

Name of the Faculty : **Dr.M.S.MYLSWAMY**

Department : **Medicine**

Registration Number : **29098**

<b>Designation</b>	<b>Name of the Institution</b>	<b>From DD/MM/YY</b>	<b>To DD/MM/YY</b>	<b>Total Experience in years &amp; Months</b>
Registrar / Senior Resident/ Resident	COIMBATORE MEDICAL COLLEGE,	1989	1991	3Y
	COIMBATORE MEDICAL COLLEGE,	11.06.1992	11.06.1993	
Assistant Professor	COIMBATORE MEDICAL COLLEGE,	11.06.1993	02.07.1996	3Y
	SRI VENKATESWARA MEDICAL COLLEGE HOSPITAL & RESEARCH CENTRE, PUDUCHERRY	05.02.2007	28.02.2012	5Y
Associate Professor	SRI VENKATESWARA MEDICAL COLLEGE HOSPITAL & RESEARCH CENTRE, PUDUCHERRY	01.03.2012	10.10.2012	7M
	KARPAGAM FACULTY OF MEDICAL SCIENCES & RESEARCH, COIMBATORE - 32	27.11.2012	TILL DATE	3Y 10M