



GOVERNMENT OF TELANGANA
HEALTH MEDICAL AND FAMILY WELFARE DEPARTMENT
DISTRICT REGISTERING AUTHORITY
Form IV [See rule 5 (a)]

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ORIGINAL/DUPLICATE

CERTIFICATE OF REGISTRATION
OF
ALLOPATHIC PRIVATE MEDICAL CARE ESTABLISHMENTS

1. Application No. and Date : 1589 (MDCL) & Dated 27.12.2022.
2. Inspection Report No. and Date : 27.12.2022 by DM&HO-MDCL.
3. File No. of Registration Authority : 8441/DM&HO/MDCL/ 2022.
4. Date of issue : 27.12.2022.
5. Valid up to : 26.12.2027.
6. Name of the Owner Applicant : Sri.G.Surendra, Director,
Dr.Mahapatra Prasanta, MBBS.
7. This is to certify that **M/S.THE INSTITUTE OF HEALTH SYSTEMS (HIS) LABORATORY**, Located at Opp Metro Pillar No A788, Sivananda Rehabilitation Home Campus, Kukatpally, Medchal District is hereby registered under the provisions of T.S.Allopathic Private Medical Care Establishments registration and Regulation Act 2002, to Provide the following medical care services.

1. DIAGNOSTICS.

8. This 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, lend, sell, transfer or otherwise close down, 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 the T.S. 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 T.S. Allopathic Private Medical Care Establishments Registration and Regulation Act 2002.

Date:29.12.2022.


Dr.PUTLA SRINIVAS, MBBS, DCH.
District Registration Authority &
District Medical & Health Officer
Medchal-Maikajgiri District