

## **Faculty Proforma for the GSVM Website**

1. Name: **Dr. Suman Lata Verma**
2. Qualification: **MD (Pathology)**
3. Fellowships:
4. Date of joining: **31 July 1999**
5. Date of Birth: **19** Month: **October**
6. Gender: **Female**
7. Designation: **Professor**
8. Department: **Pathology**
9. Specialization: **Pathology**
10. Area of Interest: **MD Pathology**
11. OPD days: **24 hrs. Pathology**
12. OPD Room No.: Timings:
13. Super speciality clinic: Room No / ward No.:
14. Super speciality clinic days : Timings:
15. Awards:
16. Publications: Indexed: **24** Non Indexed:
17. Other Corporate responsibilities:
  - a. In GSVM:
  - b. In Other Societies: In Society with NGO work for poor families, for child education, and health awareness.
18. Email: **sumansharma19oct@gmail.com**
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