FORM B

(Rules 6(2), 6 (5) and 8(2))

CERTIFICATE OF REGISTRATION

Original / ~~Duplicate for Display~~ / ~~Office Copy~~

1. In exercise of the powers conferred under Section 19(1) of the Pre-natal Diagnostic Techniques(Regulation and Prevention of Misuse)Act,1994(57 of 1994), the **District Appropriate Authority (West)** hereby grants registration to the **~~Genetic Counseling Centre/Genetic Laboratory/Genetic Clinic~~/Ultrasound Clinic/Imaging Centre** named below for purposes of carrying out **~~Genetic Counseling/Pre-natal Diagnostic Procedures/Pre-natal Diagnostic Tests~~/Ultrasonography** under the aforesaid Act for a period of five years ending on **31/01/2030**

2. This registration is granted subject to the aforesaid Act and rules framed there under and any contravention thereof shall result in suspension or cancellation of this certificate of registration before the expiry of the said period of five years apart from prosecution.

A. Name and address of the **~~Genetic Counseling Centre/Genetic Laboratory/Genetic Clinic~~ /Ultrasound Clinic/ Imaging Centre**

NATIONAL MRI, CT SCAN & DIAGNOSTIC CENTRE
(A UNIT OF SHREE HARI DIAGNOSTIC PVT. LTD.)
7, ARIHANT NAGAR, OPP. METRO PILLAR NO.-150, MAIN ROHTAK ROAD, WEST PUNJABI BAGH, NEW DELHI-110026

Name of the Applicant / Owner : DR. N.K. SHARMA

B. **Pre-natal diagnostic procedures**

Non Invasive – (i) Ultrasound **Yes**

Invasive–(i) Amniocentesis **No** (ii) Chorionic Villi Biopsy **NO** (iii) Foetoscopy **NO**

(iv) Foetal skin or organ biopsy **No** (v) Cordocentesis **No** (vi) Any other (specify)

C. **Pre-natal diagnostic tests**

(i) Chromosomal studies **No** (ii) Biochemical studies **No** (iii) Molecular studies **NO**

D. Any other purpose (Please specify)-

3. **Model and make of equipments being used** (Any change is to be intimated to the Appropriate Authority under rule 13)

(1) **ACUSON X300 PE (Sr. No. ~~84112~~ 34-1112** Leena Rawat 12/6/2025)
(2) **GE VOLUSON P8 (Sr. No.198866SU6)**
(3) **GE LIGHT SPEED CT Scanner (Sr. No. 24576HP1)**
(4) **1.5 SIGMA EXCITE HD^{X}T MRI (Sr. No. R-1245A)**

4. **Registration No. allotted : PNDT/DELHI/DAA(WD)/PB/2020/0056**

5. **Period of validity of earlier certificate of registration:**
(For renewed certificate of registration only) From 01/02/2020 to 31/01/2025

Vandana Rao
1365

Date: 13.06.2025

Signature, name and designation
Of the Appropriate Authority & Seal

APPROPRIATE AUTHORITY (WEST) * PC & PNDT ACT * DISTRICT