



Fellowship in Genetic Diagnostics

CALL FOR APPLICATIONS

Department of Pediatrics, Maulana Azad Medical College, New Delhi, in association with Department of Biotechnology, Government of India has launched a 6 month' Fellowship in Genetic Diagnostics 'for faculty from government medical colleges. Four trainees in a year (in two batches) will be taken; one batch starting in September 2019 and the second in March 2020.

The program will provide training in, cytogenetic and molecular genetic techniques along with the understanding about their applications in patient care. Training in high performance liquid chromatography, Tandem Mass spectrometry and Gas chromatography will also be imparted to interested candidates

Further, the faculty members trained under this program will be eligible to apply for DBT grant for Establishment of Diagnostic Centres at their respective institutes /colleges/ hospitals after successful completion of their training

Eligibility and Mode of selection of trainees:

Post-graduate degree(MD/MS/DNB)in Pediatrics, Biochemistry, Medicine or Obstetrics& Gynaecology, Pathology, Microbiology, Biochemistry, Laboratory Hematology, Laboratory Medicine, Anatomy, Physiology, Dermatology, Hematology, Radiotherapy, Endocrinology, Ophthalmology, Oncology or any other clinical/ para clinical speciality/ Super speciality and holding regular position in Government medical college / hospital.

Modeofselection:Screening and selection based on scrutiny of Application form and telephonic interview. The commitment to learn and the possibilities of implementation at the work place will be judged.

Award Support: Thetrainee /clinicians from institutes outside Delhi will be paid a

displacement allowance of Rs30000 permonth.

FellowshipSchedule:1stSeptember 2019 to 28th February 2020 & 1stMarch 2020 to

31stAugust 2020

Fellowship starts: 1st September 2019

Last date for submission of applications: 15th July 2019

Application form (in the format given below) along with self attested photocopies of

degree certificates, MCI registration certificate and experience certificates should be

sent to the following address. The application should be forwarded by the

head(Director/Principal)of the institute.

Address for sending the application

Dr Seema Kapoor, Director Professor, Department of Pediatrics

Maulana Azad Medical College, Bahadur Shah ZafarMarg, New Delhi 110002

drseemakapoor@gmail.com

01123239417, 01123221927

The thrust areas of the department tare, Birth defects, Genetic Hematology,

Dysmorphology, IEM, Skeletal Dysplasias, Neurological and muscular disorders, Clinical

Genetics, Newborn screening and neurotransmitter disorders.

Clinical services provided by the department include comprehensive clinical

genetics, Prenatal Diagnosis. Fetal malformation diagnosis, Reproductive genetics,

Genetic counseling, Management of genetic disorders.

The laboratory facilities include Cytogenetics, Cell Culture, Molecular Cytogenetics including

FISH, Molecular Genetics, Sanger Sequencing, NGS Analysis, Enzyme Assays, Time

resolved Fluroimmunoassay, Tandem Mass Spectrometry and Gas Chromatography.

Newborn screening for hemoglobinopathies will be considered.

The fellows will be provided exposure to all areas with training in specific areas

depending on the subject of postgraduation.

Application form is given on the next page.

Application form for the Fellowship in Genetic Diagnostics

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| | CompleteName(inBlockletters):(AsperSSC/XClassRecord) Gender: | | | | Stick passport size photograph | |
|--|---|---------------------|-------------------|----------|---------------------------------------|--|
| 3. | Dateofbirth: | Age: | | | | |
| 4. | Qualifications: | | | | | |
| 5. | Medical council registrationnumber: | | | | | |
| 6. | Presentdesignation: | | | | | |
| 7. | Completeaddress: | | | | | |
| | | | | | | |
| 8. | Contactnumber(s): | | | Emailid: | | |
| 9. | Educationalqualifications(startingwithgraduation): | | | | | |
| | Degree | College/ University | Yearof passing | | Awards/ distinctions/ nonours | |
| | | | passing | 9 1 | ioriours | |
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| 10. Professionalexperience(inthechronologicallydescendingorderbeginningwitht | | | | | | |
| | currentposition): | | | | | |
| | Designation | Hospital/ Institute | Duration | | Special experience/ honours if any | |
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11. Additional academic achievements/professional activities:

| Number&listofpublications(beginningwiththen publicationswiththecompletereference):attach | · |
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| 13. Mentionbriefly(innotmorethan250words)yourr fellowshipandhowyouthinkitwouldhelpyouinyourn | |
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| | |
| Date: Place: | Signatureoftheapplicant |
| Comment by forwarding authority | |
| | |
| Director / Principal / Dean of the Institute / Medical | l College (Signature and Stamp) |
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