



National Accreditation Board for
Testing and Calibration Laboratories

CERTIFICATE OF ACCREDITATION

**CENTRAL DIAGNOSTIC LABORATORY SERVICES, R L
JALAPPA HOSPITAL AND RESEARCH CENTER, UNIT OF
SRI DEVARAJ URS EDUCATIONAL TRUST FOR
BACKWARD CLASSES**

has been assessed and accredited in accordance with the standard

ISO 15189:2012

**"Medical laboratories - Requirements for quality and
competence"**

for its facilities at

TAMAKA, KOLAR, KARNATAKA, INDIA

in the field of

Medical Testing

Certificate Number: MC-2708

Issue Date: 13/04/2022

Valid Until:

12/04/2024

This certificate remains valid for the Scope of Accreditation as specified in the annexure subject to continued satisfactory compliance to the above standard & the relevant requirements of NABL.

(To see the scope of accreditation of this laboratory, you may also visit NABL website www.nabl-india.org)

Name of Legal Identity : SRI DEVARAJ URS EDUCATIONAL TRUST FOR BACKWARD CLASSES

Signed for and on behalf of NABL



N. Venkateswaran
Chief Executive Officer



National Accreditation Board for Testing and Calibration Laboratories

SCOPE OF ACCREDITATION

CENTRAL DIAGNOSTIC LABORATORY SERVICES, R L JALAPPA HOSPITAL AND RESEARCH CENTER, UNIT OF SRI DEVARAJ URS EDUCATIONAL TRUST FOR BACKWARD CLASSES, TAMAKA, KOLAR, KARNATAKA, INDIA

Laboratory Name :

Accreditation Standard ISO 15189:2012

Certificate Number

MC-2708

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1 of 6

Validity

13/04/2022 to 12/04/2024

Last Amended on

10/09/2022

S.No	Discipline / Group	Materials or Products tested	Component, parameter or characteristic tested / Specific Test Performed / Tests or type of tests performed	Test Method Specification against which tests are performed and / or the techniques / equipment used
Permanent Facility				
1	CLINICAL BIOCHEMISTRY	Serum	Glucose	Glucose oxidase/oxidase
2	CLINICAL BIOCHEMISTRY	serum	Potassium	Direct ISE Potentiometric
3	CLINICAL BIOCHEMISTRY	Serum	Albumin	Bromocresol green
4	CLINICAL BIOCHEMISTRY	Serum	Alkaline Phosphatase	P-nitrophenyl phosphate as substrate
5	CLINICAL BIOCHEMISTRY	Serum	ALT	Multi point Enzymatic by using LDH
6	CLINICAL BIOCHEMISTRY	Serum	Amylase	Dye Amylopectin
7	CLINICAL BIOCHEMISTRY	Serum	AST	Oxaloacetate Decarboxylase, Pyruvate Oxidase/Peroxidase
8	CLINICAL BIOCHEMISTRY	Serum	Bilirubin-BC	Dual wavelength - Reflectance spectrophotometry
9	CLINICAL BIOCHEMISTRY	Serum	Bilirubin-BU	Dual wavelength - reflectance spectrophotometry
10	CLINICAL BIOCHEMISTRY	Serum	Bilirubin-Total	Dual wavelength - Reflectance spectrophotometry
11	CLINICAL BIOCHEMISTRY	Serum	Calcium	Arsenazo III dye
12	CLINICAL BIOCHEMISTRY	Serum	Chloride	Direct -ISE Potentiometric
13	CLINICAL BIOCHEMISTRY	Serum	CK- MB	L-A-Glycerol phosphate oxidase/ peroxidase
14	CLINICAL BIOCHEMISTRY	Serum	CPK	L-A-Glycerol phosphate oxidase/peroxidase
15	CLINICAL BIOCHEMISTRY	Serum	Creatinine	Enzymatic method - Sarcosineoxidase/ Peroxidase
16	CLINICAL BIOCHEMISTRY	Serum	DTIBC	IronBinding:Dye & Transferrin
17	CLINICAL BIOCHEMISTRY	Serum	Ferritin	Immunometric
18	CLINICAL BIOCHEMISTRY	Serum	Folic acid	Chemiluminiscence
19	CLINICAL BIOCHEMISTRY	Serum	GGT	L-Gamma- Glutamyl-p - nitroanilideas substrat
20	CLINICAL BIOCHEMISTRY	Serum	HDL- Cholesterol	Non HDL Precipitation method
21	CLINICAL BIOCHEMISTRY	Serum	Inorganic Phosphorus	Fiske-Subbarow
22	CLINICAL BIOCHEMISTRY	Serum	iron	Two point rate:Dye Binding
23	CLINICAL BIOCHEMISTRY	serum	LDH	Multipoint rate:Pyruvate to Lactate
24	CLINICAL BIOCHEMISTRY	serum	Magnesium	FormazanDye
25	CLINICAL BIOCHEMISTRY	serum	Pseudo Cholinesterase	Butyrylthiocholine



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Last Amended on

10/09/2022

S.No	Discipline / Group	Materials or Products tested	Component, parameter or characteristic tested / Specific Test Performed / Tests or type of tests performed	Test Method Specification against which tests are performed and / or the techniques / equipment used
26	CLINICAL BIOCHEMISTRY	serum	Sodium	Direct ISE Potentiometric
27	CLINICAL BIOCHEMISTRY	serum	T3	Chemiluminescence
28	CLINICAL BIOCHEMISTRY	serum	T4	Chemiluminescence
29	CLINICAL BIOCHEMISTRY	Serum	Total Protein	Biuret
30	CLINICAL BIOCHEMISTRY	Serum	TotalCholesterol	Cholesterol oxidase - peroxidase
31	CLINICAL BIOCHEMISTRY	Serum	Transferrin	Immunochemistry chemical reaction
32	CLINICAL BIOCHEMISTRY	Serum	Triglycerides	Lipase, Glycerol kinase & peroxidase
33	CLINICAL BIOCHEMISTRY	Serum	TSH	Chemiluminescence
34	CLINICAL BIOCHEMISTRY	Serum	Urea	Enzymatic method - Urease
35	CLINICAL BIOCHEMISTRY	Serum	Uric acid	Enzymatic method - Uricase/ peroxidase
36	CLINICAL BIOCHEMISTRY	serum	Vit B12	Chemiluminescence
37	CLINICAL BIOCHEMISTRY	serum	Vit D	Chemiluminescence
38	CLINICAL BIOCHEMISTRY	Whole blood	Glycosylated Hb	HPLC
39	CLINICAL PATHOLOGY	Semen	Semen analysis (Volume, Total Sperm number, Viscosity/Liquefaction, Fructose, Morphology, Motility, pH, Vitality,)	Physical examination, Fructose - Seliwanoff's test, Morphology - Papanicolaou stain, Microscopy, pH - Litmus paper, Vitality - Eosin
40	CLINICAL PATHOLOGY	Urine	Colour, Appearance	Physical examination
41	CLINICAL PATHOLOGY	Urine	Bilirubin	Dipstick-Azo Coupling reaction
42	CLINICAL PATHOLOGY	Urine	Blood	Dipstick- Tetramethyl Benzidine reaction
43	CLINICAL PATHOLOGY	Urine	Glucose	Dipstick- Glucose oxidase peroxidase method
44	CLINICAL PATHOLOGY	Urine	Ketone bodies	Dipstick - sodium nitroprussidereaction
45	CLINICAL PATHOLOGY	Urine	Leukocytes	Dipstick- Derivatized pyrroleamino acid ester reaction
46	CLINICAL PATHOLOGY	Urine	Nitrites	Dipstick - P- Arsanilic acid reaction
47	CLINICAL PATHOLOGY	Urine	pH	Dipstick- Double indicator system
48	CLINICAL PATHOLOGY	Urine	Protein	Dipstick-Tetrabromophenol blue reaction
49	CLINICAL PATHOLOGY	Urine	Pus cells, Epithelial cells,casts, crystals, red cells,microorganisms	Microscopy



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S.No	Discipline / Group	Materials or Products tested	Component, parameter or characteristic tested / Specific Test Performed / Tests or type of tests performed	Test Method Specification against which tests are performed and / or the techniques / equipment used
50	CLINICAL PATHOLOGY	Urine	Specific gravity	Dipstick- Bromothymol blueindicator
51	CLINICAL PATHOLOGY	Urine	Urobilinogen	Dipstick- Modified Ehrlich reaction
52	CYTOPATHOLOGY	Fluids aspirated from Serosa Icavities, Urine, CSF	Exfoliating cytologyanalysis	Cellcount, Fluid appearance,centrifuges deposit using centrifuge, Smear preparation, stain withH&E , MGG. Microscopicevaluation and interpretivereport and recommendations if any
53	CYTOPATHOLOGY	Material obtained from palpable/non palpable lesions in the body	Fine Needle AspirationCytology	Obtaining representative material by aspiration/non aspiration technique, eitherasa blind procedure or under image guidance. Preparation of smears (air dried/ wet fixed). StainingwithMGG H&E / PAP and any other specialstainsas found necessary. Microscopicstudy of stained slideand interpretive, recommendations ifany
54	CYTOPATHOLOGY	Smears from Ecto/Endocervical/ Vagina	Pap smears	Obtaining representative materialfromthespecified sites using cytobrush and spatula. Preparation ofthe smearand fixation . Stainingwith Pap stain and microscopic examination oftheslides with interpretation ofthe report usingBethesda system. Recommendations ifany
55	HAEMATOLOGY	Bone Marrow Aspiration-EDTA/ Unstained smear	Bone marrowaspiratesmears	Leishman staining and Perlâ€™s stainingwith interpretation
56	HAEMATOLOGY	Citrate Whole Blood	ESR	Westergrens method (manual)
57	HAEMATOLOGY	Platelet Poor Plasma	Activated PartialThromboplastinTime	Photo Optic Clot detection
58	HAEMATOLOGY	Platelet Poor Plasma	ProthrombinTime	Photo optic clot detection
59	HAEMATOLOGY	Whole Blood	Basophil%	Automated Flow Cytometry
60	HAEMATOLOGY	Whole Blood	Eosinophils %	Automated Flow cytometry
61	HAEMATOLOGY	Whole Blood	Hematocrit	RBC Pulse Height detection
62	HAEMATOLOGY	Whole Blood	Hemoglobin	Cellcounter SLS method
63	HAEMATOLOGY	Whole Blood	Lymphocytes%	Automated Flow cytometry
64	HAEMATOLOGY	Whole Blood	MCH	Calculated
65	HAEMATOLOGY	Whole Blood	MCHC	Calculated



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66	HAEMATOLOGY	Whole Blood	MCV	Calculated
67	HAEMATOLOGY	Whole Blood	Monocytes %	Automated Flow cytometry
68	HAEMATOLOGY	Whole Blood	Neutrophils%	Automated Flow cytometry
69	HAEMATOLOGY	Whole Blood	Peripheral smear	Leishman staining and Microscopy
70	HAEMATOLOGY	Whole Blood	Platelets	Electrical Impedance with Flowcytometry
71	HAEMATOLOGY	Whole Blood	RBC count	Electrical Impedance
72	HAEMATOLOGY	Whole Blood	Reticulocyte count	Supravital staining with Brilliant cresyl blue and microscopy
73	HAEMATOLOGY	Whole Blood	Total Leucocyte count	Automated Flow cytometry
74	HISTOPATHOLOGY	Biopsy - Frozen section	Grossing, Processing, Microtomy Staining (H & E, Toluidine blue, PAP), (Conventional)	Light Microscopy with Interpretation
75	HISTOPATHOLOGY	Paraffin Blocks for second Opinion	Microtomy, H& E Staining (Conventional)	Light Microscopy, Interpretation
76	HISTOPATHOLOGY	Slides for second opinion	Stained / Unstained slides	Light Microscopy with Interpretation
77	HISTOPATHOLOGY	Small, Medium & Large tissues	Grossing, Decalcification, Processing, Paraffin embedding Microtomy, H & E Staining (Conventional)	Light Microscopy with Interpretation
78	HISTOPATHOLOGY	Tissue/ Paraffin block/ Unstained slide	PAS stain, ZN stain for AFB, Giemsa stain, Perl's stain for Iron, Alcian Blue stain	Light Microscopy with Interpretation
79	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	BAL, Tracheal aspirate, Urine	Aerobic Culture, Identification and Antimicrobial Susceptibility testing by Conventional methods	Semi quantitative: Standard Calibrated loop technique. Aerobic culture on appropriate media and biochemical identification. a) Conventional b) AST conventional; disc diffusion by Kirby Bauer method
80	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Blood, Bone Marrow	Aerobic culture in BacTAlert bottles, subculture on basic culture plates, identification and antimicrobial susceptibility testing by Conventional methods	Qualitative: Aerobic culture on appropriate media and biochemical identification. a) Conventional b) AST - Conventional Disc Diffusion by Kirby Bauer method
81	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	CSF	India ink	Light microscopy



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82	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Pus, Sputum, Stool, Sterile body fluids, CSF, Pleural fluid, synovial fluid, wound swab, throatswab, nasalswab	Aerobic culture and antimicrobial susceptibility testing by Conventional methods	Qualitative: Aerobic culture on appropriate media and biochemical identification. a) Conventional b) AST - Conventional Disc Diffusion by Kirby Bauer method
83	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Pus, Sputum, Urine, Cerebrospinal Fluid (CSF), Pleural Fluid, Pericardial Fluid, Ascitic Fluid, Peritoneal Fluid, Synovial Fluid, Secretions, FNAC, Surgical Biopsy, Aspirate	Zhief Neelsen staining	Light microscopy
84	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Pus, Sputum, Urine, Wound swab, Throat swab, Ascitic Fluid, CSF, Pleural Fluid, Nasal swab, Synovial Fluid, Pericardial Fluid, BAL, Endotracheal Secretions and Tracheal aspirate	Gram stain	Staining and light microscopy
85	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Serum	Anti HCV Antibody	Chemiluminescence
86	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Serum	Anti HCV Antibody	HCV Tridot (Rapid test) Immunochromatography
87	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Serum	Anti Leptospira	ELISA
88	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Serum	Anti Dengue IgM	ELISA
89	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Serum	Dengue Rapid (NSI/IGM/ IGG)	Immunochromatography
90	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Serum	HBsAg	Chemiluminescence
91	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Serum	HBsAg	Hepacard (Rapid test) immunochromatography
92	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Serum	HIV1 & 2 Antibodies	Aspen (Rapid test) immunochromatography
93	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Serum	HIV1 & 2 Antibodies	Chemiluminescence
94	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Serum	HIV1 & 2 Antibodies	HIV Tridot (Rapid test) immunochromatography
95	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Serum	NSI antigen detection	ELISA
96	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Serum	RPR	Slide Flocculation test



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97	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Serum	TPHA	Slideagglutination test
98	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Serum	Widal	Tubeagglutination
99	MICROBIOLOGY & INFECTIOUS DISEASE SEROLOGY	Stool	Hanging drop	Lightmicroscopy
100	MOLECULAR TESTING	Nasopharyngealswab / oropharyngealswab in VTM/ ET secretions / BAL in VTM	SARS CoV-2 RNA Qualitative Open system	Real Time RT PCR



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in the field of

Medical Testing

Certificate Number: MC-2708

Issue Date: 13/04/2024

Valid Until:

12/04/2026

In view of the transition deadline for ISO 15189:2022, the validity of this accreditation certificate will cease on 31.12.2025.

This certificate remains valid for the Scope of Accreditation as specified in the annexure subject to continued satisfactory compliance to the above standard & the relevant requirements of NABL.
(To see the scope of accreditation of this laboratory, you may also visit NABL website www.nabl-india.org)

Name of Legal Entity: SRI DEVARAJ URS EDUCATIONAL TRUST FOR BACKWARD CLASSES

Signed for and on behalf of NABL



N. Venkateswaran

**N. Venkateswaran
Chief Executive Officer**

National Accreditation Board for Hospitals & Healthcare Providers

(Constituent Board of Quality Council of India)

CERTIFICATE OF ACCREDITATION

R. L. Jalappa Hospital and Research Centre

NH-75, Tamaka
Kolar - 563103, Karnataka

has been assessed and found to comply with NABH Accreditation Standards for Hospitals, 5th Edition. This certificate is valid for the Scope as specified in the annexure subject to continued compliance with the accreditation requirements.

Valid from : April 15, 2022

Valid thru : April 14, 2026



Certificate No.

H-2022-0939

Dr. Atul Mohan Kochhar
Chief Executive Officer

National Accreditation Board for Hospitals & Healthcare Providers, 5th Floor, ITPI Building, 4A, Ring Road, IP Estate, New Delhi 110 002, India
Phone: +91-11-42600600, Fax: +91-11-2332 3415 • Email: helpdesk@nabh.co • Website: www.nabh.co



SI No. 007989



NABH and the NABH Accreditation Standards for Hospitals are ISQua Accredited

AND SRI DEVARAJ URS ACADEMY OF HIGHER EDUCATION AND RESEARCH (SDUAHER), a deemed to be university TAMAKA, KOLAR represented by its Registrar (herein after referred to as the **Second Party**) on the other, witnesseth as under:

WHEREAS, the AIISH, Mysuru (**First Party**) was established in the year 1965 and is an autonomous organization under the aegis of Ministry of Health & Family Welfare, Government of India, which is a premier institute providing training, research, clinical services and public education in the field of Speech and Hearing in the country, and

WHEREAS, Sri Devaraj Urs Academy of Higher Education and Research (SDUAHER), Tamaka, Kolar (**Second Party**) is a medical college and hospital and it obtained the deemed to be university status in the year 2007 and is providing much needed comprehensive care to the patients and has the facility of ENT, Pediatrics, Neurology and Physiotherapy services among others.

WHEREAS, the AIISH, Mysuru (**First Party**) has undertaken to initiate New Born Screening (NBS) activities at the premises of the Second Party for a period of 05 years and extend to other neighboring hospitals to accomplish the objectives of early Identification, Prevention and Management of communication disorders,

WHEREAS, to ensure smooth functioning of New Born Screening activities effectively at SDUAHER, Kolar both the First Party and the Second Party have arrived at an understanding and have resolved to reduce in writing the broad outlines thereof. NOW THEREFORE, this Memorandum of Understanding witnesseth as here under:

1. The Second Party shall provide adequate space to carry out the screening activities and the minimum required facility in this regard shall be as under:
 - a) One Room measuring 15' x 15' feet for early diagnosis & early intervention services
 - b) One 10' x 10' feet electrically isolated room for Auditory Brainstem Response (ABR) with sound treated facility
 - c) Silent space near maternity ward for testing
2. The First Party shall recruit Audiologist / Speech-Language Pathologist (1 No.) , and Speech Hearing Assistant (01 No.) on contract basis to carry out NBS activities at Sri Devaraj Urs Academy of Higher Education and Research, Tamaka, Kolar..
3. The First Party shall procure the required tools and equipment to carry out NBS activities and arrange to deliver the same to Sri Devaraj Urs Academy of Higher Education and Research, Tamaka, Kolar.
4. The First Party shall also make available funds for the Second Party for purchase of furniture, spares & accessories and to meet other expenditure of NBS programme by allocation and release of grant-in-aid required in a financial year.
5. The Second Party shall nominate /designate one of the regular staff members to supervise and monitor the clinical activities by maintaining good rapport with the Coordinator designated by the First Party.


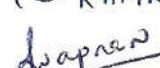
M. P. ...
निदेशक / Director
अखिल भारतीय वाक् श्रवण संस्थान
All India Institute of Speech and Hearing
मैसूरु / MYSURU-570 006

K. ...
Registrar
Sri Devaraj Urs Academy of Higher
Education and Research
Tamaka, Kolar - 563 101.

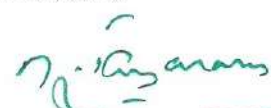

6. The Second Party shall maintain a new account for accounting the receipt of grants released / and other funds received and payments made in connection with the screening activities and shall also make available the related account books, vouchers, files etc., for inspection either by the First Party or the Ministry of Health and Family Welfare, Govt. of India. The bank account shall be operated by any two among Head of the department of Speech Pathology & Audiology, Coordinator of NBS and any other officer appointed or / nominated by the First Party/ Second Party.
7. The Second Party shall maintain the stock registers in respect of equipments procured by the First Party and furniture, spares and accessories and other materials purchased for carrying out the activities and produce for verification, as and when required.
8. The Second Party shall make a regular nominated employee responsible / in-charge for maintenance of the stock registers by entering the details and conduct an annual physical stock verification of such equipment and send the report to the first party (AIISH, Mysuru).
9. The Second Party shall submit periodically statement of accounts along with internal audit report, expenditure statement, and utilization certificate in the prescribed format for the funds released by the First Party, as and when required.
10. For efficient and smooth implementation of NBS activities, any other guidelines / directions/ instructions as needed from time to time shall be jointly formed by both parties in joint consultation.
11. The First party shall cease to provide any support either through funds or men / materials to the second party to carryout NBS activities beyond 05 years from the date of execution of the MoU.
12. The Second Party shall make all the efforts to continue the NBS program independently by recruiting the necessary staff and procuring the required materials, on expiry of the period of 05 years from the date of execution of the MoU, to accomplish the objectives of early identification, prevention and management of communication disorders.

IN WITNESS WHEREOF, both the parties have set their hands to this Memorandum of Understanding at Tamaka, Kolar on this 4th day of October 2019 in the presence of under mentioned witnesses:

WITNESSES

1.  (S. RAMKUMAR)
2.  Swapan

WITNESSES

1.  M. Pulapanda
2.  Dr. V. LAKSHMI AIAH.


(First Party)
निदेशक / Director

अखिल भारतीय शक श्रवण संस्थान
All India Institute of Speech and Hearing
मैसूरु / MYSORE-570 006


(Second Party)
Registrar

Sri Devaraj Urs Academy of Higher
Education and Research
Tamaka, Kolar - 563 101.



अली यावर जंग राष्ट्रीय
वाक् एवं श्रवण दिव्यांगजन संस्थान

के. सी. मार्ग, बान्द्रा रिक्लेमेशन, बान्द्रा (पश्चिम),
मुंबई - 400 050
दूरभाष : 022 - 26400215/26400228
फैक्स : 91-22-26404170
ई - मेल : ayjnihh-mum@nic.in
वेबसाइट : <http://ayjnihh.nic.in>
आइ एस/आइ एस ओ 9001:2015 प्रमाणित संस्थान

Ali Yavar Jung National Institute of
Speech and Hearing Disabilities (Divyangjan)

K. C. Marg, Bandra Reclamation, Bandra (W)
Mumbai - 400 050
Tel: 2640-0215/0228/9176
Fax: 26404170
E-mail: ayjnihh-mum@nic.in
Website: <http://ayjnihh.nic.in>
IS/ISO 9001: 2015 Certified Organization

दिव्यांगजन सशक्तीकरण विभाग, सामाजिक न्याय और अधिकारिता मंत्रालय, भारत सरकार, नई दिल्ली के अधीन स्वायत्त संस्थान
(An Autonomous body under the Department of Empowerment of Persons with Disabilities (Divyangjan),
Ministry of Social Justice and Empowerment, Government of India, New Delhi)

संदर्भ संख्या : ADIP-CI/HOSPITAL-MOU/2023/303
Ref. No :

दिनांक : 17-04-2023
Date :

To,

Dr. D.V.L.N. Prasad,
R L Jalappa Hospital and Research Centre,
Sri Devaraj Urs Academy of Higher Education
and Research, Tamaka, Kolar – 563 103.

Sub: M.O.U. for Cochlear Implant Surgery under ADIP Scheme of
Government of India.

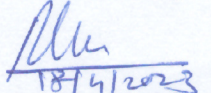
Sir/Madam,

Thanking you for signing M.O.U.

Please find enclosed herewith copy of Memorandum of Undertaking for
the period 06th April 2023 to 06th April 2025 duly executed for record at your end.

Thanking you,

Yours Faithfully,


(Dr. Raju Arakh)
Officiating Director

Encl. As above

Responsibilities of AYJNISHD (D)

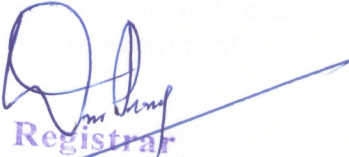
1. Selection and referral of suitable candidates for cochlear implant surgery subject to medical and radiological clearance from operating surgeon.
2. Supply of cochlear implant device to the hospital.
3. Payment of bills relating to cochlear implant surgery to the "hospital" as per AYJNISHD (D) norms.
4. Payment of bills related to post-operative rehabilitation undertaken by hospital / rehabilitation professionals as per AYJNISHD (D) norms.

Responsibilities of Hospital

1. Conducting cochlear implant surgery for candidates approved by AYJNISHD (D) based on the recommended practices subject to medical clearance from operating surgeon at FREE OF COST. The responsibility lies with the hospital and operating surgeon to complete the surgery at the earliest without causing expiry of implants.
2. Providing post-operative rehabilitation services of well-trained audiologist / speech-language pathologist/special educator (HI) /AVT therapist to the cochlear implantees.
3. Permitting professional/s deputed by AYJNISHD (D) as observer/s during intra operative monitoring.
4. Permitting the inspection team appointed by AYJNISHD (D) for physical verification of infrastructural facilities and services available in the hospital for cochlear implant surgery and/or rehabilitation services.
5. Submitting the post-operative (surgery) notes individually/jointly signed by the operating surgeon and/or Mentor (wherever applicable) to the Director, AYJNISHD (D), Mumbai.
6. Taking adequate precautionary measures to avoid medico-legal issues arising at any point of cochlear implant surgery and thereafter. On the contrary, "Hospital" and operating surgeon will be solely responsible for such medico-legal issues.
7. Obtaining duly signed declaration from the parents of cochlear implantees about accessing postoperative rehabilitation services from rehab professionals assigned by the Hospital/AYJNISHD (D).The rehabilitation professional will be mainly responsible for offering uninterrupted post-surgery intervention services for a period of 2 years at free of cost.
8. Monitoring the progress of children implanted at the hospital for a period of 2 years.
9. Submitting monthly/quarterly/annual report on the surgery /post rehabilitation activities carried out by the Hospital under ADIP CI scheme.

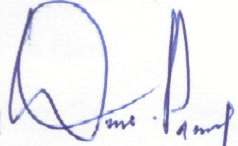
Joint responsibility (AYJNISHD (D) & Hospitals)


1. Disseminating information about ADIP-CI scheme
2. Identifying suitable candidates for cochlear implant surgery
3. Offering free pre-implant counseling to parents
4. Obtaining informed written consent from the parents/care givers that they have been informed about the procedure and outcome of cochlear implantation before surgery.
5. Updating of information on AYJNISHD(D) website and sharing with DEPWDs, MSJE


Registrar
Sri Devaraj Urs Academy of Higher
Education and Research
Tamaka, Kolar - 563 103.

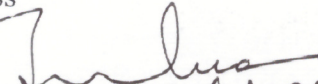
The validity of this Memorandum of Understanding is for two years from the date of signing.

Authorized signature of


Hospital
Dr D.V.L.N Prasad
Registrar
Sri Devaraj Urs Academy of Higher
Education and Research
Tamaka, Kolar - 563 103.

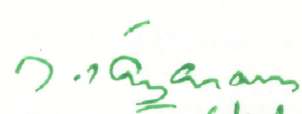

Director, AYJNISHD (D)

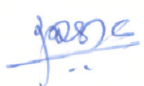
Witness


1. Dr. J Krishnappa 6.4.23.
Medical Superintendent
Medical Superintendent
R.L. Jalappa Hospital & Research Centre
Tamaka, Kolar-563103.

Witness

1. Rajeev Jalappa
R.Jalappa


2. Dr. M Jayaram 6/4/23
Prof & Head,
Speech Pathology and Audiology

2. Aparna Nandustar


Dr. M. Jayaram, Ph.D
Professor & Head
Dept. of Speech Pathology & Audiology
Sri Devaraj Urs Academy of Higher
Education and Research
Tamaka, Kolar-563101
RCI Regn: A54073

National Accreditation Board for Hospitals & Healthcare Providers

(Constituent Board of Quality Council of India)

CERTIFICATE OF ACCREDITATION

RL Jalappa Hospital and Research Centre Blood Bank

Room No.55, Gate No: 01, 1st Floor, Tamaka

Kolar - 563101, Karnataka

has been assessed and found to comply with NABH accreditation standards on Blood Banks/ Blood Centres and Transfusion Services. This certificate is valid for the Scope as specified in the annexure subject to continued compliance with the accreditation requirements.

Valid from : December 12, 2024

Valid thru : December 11, 2027



BB-2024-0163

Certificate No.

BB-2024-0163

Dr. Atul Mohan Kochhar
Chief Executive Officer

National Accreditation Board for Hospitals & Healthcare Providers, 5th Floor, ITPI Building, 4A, Ring Road, IP Estate, New Delhi 110 002, India
Phone: +91-11-42600600, Fax: +91-11-2332 3415 • Email: helpdesk@nabh.co • Website: www.nabh.co



SI No. 023326



NABH as an organisation is ISQua Accredited
To verify the authenticity of certificate, reach us on verification@nabh.co

