

Health and Family Welfare Department , Govt.of Gujarat

Form B

[See Rules 6(2) ,6(5) and 8(2)]

CERTIFICATE OF REGISTRATION

(To be issued in duplicate)

1. In exercise of the powers conferred under Section 19(1) of the Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act , 1994 (57 of 1994) , the Appropriate Authority **VADODARA (DAA)** hereby grants registration to the **Ultrasound Clinic/Imaging Centre** named below for purposes of carrying out genetic Counselling / Pre-natal Diagnostic Procedures* / Pre-natal Diagnostics Tests* / ultrasonography* under the aforesaid Act for a period of five years ending on **18/01/2028**
2. This registration is granted subject to the aforesaid Act and Rules framed thereunder 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 apart from prosecution.
- A. Name and Address of the genetic Counselling Centre*/ Genetic Laboratory*/ Genetic Clinic*/ Ultrasound Clinic*/ Imaging Centre*.
Name : **Parul Ayurved Hospital**
Address : **PO.Limda, Taluka Vaghodia,VADODARA,Vadodara**
- B. Pre-natal diagnostic procedures* approved for (Genetic Clinic).
Non - Invasive : **Ultrasound**
Invasive :
- C. Pre-natal diagnostic tests* approved (for Genetic Laboratory) :
- D. Any other purpose :
3. Model and make of equipments being used (any change is to be intimated to the Appropriate Authority under rule 13)

	Model Name	Make Name	Model Sr. No
1	Blue star	Digital ultrasonic	MUS602

4. Registration No. allotted : **GJ-16-0542-AAA-2018**
5. Period of validity of earlier Certificate of Registration.

From: **19/01/2018** To: **18/01/2023**

Date : 13/02/2023



Signature, Name, Designation of
Appropriate Authority
District Appropriate Authorities
&
Chief District Health Officer,
District Panchayat Vadodara
SEAL

*Strike out whichever is not applicable or necessary.

DISPLAY ONE COPY OF THIS CERTIFICATE AT A CONSPICUOUS PLACE AT THE PLACE OF BUSINESS.