

FORM 3 [See rule 8] Certificate Of Registration ART bank (To be issued in duplicate)



CERTIFICATE NO.:- GJ/ST/ART BANK/2024/043

In exercise of the power conferred under Section 16 (1) of the Assisted Reproductive Technology (Regulation) ACT, 2021 the District Appropriate Authority and <u>CDMO Surat</u> hereby grants registration to the ART Bank named below for purposes of carrying out Assisted Reproductive Technology procedures as per the aforesaid Act for a period of 5 (five years) ending on <u>28/08/2029</u>
 (a) Name and address of the ART Bank:- OORKID HOSPITAL AND IVF CENTRE, 5TH FLOOR,

OORKID HOSPITAL AND IVF CENTRE, 5TH FLOOR, WESTERN VESU POINT, NEAR S.D JAIN SCHOOL VESU,SURAT

Sr.No.	Name of the Post	Name of the Staff	Qualification	Registration No.
1	Director/ Gynecologist	Dr Kajal Mangukiya	M.B.D.G.O	G-43912
2	Andrologist	Dr Jignesh Ghevariya	D.N.B Urology	G-27657
3	Anesthetist	Dr Biren Shah	M.D	G-12583
4	Embryologist	Dr Mansukh Gabani	M.D.	G-8088
5	Staff Nurse	Ms Geeta Gamit	D.A.N.M	F-I-31161

(b) Type of institution(Govt./Private) :- Private

This registration is granted subject to the aforesaid Act and Rules there under and any contravention there of shall result in suspension or cancellation of this certificate of registration before the expiry of the said period of five years

District Registration No. allotted: GJ/ST/ART BANK/2024/043

4. For renewed Certificate of Registration only :-....

Period of validity of earlier Certificate of Registration from...... to........

DISTRICT APPROPRIATE
AUTHORITY
ART/REGULATION/ACT, 2021

ART(REGULATION)ACT, 2021 AND C.D.M.O./CIVIL SURGOEN SURAT

9,00 or

Date :-29/08/2024 District:- Surat

Display one copy of this certificate at a conspicuous place at the place of business.

*Strike out whichever is not applicable or necessary