



**DIRECTORATE OF HEALTH SERVICES.**  
**(MAHARASHTRA STATE)**

Arogya Bhavan, St. George's Hospital Compound, P.D'Mello Road, Mumbai-400 001.

Office: Director(Personal) Jt. Director(Hospital) ADHS (HOTA)	<b>Tel.No.</b> 22621031-36 22621006 22611471 22703861	Website : <a href="http://maha-arogy.gov.in">http://maha-arogy.gov.in</a> Email : <a href="mailto:adhthoa@gmail.com">adhthoa@gmail.com</a> Email : <a href="mailto:jdhs03@gmail.com">jdhs03@gmail.com</a> Fax No. 022-22621034 / 22620234 (DHS) 022-22679044 (Hosp.) 022-22703861 (THAO)
		N0.DHS/THOA/ MGMHsop.Aurangabad /Liver Transp.Team/ D-20/ 17 Date- 27/07/2017

To,  
Dr. R. B. Bohra  
Dean  
Mahatma Gandhi Mission Medical College & Hospital,  
N-6, CIDCO  
Aurangabad-431003.

**Sub:- Transplantation of Human Organ Act 1994**  
**Liver Transplant Team**

Ref- Your application dtd. 16/03/2017

With reference to your application, the **Liver Transplant Team** of specialists whose names have been sent to this office for the approval of the State Appropriate Authority under the provision of the Transplantation of Human Organs Act 1994, for the purpose of Liver Transplantations operations in your hospital, the State Appropriate Authority herewith grants recognition to the **Liver Transplant Team** of your hospital as shown as below. **This is valid for the period of five years from the date of issue.**

**LIVER TRANSPLANT TEAM**

Sr.No.	Designation	Name of Consultant
1	Transplant Surgeon	Dr. Ravi Mohanka, Transplant Surgeon Dr. Gaurav Chaubal, Transplant Surgeon Dr. Somnath Chattopadhyay, Transplant Surgeon Dr. Pravin Suryawanshi, Transplant Surgeon
2	Transplant Physician	Dr. Samir R. Shah, Gastroenterologist Dr. Akash Shukla, Gastroenterologist Dr. Parijat A. Gupte, Gastroenterologist Dr. Ashok Mohite, Gastroenterologist Dr. Vijay S. Gulwe, Gastroenterologist Dr. Sonali Bhattu, Gastroenterologist
3	Transplant Anaesthesiologist	Dr. Sanhita Kulkarni, Anaesthesiologist Dr. Vasanthi Kelkar, Anaesthesiologist Dr. Balaji Asegaonkar, Anaesthesiologist Dr. Pramod Apsingekar, Anaesthesiologist Dr. Pramod Bhale, Anaesthesiologist

- If any doctor resigns the institute, then intimate immediately to the Appropriate Authority.

# Government of Maharashtra



सत्यमेव जयते  
महाराष्ट्र शासन

## Office of the Appropriate Authority

### Certificate of Registration

No. DHS/THOA/MGMMEDCOLL/EDC/F.No /D-20/2015

This is to certify that MAHATMA GANDHI MISSION, MEDICAL COLLEGE & Hospital located at CIDCO, AURANGABAD has been inspected by the Appropriate Authority and certificate of registration is granted for performing the organ transplantation of the following organs:-

1. EYE DONATION CENTER
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

This certificate of registration is valid for a period of five years from the date of issue .

Mumbai:

Date: 05/08/2015

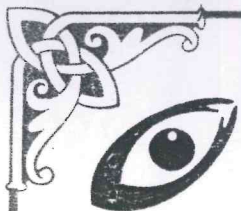


*[Signature]*  
Appropriate Authority  
and

Director Health Services,  
Maharashtra State, Mumbai

संयुक्त प्रधिकरण

संचालक आरोग्य सेवा,  
महाराष्ट्र राज्य, मुंबई



# Eye Bank Association of India



E.B.A.I  
LET YOUR EYES CHANGE SOMEONE'S LIFE

Become Part of the **Eye DoNation**

Membership No. Inst-L-2135

Date: 18<sup>th</sup> December 2013

Certified that MGM Medical College & Hospital

(Dept. of Ophthalmology), Aurangabad, M.S.

is an Institutional / Individual Life Member of  
Eye Bank Association of India.

Dr. Samar K. Basak  
President



Brig. Dr. J.K.S. Parihar  
Secretary



No. 4401



## नोंदणी प्रमाणपत्र

याद्वारे प्रमाणपत्र देण्यात येते की, खाली वर्णन केलेली सार्वजनिक विश्वस्तव्यवस्था ही आज, मुंबई सार्वजनिक विश्वस्तव्यवस्था अधिनियम, १९५० (सन १९५० चा मुंबई अधिनियम २९) या अन्वये Aurangabad Region, Aurangabad येथील सार्वजनिक विश्वस्तव्यवस्था नोंदणी कार्यालयात योग्य रितीने नोंदण्यात आलेली आहे.

सार्वजनिक विश्वस्तव्यवस्थेचे नाव : Zonal Transplantation

Coordination Center, Aurangabad.

सार्वजनिक विश्वस्तव्यवस्थांच्या नोंदणी पुरतकातील क्रमांक : E - 1298 (A. bad)

Dr. Sudhir Gajanan Kulkarni

यांस प्रमाणपत्र दिले.

आज दिनांक 12 04.2016 २०१६

रोजी माझ्या सहीनिशी दिले.

शिवका



सही [Signature]  
12/4/16  
खान्दानिक वसाहती व शासकीय  
पदनामांक [Number] विभाग, कोरगाव



# Zonal Transplant Co-ordination Center Aurangabad

Registered with Charity Commissioner No. E - 1298 (A. bad)

**ZTCC**  
Completing lives

Nephrology Dept. 5th Floor, MGM Medical College & Hospital, N-6, Cidco, Aurangabad 431003

Tel.: 0240 6601155 Mobile: 9422713691, 9975704874 Email: ztccaurangabad2016@gmail.com

ZTCC/A'Bad /2017/

Date: 28.07.2016



## Registration Certificate

This is to certify that MGM Medical College & Hospital Aurangabad is registered with Zonal Transplant Co-ordination Center Aurangabad on 28 July 2016. ZTCC has received Rs 25,000/- on 28 July 2016 as registration fee. The hospital is permitted to undertake cadaver transplant as per ZTCC norms.

Dr. S.G.Kulkarni

**PRESIDENT**

**ZTCC AURANGABAD**

ZONAL TRANSPLANT COORDINATION CENTRE

Department of Nephrology

MGM Medical College and Hospital

Aurangabad.



Govt. of Maharashtra, Health Services  
Jt. Director of Health Services (Leprosy & TB)

"AROGYA BHAVAN" Opp. Vishrantwadi Police Station,  
Alandi Road, Yerwada, Pune-411006.

Jt. Director - (020) 26686955  
Dy. Director - 26686951  
Office - 26686952-54  
Fax - 26686956



Section wise e-mail  
TB section- stomh@mntcp.org  
Lep section - jtlepnm@rediffmail.com  
Est section - jdhsst99@gmail.com

**Dr. Sanjiv Kamble**  
Joint Director (Leprosy & TB)

No. Jt. DHS/TB&Lep/RNTCP/CBNAAT/ /2017  
Date -23/11/2017

17721

**TO WHOMSOEVER IT MAY CONCERN**

This is to certify that the following items are transported to below mentioned address under RNTCP against PO NO. IND/IH/17/7017/20024893 through Cepheid, HBDC SAS, ViraSolelh, 81470 Maurens-Scopont, France.

Receiver's Name & Address: Dr Muley- HOD Microbiology,

Department of Microbiology ,

MGM Medical College,

Cidco N-5, Near Seven Hills Bridge,

Aurangabad 431003, MH

Product Description & Qty:-

CB-NAAT GeneXpert-IV-4 Machine -1 Qty.

The above mentioned item(s) is being carried from Delhi to Aurangabad (Department of Microbiology, MGM Medical College, Cidco N-5, Near Seven Hills Bridge, Aurangabad 431003, MH). These item(s) is not for sale or any other commercial purpose, whatsoever. The above item(s) is for free distribution in India as per TB program of Ministry of Health, Govt. of India.

The item(s) does not carry any commercial value. As such above mentioned item(s) is already exempted from payment of Sales Tax/ Entry Tax/ Toll, etc. since this will be free distribution in India as per TB program under Ministry of Health, Govt. of India.



*(Signature)*  
(Dr. Sanjiv Kamble)

Joint Director of Health Services  
(Leprosy & TB) Pune



औरंगाबाद महानगरपालिका, औरंगाबाद  
(आरोग्य विभाग)

आपका क्र. 66/मनपा/ 21/12/17

जा.क्र.मनपा/आरोग्य/ क्षयरोग/२०१७/ २६५

दिनांक :- 20/12/2017

अत्यंत महत्वाचे/तातडीचे

प्रति

अधिष्ठाता

एम.जी.एम.महाविद्यालय  
व रुग्णालय, औरंगाबाद.

विषय :- CBNAAT Machine Installation बाबत.

संदर्भ :- मा.सहसंचालक, आरोग्य सेवा (कुष्ठ व क्षय), पुणे यांचे पत्र दि.१७.११.२०१७

महोदय,

सुधारित राष्ट्रीय क्षयरोग नियंत्रण कार्यक्रमांतर्गत एम.जी.एम.महाविद्यालय व रुग्णालय येथे सन २००९ पासून टी.बी.युनिट कार्यान्वीत असून या टी.बी.युनिटचे काम यशस्वीरीत्या सुरु आहे. आपल्या महाविद्यालयामार्फत आजपर्यंत ज्या प्रमाणे सहकार्य प्राप्त होत आहे, ते असेच सुरु राहिल अशी अपेक्षा.

तसेच औरंगाबाद शहरातील व इतर एम.जी.एम.संशयित रुग्णांच्या तपासणीसाठी या कार्यक्रमांतर्गत CBNAAT Machine शासकीय वैद्यकीय महाविद्यालय व रुग्णालयाप्रमाणेच एम.जी.एम.महाविद्यालयासाठी सुध्दा मंजूर करण्यात आलेली आहे, या मशीनवर तपासणी बाबतच्या कामकाजाचे प्रशिक्षण या कार्यक्रमांतर्गत कार्यरत एम.जी.एम.टी.बी.युनिट येथील प्रयोगशाळा तंत्रज्ञ, मंजूषा छापेकर व एस.टी.एल.एस. श्री.योगेंद्र काथार यांना दिनांक २९ ते ३० डिसेंबर २०१७ रोजी पुणे येथे देण्यात येणार आहे.

शासनातर्फे प्राप्त होणारे CBNAAT Machine एम.जी.एम.महाविद्यालय व रुग्णालयातील Department of Microbiology येथे Install करावयाची आहे, त्यासाठी या विभागात ०१ रुमची आवश्यकता आहे.

करिता CBNAAT Machine Installation साठी Department of Microbiology येथे ०१ रुम उपलब्ध करून देण्याबाबत संबधीत विभागास आपल्या स्तरावरून आदेशीत करावे हि विनंती.

सहकार्याच्या अपेक्षेसह..

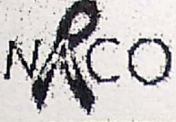
MGM'S Mahatma College,
Inward: 7708
Date 21-12-17

TO  
DR Bhalchandra madan  
22/12

आरोग्य वैद्यकीय अधिकारी  
महानगरपालिका, औरंगाबाद.

SE VP Bansal Appoint 21/12 as  
(incharge Gene expert)

Received on 22/12/2017  
(very late) Bhalchandra



जिल्हा एड्स प्रतिबंध व नियंत्रण पथक  
सामान्य रुग्णालय, औरंगाबाद



पत्ता- जिल्हा सामान्य रुग्णालय, चिकलठाणा औरंगाबाद. ४३१००१

Email :- [dpoaurangabad@mahasacs.org](mailto:dpoaurangabad@mahasacs.org)

आरोग्य सेवा

जा.क्र.सारुऔ/डापकू/आयसीटीसी/ २५१ /१९दि:-०३/०४/२०१९

प्रति,  
विभाग प्रमुख, सुक्ष्मजीवशास्त्र विभाग,  
महात्मा गांधी मिशन महाविद्यालय व रुग्णालय,  
औरंगाबाद

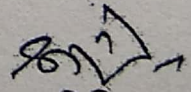
विषय:- एकात्मिक सल्ला व चाचणी केंद्र, (आयसीटीसी) बाबत.

संदर्भ:- विभाग प्रमुख, सुक्ष्मजीवशास्त्र विभाग, महात्मा गांधी मिशन महाविद्यालय व रुग्णालय,  
औरंगाबाद यांचा ई-मेल दिनांक. २९/०३/२०१९

उपरोक्त संदर्भीय विषयानुसार आपणास कळविण्यात येते की, महाराष्ट्र राज्य एड्स नियंत्रण  
सोसायटी, मुंबई कार्यक्रमांतर्गत महात्मा गांधी मिशन महाविद्यालय व रुग्णालय, औरंगाबाद येथे जुलै  
२००२ रोजी पीपीटीसीटी केंद्र सुरु करण्यात आले.

त्यानंतर सदर केंद्राचे नांव २००६ मध्ये एकात्मिक सल्ला व चाचणी केंद्र (आयसीटीसी) करण्यात आले.  
सदर आयसीटीसी केंद्र, महात्मा गांधी मिशन महाविद्यालय व रुग्णालय, औरंगाबाद येथे आज पावतो  
कार्यान्वित आहे.

करीता आपल्या माहितीस्तव सादर.

  
जिल्हा शल्य चिकित्सक  
सामान्य रुग्णालय, औरंगाबाद

प्रत:- मा.प्रकल्प संचालक, मराएनिसो मुंबई यांना माहितीस्तव सविनय सादर.





जिल्हा एड्स प्रतिबंध व नियंत्रण पथक  
सामान्य रुग्णालय, औरंगाबाद



पत्ता- शासकिय वैद्यकिय महाविद्यालया(घाटी)समोर,पानचक्की जवळ , औरंगाबाद.४३१००१

फोन कार्यालय:  
(०२४०)२३३१०१९, २३४३८९०

फॅक्स: २३४१८९२

Email :- [dapcuaurangabad@Gmail.com](mailto:dapcuaurangabad@Gmail.com)

आरोग्य सेवा

जा.क्र.सारुऔ/डापकू/ प्रमाणपत्र/613-657१९ दि:-२६/०८/२०१९



### प्रमाणपत्र

प्रमाणित करण्यात येते की,महाराष्ट्र राज्य एड्स नियंत्रण संस्था,मुंबई अंतर्गत कंत्राटी पध्दतीने महात्मा गांधी मिशन महाविद्यालय व रुग्णालय,औरंगाबाद येथे आयसीटीसी केंद्रात खालील प्रमाणे कर्मचारी कार्यरत असून त्यांना एकत्रित वेतन खालील प्रमाणे आहे. करीता हे प्रमाणपत्र देण्यात येत आहे.

अं. क्र	कर्मचा-यांचे नांव	पदनाम	एकत्रित वेतन
१	श्री. बेग शेफी ईसाक बेग	समुपदेशक	रुपये.२२,९५०/-
२	श्री.बबलु भगवान गायकवाड	समुपदेशक	रुपये.१७,९५०/-
३	श्री.सुरेश मुरलीधरराव दळवी	प्रयोगशाळा तंत्रज्ञ	रुपये.२२,९५०/-

जिल्हा कार्यक्रम अधिकारी,  
जिल्हा एड्स प्रतिबंध व नियंत्रण पथक,  
सामान्य रुग्णालय,औरंगाबाद  
Dist. Program Officer  
DAPCU, Auraangabad

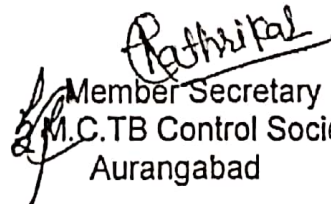
4117110  
No./RNTCP/Health/ 125-6 /2018  
Office of the Municipal Corporation  
Aurangabad. Ph.no.2356773  
Date 27 / 09 /2018

To  
**Manjusha Chhapekar**  
Laboratory Technician  
MGM TB Unit-2

Sub:- Appointed as **Lab.Technician** on Contract basis under M.C.TB Control Society,  
Aurangabad

1. You are appointed as **Lab.Technician** on contract basis, on the establishment of M.C.TB Control Society Aurangabad and not on the establishment of Municipal Corporation Aurangabad.
2. Your continuation is **subject to the final decision of Honorable division bench High court of Bombay bench at Aurangabad in writ petition No.2474/2016** for a period of eleven months (05.03.2018 to 04.03.2019). Your appointment is only for the project, as soon as the RNTCP project is over, the appointment on contract basis will automatically stand expired. No continuation under any circumstances shall be given after the expiry of RNTCP project.
03. As a **Lab Technician** you will be paid a total monthly remuneration of **Rs.17,726/-** which includes all allowances.
04. Before joining the post you should go in contract with M.C.TB control society Aurangabad and the agreement should be typed on Rs.100/- revenue bond paper.
05. Your appointment is under M.C. TB Control Society and you should work as per the job chart of **Lab.Technician** under M.C.TB Control Society and instruction given by the superior authorities from time to time.
06. As a **Lab.Technician** under RNTCP project you are liable to be posted any where in the Aurangabad city.
07. No residential accommodation shall be provided. Candidates have to their own arrangement.
08. Rules and regulations for Casual Leaves and holidays are as per state Government services.
09. Work station (Headquarter) is C.T.C. / TB Unit Municipal Corporation Aurangabad. You should join immediately at above mention headquarter and send the joining report through C.T.O. of to City TB Center Municipal Corporation Aurangabad.
10. No TA / DA is allowed for joining and during services rendering period.
11. You should join immediately and definitely within seven days of receipt of the order. If you fail to join, your appointment as **Lab.Technician** will be treated as cancelled.
12. This is full time job. No private practice or part time employment is allowed.

Approved by Hon'ble  
Chairman

  
Member Secretary  
M.C.TB Control Society,  
Aurangabad

E:/Appointment Order/ RNTCP Orders

4. He / She will not be entitled for any Dearness Allowance, House Rent Allowances etc. over and above the fixed remuneration.
5. Be it clearly understood and agreed that his / her assignment is being made on contract basis for a fixed period as stated above. His / Her assignment will automatically come to an end on the expiry of the specified period and no notice or notice pay, retrenchment compensation will be payable to him / her by the Society. The services are, however, liable to be terminated by the society before the expiry of the specified period of his / her assignment with immediate effect without noticed on the following grounds:-
  - a. The breach of terms and conditions by him.
  - b. Discontinuation of financial assistance from Government of India to , Municipal Corporation TB Control Society, Maharashtra, RNTCP, Aurangabad.
  - c. Directions issued by Government of India.
  - d. On grounds of punctuality, discipline, performance or conviction for offence involving moral turpitude.
6. Since his / her appointment is being made for a specified period he / she will neither have any right nor a lieu on the post held by him / her. Also he / she will not claim regular employment even if there is such a vacancy for the post Held by him / her Other wise if he wants to leave the service, he / she can do this by serving one month notice or salary of one month if one month notice is Not served no compensation or remuneration of un-expired period of contract will be payable by the Society if his / her services are terminated Or he / she resigns from the services of the Society before the specified Period of the contract.
7. He / She will not divert or give out to any one in any manner particulars or Details of any of the project or operations carried out by Society which are of Confidential nature.
8. His / Her assignment is made on the basis of his particulars such as Qualification etc. as given in his application and in case any information is given by him is found false or incorrect, his / her appointment will be deemed void and liable to termination without any notice/salary in lieu of notice or any reasons thereof.
9. He / She will be bound by the rules, regulation and office orders in force and framed by the Society from time to time and the same will from part of his terms and conditions of employment with the society as and when made effective.
10. His / Her continuance in service with the society is subject to his remaining physically and mentally fit.
11. His / Her working hours will be generally from 10.00 a.m. to 5.45 p.m. on all working days of every month. This timing can however, be changed as per the requirement of the society.

12. He / She will be allowed to enjoy Public Holidays declared from time to time by the Government in addition to weekly holidays. He will be entitled to get 8 (eight) days casual leave and 7 (seven) Medical leave in one year contract. Any other kind of leave is not admissible to him / her during his / her tenure of contract. The leave as provided above will be available proportionately according to his appointment.
13. He / She will discharge his / her duties efficiently to the satisfaction of the City Tuberculosis Officer.
14. As contractual salary and the full remuneration Mr/Mrs Manjusha Chhapekar will be paid at the rate of Rs. 17726/- per month.
15. He / She will not initiate any legal proceeding against the Society.
16. He / She will provide his services to the Society in legal matter or the matter of audit purpose related to his / her job responsibilities as and when required after leaving/resigning the job in the Society.
17. It will be his personal responsibility to return all the advances and material made available by society to discharge the duties.

If the above terms and conditions are acceptable to you, please sign the Accompanied Office copy and return the same for office record.

Rathikar

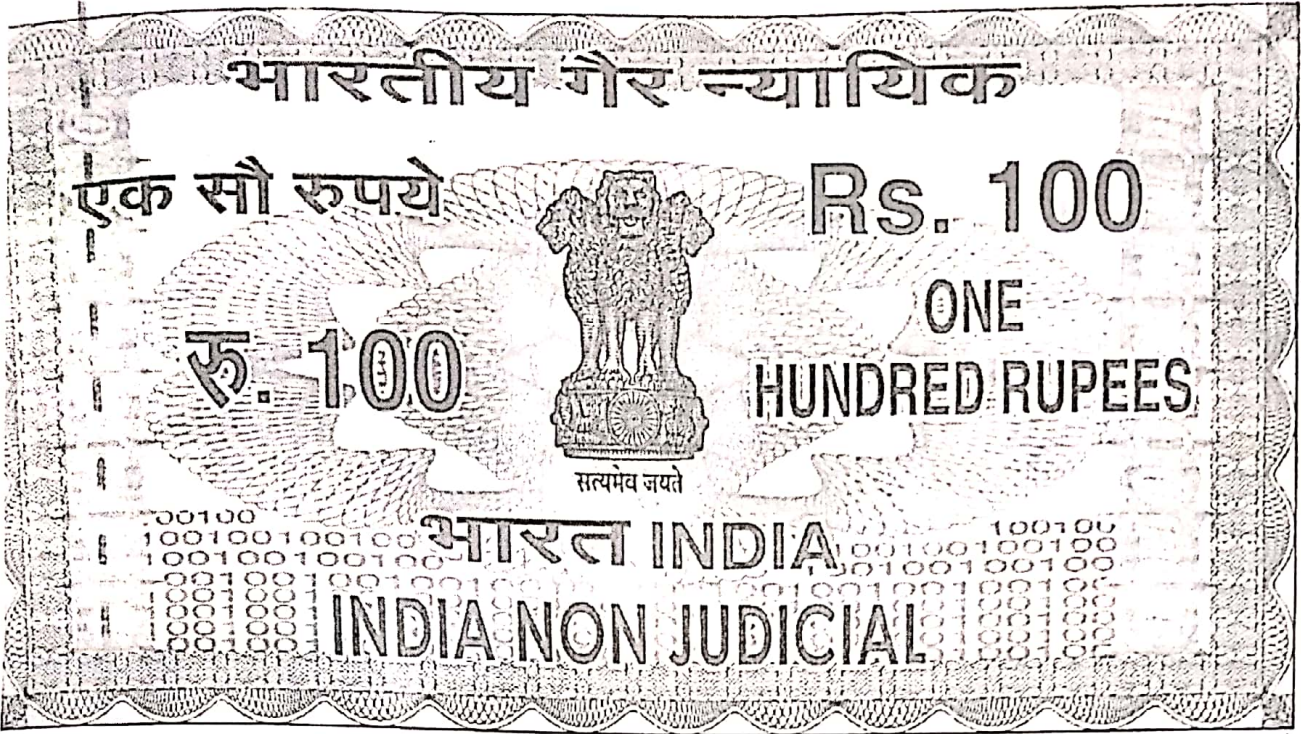
City Tuberculosis Officer  
Municipal Corporation TB Control Society,  
Maharashtra-RNTCP, Aurangabad.

I accept the offer and terms and conditions mentioned in the letter.

Signature Manjusha Chhapekar  
Name - Manjusha Devidasrao Chhapekar  
Designation - Lab. Technician  
Place - Aurangabad.  
Date - 5/02/19

Signature, Name and Address of two witness.

1. Santosh M. Panshankar  
2. Digambar D. More



महाराष्ट्र MAHARASHTRA

© 2018 ©

TX 971460

महाराष्ट्र कोषागार  
मंत्रालय औरंगाबाद  
18 SEP 2010  
शंक प्रमुख लिपीक  
व.को.अ. औरंगाबाद.

अ.क्र 30527  
दिनांक 24/09/18  
किंमत 2000/-  
हस्ते कोणाकरिता  
मैजूबा, इंदिरा सायकल

साब अल प्रमोद म. कुलकर्णी  
मुद्रांक दिवेला  
एन.व. सिविल औरंगाबाद.  
3101056

CONTRACT

Contract between the City Tuberculosis Officer, Municipal Corporation TB Control Society, Maharashtra, RNTCP, Aurangabad and Mr / Mrs. Manjusha Chhapekar who is assigned as Lab. Technician on contract basis.

The contract is entered between the City Tuberculosis Officer, Municipal Corporation TB Control Society, Maharashtra, RNTCP, Aurangabad on one part and Mr/Mrs. Manjusha Chhapekar on the other whereby City Tuberculosis Officer, Municipal Corporation TB Control Society, Maharashtra, RNTCP, Aurangabad agrees to assign Mr/Mrs. Manjusha Chhapekar the post of Lab. Technician on contract basis and not on service basis. Mr/Mrs. Manjusha Chhapekar agrees to execute the tasks assigned to him / her by the City Tuberculosis Officer, Municipal Corporation TB Control Society, Maharashtra, RNTCP, Aurangabad as per the following terms and conditions.

1. This appointment is purely on contract basis for project purpose.
2. This Project is funded by the Government of India for a specific period.
3. His / Her appointment is from 05/2/18 To 04/02/19 From----- To----- From----- To----- For a period of-----



# INDIAN PHARMACOPOEIA COMMISSION

MINISTRY OF HEALTH & FAMILY WELFARE, GOVERNMENT OF INDIA  
SECTOR-23, RAJ NAGAR, GHAZIABAD- 201 002.

Tel No: 0120- 2783392, 2783400, 2783401; Fax: 2783311  
Mail: [lab.ipc@gov.in](mailto:lab.ipc@gov.in), [mvpi.ipcindia@gmail.com](mailto:mvpi.ipcindia@gmail.com) Web: [www.ipc.gov.in](http://www.ipc.gov.in)

No. P.22014/01/2020-21

Dated: April 12, 2021

To

Dr. Rajendra Bohra  
Chairman,  
MGM Medical College, Aurangabad  
Maharashtra-431003

**Sub: Recognition as Medical Device Adverse Event Monitoring Centre (MDMC) under Materiovigilance Programme of India (MvPI)-Reg.-**

Sir,

This is with reference to the letter of Intent received vide your e-mail dated March 17, 2021 to participate as a Medical Device Adverse Event Monitoring Centre (MDMC) under the Materiovigilance Programme of India (MvPI). It is indeed a matter of great pleasure to bring to your kind notice that the Indian Pharmacopoeia Commission (IPC)-National Coordination Centre (NCC) has agreed, in principle, to designate your Institute as one of the MDMCs w.e.f. **April 05, 2021.**

2. Accordingly, your Centre is expected to collect and collate data on adverse events associated with medical devices under MvPI immediately and report the same to NCC, from time to time.
3. In order to ensure smooth functioning of MDMC, NCC-MvPI shall continuously provide logistics and technical support through training programmes, medical device updates, resource materials etc.
4. Based on the performance of your Center, NCC-MvPI, IPC may also provide Research Associate at the respective center as and when required, as per norms.

Kindly acknowledge receipt of this letter and convey your acceptance via e-mail-[shatrunjay.ipc@gov.in](mailto:shatrunjay.ipc@gov.in) within 15 working days.

With kind regards,

Yours faithfully,

  
(Dr V. Kalaiselvan)

Senior Principal Scientific Officer

Copy for information to: -

1. Dr. Deepak Bhosle, Coordinator, MDMC, MGM Medical College Aurangabad, Maharashtra.

# National Accreditation Board for Hospitals & Healthcare Providers

(Constituent Board of Quality Council of India)

## *Certificate of Accreditation*

MGM Medical College Hospital and Medical Center Research Institute (MCRI)  
Central Naka Road, N-6, CIDCO  
Aurangabad - 431003, Maharashtra

*has been assessed and found to comply with NABH Accreditation Standards for Hospitals. This certificate is valid for the Scope as specified in the annexure subject to continued compliance with the accreditation requirements.*

Valid from : September 16, 2018  
Valid thru : September 15, 2021

Certificate No.  
H-2018-0573



**Dr. Rajesh B. Goel**  
Registrar

MGM Institute of Health Sciences  
(Deemed University u/s 3 of UGC Act, 1956)  
Navi Mumbai- 410 209



**Dr. Harish Nadkarni**  
Chief Executive Officer

National Accreditation Board for Hospitals & Healthcare Providers, 5<sup>th</sup> Floor, ITPI Building, 4A, Ring Road, IP Estate, New Delhi 110 002, India  
Phone: +91-11-42600600, Fax: +91-11-2332 3415 • Email: helpdesk@nabh.co • Website: www.nabh.co



NABH and the NABH Accreditation Standards for Hospitals are ISQua Accredited



**National Accreditation Board for  
Hospitals & Healthcare Providers**

(Constituent Board of Quality Council of India)

NABH/H-2016-1090/L-01/2021/9968

December 24, 2021

To,

**Dr Rajendra Bohra**

Dean

MGM Medical College Hospital and Medical Center Research Institute

Central Naka Road N-6, CIDCO

Aurangabad – 431003, Maharashtra

Mobile: 9225304660

E-mail: [mgmcha@themgmgroup.com](mailto:mgmcha@themgmgroup.com)

**Sub.: Extension of Accreditation of MGM Medical College Hospital and Medical Center  
Research Institute, Aurangabad**

Dear Dr Rajendra Bohra,

This has reference to the request for continuation of your status as an accredited organization after the expiry of your accreditation on 15-09-2021.

We have noted from our records that a renewal assessment is conducted on 26<sup>th</sup>, 27<sup>th</sup> & 28<sup>th</sup> November 2021.

Keeping in view the current constraints owing to the Covid-19 pandemic, NABH has decided to provide extension of validity of accreditation till March 31, 2022 or till the decision on the renewal application is taken by the accreditation committee, whichever is earlier.

Please ensure the HCO has cleared all due fee payment.

Thanking you,

Sincerely yours,

(Dr. Atul Mohan Kochhar)  
CEO-NABH





# INDIAN RESUSCITATION COUNCIL

authorizes

**MGM Medical College**

located at

**Cidco N 6 Aurangabad Maharashtra- 431005**

as its

**Comprehensive Resuscitation  
Training Centre (CRTC)**

to conduct its resuscitation courses for the period

19-11-2020

to

19-11-2022

**Dr. SSC Chakr Rao**

Chairman

Indian Resuscitation Council

**Dr Rasesh Diwan**

National Course Director

Indian Resuscitation Council



Government of Maharashtra

FORM 16

**CERTIFICATE OF REGISTRATION FOR PERFORMING ORGAN/TISSUE  
TRANSPLANTATION/RETRIEVAL AND OR TISSUE BANKING**

[Refer Rule No. 24(2)]

This is to certify that **MAHATMA GANDHI MISSION MEDICAL COLLEGE & HOSPITAL** Hospital/Tissue Bank located at **N-6, CIDCO, AURANGABAD-431003** has been inspected and certificate of registration is granted for performing the organ/tissue retrieval/Transplantation/Banking of the following organ(s)/tissue(s) (mention the names) under the Transplantation of Human Organ Act, 1994(42 of 1994):-

**1. CORNEA TRANSPLANT CENTRE**


This certificate is valid for a period of five years from the date issue.

This permission is being given with the current facilities and staff shown in the present application form. Any reduction in the staff and /or facility must be brought to the notice of the undersigned.

Place:- Mumbai

Date :- 23/04/2019



  
Signature of Appropriate Authority  
समुचित प्रधिकरण  
Seal..... संचालक आरोग्य सेवा,  
महाराष्ट्र राज्य, मुंबई



Handwritten initials and date: 23/4/19



**DIRECTORATE OF HEALTH SERVICES.  
(MAHARASHTRA STATE)**

Arogya Bhavan, St. George's Hospital Compound, P.D'Mello Road, Mumbai-400 001.

Office: Director(Personal) Jt. Director(Hospital) ADHS (THOA)	Tel.No. 22621031-36 22621006 22611471 22703861	Website : <a href="http://maha-arogya.gov.in">http://maha-arogya.gov.in</a> Email : <a href="mailto:adhstboa@gmail.com">adhstboa@gmail.com</a> Fax No. 022-22621034 / 22620234 (DHS) 022-22679044 (Hosp.) 022-22703861 (THOA)
		No.DHS/THOA/MGM med College & Hosp,A'bad./Cornea TranspTeam/19 Date- 23/04/2019

To,  
Dean,  
MGM Medical College & Hospital,  
N-6, Cido, Aurangbad-431003..

**Sub:- Transplantation of Human Organ Act 1994 & Amendment 2011  
Cornea Transplant Team**

Ref:- Your application dtd. 15/01/2019

With reference to your application, the **Cornea Transplant Team** of specialists whose names have been sent to this office for the approval of the State Appropriate Authority under the provision of the Transplantation of Human Organs Act 1994, for the purpose of Cornea Transplantations operations in your hospital, the State Appropriate Authority herewith grants recognition to the **Cornea Transplant Team** of your hospital as shown as below. This is valid for the period of five years from the date of issue.

**CORNEA TRANSPLANT TEAM**

Sr.No.	Designation	Name of Consultant
1	Transplant Surgeon	Dr. Sarika Gadekar, Ophthalmologist
2	Transplant Anesthesiologist	Dr. Vasanti Kelkar, Anesthesiologist Dr. Ajita Annachaire (Dunk), Anesthesiologist Dr. Anuradha Jogdand, Anesthesiologist

- If any doctor resigns the institute, then intimate immediately to the Appropriate Authority.
- If any new doctor is joining to your institute, then before joining the team, the institute has to take the permission on behalf of the doctor from Appropriate Authority, without which the newly joined doctor cannot work in the transplantation program.

**Dr. Anupkumar Yadav**  
Commissioner (Health & Family welfare)  
and  
Director Health Services, Mumbai



Handwritten initials/signature



Government of Maharashtra

FORM 16

**CERTIFICATE OF REGISTRATION FOR PERFORMING ORGAN/TISSUE  
TRANSPLANTATION/RETRIEVAL AND OR TISSUE BANKING**

[Refer Rule No. 24(2)]

This is to certify that **MAHATMA GANDHI MISSION MEDICAL COLLEGE & HOSPITAL** Hospital/Tissue Bank located at **N-6, CIDCO, AURANGABAD-431003** has been inspected and certificate of registration is granted for performing the organ/tissue retrieval/Transplantation/Banking of the following organ(s)/tissue(s) (mention the names) under the Transplantation of Human Organ Act, 1994(42 of 1994):-

**1. CORNEA TRANSPLANT CENTRE**


This certificate is valid for a period of five years from the date issue.

This permission is being given with the current facilities and staff shown in the present application form. Any reduction in the staff and /or facility must be brought to the notice of the undersigned.

Place:- Mumbai

Date :- 23/04/2019



  
Signature of Appropriate Authority

समुचित प्रधिकरण  
Seal..... सथा

संचालक आरोग्य सेवा,  
महाराष्ट्र राज्य, मुंबई



2/2/19



National Accreditation Board for  
Testing and Calibration Laboratories

**CERTIFICATE OF ACCREDITATION**

**MGM'S CENTRAL PATHOLOGY LABORATORY,  
MAHATMA GANDHI MISSION HOSPITAL**

has been assessed and accredited in accordance with the standard

**ISO 15189:2012**

**"Medical laboratories - Requirements for quality and  
competence"**

for its facilities at

N-6, CIDCO, AURANGABAD, MAHARASHTRA, INDIA

in the field of

**Medical Testing**

Certificate Number: MC-2839

Issue Date: 29/06/2021

Valid Until:

28/06/2023

This certificate remains valid for the Scope of Accreditation as specified in the annexure subject to continued satisfactory compliance to the above standard & the relevant requirements of NABL.  
(To see the scope of accreditation of this laboratory, you may also visit NABL website [www.nabl-india.org](http://www.nabl-india.org))

Name of Legal Identity : MAHATMA GANDHI MISSION HOSPITAL

Signed for and on behalf of NABL



N. Venkateswaran  
Chief Executive Officer



No.5/4 1-7/2019-NCD-II

Dated: 14/12/20

To

The Dean,  
MGM Medical College  
Sector- 17, Kamothe  
Navi Mumbai-410 209

Sub: Adhoc project entitled "Randomized controlled study to assess effectiveness and acceptability of mobile app based interventional tool for cardiovascular disease self- management and risk factor controlled among diabetic patients" under Dr. Ipseeta Ray Mohanty, Mumbai .

Sir,

Reference the above mentioned project.

The Competent Authority of the ICMR sanctions the continuation of the above mentioned project for its remaining nine months of the 2<sup>nd</sup> year duration w.e.f. 01.12.2020 to 31.08.2021 with budget allotment of Rs.4,24,538/- (Rupees four lakhs twenty four thousand five hundred and thirty eight only) as per budget statement enclosed.

The other term and conditions will be remain the same as referred this office letter of even number dated 02.09.2019.

Yours faithfully,

(Ishwar Likhar)  
Administrative Officer  
for Director General

Copy to:

1. Dr. Ipseeta Ray Mohanty, Professor, Pharmacology, M.G.M Medical College, Sector- 17, Kamothe, Navi Mumbai-410 209
2. Accounts Section – V (RFC No: NCD/Adhoc/70/2019-20 dated 30.08.2019)
3. IRIS Cell (ID No.2019-0502)
4. Administrative Officer, (NCD).
5. Mr. Hemant Kumar, Sr. Technical Officer, (NCD)

cc to PI project / secy  
cc to IGSA,  
to PG. Secy

ED  
7304  
SIGN : 23/12/20

for Director General

INDIAN COUNCIL OF MEDICAL RESEARCH  
ANSARI NAGAR, NEW DELHI -110029.

No. 5/4/1-7/19-NCD-II

Date: 30-8-19

To

✓ The Dean  
MGM Medical College,  
Sector-18 Kamothe,  
Navi Mumbai 410 209

Subject: - " Randomized controlled study to assess effectiveness and acceptability of mobile app based interventional tool for cardiovascular disease self-management and risk factor control among diabetic patients " under Dr. Ipseeta Ray Mohanty, Mumbai.

Sir,

The Director-General of the Council sanctions the above mentioned research scheme initially for a period of one year from 01-09-2019 subject to extension upto the total duration specified in para 3(3) below.

The Director-General of the Council also sanctions the budget allotment of Rs. 11,26,750/- (Rupees eleven lakh twenty six thousand seven hundred fifty only) as detailed in the attached statement for the period ending the 31-08-2020.

The grant-in-aid will be given subject to the following conditions:-

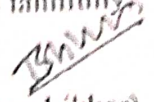
1. The payment of the grant will be made in lump-sum to the head of the Institution. The first instalment of the grant will be paid generally as soon as a report regarding the commencement of the project and appointment of the staff is received by the Council. The demand for payment of the subsequent instalment of the grant should be placed with the Council in the prescribed proforma attached.
2. The staff appointed on the project should be paid as indicated in the budget statement attached.
3. The approved duration of the scheme is 3 years. The annual extension will be given after review of the work done on the scheme during the previous year.
4. A report on the progress made will be submitted to the Council as and when called for.
5. The Institute will maintain a separate account of the receipts and the expenditure incurred on the scheme and will furnish a utilization certificate and an audited statement of account pertaining to the grant.

PTO

6. The other terms and conditions are indicated in Annexure-1
7. The Host Institute shall utilize the grant after following the provisions laid down in the GFRs 2017 and T. A. Rules.
8. The PI may be advised to keep the fund in a separate Saving Bank Account opened for research funds received from ICMR so as to ensure that interest earned thereon is also credited in to the Fund Account.

The receipt of this letter may please be acknowledged.

Yours faithfully,



(Ishwar Likhar)  
Admn. Officer  
for Director-General

This issue with the concurrence  
of Finance Section vide RFC No. NCD/Adhoc/70/2019-20 dated 30/8/19

No.5/4/1-7/19-NCD-II

1. Copy together with a copy of the budget statement forwarded for information to Dr. Ipseeta Ray Mohanry, Professor, Pharmacology, M. G. M. Medical College, Sector-18 Kamothe, Navi Mumbai-410 209.
2. Copy together with a copy of the budget statement forwarded to the Accounts Section for information and necessary action.
3. Copy together with a copy of the budget statement forwarded to the Budget Section for compilation of the Council's budget.
4. IRIS Code Number (2019-0502)
5. A.O., NCD.
6. Mr. Hemnat Kumar , Sr. T. O. , ICMR, New Delhi

For Director-General





**icmr**  
INDIAN COUNCIL OF  
MEDICAL RESEARCH  
Serving the nation since 1911

भारतीय आयुर्विज्ञान अनुसंधान परिषद  
स्वास्थ्य अनुसंधान विभाग, स्वास्थ्य और परिवार  
कल्याण मंत्रालय, भारत सरकार

Indian Council of Medical Research  
Department of Health Research, Ministry of Health  
and Family Welfare, Government of India

File No 5/10/FR/40/2020-RBMCH  
Dated : 12-08-2021

✓ **The Vice Chancellor,**  
MGM Institute of Health Sciences  
Navi Mumbai - 410209

**Subject:- Sanction of budget allotment for the Ad-hoc research proposal entitled "Impact of Radiations from Cell Phone Towers and Cell Phone Use on Health and Development (including Neurodevelopmental Changes) of children: A Multidisciplinary Collaborative Cohort Study" under Dr. Maninder Singh Setia.**

Sir/Madam,

The Director General, ICMR has been sanctioned the above-mentioned research proposal for the total period of 3 years with budget of **Rs. 1,05,80,203/- (Rupees One Crore Five Lakh Eighty Thousand Two Hundred Three Only)** (copy enclosed). This proposal has been sanctioned initially for three year from **20.08.2021 to 19.08.2024** and it may be extended on the yearly basis after review of the work done during the period. The grant-in-aid will be given subject to the following condition.

1. The payment of the grant will be made in lump-sum to the Head of the Institute. The first installment of the grant will be paid generally as soon as report regarding appointment of the staff is received by the Council. The Staff appointed on the project should be paid as indicated in the budget statement.
2. The staff on the project will be recruited as per the rules and procedure of the host institute and second part of the undertaking be obtained from the employees of the project. The staff grant will not be released unless the required undertaking [part-II] from Head of the Institute is received in this office.
3. The demand for payment of the subsequent installment of the grant should be placed with the Council in the prescribed Performa.
4. Five copies of the annual progress report should be submitted to the ICMR every year after completion of ten months of the project giving complete actual details of the research work done. Failure to submit the report in time may lead to termination of project.
5. Subject to the condition that the grant will be utilize after following the provisions laid down in the GFRs-2017 & TA Rules.
6. Please keep the fund in the separate saving Bank Account opened for ICMR funded Research projects so that interest earned thereon is credited into the accounts.
7. The receipt of this letter may please be acknowledged.

Yours faithfully,

(Ramesh Kumar)  
Administrative Officer  
For Director General

Copy together with a copy of the budget statement forwarded to information to

1. **Dr. Maninder Singh Setia**, Epidemiologist, Mahatma Gandhi Mission Institute of Health Sciences, Mumbai.
2. Accounts. V. for information.
3. IRIS Cell No. 2020-0335
4. Sr. B.S. Yadav "Sr. TO" RBMCH

msb

✓ Director Research  
for necessary action -  
[Signature]  
23/8/21

5/10/FR/40/2020-RBMCH

E-office - 111397

Date of Start : 15.08.2021

Duration: 3 years

IRIS Cell No. 2020-0335

RFC No. RBMCH/Adhoc/12/2021-22 dated : 29/07/2021

Project entitled "Impact of Radiations from Cell Phone Towers and Cell Phone Use on Health and Development (including Neurodevelopmental Changes) of children: A Multidisciplinary Collaborative Cohort Study" under Dr. Maninder Singh Setia.

**Budget for 1<sup>st</sup> year  
20-08-2021 to 19-08-2022**

Particular	1 <sup>st</sup> year
<b>Man Power</b>	
Scientist C = 01 (Non-Medical) Rs. 51,000 + 6660 (30% HRA) = 57,660 x 12 = 6,91,920	6,91,920
Laboratory Technician = 01 Rs. 18000 x 12 = 2,16,000	2,16,000
Data Entry Operator = 1 Rs. 17,000 x 12 = 2,04,000	2,04,000
Field Worker 02 Rs. 18,000 x 12*2 = 4,32,000	4,32,000
Non-Recurring Calibration of the Spectrum analyzer	2,50,000
Questionnaire	2,00,000
Dosimeters	1,50,000
Contingency	12,00,000
AMC Charges	1,00,000
Travel	1,00,000
Other Travel	25,000
Overhead 3% (except travel and Equipments)	85,318
Grant Total	Rs. 36,54,238

Total Budget allotment of Rs. 36,54,238/- (Rupees Thirty Six Lakh Fifty Four Thousand Two Hundred Thirty Eight Only)

  
15/08/2021

Administrative Officer  
For Director General



**icmr**  
INDIAN COUNCIL OF  
MEDICAL RESEARCH  
Serving the nation since 1911

भारतीय आयुर्विज्ञान अनुसंधान परिषद  
स्वास्थ्य अनुसंधान विभाग, स्वास्थ्य और परिवार  
कल्याण मंत्रालय, भारत सरकार

Indian Council of Medical Research  
Department of Health Research, Ministry of Health  
and Family Welfare, Government of India

F. No. 5/10/FR /40/2020-RBMCH

Date: 12.08.2021

**Subject:- Payment of 1<sup>st</sup> & final installment of the 1<sup>st</sup> year grant-in-aid for the project entitled”  
“Impact of Radiations from Cell Phone Towers and Cell Phone Use on Health and  
Development (including Neurodevelopment Changes) of children: A Multidisciplinary  
Collaborative Cohort Study” under Dr. Maninder Singh Setia.**

### MAMORANDUM

The Director General of the ICMR sanctions the grant of **Rs. 36,54,238/- (Rupees Thirty Six Lakh Fifty Four Thousand Two Hundred Thirty Eight Only)** as the 1<sup>st</sup> installment of the 1<sup>st</sup> year grant for the period from **20.08.2021 to 19.08.2022** for incurring expenditure in connection with the above mentioned project.

The amount of **Rs. 36,54,238/-** may be debited to the provision made of **Rs. 36,54,238/-** on the above mentioned research project for the year 2021-2022.

A formal bill for **Rs. 36,54,238/-** is sent herewith for payment release by NEFT/RTGS in favour of **The Vice Chancellor**, MGM Institute of Health Sciences, Navi Mumbai - 410209. This issued with the concurrence of the Finance Divn., **vide RFC No. RBMCH/Adhoc/12/2021-22 dated : 29/07/2021.**

  
13/08/2021

(Ramesh Kumar)  
Administrative Officer  
For Director General

### Accounts. V. ICMR

1. Copy to: **The Vice Chancellor**, MGM Institute of Health Sciences, Navi Mumbai - 410209. The grant has been sanctioned on the conditions laid down in out letter referred to above.
2. **Dr. Maninder Singh Setia**, Epidemiologist, Mahatma Gandhi Mission Institute of Health Sciences, Mumbai. It is requested that an audited statement of account together with utilization certificate of the grant received and utilized in last year grant may kindly be sent to this office.
3. IRIS Cell No. 2020-0335
4. Sr. B.S. Yadav “Sr. TO” RBMCH



December 16<sup>th</sup> 2020

This is to confirm that

## Rajani Mullerpatan

contributed as a member of the Development Group for Low Back Pain to the development of World Health Organizations's (WHO) Package of Interventions for Rehabilitation (PIR). The PIR will be a WHO resource containing information on evidence-based interventions for rehabilitation that will support member states with relevant information to facilitate the integration of rehabilitation in all service delivery platforms in countries, with a specific focus on the low- and middle resource context.

Members of a health condition-specific Development Group are responsible to a) agree on the inclusion of evidence-based rehabilitation interventions in the PIR identified from clinical practice guidelines and systematic reviews in a previous step, b) identify target areas and interventions not addressed in this list and relevant to be considered in the PIR (if applicable), and c) agree on the resources required to provide each of the selected interventions, time required for the provision of interventions and the service delivery platforms where interventions should be available. They work together in a multi-professional team representing all WHO regions and relevant professions.

WHO Rehabilitation Programme expresses its appreciation and thanks for the participation in the Development Group.

Dr Alarcos Cieza, MSc, MPH, PhD  
Unit Head

Dr Alexandra Rauch, MPH, PhD  
Project leader  
Rehabilitation Programme

Sensory Functions, Disability and Rehabilitation  
Department of Noncommunicable Diseases  
World Health Organization  
Geneva, Switzerland



Professor - Director  
MGM School of Physiotherapy  
MGMIHS, Navi Mumbai



**Mahatma Gandhi Mission  
Medical College & Hospital**

Sector – 1, Kamothe, Navi Mumbai – 410 209.  
Tel No.: 022-27432471, 27432994, Fax No.: 022-27431094

Ref. No.: MGM/MEDC/SL/2020/ 55

Date: 3<sup>rd</sup> Feb 2020

**DEPARTMENT OF SKILLS LAB**

To,  
The Dean,  
MGM Medical College and Hospital  
Sector – 1, Kamothe  
Navi Mumbai - 410 209.

*Subject: International Training Agreement of AHA BLS ACLS, Jan 2020-Jan 2023.*

Sir,

This to forward you the mail copy of international training agreement of AHA BLS, ACLS received on 25<sup>th</sup> Jan 2020, by Pamela [Rojas@heart.org](mailto:Rojas@heart.org) (AHA) after the successful audit for the course scoring (93 point).

Copy forwarded for your kind perusal and Signature.

Kindly do the needful.

With Regards.

Dr. Vishwas Sathe  
In-Charge  
MGM Skill Lab

Encl: International Agreement Copy AHA .



# International Training Agreement

## Company Information:

International Training Center ("ITC"):	Mahatma Gandhi Mission Medical College and Hospital
Address:	MGM Medical College and Hospital, Plot No. 01 Sector 01 Kamothe, Navi Mumbai, Maharashtra 410209, India
Form of Organization:	Not for Profit / University

This Agreement is between the American Heart Association, Inc. ("AHA"), a New York not-for-profit corporation, having its principal offices at 7272 Greenville Avenue, Dallas, Texas 75231-4596, and ITC.

IN CONSIDERATION of the mutual promises contained herein, the parties agree as follows: 1

**1. Term:** Beginning Date: January 24, 2020. Ending Date: January 24, 2023. This Agreement will be in effect for a period of Three (3) calendar years. It may be renewed for additional one (1) year periods by letter issued from AHA.

### 2. AHA ECC Courses to be Taught by ITC:

Basic Life Support	Advanced Cardiac Life Support
Provider Course(s)	Provider Course(s)
Instructor Course(s)	Instructor Course(s)

### 3. Geographic Territory: India

### 4. Insurance: \$28,024.69 US

ITC will obtain and maintain at its expense, commencing upon the beginning date of this Agreement and during its entire term, liability insurance from a qualified insurance carrier, as set out above. This policy will specify that it may not be modified or canceled by the insurer, except after thirty (30) days prior written notice by the insurer. Upon execution of this Agreement ITC will provide the AHA with a certificate of insurance showing the required coverage.

**5. Copyrights:** ITC acknowledges and agrees that the AHA owns all copyrights in the ECC Materials, and ITC may not copy, or permit others to copy, distribute, perform or make derivative works based upon the ECC Materials, Course Completion Cards, or eCards.

**6. Marks:** ITC acknowledges the AHA's trademark rights and ownership of the name "American Heart Association", the heart-and-torch trademark and slogans (e.g., "Life is Why") (hereinafter "AHA Marks"). ITC will not use or display the AHA Marks. ITC shall not apply for any trademark registrations with respect to any AHA Marks or any marks similar to the AHA Marks.

**7. Entire Agreement:** This Agreement, including the terms and conditions set out on Page Two, contains the entire agreement between the parties relating to the rights granted and the obligations assumed.

EXECUTED by the parties on the date(s) set out below.

<b>American Heart Association, Inc.</b>
Signature:
Name: Keith Jansen
Title: SVP, International
Date: January 24, 2020

<b>International Training Center</b>
Signature:
Name: GURUNATH S NARSHETTY
Title: DEAN
Date: 18-02-2020



INCHARGE  
MGM SKILLS LAB  
DATE: 25/01/2020

DIRECTOR  
MGM SKILLS LAB  
DATE: 25/01/2020

**Definitions:**

(a) "Program Guidelines" means the current *Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care*, Program Administration Manual: Guidelines for Program Administration and Training (hereinafter "PAM"), and *AHA Instructor's Manuals*, as they may be amended and/or supplemented by the AHA from time to time.

(b) "Course Completion Cards" or "Cards" are defined as documents made available or provided by AHA, and which indicate a student's successful completion of a specified Course.

(c) "Course" or "Courses" are defined as those courses that follow the curricula of the AHA and teach emergency cardiovascular care according to the Program Guidelines.

(d) "ECC Materials" are defined as emergency cardiovascular care textbooks and materials published by the AHA.

(e) "eCards" means those electronic records that Training Centers may distribute to, or provide access to, students pursuant to Program Guidelines to indicate that the student participated in or successfully completed a Course.

(f) "Instructors" are individuals who have successfully completed AHA authorized Provider and Instructor training and who are authorized by ITC to teach Provider courses to other individuals.

(g) "Training Sites" are organizations engaged or authorized by ITC to teach Courses under the auspices of ITC.

**9. ITC Role and Responsibilities:**

(a) ITC will teach Courses only within the Geographic Territory, and agrees to do so in compliance with the Program Guidelines.

(b) ITC may contract with other entities (hereinafter "Training Sites") who agree to teach Courses under the direction and guidance of ITC. ITC assumes full responsibility for the actions and performance of the Training Sites, and will ensure that Training Sites teach in compliance with the Program Guidelines.

(c) Periodically, as requested by the AHA, ITC will provide the AHA with a current and accurate list of Training Sites, Instructors, the number of students taught, and such other information as may be requested by AHA but only to the extent allowed by local law and the terms of any applicable consent, if required.

(d) ITC will insure that each student has individual possession of an authorized Course-specific textbook before, during, and after training.

(e) ITC will be responsible for the issuance and security of Course Completion Cards and eCards as outlined in the Program Guidelines: (i) ITC will establish a system for ensuring that Cards are issued only to authorized Training Sites. (ii) ITC and its authorized Training Sites will only issue the appropriate course-specific Course Completion Card or eCard to each student who successfully completes the applicable Course.

(f) ITC will obtain any and all required licenses, permits or documentation and is solely responsible for compliance with all laws and regulations applicable to training activities conducted under this Agreement. ITC will obtain any required or appropriate consent from each student before sharing that student's name and Course completion information with the AHA through AHA's online systems (which systems may include data storage outside of ITC's Territory).

**10. Relationship of Parties:**

The parties acknowledge and agree that each is an independent entity and, as such, neither party may represent itself as an employee, agent, or representative of the other; nor may it incur any

obligations on behalf of the other party.

**11. Termination:**

(a) The Agreement may be terminated by either party, without cause, upon sixty (60) calendar days' prior written notice.

(b) Either party may terminate this Agreement if the other party breaches any term or condition of this Agreement and fails to cure the breach within thirty (30) calendar days after receipt of written notice by the non-defaulting party. The following will also constitute breach or default under this Agreement: (i) Failure to exist or operate as a legal entity or to maintain an office address; or (ii) Assignment for the benefit of creditors, becoming generally insolvent, being placed in receivership or the filing by or against a party of a petition for bankruptcy or for entity reorganization under any bankruptcy act or similar statute.

(c) The AHA may terminate this Agreement upon written notice if it determines, in its sole discretion, that any of the activities permitted or contemplated under this Agreement pose a significant legal or business risk to the AHA.

(d) Notwithstanding anything to the contrary in this Agreement, AHA may terminate this Agreement if ITC or any Training Site conducts Courses in any country on which the United States government or other governmental entity (except those that are contrary to United States' laws), that (i) imposes sanctions that would prevent the AHA from conducting Courses either directly or indirectly in the country or (ii) for which ITC, Training Site or AHA must obtain a license from the applicable government to conduct Courses. If the United States government should impose sanctions on any country named in the Geographic Territory, the AHA at its option may (i) immediately terminate this Agreement as to that country in which event ITC and its Training Sites will immediately cease conducting Courses in the country, or (ii) may immediately terminate this Agreement in its entirety upon written notice to ITC.

(e) ITC will not distribute any AHA Course Completion Cards or eCards or designate itself, in any manner or any place, as an authorized ECC training center of AHA after this Agreement has been terminated or expired. In addition to any remedies by law or in equity available to AHA, ITC will pay the AHA Two Hundred Dollars (200 US\$) as a penalty for each Course Completion Card issued after termination or expiration of this Agreement. Upon termination or expiration of this Agreement, AHA shall have no liability or obligations to ITC, and ITC shall retain no rights under this Agreement.

**12. Warranties:**

(a) ITC warrants and represents to the AHA that as of the effective date and at all times during the term of this Agreement: (i) ITC, its agents, affiliates, members, representatives, distributors, contractors, and Training Sites will be in compliance with this Agreement, the provisions of the U.S. Foreign Corrupt Practices Act and all applicable U.S., local, state and federal laws and regulations, and applicable laws or regulations of any jurisdictions whose laws may apply; (ii) ITC is not a tobacco company, or a tobacco company corporate subsidiary or parent, nor does it receive revenue from tobacco products. "Subsidiary" and "parent" are defined as an entity in which there exists a direct or indirect Five Per Cent (5%) or greater ownership interest by a tobacco company.

(b) EXCEPT AS EXPRESSLY SET OUT IN THIS AGREEMENT, THERE ARE NO WARRANTIES, EXPRESS OR IMPLIED, BY OPERATION OF LAW OR OTHERWISE.

**13. Indemnification and Liability:**

(a) ITC will indemnify, defend and hold harmless

the AHA and its directors, officers, employees, agents, distributors, members, volunteers, successors and assigns from and against all suits, proceedings, actions, demands, claims, losses, liability, damages or expenses (including reasonable attorneys' fees and legal costs) arising from (i) ITC's performance or breach of its obligations under this Agreement, (ii) ITC's operation activities and/or distribution of Course Completions Cards, (iii) any breach or alleged breach of ITC's representations or warranties, (iv) any act or omission of ITC in any country in the Geographic Territory, and (v) any act or omission of Training Sites, Instructors, ITC's affiliates, agents, partners or representatives.

(b) The AHA will not be liable for any indirect, special, consequential or incidental damages, including lost profits or any other kind of damages, even if it has been warned of the possibility of such loss or damage. In no event will the AHA's liability under this Agreement exceed \$1,000 (US\$).

**14. Force Majeure:** Neither party will be in default under this Agreement, if such results, whether directly or indirectly, from fire, explosion, strike, freight embargo, vis major, or of the public enemy, war, terrorism, civil disturbance, act of any government, de jure or de facto, or agency or official thereof, labor shortage, transportation contingencies, unusually severe weather, default of manufacturer or a supplier, quarantine restrictions, epidemic, or catastrophe.

**15. Notices:** Any notice required or permitted under this Agreement, will be given in writing and will be deemed to have been duly given upon actual receipt if delivered personally or by courier with receipt obtained therefrom to the parties at their respective addresses.

**16. Miscellaneous Provisions:**

(a) This Agreement may not be assigned by ITC without the AHA's prior written consent.

(b) No amendment of this Agreement will be binding or enforceable on either party hereto unless in writing signed by both parties.

(c) Should any part, term, or provision of this Agreement be declared to be invalid, void, or unenforceable by a court of competent jurisdiction, all remaining parts, terms, and provisions hereof will remain in full force and effect, and will in no way be invalidated, impaired or affected thereby.

(d) This Agreement will be governed by the laws of the State of New York without regard to its conflict of laws provisions. Any controversy or claim arising out of or relating to this Agreement will be settled by arbitration in Dallas, Texas in accordance with the International Arbitration Rules of the American Arbitration Association. The language of the arbitration will be English. The arbitrators will have no authority to award punitive damages, and may not, in any event, make any ruling, finding, or award that does not conform to the terms and conditions of this Agreement. Judgment upon any award rendered through arbitration may be entered in any court having jurisdiction. Injunctive relief may be sought in any court of competent jurisdiction.

(e) This agreement contains the entire agreement between the parties and supersedes all prior written and oral communications. This Agreement will be written in and governed by the English language.

(f) AHA reserves the right to appoint other ITCs within the Geographic Territory.

(g) The following paragraphs and their subparagraphs will survive termination of this Agreement: 13 (Indemnification and Liability), 16(d) and 16(e)

DIRECTOR  
MGM SKILLS LAB  
DATE: 28/01/2020



IN CHARGE  
MGM SKILLS LAB  
DATE: 28/01/2020



## National Accreditation Board for Hospitals & Healthcare Providers

(Constituent Board of Quality Council of India)

NABH/H-2016-1090/L-01/2022/2810

March 28, 2022

To,

**Dr Rajendra Bohra**

DEAN

MGM Medical College Hospital and Medical Center Research Institute

Aurangabad

Mobile: 9225304660

E-mail: [mgmcha@themgmgroup.com](mailto:mgmcha@themgmgroup.com)

**Sub.: Extension of Accreditation of MGM Medical College Hospital and Medical Center  
Research Institute, Aurangabad**

Dear Dr Rajendra Bohra,

This has reference to the request for continuation of your status as an accredited organization after the expiry of your accreditation on 15-09-2021.

We have noted from our records that a renewal assessment is conducted on 26<sup>th</sup> 27<sup>th</sup> & 28<sup>th</sup> November 2021.

Keeping in view the current constraints owing to the Covid-19 pandemic, NABH has decided to provide extension of validity of accreditation till June 30, 2022 or till the decision on the renewal application is taken by the accreditation committee, whichever is earlier.

Please ensure the HCO has cleared all due fee payment.

Thanking you,

Sincerely yours,

(Dr. Atul Mohan Kochhar)

CEO-NABH