

National Institutional Ranking Framework
 Ministry of Education
 Government of India
 Welcome to Data Capturing System: DENTAL

Submitted Institute Data for NIRF 2021
 Institute Name: Surendera Dental College and Research Institute [IR-N-N-36]

Sanctioned (Approved) Intake

Academic Year	2019-20	2018-19	2017-18	2016-17	2015-16	2014-15
UG (5 Years Program(s))	100	100	100	100	100	-
PG (3 Year Program(s))	27	27	27	-	-	-

Total Actual Student Strength (Program(s) Offered by Your Institution)

(All programs of all years)	No. of Male Students	No. of Female Students	Total Students	Within State (Including male & female)	Outside State (Including male & female)	Outside Country (Including male & female)	Economically Backward (Including male & female)	Socially Challenged (SC+ST+OBC (Including male & female)	No. of students receiving full tuition fee reimbursement from the State and Central Government	No. of students receiving full tuition fee reimbursement from Institution Funds	No. of students receiving full tuition fee reimbursement from the Private Bodies	No. of students who are not receiving full tuition fee reimbursement
UG (5 Years Program(s))	187	323	510	199	316	5	0	203	4	0	0	199
PG (3 Year Program(s))	32	41	73	25	48	0	0	15	0	0	0	15

Placement & Higher Studies

UG (5 Years Program(s)): Placement & higher studies for previous 3 years

Academic Year	No. of first year students intake in the year	No. of first year students admitted in the year	Academic Year	No. of students graduating in minimum stipulated time	No. of students placed	Median salary of placed graduates(Amount in Rs.)	No. of students selected for Higher Studies
2013-14	100	100	2017-18	71	0	0(Zero)	9
2014-15	100	100	2018-19	86	0	0(Zero)	13
2015-16	100	100	2019-20	47	0	0(Zero)	7

PG (3 Years Program(s)): Placement & higher studies for previous 3 years

Academic Year	No. of first year students intake in the year	No. of first year students admitted in the year	Academic Year	No. of students admitted through Lateral entry	Academic Year	No. of students graduating in minimum stipulated time	No. of students placed	Median salary of placed graduates(Amount in Rs.)	No. of students selected for Higher Studies
2015-16	27	27	2016-17	0	2017-18	27	0	0(Zero)	0
2016-17	27	27	2017-18	0	2018-19	26	0	0(Zero)	0
2017-18	27	19	2018-19	0	2019-20	18	0	0(Zero)	0

Ph.D Student Details

Ph.D (Student pursuing doctoral program till 2018-20 Students admitted in the academic year 2020-21 should not be entered here.)			
		Total Students	
Full Time		0	
Part Time		0	
No. of Ph.D students graduated (including Integrated Ph.D)			
	2019-20	2018-19	2017-18
Full Time	0	0	0
Part Time	0	0	0
No. of students Graduating in Super Speciality program (DM/MCh)			
	2019-20	2018-19	2017-18

Financial Resources: Utilised Amount for the Capital expenditure for previous 3 years

Academic Year	2019-20	2018-19	2017-18
Utilised Amount		Utilised Amount	
Annual Capital Expenditure on Academic Activities and Resources (excluding expenditure on buildings)			
Library	157756 (FIFTEEN LACS SEVENTY SEVEN THOUSAND SEVEN HUNDRED FIFTY SIX)	86310 (EIGHT LACS SIXTY SIX THOUSAND THREE HUNDRED TEN)	634056 (SIXTY THREE LACS THIRTY FOUR THOUSAND FIFTY FIVE)
New Equipment for Laboratories	253520 (TWENTY FIVE LACS THIRTY FIVE THOUSAND TWO HUNDRED)	231045 (TWENTY THREE LACS TEN THOUSAND FOUR HUNDRED FIFTY FIVE)	186717 (EIGHTEEN LACS THIRTY SIX THOUSAND SEVEN HUNDRED SEVENTEEN)
Other expenditure on creation of Capital Assets (excluding expenditure on Land and Building)	169500 (SIXTEEN LACS THIRTY FIVE THOUSAND)	142349 (FOURTEEN LACS TWENTY THREE THOUSAND FOUR HUNDRED FORTY NINE)	108647 (TEN LACS THIRTY SIX THOUSAND FIVE HUNDRED FORTY SEVEN)

Financial Resources: Utilised Amount for the Operational expenditure for previous 3 years

Academic Year	2019-20	2018-19	2017-18
Utilised Amount		Utilised Amount	
Annual Operational Expenditure			
Salaries (Teaching and Non Teaching staff)	5278460 (FIVE CRORES TWENTY SEVEN LACS SEVENTY EIGHT THOUSAND FOUR HUNDRED SIXTY)	5103100 (FIVE CRORES TEN LACS THIRTY ONE THOUSAND)	4702718 (FOUR CRORES SEVENTY LACS TWENTY SEVEN THOUSAND THREE HUNDRED EIGHTEEN)
Maintenance of Academic Infrastructure or consumables and other running expenditures(excluding maintenance of hostels and allied services,rent of the building, depreciation cost, etc)	256199 (TWO LACS SIXTY SIX THOUSAND ONE HUNDRED SIXTY NINE)	292718 (TWO LACS NINETY TWO THOUSAND SEVEN HUNDRED SIXTEEN)	248659 (TWO LACS FORTY EIGHT THOUSAND FIVE HUNDRED FIFTY NINE)
Seminars/Conferences/Workshops	20142 (TWENTY NINE THOUSAND ONE HUNDRED FORTY TWO)	21449 (TWO LACS FOURTEEN THOUSAND FOUR HUNDRED SIXTY)	825450 (THREE LACS TWENTY FIVE THOUSAND FOUR HUNDRED FIFTY)

IPR

Calendar year	2019	2018	2017
No. of Patents Published	0	0	0
No. of Patents Granted	0	0	0

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SURENDERA DENTAL COLLEGE
& RESEARCH INSTITUTE
SRI GANGANAGAR (RAJ)

Sponsored Research Details

Financial Year	2016-20	2018-19	2017-18
Total no. of Sponsored Projects	0	0	0
Total no. of Funding Agencies	0	0	0
Total Amount Received (Amount in Rupees)	0	0	0
Amount Received in Words	Zero	Zero	Zero

OPD Attendance & Bed Occupancy

1. Average OPD attendance in the calendar year 2018.	451
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PCB Facilities: Facilities of physically challenged students

1. Do your institution buildings have Lifts/Ramps?	Yes, more than 80% of the buildings
2. Do your institution have provision for walking aids, including wheelchairs and transportation from one building to another for Handicapped students?	Yes
3. Do your institution buildings have specially designed toilets for handicapped students?	Yes, more than 80% of the buildings

Faculty Details

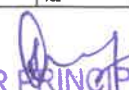
Srno	Name	Age	Designation	Gender	Qualification	Experience (in Months)	Is Associated Last Year	Currently working with institution?	Joining Date	Leaving Date	Association type
1	DR MEETU JINDAL	42	Professor	Female	MDS	182	Yes	Yes	28-12-2008	--	Regular
2	DR RENJU AGGARWAL	38	Professor	Female	MDS	128	Yes	Yes	01-01-2010	--	Regular
3	DR ANKUR SEHGAL	43	Reader	Male	MDS	88	Yes	No	27-03-2019	23-11-2020	Regular
4	DR KANIKA AGGARWAL	35	Reader	Female	MDS	79	Yes	Yes	21-03-2014	--	Regular
5	DR MEENAL AHLUA	39	Reader	Female	MDS	60	Yes	Yes	11-07-2015	--	Regular
6	DR PARUL AHLUA	36	Lecturer	Female	MDS	40	Yes	Yes	20-03-2017	--	Regular
7	ROHIT GUMBER	38	Lecturer	Male	MDS	34	Yes	Yes	30-06-2017	--	Regular
8	Dr Vikram Aggarwal	35	Lecturer	Male	MDS	33	Yes	Yes	16-10-2017	--	Regular
9	Dr Apoorva Bowry	31	Lecturer	Male	MDS	33	Yes	Yes	16-10-2017	--	Regular
10	Dr Migena Bala	30	Lecturer	Female	MDS	30	Yes	Yes	01-01-2016	--	Regular
11	Dr Monika Choudhary	33	Lecturer	Female	MDS	24	Yes	Yes	12-07-2016	--	Regular
12	Dr Ritika Gupta	29	Lecturer	Female	MDS	23	Yes	Yes	01-06-2016	--	Regular

13	DR BHUPESH SANDH	25	Lecturer	Male	MDS	34	No	Yes	28-05-2019	--	Regular
14	DR KANIKA VERMA	37	Professor	Female	MDS	133	Yes	No	01-06-2010	01-12-2020	Regular
15	DR SURUCHI JUNEJA	37	Professor	Female	MDS	115	Yes	Yes	11-06-2012	--	Regular
16	DR SOHAJPREET SINGH	33	Reader	Male	MDS	59	Yes	Yes	08-08-2015	--	Regular
17	DR PUNEET KUMAR	28	Lecturer	Male	MDS	13	No	Yes	20-07-2019	--	Regular
18	Dr DINESH KUMAR VERMA	43	Dean / Principal / Director / Vice Chancellor	Male	MDS	200	Yes	No	02-04-2012	13-11-2020	Regular
19	DR SHALLU BANSAL	41	Professor	Female	MDS	145	Yes	No	04-06-2008	20-08-2020	Regular
20	DR VIKRANT BHARDWAJ	42	Reader	Male	MDS	125	Yes	Yes	01-02-2018	--	Regular
21	DR GAGANDEEP SINGH	30	Lecturer	Male	MDS	35	Yes	Yes	05-08-2017	--	Regular
22	DR RAJAT PAREEK	30	Lecturer	Male	MDS	35	Yes	Yes	05-08-2017	--	Regular
23	DR ARVIND GUMBER	41	Lecturer	Male	MDS	33	Yes	Yes	10-10-2017	--	Regular
24	DR ARVIND JYANI	30	Lecturer	Male	MDS	17	Yes	Yes	01-01-2019	--	Regular
25	DR SANDEEP KUMAR	40	Professor	Male	MDS	161	Yes	Yes	30-04-2009	--	Regular
26	DR RAJNISH AGGARWAL	40	Reader	Male	MDS	115	Yes	Yes	27-10-2010	--	Regular
27	DR SUMITA CHAUDHARY	36	Reader	Female	MDS	101	Yes	No	13-10-2012	29-01-2021	Regular
28	DR RENJU YADAV	37	Reader	Female	MDS	97	Yes	Yes	01-08-2018	--	Regular
29	DR NAVJEET BHASIN	30	Lecturer	Female	MDS	35	Yes	Yes	17-08-2017	--	Regular
30	DR SUKHDEEP KAUR	35	Lecturer	Female	MDS	32	Yes	Yes	30-08-2017	--	Regular
31	DR SAURABH BANSAL	30	Lecturer	Male	MDS	33	Yes	Yes	08-10-2017	--	Regular
32	DR SHAENAM	32	Lecturer	Female	MDS	33	Yes	Yes	13-10-2017	--	Regular
33	DR ANJALI RAHEJA	34	Lecturer	Female	MDS	20	Yes	No	09-11-2018	22-07-2020	Regular
34	DR SAKSHI GARG	26	Lecturer	Female	MDS	13	Yes	No	01-10-2018	13-03-2020	Regular
35	Dr Keren Garg	38	Professor	Male	MDS	131	Yes	Yes	01-08-2009	--	Regular
36	Dr RAJNI AGGARWAL	41	Reader	Female	MDS	101	Yes	Yes	24-04-2017	--	Regular



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37	Dr Subh kati	33	Lecturer	Female	MDS	68	Yes	Yes	02-09-2016	--	Regular
38	Dr Sarina sharma	30	Lecturer	Female	MDS	33	Yes	Yes	10-10-2017	--	Regular
39	DR MANISH SUKHEJA	42	Lecturer	Male	MDS	23	Yes	Yes	08-01-2018	--	Regular
40	DR AMIT KHUNGER	31	Lecturer	Male	MDS	21	Yes	Yes	01-10-2018	--	Regular
41	DR ATUL AGGARWAL	37	Lecturer	Male	MDS	13	No	Yes	03-09-2019	--	Regular
42	DR SACHIN AHUJA	45	Professor	Male	MDS	205	Yes	Yes	02-08-2008	--	Regular
43	DR SEEMA GUPTA	40	Professor	Female	MDS	169	Yes	Yes	30-04-2009	--	Regular
44	DR BEENAL BHAMBRI	35	Reader	Female	MDS	109	Yes	Yes	17-07-2012	--	Regular
45	DR PULKIT LAKHANI	31	Lecturer	Male	MDS	47	Yes	Yes	28-01-2017	--	Regular
46	DR RAJ ABHAY SINGH	29	Lecturer	Male	MDS	33	Yes	Yes	08-10-2017	--	Regular
47	DR GURPREET SINGH	31	Lecturer	Male	MDS	33	Yes	Yes	10-10-2017	--	Regular
48	DR VARUN AHUJA	32	Lecturer	Male	MDS	23	Yes	Yes	01-08-2018	--	Regular
49	DR LOVJEET AHUJA	33	Lecturer	Male	MDS	33	Yes	No	08-10-2017	21-11-2019	Regular
50	DR PRADHUMAN VERMA	40	Professor	Male	MDS	133	Yes	No	25-07-2010	01-12-2020	Regular
51	DR SURESH KUMAR SACHDEVA	37	Reader	Male	MDS	107	Yes	Yes	01-10-2012	--	Regular
52	DR NISHANT KUMAR	35	Reader	Male	MDS	74	No	Yes	04-04-2019	--	Regular
53	DR HARPREET SANDHU	36	Lecturer	Female	MDS	34	Yes	Yes	08-08-2017	--	Regular
54	DR SUKHEEN KAUR	28	Lecturer	Female	MDS	28	Yes	Yes	01-11-2018	--	Regular
55	DR SALONI AGRA	27	Lecturer	Female	MDS	13	No	Yes	15-07-2019	--	Regular
56	DR R KARTHIKEYAN	41	Professor	Male	MDS	171	Yes	Yes	25-07-2015	--	Regular
57	DR POOPAM GHOSHARY	39	Reader	Female	MDS	109	Yes	Yes	13-08-2011	--	Regular
58	DR SANDEEP GOYAL	36	Reader	Male	MDS	97	Yes	Yes	01-08-2012	--	Regular
59	DR MANISH KUMAR	35	Reader	Male	MDS	80	No	Yes	12-05-2019	--	Regular
60	DR GALTAM BHAMBRI	40	Reader	Male	MDS	68	Yes	Yes	11-08-2015	--	Regular

61	DR LOKENDER RAGHAV	33	Lecturer	Male	MDS	39	Yes	Yes	01-04-2017	--	Regular
62	DR GALURAV SINGH RAJAWAT	30	Lecturer	Male	MDS	32	Yes	Yes	25-10-2017	--	Regular
63	DR GURVEEN CHAWLA	30	Lecturer	Female	MDS	22	Yes	Yes	19-09-2018	--	Regular
64	DR MANISH KUMAR MURNAL	40	Lecturer	Male	MDS	18	Yes	Yes	05-11-2018	--	Regular
65	DR BHARPREET SINGH	43	Professor	Male	MDS	188	Yes	Yes	01-04-2015	--	Regular
66	DR NEHA GUPTA	37	Reader	Female	MDS	105	Yes	Yes	18-10-2015	--	Regular
67	DR MANUJ BATRA	34	Reader	Male	MDS	78	Yes	Yes	01-07-2017	--	Regular
68	DR VIKRAM PAL AGGARWAL	31	Lecturer	Male	MDS	46	Yes	Yes	10-08-2018	--	Regular
69	DR SUMIT GOYAL	32	Lecturer	Male	MDS	38	Yes	Yes	19-04-2017	--	Regular
70	DR VOGESH GARG	32	Lecturer	Male	MDS	33	Yes	Yes	25-09-2017	--	Regular
71	ANSHIKA SHARMA	30	Lecturer	Female	MDS	30	Yes	No	17-01-2018	11-11-2019	Regular
72	DR DEEKSHA GUWAN	29	Lecturer	Female	MDS	22	Yes	Yes	01-09-2018	--	Regular
73	DR PUNEET KAUR	25	Lecturer	Female	MDS	18	Yes	Yes	01-01-2019	--	Regular
74	DR SUBHASH BHOWAL	53	Professor	Male	MS	213	Yes	Yes	15-09-2005	--	Regular
75	DR P P DUBEY	82	Professor	Male	MD	237	Yes	Yes	28-05-2014	--	Regular
76	DR RENU MIDHA	51	Professor	Female	MD	159	Yes	Yes	05-09-2005	--	Regular
77	DR PALAK AGGARWAL	30	Lecturer	Female	MD	28	Yes	Yes	14-05-2016	--	Regular
78	DR NEERU GARG	37	Reader	Female	MD	156	Yes	Yes	10-09-2007	--	Regular
79	DR SURESH KUMAR GOYAL	84	Lecturer	Male	MD	26	Yes	Yes	14-05-2016	--	Regular
80	DR RAINDER KUMAR	58	Professor	Male	MD	213	Yes	Yes	01-05-2016	--	Regular
81	DR MANISH AGGARWAL	41	Reader	Male	MD	54	Yes	Yes	17-02-2016	--	Regular
82	DR ASHOK NAGPAL	65	Lecturer	Male	MD	25	Yes	Yes	15-08-2016	--	Regular
83	DR ANOOP KUMAR	68	Professor	Male	MD	225	Yes	Yes	01-05-2016	--	Regular
84	DR SHUBH LATA	66	Professor	Female	MD	429	Yes	Yes	01-08-2007	--	Regular
85	Dr Amandeep kaur	26	Other	Female	BDS	28	Yes	Yes	12-03-2018	--	Regular
86	Dr Picha Jindal	25	Other	Female	BDS	18	No	Yes	01-04-2018	--	Regular


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87	Dr Aana Mary	29	Other	Female	BDS	13	Yes	No	10-08-2019	21-03-2020	Regular
88	Dr Rajni Garg	24	Other	Female	BDS	19	Yes	No	17-09-2019	21-03-2020	Regular
89	Dr Charanpreet	31	Other	Female	BDS	96	Yes	Yes	07-05-2012	--	Regular
90	Dr Manavdeep Kaur	25	Other	Female	BDS	17	Yes	Yes	01-02-2019	--	Regular
91	Dr Khushboo Singla	28	Other	Female	BDS	22	Yes	Yes	01-09-2018	--	Regular
92	Dr Ankur Subhesh dharma	38	Other	Male	MBS	26	Yes	Yes	04-05-2018	--	Regular
93	Dr Harish mehta	65	Other	Male	MBS	26	Yes	Yes	09-05-2018	--	Regular
94	Dr Bhorka Agarwal	26	Other	Female	MBS	19	No	Yes	25-10-2020	--	Regular
95	Dr H P singh	65	Other	Male	MBS	101	Yes	Yes	07-06-2018	--	Regular
96	Dr Chand Kumar	63	Other	Male	MBS	88	Yes	Yes	16-04-2018	--	Regular
97	Dr Pavi Shankar Goyal	54	Other	Male	MBS	72	Yes	Yes	14-05-2018	--	Regular
98	Dr K K Opneha	66	Other	Male	MBS	99	Yes	Yes	16-02-2018	--	Regular
99	Dr P S Choudhary	67	Other	Male	MBS	204	Yes	Yes	20-02-2018	--	Regular
100	Dr Pika Arora	63	Other	Female	MBS	96	Yes	Yes	18-04-2018	--	Regular
101	Dr Gyan Paikash	38	Other	Male	MBS	120	Yes	Yes	02-06-2010	--	Regular
102	Dr K K Arora	65	Other	Male	MBS	115	Yes	Yes	10-05-2018	--	Regular
103	Dr Chahal Mrida	28	Other	Female	MBS	27	Yes	No	15-02-2018	24-12-2020	Regular
104	Dr Sanjeev Jindal	42	Other	Male	MBS	120	Yes	Yes	23-04-2018	--	Regular
105	Dr Mahavir Singh bhatnani	67	Other	Male	MBS	26	Yes	Yes	14-05-2018	--	Regular
106	Dr Manoj Sani	38	Other	Male	MBS	26	Yes	Yes	09-05-2018	--	Regular
107	Dr Sarita Opneja	66	Other	Female	MBS	116	Yes	Yes	18-04-2018	--	Regular
108	Dr Shobha Tandon	37	Other	Male	MBS	27	Yes	Yes	12-04-2018	--	Regular
109	DR YOGESH KUMAR	50	Professor	Male	MDS	267	Yes	No	04-02-2004	24-07-2020	Regular
110	DR SHASHI KALA	48	Professor	Female	MDS	234	Yes	No	21-08-2002	09-11-2019	Regular
111	Dr Sanjeev Kumar	47	Professor	Male	MDS	239	Yes	No	29-05-2011	20-05-2020	Regular
112	DR VRINDER GOYAL	50	Professor	Male	MDS	285	Yes	No	22-09-2016	02-09-2020	Regular
113	DR ARLIN GUPTA	63	Reader	Male	MD	96	Yes	Yes	14-03-2020	--	Regular


DIRECTOR
SURENDRA DENTAL COLLEGE
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SRI GANGANAGAR (RAJ.)



File No. - EC/NEW/INST/2020/731

Government of India
Ministry of Health & Family Welfare
Department of Health Research

2nd Floor, IRCS Building,
New Delhi - 110001
Dated : 15-Jan-2021

Provisional Certificate

Subject: Provisional registration of the Ethics Committee relating to Biomedical and Health Research with the National Ethics Committee Registry for Biomedical and Health Research (NECRBHR), Department of Health Research (DHR).

In exercise of the powers conferred by sub-rule (3) of rule 17 of the New Drugs and Clinical Trials Rules, 2019, the designated authority in the Department of Health Research, Ministry of Health & Family Welfare, hereby provisionally registers and permits the following Ethics Committee to perform the duties of ethics committee as specified in Chapter-IV of the New Drugs and Clinical Trials Rules, 2019.

Name : INSTITUTIONAL ETHICS COMMITTEE SURENDERA DENTAL COLLEGE AND RESEARCH INSTITUTE
Address : SURENDERA DENTAL COLLEGE AND RESEARCH INSTITUTE, HH GARDENS, power house road Sri Ganganagar, Sri Ganganagar, Rajasthan - 335001
Contact No: 01542440102
Fax : -NA-

2. The Ethics Committee shall observe all the conditions as stipulated in Chapter-IV of the aforesaid Rules, i.e., New Drugs and Clinical Trials Rules, 2019 and the National Ethical Guidelines for Biomedical and Health Research Involving Human Participants, specified by the Indian Council of Medical Research (ICMR).

3. The designated authority shall scrutinize the documents and information furnished with the application by the Ethics Committee for the issue of final registration certificate.

4. The above provisional registration shall be valid for a maximum period of two years from the date of its issue or till grant of final registration or rejection of provisional registration, whichever is earlier.

(Anu Nagar)
Joint Secretary
Department of Health Research
Designated Authority


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SRI GANGANAGAR (RAJ)



Government of India

Ministry of Human Resource Development

Department of Higher Education

Statistics Division

New Delhi

Certificate



Reference No. C-59642-2019

This is to certify that **Dr.SANDEEP KUMAR** of **Surendera Dental College and Research Institute** has successfully uploaded the data of All India Survey on Higher Education(AISHE) 2019-2020.

(Madan Mohan)

Deputy Director General

Dated: 24/02/2020

Name of the signatory

DIRECTOR PRINCIPAL
SURENDERA DENTAL COLLEGE
& RESEARCH INSTITUTE
SRI GANGANAGAR (RAJ.)

Lic. No. 2409

All Subjects to Sri Ganganagar Jurisdiction

SWASTIK BLOOD BANK

2-A-17-18 BASEMENT, JAWAHAR NAGAR, SRI GANGANAGAR-335001 (RAJ.)

Ph. 0154-2463764, (M) 87693-55000

President
Dr. S.L. Sihag

Secretary
Ravinder Jain

Date...11...7...2020.....

To,

The Director
Surendera General Hospital
H.H. Gardens,
Sri Ganganagar (Raj.)

Sub- Regarding services for Deptt. of blood & its component

Sir,

Blood Bank Samiti hereby render services in its capacity for whole blood & its component to SURENDERA GENERAL HOSPITAL inclusive of transplant programme.

Ravi
सचिव
स्वास्तिक ब्लड बैंक

[Signature]
DIRECTOR PRINCIPAL
SURENDERA DENTAL COLLEGE
& RESEARCH INSTITUTE
SRI GANGANAGAR (RAJ)



SURENDERA GENERAL HOSPITAL

An Enterprise of Late Smt. Vidyawanti Labhu Ram Foundation
For Science Research & Social Welfare


H.H.Gardens, Sri Ganganagar – 335001, Email : gorav@sgl.org.in

MEMORANDUM OF UNDERSTANDING


This memorandum of Understanding (MOU) is made on between Swastik Blood Bank Sri Ganganagar and Surendera General Hospital Sri Ganganagar for supply of whole Blood and its components to the hospital.

That the parties have agreed as per salient features as mentioned below:

1. Human whole Blood and its components shall be requisitioned as and when required for patients admitted in Surendera General Hospital Sri Ganganagar to Swastik Blood Bank Sri Ganganagar in prescribed format fully stamped and signed by the competent doctor of the above hospital.
2. Swastik Blood Bank will supply human whole Blood and its components 24 X 7 to Surendera General Hospital as per rates fixed by Government of India.
3. This Memorandum of Understanding shall be valid until and unless either of the above parties discontinue for valid reason.


Surendera General Hospital
H. H. Gardens Sri Ganganagar

Medical Superintendent
Surendera General Hospital
Sri Ganganagar


साचिव
स्वास्तिक ब्लड बँक
Swastik Blood Bank
Sri Ganganagar


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SRI GANGANAGAR (RAJ)

कार्यालय नगर परिषद, श्री गंगानगर

क्रमांक :- 24/8334

दिनांक :- 5-03-2020

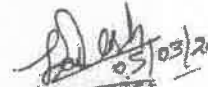
श्रीमान अध्यक्ष
लेट श्रीमति विद्यावन्ती लभूराम फाउण्डेशन
फार साइन्स रिसर्च एण्ड सोशल वेलफेयर
श्री गंगानगर ।


श्रीमान जी,

आप द्वारा भेजे गए पत्र दिनांक 02.03.2020 एल.वी.एल./2020/5307 फायर प्लान के साथ अग्निशमन यंत्र स्थापित करने की सूचना पत्रावली सहित प्राप्त हुई । फायर प्लान के मुताबिक सुरेन्द्रा कैम्पस के सभी भवनों में सुरक्षा के हिसाब से सारी स्थितियां संतोषजनक है जोकि आवश्यकता पडने पर आवश्यक कार्यवाही करने में सहायक होगी ।

धन्यवाद ।

लोकेश
उप सभापति
नगर परिषद, श्रीगंगानगर


05/03/20
लोकेश मन्वद
उप सभापति
नगर परिषद, श्रीगंगानगर


DIRECTOR PRINCIPAL
SURENDRA DENTAL COLLEGE
& RESEARCH INSTITUTE
SRI GANGANAGAR (R.A.)

Provisional registration No:0809900020



GOVERNMENT OF RAJASTHAN

**District Registering Authority
GANGANAGAR**

CERTIFICATE OF PROVISIONAL REGISTRATION

This is to certify that *SURENDERA GENERAL HOSPITAL* located at *H H GARDENS* owned by *SURAJ AGGARWAL* has been granted provisional registration as a clinical establishment under Section 15 of The Clinical Establishments (Registration and Regulation) Act, 2010. The Clinical Establishment is registered for providing medical services as a *Hospital, Pathology, Biochemistry, Microbiology, Collection Centre, Xray Centre, ECG Centre* under *Allopathy* System of Medicine.

This Certificate is valid for a period of one year from the date of issue.

DRA: Ganganagar

Designation of the Issuing Authority

Place: Ganganagar

Date of Issue: 19/06/2020

Terms and Conditions of Registration

1. The holder of this Certificate of Registration shall comply with all the provisions of Clinical Establishment Act (Registration and Regulation) 2010 and the Rules made there under.
2. The Certificate of Registration is not transferable. The Certificate of Registration shall be displayed in a prominent place in a part of the premises open to the public.
3. Any change of ownership or change of category or change of management or on ceasing to function as a clinical establishment, the certificate of registration shall be surrendered to the authority and application for fresh registration submitted.

**Additional terms and conditions are as stipulated by the appropriate registering authority*

<http://www.clinicalestablishments.gov.in/AUTHENTICATOR/Pages/DRA/Provisional.aspx?StateId=07&ProvNo=0809900020&DistrictId=44&UnitId=5139734> Date: 19/06/2020


**DIRECTOR PRINCIPAL
SURENDERA DENTAL COLLEGE
& RESEARCH INSTITUTE
SRI GANGANAGAR (RAJ)**



राजस्थान सतम्प अधिनियम 1998 के अन्तर्गत
 स्थापित राजीव गांधी प्रौद्योगिकी अभियान

राजस्थान RAJASTHAN

AGREEMENT

BB 332835

This AGREEMENT (herein after referred to as "the agreement") executed on this date 04-02-2021 between the institute name LATE SMT. VIDYAWANTI LABHU RAM FOUNDATION FOR SCIENCE RESEARCH & SOCIAL WELFARE Owner DR GAURAV GUPTA Address HH GARDEN POWER HOUSE ROAD, SRI GANGANAGAR 335001

(Herein after referred to as "the member") AND E-Tech Projects, Hanumangarh & Sri Ganganagar, a company having registered office at Sri Ganganagar, Rajasthan (Hereinafter referred to as the "company")

(The expression "and the company" wherever they occur in this agreement presents shall unless the Context otherwise admits, also mean and include their respective executors, administrators, Legal representatives and assigns)

The company has setup a centralized Solid Biomedical waste treatment facility for the service to the member of Hanumangarh & Sriganganagar and nearby place. Wherein the member shall be benefited by getting their solid Biomedical waste disposed of properly and it is expedient to have a written instrument of agreement defining principal terms and conditions of the projects.

Whereas:

- A. The Govt. of India, Ministry of Environment and forests formulated and notified the Biomedical waste (Management & Handling) Rules 1998, (herein after referred as Rules of 1998), with effect from 27-07-1998 and Bio-medical Waste (Management & Handling) Rules, 2016, Published in the Gazette of India, Extraordinary, Part II, Section 3, Sub-section (i), 28-03-2016 and amended till date, thru it made it mandatory for the Biomedical waste generating entities, which includes Nursing Homes, Hospitals, Maternity Homes, Pathology Labs, Blood banks, Clinics, Dispensaries etc, to manage, handle, transport, treat & dispose the Waste in accordance with the provisions of the said Rules of 1998, through a Common Treatment Facility.
- B. The Directorate of urban Administration and Development Jaipur (Rajasthan) invited proposal from experienced private parties for providing a common biomedical waste collection, Reception, storage, transport, treatment and disposal facility for waste generated from different institutions at Hanumangarh & Sriganganagar and nearby places on build own and operate basis. Our company was awarded the work of setting up a Centralized Solid Biomedical waste treatment facility for Hanumangarh & Sriganganagar and nearby places.

For Late Smt. Vidyawanti Labhu Ram Foundation
 For Science Research and Social Welfare

gaurav
 Authorised Signatory

Com
 MANAGING DIRECTOR
 E-TECH PROJECT HANUMANGARH
 AND SRI GANGANAGAR

Dr
 DIRECTOR PRINCIPAL
 SURENDRA DENTAL COLLEGE
 & RESEARCH INSTITUTE
 SRI GANGANAGAR (RAJ)

भुवनेश्वर भवानी मंदिर, श्रीगंगानगर अनुज्ञा पत्र सं. 137/89

मुद्रांक वेबसाइट का पता: www.surenderadentalcollege.com

रजिस्टर नंबर: 4701 दिनांक: 12-02-2021

मुद्रांक लेखक का नाम: Dr. Anand Kumar Singh

पिता / पति का नाम: श्री. रामेश्वर प्रसाद म. म. म. म. म.

पता:

संस्थान: सुरेंद्रा दन्त कॉलेज

हस्ताक्षर की रचना में हस्ताक्षर का नाम: Dr. Anand Kumar Singh

व्यक्ति / हस्ताक्षरकर्ता: Dr. Anand Kumar Singh मुद्रांक विभाग के हस्ताक्षर

(Signature)


(Signature)

सुरेंद्रा दन्त कॉलेज, श्रीगंगानगर, राजस्थान

DIRECTOR PRINCIPAL
SURENDRA DENTAL COLLEGE
& RESEARCH INSTITUTE
SRI GANGANAGAR (RAJ)


LIST OF STUDENTS ENROLLED UNDER NSS AT SURENDRA DENTAL COLLEGE & RESEARCH INSTITUTE [2021]								
S.No	Name	Date of Birth	Age (Years)	Gender	Email	Address	Phone number	Year of Study
1.	Puneet Kumar Bangarwa	11-09-1999	21	Male	pkbnew2013@gmail.com	Vill.Dharwanbas 127029 Dist. Bhiwani Haryana	9812920760	2nd year BDS
2.	RASHI GARG	27-10-2000	20	Female	RASHI1421@GMAIL.COM	Surendra dental college	9461359916	2nd year BDS
3.	Sanjay Singh	25-08-2000	20	Male	sanjay Singh8696437687@gmail.com	VPO- Kesharpura kalan TEH- Chirawa DIS- Jhunjhunu State- Rajasthan Pincode- 333028	8696437687	2nd year BDS
4.	Kushal dega	09-01-2001	20	Male	kushaldaga100@gmail.com	Purba medenipur, West bengal	9851113984	2nd year BDS
5.	Aman sahu	11-11-1998	22	Male	aman73356@gmail.com	111kamlu udiyan bundi road kunlodi kota	7732993620	2nd year BDS
6.	Khushi Khatri	14-08-2001	19	Female	khushikhatri790@gmail.com	M.P. colony Bikaner , Rajasthan	6375858955	2nd year BDS
7.	AAKASH KUMAR SINGH	20-01-2001	20	Male	AAKASHVIJAY3451@GMAIL.COM	Surendra dental college	9724884138	2nd year BDS
8.	Komal Verma	24-02-2000	20	Female	komalverma12340@gmail.com	New gharana	917221992823	2nd year BDS
9.	Kaushal Sharma	05-06-2000	20	Male	kaushal15477@gmail.com	N.T Road, Nalbari, Assam . Pin-781335	7576057310	2nd year BDS
10.	Vilakshana Kumar	15-01-2001	20	Female	vilakshana.kumar@gmail.com	Jamalpur , dist Bihar	9430834259	2nd year BDS
11.	Akshansh Bhaktri	20-06-2001	19	Male	drakshansh1@gmail.com	Street no 8 h no. 2927 Dashmesh nagar Amritsar	6283965979	2nd year BDS
12.	Deviprasad	22-09-2000	20	Male	devi.bhattacharya2000@gmail.com	BD 20 SAHA PARA BAGUATI KOLKATA 700059	9051643867	2nd year BDS
13.	Arnit Kumar	10-08-2002	18	Male	arnitkumar1294@gmail.com	84to Chunno Abohar Punjab	7589647640	2nd year BDS
14.	PIYUSH Aggarwal	08-03-1996	24	Male	aggarwalpiyush688@gmail.com	30/456 ektia colony jwalhar Nagar near Saint Kabir school	9602565544	2nd year BDS

						Sri Ganganagar Rajasthan 335001		
15.	Ransukh Bana	25-04-2001	20	Male	ransukhbana3101@gmail.com	Bana ki dhani hamawa Negour Rajasthan	9784253101	2nd year BDS
16.	paras singla	04-07-2000	20	Male	parassingla90@gmail.com	Gidderbaha	8872440111	2nd year BDS
17.	Alka	03-01-1999	22	Female	alkabishnoi12@gmail.com	V.p.o kaliyan sri Ganganagar	6377188080	2nd year BDS
18.	Shivani Rawat	12-11-1999	21	Female	rashivi12@gmail.com	21 Ravindra nagar B , near GS Paradise , Jaipur , Rajasthan	7412908579	2nd year BDS
19.	SAKSHI GORA	13-02-1998	23	Female	ankshigora3@gmail.com	V.p.o. 15 z sri ganganagar Rajasthan	8959295982	2nd year BDS
20.	YOGESH KHATANA	20-07-2000	21	Male	Gujariktstanayogesh@gmail.com	Village - Keroli Post - Bashipur Narnaul Mahendergarh (Haryana) PIN - 123001	9610162121	2nd year BDS
21.	Aditi khanna	04-10-2001	19	Female	aditikhanna2752@gmail.com	34p block	9352730660	2nd year BDS
22.	Supriya Biswas	20-08-2001	20	Female	biswasupriya882@gmail.com	Kalyani, West Bengal	9330770843	2nd year BDS
23.	Rajani swami	15-06-1999	20	Female	swamirajani7597@gmail.com	Bikaner rajasthan	7413977291	2nd year BDS
24.	Poonam darade	05-05-2021	23	Female	poonamdarade64@gmail.com	Surendra dental collg and reserach Institute srianganagar	7023059345	3rd year BDS
25.	ABHIMANYU PRAJAPAT	14-07-1999	21	Male	asp1407asp@gmail.com	Bikaner	9521232928	3rd year BDS
26.	Suhani Goyal	26-05-2000	20	Female	suhani26052000@gmail.com	House No. -2 mayya vihar	8769893740	3rd year BDS
27.	Anjela Bhardwaj	14-11-2000	20	Female	anjelabhatji@gmail.com	136 G block Sri ganganagar, raj	9057354475	3rd year BDS
28.	Sinran Jaiswal	18-09-2000	20	Female	snchajais6464@gmail.com	Surendra dental college	9373996953	3rd year BDS
29.	vikas Ranka	21-07-1999	21	Male	rankasaab99@gmail.com	royal residency nawalgarh road sikar	8239608630	3rd year BDS
30.	Khushamita	16-07-2000	21	Female	khushamitejal807@gmail.com	Ektia nagar malout	6378753155	3rd year BDS


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31.	Nimisha choudhary	09-02-1998	23	Female	nimishachoudhary63@gmail.com	Near mahila iti college, Patel nagar, Bikaner	9116692479	3rd year BDS
32.	Tanvi vats	27-01-2000	21	Female	tanvivate9990@gmail.com	House no 136 ward no. 7 near chandni chowk purani sbedi sriganganagar Rajasthan	6377521850	3rd year BDS
33.	Akanakha Panwar	25-05-2000	20	Female	akanakhaspanwar57@gmail.com	Bhatia Colony, ward No.07 Hansi, Hisar, Haryana-125033	6378898112	3rd year BDS
34.	Ashutosh kumar	06-01-1999	22	Male	yadvashutosh185@gmail.com	Sd boys hostel	8955895968	3rd year BDS
35.	Sangeeta	22-03-1998	22	Female	sangeetabishnoi2299@gmail.com	dream homes near medanta hospital gurgaon haryana	6350592827	3rd year BDS
36.	OINDRILA DUTTA	30-11-2000	20	Female	IAMOINDRILA2K@GMAIL.COM	Kolkata	9073900039	1st year BDS
37.	Bharu Pratap Singh Rathore	15-04-2002	19	Male	bpr0401@gmail.com	Hanumangarh town	9887210401	1st year BDS
38.	Raman Verma	21-10-2001	20	Male	ramanvermavip@gmail.com	Sri Ganganagar	8441982151	1st year BDS
39.	BIKRAM MANDAL	20-06-2001	19	Male	bikiran2001@gmail.com	Rampurhat	9932723942	1st year BDS
40.	Penchala Amrutha patel	14-01-2003	18	Female	amruthapatel934@gmail.com	H no.17-2-417, Brnagar, Karimnabad, Warangal, Telangana, Pin code-506002, India	9347349673	1st year BDS
41.	JAHNVI shukla	20-11-2001	19	Female	Shuklajahnvi600@gmail.com	Girl hostel Surandara dental college SADULSHAHAR ROAD myoor school shri nagarpuram	6376362045	1st year BDS
42.	Afsha Ahmed	04-02-2001	20	Female	afsha1826@gmail.com	Songiri well road ,near kotgate, bikaner	9414695254	1st year BDS
43.	Mithu Balachandran	22-02-2001	20	Female	mitubalachandran4@gmail.com	Ajitha vilasam vedu Thiruvananthapuram Kerala	9746248410	1st year BDS

44.	Priyanka bhadu	05-01-2002	19	Female	thepriyanka9999@gmail.com	Bikaner Rajasthan	7073972729	1st year BDS
45.	Pragy Gupta	22-08-2003	17 yrs 9 months	Female	pragyagupta2515@gmail.com	Nagra, Ballia (U.P.)	9695675577	1st year BDS
46.	Vishvender Singh	21-03-2003	18	Male	singhvisvender777@gmail.com	Plot No. 119 , Shiv Vihar Colony , Meenawala, Jaipur	8107573935	1st year BDS
47.	Chesta	16-06-2001	19	Female	chesta16bkt@gmail.com	Opposite Mittal studio rani bazar , Bikaner	9828191199	1st year BDS
48.	Kanishka chandel	12-09-2002	18	Female	kanishkachandel032@gmail.com	Saraswati colony chakshu jaipur	7737509675	1st year BDS
49.	Sanchari Chowdhury	22-02-2002	19	Female	chowdhury.sanchari84@gmail.com	1/1 Olsichandi Tala 3rd lane Nimta kol-49	8583074882	1st year BDS
50.	Rohini	01-07-2001	19	Female	chouharohini560@gmail.com	Chanchal park Nangloi, Delhi-41 near bijendra farm house	9315989834	1st year BDS
51.	DINESH MEENA	01-06-2001	19	Male	dmdckwa2001@gmail.com	Vip, dekwa district ,ravai madhopur state Rajasthan	6377011041	1st year BDS


DIRECTOR PRINCIPAL
SURENDARA DENTAL COLLEGE
& RESEARCH INSTITUTE
SRI GANGANAGAR (RAJ)



10h
22h
20h

MEMORANDUM OF AGREEMENT

An agreement made and entered into on this _____ day of _____ 2020 (month & year) between the President of India, acting through Director, Regional Centre ECHS, Hisar (Station), for Ex Servicemen Contributory Health Scheme, (hereinafter called "ECHS" which expression, unless excluded by or repugnant to the subject or context, shall include its successors-in-office and assigns) of the First Part

AND

Mr. Gorav Gupta S/o, Late Sh. Surender Kumar Aggarwal owner or the authorized signatory of Surendera Dental College & Research Institute, Sri Ganganagar (Rajasthan) (hereinafter called ("Hospital, Diagnostic Centre, Dental Centre/Lab, Imaging Centre, Exclusive Eye Centre, Nursing Home, Hospices, Rehab Centre, Physiotherapy Centre, etc) which expression unless excluded by or repugnant to the subject or context, shall mean to include its legal representative, successors and permitted assigns) of the Second Part.

WHEREAS Surendera Dental College & Research Institute, Sri Ganganagar (Rajasthan) (name of corporate body/firm/trust/owner of medical facility), had applied for Empanelment under ECHS for treatment of the members of ECHS and their dependent beneficiaries, and ECHS proposes to extend empanelment to Surendera Dental College & Research Institute, Sri Ganganagar (Rajasthan) (name of Hospital, Diagnostic Centre, Dental Centre/Lab, Imaging Centre, Exclusive Eye Centre, Nursing home, Hospices, Rehab Centre, Physiotherapy Centre, etc) for treatment of ECHS members and their dependent beneficiaries for the treatment / diagnostic facilities as given in the Annexure II of Appendix A to Government Sanction Letter No V.-12017/03/2002-DE dated 28-05-2008.

The said MoA shall be effective/ in operation with effect from _____ of signing of MoA).

(date with year) (i.e. Day

For Surendera Dental College and Research Institute

[Signature]
Authorised Signatory

[Signature]
**DIRECTOR PRINCIPAL
SURENDERA DENTAL COLLEGE
& RESEARCH INSTITUTE
SRI GANGANAGAR (RAJ)**

NOW, THEREFORE, IT IS HEREBY AGREED between the Parties as follows:-

1. **List of Appendices and Annexures.** Under mentioned Appendices and Annexures shall deemed to be an integral part of this Agreement:-


- (a) Appendix – A Admissions, treatment and rates in empanelled hospitals
- (b) Appendix – B. Procedure for taking action against medical facilities empanelled with ECHS.
- (c) Appendix – C. Agreement with respect to the Online Bill Processing.
- (d) Appendix – D. Format for Feedback on Empanelled Medical Facilities.
- (d) Annexure – I. List of Polyclinics which are authorized to issue the referral form.
- (e) Annexure – II. Attested photocopy of the relevant Annexure to the Government Sanction Letter for Empanelment giving out the facilities for which the hospital / diagnostic / imaging facility is empanelled for.
- (f) Annexure – III. Rate List (CGHS /Negotiated rates provided less than CGHS rates/ECHS rates).

2. **Definitions and Interpretations.** The following terms and expressions shall have the following meanings for purposes of this Agreement:-

- (a) "Agreement" shall mean this Agreement and all Schedules, supplements, appendices, appendages and modifications thereof made in accordance with the terms of this Agreement.
- (b) "Medical Facility" shall mean Hospital, Diagnostic Centre, Dental Centre/Lab, Imaging Centre, Exclusive Eye Centre, Nursing home, Hospices, Rehab Centre, Physiotherapy Centre etc under this agreement providing medical investigation, treatment and the health care for ECHS beneficiaries.
- (c) "Benefit" shall mean the extent or degree of service the beneficiaries are entitled to receive as per the policies/rulings issued by Central Org ECHS/Govt of India (MoD).
- (d) "Bill Processing Agency" (BPA) means the agency appointed by ECHS for processing of Bills/ Data of all ECHS beneficiaries attending the empanelled Private medical facilities.
- (e) "Card" shall mean the ECHS Card / authorisation document issued by ECHS authority.
- (f) "Card Holder" shall mean an entitled person having a ECHS Card/authorisation document.
- (g) "ECHS Beneficiary" shall mean a person who is eligible for coverage of ECHS and holds a valid ECHS card/authorisation document for the benefit.
- (h) "Coverage" shall mean the financial limit under ECHS scheme for treatment of ECHS beneficiaries. Scheme being capless and cashless, no charges will be levied on ECHS beneficiary by Empanelled medical facility even in emergency, when ECHS beneficiary gets admitted/treated for a particular specialty which is not empanelled.
- (i) "Diagnostic Center" shall mean the (Name of the Diagnostic Center) performing tests/investigations.
- (k) "Imaging Centre" shall mean the (Name of the Imaging Centre) performing X-ray, CT Scan, MRI, USG, etc.

For Surendera Dental College and Research Institute


Authorised Signatory


DIRECTOR PRINCIPAL
SURENDERA DENTAL COLLEGE
& RESEARCH INSTITUTE
SRI GANGANAGAR (RAJ)

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(l) **Emergency.** Emergency shall mean any condition or symptom resulting from any cause, arising suddenly and if not treated at the early convenience, be detrimental to the health of the patient or will jeopardize the life of the patient.

(m) **"Empanelment"** shall mean the hospitals, exclusive eye Hospital, Diagnostic Centre, Dental Centre/Lab, Imaging Centre, Exclusive Eye Centre, Nursing home, Hospices, Rehab Centre, Physiotherapy Centre, etc authorized by the ECHS for treatment/ investigation purposes for a particular period.

(n) **"Dis-empanelment of Medical Facility"** shall mean removal of Empanelled medical facility on account of adopting unethical practices or fraudulent means in providing medical treatment to ECHS beneficiary or not following the good industry practices of the health care for the ECHS beneficiaries or violation of MoA or being beyond the requirement of ECHS as dictated by Central Org, ECHS.

(o) **"Party"** shall mean either the ECHS or the medical facility and **"Parties"** shall mean both the ECHS and the medical facility.

(p) **"Health Care Organisation (HCO)"** shall mean the (name of the hospital) while performing under this Agreement providing medical investigation, treatment and the healthcare of human beings.

Conditions for Providing Treatment/Services

3. **General Conditions.** The following will be governed in general conditions:-

(a) The hospitals, exclusive eye Hospital, Diagnostic Centre, Dental Centre/Lab, Imaging Centre, Exclusive Eye Centre, Nursing home, Hospices, Rehab Centre, Physiotherapy Centre, etc shall be empanelled for all facilities/services available in the healthcare organisation as approved by NABH/NABL/QCI and shall not be empanelled for the selected specialties/facilities.

(b) Hospital being NABH/NABL Accredited, would offer all the services within NABH/NABL Scope to ECHS beneficiaries in order to claim NABH/NABL rates, failing which, they will be entitled for Non-NABH/Non-NABL rates.

(c) The Hospital will be paid NABH/NABL rates subject to continued accreditation by NABH/NABL. If renewal of NABH/NABL Accreditation is not submitted prior to the expiry of current scope, Hospital will be paid Non NABH/Non NABL rates. Renewed NABH/NABL Scope will be ratified by MoD in the form of GL Note to enable payment at NABH/NABL rates.

(d) The hospitals, exclusive eye Hospital, Diagnostic Centre, Dental Centre/Lab, Imaging Centre, Exclusive Eye Centre, Nursing home, Hospices, Rehab Centre, Physiotherapy Centre, etc shall investigate/treat the ECHS beneficiary only for the condition for which they are referred with due authorisation letter.

(d) In case of unforeseen emergency of these patient during admission for approved 'procedure, provisions of emergency treatment' shall be applicable.

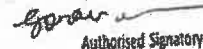
(e) It is agreed that ECHS beneficiaries shall be attended to on PRIORITY.


(f) ECHS has the right to monitor the treatment provided in the HCO.

4. CGHS empanelled hospitals on empanelment with ECHS will adhere only to the ECHS empanelment norms for ECHS beneficiaries.

5. **Authorisation Letter for Treatment.** The treatment/procedure shall be performed on the basis of the authorisation letter issued by the concerned ECHS Polyclinic and on the production of a valid ECHS card by the beneficiary.

For Surendra Dental College and Research Institute


Authorised Signatory


DIRECTOR PRINCIPAL
SURENDRA DENTAL COLLEGE
& RESEARCH INSTITUTE
SRI GANGANAGAR (RAJ)

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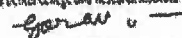
6. Investigation Prior to Admission. All investigations regarding fitness for the surgery will be done prior to the admission for any elective procedure as a part of package.
7. Additional Procedure/Investigation. For any material/additional procedure/investigation other than the condition for which the patient was initially permitted, would require the permission of the competent authority except in the emergency.
8. Procedure Where Referred Case Needs Specialised Treatment Not Available in The Hospital. HCO shall not undertake treatment of referred cases in specialities which are not available in the hospital. But it will provide necessary treatment to stabilize the patient and transport the patient safely to nearest recognized hospital under intimation to ECHS authorities. However, in such cases the Hospital will charge as per the CGHS rates only for the treatment provided.
9. Admissions, Treatment and Rates in Empanelled Hospitals. Admission, treatment and rates in empanelled hospitals will be guided by the provisions mentioned in Appendix A.
10. Revision of Rates. The medical facility is not at liberty to revise the rates suo moto. The Rates fixed by the CGHS/ECHS shall continue to hold good unless revised. In case the notified rates are not acceptable to the empanelled medical facility, or for any other reason, the medical facility no longer wishes to continue on the list under ECHS, it can apply for exclusion/removal from the panel by giving 30 days notice. However, for patients undergoing treatment in the hospital shall continue to avail the treatment till the individual is discharged.


Emergency Admission

11. In emergency, patient shall be admitted and life & limb saving treatment will be given on production of ECHS card by the members, even in the absence of referral form. In emergency the hospital will not refuse admission or demand an advance payment from the beneficiary or his family member or a pensioner availing ECHS facilities. The refusal to provide the treatment to bonafide ECHS beneficiaries in emergency cases and other eligible categories of beneficiaries on credit basis, without valid ground, would attract disqualification for continuation of empanelment. The treatment should not be delayed even if the ECHS beneficiary is not in possession of the ECHS card which can be brought later. All emergencies will be treated on cashless basis till stabilization even if the specialty concerned for management of the case is not empanelled. The hospital will inform the nearest Polyclinic / Online about such emergency admission within 02 (Two) hours or as amended from time to time. Payments will NOT be recovered from ECHS patient in such cases. The following ailments may be treated as an emergency which is illustrative only and not exhaustive, depending on the condition of the patient:-

- (a) Acute Cardiac Conditions/Syndromes including Myocardial Infarction, Unstable Angina, Ventricular Arrhythmias, Paroxysmal Supraventricular Tachycardia, Cardiac Tamponade, Acute Left Ventricular Failure/Severe Congestive Cardiac Failure, Accelerated hypertension, complete dissection of Aorta etc.
- (b) Vascular Catastrophies including Acute limb ischemia, Rupture of aneurysm, medical & surgical shock and peripheral circulatory failure.
- (c) Cerebro-Vascular Accidents including strokes, neurological emergencies including coma, cerebro-meningeal infections, convulsions, acute paralysis, acute visual loss.
- (d) Acute Respiratory Emergencies including Respiratory failure and de-compensated lung disease.
- (e) Acute abdomen including acute obstetrical and gynecological emergencies.
- (f) Life threatening Injuries including Road traffic accidents, Head injuries, Multiple Injuries, Crush Injuries and thermal injuries etc.

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The name, designation, email id and mobile number of the Nodal Officers will be specified as under:-

Ser No	Name	Designation	Mobile No	Email ID
(a)	Dr. Pradhuman Verma	Professor & HOD	9413385160 9829076285	skg@sgl.org.in sdcrf@sgl.org.in gcrav@sgl.org.in
(b)		MS/Dy MS/Addl MS		
(c)		Corporate Affairs/ Auth Signatory		

22. **Annual Report.** HCO will submit an annual report regarding number of referrals received, admitted ECHS beneficiaries, bills submitted to the ECHS and payment received, details of monthly report submitted to the Additional Directors/Joint Additional Directors ECHS of concerned city. Annual audit report of the hospitals will also be submitted along with the statement. HCO shall submit all the medical records in digital format.

23. **EMR (Electronic Medical Records)/ EHR (Electronic Health Reports).** The empanelled Health Care Organization (Except Eye Hospital/Centre, Dental Clinics, Diagnostic Lab/Imaging Centres) shall have to implement Electronic Medical Records and EHR as per the standards and guidelines approved by Ministry of Health & Family Welfare within one year of its empanelment.

24. **No Commercial Publicity.** HCO will not make any commercial publicity projecting the name of ECHS. However, the fact of empanelment under ECHS shall be displayed at the premises of the empanelled Health Care Organisation.

25. **Meetings.** Authorized signatory / representative of the empanelled hospital shall attend the periodic meetings held by Regional Centre required in connection with improvement of working conditions and for Redressal of Grievances. Concerned billing staff must also attend such periodic interactive sessions conducted by the Regional Centre so as to resolve the outstanding issues.

26. **Inspections.** There shall be continuous Medical Audit of the services provided by the empanelled medical facility. During the visit by authorized representative of Polyclinics/ Sin Cdrs/ Regional Centres/ Central Organisation including BPA, the empanelled medical facility authorities will cooperate in carrying out the inspection. It shall be the duty and responsibility of the empanelled medical facility (Hospital, Diagnostic Centre, Dental Centre/Lab, Imaging Centre, Exclusive Eye Centre, Nursing home, Hospices, Rehab Centre, Physiotherapy Centre) at all times, to obtain, maintain and sustain the valid registration, recognition and high quality and standard of its services and healthcare and to have all statutory / mandatory licenses, permits or approvals of the concerned authorities under or as per the existing laws.


27. **Integrity and Obligations of Empanelled Medical Facilities During Agreement Period.** The empanelled medical facility is responsible for and obliged to conduct all contracted activities in accordance with the Agreement using state-of-the-art methods and economic principles and exercising all means available to achieve the performance specified in the Agreement. The medical facility is obliged to act within its own authority and abide by the directives issued by the ECHS. The medical facility is responsible for managing the activities of its personnel and will hold itself responsible for their misdemeanors, negligence, misconduct or deficiency in services, if any.

28. **Application Form for Empanelment.** The terms and conditions stipulated in the Application for Empanelment with ECHS shall be read as part of this agreement.

29. **Agreement with respect to the Online Bill Processing & Patient Feedback.** The medical facility must abide by the instructions as given at Appendix C i.e. Agreement with respect to the Online Bill Processing. The Bill Processing fees will be charged as per the rates given in the above mentioned Appendix. ECHS reserves the right to revise these charges from time to time. All digitally

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signed bills will be uploaded on BPA's portal and the summary of final bills will be authenticated and duly signed alongwith Mobile Number by the primary beneficiary or any of the dependent holding a valid ECHS card. For Diagnostic labs having multiple collection centre and providing reports online, the referral issued by polyclinic will be authenticated and duly signed alongwith the Mobile Number by the beneficiary on the referral at the time of collection of sample. The same will be uploaded on the BPA portal. All IPD patients will be provided feedback proforma as per format given at Appendix D. The feedback proforma is to be obtained from the patient or any of the dependent holding a valid ECHS card. The feedback proforma is mandatorily to be attached with the bills on the BPA portal, failing which the claim will be forwarded to NMI basket. A Mobile Application for ECHS beneficiaries is also being developed which will enable beneficiaries to submit feedback through online mode which will be integrated with the BPA portal.

30. The hospital shall raise bills in the BPA portal online in respect of the treated ECHS members, within seven days of the completion of the treatment/discharge of the patient or last OPD date.

31. TDS. Tax deduction at source as per Section 194J of the Income Tax Act, 1981 for Technical (Medical Expense) and professional Services fee for bills submitted for payment, shall be deducted after processing for reimbursement. Any other instructions issued by Govt authorities are binding.

32. Changes in Infrastructure / Staff To Be Notified To ECHS. The medical facility shall immediately communicate to Regional Centre about any closure of empanelled facility/renovation of infrastructure/shifting of premises. The empanelment will be temporarily withheld in case of shifting of the facility to any other location. The new establishment of the same Hospital shall attract a fresh certification from QCI/NABH/NABL etc. for consideration of continuation of empanelment.

33. Retention of Payment. The ECHS shall have a lien and also reserves the right to retain and set off against any sum which may, from time to time be due to and payable to the hospital hereunder, any claim which the ECHS may have against the hospital under this or any other agreement. Retention of payment for audit liabilities/beneficiary liabilities or any other liability will be done by ECHS. In case dues against the empanelled facility is higher than the credit facility, empanelled facility will ensure payment.

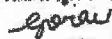
34. Audit by ECHS. The hospital shall provide access to the financial and medical records for assessment and review by medical and financial auditors of the ECHS, as and when required and the decision of ECHS on necessity or requirement shall be final. Any third party / internal organisation hired / ordered by ECHS authorities to carry out surprise inspection / audit of the facility will be provided access to Medical as well as financial records by the empanelled hospitals. All medical documents / records / bills pertaining to the ECHS beneficiary will be retained in hard copy as well as soft copy till finalization of audit by CAG / CDA. No record shall be destroyed without obtaining written confirmation from Central Organisation ECHS.


35. Performance Bank Guarantee(PBG). Healthcare organisations that are recommended for empanelment after the initial assessment shall also have to furnish a Performance Bank Guarantee valid for a period of 30 months, i.e six months beyond empanelment period to ensure efficient service and to safeguard against any default. Following PBG will be applicable :-

(a)	Empanelled Hospitals/Cancer units	- Rs 10.00 Lakhs
(b)	Eye Centre	- Rs 2.00 Lakhs
(c)	Dental Clinics	- Rs 2.00 Lakhs
(d)	Physiotherapy Centres	- Rs 2.00 Lakhs
(e)	Rehabilitative Centres and Hospices	- Rs 2.00 Lakhs
(f)	Diagnostic Laboratories / Imaging Centres	- Rs 2.00 Lakhs

(PBG for charitable organizations would be 50% of above amount)

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36. **Forfeiture of PBG.** Action to be taken against hospitals regarding Forfeiture of PBG is indicated in Appendix B.

37. The Performance Bank Guarantee shall be forfeited and the ECHS shall have the right to de-recognize the medical facility as the case may be. Such action could be initiated on the basis of a complaint, input from other sources, medical audit or inspections carried out by ECHS teams at random. The decision of the Ministry of Defense, Department of ESW in this regard shall be final.

38. **Indemnity.** The empanelled medical facility shall at all times, indemnify and keep indemnified ECHS / the Government against all actions, suits, claims and demands brought or made against it in respect of anything done or purported to be done by the medical facility in execution of or in connection with the services under this Agreement and against any loss or damage to ECHS/the Government in consequence to any action or suit being brought against the ECHS / the Government, alongwith (or otherwise), medical facility as a Party for anything done or purported to be done in the course of the execution of this Agreement. The medical facility will at all times abide by the job safety measures and other statutory requirements prevalent in India and will keep free and indemnify the ECHS from all demands or responsibilities arising from accidents or loss of life, the cause or result of which is the medical facility negligence or misconduct. The medical facility will pay all indemnities arising from such incidents without any extra cost to ECHS and will not hold the ECHS responsible or obligated. ECHS / the Government may at its discretion and shall always be entirely at the cost of the medical facility defend such suit, either jointly with the medical facility enter or singly in case the latter chooses not to defend the case.

39. **Dissolution of Partnership.** Should the medical facility get wound up or partnership is dissolved, the ECHS shall have the right to terminate the Agreement. The termination of Agreement shall not relieve the medical facility or their heirs and legal representatives from the liability in respect of the services provided by the medical facility during the period when the Agreement was in force. The medical facility shall notify the Regional Centre of any material change in their status and their shareholdings or that of any Guarantor of the in particular where such change would have an impact on the performance of obligation under this Agreement.

40. **Modification to Agreement.** This agreement may be modified or altered only after written confirmation from Central Org ECHS.

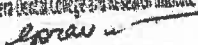
41. **Termination of Agreement.** The Regional Centre will obtain written concurrence of the Central Organisation, ECHS before taking the any decision of terminating the Agreement. The ECHS may, without prejudice to any other remedy for breach of Agreement, by written notice of default sent to the medical facility terminate the Agreement in whole or part without assigning any reason after giving 30 days notice:-


(a) **Termination For Default.**

(i) If the empanelled medical facility fails to provide any or all of the services for which it has been empanelled within the period(s) specified in the Agreement or within any extension thereof if granted by the ECHS pursuant to Condition of Agreement.

(ii) If the medical facility in the judgment of the ECHS has engaged in corrupt or fraudulent practices in competing for or in executing the Agreement.

(iii) **Bribe or Malpractice.** In the event of any bribes, commission, gifts or advantage being given, promised or offered by or on behalf of the medical facility or any of them for their agent or anyone else on their behalf to any member, the family of any member or representative of the ECHS in relation to the obtaining or execution of this or any other Agreement with the ECHS, than the ECHS shall, notwithstanding any criminal liability which the medical facility may incur, cancel and/or terminate this Agreement and/or any other agreement entered into by the ECHS holding the medical.

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facility liable for any loss or damages resulting from any such cancellation. Any question or dispute as to the commission of any offence under this clause shall be decided by the ECHS in such manner and in such evidence of information as it shall think fit and sufficient and its decision shall be final, conclusive and binding upon the medical facility.

(iv) In case of any wrong doings as specified in Memorandum of Agreement by one medical facility of a particular group, ECHS reserves the right to remove all empanelled medical facility of that particular group from its empanelled list of medical facility.

(v) If the medical facility fails to perform any other obligation(s) under the Agreement.

(b) **Dis-Empanelment.** Appropriate action, including removal from ECHS empanelment and / or termination of this Agreement, may be initiated on the basis of a complaint, medical audit or inspections carried out by ECHS teams / appointed BPA (Bill Processing Agency).

(c) **Notice for Termination of Agreement.** The Agreement may be terminated by either party serving 30 days notice in writing, upon the other party and the notice given by the ECHS shall be valid if given and signed by the competent authority on behalf of the ECHS.

(d) **Authority to Issue Notice.** Subject as otherwise, provided in this contract, all notices may be given or taken by the ECHS or by any officer for the time being entrusted with functions of ECHS.

(e) **Delivery of Notices.** All notice and reference hereunder shall be deemed to have been duly served and given to the medical facility if delivered to the medical facility or their authorized agent or sent by registered post/speed post to the address of the hospital stated hereinbefore and to the ECHS if delivered to the Director, Regional Centre ECHS or sent by registered post/speed post or left at his office during office hours on any working days. Any notice given by one party to the other pursuant to this Agreement shall be sent to other party in writing by registered post to the other Party's address as below (in case of change in address, the same will be informed immediately to the other Party). The confirmation for this effect/ delivery notice be given on email or any other digital means of communications will also be held valid :-

Address of Medical Facility	Address of the Regional Centre
Surendera Dental College & Research Institute, H.H. Gardens, Sri Ganganagar (Rajasthan) 335001	Regional Centre ECHS, Hisar, PIN 800 383 C/o. 58 APO

42. **Arbitration.** Any dispute or difference whatsoever arising between the parties to this agreement out of our relating to the construction, meaning, scope, operation or effect of this agreement or the validity of the breach thereof shall be resolved between the empanelled facility and the Regional Centre with mutual deliberation. If any of the party is not satisfied, the matter will be referred to Central Org ECHS for arbitration by mutual deliberation. Even after this, if the issue remains unresolved, it will be referred to an arbitrator to be appointed by mutual consent of both parties herein. If the parties cannot agree on appointment of the Arbitrator within a period of one month from notification by one party to the other of existence of such dispute, then the Arbitrator shall be nominated by the Secretary, Department of Legal Affairs, Ministry of Law and Justice. The provisions of the arbitration and conciliation Act, 1996 will be applicable and the award made hereunder shall be final and binding upon the parties hereto, subject to legal remedies available under the law. Such differences shall be deemed to be a submission to arbitration under the Indian Arbitration and Conciliations Act, 1996, or of any modifications, Rules or reenactments thereof. The Arbitration proceedings will be held at New Delhi. Non adherence of this process will be considered adequate for termination of contract after 30 days notice.

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43. **Administrative Cost** The administrative cost of the documentation and creation of all infrastructure including manpower & hardware resources and bandwidth as well as recurring and all other expenses required by the medical facility for the purpose of this Agreement shall be borne by the medical facility.

44. **Retention of Agreement** The Original copy of this Agreement shall be kept at the office of Director, Regional Center ECHS, Hisar and a true copy shall be retained in the office of the medical facility. One extra copy to be provided at CO ECHS. Once digilocker concept is implemented, the docs can be kept in digilocker as well.

45. **Duration of Agreement** This Agreement shall remain in force for a period of 02 years from (Day of signing of MoA) to (date), extendable on mutual agreement depending upon under mentioned conditions (whichever is the earliest) :-

- (a) Two years or
- (b) Till the Performance Bank Guarantee is valid or
- (c) In case of CGHS Empanelled medical facilities, the date till empanelment with CGHS is valid. In case of CGHS Empanelled medical facilities, such medical facilities will inform the Regional Centre whenever their CGHS Empanelment expires and that they will automatically apply for renewal of CGHS Empanelment.
- (d) Till central/ State Govt does not suspend/terminate the facilities for conduct of medical business.

46. The empanelled facility will give copy of all diagnostic tests results, incl MRI/X-Ray/USG etc alongwith treatment rendered besides discharge summary and summary of bills to the beneficiary for further management of patient without any extra cost.

Miscellaneous

47. In addition to the above the following miscellaneous aspects will be applicable:-

- (a) The healthcare organisation agrees that any liability arising due to any default or negligence will not represent or hold itself as agent of the ECHS.
- (b) ECHS will not be responsible in any way for any negligence or misconduct of the healthcare organisation and its employees for any accident, injury or damage sustained or suffered by any ECHS beneficiary or any third party resulting from or by any operation conducted by and on behalf of the hospital or in the course of doing its performance of the medical services shall be borne exclusively by the hospital who shall alone be responsible for the defect and or deficiencies and rendering such services.
- (c) Hospitals, exclusive eye Hospital, Diagnostic Centre, Dental Centre/Lab, Imaging Centre, Exclusive Eye Centre, Nursing home, Hospices, Rehab Centre, Physiotherapy Centre, etc shall notify to the ECHS of any material change in the status where such change would have an impact on the performance of obligation under this Agreement.
- (d) This Agreement can be modify or altered only on written Agreement signed by both the parties.
- (e) Should the hospitals, exclusive eye Hospital, Diagnostic Centre, Dental Centre/Lab, Imaging Centre, Exclusive Eye Centre, Nursing home, Hospices, Rehab Centre, Physiotherapy Centre, etc get wound up or partnership is dissolve, ECHS shall have the right to terminate the Agreement. The termination of agreement shall not relive the hospital or their heirs and legal representatives from the liability in respect of the services provided by the Healthcare organisation during the period when the Agreement was in force.

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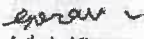
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In witness whereof, Director, Regional Centre ECHS, Hisar for and on behalf of the President of India and the above named medical facility have hereunto set their respective hands and seal the date and year first above written.

Signature of Director, Regional Centre ECHS
_____, for and in behalf of the President of India
(With stamp of Name & Designation)

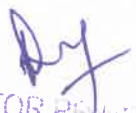
Witness of the signature of Director, Regional
Centre ECHS
(With stamp of Name & Designation)

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Signature of Authorized Signatory of the Hosp
(With stamp of name & Designation)

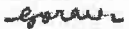
Witness to the signatory of the Hospital
(With stamp of Name & Designation)



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ADMISSION AND TREATMENT IN EMPANELLED HOSPITALS

1. **ECHS Polyclinics Initiating Referrals.** Medical facility shall investigate / treat the ECHS beneficiaries only for the condition(s) for which they are referred with due referral form issued from either of the polyclinics as per Annexure-I attached. The referred cases would be issued referral form duly signed by Medical Officer and Officer-in-Charge of Polyclinic under his seal and signature bearing name also (in the online M/S System signature of MO may not be there on the referral form. However, OIC Polyclinic signature/stamp has to be present on referral form). The referrals generated online over the ECHS mobile application / customized application of ECHS for referrals shall be integrated into the hospitals HIS and referrals will be activated after authentication of the beneficiary through the authentication system deployed in the medical facility premises.
2. HCO will provide the facilities as per Government Sanction Letter attached at Annexure II.
3. HCO will establish the following set up:-
 - (a) The HCO will set up a help-desk for beneficiaries within 07 days of signing of this agreement. This help-desk must be situated in the facility of the HCO in such a way that it is easily visible, easily accessible to the beneficiaries.
 - (b) The help desk will be equipped with all the necessary hardware and software as well as internet connectivity as required by BPA to establish the identity of the ECHS beneficiary. Specifications of necessary hardware and software have been provided in Appx 'B'.
 - (c) The help desk shall be manned by an Arogya Mitra (AM) for facilitating the beneficiary in accessing the benefits. Arogya Mitra will need to be hired by the HCO at their own cost and they should get them trained before starting the operations. The guidelines for engagement of Arogya Mitras are as follows:-
 - (i) Receive beneficiary at the HCO.
 - (ii) Guide Beneficiary regarding ECHS and process to be followed in the HCO for taking the treatment.
 - (iii) Carryout the process of Beneficiary Identification for such persons who are beneficiaries of ECHS.
 - (iv) Take photograph of the beneficiary.
 - (v) Carryout the Aadhaar based identifications for such beneficiaries who are carrying Aadhaar.
 - (vi) If the person is not carrying Aadhar, carryout the identification through other defined government issued ID.
 - (vii) Scan the identification documents as per the guidelines and upload through the software.
 - (viii) Send the result of beneficiary identification process to Polyclinic for approval.
 - (ix) After getting confirmation from polyclinic refer the patient to doctor for consultation.
 - (x) On advise of the doctor admit the patient in the HCO.

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- (xi) Enter all the relevant details of package and other information as provided by the doctor on the ECHS software.
- (xii) At the time of discharge enter all the relevant details and discharge summary in the ECHS software.
4. If one or more treatment procedures form part of a major treatment procedure, package charges would be made against the major procedures and only half of approved charges quoted for other procedures would be added to the package charges of the first major procedure.
5. Empanelled facility will prescribe generic medicines. Branded medicines may be prescribed when no generic is available or absolutely essential.
6. An empanelled facility whose rates for a procedure/test/facility are lower than the approved rates shall charge the beneficiaries as per actual. If the beneficiary willingly prefers a medical facility which is in excess of approved/ package deal rates, the excess charges would be borne by the beneficiaries.
7. Any legal liability arising out of services availed by ECHS beneficiary shall be dealt with by the empanelled facilities who shall alone be responsible. ECHS will not have any legal liability in such cases.
8. Further Referral to Other Hosps. The hospital would not refer the ECHS cases further to other institute, and if it does so, it will be at their own arrangements and ECHS would not be responsible to the other institute for any liability. Payment for such outsourced services will be made by the empanelled hospital and charges at CGHS rates will be applicable. The expenditure of such institutes will be paid by the empanelled facility and will not be recovered from the patients. Payment in such cases would also be restricted to CGHS/AIIMS/ECHS approved rates only as the case may be.
9. Refusal to Treat ECHS Patients. The hospital would not refuse for treatment/procedures/ investigation to referred cases on flimsy ground. The refusal to provide the treatment to bonafide ECHS Beneficiaries in emergency cases and other eligible categories of beneficiaries on credit basis, without any valid ground, would attract disciplinary action including disqualification for continuation of empanelment. In case of non availability of bed, the empanelled facility will transfer the patient to some other facility as selected by the patient with its own transport arrangement. In addition, following will also be adhered to:-
- (a) The Hospital would itself obtain prior approval required for those procedures, implants and tests not listed in CGHS rate list and for extended hospitalisation, and will not ask ESM or his/her representative for this purpose.
- (b) The hospital would prescribe Generic Medicine as far as possible and desist from intending to write and prescribed branded medicines.
- (c) The hospital would provide treatment to ECHS members referred from all the polyclinics under AOR of the Regional Centre.
10. Documentation during Admission Responsibility of Hospital. Any documentation required during the admission of the patient, for example obtaining sanction for unlisted procedures, permission for extended admission, implants etc will be carried out by hospital itself and patient or his/her attendants would not be made to obtain these on behalf of the hospital. The hospital can send these documents through online / mobile application / e-mail / fax for obtaining in-principle approval followed by hard copy to be sent to concerned polyclinic/ authority. The treatment should not stop / delayed for want of such approvals/sanctions. The hospital should justify the procedure/treatment carried out in such cases. In case of operationalisation of digital process, as and when implemented, physical copies may not be required. However, decision of ECHS authority will be final.

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ECHS Package Rate

11. "Package Rate" As issued by CGHS/ECHS/AIIMS rates shall mean all inclusive – including lump sum cost of inpatient treatment/day care/diagnostic procedure for which a ECHS beneficiary has been permitted by the competent authority or for treatment under emergency from the time of admission to the time of discharge including (but not limited to):-

- (a) Registration Charges.
- (b) Admission Charges.
- (c) Accommodation charges including patient diet.
- (d) Operation charges.
- (e) Injection Charges.
- (f) Dressing Charges.
- (g) Doctor/Consultant visit charges.
- (h) ICU/CCU charges
- (i) Monitoring Charges.
- (k) Transfusion and Blood processing charges.
- (l) Pre-Anesthetic Checkup and Anesthesia Charges.
- (m) Operation Theater Charges.
- (n) Procedural Charges/Surgeon's fee.
- (o) Cost of surgical disposables and all sundries used during hospitalization.
- (p) Cost of medicines and consumables.
- (q) Related routine and essential investigation.
- (r) Physiotherapy charges etc.
- (s) Nursing Care charges etc.

12. Package rate also includes two pre operative consultation and two post operative consultations.

13. Cost of implants/stents/grafts is reimbursable in addition to package rates as per CGHS ceiling rates or as per actual, whichever is lower. In case a beneficiary demands a specific Brand of Stent/implant and gives his consent in writing, the difference in cost over and above the ceiling rate may be charged from the beneficiary, which is non-reimbursable.

14. Implants and Medicines. The medical facility will enclose pouches/stickers/warranty certificate from supplier in case of implants/stents where to be paid in addition to package rate. No medicines will be charged more than MRP. MRP of medicines/ consumables will be checked/ compared with rates quoted in CIMS/MIMS/NPPA/standard online drug website by BPA and ECHS authorities. All Medicines/Equipment costing more than 5000/- (Rupees five thousand) per unit will

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Authorised Sign.

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be supported by certificate from the medical facility that these have been charged at the rate less than or equal to MRP. Discount on medicines and consumables should be provided, if approved by Govt.

15. During in-patient treatment of the ECHS beneficiary, the hospital will not ask the beneficiary or his/her attendant to purchase separately the medicines/sundries/equipment or accessories from outside and will provide the treatment within the package rate, fixed by the CGHS which includes the cost of all the items. However, the following items are not admissible for reimbursement-

- (a) Toiletries.
- (b) Sanitary Napkins.
- (c) Talcum Powder.
- (d) Mouth Freshners.

16. In case of conservative treatment/where there is no CGHS package rate, calculation of admissible amount would be done item wise as per CGHS rates or as per AIIMS rates, if there is no CGHS rate for a particular item.

17. The services would be extended on billing system to referred cases for agreed upon period. Charges would be levied for a particular procedure / package deal as prescribed by the CGHS as per rates approved by ECHS (Annexure III attached). Under no circumstances will rates be exceeded. Where CGHS rates are not available AIIMS rates / (TATA MEMORIAL HOSPITAL rates for Oncology Cases) will be applicable. If no rates are available then particular hospital rates will be applicable. The rates notified by CGHS shall also be available on web site of Ministry of Health & F.W. at <http://msoftransparent.nic.in/cghsnew/index.asp>. The rate being charged will not be more than what is being charged for same procedure from other (non-ECHS) patients or Organisations. The rates fixed by Govt. regulator will be binding.

18. No additional charge on account of extended period of stay shall be allowed if that extension is due to infection on the consequences of surgical procedure/ faulty investigation procedure etc.

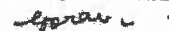
19. Package rates envisage up to maximum duration of indoor treatment as follows:-


- (a) Upto 12 days for Specialized (Super Specialties) treatment.
- (b) Upto 07 days for other Major Surgeries.
- (c) Upto 03 days for Laparoscopic surgeries/elective Angioplasty/normal deliveries and 01 day for day care/Minor (OPD) surgeries.

20. However, if the beneficiary has to stay in the hospital for his/her recovery for a period more than the period covered in package rate, in exceptional cases, supported by relevant medical records and certified as such by hospital, the additional reimbursement may be allowed, which shall be limited to accommodation charges as per entitlement, investigations charges at approved rates, doctors visit charges (not more than 2 visit per day per visit by specialists/consultants) and cost of medicines for additional stay.

21. The empanelled health care Organization cannot charge more than CGHS approved rates when a patient is admitted with valid ECHS Card with prior permission or under emergency. In case of any instance of overcharging the overcharged amount over and above CGHS rate (except inadmissible items and difference paid due to implant/stent of specific brand chosen by CGHS beneficiary) shall be paid to the beneficiary and shall be recovered from the pending bills of the hospitals.

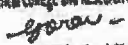
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22. If any empanelled health care Organization charges from ECHS beneficiary for any expenses incurred over and above the package rates vis-à-vis medicine, consumables, sundry equipment and accessories etc, which are purchased from external sources, based on specific authorization of treating doctor/staff of the concerned hospital and if they are not falling under the list of non-admissible items, reimbursement shall be made to the beneficiary and the amount shall be recovered from the pending bills of hospitals.
23. Allopathic System of Medicines. The rates will be applicable for allopathic system of medicine only.
24. Monitoring of Treatment. ECHS has the right to monitor by all possible means the treatment provided in (the Private Hospitals, exclusive eye hospitals/centres, exclusive dental clinics/labs, Diagnostic Laboratories/ Imaging centres, etc) a medical facility.
25. No Purchase of Medicines by ECHS Beneficiaries. During treatment/ investigation/ procedures of the ECHS beneficiaries, the empanelled medical facility shall not ask the members to purchase separately the medicines, blood & blood products from outside but bear the cost on its own, as the scheme being capless and cashless for the ECHS beneficiary and package deal rate fixed includes the cost of drugs, surgical instruments and other medicines etc as given in the SOP for online billing and amendments issued from time to time.
26. Second Procedure - Minor Procedure. If one or more treatment procedures form part of a major treatment procedure, package charges would be made against the major procedures and only half of approved charges quoted for the other procedures would be added to the package charges of the first major procedure. In case procedure is carried of in/on paired limb/organ, full payment for both will be made.
27. The revised rates and policies governing the CGHS rates being notified by Govt of India, Ministry of Health and Family Welfare and Ministry of defence from time to time will be incorporated by default.

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No. 25(02)/2018/WE/D (Res)
 Government of India
 Ministry of Defence
 (Department of Ex-Servicemen Welfare)

Sena Bhawan, New Delhi-110011.
 Dated 10th October, 2019.

The Managing Director
 Central Organisation
 Ex-Servicemen Contributory Health Scheme
 Tripathi Marg,
 Connaught Circle,
 Connaught Place,

Subject: Procedure for taking action against medical facilities empanelled with ECHS and delegation of powers thereof to MD, ECHS.

In the light of the decisions contained in Para 6 (d) of the Minutes of meeting held under the Chairmanship of Secretary, ESW on 10.08.2015, circulated vide MoD/DoESW ID No. 22B (02)/2013/ US(WE)/D(Res) dated 25.09.2015, the Competent Authority has decided to issue this order.

2. The Provisions regarding actions to be taken against private empanelled medical facilities in case of unsatisfactory performance / unethical practices / medical negligence / violations of provisions of MoA are contained in the following orders of MoD -

- (a) Para 7 and Para 13 of MoD letter No 22B (04)/2010/US (WE)/D (Res) dated 18.02.2011.
- (b) MoD letter No 22D (04)/2011/US (WE)/D (Res) dated 22.07.2011.

3. In continuation of the provisions contained in the above mentioned letters of MoD, the procedure for taking action against private empanelled medical facilities by CO ECHS and Ministry of Defence (MoD), Deptt of Ex-Servicemen Welfare (DoESW) and delegation of powers in this regard shall be as indicated in the following paragraphs.

4. Cases of violation of conditions of MoA are categorised as Level I, Level II and Level III as under. It is clarified that the list is illustrative and not exhaustive.

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(a) Level I - Violations would include committing the following actions on the first occasion:-

- (i) Refusal of service.
- (ii) Discrimination against ECHS beneficiaries vis-a-vis others.
- (iii) Refusal of treatment on credit to eligible beneficiaries and charging directly from them.
- (iv) Non authentication of ECHS beneficiaries through system as laid down by ECHS from time to time.

(b) Level II - Violations would include the following offences:-

- (i) Reduction in staff/ infrastructure/ equipment after empanelment with ECHS.
- (ii) Undertaking unnecessary procedures.
- (iii) Prescribing unnecessary drugs/tests.
- (iv) Overbilling.
- (v) Non submission of the report, habitual late submission or submission of incorrect data in the report.
- (vi) Repetition of Level I violations despite issue of warning to the HCO by CO ECHS.

(c) Level III - Violations would include repetition of Level I and Level II violations despite imposition of financial penalties and the following offences:-

- (i) Not providing access to financial and medical records to ECHS authorised persons during visit to the hospital/ medical facility.
- (ii) Criminal offences by staff of the hospital against any beneficiary or dependent, like rape, molestation etc.

Procedure for Handling Complaints.

5. While dealing with complaints, instructions of Central Vigilance Commission. (CVC) on action on complaints shall be kept in mind. On receipt of a complaint whether directly or from MoD/DoESW against an empanelled

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reports of as a part of surprise check. MD, ECHS shall seek a preliminary inquiry report from the Director of concerned Regional Centre. The inquiry shall be conducted by an officer nominated by Director of concerned Regional Centre as authorized by MD, ECHS within a period of one month.

6. If the complaint is found to be prima facie true but it is felt that the complaint is not conclusively proven on the basis of documents/statements and further detailed enquiry is required, then MD, ECHS shall order a detailed inquiry by an officer of the RC other than the officer who conducted the preliminary inquiry. If required MD, ECHS may constitute / request appropriate authority to constitute a Board of Officers for this purpose which shall not include the officer who conducted the preliminary inquiry. The inquiry Officer/ Board shall issue detailed Show Cause Notice to the empanelled medical facility. The Show Cause Notice should clearly spell out the allegations and the conclusions of the preliminary inquiry together with the grounds on which such conclusions were reached. The inquiry Officer/ Board shall make such inquiry as it deems fit. The Board shall also take statements of all the parties concerned. Finally the inquiry Officer/ Board shall submit its findings along with all the documents, show cause notice, reply to show cause notice, statements made by the parties etc to Director Regional Centre. On receipt of this report, the Director, Regional Centre concerned shall submit the inquiry report along with his views/recommendations with detailed reasons to MD, ECHS.

7. Where the case is considered fit for issue of warning only or the complaint is proven in preliminary enquiry on the basis of documents/statements, detailed inquiry may be dispensed with by MD, ECHS


8. MD, ECHS shall take the following course of action depending on the gravity of the lapse as indicated in para 4. above:

(i) In case of violations of Level I nature, Director Regional Centre will issue a warning to the empanelled medical facility. Repetition of Level I violations will be treated as Level II violations.

(ii) If the violation is considered Level II in nature and proven in the enquiry with documentary evidences and/or statements, MD ECHS shall impose suitable financial penalty from the amount of PBG and / or impose 'Stop Referral' upto three months upon the medical facility concerned and submit the complete details of the case within seven working days to MoD/ DoESW for information. However, the total amount of PBG shall be maintained by the hospital being a revolving guarantee.

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(iii) If the lapse is of Level III nature, and proven in the enquiry with documentary evidences and/or statements, MD ECHS shall issue an order for forfeiture of total amount of PBG and / or issue an order of stop referral for a period of three months against the medical facility concerned and submit the complete details of the case within seven working days to MoD/ DoESW for information.

(iv) Where, as per provision of para 11 of this letter, the case is fit for dis-empangement, and the case is proven in an enquiry, the order for "stop referral" shall be issued by MD, ECHS " until further orders". In this case complete details of the case shall be submitted by MD, ECHS to MoD/ DoESW indicating the reasons and justification for issue of stop referral within 7 working days and proposal for disempangement will be submitted to MoD/ DoESW within 30 working days.

(v) For overbilling and unnecessary procedure, the extra amount so charged shall also be deducted from the pending/future bills of the medical facility.

(vi) For offence listed in para 4(c) (ii) i.e. criminal offences by staff of a medical facility against any ECHS beneficiary, where FIR has been lodged by the concerned ECHS beneficiary. MD, ECHS shall issue stop referral orders against that medical facility which shall remain in force till final outcome of the police investigations. Based on the final outcome of the police investigations, the case shall be processed further by MD, ECHS for either revocation of the stop referral or for disempangement.

6 In all cases mentioned at Para 8 (i) to (vi) above, MD ECHS shall record detailed reasons in writing / recommending to MoD/DoESW action against the empanelled medical facility.

Appeal Against Imposition of financial penalties and Stop Referral.

10. The affected medical facility shall have the right to appeal to MoD/DoESW against imposition of financial penalties from the PBG and in case of issue of stop referrals by MD, ECHS. The last para of order of MD, ECHS shall clearly, state "You may if you so desire, prefer an appeal against this decision in writing to MoD/ DoESW by post or by email." MoD/DoESW shall consider the appeal and upon examination pass such orders as it deems fit.

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Dis-empowerment:

11. In the following cases MD ECHS shall send to MoD/DoESV a detailed proposal for dis-empowerment of medical facility within 30 working days of issue of Stop Referral orders against empanelled medical facility.

- (a) Where the medical facility has committed fraudulent activities;
- (b) Where, there is proven case of Major/serious negligence in treatment leading to loss of life/limb or grave damage to the health of the ECHS Patient.
- (c) Where there is repetition of violations of the provisions of MoA despite issue of written warnings to the management of the medical facility and subsequent imposition of financial penalties.
- (d) If a medical facility is, at any point of time, found unfit for empanelment with ECHS by NABH/NABL/QCI.

12. Once dis-empowered, the medical facility shall be debarred from fresh empanelment for a period of 5 years from the date of order of disempowerment. However, if there is 100% change of ownership of the medical facility, the 5 years moratorium shall not be applicable to it and it will be eligible to apply for fresh empanelment immediately after change of ownership. The moratorium shall remain in force even if there is part (less than 100%) change in ownership.

Revocation of Stop Referral:

13. In cases, which are not covered under para 11 above and where MD ECHS has issued orders for Stop Referral against any medical facility for a period of three months, MD ECHS shall write (by email and by post) to the management of medical facility within seven working days from the date of order of stop referral and offer them an opportunity to make improvement / take corrective measures and submit their reply within 30 days from the date of sending the email. In case the medical facility seeks more time to produce evidence of having taken corrective measures and the reasons for seeking additional time (which would be limited to 10 days) are considered reasonable, the same shall be granted by MD ECHS. If it is found that corrective measures have been taken by the medical facility, MD ECHS may revoke the stop referral within a period of 30 days from the receipt of reply from the medical facility. Such revocation shall be intimated to the MoD/ DoESV with detailed justification of the decision taken within seven working days from the date of revocation. If the medical facility does not take the required corrective measures or does not give any reply within 30/40 days, MD ECHS shall send a case for dis-empowerment of the said medical facility to MoD/ DoESV within 30 days from the last date of

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**AGREEMENT FOR AUTHENTICATION OF BENEFICIARIES
AND ONLINE BILL PROCESSING**

The parties shall abide by the following undertakings for the purpose of bill processing:-

1. **Hospital Admission Intimation.** Hospital will intimate to the BPA and to ECHS within two (02) hours of emergency / referred admission and the BPA will respond with due authorisation in four (04) hours. Subsequently the empanelled hospital will intimate BPA with the complete details of the patient, proposed line of treatment, proposed duration of treatment with Clinical History within 48 hours / 5 working days of admission (since it might take time to establish line of treatment). Waiver upto 30 days can be given by Director Regional Centre on justification. Beyond 30 days no waiver will be accorded. This intimation will be authorized by the concerned authority (Nearest Polyclinic in case of Emergency Admission). Treatment in no case would be delayed or denied because of pending authorization by the BPA as it is only confirmation of the e-workflow in respect of such patient.
2. **Uploading of Claim within Seven Working Days.** After the patient is discharged (or date of last visit to hospital in case of OPD), the hospital will upload the claim on the BPA web based application alongwith the related documents (as given in the list of documents to be attached on the BPA web based application) within 07 working days after the date of discharge or from the date of last OPD. Waiver for intimation upto 30 days and uploading upto 60 days can be obtained from Regional Centre. Post this duration, Hospital can upload the claim provided 30% of the application/projected amount to be recovered/deducted from the approved amount. In case of regular dialysis, chemotherapy or radiation therapy, the claims should be uploaded monthly (at the end of the month) for the treatment provided during the month. The claims uploaded will be digitally signed and any other instructions on the said subject will be binding.
3. **Documents for Claims.** All supporting documents of the claim to be submitted at respective Regional Center ECHS within 60 days. On order from ECHS, all documents shall be uploaded in digital format duly digitally signed alongwith the authentication slip generated from the authentication system online into the BPA portal. The final bill will be signed alongwith the mobile number by the primary beneficiary or any of the dependent holding valid ECHS card. All documents shall be uploaded along with the claim. Diagnostic labs shall obtain such signatures in the manner prescribed above on the referral form. Mobile number of the patient/NOK also be noted on the referral form. Duration and modalities for handling physical copies of the bills will be in conformity with instructions as issued by Central Org ECHS from time to time.
4. **List of Documents Required for Claims Processing.** The bills would be scrutinized by the BPA and ECHS authorities and would contain documents as mentioned in the SOP for online billing and on BPA Site (Others Notifications Notice Type Documents Checklist) Authentication slip (generated by KIOSK) duly endorsed with the photograph of the beneficiary to be uploaded.
5. **Need More Information - Replies to Queries.** Hospital must reply to the query (NMI) raised by BPA / Regional Centre / Central Org on the bills within the timelines as given below or as amended by ECHS. In case the NMI is not replied within the stipulated time period, the claims would be processed on available documents and the amount deducted for non-submission of reply will not be under the purview of either the „Review Request by Hospital“ or „Arbitration Clause“.
 - (a) NMI raised by Verifier – 90 days.
 - (b) NMI raised by BPA – 60 days.
 - (c) NMI raised by Regional Centre / Central Org – 30 days.

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6. **Review Request by Hospitals** The hospital must also monitor the claims that have been authorized for payment by the BPA Validator and submit their justifications on the observations/deductions during the "Review Request by Hospitals Window" so as to avoid any requirement of arbitration at a later stage or agree to the amount recommended for approval by the BPA/JD (HS). Absence of any remarks or justification will be automatically considered as hospital has no points to offer for the deductions made by the BPA/ JD (HS). This review request window is available to the hospitals for 96 hours once JD (HS) has authorized the claim approval by CFA and is excluded from the TAT for processing of claims.

7. **Medical Reports Format** The hospital shall submit all the medical reports in digital form as well as in physical form or as instructed by CO ECHS from time to time.

8. **Time Action Taken (TAT) – Counting of Days** The hospital agrees that the actual processing shall start when physical copies of the bills submitted by the hospitals to the concerned Regional Centre, ECHS and are verified by BPA verifiers on behalf of ECHS and counting of days shall start from such date for the purpose of deduction of discount payable by hospitals to ECHS. In case of query raised on the bills the TAT for the purpose of Discount shall start from the date of reply to last query. In case of digital billing when implemented, it will start from the date when digitally signed computed documents are submitted. TAT will exclude the days earmarked for arbitration.

9. **Audit by BPA** The BPA will audit the medical claims of the ECHS Beneficiaries in respect of the treatment taken by them in the Empanelled Hospital and make recommendations for onward payment to ECHS in a time bound manner as follows:-

Audited by	Time Allotted	Remarks
BPA Scrutinizer	90 days	The claim is received at verifier. If the claim is correct, it will move to BPA validator and if any query is raised at verifier stage (NMI), it will move to NMI Basket. If the NMI is replied within 90 calendar days from the date of submission of claim online, the claim moves to BPA validator for <u>normal processing</u> .
BPA Validator	60 days	The claim is received at validator stage. If the claim is correct, it will move to JD (HS) and if any query is raised at validator stage (NMI), it will move to NMI Basket. If the NMI is replied within 60 calendar days from the date of query raised by validator, the claim moves to JD (HS) for normal processing, and if not, claim will shift to JD(HS) for processing whatever is information is available.

10. Hospital to take care to reply to the query raised by BPA on the bills within a reasonable time of not more than 30 days failing which the claim will automatically be forwarded to the next stage.

11. **Personnel for Processing of Claims** Hospitals must have minimum two persons dedicated for uploading, monitoring and processing of claims. Hospitals should ensure that in case of change in this claim processing staff, the new staff is trained at Regional Centre for smooth, efficient and early settlement of claims. The claimed amount will be limited to CGHS approved rates.

12. **Hardware & Manpower Required for Processing of Claims** The hospital will have the following hardware & Manpower for uploading and processing of claims (Though it may not be exclusive to ECHS) :-

(a) Authentication system to be obtained from Smart Card Making Agency contracted by ECHS.

(b) Authentication software – to integrate with Smart Card. For Surendra Dental College and Research Institute

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(b) Desktop PCs for uploading of claims :-

DI No.	No. of Beds	Minimum PCs required
(i)	Upto 50	One Terminal
(ii)	50 to 100	Two Terminals
(iii)	Above 100	Three Terminals & increments thereof in the scale of one terminal for each multiple of 50 beds

(c) Manpower requirement for uploading of claims with minimum qualification of DOEACC 'O' Level or equivalent :-

DI No.	No. of Beds	Manpower required
(i)	Upto 50	Two IT qualified operators for process of claims.
(ii)	50 to 100	Four IT qualified operators for process of claims.
(iii)	Above 100	Six IT qualified operators for process of claims & increments thereof in multiple of 50 beds.

(a) Document Scanner Color/Grayscale/B&W, 200 DPI, Flatbed /Document feeder, Multiple Page Dico, Duplex.

(f) Dedicated Internet Leased Line of atleast 8 Mbps or more or can explore MPLS services with higher bandwidth.

(g) Integration of Hospital HIS with BPA Software & Smart Card Software.

13. **BPA Fee.**

(a) **Medical Facility Claims.** The processing fee as on date is 2% of the claimed amount and service tax thereon subject to a minimum of Rs 12.50 and a maximum of Rs 750/- which shall be recovered from the amount due to the empanelled facility. The same shall be reviewed from time to time on the Govt orders and shall be recovered from medical facility as per applicable rates.

(b) **Individual Claims.** The BPA fee remain same as per the medical facility claim however, in case of individual reimbursement claim BPA fee shall be paid by ECHS.

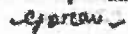
14. **Discount.** The Hospital shall agree for deduction of 2% of admissible amount if payments are made within 10 working days from the date of verification of physical bills by the Verifier to the BPA or reply to the last query or digitally signed bills received by the validator whichever is later. The discount will be admissible on the approved amount.


15. **Update of Policies.** The Hospital must keep itself updated about the policies promulgated for treatment of ECHS beneficiaries and reimbursement of claims including the rates as issued or updated from time to time. Ignorance of policies may affect the claimed amount. The latest policies will be updated on ECHS website - <http://www.echs.gov.in>. The empanelled facility should maintain copy of all such documents.

16. **No Direct Interaction with BPA.** The Hospital should not interact directly with the BPA, however, will forward all his issues / queries to the Regional Centre, which shall be bound to resolve such issues either itself or by forwarding it to concerned authorities including BPA.

17. **FIFO.** The claims would strictly be processed on First - In - First - out (FIFO) basis and this rule would not be defied by the Regional Centre and neither the Hospital should try to exert any kind of influence to bypass this rule. Central Org ECHS can modify the same in the interest of the organization.

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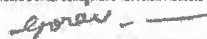
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18. Opting For Higher Standard. ECHS member opting for advanced surgery/procedure/accommodation etc can be charged the difference of amount than entitle after obtaining proper consent certificate.

19. wef 01 Apr 2019, payment of ECHS bills will be done by CDA , Hence PAN & TAN details to be furnished by Hospital.

Late Smt Vidyawanti Labhu Ram Foundation For
Science Research and Social Welfare, Sri Ganganagar
PAN : AAATV2769B
TAN : JDHV01160F

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FORMAT FOR FEEDBACK ON EMPANELLED MEDICAL FACILITIES

(NAME OF MEDICAL FACILITY)

Sl No.	Rating Aspects	Rating from 1 to 10
(a)	Quality of Treatment	
	(i) Availability of Specialist	
	(ii) Bed Availability as per entitlement	
	(iii) Degree of Relief	
(b)	Health of Hospital	
	(i) Hygiene, Sanitation	
	(ii) Behavior/Professionalism of Doctors and Staff	
	Overall Satisfaction	

SCALE OF RATING

Numerical Grading	Rating
1 to 3	Poor
4 to 5	Average
6 to 7	Good
8 to 10	Excellent

Notes: Specific Comments (if any)

FINAL RATING (Please Tick)

Rating	
Poor	
Average	
Good	
Excellent	

Signature of ECHS beneficiaries/NOK

Mobile/Tele No./Email

for Surendra Dental College and Hospital

[Signature]
Authorized Signatory

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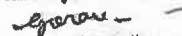
Annexure-I
(Refers to Paragraph 1 of Appendix A of
Memorandum of Agreement)


LIST OF POLYCLINICS UNDER THE REGIONAL CENTRE HISAR

The following Polyclinics are authorized to issue referrals directly to the Empanelled Medical Facilities (Due to change in command & control matrix, grouping of Polyclinics under a Regional Center, ECHS may change and therefore the facility will remain open only to those Polyclinics which are under concerned Regional Centre unless otherwise specified):-

- (a) Sri Ganganagar
- (b) Suratgarh (Hanumangarh)
- (c) Abohar
- (d) Bathinda
- (e) Hisar
- (f) Bhiwani
- (g) Fatehabad
- (h) Jhajjar
- (i) Jind
- (k) Kosli
- (l) Rohtak
- (m) Charkhi Dadri
- (n) Loharu
- (o) Narwana
- (p) Sampla
- (q) Bahadurgarh
- (r) Meham
- (s) Mansa
- (t) Bikaner
- (u) Didwana
- (v) Rajgarh
- (w) Nagaur
- (x) Churu
- (y) Sirsa
- (z) Faridkot

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(TO BE PUBLISHED IN PART-II, SECTION 3 OF THE SUB-SECTION (II) OF THE GAZETTE OF INDIA)

GOVERNMENT OF INDIA
MINISTRY OF HEALTH & FAMILY WELFARE
(DEPARTMENT OF HEALTH)

Nirman Bhavan, New Delhi
Dated the 26 June, 2008

NOTIFICATION

S.O. . . In exercise of the powers conferred by sub-section (2) of section 10 of the Dentists Act, 1948 (16 of 1948), the Central Government, after consultation with Dental Council of India, hereby, makes the following amendments in Part-I of the Schedule to the said Act, namely: -

2. In part-I of the Schedule to the Dentists Act, 1948, after serial No.71, the entries relating thereto, the following serial number and entries shall be inserted, namely: -

*72. Rajasthan University I. Surendra Dental College & Research Institute, Sri Ganganagar, Rajasthan
of Health Sciences, Jaipur

(i) Bachelor of Dental Surgery BDS, Rajasthan
(When granted on or after University of Health Sciences, Jaipur
19.9.2007

II. Rajasthan Dental College & Hospital, Jaipur

(i) Bachelor of Dental Surgery BDS, Rajasthan
(When granted on or after University of Health Sciences, Jaipur
23.10.2007

III. Mahatma Gandhi Dental College & Hospital, Sitapura, Jaipur

(i) Bachelor of Dental Surgery BDS, Rajasthan
(When granted on or after University of Health Sciences, Jaipur
23.10.2007

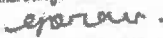
No.V-12017/03/2002-DE

(Raj Singh)

Under Secretary to the Government of India

To,
The Manager,
Govt. of India Press,
Mayapuri Ring Road,
New Delhi.

R.No: 104/08/112-72/08/2

For Surendra Dental College and Research Institute PTO

Authorised Signatory

DIRECTOR PRINCIPAL
SURENDRA DENTAL COLLEGE
& RESEARCH INSTITUTE
SRI GANGANAGAR (RAJ)

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Copy for information to. -

- (1) The Secretary, Dental Council of India, Kotla Road, Temple Lane, New Delhi-110002 with a request to obtain the copy of the Gazette Notification from Press and furnish at least two copies to this Ministry also.
- (2) The Secretary, Department of Medical Education, Government of Rajasthan, Jaipur, Rajasthan.
- (3) The Registrar, University of Rajasthan, Jaipur, Rajasthan.
- (4) The Registrar, Rajasthan University of Health Sciences, Sector-18, Kumbha Marg, Pratap Nagar, Jaipur-302033
- (5) The Chairman, Late Smt. Vidyawanti Labhu Ram Foundation For Sciences & Social Welfare, His Highness Garden, Power House Road, Sriganganagar-335001 (Rajasthan).
- (6) The Principal, Rajasthan Dental College & Hospital, Bagru Khurd, Ajmer Road, JAIPUR (Rajasthan).
- (7) The Principal, Mahatma Gandhi Dental College & Hospital, Sitapura, Mahatma Gandhi National Institute of Medical Sciences, RIICO - Sitapur Industrial Area, Tonk Road, JAIPUR - 302 022. (Rajasthan)
- (8) The Secretary/Director (Medical Education) of all the States/Union Territories.
- (9) Copy to F.No.V-12017/50/2002-DE
- (10) Copy to F.No.V-12017/15/2003-DE
- (11) Notification Folder/ Guard File.

BS

(Raj Singh)

Under Secretary to the Government of India

For Surendera Dental College and Research Institute

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Authorized Signatory

Py
DIRECTOR PRINCIPAL
SURENDERA DENTAL COLLEGE
& RESEARCH INSTITUTE
SRIGANGANAGAR (RAJ)

Handwritten mark

No. LVL/19/ 5272

Dated:- 16-12-2019

To
The Chief Medical & Health Officer
Sri Ganganagar

Subject:- Submission of MOU.

Sir,

As per circular from Rajasthan State Health Insurance Agency Jaipur vide no. F 1008 () /NHM/BSBY/2019/1677 dated 12-12-2019 we are hereby submitting MOU between Surendera General Hospital, Sri Ganganagar (Gang1522) and Rajasthan State Health Insurance Agency Jaipur for Ayushman Bharat – Mahatma Gandhi Rajasthan Swaasthy Beema Yojana 2019 extension.

Kindly acknowledge the same.

Thanking you,

Yours truly,

Signature
Authorised Signatory

LATE SMT. VIDYAWANTI LABHU RAM FOUNDATION FOR SCIENCE RESEARCH AND SOCIAL WELFARE

Late Smt. Vidyawanti Labhu Ram Foundation For Science Research and Social Welfare



Plot 15/16, Sri Ganganagar, 332001 Rajasthan (India)



+91-156-2480077, 2440133



+91-156-2440100



lrf@lrf.org.in

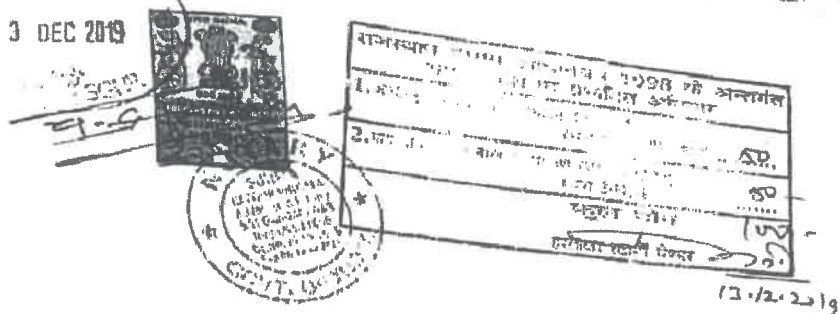


www.lrf.org.in

www.latevidyawantilabhuramfoundation.com

Signature
DIRECTOR PRINCIPAL
SURENDERA DENTAL COLLEGE
& RESEARCH INSTITUTE
SRI GANGANAGAR (RAJ)

U 3 DEC 2019



This Agreement (Hereinafter referred to as "Agreement") made at Sri Ganganagar(Raj.) on this 13 December, Year 2019

BETWEEN

Surendra General Hospital a unit of Late Smt. Vidyawanti Labhu Ram Foundation For Science Research and Social Welfare, Sri Ganganagar (Hospital) an institution located I having their registered office at Sri ganganagar

(here in after referred to as "Hospital", which expression shall, unless repugnant to the context or meaning thereof, be deemed to mean and include it's successors and permitted assigns) as party of the **FIRST PART**



AND


Rajasthan State Health Assurance Agency (Through Chief Medical & Health Officer, Sri Ganganagar) and having its registered office, Collectorate Area, Old Dhan Mandi, Sri Ganganagar 335001 (hereinafter referred to as "RSHAA" which expression shall, unless repugnant to the context or meaning thereof, be deemed to mean and include it's successors, affiliate and assigns) as party of the **SECOND PART**.

The Surendra General Hospital and RSHAA are individually referred to as a "Party" or "party" and collectively as "Parties" or "parties")

WHEREAS

1. Hospital is a health care provider duly recognized and authorized by appropriate authorities to impart health care services to the public at large.
2. Hospital has expressed its desire to join RSHAA's network of hospitals and has represented that it has requisite facilities to extend medical facilities and treatment to beneficiaries as covered under Ayushman Bharat - Mahatma Gandhi Rajasthan SwasthyBeema Yojana on terms and conditions hereinagreed.
3. In this **AGREEMENT**, unless the context otherwiserequires:
 - a. the masculine gender includes the other two genders and viceversa;
 - b. the singular includes the plural and viceversa;
 - c. natural persons include created entities (corporate or incorporate) and viceversa;
 - d. marginal notes or heading to clauses are for reference purposes only and donot bear upon the interpretation of this **AGREEMENT**.
4. Should any condition contained herein, contain a substantive condition, then such substantive condition shall be valid and binding on the **PARTIES** notwithstanding the fact that it is embodied in the definition clause.


ATTESTED

 13/12/19
 Sunita Kapoor Phutola
 Advocate & Notary
 Sri Ganganagar (Raj.)

For Late Smt. Vidyawanti Labhu Ram Foundation
 For Science Research and Social Welfare

 For Authorized Signatory

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DIRECTOR PRINCIPAL
 SURENDRA DENTAL COLLEGE
 & RESEARCH INSTITUTE
 SRI GANGANAGAR (RAJ)