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(Updated in April 2025-26)

क्षेत्रीय आयुर्वेद अनुसंधान संस्थान, ताडोंग, गंगटोक, सिक्किम-737102
केंद्रीय आयुर्वेदीय विज्ञान अनुसंधान परिषद, आयुष मंत्रालय, भारत सरकार
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RTI APPLICATION FORM

1. Particulars of the Applicant:

(a) Name:

(b) Address:

(c) E-mail address:

(d) Phone:

2. Date of Submission of Application:

3. Subject Matter:

4. Details of Information requested:

5. Period to which the information relates:

6. Fee enclosed (in cash/ DD/ Banker's cheque/ IPO):

7. Due date by which information is to be furnished:

8. How the applicant would like his information to be sent:

(a) By post:

(b) To be collected by hand:

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Particulars of Information under Section 4(1) (b) of the RTI ACT, 2005

Particulars of the Institute

The Regional Ayurveda Research Institute (RARI) was established in Gangtok, Sikkim on 9th June, 1979 under the autonomous apex body 'Central Council for Research in Ayurvedic Sciences', Ministry of Ayush, Govt. of India. For organizing research activities on a scientific basis in Ayurvedic Sciences and to provide Health Care services in the State of Sikkim. The Institute is certified BIS ISO 9001:20215 and proudly houses an entry level NABH- Ayush Entry Level Certified Ayurveda Hospital, and ensuring high standards of patients care and safety, along with a registered herbarium at New York Botanical Garden, recognized by the acronym RARI, serving as valuable resources for botanical research and conservation.

Objectives of the institute

1. To conduct clinical research on lifestyle-related and non-communicable diseases, with a focus on gout.
2. To undertake clinical trials to study the safety and efficacy of Ayurvedic drugs.
3. To survey and identify new medicinal plant resources available in the State.
4. To provide healthcare services through the Outpatient Department (OPD).
5. To run a special clinic for geriatric health care.
6. To provide Panchakarma therapy services.
7. To implement outreach activities such as the Tribal Health Care Research Programme (THCRP), the Ayurvedic Mobile Health Care Programme (AMHCP) under the Scheduled Castes Sub Plan (SCSP), and Ayurveda Health Centers (AHC), which function as extension centers of RARI, Gangtok under the North East Plan (NEP) of CCRAS, New Delhi, across all districts of Sikkim.

The Out Patient Department (O.P.D) and Survey of Medicinal Plant Unit (S.M.P.U.) were started since inception. This institute is one and only Ayurvedic Research Institute in the entire state of Sikkim and it has tried to promote all its efforts for best possible service to the public with guidance and the works assigned by the CCRAS Headquarters.

Mandate of the Institute

Mandate of the Institute is "Clinical Research Programme on lifestyle related and non-communicable disorders focusing on Gout."

Achievements at glance

The Institute's OPD at Gangtok and its three Extension Centers functioning as Ayurvedic Health Centers at Geyzing, Jorethang, and Mangan provide OPD services, free distribution of Ayurvedic medicines, and IEC materials, while pathological and biochemistry investigations at subsidized rates are offered at the Institute's OPD. The institute has successfully renewed its NABH AYUSH Entry Level Certification and achieved BIS/ISO 9001:2015 certification. Its Institutional Ethics Committee (IEC) is provisionally registered with the National Ethics Committee Registry for Biomedical and Health Research under the Department of Health Research, Ministry of Health and Family Welfare, Government of India. The Clinical Establishment registration of RARI, Gangtok has been granted for five years, and the renewal for all AHCs has also been completed. The institute received the 2nd Prize in Rajbhasha (NARAKAS) and continues to implement key activities including clinical research (Intra Mural Research Programme), Medicinal Plant Research (Medico-Ethno-Botanical Survey), Tribal Health Care Research Programme (THCRP) under TSP, and the Ayurvedic Mobile Health Care Programme under SCSP, all contributing significantly to public health welfare.

Administrative Setup

The Ayurveda Regional Research Institute (ARRI) was renamed as Regional Ayurveda Research Institute (RARI) with the the mandate of the institute includes: of the Institute is Clinical Research Programme on lifestyle related and non-communicable disorders focusing on Gout by the letter of council on 19.05.2016. The institute also provide the health care services through Out Patient Department (OPD), special clinics for Geriatric health cares and Health Care Services in three (3) Ayurveda Health Centers (AHCs) in Geyzing, Mangan and Jorethang districts, along with Outreach activities through 'Tribal Health Care Research Programme (THCRP) and Ayurveda Mobile Health Care Programme (AMHCP) under Scheduled Caste Sub Plan (SCSP) programmers in entire Sikkim.

The Institute is running under the In-charge ship of Assistant Director (Ay.) and control of Director General CCRAS, Ministry of Ayush, Govt. of India with the present Manpower strength of Research Officers(Ay)-2, Research Officer Botany-1 Lab Technician-1, Pharmacist -1, UDC-1 and MTA (Peon)-3 (a total 10 regular staff) and 20 outsourcing staffs are engaged against vacant regular posts in addition to 31 contractual staffs engaged in different projects. As on 31st March, 2025, Group and Cataegory wise total number of manpowers include: in Group A- SC-1, ST-Nil, OBC-2, Gen-1, in Group B- SC- Nil, ST- Nil, OBC-Nil, Gen- Nil and in group C- SC-5, ST-Nil, OBC-Nil, Gen-1 as per the office record.

Brief report on Infrastructure of the Institute

I. The present Institute since its inception is functioning in five storey rented building, each floor extended in about 1650 square feet. Total area of all floors is about 8838.70 square feet. The Ground Floor is used for Male Panchakarma , SMPU Section ,Basement 1 for Female Panchakarma, Project room and Library, 2nd floor (at road level)- OPD, Pathology, discrepancies and Garage; 1st floor- Administrative Block (Office Accounts and Admin), Meeting Hall and Officer Chamber, 2nd floor- Small Guest House , General stores, and Medicines stores of different projects. This Institute is running with specialized O.P.Ds, Clinical Research Unit, Pathology & Bio-Chemical Laboratory, Panchakarma, Library and different Projects.

II. Staff position in working :
- 10 staffs working on regular basis
- 15 outsourcing staff engaged against the vacant permanent posts
- 26 staffs are engaged in various projects

III. Building Own or rented : Rented
IV. Laboratory : Pathological & Bio-Chemical Laboratory
V. Library : Ayurveda & related Medical Sciences, Botany & Hindi books.

North East Plan: Ayurveda Health Centers (AHCs) of CCRAS (Extension centers for North Eastern Institutes)

Three Ayurveda Health Centers (AHCs) of RARI, Gangtok are functioning across three districts of Sikkim, providing healthcare services to the local communities at Geyzing, Jorethang, and Mangan. During the reporting period, a total of 14,531 patients (8,219 males and 6,312 females) attended the OPD and received treatment along with IEC materials. Additionally, 4,166 blood sugar tests and 2,601 haemoglobin tests were conducted.

List of Intramural Research Projects during the year 2025-26

Completed projects

- **Under Tribal Health Care Research Programme under Tribal Sub Plan(THCRP-TSP)**

  - Documentation of ethno- dietary practices indigenous to India
  - Documentation of plants, metals, minerals, animal products and other materials used in various indigenous religious practices and rituals across India

  The Programme covered 17 villages across multiple districts and treated 824 patients, including 388 Scheduled Tribe beneficiaries. A total of 507 investigations were conducted. The study documented 775 special recipes through 85 IDIs and 204 recipes through 17 FGDs. along with 174 ritual practices documented through 85 IDIs and 9 IDIs.

- **Under Ayurveda Mobile Health Care Programme (AMHCP) under Schedule Caste Plan (SCSP)**

- Documentation of ethno- dietary practices indigenous to India
- Documentation of plants, metals, minerals, animal products and other materials used in various indigenous

A total of 109 field tours were conducted across 5 districts and 6 blocks, covering 16 villages. Healthcare services were provided to 1,099 beneficiaries, with 457 laboratory investigations conducted. The Programme included 528 awareness lectures and documentation through 80 IDIs, 16 FGDs, and 86 IDIs related to religious practices.

- **North East Plan: Ayurveda Health Centers (AHCs) of CCRAS Centers for North Eastern Institutes)**

- Documentation of ethno- dietary practices indigenous to India.
- Documentation of plants, metals, minerals, animal products and other materials used in various indigenous religious practices and rituals across India.
- A cross-sectional study on Knowledge, Attitudes, and Practices (KAP) related to menstruation among school going adolescent girls in North Eastern Region"

AHC,Geyzing :A total of 60 field tours were conducted across 2 districts (Geyzing & Soreng) and 2 blocks (Geyzing & Soreng), covering 6 villages (Hee- Burmiok, Darap,Nambu,Tikjye, Miyong & Bum). The programmed included 26 awareness lectures and documentation through 30 IDIs, 06 FGDs, and 30 IDIs related to religious practices and total recipes documented – 254.

AHC,Jorethang :A total of 53 field tours were conducted across 2 districts (Geyzing,Soreng) and 3 blocks (Geyzing,Namchi,Soreng), covering 5 villages (LowerFambong, ChotaSamdong,Aroobotey,Sribadam & Sukrabarey). The programmed included 24 awareness lectures and documentation through 25 IDIs, 05 FGDs, and 25 IDIs related to religious practices and total recipes documented – 229.

AHC,Mangan : A total of 51 field tours were conducted across 1 district (Mangan) and 2 blocks Mangan & Chungthang), covering 5 villages (Kabi,Hee- Gyathang,Lingdem Salim Pakel & Upper Mangshila). The programmed included 49 awareness lectures and documentation through 25 IDIs, 05 FGDs, and 25 IDIs related to religious practices and total recipes documented – 168

- **General health screening with special focus on selected disease conditions (Tuberculosis, Anemia, Sickle Cell Disease & Malnutrition) and Ayurveda management of Anemia& Malnutrition in students of Ekalavya Model Residential Schools (EMRS) [Multicentric collaborative project]**

The Multicentric Collaborative Project on Indian Council of Medical Research – National Institute of Research in Tribal Health and EMRS was initiated on 05.04.2023 to assess and improve the health status of students in Eklavya Model Residential Schools, with special focus on anemia, hemoglobinopathies, malnutrition, and tuberculosis through Ayurvedic interventions and healthy lifestyle practices. During the project, 110 health tours were conducted, treating 1456 patients at EMRS Swayem and 1195 patients at EMRS Gangyep. Among students, the most common illnesses observed were Pandu, Pratisyaya, Dantasool, Kushta, Kandu, Kantasoola, Sirasoola, Atisara, Soola, and Vrana, while common ailments among other patients included Kasa, Vibandha, and Adhmana.

- **Knowledge, Attitude and Practice (KAP) towards Pharmacovigilance of Ayurvedic Medicines among Registered Ayurvedic Medical Practitioners of the Respective States – a Multicentre Study**

The multicentric pharmacovigilance awareness study was successfully implemented across 12 states under the coordination of Regional Ayurveda Research Institute, Gangtok. The study achieved and exceeded its enrolment target, demonstrating strong participation and awareness among Ayurveda practitioners. The awareness programmes significantly contributed to improving knowledge, attitude, and practices related to pharmacovigilance, ADR reporting, and the safe use of Ayurvedic medicines. The follow-up assessments

further indicated a sustained positive impact of the intervention, highlighting the effectiveness of structured awareness and capacity-building initiatives in strengthening pharmacovigilance practices in Ayurveda. The study was conducted from 30.09.2024 to 31.12.2025 through 10 implementing institutes across 12 states. A

total of 68 awareness programmes were organized focusing on pharmacovigilance, ADR reporting, and the safe use of Ayurvedic medicines. Against the target of 3,430 participants, a total of 3,576 participants were enrolled. Follow-up assessments after a minimum period of three months were completed for 2,394 participants using a validated KAP questionnaire.

List of Collaborative Research Projects during the year 2025-26

N.	Programme	Old Programme (2024-25)		New Programme (2025-26)		Remarks
		Annual Target	Target Achieved	Annual Target	Target Achieved	
1.	General health screening with special focus on selected disease conditions (Tuberculosis, Anemia, Sickle Cell Disease & Malnutrition) and Ayurveda management of Anemia& Malnutrition in students of Ekalavya Model Residential Schools (EMRS)	-	Total 626 students Screened in EMR Schools	-	Total 43 students enrolled for Anemia and 6 students for Malnutrition	Completed
2.	Critical appraisal and validation of Local Health Traditions (LHTs), Oral Health Traditions (OHTs) and Ethno Medical Practises (EMPs): An inclusive study among Ethnic communities of Northeast India	MEBS Survey in the Districts of Sikkim and Meghalaya	Collected 502 plant specimens, 248 species of plants identified belonging to 172 Genera and 82 families. 400 herbarium specimens prepared. 178 folk lore claims collected by interviewing 146 folkhealers in	MEBS Survey in the Districts Meghalaya Data compilation for Article preparation	Herbariums mounted 284, Accesion number given 152. Data compilation till date done. Compilation of LHT data, Folk healer data and validation of folk claims done. Article preparation ongoing.	Ongoing

			sikkim and Meghalaya.			
3.	Development of agro-Techniques for selected Astavarga plants.	1. To assess the current status, distribution, chemical diversity of selected high-value medicinal orchid species in the Himalayan populations. 2. To develop mass scale micropropagation protocol through plant tissue culture technique for selected medicinal orchids. 3. Study the growth performance and quality parameters of tissue culture raised plants in the field. 4. To promote the cultivation of medicinal plants to the local farmer for sustainable agriculture practices.	The IMR project on Astavarga plants began in July 2024 in collaboration with GB Pant Institute, Gangtok. Multiple populations of key medicinal orchids were identified, collected, and conserved in a herbal garden. Advanced LC-MS Orbitrap analysis and network pharmacology were used to study metabolite composition and therapeutic potential. Phytochemical, antioxidant, and anti-inflammatory activities of the species were evaluated. Efficient micropropagation protocols were developed through tissue culture, ensuring successful in vitro germination and plantlet growth. Survey in	Survey done in Sikkim, Uttarakhand. Himachal to be done.	Survey done in Sikkim, Uttarakhand. Himachal Forest division permit granted and meeting done. The IMR project on Astavarga plants began in July 2024 in collaboration with GB Pant Institute, Gangtok. Multiple populations of key medicinal orchids were identified, collected, and conserved in a herbal garden. Advanced LC-MS Orbitrap analysis and network pharmacology were used to study metabolite composition and therapeutic potential. Phytochemical, antioxidant, and anti-inflammatory activities of the species were evaluated. Efficient micropropagation protocols were developed through tissue culture, ensuring successful in vitro	Ongoing

			Uttarakhand and Himachal Pradesh.		germination and plantlet growth.	

Ongoing medicinal plant research

I. Critical appraisal and validation of Local Health Traditions (LHTs), Oral Health Traditions (OHTs) and Ethno Medicinal Practices (EMPs): An inclusive study among Ethnic communities of North East India

In this reporting year, a total of 284 plant specimens were mounted from pevious collection. Total number of 506 Folkclaims data compiled from Sikkim and Meghalaya. Totalk number of 146 Folkhealres data compiled (110 from Sikkim and 36 From Meghalaya). A total number of 202 Folkclaims validated. Plant collection data compiled till date of 502 Specimens.

2. Development of agro-techniques for selected Astavarga plants

Multiple populations of astavarga species including *habenaria intermedia*, *h. edgeworthii*, *crepidium acuminatum*, and *malaxis muscifera* were identified from uttarakhand and darjeeling, and selected genotypes were conserved in the herbal garden. lc-ms orbitrap-based biochemical profiling, network pharmacology, phytochemical, antioxidant, and anti-inflammatory studies confirmed significant bioactive potential. tissue culture protocols were standardized for successful in vitro seed germination, protocorm development, and plantlet establishment.

Brief resume of the clinical Research Work Carried out (Problem wise) since inception up to 2025-26

S. No.	Title	Year of starting	Year of Completion	Principle of Drug	Remarks
1.	To study the efficacy of Pippalichurna in Pratisaya (Running nose) in children	February 1981	February, 1984	Pippalichurna with Madhu	Completed
2.	To study the efficacy of GandhakDruti-as external application in common skin disease (Twakroga)	February 1981	February, 1984	GandhakDruti-as external application	Completed
3.	To study the efficacy of compound Ayurvedic formulation in Pravahika (Diarrhea)	October, 1985	March, 1991	1.Jatiphaladi churna&MahasankhaVati 2.Hingwastak churna&ChitrakadiVati	Completed
4.	To study the efficacy of compound Ayurvedic formulation in chronic Skin Diseases (Twakroga)	October, 1985	March, 1992	1.Suddha gandhak ,Haridrakhand with MahaManjistadiKwath. 2.Arogyavardhini withKhadirarista	Completed
5.	To study the efficacy of compound Ayurvedic formulation in Galaganda (Goiter)	October, 1985	March, 1993	1.Kanchanar Guggulu2.Punarnavamandur	Completed
6.	To study the efficacy of compound Ayurvedic formulation Ayush-64 in Visamjvara	October, 1985	March, 1993	Ayush-64 tab (A patent drug developed by the council)	Completed
7.	To study the efficacy of multiple Ayurvedic regimen in Sweta Pradar (White discharge)	October, 1994	March, 1996	1.Pusyanuga churna2.Chandra prabhavati 3.Patrangasava &Ashokarista	Completed
8.	To Study the efficacy of Bilvamajjachurna in “GrahniDosa	May, 2001	October, 2007	Bilwamajjachurna	Completed
9.	To Study the efficacy of HinguTriguna Tail and YograjGuggulu in GridhrasiRoga	May, 2001	October, 2007	HinguTriguna Tail and YograjGuggulu	Completed

10.	Multi-centric clinical trial on DhatriLauha on Iron deficiency Anemia	Dec, 2007	June, 2009	DhatriLauha	Completed
11.	Clinical Research- Intra Mural Research (IMR) Project	March, 2016	March, 2019	PunarnavaGuggulu and Rasnasaptaka Kshaya in Aamvata	Completed
12.	A prospective open label controlled interventional study on the effect of Ayurvedic intervention (Ayurveda Raksha Kit) as a prophylactic measure in the Pandemic of COVID-19 - A community based study	October, 2020	January,2021	Ayurveda Raksha Kit containing 1.Ayush Kwath 2.Chyawanprash 3.Samshamani Vati 4.Anu Taila	Completed
13.	Impact of Ayu Raksha Kit in Covid-19 community-based prophylactic study.	January, 2022	March 2022	Ayu Raksha Kit containing 1.Ayush Kwath 2.Chyawanprash 3.Samshamani Vati 4.Anu Taila	Completed
14.	A prospective community based study for the evaluation of Yograj Guggulu, Ashwagandha churna and Narayana taila in Osteoarthritis knee (Janugata Sandhivata)	April 2021	March 2022	1.Yograj Guggulu, 2.Ashwagandha churna 3.Narayana taila	Completed
15.	Effectiveness of Ayurveda based diet and Lifestyle advocacy on health related Quality of life in schedule Tribe population in India- a Community based, cluster randomized controlled study	April 2021	March 2022		Completed
16.	Profiling of Demographic, health status and Non communicable Disease profiling among Scheduled Tribe population in East District and West District of Sikkim– A descriptive, Cross-Sectional epidemiological Study	April 2021	March 2022		Completed

17.	A prospective community-based study for the evaluation of Dhatri Loha in the management of Anemia (Pandu)	April 2021	March 2022	Dhatri Loha	Completed
18.	A Prospective Community Based Study for The Evaluation of Effectiveness of Yograj Guggulu, Ashwagandha Churna and Narayana Taila in The Management of Osteoarthritis Knee (Janugat Sandhivata).	April 2021	March 2022	1.Yograj Guggulu, 2.Ashwagandha churna 3.Narayana taila	Completed
19.	"Effectiveness of Ayurveda based diet and Lifestyle advocacy on health-related Quality of life in schedule Caste population in Sikkim- a community based; cluster randomized controlled study"	April 2021	March 2022		Completed
20.	Demographic and Non communicable Disease profiling among Scheduled caste population in East Sikkim and South Sikkim– A descriptive, Cross-Sectional epidemiological Study.	April 2021	March 2022		Completed
21.	Demographic and Non communicable Disease profiling among patients seeking Ayurveda treatment from Ayurveda Health Centers in selected North East regions in India – A descriptive, Cross-Sectional Study.	April 2021	March 2022		Completed
22.	Effectiveness of Ayurveda based Diet &Lifestyle advocacies and Ayurvedic treatment regimen in patients seeking Ayurveda treatment from Ayurveda health centers in selected North east regions of India.	April 2021	March 2022		Completed

23	Profiling of Demographic, Health Status and Non-communicable diseases among Scheduled Caste Population in East Sikkim- A Descriptive, Cross Sectional Epidemiological Study	April 2022	March 2023		Completed
24	A Randomized Placebo Control trial of Ayush SR in perceived stress	April 2022	March 2023		Completed
25	Cross sectional Survey to determine the prevalence of Non communicable Diseases and their risk factors among the Scheduled Tribes in East and West Sikkim	April 2022	March 2023		Completed
26	Effect of Ayush SR on psychological status and quality of life of apparently healthy elderly population – A multicenter double blind placebo controlled study	April 2022	March 2023		Completed
27	Non Communicable diseases and associated factors among health seekers approaching the selected Ayurveda Health Centers in North East India	April 2022	March 2023		Completed
28.	Effectiveness of composite Ayurveda regimen in a black box design for the management of Rheumatoid arthritis- A community-based study under THCRP	December 2023	March 2024	Ayush Rasayana A Ayush Rasayana B	Completed
29	Effectiveness of Ayush Rasayana A & B on Quality of Life of elderly population- A cluster randomized study.	December 2023	April 2024	Composite Ayurveda regimen	Completed
30	Acceptability of the Comprehensive Ayurveda-based health care approach in the community and effectiveness of individualized health care - Cluster Randomized study (under AMHCP-SCSP)	April 2024	March 2025		Completed

31	Assessment of acceptability of the Comprehensive Ayurveda-based health care approach in the tribal community and effectiveness of individualized health care - Cluster randomized study (under THCRP-TSP)	April 2024	March 2025		Completed

Tribal Health Care Research Programme (THCRP) under Tribal Sub Plan

Tribal Health Care Research Programme (THCRP**)** under the Tribal Sub Plan (TSP), launched by CCRAS in 1982 and implemented at RARI, Gangtok since December 2014, aims to provide doorstep Ayurvedic healthcare to ST communities while assessing their socio-demographic profile, diet, living conditions, and disease prevalence, along with promoting preventive health concepts. During the reporting period, 17 villages across districts of Mangan, Gyalshing, Soreng, Namchi, Gangtok, and Pakyong were covered, treating 824 patients (including 388 ST beneficiaries) with free medicines and conducting 507 investigations. Under THCRP-TSP (2025–26), two studies**—**"Documentation of Ethno-Dietary Practices Indigenous to India" and "Documentation of Plants, Metals, Minerals, Animal Products and Other Materials Used in Indigenous Religious Practices and Rituals across India**"—**were carried out. A total of 85 IDIs and 17 FGDs documented 775 special recipes (IDIs) and 204 recipes (FGDs), while 85 IDIs in villages and 9 IDIs at religious places documented 174 ritual practices. Audio-visual documentation was done with consent, and incidental healthcare and awareness activities were also provided. Overall, the studies contribute to preservation, validation, and promotion of indigenous dietary and ritual knowledge.

Ayurveda Mobile Health Care Programme (AMHCP) under Scheduled Caste Sub Plan (SCSP)

Ayurveda Mobile Health Care Programme (AMHCP) under the Scheduled Caste Sub Plan (SCSP), initiated at RARI, Gangtok in January 2016, aims to provide doorstep Ayurvedic healthcare to SC communities while assessing their socio-demographic profile, living conditions, dietary habits, disease prevalence, and promoting hygiene and preventive health awareness. Under AMHCP-SCSP (2025–26), two research studies—"Documentation of Ethno-Dietary Practices Indigenous to India" and "Documentation of Plants, Metals, Minerals, Animal Products and Other Materials Used in Various Indigenous Religious Practices and Rituals across India"—were undertaken to systematically document and validate indigenous knowledge systems. A total of 109 field tours were conducted across 5 districts and 6 blocks, covering 16 areas: Budang Thangsing, Sherwani, Namin, Kamarey, Bhasmey, Pacheykhani (Losing), West Pendam, Turung, Saleumbong, Rateypani, Sorok, Siktam, Soreng Forest Block, Liching, Tashiding, Dentam, and Radukhandu, including both urban and rural populations. Data were collected through qualitative methods comprising 80 idis and 16 fgds for ethno-dietary practices, 86 idis for religious practices, 24 idis at famous religious places, and 1 FGD in Vedic institutes, with audio/audio-visual documentation undertaken after obtaining informed consent. Additionally, incidental healthcare services were provided to 1,099 beneficiaries, and 40 awareness lectures along with IEC material distribution were conducted to promote health, hygiene, and Ayurveda-based lifestyle practices. A total of 457 lab investigations were conducted during the health check up camps.Overall, the studies contribute to the preservation, scientific validation, and integration of indigenous dietary and ritual knowledge into public health and cultural research frameworks.

General health screening with special focus on selected disease conditions (Tuberculosis, Anemia, Sickle Cell Disease & Malnutrition) and Ayurveda management of Anemia& Malnutrition in students of Ekalavya Model Residential Schools (EMRS) [Multicentre collaborative project

The project was initiated on 05.04.2023 as a collaborative project with the Indian Council of Medical Research – National Institute of Research in Tribal Health (ICMR-NIRTH) with a primary objective of screening the general health condition of students of EMRS with a special focus on anemia, hemoglobinopathies, malnutrition and tuberculosis and secondary objectives of management of Anemia, and Malnutrition through Ayurvedic interventions as standalone/add on and to inculcate healthy lifestyle practices in children as per principle of Ayurveda. A total of 110 tours were conducted, and 1456 patients were treated at EMRS Swayem and1195 at EMRS Gangyep. The most prevalent disease among students during the incidental care visits was Pandu, followed by *Pratisyaya, Dantasool, Kushta, Kandu, Kantasoola, Sirasoola, Atisara, Soola & Vrana*. Among patients other than students, the most prevalent diseases were Kasa, Vibandha, Adhmana, etc.

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DRUG RESEARCH PROGRAMME

SURVEY OF MEDICINAL PLANT UNIT (SMPU)

Since 1982, the Institute has diligently curated a comprehensive collection of medicinal plant specimens native to Sikkim. In 2024, this commitment to botanical research culminated in the establishment of the Survey of Medicinal Plant Unit (SMPU) within the institute's framework. The Herbarium is registered in index herbarium by New York Botanical Garden with the acronym **RARI**. This institute, in conjunction with this unit, has undertaken extensive field surveys across Sikkim, Meghalaya, and Darjeeling district of West Bengal to gather and preserve raw drug materials sourced from diverse locations. These efforts have not only enriched the institute's repository but also contributed significantly to the conservation and exploration of the region's rich botanical diversity. A 13 days short tour and 01(8-days) long tour were conducted. 22.25 kg of raw drugs were collected. Out of this, 3.42 kg of raw drugs were supplied to various peripheral institutes of CCRAS. A total of 42 plant specimens were collected and identified 42 species belonging to 39 genera and 29 families, with 314 herbarium specimens prepared. Furthermore a total number of 474 accession numbers were assigned to previously collected and mounted herbarium specimens. .

Medico Ethno Botanical Survey in the forest areas of Darjeeling district of West Bengal [IMR PROJECT]

Final report was submitted to headquarters on 22.04.2025 with UC, SOE settlement.

Ongoing project:

Critical appraisal and validation of Local Health Traditions (LHTs), Oral Health Traditions (OHTs), and Ethno Medicinal Practices (EMPs): An inclusive study among Ethnic communities of Northeast India [EMR PROJECT]

In this reporting year, a total of 284 plant specimens were mounted from pevious collection. Total number of 506 Folkclaims data compiled from Sikkim and Meghalaya. Totalk number of 146 Folkhealres data compiled (110 from Sikkim and 36 From Meghalaya). A total number of 202 Folkclaims validated. Plant collection data compiled till date of 502 Specimens.

Development of agro-techniques for selected Astavarga plants [IMR COLLABORATIVE PROJECT]

The IMR collaborative project on Astavarga plants was initiated on 30th July 2024 with GB Pant National Institute of Himalayan Environment, Gangtok. A total of multiple populations of key species—Habenaria intermedia, H. edgeworthii, Crepidium acuminatum, and Malaxis muscifera—were identified across Uttarakhand and Darjeeling. Selected genotypes were collected and established in the herbal garden for conservation and study. Biochemical profiling using methanol and ethyl acetate extracts was conducted through LC-MS Orbitrap analysis to determine metabolite composition. Network pharmacology approaches were applied to understand metabolite–protein interactions and therapeutic potential. Phytochemical and antioxidant analyses revealed bioactive potential, along with anti-inflammatory activity via egg albumin assay. Micropropagation protocols were developed using tissue culture, with successful protocorm development and growth optimization. Standardized sterilization and media preparation techniques ensured effective in vitro seed germination and plantlet establishment.

HEALTH CARE SERVICES THROUGH OPD

Statement of the number of patients who attended the OPD (2025-26)

Year	No. of patients attended at OPD												Grand Total
	New						Old						
	Adult		Child		Total		Adult		Child		Total		
	M	F	M	F	M	F	M	F	M	F	M	F	
25-26	1562	1503	75	80	1637	1583	2998	3307	56	66	3054	3373	9647

Special Clinic for Geriatric Health Care

Statement of Patients who attended the Geriatric OPD (2025-26)

Period	No. of Patients treated						
	New Patients		Old Patients		Total Patients		Grand Total
	M	F	M	F	M	F	M & F
01.04.2025 - 31.03.26	398	305	1205	945	1603	1250	2853

Panchakarma Therapy

Patient statement Karma / Therapy wise (OPD 2025-26):

Sl.No.	Karma / Therapy	Male	Female	Total
1.	Abhyanga	149	199	348
2	SarvangaSnehana&Swedan	170	239	409
3	Kati vasti	159	158	317
4.	Vamana	0	0	0
5.	Virechana	0	0	0
6.	Vasti	3	0	3
7.	Nasya	17	9	26
8.	Shiro Dhara	16	5	21
9.	Shirovasti	0	0	0
10.	RaktaMokshana (Jaloukaavacharan)	0	0	0
11.	Karna purana	0	0	0
12.	Agnikarma	0	0	0
13.	Netra tarpan	0	0	0
14.	Patrapindaseka	20	23	43
15.	ValukaSweda	59	59	118
16.	Januvasti	28	69	97
17.	Shashtikashalipindasewda	5	0	5
18.	Nadiseka	88	121	209
19.	GrivaVasti	49	48	97
20.	Udvarthana	8	5	13
21.	Siraveda	1	0	1
22	Potaliseka	15	12	27
	Total	**787**	**947**	**1734**

Laboratory Path/Chem/Bio-Chem (OPD 2025-26)

S.No.	Investigations	Male	Female	Grand Total
1	Pathological Investigations	3564	4296	7860
2	Biochemical Investigations	7739	8180	15919
3	Radiological Investigations			
4	Other Investigations viz ECG,Ultrasound, Endoscopies etc.	-	-	-
Total		**11303**	**12476**	**23779**

Pharmacovigilance Programme under central sector scheme

The Pharmacovigilance Programme at the institute was initiated on 1st October 2020 with the objectives of monitoring drug safety, creating awareness about Adverse Drug Reactions (ADRs), and reporting misleading advertisements related to ASU & H drugs/products and practices in the state of Sikkim.

During the reporting period, a total of 39 Pharmacovigilance awareness programmes were organized at the institute, benefiting 915 participants. In addition, 156 misleading advertisements were collected, analysed, and forwarded to the respective State Licensing Authorities (SLA)/Drug Controllers (DC) and the concerned Intermediary Pharmacovigilance Centers (IPVC)/National Pharmacovigilance Coordinating Centre (NPVCC) for further action during the year 2025–26.

Furthermore, a total of 8 Adverse Drug Reactions (ADRs) and 1 Adverse Drug Event (ADE) associated with the use of Ayurvedic medicines have been reported at the institute during the year 2025–26.

Knowledge, Attitude and Practice (KAP) towards Pharmacovigilance of Ayurvedic Medicines among Registered Ayurvedic Medical Practitioners of the Respective States – a Multicenter Study

The initiation, formulation, and preparation of the proposal was done out by RARI, Gangtok as the nodal institute among the 10 institutes under the Council for this project. The peer review and validation of the KAP questionnaire on Pharmacovigilance has been done as per the standard guidelines. Google Form was created by the Statistical Section of the Council and shared with the investigators on 30th October 2024. Investigators of all centers were trained by the institute through VC meetings. IEC approval was sought out by all participating institutes including this institutes before the commencement of the study. The sensitization programme through VC mode was done for Principal Investigators and Co- Investigator on KAP questionnaire and regular guidance was given with coordination to the all implementing institutes. A PPT material for the awareness programme was developed and shared among the investigators to make the uniformity. Initially, the institute was approved to cover the entire Sikkim and northern part of West Bengal. However, considering the low number of registered Ayurveda practitioners, the council has approved to cover the entire West Bengal state to reach the target. The study commenced on 30.09.2024 and completed on 31.12.2025. A total of 68 awareness programmes were conducted by 10 implementing institutes across 12 states, promoting pharmacovigilance, ADR reporting, and safe use of Ayurvedic medicines among practitioners. Participant enrolment reached 3,576 as of 31.12.2025, exceeding the target of 3,430, indicating strong engagement and interest. Follow-up assessment after at least

three months was completed for 2,394 participants using a validated KAP questionnaire, evaluating the sustained impact on knowledge, attitude, and practices related to pharmacovigilance.

NORTH EAST PLAN

Three Ayurveda Health Centers (AHCs) / Extension Centers

Statement of Patients who attended the OPD of AHCs

Name of Extension Centers	Number of patients attended														
	New						Follow up						Total		Grand Total (M+F)
	Adult		Child		Total		Adult		Child		Total				
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
AHC-GEYZING	1326	1052	55	56	1381	1109	1498	1133	42	36	1540	1169	2921	2277	5198
AHC-JORETHANG	981	934	43	37	1025	970	1669	1489	10	11	1679	1500	2704	2470	5174
AHC-MANGAN	762	456	71	54	830	510	1683	999	82	52	1765	1051	2598	1561	4159
Total	3069	2442	169	147	3238	2589	4847	3624	133	101	4980	37	8218	6314	14532

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Research papers published in Journals (During the last 3 years)

Sl No.	Name of the author	Title of research paper	Name of the Journal	Date of publication
1.	Dr. Animesh Sen	Metal-free, tert-butyl nitrite promoted C (sp 2)–S coupling reaction: the synthesis of aryl dithiocarbamates and analysis of antimicrobial activity by „in silico" and „in vitro" methods for drug modification	Green Chemistry 25.23 (2023): 9847-9856.	25 Oct 2023
2.	Dr. Animesh Sen	In silico exploration and in vitro validation of the filarial thioredoxin reductase inhibitory activity of Scytonemin and its derivatives	Biomolecular Structure and Dynamics (2023): 1-13.	21 Nov 2023
3.	Dr.Lijima C	Pharmacognostical and pharmaceutical analysis of Jeevantyadi Avaleha: A polyherbal Ayurvedic formulation	Journal of Drug Research in Ayurvedic Sciences, Volume 8, Issue 2	March 2023
4.	Dr.Animesh Sen	Management of Black Root Disease- Causing fungus Fusarium solani CRP1 by Endophytic Bacillus siamensis CNE6 through its metabolites and activation of plant defense genes	Microbiology Spectrum, e03082-22	February 2023
5.	Dr.Achintya Mitra, .	" Phytopharmaco gnostic profiling of Prunus cerasoides Buch. -Ham. ex D. Don. Heartwood	Indian Journal of Natural Products and Resources, 1(15), 146-155. (2024).	2024
6.	Dr.Achintya Mitra	Pharmacological insights and therapeutic potential of Amalaki Rasayana: A comprehensive review	. Journal of Drug Research in Ayurvedic Sciences, 9(Suppl 2), S160-S166 (2024),	2024

7..	Dr.Achintya Mitra	Clinical evaluation of AYUSH-SL in patients receiving mass drug administration for the treatment of chronic inflammatory lymphedema, a double blind, placebo controlled, metacentric study.	Journal of Vector Borne Diseases, 10-4103.	2025
8.	Dr. Animesh Sen	In-silico approaches to unravel the efficacy of naturally occurring C–C and C–O–C type biflavonoids towards the inhibition of MDM2–p53 interactions.	DOAJ2 (91): 24-Apr-2025	April 2025
9.	Dr. Animesh Sen.	Rye Fiber: Extraction, Identification Methods and Health Benefiting Features. InRye: Processing, Nutritional Profile and Commercial Uses 2025 May 15 (pp. 95-116). Cham: Springer Nature Switzerland.	*10.1007/978-3-031-86613-5_5*	May 2025
10.	Dr. Animesh Sen	Discriminating chemometric analysis to study chemical variation between different altitude Bergenia ciliata (Haw.) Sternb. rhizomes following AQbD approach for high recovery of bergenin. Natural Product Research.	https://doi.org/10.1080/14786419.2026.2613280 Scopus	January 2026
11.	Dr. Animesh Sen	In silico assessment of cyanobacterial alkaloids as probable medications against SARS-CoV-2. In Silico Research in Biomedicine.	Scopus https://doi.org/10.1016/j.insi.2026.100215	January, 2026
12.	Dr. Achintya Mitra,	Post pandemic era: the relevance of Indian traditional system of medicine as a prospective alternate	Web of Science DOI: https://doi.org/10.36094/sc.v91.2025.Post_Pandemic_Era_the_Relevance_of_Indian.Hazra. 281	June 2025

13.	Dr. Achintya Mitra	AYUSH-SL in patients receiving mass drug administration for treatment of chronic inflammatory lymphedema: A doubleblind placebo-controlled multicentric stud	UGC Care62(2): p 202-210, Apr–Jun 2025.	June 2025
14.	Dr. Animesh Sen	Black rice macromolecules and the role of its flour in food sector: a comprehensive review. Journal of Food 25Measurementand Characterizaion**.**	https://doi.org/10.1007/s11694-025-03433-0	26 June 2025
15.	Dr.Achintya Mitra	Misleading Advertisements in Ayurveda – The Present Scenario	AYURESANA AYURESANA Vol. 4, Isue 2. P.38-41	July 2025
16.	Dr.Achintya Mitra	Antidyslipidemic activity of hydro-alcoholic extract of Parijata (Nyctanthes arbor-tristis L.) flower in Wistar albino rats. International	Web of Science DOI: 10.4103/ijar.ijar_84_24	July 2025
17.	Dr. Jagdish Chandra Arya	Diversity Assessment of Angiosperms in Lalitpur District of Uttar Pradesh, India. Journal of Drug Research in Ayurvedic Sciences.	DOI: 10.4103/jdras.jdras_436_24	August 2025
18.	Dr. Animesh Sen	Clinical trials **u**nveiling the potential of phytochemicals across different diseases. InPhytoceuticals in Food for Health and Wellness **2026**	https://doi.org/10.1016/B978-0-443-26494-8.00019-7	RARI, Gangtok
19.	Dr. Jagdish Chandra Arya	Investigation of extraction procedure for lupeol from Uraria picta through experimental designing followed by similarity analysis of different parts.	ScopusSJRhttps://doi.org/10.1007/s00764-025-00378-4	September, 2025

20.	Dr.Achintya Mitra, Dr. Sreelaksmi R.S.	The Risks and benefits Assessment of Integrative use of Ayurveda Medicine and Drugs – Major concern in the present days	UGC Care	September, 2025
21.	Dr. Lijima C	Jeevantyadi avaleha for supporting foetal growth and maternal well-being during the second trimester of pregnancy	Patent Publication in the Indian Patent Journal Publication Number 37/2025, Publication Date12/09/2025	September, 2025
22.	Dr.Animesh Sen	Scytonemin extracted from Lyngbya aestuarii exhibits anti-cancer activity: involvement of c-Myc pathway inhibition. Natural Product Research.	Scopus https://doi.org/10.1080/14786419.2025.2571860	October, 2025
23.	Dr.Animesh Sen, Mr.Kingsuk Sarkar , Dr.Syed Abdul Hakeem Ashraf Dr.Achintya Mitra, Dr.Jagdish Chandra Arya,	Floristic survey of Darjeeling Himalaya with emphasis on endemism and conservation status. Plant Science Today	Scopus https://doi.org/10.14719/pst.11097	2026
24.	Himanshu Sharma [a 1 *], Sanjeev K. Lale [a], Shyam B. Prasad [a], J.C. Arya .	Botanical repositories for Indian medicinal plants: A unified harmonisation approach to authentication, quality control,aconservation	Scopushttps://doi.org/10.1016/j.jep.2025.120130	July 2025

Powers and Duties of Officers and Employees

Regional Ayurveda Research Institute, Gangtok is headed by the Assistant Director In-Charge, who is assisted by the Second Senior Officer, Technical In-Charge and Assistant. The Delegation of Powers made under the Rules and Regulations to Officer declared as Head of Office, RARI, Gangtok is given below.

Delegation of financial and administrative powers to In-Charge of Regional Ayurveda Research Institute (CCRAS), Gangtok

Sl. No	Items/powers	Extent of powers delegated	Remarks
	Financial powers		
1	Power to sanction taxes/ surcharges, renewal of insurance, postal, telegraphic, water, electricity, telephone bills	Full	Subject to budget provision
2	Reimbursement of local conveyance in respect of employees working under them.	As per orders of D/o Expenditure	As amended from time to time
3	Power to incur expenditure on Non-recurring items.	Up to Rs.1.00 lakh	Subject to Budget provision and observations of codal formalities. The accountability for justifiable expenditure fully lies with the officer sanctioning the amount. The officer will also be responsible for compliance of all audit observations.
4.	To incur expenditure on recurring contingency like petrol, diet, Diesel (Central heating), stationery, postage etc.	Full	Subject to budget Provision and rates of diet prescribed by the Council
5.	Purchase of books/ publications, periodicals, journals.	Full	Subject to budget Provision and Requirement of allotted program.
6.	Power to sanction temporary advances from the imprest	Full	Not more than one advance is sanctioned to an Individual, till the adjustment is submitted.
7.	Power to sanction telephone rents, calls, phonograms, where telephone connections are sanctioned by the Council. Audit fees and Advt. charges.	Full	-

8.	Power to sanction expenditure on electricity and water charges.	Full	-
9.	To sanction repair charges of vehicles, equipment, tools, stores, etc.	Full	Through Authorized workshops only
10.	Purchase and supply of uniform for eligible staff.	Full	As per DOPT Guidelines
11	a) Power to sanction advances of pay/ TA/ DA to the employees in whose case transfer orders have been issued by Hqrs, Office. b) Advance of leave salary as per rules	Full	As per rules as amended from time to time
12.	i. To sanction the write-off of irrecoverable stores etc. provided that (i) the loss is not due to theft and (ii) it does not disclose and defect of system or serious negligence on the part of some individual employees of the Central Council, which might possibly call for disciplinary action and to sanction write-off and sell by auction or otherwise in the interest of the Council Declaring on damnum serviceable stores.(The amount of sale proceeds shall be credited to the Hqrs office of the Central Council).	Rs. 50,000/- to all Subordinate Institutes/ Centers	On the recommendations of a Physical Verification Committee (Condemnation Committee) to be constituted according to Rules. **-do-**
13.	Power to sanction festival advance to entitled staff	Full	-
14.	Power to reimburse medical examination fee on first appointment as per scales laid down.	Full	-
15.	Power to sanction LTC and LTC advance in respect of staff working under them except head of Institutes/Centers.	Full	-
16.	Power to sanction cycle/ fan advance to staff	Full	--
17.	Power to Reimburse tuition fee/ CEA in respect of employees working under him.	Full	-
18.	Power to purchase prepared medicines from IMPCL Power to purchase prepared medicines from other approved firms	Rs. 5.00 lakh on each occasion Rs. 2.00 lakh on each occasion	Subject to budget Provision

19.	Power to sanction medical reimbursement claim in respect of officers and staff working at Institutes/	Full	Centers/Units. Claims for treatment taken from private hospitals in emergency to be sanctioned by Director General,CCRAS
20.	Power to sanction annual maintenance contract charges in respect of typewriters, computers, fax, photocopier, duplicating machines, scientific instruments/ equipment, ACs, heaters etc.	Full	AMCs to be awarded to the manufacturers or their authorized dealers. In other cases after observing odal formalities
21.	Power to sanction cash handling allowance	Full as per rules	Fidelity Bond to be kept in safe custody
22.	All kinds of leave except study leave	Full in respect of an employee working under him.	-
23.	Power to sanction all kinds of tours with in the state	Full, except in the case of In-charge	Tours to be sanctioned strictly for Institute's work
24.	To order closure of the office on the basis of ad-hoc decision of the Central Govt. or respective State Govt	Full	As per decision of the local Co-ordination Committee
25.	Power to maintain service book and leave account	Full except In-charge	-
26.	Acceptance of Home Town declaration	Full in respect of employees working under them	-
27.	Issue of Identity Card to Group A, B, C & staff as per instructions regarding issue of identity card and conditions of issue as may be communicated by Hqrs from time to time	Full in respect of employees working under them	-
28.	Power to sanction special increment for promoting small family norms in respect of all group working under him	Full	Subject to observance of Rules.
29.	Power to sanction stagnation increment in respect of staff working under them.	Full in respect of employees working under them	As per rules.
30.	Power to grant ACP/Promotion to group C & D employees working under them.	Full in respect of Group C&D employees in PB- 1 up to Grade pay of Rs.2800	-
31.	Power to fill up the vacancies by promotion in respect of Group C & D arisen due to death &retirement and resignation as per approved RRs	Full in respect of Group C &D employees	Direct recruitment to be made with prior approval of Hqrs Office.
32.	Detention of staff in Institutes by on normal office hours on working days and holidays and payment of Compensation/ Conveyance allowance as per Rules	Full in respect of employees working under them	Detention of female staff should be with their consent

34.	NOC for Indian Passport	Full in respect of employees working under them.	In case of Group A and In charges information to be sent to Hqrs Office
35.	To grant permission for attending of local Seminars by the Scientists/ Research Officers without TA/DA	Two occasions in a year and not more than two scientists at a time	Total absence including journey period not to exceed 7 days at a time and 15 days in a year for all seminars
36.	Power to engagement of contractual/temp staff against the vacant post for a period of maximum one year.	Full	Subject to availability of vacant posts in respect of Group B,C, D and Research Projects. For Group A with approval of Hqrs.

क्षेत्रीय आयुर्वेद अनुसंधान संस्थान
केंद्रीय आयुर्वेदीय विज्ञान अनुसंधान परिषद् आयुष मंत्रालय, भारत सरकार
तादोंग, गंगटोक, सिक्किम- Ph.No.03592-231494
इमेल-arri.gangtok@gov.in

REGIONAL AYURVEDA RESEARCH INSTITUTE
Tadong, Gangtok Sikkim-737102
Central Council for Research in Ayurvedic Sciences
Ministry of Ayush, Government of India
Ph.No.03592-231494

ऑर्गनोग्राम/ORGANOGRAM

महानिदेशक/DIRECTOR GENERAL
प्रो वैद्य रबीनारायण आचार्य /Prof. Vaidya Rabinarayan Acharya

उप महा निदेशक/Deputy Director General
डॉ. एन श्रीकांत/Dr. N. Srikanth

प्रभारी सहायक निदेशक /Assistant Director in Charge
डॉ.ए.जे.वी साईं प्रसाद /Dr. A.J.V Sai Prasad

Out Patient Department (OPD)
- Research Officer (Ay.)
- Pharmacist Grade I
- Office Assistant
- Attendant

Pathological Lab
- Research Officer (Pathology)
- Lab Technician
- Lab Attendant

Survey of Medicinal Plant Unit (SMPU)
- Research Officer(Bot.)
- Research Assistant(Bot.)
- Attendant(Survey)

Office Administration
- Assistant
- Upper Division Clerk
- Lower Division Clerk
- Peon(MTS)
- Ward Boy(MTS)
- Ward Aya (MTS)
- Kitchen Servant (MTS)
- Chowkidar (MTS)
- Safaiwala (MTS)

Sub-Centers (AHCs)
- AHC-Geyzing
- AHC- Jorethang
- AHC - Mangan

The procedure followed in the decision-making process including channels of supervision and accountability

The procedure followed in the decision-making process including channels of supervision and accountability is as set by the Organization Chart of CCRAS and they are followed in the discharge of official functions. This Organization Chart is available at CCRAS's Website (http://www.ccras.nic.in/content/organization-chart). The Organogram of RARI, Gangtok is as below.

Norms set for discharge of functions

As per the Bye-Laws of the Council, proposals are implemented after obtaining approval of the Competent Authorities. The Bye-Laws are available on Council's website at https://ccras.nic.in/memorandum-of-association-and-bye-laws/).

The rules, regulations, instructions, manuals and records, held by it or under its control or used by its employees for discharging its functions

1. Fundamental Rules and Supplementary Rules (FR&SR)
2. CCS(Classification, Control and Appeal) Rules1965
3. CCS(Conduct)Rules1964
4. General Financial Rules(GFR)
5. Delegation of Financial Power Rules
6. CCRAS(Pension) rules in line with CCS(Pension)Rules
7. Central Services (Medical Attendance)Rules
8. Central Civil Service Leave Rules
9. Central Civil Services Leave Travel Concession Rules
10. Central Vigilance Commission (CVC) Manual

A statement of the categories of documents that are held by it or under its control

Files, Registers, and Records, Budget/ Account books relating to Technical and Office Administration

DIRECTORY OF OFFICERS AND EMPLOYEES OF RARI, GANGTOK

S. No.	Name of the Post	Name of Officer/ Official	Contact number (Office)	Email Id
1.	Assistant Director In-Charge	Dr. A. J. V. Sai Prasad	03592231494	prasad.j.v@ccras.nic.in
2.	Research Officer (Ayurveda)	Dr. Debajyoti Das	03592231494	debajyoti.das@ccras.nic.in
3.	Research Officer (Botany.)	Dr. Jagdish Chandra Arya	03592231494	jc.arya78@gov.in aryakunal2010@gmail.com
4.	Research Officer (Ayurveda.)	Dr. Sreelakshmi R.S	03592231494	sreelakshmi.rs@ccras.nic.in sreelakshimirs069@gmail.com
5.	Pharmacist	Mr. Soumya Kanti Patra	03592231494	soumya@ccras.nic.in
6.	Lab Attendant	Mrs. Abigail Shanker	03592231494	abigail@ccras.nic.in ravigalishanker@gmail.com
7.	Upper Division Clerk	Miss. Arpana Mothay	03592231494	arpana@ccras.nic.in mothyarpana@gmail.com
8.	M.T.A.	Mr. Joydev Konai	03592231494	joydev@ccras.nic.in joydevkonai@gmail.com
9.	M.T.A.	Mr. Prakash Sunar	03592231494	prakash@ccras.nic.in sunarprakash1978@gmail.com
10.	M.T.A.	Mr. Binod Baraily	03592231494	binodbry@ccras.nic.in b.baraily@gmail.com

The monthly remuneration received by each of its officers and employees, including the

System of compensation as provided in its regulations

List of Employees with Gross Monthly Remuneration of RARI, Gangtok as

Sl No.	Name of the employee	Designation	Pay level	Gross monthly remuneration
1.	Dr. A. J. V. Sai Prasad	Assistant Director In-Charge	Level-13	3,00,859.00
2.	Dr. Debajyoti Das	Research Officer (Ayurveda)	Level-13,	2,87,507.00
3.	Dr. Jagdish Chandra Arya	Research Officer (Bot.)	Level-11	164,409.00
4.	Dr. Sreelakshmi R.S	Research Officer (Ayurveda)	Level-10	139,048.00
5.	Mr. Soumya Kanti Patra	Pharmacist	Level-5	60,341.00
6.	Smt. Abigail Shanker	Lab Technician	Level-5	87,379.00
7.	Ms.Arpana Mothay	Upper Division Clerk	Level-4	52,945.00
8.	Mr.Joydev Konai	Multi-Tasking Assistant	Level-3	61,492.00
9.	Mr.Prakash Sunar	Multi-Tasking Assistant	Level-3	61,492.00
10.	Mr.Binod Kumar Baraily	Multi-Tasking Assistant	Level-3	61,492.00

The budget allocation to each of its agency, indicating the particulars of all plans, proposed expenditures and reports on disbursements ma

Budget allocation/ Budget received for the last five years

S. No.	Budget Head	2021-22	2022-23	2023-24	2024-25	2025-26
1.	Grant- in-aid Salary	11,771,045.00	125,40067.00	23,300,000.00	15,015,014.00	14,977,294.00
2.	GIA -General	7503,500.00	8,472,025.00	12,372,000.00	13,676,000.00	148,131,53.00
3.	GIA-NER research Activities	_	_	_	1,808,868.00	13,25,000.00
3.	Grant in aid SCSP	2,587,000.00	3,106,000	3,522,000.0	365,4,694.00	33,47,309.00
4.	Gant in aid TSP	4,080,000.00	37,95,000	3,921,430.00	4,300,000.00	38,24,091.00
6.	Grant in aid SAP	113,000.00	113000.00	94,000	1,50,000	1,50,00.00
7.	EMRS	_	_	_	2,592,681.00	19,8360.00
8.	Gant in aid AHC-NEP	4,549,000.00	410,4275.00	5,564,257.00	5,603,650.00	64,00,000.00
9.	Projects (IMR, collaborative, etc) Prakarti	1,402.800.00	_		_	
10	Ayurveda Day	200,000.00	300000.00	150,00.00		
11.	Azadi Ka Amrit Mahotsav	200,000.00	_	_	_	_
12.	THCRP Ayur Rakasha Kit	834,000.00	_	_	_	_
13.	Others Parlamentary committee	500,000.00	_	_	_	_
14.	Yoga Day	40,000.00	_	_	_	_
15.	Ayuraksha Kit and Gridlines for prophylaxis of COVID-19 GIA (General RA Headquarter budget)	30,000.00	_	_	_	_
16.	Poshan Maha		110000.00	_		
17.	Posh2.0	_	3,50,900.00	_	_	
18.	Prakariti Project	_	118,7059.00	1,303,954.00		
19.	Astavarga Project	_	_		1,200,000.0	3,50,000.00
20.	AFI-Chennia	_	_		66,000	_
21.	MEBS	_	5,00,000.00	300,000.00	100,000**.00**	_
22.	Pharamcovigilance KAP				62,000.00	
23.	NMPB	2,500,000.00	250,0000.00	10,75,987.00	1,800,000.00	
24.	Pharamcovigilance	202,418.00	323,115.00	125,232.00	2,43,419	
25.	Capital	_	900,000.00	_	_	
	Total Rupees in Crores	**35,109,963.00**	**33,655,541**	**272,02,873.00**	**50,502,873.00**	**4,50,35,207.00**

Particulars of recipients of concessions, permits authorizations granted by it

The service charges for patients of BPL (Below Poverty Line), Council's employees/pensioners and family members and research cases are exempted. For the Senior Citizens only 40% charges will be taken.

Details in respect of the information available to or held by it, reduced in an electronic form

Information on Reports on Research activities conducted by our parent organization Central Council for Research in Ayurvedic Sciences (CCRAS) at various peripheral institutes is available at (https://ccras.nic.in/).

The names, designations and other particulars of the Public Information Officers/ FAA

Public Information Officer
DR. A.J.V SAI PRASAD
Assistant Director In-Charge
Regional Ayurveda Research Institute, Gangtok

Assistant Public Information Officer
DR. DEBAJYOTI DAS
Research Officer (Ayurveda)
Regional Ayurveda Research Institute, Gangtok

Assistant Public Information Officer
DR. JAGDISH CHANDRA ARYA
Research Officer (Botany)
Regional Ayurveda Research Institute, Gangtok

Other information: -