true experimental study. 2. Modify intervention as - “Behavioural cues based”. 3. Intervention can be carried out by the mother. 4. Clarify systematic random sampling. 5. Analysis plan to be included.	Accepted with Recommendation
25.	Ms.Marytheresa M.	Nursing	1. To be edited as Qualitative descriptive & focus on antenatal mothers' experiences of PIH 2. Objectives & analyses to be mentioned for mixed methods. 3. Remove instrument development & healthcare providers' perspectives; clarify maternal & fetal outcomes. 4. Modify title, Statement, aims & Hypothesis to reflect the change in proposal.	Accepted with Recommendation
26.	Ms. Angel Rose J.S.	Nursing	Submitted IRB approval from Ashwin Hospital and has permissions from different hospital (NICUS) for the study. Submission accepted.	Accepted

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27.	Ms. Shanmugapriya S.	Nursing	1. Population is not clear – Need clarity. 2. Intervention is complex – Suggest focussing is to Psychological first aid - One Intervention and One Control Group. 3. Objectives, Hypothesis and methods have to be modified. 4. Setting permission to be obtained. 5. Major modification of the proposal is needed – Can present next time. 6. Not able to defend – (eg) Methodology – Research design. 7. To include validity and reliability of the tools.	Not Accepted
28.	Ms. Rohini M.	Nursing	1. Setting permission to be obtained. 2. Not able to defend methodology. 3. Objectives and Hypothesis to be modified. 4. Major modification of the proposal is needed. 5. Can present next time. 6. To include validity and reliability of the tools.	Not Accepted
29.	Ms. Lavanya P.	Nursing	1. Setting permission to be obtained. 2. To modify the proposal. Suggestions – Effectiveness of Informal parent buddy support group meetings on Stress, Anxiety and coping among mothers with Preterm babies: Not to include AKT stimulation. 3. To modify the Objectives, hypothesis & sampling technique. 4. Use the correct formula for sample size calculation. 5. Randomization to be clarified. 6. To include validity and reliability of the tools.	Not Accepted

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30.	Ms. Sathya P.	Nursing	1. Phenomena of interest, Interventions and outcome variables need to be related to each other for an effective study. 2. Tools are not relevant. 3. The whole proposal has to be modified. 4. To include validity and reliability of the tools.	Not Accepted
31.	Ms. Shamily S.	Nursing	1. Permission to be obtained from the setting. 2. To have 2 groups – one group with standard care and another group with behavioural contract. 3. Objectives & Hypothesis to be changed. 4. To limit the age group from 25 to 55 years. 5. To accept with Recommendation. 6. To include validity and reliability of the tools.	Accepted with Recommendation
32.	Ms. Sabitha A.	Nursing	1. Setting permission has to be obtained. 2. Change the second objective. 3. Nursing care bundle – 4 Interventions are planned, But to reduce to one intervention. 4. It is not safe to administer ginger to adolescent students. 5. To continue the intervention for 6 months to see the effectiveness. 6. QOL to be added to the statement & also in the objectives. 7. Need to include more schools – multistage sampling – to use different types of sampling. 8. Assent & Consent to be included. 9. Revise the Proposal. 10. Not able to defend methodology. 11. Concerns about feasibility of the study as the study population are adolescents. Now a days obtaining permission from schools is difficult. 12. Include Validity and reliability of the tools.	Not Accepted

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33.	Ms. Thenmozhi P.	Nursing	1. Explain the mixed methods aspect clearly – Qualitative part of the methods should be clearly written. 2. Suggestions – to include all the children to avoid discriminating the obese children. 3. To modify the first objective. 4. Accepted with Recommendations. 5. Include validity and reliability of the tools.	Accepted with Recommendation
34.	Ms. Kanikkai Parvin Mary N.	Nursing	1. 2nd Objective to modify (to remove control group) 2. To obtain permission from the study setting. 3. To remove age in Inclusion Criteria. 4. Explain clearly Randomization. 5. Intervention follow up has to be written clearly. 6. To include validity and reliability of the tools.	Accepted with Recommendation
35.	Ms. Sasikala B.	Nursing	Suggestions – To Include a diary by wife to check whether intervention is carried out everyday.	Accepted
36.	Ms. Anbumathi G.	Nursing	1. How are you going to measure the feasibility of the study. Suggestions – to add or delete the objective. Analysis for feasibility to be written clearly and also for Qualitative and Quantitative data. 2. Study design – Descriptive Qualitative design. Embedded design for mixed methods. 3. To remove care providers in the title & in the content. 4. Sample size for Qualitative study to be changed. 5. Include Validity & reliability of the tools.	Accepted with Recommendation

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37.	Ms. Hema Malini S.	Nursing	1. Suggest to include more Apollo Hospitals which has NICU and then randomly select the samples. 2. Knowledge questionnaire and Check list scoring to be justified . Include New born observation check list. 3. Proposal is accepted with recommendation. 4. To include validity and reliability of the tools.	Accepted with Recommendation
38.	Ms. Samuel Prabakar P.	Nursing	1. Suggestions for Intervention group – To have it as “Self care Intervention Package” - Inhaler, exercise and 6 mts walking. To delete empowerment & education. 2. To teach empowerment & education of COPD to control group only. 3. To include patients on inhaler. 4. Include validity and reliability of the tools.	Accepted with Recommendation
39.	Ms. Ahila S.	Nursing	1. To change CGI– 1, LEE and family EE scale and include stress scale for patients and families. 2. To include validity and reliability of the tools.	Accepted with Recommendation
40.	Ms. Ponnammal P.	Nursing	1. 1st Objective to remove. 2. - Not new, not innovative topic. - Intervention and dependent variables are not clear. - Not able to defend proposal effectively. - Need much support in developing a proposal.	Not Accepted

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41.	Ms. J.V. Jeevitha	Nursing	1. Suggestion – Not to have cross over design because it will have lingering effect. Instead can have three groups or Solomon four - group design. 2. Sample size to be calculated again. 3. Sampling should be Random sampling because of RCT. 4. Statistical analysis – to include more relevant tests. 5. Objectives & Hypothesis have to be revised based on the design.	Accepted with Recommendation
42.	Ms. Ramani R.	Nursing	1. To modify 1st Hypothesis (before and after). 2. Modify the Interventions and include; interventions that can be done consistently for all patients. 3. Post assessment points to be changed. 4. Suggestion: To have it as Experimental. To complete the control group first and then Intervention group. 5. To modify the clinical outcomes.	Accepted with Recommendation.
43.	Ms. Riya Jacob	Nursing	1. Intervention – Select one focussed Intervention. 2. Outcome measures will be Alcohol abstinence, Treatment adherence and Psychosocial well being. 3. Use relevant scales for the outcome measures. 4. Sample size - recalculate, considering all three variables.	Accepted with Recommendation
44.	Ms. R. Sudha	Nursing	1. Suggestion – to change the Youth-led mindfulness Intervention to peer led Intervention program. 2. To change – Intervention will be given by seniors who are not dependent on smart phone. 3. To define clearly about young adults who are dependent and not dependent on smart phone. 4. Suggestion – to have one or two open ended question for the youth who are not addicted to smart phone to develop Interventions. 5. Not to include mindfulness as an Intervention.	Accepted with Recommendation

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45.	Ms. R. Usharani	Nursing	1. To modify the statement of the problem. 2. The objectives (1st) and Hypothesis have to be modified. 3. Qualitative part has to be written clearly (Focus on the experience of mothers related to developmental supportive care. 4. To have separate qualitative analysis.	Accepted with Recommendation
46.	Ms. Joy Monika L.	Nursing	1. To write clearly – voiding dysfunction in operational dysfunction. 2. Suggestion – to change the intervention name as “Teaching on strategies to improve voiding pattern”. 3. Phase I is not necessary as the setting is in the hospital. 4. To prepare and give checklist for mothers to assess knowledge and practice and ask them to show while making video call. 5. Try to meet the mother and the child during 12th week. 6. To check the statistical analysis.	Accepted with Recommendation
47.	Ms. Arokia Sophi	Nursing	To change the Objective & Hypothesis based on the Title.	Accepted with Recommendation
48.	Ms. Sowmya Saira Chandy	Nursing	1. Suggestion – The interventions Yoga & Mindfulness training can be given together. 2. To include validity and Reliability of the tools.	Accepted
49.	Ms. Santhi S.	Nursing	1. Title changed as child to parent programme – To revise as suggested. 2. Include / Revise objectives and hypothesis as suggested. 3. No need to include qualitative part. 4. Revise methods as per objectives.	Accepted with Recommendation
50.	Ms. Haseena Begum I.	Nursing	1. To add extra few variables and write appropriate methods. 2. The focus of the study is too narrow for a Ph.D. study / level. 3. Outcomes intervene of patient care would strengthen the proposal / study.	Accepted with Recommendation

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51.	Ms. N.B. Mahalakshmi	Nursing	1. Change the Paediatric Enhance programme name including App. 2. Modify the Objectives and Hypothesis. 3. Sample size formula to be corrected. 4. Sampling technique to be revised. 5. Qualitative study can be as descriptive qualitative and only for parents. 6. Specific statistical test have to be mentioned based on the objective.	Accepted with Recommendation
52.	Ms. Chidambaram Gayathri	Nursing	1. The study has to be done in the community. 2. Randomization has to be done when they are seen in the hospital itself. 3. Objectives and Hypothesis to be changed. 4. Relapse – 6th day, 1 month and 3 months – 3 times to be done. Questionnaire. 5. Sample size formula to be changed. 6. Statistical analysis to be changed.	Accepted with Recommendation
53.	Ms. Ms. Alwarsamy Chandralakshmi	Nursing	1. To use Digital addiction and Technology – induced stress scales only. 2. Modify the topic as Effectiveness of Digital Detox Strategies in reducing Digital addictions and Technology Induced stress in selected schools (NOT to send, for references). 3. To change the Objectives. 4. To delete Hypothesis 1 & modify others. 5. Age group to restrict to 13 to 15 years. 6. To get permission from private schools. 7. Sample size & selection using stratified sampling technique. 8. Post test – 1,3, 6th months.	Accepted with Recommendation

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54.	Ms. P. Flora	Nursing	1. The whole study proposal needs clarity. 2. The feasibility and justification for the study is also not explained adequately. 3. Appropriate tools to be selected next time.	Not Accepted
55.	Ms. Merlyn R.	Physiotherapy	1. Introduction to focus on knee intervention and justify objective. 2. Rework on sample size. 3. Detailed Gantt Chart may be provided further. 4. After incorporating the above the protocol may be submitted to the committee for further perusal.	Accepted with Recommendation
56.	Mr. Suresh P.C.	Physiotherapy	1. Introduction should address the rationale of the study and Objective should be explicitly stated. 2. Rework on sample size using the outcome measure. (effect size) 3. Methodology should be elaborated. Study design should be specific. 4. Detailed Gantt chart may be provided. 5. After incorporating the above recommendations the protocol to be submitted to the Committee for perusal.	Accepted with Recommendation
57.	Ms. Ijah Leela P.	Physiotherapy	1. The protocol may be rewritten focussing on statement of problem, objective, methodology specifically design and intervention. 2. The sample size calculation should be estimated based on the effect size of the outcome variable. 3. After incorporating the above the candidate must resubmit the protocol for the Committee perusal.	Accepted with Recommendation

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58.	Ms. Divya J Pawani	Physiotherapy	--	Accepted
59.	Ms. Annie Kamalam A.R.	Biomedical Sciences	--	Accepted
60.	Mr. Dhiyaneshwaran S.	Biomedical Sciences	This study needs confirmation of folate and other Nutritional deficiency is not contributing intestinal Mucositis. Cell line medium and RAR has to be confirmed for folate deficiency and Protein, Albumin, B12 assay for ruling out Nutritional deficiency. Recommending to perform Red Blood folate, Protein, Albumin, B12 assay, Cell line medium has to be tested for folate assay.	Accepted with Recommendation
61.	Ms. Janani S.	Biomedical Sciences	1. To measure baseline blood parameters like kidney function as Valproic acid is excreted via kidney and folate and B12, and other nutritional markers (Total protein, albumin). 2. To measure folate levels in organoid cell culture.	Accepted with Recommendation
62.	Ms. Aashritha A.	Biomedical Sciences	As per presentation done and proposal Write-up; It was quoted that all the blood parameters (1st , 2nd & 3rd trimester) analysis will be cumulatively done only after the delivery. This is not ethically acceptable. Screening Committee felt the blood parameters should be immediately analysed and mothers with Vitamin D deficiency and / or Anemia should be treated appropriately and immediately. This has to be changed in the methodology and make it ethically acceptable.	Accepted with Recommendation
63.	Mr. Milton P.	Biomedical Sciences	--	Accepted

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64.	Mr. Rakesh M.	Biomedical Sciences	The title, sampling method, sample size needs to be reworked. No details of study tool was given in the proposal or presentation. The Committee felt that the candidate should incorporate all the suggestions and modifications and resubmit for consideration. So the Committee has not accepted the proposal in the present form.	Not Accepted

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 within two weeks from the date of publication of result.

Encl:
Compliance Format

/True Copy/

**Dr. K. NARAYANASAMY,
VICE-CHANCELLOR**

Sd/-
ACADEMIC OFFICER

Format for compliance to remarks of PhD Screening committee,

The Tamil Nadu Dr. MGR Medical University

Title of the Ph.D

Name of the candidate

Faculty

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

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