

Clinical Material in Hospital

Name of College/Institute: Marathwada Mitra Mandal's M M College of Physiotherapy, Pune Name of the Parent /attached Hospital: - <u>1</u>. Sahyadari Hospital, <u>2</u>. Sai Shraddha Hospital, <u>3</u>. Orchid Hospital

Sr. No.		Р	articulars	to be ve	rified			Actual Available	Lacuna
a.	Intake C broad sp	ust be a parent / att apacity Indoor & Ou pecialty areas includir ent.: (Refer Sr. No. C	exposure in the	Available					
b.	The stud	The student to patient ratio should be minimum 1:5, the first part being student							
-		d part patient.	s shall be	as fallou					
C.	The desirable breakup of beds shall be as follows: Student Patient Ratio (as per M.S.R., it must be 1:5): 1:5								
	Sr.No.	Specialty	10 to 30 Intake	31 to 40 Intake	41 to 50 Intake	51 to 60 Intake	For 61 to 100 Intake		
	01	General Medicine	30	40	50	60	100		
	02	General Surgery	30	40	50	60	100		
	03	Orthopedics	30	50	50	60	100		
	04	Obst & Gynac	15	20	30	30	60		
	05	Pediatrics	15	20	30	30	60	Available	
	06	Medical ICU	05	05	10	10	15		
	07	Surgical ICU	05	05	10	10	15		
	08	PICU + NICU	05	05	05	10	15		
	09	ICCU + RICU	05	05	05	10	15		
	10	Burns Unit / ICU	05	05	05	10	10		
	11	Emergency	05	05	05	10	10	S-	
		Total	150	200	250	300	500		
d.		Bed Ratio (Undergra		1:5				Available	
e.		Bed Occupancy in %						Available	
f.	 Whether separate Registration room is available at OPD? a. Number of total patients registered in last Year: <u>1,48,262</u> b. Number of New Patients registered on daily average: <u>328</u> c. Number of Old patients registered on daily average: <u>78</u> d. Average Number of patients attending OPD (current year): <u>349</u> e. Whether records of patient registration are well maintained: Yes 							Available	
g.	Clinical Lo	ysiotherapy Departme ad, Total Strength of Ho ysiotherapy Load per S	ospital Bed	s, Outdoo	r Physiot	herapy Lo	bad per specialty,	Available	
h.	Outdoor I M.S.R.)	Physiotherapy Depart	ment Area	s as per	Clinical	Load and	Intake: (as per	Available	
1	Physiotherapy OPD Services (as per M.S.R.): The hospital shall have functional physiotherapy department providing services on outpatient & in-patient department at least for 12 Months prior application & shall maintain required OPD and IPD records for verification.							Available	
•	As per Ce If Infrastr In case of	entral Council Norms/ U ucture is available, ther f "Inadequate", it must l ed Hospitals provide vali	n mark "Ado be mark as	equate" & "Inadequ	do not a	ttach any	documents.	College.	

Verified by The LIC Committee Members

Dean/ Principal Stamp & Signature Marathwada Mitra Mandal's College of Physiotheraphy Pune-411047

Clinical Material in Hospital

Name of College/Institute: <u>Marathwada Mitra Mandal's M M College of Physiotherapy</u>, <u>Pune</u> Name of the Parent /attached Hospital: - <u>1</u>. Sahyadari Hospital, <u>2</u>. Sai Shraddha Hospital, <u>3</u>. Orchid Hospital

Sr. No.		Particulars to be verified							Lacuna
a.	There must be a parent / attached Hospital with minimum 300 beds as per the Intake Capacity Indoor & Outdoor Facility with Physiotherapy exposure in the broad specialty areas including Intensive care to provide practical experience to the student.: (Refer Sr. No. C for Beds as per Intake capacity)							Available Available	
b.	The stud	The student to patient ratio should be minimum 1:5, the first part being studen & second part patient.							
C.	The desirable breakup of beds shall be as follows: Student Patient Ratio (as per M.S.R., it must be 1:5): 1:5								
	Sr.No.	Specialty	10 to 30 Intake	1	41 to 50 Intake	51 to 60 Intake	For 61 to 100		
	01	General Medicine	30	40	50	60	100		
	02	General Surgery	30	40	50	60	100		
	03	Orthopedics	30	50	50	60	100		
	04	Obst & Gynac	15	20	30	30	60		
	05	Pediatrics	15	20	30	30	60	Available	
	06	Medical ICU	05	05	10	10	15		
	07	Surgical ICU	05	05	10	10	15		
	08	PICU + NICU	05	05	05	10	15		
	09	ICCU + RICU	05	05	05	10	15		
	10	Burns Unit / ICU	05	05	05	10	10		
	11	Emergency	05	05	05	10	10		
		Total	150	200	250	300	500		
1.		Bed Ratio (Undergra		1:5				Available	
2,	Average	Bed Occupancy in %	: 59.5%					Available	
f.	 Whether separate Registration room is available at OPD? a. Number of total patients registered in last Year: <u>1,48,262</u> b. Number of New Patients registered on daily average: <u>328</u> c. Number of Old patients registered on daily average: <u>78</u> d. Average Number of patients attending OPD (current year): <u>349</u> e. Whether records of patient registration are well maintained: Yes 						<u>): 349</u> ned: Yes	Available	
	Clinical Loa Indoor Phy	ysiotherapy Departme ad, Total Strength of Ho ysiotherapy Load per S	ospital Bed pecialty, St	s, Outdoo udent: Pa	or Physion atient rat	herapy Lo	oad per specialty,	Available	
	Outdoor Physiotherapy Department Areas as per Clinical Load and Intake: (as per M.S.R.)							Available	
	Physiotherapy OPD Services (as per M.S.R.): The hospital shall have functional physiotherapy department providing services on outpatient & in-patient department at least for 12 Months prior application & shall maintain required OPD and IPD records for verification.						t department at d IPD records for	Available	
• • •	In case of	ntral Council Norms/ U ucture is available, then "Inadequate", it must l d Hospitals provide vali) mark "Ade De mark as	quate" &	do not a	ttach any	documents	College.	

Verified by The LIC Committee Members

PUNE Dean/Principal Stamp & Signaturecipal * 10 Marathwada Mitra Mandal's College of Physiciteraphy

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PASSCO Environmental Solutions Pvt. Ltd.

Unit 2 : Pune Narayani, 34/4, Erandwana, Behind Eisen Pharmaceuticals Pune - 411004 Phone No:+91 -20 -66024765, 25467096 Email Id:helpdesk@passco.in



Unique Registration No.: P2/NH000747



Registration Certificate



Outward No.: P2/2023/003556

Date: 05-Jul-2023

This is to certify that, SAHYADRI HOSPITALS PVT LTD. SAHYADRI SUPER SPECIALITY HOSPITAL NAGAR ROAD, S.NO.185A,199,200 A-B,201, HERMES HERITAGE, PHASE II, SHASTRINAGAR,YERAWADA, PUNE - 411006 is registered with PASSCO Environmental Solutions Pvt. Ltd., Pune for Management of Bio Medical Waste in accordance with, the provision of Bio Medical Waste Management Rules, 2016, as amended and in compliance with the provisions of CPCB guidelines.

1. Authorized Person of HCE (Name and Designation)

- 2. Bombay Nursing Home Act Registration Details
 - a. BNH Registration Number
 - b. BNH Issue Date
 - c. Total Number of Beds
 - d. BNH Validity(Form 'C')
- 3. Common Treatment Facility Registration Details
 - a. Date of Registration
 - b. No. of Beds Registered
 - c. Registration Validity
- 4. Renewal of CTF Membership(if applicable)
 - a. Renewal Date
 - b. No. of Beds Registered

26-Mar-2013 243 31-Mar-2024

Not Available

Not Available

Not Available

Not Available

31-Mar-2024 243

5. MPCB Consent (Establish/ 1st Operate/Renewal) Details

- a. Consent/ CCA Number
- b. Issue Date
- c. Validity up to



00000147107/CE/2301002215 30-Jan-2023 29-Jan-2028

DR. YASHWANTH SHIVANNA

CHIEF OF MEDICAL SERVICES



Mr. Satish Satarkar Authorised Signatory

Note : HCE shall display copy of Registration Certificate at front Desk and Temporary BMW storage area.



Marathwada Mitra Mandal's College of Physiotheraphy Pune-411047



Fri, Jan 31, 2025 at 4:43 PM

Request for Hospital Details and Patient Statistics

Lata More <academics.nagarroad@sahyadrihospitals.com>

Reply-To: Lata More <academics.nagarroad@sahyadrihospitals.com>

To: Ahmed S <principal.mmcopt@gmail.com>

Cc: "Dr. Bharat Singh" <cms.nagarroad@sahyadrihospitals.com>, Anita Gune <academics@sahyadrihospitals.com>, Physiotherapy Nagar Road <physio.ngr@sahyadrihospitals.com>

Sir,

With reference to the trail mail, I filled required data in the following sheet and attached required documents.

Sr.	Details Required	
01	OPD Patients Statistic (1 st January 2024 to 31 st December 2024)	124894
02	IPD Patients Statistic (1 st January 2024 to 31 st December 2024)	13726
03	Physiotherapy OPD Patients Statistic (1 st January 2024 to 31 st December 2024)	7056
04	Annual bed Occupancy in %	80-85%
05	ICCU bed Strength	6
06	Laboratories available (Path Lab, Haematology Lab, Blood Bank etc)	Available
07	List of Equipment's	Attached
08	List of Paramedical Staff	Attached
09	Total built up area of Hospital	130018.4 Sqft
10	Bio Medical Waste certificate of Hospital	Attached

Thanks & Regards, Ms. Lata More Academic Coordinator Sahyadri Super Speciality Hospital, Nagar Road, Pune. Sr. No. 185A, Shastri Nagar, Near MSEB Office, Yerwada, Pune 411006 Phone- 020-67271111 / 8956943609

From: "Ahmed S" <principal.mmcopt@gmail.com> To: "Anita Gune" <academics@sahyadrihospitals.com>, "Dr.Yashvanth Shivanna" <academics.nagarroad@ sahyadrihospitals.com> Sent: Thursday, January 30, 2025 1:01:55 PM Subject: Request for Hospital Details and Patient Statistics

[External email. Inspect before opening.] Respected Sir/Madam,

[Quoted text hidden]

[Quoted text hidden]

3 attachments



Principal Marathwada Mitra Mandal's College of Physiotheraphy Pune-411047





SR.NO	DETAILS REQUIRED	REMARK
1	OPD PATIENT STATISTICS FROM 1ST JAN TO 31ST DEC 2024	2573
2	IPD PATIENT STATISTICS FROM 1ST JAN TO 31ST DEC 2024	2052
3	PHYSIOTHERAPY OPD APPOINTMENT PATIENT STATISTICS FROM 1ST JAN TO 31ST DEC 2024	793
4	ANNUAL BED OCCUPANCY IN %	39%
5	ICCU BED STRENGTH	0
6	LABORATORY AVAILABILITY (PATH LAB, HAEMATOLOGYLAB, BLOOD BANK ETC	YES AVAILABL
7	LIST OF EQUIPMENT	ATTECHED
8	LIST OF PARAMEDICAL STAFF	5
9	TOTAL BUILT UP AREA OF HOSPITAL	1192.14 SQUARE MT
10	BMW CERTIFICATE OF HOSPITAL	ATTECHED

Director Dr.Vikas Gaikwad Sai Shradha Health Care Center



Sr. No. 282/3/3, Silver Mist Society, Dhanori Jakat naka, Porwal Road, Lohagaon, Pune - 411047
 saishradhahealthcare@gmail.com (9 +91 7741 9737 92)



EMS-ISO-14001:2015

Rcg. No. R191/8395

PASSCO Environmental Solutions Pvt. Ltd.

Unit 2 : Pune Narayani, 34/4, Erandwana, Behind Eisen Pharmaceuticals Pune - 411004 Phone No:+91 -20 -66024765, 25467096 Email Id:helpdesk@passco.in



Unique Registration No.: P2/NH001040



Provisional Registration Certificate



Outward No.: P2/2024/001008

Date: 19-Apr-2024

This is to certify that, SAI SHRADHA HEALTH CARE CENTRE, SR.NO 282/3/40,, SILVAR MIST HOUSING SOC,, PORWAL ROAD,LOHGAON,, PUNE - 411014 is registered with PASSCO Environmental Solutions Pvt. Ltd., Pune for Management of Bio Medical Waste in accordance with, the provision of Bio Medical Waste Management Rules, 2016, as amended and in compliance with the provisions of CPCB guidelines.

1. Authorized Person of HCE (Name and Designation)	DR.GAIKWAD VIKAS JANARDAN
2. Bombay Nursing Home Act Registration Details	
a. BNH Registration Number	Not Available
b. BNH Issue Date	Not Available
c. Total Number of Beds	Not Available
d. BNH Validity(Form 'C')	Not Available
3. Common Treatment Facility Registration Details	
a. Date of Registration	02-Jun-2021
b. No. of Beds Registered	53
c. Registration Validity	31-Mar-2025
4. Renewal of CTF Membership(if applicable)	
a. Renewal Date	31-Mar-2025
b. No. of Beds Registered	53
5. MPCB Consent (Establish/ 1 st Operate/Renewal) Do	etails
a, Consent/ CCA Number	Not Available
b, Issue Date	Not Available
d. Validity up to	Not Available
PUNE A11 004.	
WENTAL SOLUT	the and
PUNE	5/
A11 004.).	
3	Mr. Satish Satarkar
33840 *	Authorised Signatory
	BNH Act
Note : MPCB approved Registration Certificate will Registration and MPCB Consent	I be issued only after receiving valid det the of BNH Act
O PUNE	
12/ 13/	Principal Principal
	Marathwada Mitra Mandal's
	IL AND OT MILLOIDAN
	College Ort 411047





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ADMINISTRATIVE AND SUPPORT STAFF

S.NO.	STAFF NAME	QUALIFICATION	DESIGNATION
1	DR.VIKAS GAIKWAD	BAMS	DIRECTOR/HRM HEAD
2	DR DNYANESHWAR KAMATKAR	BHMS	DIRECTOR/ OPERATION MAN POWER
3	DR SANJAY GABHALE	BHMS	DIRECTOR/OPERATION PHARMACY
4	DR AMBAJI SHENDGE	BHMS	DIRECTOR/OPERATION MAN POWER
5	DR KAPIL PATWARDHAN	MBBS, DNB MED	DIRECTOR/OPERATON (MEDICAL)
6	DR SUNIL NIKAM	MBBS D ORTHO	DIRECTOR
7	DR PRAJKTA DANGE	BAMS	NABH CO ORDINATOR
8	ASHWINI MANE	MSW	HRM EXECUTIVE/RECEPTIONIST
9	SAKSHI RAUT	МСОМ	MRD/RECEPTIONIST
10	MR SWAPNIL TIKHE	PUBLIC RELATION OFFICER	HSC+ DIP IN RAD
11	MR VIKAS SAKHARE	FMS HEAD .	HSC
12	SAJIDA BANO	MSC NURSING	ADMIN CUM MATRON
13	MS SIYA SATOSKAR	GRADUATION	INSURANCE HEAD
14	MR VISHAL LANDAGE	SSC	AMBULANCE
15	MR AMIT HAJJE	GNM	NURSING SUPERVISOR
16	LALIT THAPA	SSC	SECURITY HEAD
17	LALI RANGA DAMAI	SSC	SECURITY HEAD



Principal

Marathwada Mitra Mandal's College of Physiotheraphy Pune-411047

🐵 Sr. No. 282/3/3, Silver Mist Society, Dhanori Jakat naka, Porwal Road, Lohagaon, Pune - 411047 Saishradhahealthcare@gmail.com (9+917741973792

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MINA	MEDICAL STAFF LIST-	QUALIFICATION	DESIGNATION
S.NO	STAFF NAME	QUALITY ATTAC	
	MRS RUMA	DPHARMA	PHARMACIST
l		B PHARMA	PHARMACIST
2	NILIMA JAGDALE		PHARMACIST
3	OM KALE	D PHARMA	
4	AMIT	D PHARMA	PHARMACIST
5	PRAVIN DHULDHULE	DRADIOLOGY	X RAY TECHNICIAN
6	DIGVIJAY PATIL	DRADIOLOGY	XRAY TECHNICIAN
7	DR. PRACHI DUBAL	MBBS MD	PATHOLOGIST
8	PRATHMESH INGLE	DMLT	LAB TECHNICIAN
	MISS ASHA PAWAR	DMLT	LAB TECHNICIAN
9		DMLT	LAB TECHNICIAN
10	MR VINOD	DANITY	
11	MS SMITA	DMET	LAB TECHNICIAN

Sr. No. 282/3/3, Silver Mist Society, Dhanori Jakat-naka, Perwai Road, Lohagaon, Pune - 41047

😑 saishradhahealthcaro@gmall.com 🕓 +917741973792



Principal Marathwada Mitra Mandal's College of Physiotheraphy Pune-411047



NURSING STAFF NAME-

S.NO	NURSING STAFF NAME	QUALIFICATION	DESIGNATION
1	AMIT HAJJE	GNM	NUSING SUPERVISOR
2	QUEENY DSOUZA	GNM	ER NURSING INCHARGE
3	NETAJI KADAM	GNM	ICU NURSING INCHARGE
4	SHEKHAR PATIL	GNM	ICU STAFF NURSE
5	MOHIT KADAM	GNM	ICU NURSE
6	MEGHARANI PAWAR	GNM	WARD INCHARGE
7	POONAM SALUNKE	GNM	STAFF NURSE
8	VISHAL	BSC NURSING	STAFF NURSE
9	VIKAS	GNM	STAFF NURSE
10	PRANAV	BSC NURSING	STAFF NURSE
11	SAKSHI YADAV	BSC NURSING	STAFF NURSE
12	ASHWANI TELANG	GNM	STAFF NURSE
13	SNEHAL		STAFF NURSE
14	SHWETA	BSC NURSING	STAFF NURSE
15	VANDANA PANCHAL	GNM	STAFF NURSE
16	ROHINEE WARULKAR	BSC NURSING	ICU STAFF NURSE

Sr. No. 282/3/3, Silver Mist Society, Dhanori Jakat naka, Porwal Road, Lohagaon, Pune - 411047
 saishradhahealthcare@gmail.com (9 +91 7741 9737 92)

Principal Marathwada Mitra Mandal's College of Physiotheraphy Pune-411047



RESIDENT MEDICAL OFFICER -

S.NO.	MEDICAL OFFICER'S NAME	QUALIFICATION	DESIGNATION
1.	DR SONAWANE SUHAS	MBBS	ICU DEP/ INCHARGE
2.	DR SHASHANK TUKARAM	MBBS	ICU DEP/ INCHARGE
3.	DR MUGDHA MORE	MBBS	ER DEP/ INCHARGE
4.	DR SARVAGOD MAULY VIJAY	MBBS	ER DEP/INCHARGE
5.	DR PRIYANKA BHOSALE	BAMS MS (OBG)	OBGY DEPT/ FACULTIY INCHARGE
6.	DR PRAJAKTA DANGE	BAMS	NABH CO- ORDINATOR/ CLINICAL ASSISSTANT
7.	DR PRANJAL KATE	BAMS	CLINICAL ASSISSTANT
8.	DR RASIKA KHANDVE	BHMS	CLINICAL ASSISSTANT
9.	DR ASHWINI BHALCHIM	BHMS -	CLINICAL ASSISSTANT
10.	DR VIJAY MORE	BAMS	CLINICAL ASSISSTANT
11.	DR VAISHNAWI PATIL	BAMS	CLINICAL ASSISSTANT



Principal Marathwada Mitra Mandal's College of Physiotheraphy Pune-411047

Sr. No. 282/3/3, Silver Mist Society, Dhanori Jakat naka, Porwal Road, Lohagaon, Pune - 411047
 saishradhahealthcare@gmail.com (9 +91 7741 9737 92)



OR CONSULTANT FULL TIME/PART TIME/ VISITING CONSULTANT

.N).		QUALIFICATI ON	POST-GRADUATION/ DEGREE/ SPECIALIZATION(SUBJECT/DIS CIPLINE)	TYPES OF SERVICES PROVIDED BY THE CONSULTANT
	DR ASHWINKUMA	MBBS	DMRE(RADIOLOGIST)	VISING CONSULTANT
-	R KONDE DR PRASHANT	MBBS	MS NEURO (NEURO SERGEON)	VISING CONSULTANT
	KHANDELWAL DR SHANKAR	MBBS	MD EH ND (ENT)	VISING CONSULTANT
	SHINDE DR SHALESH	MBBS	DNB ONCO SURGEY	VISING CONSULTANT
	NAIK DR VIKRANT	MBBS	DNB (CARDIOLOGIST)	VISING CONSULTANT
5.	DR RANA PATU.	MBBS	MD (ANEASTHESIOLOGIST)	VISING CONSULTANT
7.	DR AMOL MULEY	MBBS	DNB GEN. SURGEON	VISING CONSULTANT
8.	DR RAKESH	MBBS	DNB NEUROLOGIST	VISING CONSULTANT
9.	SHINDE DR SANAJAY	MBBS	DNB NEUROLOGIST	VISING CONSULTANT
10.		MBBS	DNB GASTROENTROLOGY	VISING CONSULTANT
11.	SAHIL DR RAJAT AGNIHOTRI	MBBS	MD RADIOLOGIST	VISING CONSULTANT
12	. DR PARUMA S GAIKWAD	MBBS	DIPL. IN ANEASTHESIOLOGIST	VISING CONSULTANT
13		MBBS	MBBS DNB (MEDICIN)	VISING CONSULTANT
14		MBBS	MBBS DNB (MEDICIN)	VISING CONSULTANT
15		MBBS	DIPLOMA IN ORTHO (ORTHOP	CONSULTANT
16	and the second sec	MBBS	MD DGO ICOG (GYNEAC)	VISING CONSULTANT
17		MBBS	DCH DNB (PEADIATICIAN)	VISING CONSULTANT
1	8. DR AJITKUMA THOMBARE	R MBBS	MCH NEUROSERGOEN	VISING CONSULTAN
1	9. DR KALPESH SASWADE	MBBS	MS DNB (UROLOGIST)	VISING CONSULTAN

Sr. No. 282/3/3, Silver Mist Society, Dhanori Jakat naka, Porwal Road, Lohagaon, Pune - 411047
 saishradhahealthcare@gmail.com () +91 7741 9737 92



Principal Marathwada Mitra Mandal's College of Physiotheraphy Pune-411047 1

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Sr. no	Hospital Information	Hospital Data
1	OPD	20795
2	IPD	2208
3	Physiotherapy OPD	147
4	ICU Bed Strenght	10
5	Laboratories Available	Pathology Lab ,Haematology

A Unit of ORCHID CURE & CARE PVT. LTD.

L-Square, Porwal Road, Off. Dhanori Jakat Naka, Lohgaon, Pune - 47

⊠orchidhospitalpune@gmail.com @www.orchidhospitalpune.in

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Speciality Hospital

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महाराष्ट्र MAHARASHTRA

्रताक्षा ज्यांनी मट्राक हारेरी केला त्याना त्या व कारणात्माक

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दस्ताचा प्रकार दस्त नॉदणी करणार आहेत का ? होय/नाही.	वरिष्ठ कोपागार आधिकाली
मिळकतीचे वर्णम	पुका
मुद्रांक विकत घेणाऱ्याचे नांव ४१२१६ पार्ग (रे. भ) भेडळ बता डिक्ता जी रिरियाना पुरे	17 JAN 2024
दुरान्या पक्षकाराचे नांव	
अभागी सुहास यनकर / А	प्रथम मुद्रांक लिपीक कोषागार पुण करिता =
परयाना क. २२०१९१७	

THIS MEMORANDUM OF UNDERSTANDING

is entered into by and between

Sahyadri Hospitals Pvt. Ltd. a company registered under the Companies Act, 1956 having its registered office at S.No.89 &90, Plot No. 54, Lokmanya Colony Kothrud, Pune – 411038 through



Super Speciality Hospital Nagar Road located at S.No.185A,199, 200A-B,201, Yerwada, Nagar Road, Pune 411006through Mr.Abrarali Dalalit's Director & CEO (hereinafter referred to as "FIRST Party")

AND

Marathwada Mitra Mandal, Pune, which is a Trust registered under the provisions of the Societies Registration Act, 1860, having its registered office at 202 / A, Deccan Gymkhana, Pune - 411 004 (hereinafter referred to as "SECOND Party") represented by its Executive President, Prin. Bhausaheb Govindrao Jadhav.

NOW, THIS MEMORANDUM OF UNDERSTANDING WITNESSETH AS UNDER:

- 1) Party of First Part declares that Sahyadri Super Speciality Hospital Nagar Road, multispeciality Hospital providing general Surgery, Ortho, ICU/ICCU, Surgical, Obst & Gyne., Psychiatric, Radiology, Neurology, OPD, ENT, Ophthalmology, Paediatric, Dermatology Plastic Surgery, Cardio, Respiratory Medicine, Haematology.
- 2) Party of First Part agrees to provide preceptors required to train the Physiotherapy Students.
- 3) The Prospective students will be allowed to undergo training in the specially departments like general Surgery, Ortho, ICU/ICCU, Surgical, Obst & Gyne., Psychiatric, Radiology, Neurology, OPD, ENT, Ophthalmology, Paediatric, Dermatology Plastic Surgery, Cardio, Respiratory Medicine, Haematology.
- 4) Party of Second Part will provide the academic staff and necessary infrastructure for Physiotherapy course per the MUHS and DMER norms and takes the overall responsibility for smooth conduct of the program.
- 5) This MOU is to be in effect at least for five years for the training of students from the tie of its endorsement by both the parties. This MOU will be renewed every year-at the discretion of Party of First Part .





College of Physiotheraphy Pune-411047

Exe. President Marathwada Mitra Mandal Deccari Gymkhana, Pune-4



6) The official representing Prin. Bhausaheb Govindrao Jadhav , Executive President , of Marathwada Mitra Mandal, 202/A, Deccan Gymkhana, Pune 411 004 and Mr. Abrarali Dalal, Director & CEO of Sahyadri Hospitals Pvt. Ltd. Super Speciality Hospital are signing this MEMORANDUM OF UNDERSTANDING to achieve the beneficial objectives of physiotherapy Programs.

IN WITNESS WHEREOF this MEMORANDUM OF UNDERSTANDING is executed on this 18th day of January, 2024 at Pune.

SP (AD) SHPL UNE FOR FIRST PARTY

Sahyadri Hospitals Pvt. Ltd. Mr. Abrarali Dalal Director & CEO

da Mil æ Punk

FOR SECOND PARTY Marathwada Mitra Mandal, Pune -4 Prin. Bhausaheb Govindrao Jadhav **Executive President**

WITNESSES Signature -1. Name Orecan Gymichang Address 202 Pune. 41

2. Name Anita Gune Senior Manager - Academics Sahyadis Hespitals Put U.D.

Marathwada Mitra Mandal's Principal College of Physiotheraphy Pune-411047

Signature -



3TTOTIO (2028 A 2020) 319169 आहोग्य/अन्न व परवाना मुमादामु. ४७६ (१०० पानी १० पुस पुणे महानगरपालिका 0F PUNE MUNICIPAL CORPORATION 1 ्रसन १९४९ च्या दि बॉम्बे नर्सिंग होम्स रजिस्टेशन ॲक्टच्या कलम ५ अन्वये दिलेले ford रजिस्ट्रेशन सर्टिफिकेट Certificate of Registration under section 5 of the Bombay Nursing Homes **Registration Act**, 1949 1966 (नियम ५ अन्वये) (Under Rule 5) 3547 क्रमांक No. : दि. बॉम्बे नर्सिंग होम्स रजिस्ट्रेशन ॲक्ट, १९४९ अन्वये श्री. / श्रीमती 🐑 🖅 SIMILLO -aruti sur arunne -HEUTE) यांचे FTRUZENCA UT.M येथील नर्सिंग होम / मेंटर्निटी होम रजिस्टर केले TIZNI CM 0101< असून सदरचे नर्सिंग होम व मॅटर्निटी होम चालविण्यास परवाना देण्यात येत आहे. This is to certify that Shri. / Shrimati 921 Th 20-10 1201 012 has been registered under the Bombay Nursing Homes Registration Act, 1949 in respect of situated at. and has been authorised to carry on the said Nursing Home. रजिस्ट्रेशन क्र. : LLLP-2023-00068 प्रस्तीसाठी कॉटस Registration No. : Maternity Cots 91812028 रजिस्ट्रेशन दि. : इतर रुणांसाठी कॉटस Date of Registration : 291312020 Other Nursing Patients Cots १९ग दोमरो नेपाकीस ठिकाण Place :] as yap (in) सर्टिफिकेट दिल्याँचा दिनांक Date of issue of Certificate सदरचे सर्टिफिकेट दिनांक ३१ मार्च 2020 पर्यंत कार्यवाहीत राहील. This Certificate shall be valid up to 31 st March SĨ. 9912 आरोज्य अधिकारी (डो सहायके त, मार आरोग्यट्राधिवन्सिः प्रणे सत्मन्द्रपुर्डिन्मा. Medical Officer of Health, Pune Municipal Corporation. गर्यालिका. Asstt. Media a Corporation. HEIGHTUNE stathwada A Principal Marathwada Mitra Mandal's Exe. Presiden. College of Physiotheraphy Marathwada Mitra Mandal Deccan Gymkhana, Pune-4 Puné-411047

MEMORANDUM OF UNDERSTANDING

Between

Dr.Vikas Janardhan Gaikwad, Director

M/s. Sai Shraddha Health Care Centre

&

Ms.Rupal Sancheti,

Director, Sr. Healyos Health care LLP

No. - 282/3, Sr, 3, Sr No 282 Porwal Road Silver Meet Society,

Porwal Road, Lohegaon, Pune - 411047

PARTY OF THE FIRST PART

Dr.Vikas Gaikwad

Sai Shradha Health Care Center

AND

Prin. Bhausaheb Govidrao Jadhav

Executive President

Marathwada Mitra Mandal, Pune

202/A, Deccan Gymkhana, Pune- 411004

PARTY OF THE SECOND PART

Principal Marathwada Mitra Mandal's College of Physiotheraphy Pune-411047



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पाँच सो रूपये RS. 500 INDIA NON JUDICIAL
HEIRING MAHARASHTRA O 2023 O CE 013986 Image: Stand Sta
THIS MEMORANDUM OF UNDERSTANDING
is entered into by and between
M/s. Sai Shraddha Health Care Centre , No 282/3, Sr, 3, Porwal Road Silver Meet Society, Porwal Road, Lohegaon, Pune - 411047 through Dr.Vikas Janardhan Gaikwad its Director and Ms.Rupal Dr.Vikas Gaikwad Sai Shradha Health Care Center Marathwada Mitra Mandai Deccan Gymkhana, Pune-4 Principal Mitra Mandai's Marathwada Mitra Mandai's
Principal Principal Marathwada Mitra Mandal's Onliege of Physiotheraphy Pune - 411047

Sancheti, its Sr.Healyos (hereinafter referred o as "FIRST Party") having its registered office at No. - 282/3, Sr, 3, Porwal Road Silver Mist Society, Porwal Road, Lohegaon, Pune - 411047 an Establishment, which is registered under the provisions of the Bombay Nursing Home Act 1949 and Under Shop Act 1948.

AND

Marathwada Mitra Mandal, Pune, which is a Trust registered under the provisions of the Societies Registration Act, 1860, having its registered office at 202 / A, Deccan Gymkhana, Pune – 411 004 (hereinafter referred to as " SECOND Party ") represented by its Executive President, Shri. Bhausaheb Govindrao Jadhav.

NOW, THIS MEMORANDUM OF UNDERSTANDING WITNESSETH AS UNDER:

- Party One declares that *M/s.* Sai Shraddha Health Care Centre Multi speciality Hospital providing general Surgery, Ortho, ICU/ICCU, Surgical, Obst & Gyne., Psychiatric, Radiology, Neurology, OPD, ENT, Ophthalology, Paediatric, Dermatology Plastic Surgery, Cardio, Respiratory Medicine, Hematology.
- 2) Party one agree to provide preceptors required to train the Physiotherapy Students.
- 3) The Prospective students will be allowed to undergo training in the specially departments like. general Surgery, Ortho, ICU/ICCU, Surgical, Obst & Gyne., Psychiatric, Radiology, Neurology, OPD, ENT, Ophthalmology, Paediatric, Dermatology Plastic Surgery, Cardio, Respiratory Medicine, Haematology.
- Party Two will provide the academic staff and necessary infrastructure for Physiotherapy course per the MUHS and DMER norms and takes the overall responsibility for smooth conduct of the program.
- 5) This agreement is to be in effect at least for five years for the training of students from the tie of its endorsement by both the parties. This Agreement will be renewed every year-at the discretion of Party One.
- 6) The official representing Prin. Bhausaheb Govindrao Jadhav , Executive President , of Marathwada Mitra Mandal, 202/A, Deccan Gymkhana, Pune 411 004 and Dr.Vikas Janardhan Gaikwad , Director & Mr.Rupal Sancheti, Healyos , *M/s*. Sai Shraddha Health Care Centre , No. - 282/3, Sr, 3, Porwal Road Silver Mist Society, Porwal Road, Lohegaon, Pune -411047, Multispecialty Hospital, Pune are signing this MEMORANDUM OF UNDERSTANDING to achieve the beneficial objectives of physiotherapy Programs.

ada M Dr.Vikas Gaikwad Sai Shradha Health Car Vanc Exe. President Marathwada Mitra Mandal Deccan Gymkhana, Pune-4 Narathwada Mitra Mandal's Principal OFE College of Physiotheraphy PUNE Pune-411047

IN WITNESS WHEREOF this MEMORANDUM OF UNDERSTANDING is executed on this 1st

day of December , 2023 at Pune.

LCBP 2021-00137

FOR FIRST PARTY

Dr.Vikas Janardhan Gaikwad

Director

Rupalarchat

FOR FIRST PARTY

Ms.Rupal Sancheti

Director,

Prin. Bhausaheb Govindrao Jadhav **Executive President** Marathwada Mitra Mandal, Pune -4

M/s. Sai Shraddha Health Care Sr. Healyos Healthcare LLP Centre Pune 47 Dr.Vikas Gaikwad

Sai Shradha Health Care Center

WITNESSES

1. Name Kadam S.N. Address 2021A Deccab Gymichang Aune-4

Signature

lenna

Signature

2. Name Shahzard. Handday Pride Regency / 2/202, Vinan Nagar, Fine-14.

Viarathwada Mitra Mandalis Viarathwada Mitra Mandalis Viarathwada Physiotheraphy College pune-411047



FOR SECOND PARTY

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ohrentioskol 2022724 812888 आरोग्य/अन्न व परवान ममादाम्. ४७८ (१०० पानी ३ पुस्तके) ४-२१ Op पुणे महानगरपालिका 3230 PUNE MUNICIPAL CORPORATION f 7代75 सेन १९४९ च्या दि बॉम्बे नर्सिंग होम्स रजिस्ट्रेशन ॲक्टच्या कलम ५ अन्वये दिलेले ECTI रजिस्टेशन सर्टिफिकेट 9946 Certificate of Registration under section 5 of the Bombay Nursing Homes **Registration Act**, 1949 . 1950 (नियम ५ अन्वये) (Under Rule 5) क्रमांक No. : दि. बॉम्बे नर्सिंग होम्स रजिस्ट्रेशन ॲक्ट, १९४९ अन्वये श्री. / श्रीमती विकारक जनादन यांचे स्थाई प्रदेश हे त्या के उसर येथील नर्सिंग होम / मॅटर्निटी होम रजिस्टर केले असून सदरचे नर्सिंग होम व मॅटर्निटी होम चालविण्यार परवाना देण्यात येत आहे. This is to certify that Shri. / Shrimati Kerer 262/3/8 Renaek Hike EIRAI ANAILLE has been registered under the Bombay Nursing Homes Registration Act, 1949 in respect of UILOIDI K13 situated at CALERIC UN. SE and has been authorised to carry on the said Nursing Home. रजिस्ट्रेशन क. LCBP-2021 - 00137 प्रसूतीसाठी 06 कॉट Registration No. : 17 . 05/05/2021 Maternity Cot: रजिस्ट्रेशन दि. : 17, 09,08, 2022 इतर रुग्णांसाठी XX कॉट Other Nursing Patients Cots 39,03,2024 10001 ठिकाण Place : ast सर्टिफिकेट दिल्यान दिनाक Date of issue of Certificate सदरचे सर्टिफिकेट दिनांक ३१ मार्च 2024 पर्यंत कार्यवाहीत राहील. This Certificate shall be valid up to 31 st March Dr.Vikas Gaikwad (SI. HI0 Sai Shradha Health Care Core Suratha Health Care Core Suratha Health Care Core Suratha Harding and The Sai Shradha Health Care Core Suratha Harding and The Sai Shradha Health Care Core Suratha Harding and the suratha Health Care Core Suratha Hea Asstt. Medical Officer of Health, Pune Municipal Corporation. Medical Offiger 2 Health, Pune Municipal Corporation arathwada Mitra Mandalis पुणे महानगरपालिका allege of Physiotheraphy

MEMORANDUM OF UNDERSTANDING

Between

Miss. Reshma B. Kadam

Administrative Officer

Orchid Speciality Hospital

B-Wing , L-Square, Porwal Road, Near Dhanori Jakat Naka, Lohagaon,

Pune - 411 047

PARTY OF THE FIRST PART

AND

Prin. Bhausaheb Govindrao Jadhav

Executive President

Marathwada Mitra Mandal, Pune

202/A, Deccan Gymkhana, Pune- 411004

PARTY OF THE SECOND PART











Orchid Speciality Hospital through Miss. Reshma B. Kadam it's Administrative Officer (hereinafter referred to as "FIRST Party") having its registered office at B-Wing , L-Square, Porwal Road, Near Dhanori Jakat Naka, Lohagaon, Pune - 411047 an Establishment, which is registered under the provisions of the Bombay Nursing Home Act 1949 and Under Shop Act 1948.

AND

Marathwada Mitra Mandal, Pune, which is a Trust registered under the provisions of the Societies Registration Act, 1860, having its registered office at 202 / A, Deccan Gymkhana, Pune - 411 004 (hereinafter referred to as " SECOND Party ") represented by its Executive President, Prin. Bhausaheb Govindrao Jadhav.

NOW, THIS MEMORANDUM OF UNDERSTANDING WITNESSETH AS UNDER:

- 1) Party One declares that Orchid Speciality Hospital, multi speciality Hospital providing general Surgery, Ortho, ICU/ICCU, Surgical, Obst & Gyne., Psychiatric, Radiology, Neurology, OPD, ENT, Ophthalology, Paediatric, Dermatology Plastic Surgery, Cardio, Respiratory Medicine, Hematology.
- 2) Party one agree to provide preceptors required to train the Physiotherapy Students.
- 3) The Prospective students will be allowed to undergo training in the specially departments like.general Surgery, Ortho, ICU/ICCU, Surgical, Obst & Gyne., Psychiatric, Radiology, Neurology, OPD, ENT, Ophthalmology, Paediatric, Dermatology Plastic Surgery, Cardio, Respiratory Medicine, Haematology.
- 4) Party Two will provide the academic staff and necessary infrastructure for Physiotherapy course per the MUHS and DMER norms and takes the overall responsibility for smooth conduct of the program.
- 5) This agreement is to be in effect at least for five years for the training of students from the tie of its endorsement by both the parties. This Agreement will be renewed every year-at the discretion of Party One.

Here of Physiotheraphy

Miss, Reshma B, Kadam 1200 Administrative Officer **Orchid Speciality Hospital**

CIALIT

Reg.No.

CBP

2019-00058

PUNE

Exe. President Marathwada Mitra Mandal Deccan Gymkhana, Pune-4 Marathwada Mitra Mandal's



6) The official representing Prin. Bhausaheb Govindrao Jadhav, Executive President, of Marathwada Mitra Mandal, 202/A, Deccan Gymkhana, Pune 411 004 and Miss. Reshma B. Kadam, Administrative Officer of Orchid Speciality Hospital are signing this MEMORANDUM OF UNDERSTANDING to achieve the beneficial objectives of physiotherapy Programs.

IN WITNESS WHEREOF this MEMORANDUM OF UNDERSTANDING is executed on this 30th day of October, 2023 at Pune.

Administrative Officer Orchid Speciality Hospital

> FOR FIRST PARTY Miss. Reshma B. Kadam Administrative Officer Orchid Speciality Hospital



Exe. President Marathwada Mitra Mandal Deccan Gymkhana, Pune-4

FOR SECOND PARTY

Prin. Bhausaheb Govindrao Jadhav Executive President

Marathwada Mitra Mandal, Pune -4

WITNESSES

CIALITI

Reg.No.

2019-00058

PUNE

Name (adam SN. 1. Signature -Address 2021 eccab Gumichang Une- 411004 ayan Signature -Name -----2. hospita orchic Squary Adv JIKO BabasaheD Ingawale Pemple Nilakh Pune Regd. No. 15924 Exu, Dt NOTARIAL NOTARIAL NOTARIAL NOTARIAL NOTARIAL Aarathwada Mitra Mandai by like Sebasensti ingewale TARY GOVERNMENT OF WAY PA MA 34145

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3/2089

मुमादामु. १९१२ (१०० पानी ३० पुस्तके) १२-०९ आरोग्य/अन्न परवाना पुणे महानगरपालिका PUNE MUNICIPAL CORPORATION सन १९४९ च्या दि बॉम्बे नर्सिंग होम्स रजिस्ट्रेशन ॲक्टच्या कलम ५ अन्वये दिलेले रजिस्ट्रेशन सर्टिफिकेट Certificate of Registration under Section 5 of the Bombay Nursing Homes Registration Act, 1949 (नियम ५ अन्वये) (Under Rule 5) क्रमांक No. : NO 2731 येथील नर्सिंग होम / मॅटर्निटी होम रजिस्टर केले असून सदरचे नर्सिंग होम व मॅटर्निटी होम चालविण्यास परवाना देण्यात येत आहे. This is to certify that Shri / Shrimati an - 1901 (104- 400314, WKAIN RIS, ENALS 50010 has been registered under the Bombay Nursing Homes Registration Act, 1949 in respect of 5100211510 CG, situated at CHEDING, YOI- KG and has been authorised to carry on the said Nursing Home. रजिस्ट्रेशन क. LCBP-2019-00058 प्रसूतीसाटी Registration No. 08/02/19 01 कॉटस् Maternity रजिस्ट्रेशन दि. : 3,09,08.29 इतर रुग्णांसाठी Date of Registration 39,03,28 Other Nursing Patients ठिकाण Place : 401 Cots 80 कॉटस Cots (1901 318 - 11 Call 2340) सर्टिफिकेट दिल्याचा दिनांक Date of issue of Certificate : 39/03/29 सदरचे सर्टिफिकेट दिनांक ३१ मार्च <u>२०२४</u> पर्यंत कार्यवाहीत राहील. This Certificate shall be valid up to 31st March 202 आरोग्यप्रमुख, पु Medical Officer of Health, Pune Municipal Corporation. आरोज्य आधानगरी ्र आरोब्स अध्यित्री पूर्णे महाननत्वालिका पुणे महानगरपालिका Narathwada Mitra Mandal's College of Physiotheraphy