

(See Rule-6)
GOVERNEMENT OF TELANGANA
HEALTH MEDICAL & FAMILY WELFARE DEPARTMENT
DISTRICT REGISTRATION AUTHORITY
CERTIFICATE OF RENEWAL OF REGISTRATION OF ALLOPATHIC PRIVATE
MEDICAL CARE ESTABLISHMENT

1. Application No. and Date : 890/10.08.2020
2. Original File No. of Registration Authority : 240/2015
3. Date of Issue of the Certificate of Registration : 29.07.2015
4. Date of expiry of the Certificate of Registration : 28.07.2020
5. Date of Renewal of the Certificate of Registration : 29.07.2020
6. Renewal of Certificate of Registration valid up to : 28.07.2025

7. This is to Certify that the Certificate of Registration issued to **M/s. MEDILIFE MULTI SPECIALITY HOSPITAL (A Unit of Sri Laxmi Dhanwanthari Hospitals & Research Pvt. Ltd)**, Located at **Mancherial** is hereby renewed under the provisions of Andhra Pradesh Allopathic Private Medical Care Establishments (Registration and Regularization) Act-2002 to provide following Medical Care Services with strength of (50) beds

(i)	Orthopedics	::	Dr.Adey Aravind, MS (Ortho)
(ii)	Gynecology	::	Dr.Nutan Babusing Pawar, MBBS,DGO
(iii)	General	::	Dr.Chetan Chouhan,MBBS
(iv)	Anesthesia	::	Dr.G.Srinivas, MD (Anesthesia)
(v)	Chest Physician	::	Dr.Kumara Swamy Koutam, MBBS, DTCCB

8. This renewal of Certificate of Registration shall be in force for a period of 5 (five) years from the date of issue.
9. This Certificate shall be produced whenever it is required to the officer authorized by the Registration Authority.
10. The establishment shall not rent, sell, transfer or otherwise close down the without obtaining prior permission of the Registration Authority.
11. Any unauthorized change in personnel, equipment or working conditions as mentioned in the application by the establishment shall constitute a breach of registration.
12. The establishment shall not violate the provisions of A.P Allopathic Private Medical Care Establishments (Registration and Regulation Act. 2002 as amended from time to time and the rules made there under.
13. This Certificate is subject to the conditions and the provisions of the A.P Allopathic Private Medical Care Establishments (Registration and Regulation Act-2002.

m. deevaja
26-8-2020

Signature and Name of the
District Registration Authority Officer,
[Office Seal]
Mancherial.