

ACADEMIC STAFF PROFESSIONAL PROFILE FORM



1. Personal Data

Name: RIRO MWITA MOSES CONCORD
Title/Qualifications: DR, MBCHB, MMED
Department/Unit/Section: INTERNAL MEDICINE
Contact Address: 2552 00202
Position: CONSULTANT PHYSICIAN
Area of Specialization: INTERNAL MEDICINE
Research Interests: HEART FAILURE/ANEMIA IN HIV

2. Conference Presentations

S/No	Presenter	Title of Paper presented	City/Country	Date of Conference	Funding (US\$)
	RIRO M.M	ANEMIA IN HIV	ELDORET	APRIL 2010	-

3. Research

S/ No	Researcher	Year	Title	Donor	Funding (US\$)
	RIRO MM	2009	ANEMIA IN HIV	-	-

4. Funded projects

S/ No	Researcher	Year	Title	Granting Body	Funding (US\$)

5. Publications

S/No.	Author	Year	Title	Journal	ISBN/ISSN Reference No.

6. Consultancy and community service

S/No.	Consultant (s)	Consulting Person/ Body/ Organization	Year	Title Consultancy Service	Payment (US\$)

7. Affiliation to Professional Bodies

S/No	Name of professional body
	MEDICAL PRACTITIONERS AND DENTIST BOARD
	KENYA MEDICAL ASSOCIATION, KENYA CARDIAC SOCIETY
	KENYA ASSOCIATION OF PHYSICIANS

8. National and International awards and Recognitions

S/No	Name of award or Recognition	Awarding Organization/Body	Year

9. External Examination (if any)

S/No	Institution	Year

10. Supervision of postgraduate students (if any)

S/No	Name of student	Thesis title	Status of project(e.g. First year etc)

11. Patents (if any)

S/No	

12. Administrative positions held to date

Please send the completed form to: webmaster@ku.ac.ke