



FACULTY PROFILE

Name of the Faculty	V.SRIVIDHYA		
Designation	ASSISTANT PROFESSOR		
Department	PHARMACOLOGY		
Mobile No. (optional)	9445725900		
Email ID	srividhyavvpcw@vivekanandha.ac.in		
Academic Qualification	<i>Degree</i>	<i>Specialization</i>	<i>Year of passing</i>
	B. Pharm	-	2016
	M. Pharm	Pharmacology	2019
Primary areas of expertise	Invivo pharmacological studies		
Total years of experience (Teaching/Research/Industry)	6 years 2 months		
Professional Affiliations (Membership of APTI/IPA etc)	-		
Total No. of Research Publications (Journal Articles/ Books/ Book Chapters)	16		
Total No. of Research Projects Guided	5		
Patent Published/Granted	-		
Total No. of Conference presentations	-		
Total No. of Seminar /Conference /Workshop/ FDP attended	2/ 2/ 2		
Additional Academic achievements (Guest lecture delivered, Research fund, etc.,)	-		
Awards & Recognition	-		

