FORM 3

[See Rule 8]

Certificate of Registration ART Clinic (Level 1/Level 2) / ART Bank

(To be issued in duplicate)

1. In exercise of the powers conferred under Section 16 (1) of the Assisted Reproductive Technology (Regulation) act, 2021 the District Appropriate Authority GUJARAT STATE, hereby grants registration to the ART Clinic procedures as per the aforesaid Act, for a period of Dt; 09/07/2024 Ending on Dt: 08/07/2029

(a)Name And Address of the ART Clinic:- POOJAN IVF CENTRE
PLOT NO - 170/4143, OPP - HARI VALLABH SOCIETY, DEVI CINEMA
ROAD, NARODA, AHMEDABAD PIN CODE - 382330 - Gujarat

Sr. No	Name of the Post	Name of the staff Qualification		Registration No	
1	Director & Gynae- cologist	DR RAKESH PATEL	MD (OBS & GYN)	G-9310	
2	Anaesthetist	DR HIMANSHU PATEL	MD Anaesthesia	G-27757	
3	Andrologist	DR KAUMIL JOSHI	M.S. GEN.SURGERY	G-12232	
4	Sr. Embryologist	AMIT RABARI	M.SCin clinical Embryology and ART		
5	Jr.Embryologist	ANILBHAI GADHIYA	M.sc in Zoology		
6	Counseller	ROSHANI JADAV	M.A in phycology and Diplomain Applied Clinical counselling & PSCHOTHERAPY		
7	Staff Nurse	MANSI VYAS	GNM	A-I/H-I-39813	
	Director & Gynae- cologist	DR RAKESH PATEL	MD (OBS & GYN)	G-9310	

(b)Type of institution (Government or Private) and:- Private

(c)	Type of	facility:-	Level 1	ort	evel 2	1:-	ART	CLINIC	LEVEL-	2

OR

The ART bank named below for purposes of carrying out activities and procedures as	per the aforesaid Act,
for a period of Ending on	
(a)Name and address of the ART Bank:-	********
(b)Type of institution (Govt. / Private):	

- 2.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.
- 3. District Registration No allotted:-

SURGEON GOOD HOSE TO SOLVE TO

DISTRICT APPROPRIATE
AUTHORITY

ART (REGULATION) ACT,2021 AND C.D.M.O.CUM CIVIL SURGOEN, GENERAL HOSPITAL SOLA, AHMEDABAD.

District :- AHMEDABAD. Date:- 09/07/2024.

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

*Strike out whichever is not applicable or necessary.

POOJAN IVF CENTRE 4th Floor, Rengat Signature, Gota Over Bridge, S.G. Highway, Gota. 380060