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1. Name: **Dr. Rajendra Kumar Verma**
2. Qualification: **MD Medicine**
3. Fellowships:
4. Date of joining: **26/09/2010**
5. Date of Birth: **11** Month: **05**
6. Gender: **Male**
7. Designation: **Lecturer Medicine**
8. Department: **Medicine**
9. Specialization: **Internal Medicine**
10. Area of Interest: **Rheumatology, Hepatology, Diabetes, Respiratory Medicine**
11. OPD days : **Tuesday & Saturday**
12. OPD Room No.: **07** Timings: **9.00 to 2 pm**
13. Super speciality clinic: **Rheumatology** Room No / ward No.: **06**
14. Super speciality clinic days : **Thursday** Timings: **10-12 pm**
15. Awards:
16. Publications: Indexed: Non Indexed:
17. Other Corporate responsibilities:
  - a. In GSVM: **MCI Related work – Male ward Incharge**
18. Email: **rkv45anand@gmail.com**
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