



GOVT. OF NATIONAL CAPITAL TERRITORY OF DELHI
DIRECTORATE GENERAL OF HEALTH SERVICES
F-17, KARKARDOOMA, DELHI-110032
(DELHI GOVT. EMPLOYEES HEALTH SCHEME)

No. F 25(III)/DGEHS/205/DHS/(HQ)/2011/PLF-III /4321-25 Dated:- 28/9/21

To,

The Chairman/CEO/Medical Director/Medical Supdt.
Sandhyashi Neuro Panchkarma
BF-45, Near Canara Bank,
Shalimar Bagh, Delhi-110088.

Subject: - Empanelment of Private Hospitals under Delhi Government Employees Health Scheme.

Sir/Madam,

Delhi Government Employees Health Scheme is set up to provide health Facilities to Delhi Government employees, pensioners and their dependents, the Hon'ble Ministers and MLAs of GNCT of Delhi, etc. With reference to the request for empanelment of your institution under the scheme, your institution has been provisionally approved for DGEHS Empanelment in respect of **empanelled facilities under CGHS**. Final empanelment/notification shall be issued subject to fulfillment of codal formalities/guidelines/rules. A copy of draft agreement to be entered between the empanelled hospital/diagnostic centre and Delhi Government in this regard is hereby enclosed for your reference. You are requested to submit, if acceptable by you, the agreement deed on plain paper in double space executed on non-judicial Stamp Paper worth Rs. 100/-.

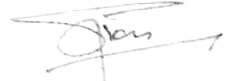
You are further requested to kindly intimate your consent for empanelment under the scheme to this Directorate at the earliest on receipt of this letter along-with the following documents, duly signed & stamped by the authorized signatory.

1. Copy of memorandum of undertaking/partnership deed, if any and Resolution/Decision of Board/Society/Partners in respect of your institution clearly specifying the details of authorized signatory to sign on the Agreement in regard of empanelment of hospital/diagnostic centre under DGEHS.
2. Valid Registration Certificate in case of hospital/nursing home. In case of pending renewal same to be informed accordingly.
3. Agreement in Double Space on plain paper executed on non-judicial Stamp Paper worth Rs. 100/-.
4. Copy of License for running blood bank/diagnostic lab. If any.
5. PNDT and/ or MTP registration certificate required (if applicable).
6. Lay out of building plan, bed positioning floor wise number of bed and various functional areas.
7. Rate list of charges of the hospital and CGHS rate list.
8. Copy of certificate of registration as society with registrar of Societies/ Companies, as the case may be.
9. Certified copy of partnership deed/ society registration/ memorandum of association of society/trust.
10. Certified copies of audited balance sheets, profit loss account for the preceding 3 years.
11. Latest Income Tax Clearance Certificate and PAN Number.

12. Tax Exemption Certificate, if any.
13. Name and Address of the Bankers.
14. Undertaking regarding no criminal conviction in court of law or Medical Councils.
15. Undertaking in respect of Laboratories that the empanelled lab will get accreditation with NABL within 6 months on Rs. 100/- Non-judicial Stamp Paper, if not already accredited for claiming NABL rate.
16. Performance Security of Rs. 10,00,000/- (Rs. Ten Lac only) for Hospitals and Rs. 2,00,000/- (Rs. Two Lac only) in case of Lab, Dental, and Diagnostic Centers in the form of Bank Guarantee from a commercial bank in an acceptable form as per clause 18 of the draft agreement in the name of "Director, General Health Services" Government of National Capital Territory of Delhi.
17. Photocopy of latest CGHS notification for empanelment of the hospitals/diagnostic centers with empanelled specialties.
18. Undertaking that the institution is still on the panel of CGHS for the specialties mentioned in the notification of empanelment. Further the undertaking shall have to be submitted on six monthly basis.
19. Nodal officer & MS contact detail, email address name etc.
20. Any other relevant information.

The draft DGEHS agreement is available on website www.health.delhigovt.nic.in > Director General of Health Services > DGEHS > downloadable forms.

Yours faithfully

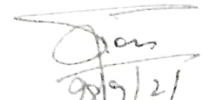


(Dr. Sushma Jain)
Addl. Director (DGEHS)

No. F 25(III)/DGEHS/1331/DHS/(HQ)/2011/Pt.F-III /4321-25
Copy to:-

Dated: 28/9/21

1. Pr. Secretary (H&FW), Govt. of NCT of Delhi, 9th Level, A- Wing, Delhi Secretariat, I.P. Estate, New Delhi-110002.
2. Secretary to Hon'ble Health Minister, Govt. of NCT of Delhi, Delhi Secretariat, I.P. Estate, New Delhi-110002.
3. PS to Director General Health Services.
4. Guard file.



(Dr. Sushma Jain)
Addl. Director (DGEHS)

SANDHYASHI NEURO PANCHKARMA

(A Unit of Sandhya Pharma & Research Unit)

(A CGHS/DGHS Empanelled Center and All Major TPA Covered)



Date :

To ,

The Director,

General Health Services,

Govt. of NCT Delhi

F-17 Karkardooma,

Delhi-110032

Sub : Submission of documents for Empanelment of Private Hospital under Delhi NCT Health Scheme.

Dear Sir ,

With reference to your letter Ref . no. F 25 (III)/DGEHS/205/DMS/(HQ)/2011/PLF-111 of dated 28/09/2021 regarding approval of our center for empanelment under DGEHS scheme for Ayush treatment . We are submitting herewith following documents duly signed and stamped along with the performance security amount as mentioned in offer letter.

You are requested to process our file to sign MOU at the earliest possible.

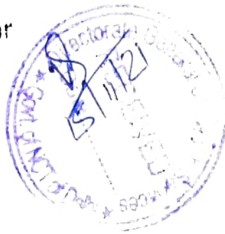
Thanking you

Sincerely yours,

For Sandhyashi Neuro Panchkarma

Dr. Rajni Gupta
(Proprietor)

Proprietor



(BF-45, Near Canara Bank, Shalimar Bagh, Delhi-110088)

PH No. 011-40199634 / 7428177717

SANDHYASHI NEURO PANCHKARMA

(A Unit of Sandhya Pharma & Research Unit)

(A CGHS/DGHS Empanelled Centre and All Major TPA Covered)



UNDERTAKING

To : The Director, General Health Services, NCT Delhi

TO WHOM SO EVER IT MAY CONCERN

I hereby certify and declare that Sandhyashi Neuro Panchkarma is a proprietorship firm owned by Dr. Rajni Gupta W/o Dr. Vikas Gupta , an authorized person to sign, deal, and negotiate all the agreement / documents with the authority in regards of empanelment of Day Care center.

Date :

For : Sandhayshi Neuro Panchkarma
For Sandhyashi Neuro Panchkarma

(Prop.)
Proprietor

(BF-45, Near Canara Bank, Shalimar Bagh, Delhi-110088)

PH No. 011-40199634 / 7428177717



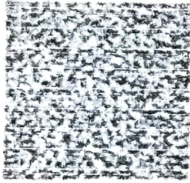
सत्यमेव जयते

INDIA NON JUDICIAL

Government of National Capital Territory of Delhi

e-Stamp

Certificate No.	: IN-DL99150662973755
Certificate Issued Date	: 29-Oct-2020 05:44 PM
Account Reference	: MPACC (IV) 0783103/DELHV DL-DLH
Unique Doc. Reference	: SUBIN-DL78310306258868788292S
Purchased by	: SANDHYASHI NEURO PANCHKARMA
Description of Document	: Article 56 Memorandum of Settlement
Property Description	: Not Applicable
Consideration Price (Rs.)	: 0 (Zero)
First Party	: SANDHYASHI NEURO PANCHKARMA
Second Party	: LIFE CARE DIAGNOSTICS CENTER
Stamp Duty Paid By	: SANDHYASHI NEURO PANCHKARMA
Stamp Duty Amount(Rs.)	: 100 (One hundred only)



Please write or type below this line

For Sandhyashi Neuro Panchkarma

Proprietor



Statutory Alert

1. The authenticity of the Stamp certificate should be verified at www.stamping.com or using e-Stamp Mobile App of Stock Holding. Any discrepancy in the details on the Certificate and as available on the website / Mobile App renders it invalid.
2. The onus of checking the legitimacy is on the users of the certificate.
3. In case of any discrepancy please inform the Competent Authority.

MEMORANDUM OF UNDERSTANDING B/W SANDHYASHI NEURO PANCHKARMA AND LIFE CARE DIAGNOSTIC,S CENTER

1) **Parties:** This Memorandum of understanding There in often requested to as MOU is made and entered into by and between the SANDHYASHI NEURO PANCHKARMA (A Unit of Sandhya Pharma & Research Unit) Whose Address is B.F-45, Near Canara Bank, Shalimar Bagh, Delhi-110088 AND The LIFE CARE DIAGNOSTIC,S CENTER, whose address is F-6/35, Sec-16, Rohini, Delhi-110089.

2) **Purpose:** The purpose of this MOU is to establish the terms and conditions under which the LIFE CARE DIAGNOSTIC,S CENTER will provide amazing services to the SANDHYASHI NEURO PANCHKARMA,

3) **Scope:**

1 - X-Ray	2 - Sonography
3 - Ultrasound	4- Color Doppler
5 - Echocardiography	6 - Fistulogram
7 - Inter venous Pyelography	8- Barium Studies.

4) **Term of MOU:** This MOU is effective upon the day and date list signed and executed by the duly authorized representatives of the parties to this MOU shall remain in full force and effect until cancelled.

This MOU be terminated, without cause, by either party upon one month's written notice, which notice shall be delivered by hand or by certified mail to the address listed above.

5) **Responsibilities of SANDHYASHI NEURO PANCHKARMA:**

- Providing provisional diagnosis whenever sought by the pathologist
- Timely payment to the LIFE CARE DIAGNOSTIC,S CENTER
- Monthly Audit to be done Sandhya Gupta

6) **Responsibilities of Life Care Diagnostic,s Center:**

- Qualified and trained person perform,Supervise and interpret the investigations.
- Reports are to be intimated within defined time frame.
- Critical Reports are informed immediately to the clinic concerned person.
- Imaging services adhere to the standard quality and safety protocols.
- To allow authorities of Clinic, to conduct periodic review.

7) **General Provisions:**

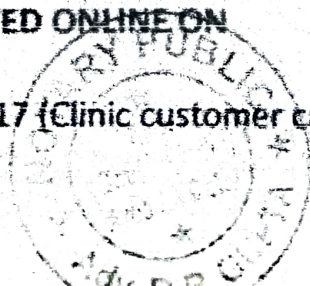
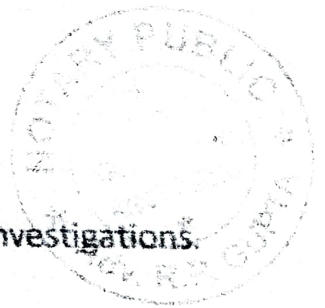
- Amendments: Either party may request changes to MOU.

8) **URGENT REPORTS TO BE REPORTED ONLINE ON**

- Vikasgupta.1466@rediffmail.com
- SMS and WhatsApp on 7428177717 (Clinic customer care no: +91 1140199634)

For Sandhyashi Neuro Panchkarma

Proprietor



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LIFE CARE DIAGNOSTIC,S CENTER

ROUTINE HEMATOLOGY

TEST NAME	SAMPLE COLLECTED TIME	PRICE
1 HB	EDTA	SAVE DAY 60
2 TLC	EDTA	SAME DAY 60
3 DLC	EDTA	SAME DAY 60
4 ESR	EDTA	SAVE DAY 100
5 P/S	EDTA	SAME DAY 150
6 RBC COUNT	EDTA	SAME DAY 100
7 PCV	EDTA	SAVE DAY 70
8 MCH	EDTA	SAVE DAY 70
9 MCHC	EDTA	SAME DAY 70
10 MCV	EDTA	SANE DAY 70
11 PLETLET COUNT	EDTA	SAVE DAY 150
12 A E C	EDTA	SAME DAY 120
13 C B C	EDTA	SAME DAY 350
14 COMPT HEMOGRAM	EDTA	SAME DAY 400
15 M.P	EDTA	SAVE DAY 100
16 BLOOD GROUP	EDTA	SAVE DAY 100
17 RETICULOCYTE COUNT	EDTA	SAME DAY 100
18 P/S FOR MICROFILARIA	EDTA	SANE DAY 200
19 SICKUNG TEST	EDTA	SAVE DAY 150
20 BLEEDING TIME	PATIENT TO REPORT	SAME DAY 70
21 CLOTTING TIME	PATIENT TO REPORT	SAME DAY 70
22 LE CELL TEST	PATIENT TO REPORT	300

SPECIAL HEMATOLOGY

23 PROTHROMBIN TIME	SODIUM CITRATE	SAVE DAY 400
24 PTTK/APTT	SODIUM CITRATE	SAME DAY 400
25 LUPUS ANTICOAGULANT	SODIUM CITRATE	SAME DAY 2000
26 RH.ANTIBODY TITER	EDTA	SAME DAY 200
27 DIRECT COOMBS TEST	EDTA	SAVE DAY 200
28 INDIRECT COOMBS TEST	PLAIN	SANE DAY 300
29 GLYCOSYLATED Hb (HBA1C)	EDTA	NEXT DAY 500
30 SERUM IRON	PLAIN	NEXT DAY 300
31 TIIC	PLAIN	NEXT DAY 350



For Sandhyashi Neuro Panchkarma

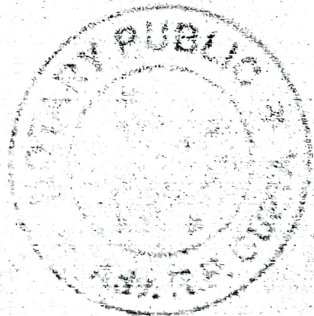
Proprietor

BIO CHEMISTRY

BLOOD SUGAR F/PP/R.		SAME DAY	60
GLUCOSE TOLERENCE TEST (GTI)		SAME DAY	250
BLOOD UREA	PLAIN	SAME DAY	120
SERUM CREATININE	PLAIN	SAME DAY	120
BUN	PLAIN	SAME DAY	170
SERUM URIC ACID	PLAIN	SAME DAY	170
SERUM CALCIUM	PLAIN	SAME DAY	170
SERUM SODIUM	PLAIN	SAME DAY	150
SERUPA POTASSIUM	PLAIN	SAME DAY	150
HERPES SIMAPLEX I & II (IgM/IgG)	PLAIN	NEXT DAY	150
TORCH PROFILE (IgM/IgG)	PLAIN	NEXT DAY	400
O.S ONA	PLAIN	NEXT DAY	1200
DENGUE SEROLOGY (IgM/IgG)	PLAIN	SAME DAY	1200/EACH
EUSA FOR MYCO(IgM/IgG)	PLAIN	NEXT DAY	650/EACH
ANTI-NUCLEAP. A/B	PLAIN	NEXT DAY	600
ANTI SPERM A/BF	PLAIN	NEXT DAY	550
ANTI-CARDIOLIPIN A/B (IgM/IgG)	PLAIN	NEXT DAY	600
ANTI-PHOSPHOLIPID A/S (IgM/IgG)	PLAIN	NEXT DAY	600/EACH
AMEBIC SEPOLOGY	PLAIN	NEXT DAY	450
HYDATID SEPOLOGY	PLAIN	NEXT DAY	450
SINWUNOGLOBULIN (IgM/IgG/IgA)	PLAIN	NEXT DAY	750
CE COMPLEMENT	PLAIN	2 DAYS	800/EACH
SERUM (IgG)	PLAIN	2 DAYS	350
TYPHI-DOT (IgM/IgG)	PLAIN	NEXT DAY	600
MALARIA CARD TEST	PLAIN	SAME DAY	250/EACH
P-ANCA	PLAIN	SAME DAY	450
MP SEPOLOGY	PLAIN	2 DAYS	850
		SAME DAY	400

HORMONES

T3/FT3	PLAIN	NEXT DAY	250/ EACH
T4/FT4	PLAIN	NEXT DAY	250/ EACH
TSH	PLAIN	NEXT DAY	300
FSH	PLAIN	NEXT DAY	500
PROLACTIN	PLAIN	NEXT DAY	500
TESTOSTERONE	PLAIN	NEXT DAY	500
FREE	PLAIN	NEXT DAY	800
TESTOSTERONE	PLAIN	NEXT DAY	1300
ESTRADIO(E2)	PLAIN	NEXT DAY	600
ESTRONE(E3)	PLAIN	2 DAYS	500
PROGESTERONE	PLAIN	NEXT DAY	600
GROWTH	PLAIN	NEXT DAY	700
HORMONE	PLAIN	NEXT DAY	500
S.CARTISOL	PLAIN	NEXT DAY	



For Sandhyashi Neura Ranchkarma

Proprietor

THALASSEMIA PROFILE	2200
COMPT HEMOGRAMMIA LUCTROPHORES,	
SERUM RON TIC	
TORCH PROFILE (IlgG & Igm)	2000
TOXOPLASMA PIRELLA AVALOMITRMOVRIE	2400
TRIPLE TEST WITH RISK EVALUATION	950
TRIPLE TEST WITH RISK EVALUATION	2200
DIABETES EVALUATION	950
SUGAR 1/PO MASCUAINE MICROPHOTLIN,	
UREA PLATIM	
MALE INFERTILITY	200
ISWL POOLACINLISTADION PROGESTERONE	200
FEMALE INFERTILITY	200
FSH, 14, PROLACTINE ESTPADIOLPASESTERONE THYROID	
PROFILE	600
TR 14 TSH	

CLINICAL PATHOLOGY

URINE R/EMIL	SAME DAY	500
URINE FOR BILE SALT AND BILE PIGMENT	SAME DAY	500
URINE KETONES	SAME DAY	100
URINE FOR MELGNANT CELLS	SAME DAY	100
24 HRS URINE PROTEIN	NEXT DAY	100
URINE FOR MICROALBUMIN	NEXT DAY	600
24 HRS URINE VMA	AS PER DISCHAREG	1600
24 HRS URINE CATECHOLAMINES	AS PER DISCHAREG	2100
SCMEN ANALYSIS	SAME DAY	1500
STOOL R/EM/E	SAME DAY	100
STOOL OCCULT BLOO	SAME DAY	100
STOOL PH	SAME DAY	50
STOOL REDUCING SUBSTANCES	SAME DAY	70
SPUTUM AFB	SAME DAY	150
SPUTUM GRAM STAIN	SAME DAY	150
SPUTUM FOR MALIGNANT CELLS	SAME DAY	200
KOH PREPARATION(SKIN, HAIR NAIL)	SAME DAY	150
PAP SMEAR	NEXT DAY	450
FNAC	NEXT DAY	600
HISTOPATHOLOGY (SMALL TISSUE)	4 DAYS	600
MISTOPATHOLOGY (LARGE TISSUE/ORGAN)	4 DAYS	1200
CALCULUS ANALYSIS	2 DAYS	600



For Sandhya Neuro Panchkarma

Proprietor

[Handwritten signatures and scribbles]

ANTIBODIES (AMA/ATG)
 DIMEA SULPHATE
 PTH
 17 OHP
 C. PEPTIDE
 TRIPLE TEST SCREENING

PLAIN
 PLAIN
 PLAIN
 PLAIN
 PLAIN
 PLAIN

NEXT DAY
 NEXT DAY
 NEXT DAY
 NEXT DAY
 NEXT DAY
 3 DAYS

800
 600
 950
 950
 600
 2200

TUMOR MARKERS (HISTORY MUST)

PSA
 FPSA
 AFP
 BETA HCG
 CA-125 C
 A 15.3
 CA 19.9
 CEA

PLAIN
 PLAIN
 PLAIN
 PLAIN
 PLAIN
 PLAIN
 PLAIN
 PLAIN

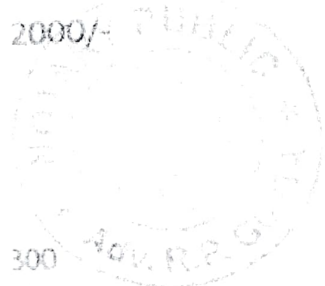
NEXT DAY
 NEXT DAY
 NEXT DAY
 NEXT DAY
 NEXT DAY
 NEXT DAY
 NEXT DAY
 NEXT DAY

600
 700
 600
 600
 1100
 1100
 1100
 800

PCR

PCR FOR TB (BLOOD/URINE/SPUTUM)

PLEASE ENQUIRE



THERAPEUTIC DRUG MONITORING

SERUM LITHIUM
 PHENYTOIN/DILANTIN
 VALPROIC ACID
 CARBAMAZEPINE(MAZETO)SERUM PHENOBARBIT
 LUMINAL
 SERUM PHENOBARBITONE/LUMINAL

PLAIN
 PLAIN
 PLAIN
 PLAIN
 PLAIN
 PLAIN

NEXT DAY
 NEXT DAY
 NEXT DAY
 NEXT DAY
 NEXT DAY
 NEXT DAY

300
 650
 650
 650
 750

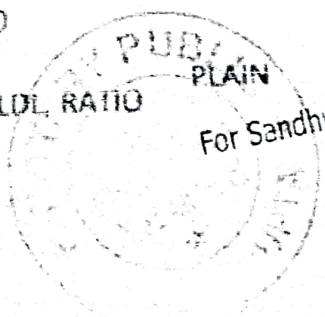
PROFILES

LEVER FUNCTION TEST (LFT)
 BILLRUBIN, SGOT, SGPT, ALP, T. PROTEIN ALBUMIN,
 GLOBULIN, AG/ RATIO
 SGOT
 SGPT
KIDNEY FUNCTION TEST (KFT)
 UREA, CREAT, URIC ACID, BUN, CALCIUM, NA, K, CL T.
 PROTEIN, ALBUMIN, GLOBULIN, AG/ RATIO
LIPID PROFILE
 CHOLESTEROL, TRIGLYCERIDE, HDL, LDL, VLDL, RATIO

PLAIN
 PLAIN
 PLAIN

500
 130
 130
 600

Handwritten signature



For Sandhyashri Neuro-Rachkarma 600
 Proprietor

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CULTURE & SENSITIVITY

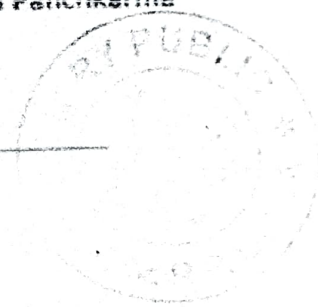
PYOGENIC CULTURE (URINE/STOOL/SPUTUM/
SEMENAMVS/THROT/CONJUNCTIVE)
S FUNGAL CULTURE
AFB CULTURE (FLUID/SPUTUM/ISSUE)
BLOOD CULTURE
RAPID AFB CULTURE(SPUTUM/E.B/URINE & BLOOD)

48 HRS 400
14 DAYS 500
6 WEEKS 800
5-7 DAYS 500
7 DAYS, FINAL 6W 800

M/S Sandhyashi Neuro Panchkarma
(The First Party)

Delhi

By: *[Signature]*
Name
Title :



M/S Life Care Diagnostic,s Center
(The Second Party)

Delhi

By: *[Signature]*
Name
Title :

11 No 291A/2, Gali no 2 Anandkhar
Nagar, Hauz Khas, Delhi 110088.



ATTESTED *[Signature]*

NOTARY PUBLIC, DELHI

Reg. No. 614

For Sandhyashi Neuro Panchkarma

29 OCT 2020

[Signature]

Proprietor



Department of Labour
Government of National Capital Territory of
Delhi

5- Shamnath Marg, Delhi-110054



Form C

Registration Certificate of Establishment

Certificate No. :2020143622

Date :23/9/2020

Name of the establishment :

Sandhyashi Neuro Panchkarma

Name of the Occupier/Employer :

Dr Rajn Gupta W/o Dr Vikas Gupta

Postal address of the establishment :

B.f 45 Shalimar Bagh
Delhi 110088

Registration No. :

2020143622

Category of Establishment :

Shop

Nature Of Business :

**Medical, Diagnostic & Hospital
Supplies**

It is hereby certified that the establishment as mentioned herein has been registered as a Shop under Delhi Shops & Establishment Act, 1954, on this 23 day of September ,2020.


Disclaimer

- This Certificate is based on the information provided by the Occupier/ Employer and has not been verified. **Therefore, it shall not be valid for opening of Bank Account/Grant of loan and Execution of any agreement.**

NOTE:

1. The Occupier/Employer is required to notify the Chief Inspector of any change in respect of information contained in the form.
2. This is computer generated certificate and does not require signature.

Print

For Sandhyashi Neuro Panchkarma

 Proprietor

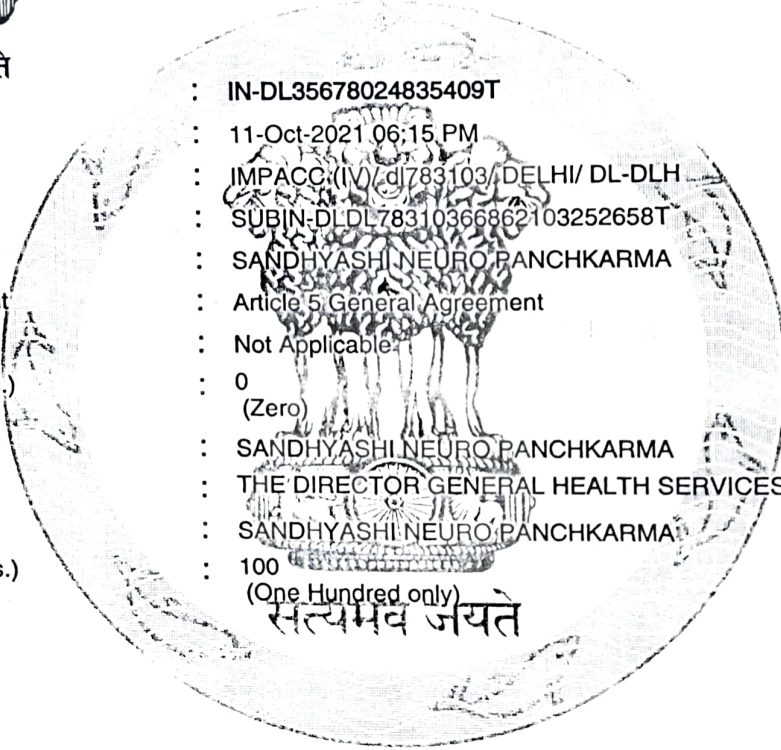
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Government of National Capital Territory of Delhi



सत्यमेव जयते

e-Stamp



Certificate No. : IN-DL35678024835409T
Certificate Issued Date : 11-Oct-2021 06:15 PM
Account Reference : IMPACC:(IV)/d/783103/DELHI/ DL-DLH
Unique Doc. Reference : SUBIN-DL DL 78310366862103252658T
Purchased by : SANDHYASHI NEURO PANCHKARMA
Description of Document : Article 5 General Agreement
Property Description : Not Applicable
Consideration Price (Rs.) : 0
(Zero)
First Party : SANDHYASHI NEURO PANCHKARMA
Second Party : THE DIRECTOR GENERAL HEALTH SERVICES NCT DELHI
Stamp Duty Paid By : SANDHYASHI NEURO PANCHKARMA
Stamp Duty Amount(Rs.) : 100
(One Hundred only)

सत्यमेव जयते



.....Please write or type below this line.....



For Sandhyashi Neuro Panchkarma
[Signature]
Proprietor

Statutory Alert:

1. The authenticity of this Stamp certificate should be verified at www.shellectra.com
Any discrepancy in the details should be reported to the Director General Health Services, NCT of Delhi.

AGREEMENT

This agreement made on _____ and entered into this _____ day of _____ 201 between the President of India through _____ Director, Health Services, (Authorized signatory) **F-17, Karkardooma, Delhi** (which expression, unless repugnant to the context or excluded shall include its successors-in-office and assigns) of the First Part and

SANDHYASHI NEURO PANCHKARMA, a company registered under Companies Act, 1956/Society Registered under Indian Societies Act 1860 having its registered office at **B 45, SHALIMAR BAGH, NEAR CANARA BANK, NEW DELHI-110088** represented by its Managing Director/Director/ Partner/ **Proprietor** /Secretary/ President/Representative **Dr. RAJNI GUPTA** duly authorized to enter into this Agreement vide Company/Society/Trust Resolution No. NIL dated NIL duly authenticated copy is annexed to this Agreement (hereinafter called 'hospital' which expression unless repugnant to the context or excluded shall include its successors and assigns) of the Second Part.

Whereas **SANDHYASHI NEURO PANCHKARMA**, is provisionally recognized by The Directorate of Health Services Govt. Of National Capital Territory of Delhi in respect of **Day Care Centre for treatment** of the beneficiaries covered under the scheme Medical Facilities of Serving Govt. Employees and Pensioners, Govt. Of National Capital Territory of Delhi.-

NOW THIS AGREEMENT WITNESSETH AS FOLLOWS: -

1. That

SANDHYASHI NEURO PANCHKARMA is recognized by Directorate of Health Services under the scheme "Medical Facilities for Hon'ble Ministers, MLAs, Ex. MLAs, Ex. Metropolitan Councilors, Retired and Sitting Judges of Hon'ble High Court of Delhi, serving Govt. employees and pensioners" (hereinafter referred to as DGEHS) for treatment of the beneficiaries and members of their family subject to the conditions hereinafter mentioned.



For Sandhyashi Neuro Panchkarma

Proprietor

2. That hospital/diagnostic centre shall display the Logo of Govt. of NCT of Delhi and the specialties recognized by Govt. of NCT of Delhi so as to enable the beneficiaries to avail medical facilities easily and as per need.

3. a. Special provisions for Ministers, MLAs, Ex. Metropolitan Councilors and Senior Officers:

There is no need for authorization / permission for entitled treatment for self and dependent family members in private recognized hospitals in regard of following categories of beneficiaries:

i. Ministers of GNCT of Delhi.

ii. Sitting as well as Ex. MLAs of Delhi Legislative Assembly

iii. Ex. Metropolitan Councilors of Delhi

iv. Retired and serving Judges of Hon'ble High Court of Delhi.

v. All Retired and Serving Heads of the departments / Heads of the autonomous bodies under GNCT of Delhi.

vi. Retired and Serving Senior officers i.e. IAS officers and DANICS officers(JAG and above in the pre revised pay scale of Rs. 12000-16550 corresponding to present grade pay of Rs. 7600 & above or equivalent.

The above categories of beneficiaries have been allowed to undertake direct treatment as admissible under the provisions of the scheme as per entitlement from DGEHS empanelled private hospitals in the specialties the hospital is recognized for. The reimbursement in such cases shall be limited to DGEHS ceiling rates as per entitlement and only for the treatment admissible under CS (MA) rules / DGEHS.

b. Ministers of GNCT of Delhi, sitting as well as Ex. MLAs of Delhi Legislative Assembly and Ex. Metropolitan Councilors of Delhi and their dependents shall be allowed treatment on cashless basis in empanelled private hospitals / diagnostic centers. The payment to empanelled hospitals / diagnostic centers for such cashless treatment shall be made by General Administrative Department in case of Ministers and Delhi Legislative Assembly in case of sitting as well as Ex. MLAs and Ex. Metropolitan Councilors.



For Sandhya Vashi Neuro Psychiatrist
[Signature]

Regd. No. 1021

- c. Cashless treatment shall be provided to the dependent family members and the officers of Indian Administrative Service (AGMUT cadre) and DANICS officers when posted out of Delhi (Transfer / Deputation) on production of Health Card showing "Cashless Facility Available" issued for a specific period from Directorate of Health Services. The bills in respect of such beneficiaries shall be submitted to Directorate of Health Services for payment under cashless scheme.
4. a) That in routine cases, the hospital shall provide treatment to the DGEHS beneficiaries (both serving employees and pensioners) on production of a DGEHS card and a referral from the MO/ CMO In charge of Delhi Govt. dispensary / hospital.
- b). That in case of pensioners and their dependents in routine, the hospital/diagnostic centre shall provide treatment on production of a valid DGEHS card and a referral from concerned Authorized Medical Attendant i.e. the MO/CMO in-charge of Delhi Govt. dispensary /hospital or in a manner communicated to the hospital/diagnostic centre. The recognized private hospital/diagnostic centre shall not refuse admission/investigation or demand an advance payment from the pensioner beneficiary or his family member and shall provide credit facilities to the patient on production of a valid DGEHS card and a referral from concerned Authorized Medical Attendant i.e. the MO/CMO in-charge of Delhi Govt. dispensary /hospital. The hospital shall submit the bills for reimbursement as per approved rates to the DGEHS cell in case of pensioners. The department will make the reimbursement to the hospital within 60 days. No interest shall be payable in case of delay for any reason.
- c. That in case of emergencies, the beneficiary can go directly to empanelled hospital of his / her own choice for treatment and the hospital shall not ask for referral from Delhi Govt. dispensary / hospital.



For Sandhya Shri Neuro Paanchkarma
[Signature]
Dr. Sandhya Shri


5. That in case of emergencies, the empanelled private hospital shall not refuse admission or demand an advance payment from the beneficiary or his family member and shall provide **credit** facilities to the patient (whether the employee is a serving employee or a pensioner availing DGEHS facilities) on production of a valid DGHS card and the hospital shall submit the bill for reimbursement as per approved rates to the concerned Department i.e. to GAD in case of Hon'ble Ministers, to Delhi Legislative Assembly in case of MLAs, Ex. MLAs and Ex. Metropolitan Councilors of Delhi, to registrar Delhi High Court in case of Hon'ble Judges of Delhi High Court, to DGEHS Cell in case of pensioners and to the concerned administrative department in case of serving employees and the department will make the reimbursement to the hospital within 60 days. No interest shall be payable in case of delay in payment of bills.
6. The conditions of emergency are as under: -
- (a) Acute Coronary Syndromes (Coronary Artery By-pass Graft/ Percutaneous Transluminal Coronary Angioplasty) including Myocardial Infarction, Unstable Angina, Ventricular Arrhythmias Paroxysmal Supra Ventricular Tachycardia, Cardiac Tamponade, Acute Left ventricular Failure/Severe Congestive Cardiac Failure, Accelerated Hypertension, Complete Heart Block and Stroke Adam attack, Acute Aortic dissection.
 - (b) Acute Limb Ischemia, Rupture of Aneurism, Medical and Surgical shock and peripheral circulatory failure.
 - (c) Cerebro-vascular Attack-Stroke, Sudden Unconsciousness, Head injury, Respiratory failure decompensated lung disease, Cerebro Meningeal Infections, Convulsions, Acute Paralysis, Acute Visual loss.
 - (d) Acute Abdomen :- Hepatitis, Amoebic liver abscess, obstructive jaundice, Biliary colic, Acute cholecystitis, Acute pancreatitis, Pancreatic abscess, Acute apendicitis, Acute intestinal colitis, Acute gastritis, Peptic ulcer, Perforative peritonitis, Renal Calculus, PUJ Obstruction, Pyonephrosis, Pyelonephritis, Ureteric calculus, Acute or Subacute intestinal obstruction, Enteritis, Tubercular Abdomen, Mesenteric lymphadenitis, Diverticulitis and any other miscellaneous acute conditions.



A handwritten signature in black ink, appearing to read "Madan Lal Gupta", written over a faint circular stamp.

- (e) Road traffic Accidents with injuries including fall.
 - (f) Acute poisoning
 - (g) Acute Renal Failure
 - (h) Acute abdomen in female including acute Obstetrical and Gynecological emergencies.
 - (i) Heat Stroke
 - (j) Any other life threatening emergent condition which is not covered above.
7. (a) That it will charge the DGEHS beneficiary or his family member within the ceiling limits as prescribed and contained in the approved charges of Delhi Govt. Employees Health Scheme as applicable at the time of signing of the agreement and as revised from time to time. In case, there are no DGEHS prescribed rates for any test / procedure, then CGHS/AIIMS rates are applicable. If there are no CGHS/AIIMS rates, then reimbursement is to be arrived at by calculating admissible amount item-wise (e.g. room rent, investigations, cost of medicines, procedure charges etc) as per approved rates / actual whichever is less, in case of investigations.
- (b) I.S.M- Hospital under ISM will charge as per prevailing rates approved by Govt. of Delhi or as per CS(MA) Rules, 1944.
8. That the contracting party (Hospital/doctor) shall not charge an amount more than the amount agreed in the DGEHS package rates presently in force from any DGEHS beneficiaries or member of his family until such time the prescribed rates are revised by the DGEHS. If no DGEHS rates are available the rates shall be decided as per criteria mentioned in Para 7.(a) above.
9. That during In-patient Department (IPD) treatment of the DGEHS beneficiary, the hospitals shall not ask the beneficiary to purchase separately the medicines or any item / logistic related to beneficiary treatment from outside but bear the cost of its own at the package deal rate fixed by the DGEHS/CGHS which includes the cost of drugs, surgical instruments and other medicines etc.



for Sandhyachi Neuro Panchkarma

Proprietor

- a. Package Rate shall mean and include lump sum cost of inpatient treatment / day care / diagnostic procedure for which a DGEHS beneficiary is 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) (i) Registration charges, (ii) Admission charges, (iii) Accommodation charges including patient's diet, (iv) Operation charges, (v) Injection charges, (vi) Dressing charges, (vii) Doctor / Consultant visit charges, (viii) ICU/CCU charges, (ix) Monitoring charges (x) transfusion charges, (xi) Anesthesia charges, (xii) Operation theatre charges, (xiii) Procedural changes / surgeon's fee, (xiv) cost of surgical disposables and all sundries used during hospitalization , (xv) Cost of medicines, (xvi) Related routine and essential investigations, (xvii) Physiotherapy charges etc (xviii) Nursing care and charges for its services.
- b. Cost of implants is reimbursable in addition to package rates as per DGEHS/CS(MA) ceiling rates for implants or as per actual whichever is less, in case there is no DGEHS prescribed ceiling rates, the same may be regulated with reference to the approved rates under CGHS or actual whichever is less. If there are no prescribed rates under CGHS, the same may be regulated with reference to AIIMS rates or actual, whichever is less.
- c. Treatment charges for new born baby are separately reimbursable in addition to delivery charges for mother.
- d. Hospitals / diagnostic centers empanelled under DGEHS shall not charge more than the package rate / rates.
- e. Expenses on toiletries, cosmetics, telephone bills etc, are not reimbursable and are not included in package rates.
- f. Package rates envisage duration of indoor treatment as follows –
Upto 12 days – for Specialized (Super Specialties) treatment
Upto 7 days – for other Major Surgeries
Upto 3 days – for laparoscopic Surgeries / normal deliveries
1 days – for day care / Minor Surgeries



For Sandhyashi Neuro Panchkarma

Proprietor

g. No additions charges on account of extended period of stay shall be allowed if that extension is due to infection on the consequences of surgical procedure or due to any improper procedure and is not justified.

h. In case, there are no DGEHS/CGHS prescribed rates for any test / procedure, then AIIMS rates are applicable. If there are no AIIMS rates, then reimbursement is to be arrived at by calculating admissible amount item-wise (e.g. room rent, investigations, cost of medicines, procedure charges etc) as per approved rates / actual, in case of investigations. Room rent applicable as on date is –

General Ward – Rs. 1000/- per day

Semi-Private Room – Rs. 2000/- per day

Private Room – Rs. 3000/- per day

The above may change as per instructions issued by DGEHS/CGHS from time to time and same shall be communicated to all concerned. The empanelled hospitals shall not charge more than approved room rent charges applicable from time to time

10. In case rates for various procedures, which are lower than the rates fixed by the DGEHS, then reimbursement would be at the actual rates charged by the hospital and not as per the DGEHS rates.

11. In case the item is essential for the treatment, but the same is not covered in the package, in that event, it will be reimbursed separately by the concerned department.

12. The contracting parties shall not discriminate in the provision of facility and treatment in any manner whatsoever against the DGEHS beneficiary receiving treatment in the hospital as compared to other patient of equal status and coming for treatment in the hospital.

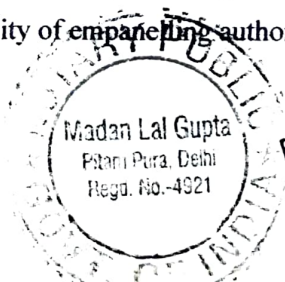
13. The hospital/ diagnostic center shall provide access to the financial and medical records for own assessment and review by medical and financial auditors of the Delhi Government, as and when required and the decision of



For Sandhyashi Neuro Panchkarma
Proprietor

Govt. of N.C.T. of Delhi/Central Government on necessity or requirement shall be final.

14. The Hospital/diagnostic center shall also provide reports in the prescribed format to the State Program Officer, DGEHS in respect of the beneficiaries treated on monthly basis by the 10th day of the succeeding calendar month.
15. The Hospital shall indemnify and hold harmless DHS against any damages suffered by DHS/GNCTD which directly result from the negligence or default on the part of the Hospital or its employees, contractors, agents, servants etc. This liability at the Hospital shall survive the termination or expiry of this agreement. Any liability arising due to any default or negligence in providing or performance of the medical services shall be borne exclusively by the hospital/diagnostic center who shall alone be responsible and liable for the defects in rendering such services. If the empanelled hospital fails to meet out the liability due to any default or negligence in providing medical facility to the beneficiary concerned within the stipulated time, DHS shall recover the equal amount from any money due or accrue to the empanelled hospital under the agreement or from the Performance Security.
16. In case of any complaint of overcharging, the Director of Health Service, Govt. of N.C.T. of Delhi may, after enquiry, impose a fine amounting to Rs. 10000/- (Rupees Ten Thousand) per case in addition to the recovery of the overcharged amount. Further on repeated default he may derecognize M/s — **SANDHYASHI NEURO PANCHKARMA** — and such decision shall be final, without any notice, and this shall be without any prejudice to any other action to be taken as per the terms herein contained including recovery of overcharged amount. In case of any eventuality, if the empanelled hospital fails to deposit the penalty within the stipulated time, DHS shall recover the equal amount from any money due or accrue to the empanelled hospital under this agreement or from the Performance Security.
17. In case any malpractice by any empanelled institution is detected / proved, DHS in the capacity of empaneling authority will consider the cancellation of



For Sandhyashi Neuro Panchkarma
[Signature]
Proprietor

the empanelment of the institution coupled with criminal proceedings against it by the Head of the Department concerned. In addition the performance security in full shall be forfeited.

18. The Hospital/Diagnostic Center shall deposit performance security in the form of Account payee Demand Draft / Fixed Deposit or Bank Guarantee from a commercial bank in an acceptable form, safeguarding the interest of the department in all respects, with the Government as per rates indicated below immediately before execution of this Agreement, as per revised CGHS Rates :-

Category	Type of hospital	Amount of Security Money
Category - A	General Hospital	Rs. 10,00,000/- (Rupees Ten lac only)
Category - B	Specialty Hospital	Rs. 10,00,000/- (Rupees Ten lac only)
Category - C	Super Specialty hospital	Rs. 10,00,000/- (Rupees Ten lac only)
Category - D	Specialty Eye care Hospital	Rs. 2,00,000/- (Rupees Two lac only)
Category - E	Specialty Dental care Hospital	Rs. 2,00,000/- (Rupees Two lac only)
Category - F	Diagnostic center	Rs. 2,00,000/- (Rupees Two lac only)
Category - H	Imaging centers	Rs. 2,00,000/- (Rupees Two lac only)

Note-(in case of further renewal or extension no need to deposit any BANK GURANTEE)

The performance security shall be valid for a period of sixty days beyond the date of completion of all contractual obligations. If any information furnished by the hospital is found to be incorrect or false at any time, the contract agreement shall be liable to be terminated without any notice and the performance security shall be forfeited. Similarly, if at any stage the hospital deviates from the terms and conditions of the contract agreement or its performance is found to be unsatisfactory, the contract agreement shall be liable to be terminated without any notice and the performance security shall be forfeited.



Sandhyashi Neuro Panchkanya
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19. Terms and conditions of this Agreement shall be binding on both the parties.
20. (a) This Agreement is valid till _____ from the date of its execution by the Director of Health Services, Govt. of N.C.T. of Delhi. The agreement is extendable on mutual agreement subject to satisfactory performance by the hospital / diagnostic center on same terms and conditions.
- (b) Hospital/Diagnostic centers which are empanelled under DGEHS on the basis of empanelment under CGHS the empanelment under DGEHS shall only be for the same specialties as empanelled under CGHS. The hospital shall provide OPD services in all the concerned specialties. The empanelment under DGEHS shall stand automatically terminated whenever the empanelment of the hospital/diagnostic center is terminated with CGHS due to any reason.
21. The Agreement shall be terminated by one calendar month's notice in writing by the Director of Health Services, Govt. of N.C.T. of Delhi without assigning any reasons.
22. Director Health Services, Govt. of N.C.T. of Delhi shall refund the security deposit or such portion thereof, as may be available, to the hospital on the termination of this Agreement within 60 days of completion of all the obligations. No interest shall be paid on the amount of security deposit.
23. Should the hospital get wound up or partnership or society or trust is dissolved, the Directorate of Health Services shall have the power to terminate the Agreement but termination of the Agreement shall not relieve the Hospital or its successors or agents, employees, servants etc. from the civil/criminal liability in respect of the services provided by the Hospital during the period when the Agreement was in force.
24. The Directorate of Health Services shall have a lien and also reserve the right to retain and set off against any sum which may, from time to time become due and is payable to the hospital hereunder, any claim which the Directorate of Health Services may have against the hospital under this or any other Agreement between the same parties
25. The Directorate of Health Services shall be at liberty at any time to terminate this Agreement on giving seven days notice in writing to the hospital for breach of any of the terms and conditions of this Agreement and the decision of the Director, Directorate of Health Services in this regard shall be final.

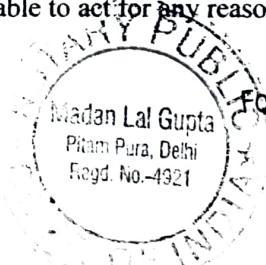


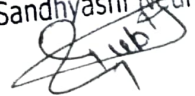
For Sandhyashi Neuro Panchkarma

Proprietor

26. In the event of any bribes, commission, gifts or advantage being given, promised or offered by or on behalf of the hospital or any of its officers or staff including Proprietor, Partner, Director etc. or their agent or servant or any one else on their behalf to any officer, servant or representative of the Directorate of Health Services, Govt. of N.C.T. of Delhi, or any member of the family of any officer, servant or representative of the Directorate of Health Services in relation to the obtaining or execution of this or any other Agreement with the Directorate of Health Services, then the Directorate of Health Services shall without prejudice to their other rights and remedies be entitled notwithstanding any criminal liability which the hospital may incur, cancel this Agreement and any other Agreement entered into by the hospital with the DHS and to recover from the Hospital 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 Director, Directorate of Health Services in such manner and with such evidence or information as he shall think fit and sufficient and his decision shall be final and conclusive.
27. Subject as otherwise, provided in this Agreement, all notices may be given or taken by the Director, Directorate of Health Services or any designated officer being entrusted with the functions and powers of the said Director, Directorate of Health Services.
28. The administrative cost of the hospital/diagnostic centre and all other expenses required by the hospital for the purpose of this Agreement shall be borne by the Second Party (Hospital/ Diagnostic center).
29. In the event of any question, dispute or difference whatsoever at any time arising under the conditions of Agreement or in any other manner under this Agreement or in any way relating there-to or the true meaning or interpretation of any of the provisions thereof (except any matters for which the decision is specifically provided for in the conditions of the Agreement), the same shall be referred to for decision to a sole Arbitrator who shall be appointed by the Lt. Governor, N.C.T. of Delhi or his nominee and the decision of the Arbitrator shall be final and binding on both the parties.

In the event of the arbitrator appointed by the Lt. Governor, N.C.T. of Delhi, or his nominee dying, neglecting or refusing to act or resigning or being incapable or unable to act for any reason, whatsoever, it shall be lawful for the



For Sandhyashi Neuro Panchkarma

Proprietor

Lt. Governor, N.C.T. of Delhi or his nominee to appoint another arbitrator in place of outgoing arbitrator in the manner aforesaid.

Subject to the above the Arbitration and Conciliation Act, 1996 or any modification or replacement and the rules hereunder and any statutory modifications thereof for the time being in force shall apply to the arbitration proceeding under this clause.

30. All notices and reference hereunder shall be deemed to have been duly served and given to the hospital if delivered to the hospital or their authorized agent or sent by registered post to the address stated hereinbefore and to the Directorate of Health Services, Govt. of N.C.T. of Delhi, if delivered to the Director, Directorate of Health Services or sent by registered post.
31. The original copy of this Agreement shall be kept at the office of Director, Directorate of Health Services, Govt. of NCT of Delhi and a true copy shall be retained in the office of the hospital/diagnostic center.

In witness whereof, The Director, Health Services, Govt. of NCT of Delhi for and on behalf of the President of the Union of India and the authorized representative of the above named Hospital/ Diagnostic Centre have hereinto set their respective hands the day and year first above written, in the presence of the following witnesses:

**For and on behalf of
Hospital/ Doctor**

(Name Dr. Rajni Gupta)

For Sandhyashi Neuro Parichkarma

(Authorized signatory) Proprietor

Witnesses

1. Rajni Gupta

Director, Health Services

(Rubber Seal)

(Authorized signatory)

Witnesses

1. _____

For and on behalf of President of India

Mr. Ravinder Pruthi S/o D.D.Pruthi

61 D, Navyug Adarsh Apartment,

F Block Vikas Puri, New Delhi-110018

2. _____

Mr. Pramod Gupta S/o Late S.N.Gupta

F 301, Aura Chiamera, Raj nagar extn. Gzb, UP-201017

2. _____

ATTESTED



11 OCT 2021

NOTARY PUBLIC, DELHI

MEMORANDUM OF UNDERSTANDING ON B/W SANDHYASHI NEURO PANCHKARMA AND LIFE CARE DIAGNOSTICS CENTER

1) Parties: The Memorandum of Understanding (hereinafter referred to as MOU) is made and entered into by and between **SANDHYASHI NEURO PANCHKARMA** (A Unit of Sandhya Neuro Care Pvt. Ltd.) and **LIFE CARE DIAGNOSTICS CENTER**, whose address is **Plot No. 146B, Near Kanara Bank, Shalimar Bagh, Bengaluru - 560021** and **LIFE CARE DIAGNOSTICS CENTER**, whose address is **Plot No. 146B, Near Kanara Bank, Shalimar Bagh**.

2) Purpose: The purpose of the MOU is to set forth the terms and conditions under which the **LIFE CARE DIAGNOSTICS CENTER** will provide its all critical services to the **SANDHYASHI NEURO PANCHKARMA**.

3) Scope:

- 1. Emergency Ambulance
- 2. Patient Transport
- 3. Non-emergency Vehicle
- 4. Patient Ambulance
- 5. Patient Ambulance

4) Term of MOU: This MOU is effective upon the day and date last signed and executed by the duly authorized representatives of the parties to this MOU shall remain in full force and effect until cancelled. This MOU may be terminated, without cause, by either party upon ninety days written notice, which notice shall be delivered by hand or by certified mail to the address stated above **10/11/2020 to 09/11/2021**.

5) Responsibilities of SANDHYASHI NEURO PANCHKARMA

- a) Providing a reasonable diagnosis when sought by the pathologist of Life Care Diagnostics to the LIFE CARE DIAGNOSTICS CENTER
- b) Laboratory Audit to be done Sandhya Gupta

6) Responsibilities of LIFE CARE DIAGNOSTICS CENTER:

- a) qualified and trained person perform, supervise and interpret the investigations quality and safety protocols
- b) To allow authorities of Clinic to conduct review


7) General Provisions:

a) Amendments: Either party may request changes to their

8) URGENT REPORTS TO BE REPORTED ONLINE ON

a) **Vikasgupta146b@rediffmail.com**

b) **SMS and WhatsApp on 7428177717 (Clinic customer care no. +91 1140199034)**

For Sandhyashi Neuro Panchkarma

Proprietor

MEMORANDUM OF UNDERSTANDING B/W SANDHYASHI NEURO PANCHKARMA AND LIFE CARE DIAGNOSTIC,S CENTER

1) **Parties:** This Memorandum of understanding There in often requested to as MOU") is made and entered into by and between the SANDHYASHI NEURO PANCHKARMA (A Unit of Sandhya Pharma & Research Unit) Whose Address is B.F-45, Near Canara Bank, Shalimar Bagh, Delhi-110088 AND The LIFE CARE DIAGNOSTIC,S CENTER, whose address is F-6/35, Sec-16, Rohini, Delhi-110089.

2) **Purpose:** The purpose of this MOU is to establish the terms and conditions under which the LIFE CARE DIAGNOSTIC,S CENTER will provide amazing services to the SANDHYASHI NEURO PANCHKARMA,

3) **Scope:**

1 - X-Ray	2 - Sonography
3 - Ultrasound	4- Color Doppler
5 - Echocardiography	6 - Fistulogram
7 - Inter venous Pyelography	8- Barium Studies.

4) **Term of MOU:** This MOU is effective upon the day and date list signed and executed by the duly authorized representatives of the parties to this MOU shall remain in full force and effect until cancelled.

This MOU be terminated, without cause, by either party upon one month's written notice, which notice shall be delivered by hand or by certified mail to the address listed above.

5) Responsibilities of SANDHYASHI NEURO PANCHKARMA:

- Providing provisional diagnosis whenever sought by the pathologist
- Timely payment to the Jain Diagnostic Center
- Monthly Audit to be done Sandhya Gupta

6) Responsibilities of Life Care Diagnostic,s Center:

- Qualified and trained person perform, Supervise and interpret the investigations.
- Reports are to be intimated within defined time frame.
- Critical Reports are informed immediately to the clinic concerned person.
- Imaging services adhere to the standard quality and safety protocols.
- To allow authorities of Clinic, to conduct periodic review.

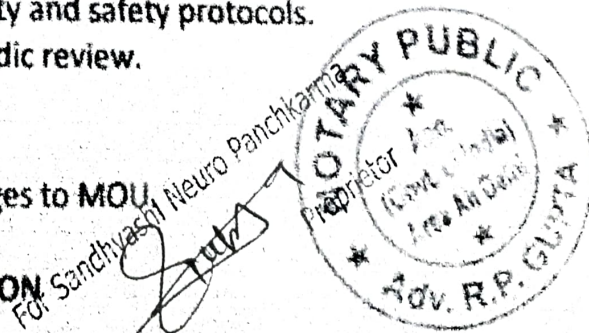
7) General Provisions:

a) **Amendments:** Either party may request changes to MOU

8) URGENT REPORTS TO BE REPORTED ONLINE ON

i) Vikasgupta.1466@rediffmail.com

ii) SMS and WhatsApp on 7428177717 (Clinic customer care no: +91 1140199634)



Dupla

SANDHYASHI NEURO PANCHKARMA

(A Unit of Sandhya Pharma & Research Unit)

(A CGHS/DGHS Empanelled Centre and All Major TPA Covered)



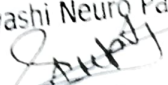
UNDERTAKING

To : The Director, General Health Services, NCT Delhi

TO WHOM SO EVER IT MAY CONCERN

I hereby certify and declare that PNDD and/or MTP registration not applicable on our center.

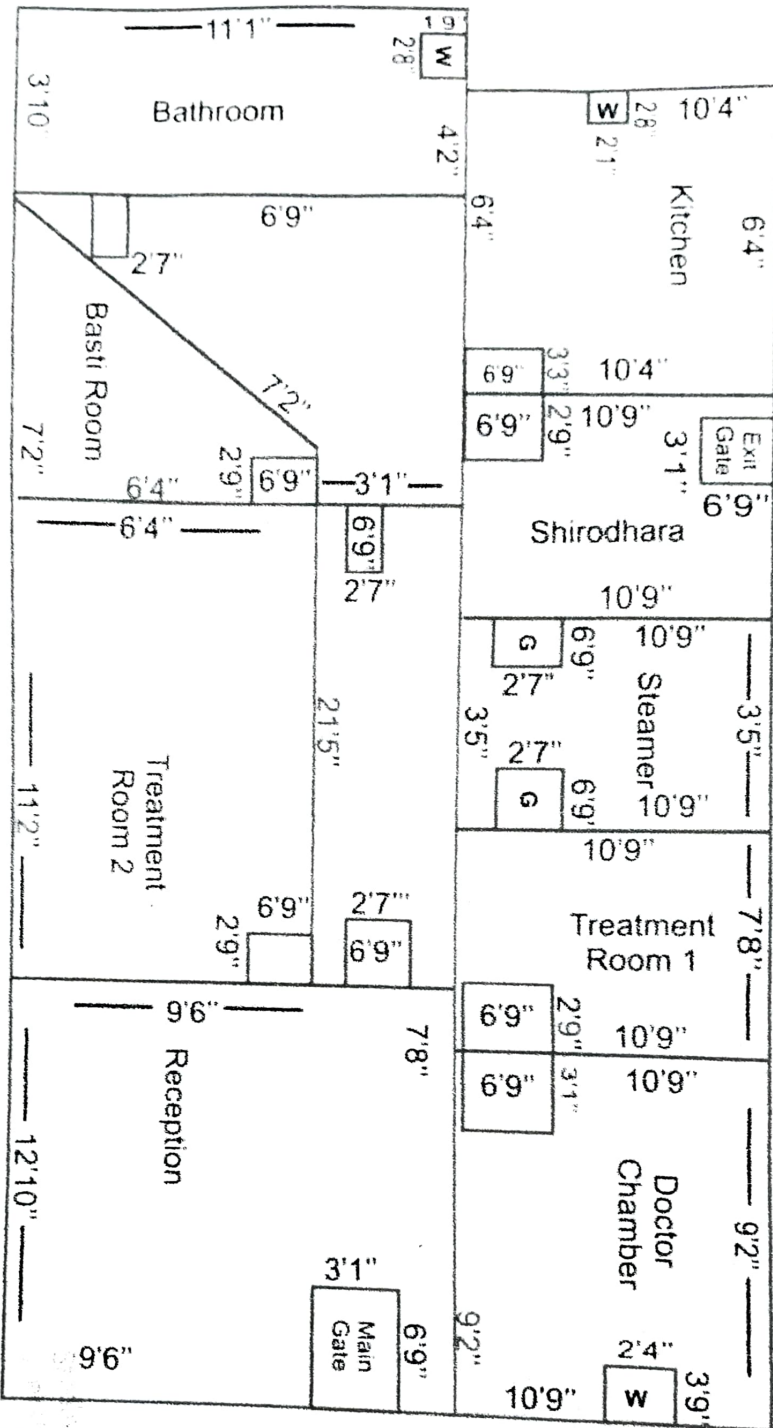
Date :

For Sandhyashi Neuro Panchkarma

For : Sandhayshi Neuro Panchkarma Proprietor

(Prop.)

(BF-45, Near Canara Bank, Shalimar Bagh, Delhi-110088)

PH No. 011-40199634 / 7428177717



DRAWINGS OF EXISTING BUILDING DRAWINGS OF SANDHYASHI NEURO PANCHKARMA

B-45, SHALIMAR BAGH, DELHI-110088

CLIENT: DR RAJNI GUPTA

DRG architects

ADDRESS: 28/10/2028
 NEAR GOVT. HIGH SCHOOL
 SAKHUR, DHARAMDA
 HYDRABAD (INDIA) - 500017
 TEL: +91 98662 66262



FLOOR PLAN

SCALE: 1/8" = 1'-0"	PROJECT NO: 1
DATE: 10/10/2028	DRAWING NO: 1
DRAWN BY: RAJNI GUPTA	CHECKED BY: RAJNI GUPTA
APPROVED BY: RAJNI GUPTA	

Handwritten signature and date: 10/10/2028

For Sandhyashi Neuro Panchkarma
Handwritten signature
 Proprietor



SANDHYASHI NEURO PANCHKARMA

(A Unit of Sandhya Pharma Research Unit)

BF-45, Near Canara Bank, Shalimar Bagh, Delhi-110088

Therapy/Intervention

S.no	Treatment Name	Unit Cost In Rupees
1	Abhyanga	1500
2	Abhyanga - Sthanika	800
3	Abhyanga- Sweda	1600
4	Avagaha	850
5	Anjana	500
6	Aanchana (Traction)	500
7	Annalepa/Njavaratheppu- full Body	1500
8	Annalepa/Njavaratheppu-Sthanikam	900
9	Aschothana	450
10	Agnikarma - Infra Red coagulation(Package rate for full course of treatment)	10,000 For 8 Sitting
11	Agrnikarma - High Frequency Coagulation(Package rate for full course of treatment)	10,000 For 8 Sitting
12	Agrnikarma - Radio Frequency Coagulation(Package rate for full course of treatment)	10,000 for 8 Sitting
13	Achasnehapana / Day	600
14	Bhedna(of Eye)	700
15	Bhagna Bandhana (Fracture Bandage with Reduction & Immobilisation)	1000
16	Choorna Pinda Sweda/ Podikkizhi- Full Body	1600
17	Choorna Pinda Sweda/Podikkizhi- Sthanika/ Ekangam	900
18	DhanyaPindaswedan/Dhanyakkizhi/Navadhanyakkizhi-Full Body	1600
19	Dhara/ Shirodhara - Thaila	1600
20	Dhanyamladhara - Sthanika/ Local- Katee Dhara etc	900
21	Dhoopana	550
22	Dhoomapana	550
23	Dhanyamla Pindaweda/ Dhanyamlakkizhi/Kaatikkizhi Full Body	1600
24	Eshana	800
25	Greevavasthi	900
26	Gandoosha	450
27	Goshbanabandha	400
28	Jaloukavacharana	1000
29	Jambeerapindasweda/Narangakkizhi- Full Body	1600

For Sandhyashi Neuro Panchkarma

Proprietor

30	Januvasthi	900
31	Kabala	450
32	Kateevasthi	900
33	Kashayavasthi(Niroohavasthi)-Different Varieties	1500
34	Kashaya Dhara- Full Body	1500
35	Kashaya Dhara-Ekangam/Local	800
36	KsheeraDhara(Medicataed - Different Varieties)- Full Body	1700
37	Ksheeradhooma	800
38	Kshara karma (Package rate for full Course of Treatment)	10,000 For 5 Siting
39	Ksharasoothra - Low level Fistula (Package rate for full course of treatment)	10,000 For 5 Sitting
40	Ksharasoothra- Middle level Fistula (Package rate for full course of treatment)	10,000 For 5 Sitting
41	Ksharasoothra- High level Fistula (Package rate for full course of treatment)	10,000 For 5 Sitting
42	Kshalana	500
43	Kshara pathana(Packge Rate for full course of treatment)	10,000 for 3 Sitting
44	Karnapoorana	500
45	Kuttnam	650
46	Lekhana	600
47	Lepa/Lepana-Local	500
48	Mathravasthi	900
49	Mamsa Pinda Sweda/Mamasakkizhi-Full Body	1600
50	MamsaPinda Sweda/Mamsakkizhi-Sthanikam/ Ekangam	900
51	Mukhalepa	600
52	Moordhataila	450
53	Nadeesweda/Snigdhasweda-Full	700
54	Nadeesweda/Snigdhasweda-Ekangam/Local	650
55	Nethradhara/Akshiseka	650
56	Nasya	900
57	Pathra Pinda Sweda/ Ilakkizhi-Full	1600
58	Pathra Pinda Sweda/ Ilakkizhi-Sthanika/Ekangam	900
59	Pizhichil/Kayaseka	2200
60	Pizhichil-Sthanikam/Ekangam/Local	1200
61	Pichu	500
62	Prushtavasthi	1000
63	Putapaka	900
64	Prachanna	650
65	Pindi	550
66	ShashtikapindaSweda/Navarakkizhi-Full Body	2000
67	ShashtikapindaSweda/Navarakkizhi-Ekangam/Sthanikam	1200

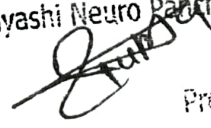
For Sandhyashi Neuro Ranchkarma



Proprietor

68	Sirovasthi	2000
69	Snehapana / day	600
70	Sirolepa/Thalapothichil	1300
71	Siravayadha/Siravedha/Rakthamoksha	1000
72	Thaila Vasthi	900
73	Thakradhara	1200
74	Thalam	500
75	Tharpana Akshi	800
76	Tailadaha(Package rate for full Course of Treatment)	10,000 for 3 days
77	Thakrapana	350
78	Utharavasthi	1200
79	Udwarthana	1600
80	Urovasthi (Hridyavasthi)	900
81	Upanaha/Upanahasweda	650
82	Vamana	1500
83	Virechana	1000
84	Valukasweda/Manalkkizhi- Full Body	1500
85	Vitalaka/Bitalaka	600
86	Yoniprakshalana	700
87	Yonidhavana	700
88	Yoni Pichu	800
89	Yoni Poorana	700
90	Yoni Dhoopana	400
91	Valukasweda/Manalkkizhi-Sthanikam	800
92	Ksheeradhara- Head	1500
93	Jambeerapindasweda/Narangakkizhi-Sthanika/Local	900
94	Dhanyapindasweda-Sthanika/Local	900
95	Dhanyamlapindasweda/Katikkizhi-Sthanika	900
96	Veshtanam	400
97	Agnikarma (Classical with Panchalohasalaka)	1200

For Sandhyashi Neuro Panchkarma



Proprietor

Unit Cost of Ayurvedic therapies / interventions in OPD/IPD offered to NABH accredited empanelled Hospitals in CGHS.

Therapy/Intervention		
S.No.	Treatment Name	Unit Cost in Rupees
1	Abhyanga	1145
2	Abhyanga-Sthanika	570
3	Abhyanga+Sweda	1280
4	Avagaha	765
5	Anjana	340
6	Aanchana (Traction)	480
7	Annalepa/Njavaratheppu-Full Body	1290
8	Annalepa/Njavaratheppu- Sthanikam	755
9	Aschothana	335
10	Agnikarma-Infra Red Coagulation (Package rate for full Course of treatment)	10,000
11	Agnikarma-High frequency Coagulation (Package rate for full Course of treatment)	10,000
12	Agnikarma-Radio frequency Coagulation (Package rate for full Course of treatment)	10,000
13	Achasnehapana/day	440
14	Bhedana (of Eye)	565
15	BhagnaBandhana (Fracture Bandage with Reduction & Immobilisation)	885
16	Choorana Pinda Sweda/Podikkizhi-Full Body	1210
17	Choorana Pinda Sweda/Podikkizhi- Sthanika/Ekangam	715
18	DhanyaPindaswedam/Dhanyakkizhi/Navadhanyakkizhi-Full Body	1245
19	Dhara/Sirodhara-Thaila	1420
20	Dhanyamladhara-Sthanika/Local-Katee Dhara etc	705
21	Dhoomapana	480
22	Dhoomapana	460
23	Dhanyamla Pindaweda/Dhanyamlakkizhi/Kaatikkizhi-Full Body	1240
24	Eshana	565
25	Greevavasthi	845
26	Gandoosha	390
27	Goshbanabandha	300
28	Jaloukavacharana	745
29	Jambeerapindasweda/Narangakkizhi-Full Body	1190
30	Januvasthi	845
31	Kabala	390
32	Kateevasthi	845

For Signature: *[Signature]*

Date: *[Date]*

33	Kashayavasthi (Niroohavasthi)-Different varieties	1030
34	KashayaDhara-Full Body	1045
35	KashayaDhara-Ekangam/Local	635
36	KsheeraDhara (Medicated-different varieties)-Full Body	1155
37	KsheeraDhooma	735
38	Kshara Karma (Package rate for full course of treatment)	10,000
39	Ksharasoothra-Low level fistula (Package rate for full course of treatment)	10,000
40	Ksharasoothra-Middle level fistula (Package rate for full course of treatment)	10,000
41	Ksharasoothra-High level fistula (Package rate for full course of treatment)	10,000
42	Kshalana	355
43	Kshara Pathana (Package rate for full course of treatment)	10,000
44	Karnapoorana	350
45	Kuttanam	540
46	Lekhana	540
47	Lepa/Lepana-Local	390
48	Mathravasthi	350
49	MamsaPindaSweda/Mamsakkizhi-Full Body	1420
50	MamsaPindaSweda/Mamsakkizhi-Sthanikam/Ekangam	820
51	Mukhalepa	490
52	Moordhataila	315
53	Nadeesweda/Snigdhasweda-Full	580
54	Nadeesweda/Snigdhasweda-Ekangam/Local	450
55	Nethradhara/Akshiseka	595
56	Nasya	600
57	PathraPindaSweda/Ilakkizhi-full	1220
58	PathraPindaSweda/Ilakkizhi-Sthanika/Ekangam	720
59	Pizhichil/Kayaseka	1995
60	Pizhichil-Sthanikam/Ekangam/Local	1105
61	Pichu	410
62	Prushtavasthi	845
63	Putapaka	850
64	Prachanna	590
65	Pindi	450
66	ShashtikapindaSweda/Navarakkizhi-Full Body	1320
67	ShashtikapindaSweda/Navarakkizhi-Ekangam/Sthanikam	770
68	Sirovasthi	970
69	Snehapana/day	440
70	Sirolepa/Thalapothichil	1120
71	Siravayadha/Siravedha/Rakthamoksha	640
72	Taila Vasthi	710

For Sandhyashri Kottarathilakarma

Proprietor


		1145
73	Thakradhara	410
74	Thalam	735
75	Tharpana	10,000
76	Tailadaha (Package rate for full course of treatment)	250
77	Thakrapana	1100
78	Utharavasthi	1095
79	Udwarthana	845
80	Urovasthi	590
81	Upanaha/Upanahasweda	745
82	Vamana	355
83	Virechana	1080
84	Valukasweda/Manalkkizhi-Full Body	450
85	Vitalaka/Bitalaka	500
86	Yoniprakshalana	500
87	Yonidhavana	460
88	Yoni Pichu	460
89	Yoni Poorana	335
90	Yoni Dhoopana	655
91	Valukasweda/Manalkkizhi-Sthanikam	1095
92	Ksheeradhara-Head	735
93	Jambeerapindasweda/Narangakkizhi-Sthanika/Local	730
94	Dhanyapindasweda-Sthanika/Local	705
95	Dhanyamlapindasweda/Katikkizhi-Sthanika	330
96	Veshtanam	995
97	Agnikarma (Classical with Panchalohasalaka)	

1. Determination of treatment expenditure for payment / reimbursement.

For the purpose of settlement of Ayurvedic treatment expindutre under CGHS following criteria shall be applied-

- The above unit rates of therapies / interventions shall be benchmarks for calculating treatment expenditure.
- The above unit rates are inclusive of the implication of materials medicines, accessories, equipments maintenance, manpower (Medical, Paramedical and Nursing) and diet used in imparting therapies.
- Pre and post procedure cost will be chargeable @ Rs. 75 per day.

For Sandhyashi Neuro Panchkarma



Proprietor

SANDHYASHI NEURO PANCHKARMA

(A Unit of Sandhya Pharma & Research Unit)

(A CGHS/DGHS Empanelled Centre and All Major TPA Covered)



UNDERTAKING

To : The Director, General Health Services, NCT delhi

TO WHOM SO EVER IT MAY CONCERN

I hereby certify and declare that Sandhyashi neuro panchkarma is firm therefore clause no.8 of the offer letter is not applicable.

For Sandhyashi Neuro Panchkarma

Date :

For : Sandhayshi Neuro Panchkarma
Proprietor

(Prop.)

(BF-45, Near Canara Bank, Shalimar Bagh, Delhi-110088)

PH No. 011-40199634 / 7428177717

SANDHYASHI NEURO PANCHKARMA

(A Unit of Sandhya Pharma & Research Unit)

(A CGHS/DGHS Empanelled Centre and All Major TPA Covered)



UNDERTAKING

To : The Director, General health Services, NCT delhi

TO WHOM SO EVER IT MAY CONCERN

I hereby certify and declare that Sandhyashi neuro panchkarma is firm therefore clause no.9 of the offer letter is not applicable.

For Sandhyashi Neuro Panchkarma

Date :

For : Sandhyashi Neuro Panchkarma

(Prop.)

(BF-45, Near Canara Bank, Shalimar Bagh, Delhi-110088)

PH No. 011-40199634 / 7428177717

INDIAN INCOME TAX RETURN ACKNOWLEDGEMENT

[Where the data of the Return of Income in Form ITR-1 (SAHAJ), ITR-2, ITR-3,
ITR-4(SUGAM), ITR-5, ITR-6, ITR-7 filed and verified]
(Please see Rule 12 of the Income-tax Rules, 1962)

**Assessment Year
2020-21**

PAN	AJNPG3905C		
Name	RAJNI GUPTA		
Address	1, Haiderpur, NORTH WEST DELHI, DELHI, 110088		
Status	Individual	Form Number	ITR-4
Filed u/s	139(1)-On or before due date	e-Filing Acknowledgement Number	108815470050121

	Taxable Income and Tax details	Sl. No.	Amount
Taxable Income and Tax details	Current Year business loss, if any	1	0
	Total Income		450890
	Book Profit under MAT, where applicable	2	0
	Adjusted Total Income under AMT, where applicable	3	0
	Net tax payable	4	0
	Interest and Fee Payable	5	0
	Total tax, interest and Fee payable	6	0
	Taxes Paid	7	11960
(+)Tax Payable /(-)Refundable (6-7)	8	-11960	
Dividend Tax Distribution Tax details	Dividend Tax Payable	9	0
	Interest Payable	10	0
	Total Dividend tax and interest payable	11	0
	Taxes Paid	12	0
	(+)Tax Payable /(-)Refundable (11-12)	13	0
Accreted Income Detail	Accreted Income as per section 115TD	14	0
	Additional Tax payable u/s 115TD	15	0
	Interest payable u/s 115TE	16	0
	Additional Tax and interest payable	17	0
	Tax and interest paid	18	0
(+)Tax Payable /(-)Refundable (17-18)	19	0	

Income Tax Return submitted electronically on 05-01-2021 21:00:22 from IP address 202.14.121.104 and verified by RAJNI GUPTA

having PAN AJNPG3905C on 01-03-2021 18:54:56 from IP address 202.14.121.104 using Electronic Verification Code CIF8WJN2LI generated through Aadhaar OTP mode.

DO NOT SEND THIS ACKNOWLEDGEMENT TO CPC, BENGALURU

For Sandhyaashini NSURO PANDIT
[Signature]
Proprietor



SANDHYASHI NEURO PANCHKARMA
(A Unit of Sandhya Pharma & Research Unit)
(BF-45, Near Canara Bank, Shalimar Bagh, Delhi-110088)
PH No.011-40199634 / 7428177717

UNDERTAKING

To : The Director, General health Services, NCT Delhi


TO WHOM SO EVER IT MAY CONCERN

Empanement offer letter ref. F 25(iii)DGEHS/205/DHS/(HQ)/2011/Pr-iii Dated 28/09/2021

Clause no : 11 - latest Income Tax Clearance Certificate and Pan Number

I hereby certify and declare that Income tax clearance certificate is not applicable and duly certified ITR Copy and pan card copy attached.

Date :

For : Sandhayshi Neuro Panchkarma
For Sandhyashi Neuro Panchkarma

Proprietor



SANDHYASHI NEURO PANCHKARMA
(A Unit of Sandhya Pharma & Research Unit)
(BF-45, Near Canara Bank, Shalimar Bagh, Delhi-110088)

PH No.011-40199634 / 7428177717

UNDERTAKING

To : The Director, General health Services, NCT Delhi

TO WHOM SO EVER IT MAY CONCERN

Empanement offer letter ref. F 25(iii)DGEHS/205/DHS/(HQ)/2011/PIF-III Dated 28/09/2021

Clause no : 12 - Tax Exemption Certificate , If Any

I hereby certify and declare that tax Exemption certificate is not applicable and duly certified ITR Copy attached.

Date :

For : Sandhayshi Neuro Panchkarma
For Sandhyashi Neuro Panchkarma


Proprietor

SANDHYASHI NEURO PANCHKARMA

(A Unit of Sandhya Pharma & Research Unit)

(A CGHS/DGHS Empanelled Centre and All Major TPA Covered)



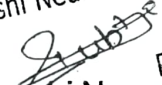
UNDERTAKING

To : The Director, General health Services, NCT delhi

TO WHOM SO EVER IT MAY CONCERN

I hereby declare that no criminal conviction in the court of law and any medical councils are registered against me in India.

Date :

For Sandhyashi Neuro Panchkarma

Proprietor
For : Sandhayshi Neuro Panchkarma

(Prop.)

(BF-45, Near Canara Bank, Shalimar Bagh, Delhi-110088)

PH No. 011-40199634 / 7428177717

SANDHYASHI NEURO PANCHKARMA

(A Unit of Sandhya Pharma & Research Unit)

(A CGHS/DGHS Empanelled Centre and All Major TPA Covered)



UNDERTAKING

To : The Director, General health Services, NCT delhi

TO WHOM SO EVER IT MAY CONCERN

I hereby certify and declare that Sandhyashi neuro panchkarma is firm and a daycare center therefore clause no.15 of the offer letter is not applicable.

For Sandhyashi Neuro Panchkarma

Date :

For : Sandhayshi Neuro Panchkarma

(Prop.)

(BF-45, Near Canara Bank, Shalimar Bagh, Delhi-110088)

PH No. 011-40199634 / 742817717

SANDHYASHI NEURO PANCHKARMA

(A Unit of Sandhya Pharma & Research Unit)

(A CGHS/DGHS Empanelled Centre and All Major TPA Covered)



UNDERTAKING

To : The Director, General health Services, NCT delhi

TO WHOM SO EVER IT MAY CONCERN

I hereby certify and declare that Sandhyashi Neuro Panchkarma is still on the panel of CGHS for the specialties mentioned in the notification in the empanelment and further undertake that shall have to be submitted six monthly basis.

Date :

For Sandhyashi Neuro Panchkarma

For : Sandhyashi Neuro Panchkarma
Proprietor
(Prop.)

(BF-45, Near Canara Bank, Shalimar Bagh, Delhi-110088)

PH No. 011-40199634 / 7428177717

F.No. 25-1/2018/CGHS/JD AYUSH
Government of India
Ministry of Health & Family Welfare
Directorate General of Central Government Health Scheme

Nirman Bhavan,
New Delhi
Dated: 31-3-2021

OFFICE MEMORANDUM

Subject: - Empanelment of Private Day Care Therapy Centers for Ayurveda, Yoga & Naturopathy under CGHS.

With reference to the above mentioned subject attention is drawn to the Office Memorandum of even number dated the 20th November, 2020 and to state that the following AYUSH Hospitals/Centers have signed the new MoA and submitted the Performance Bank Guarantee (PBG) hence, notified as CGHS empanelled Day Care Therapy Hospital/Centres for a period of one year from the date of issue of this O.M on pilot basis.


The applicability of rates and terms & conditions will be as per the revised CGHS rates contained in the OM dated 9th November 2017. These rates are applicable to NABH accredited Ayurveda, Yoga & Naturopathy Hospitals and Non-NABH accredited Ayurveda, yoga & Naturopathy Hospitals shall be entitled for 15% lower rates.

S.No.	Name of the Hospital/Centre	System	NABH status
1.	Dalco Healthcare, PVW-1 Concourse Paschim Vihar West Metro Station, Paschim Vihar, Delhi-110063, Phone-01125291212, Email:- dalcohealth@gmail.com	Ayurveda	NABH
2.	Tulsi Ayurvedic and Yoga Centre, D-833 Saraswati Vihar, Delhi- 110034, Phone-9136070810, Email:- tulsiayurvedic123@gmail.com	Ayurveda	Non-NABH
3.	Dr. Narula's Family Healthcare Centre a Panchkarma Clinic, N-26/A-3 Dilshad Garden, Delhi-110095, Phone- 8802303303, Email:- drayeevnarula23@gmail.com	Ayurveda	Non-NABH
4.	Jiva Ayurveda Clinic and Panchkarma Center, Site No 5, Jiva Marg, Sector 21B Faridabad, Haryana-121001, Phone- 01294294810, Email:- admin.faridabad@jiva.com	Ayurveda	NABH
5.	SKK Ayurveda, C-2/95, Janakpuri, New Delhi-110058, Phone- 9811446462, Email:- drtarungupta@rediffmail.com	Ayurveda	Non-NABH
6.	AAROGYAM Clinic, U-1/34A Budh Vihar, New Delhi-110086, Phone- 9818592027, Email:- drvkberwal@gmail.com	Ayurveda	Non-NABH
7.	Ayurdev Ayurved Hospital and Panchkarma Centre, H.No. 292, Pocket-18, Sector-24, Rohini, Delhi-110085, Phone:- 9996487007, Email:- ndkausik@gmail.com	Ayurveda	Non-NABH
8.	Shri Krishna Super Speciality Institute of Ayurveda, C-4A/48A Janakpuri, New Delhi-110058, Phone- 9891008498, Email:- drrajchh@yahoo.com	Ayurveda	Non-NABH

For Sandhya Metro Panchkarma


Proprietor

9	Sanjeevani Ayurveda, Shop-5201-203 Mefcon Plaza, Plot-5, Sec-6, Dwarka, New Delhi-110075, Phone- 8447137511, Email:- sanjeevanidwarka@gmail.com	Ayurveda	Non-NABH
10.	Sandhyashi Neuro Panchkarma (A Unit of Sandya Pharma and Research Unit), BF 45, Shalimar Bagh, Delhi-110088, Phone- 9212735382, Email:- vikasgupta.1466@rediffmail.cmo	Ayurveda	Non-NABH
11.	Ojas Nature Cure And Yoga Centre, Naturopathy Deptt. NKS Hospital 219-220, Gulabi Bagh, Delhi-110007 Phone- 9910265321, Email:- dryogesh.gupta2@gmail.com	Ayurveda, Yoga & Naturopathy	Non-NABH
12.	Apya Ayurveda Pvt. Ltd., Shop-5204-206 Mefcon Plaza, Plot-5, Sec-6, Dwarka, New Delhi-110075, Phone- 8447137511, Email:- vd.cpverma@gmail.com	Ayurveda	Non-NABH
13.	Sammati Wellbeing Centre, 316, Krishna Apra Park Plaza, Alpha-II Commercial Belt, Greater Noida 201310, Phone-0120-4169480, Email:- drrajeshks@gmail.com	Yoga & Naturopathy	Non-NABH
14.	Amaltas Ayurveda, Flat No.-10, Netaji Subhash Apts, Pocket 1, Sector-13, Phase-2, Dwarka, New Delhi 110075, Phone-844887959, Email:- info@amaltasayurveda.in	Ayurveda	Non-NABH
15.	Shri Vats Ayurvedic Chikitsalaya, 640/C, Chirag Delhi, New Delhi-110017, Phone- 7982440732, Email:- drpushkarsharma2@gmail.com.	Ayurveda	Non-NABH


 (Dr. Sanjay Jain)
 Director, CGHS

To:

1. All Ministries/ Departments, Government of India.
2. Director, CGHS, Nirman Bhawan, New Delhi.
3. Addl. DDG (HQ) /All Additional Directors/Joint Directors of CGHS cities outside Delhi.
4. All Pay & Accounts Officers under CGHS.
5. Additional Director (HQ) /Additional Director (SZ)/(CZ)/(EZ)/(NZ), CGHS, Delhi.
6. JD (Gr.) /JD (R&H), CGHS Delhi.
7. CGHS Desk-I /Desk-II/CGHS-I/CGHS-II, Dte. GHS, Nirman Bhawan New Delhi.
8. Estt.I/Estt.II/Estt.III/Estt.IV Sections, Ministry of Health & Family Welfare.
9. Admn. I /Admn.II Sections of Dte. GHS.
10. Rajya Sabha/Lok Sabha Secretariat.
11. Registrar, Supreme Court of India/Punjab & Haryana High Court, Chandigarh.
12. U.P.S.C.
13. Finance Division.
14. Deputy Secretary (Civil Service News), Department of Personnel & Training, 5th Floor, Sardar Patel Bhawan, New Delhi.
15. PPS to Secretary (H&FW)/ Secretary (AYUSH)/ Secretary (HR)/Secretary (AIDS Control), Ministry of Health & Family Welfare.
16. PPS to DGHS SS&MD, NRHM/AS(H)/AS& DG (CGHS).
17. Swamy Publishers (P) Ltd., P.B. No. 2468, R.A. Puram, Chennai 600028.
18. Shri Umraomal Purohit, Secretary, Staff Side, 13-C, Ferozshah Road, New Delhi.

For Sandhyashi Neuro Panchkarma

 Proprietor

19. All Staff Side Members of National Council (JCM) (as per list attached).
20. Office of the comptroller & Auditor General of India, 10 Bahadur Shah Zafar Marg, New Delhi.
21. All Offices /Sections/Desk in the Ministry.
22. UTI_ITSL 153/1, First Floor, Old Madras Road , Ulsoor, Bengaluru-560008.
23. Nodal Officer, MCTC, CGHS with a request to upload a copy of OM on CGHS website.
24. CMO I/c AMSD, UMSD ,HMSD,SMSD and CMO MRC.
25. Office Order folder.

Nodal Officer : Pramod Gupta

Designation : Medical Superintendent

Contact No. : 9350277658

Email Id :

sneuropanchkarma@gmail.com