



KMCT

AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences

TO WHOM SO EVER IT MAY CONCERN

This is to certify that the information in the attached documents is verified by me and is true to the best of my knowledge .



PRINCIPAL
KMCT AYURVEDA
MEDICAL COLLEGE





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AYURVEDA MEDICAL COLLEGE

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EMPLOYMENT WISE DETAILS



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ACADEMIC YEAR
2023-24





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	COLUMN N 1	COLUMN N 2	COLUMN N 3	COLUMN 4	COLUMN 5
YEAR	Number of students placed	Number of students self-employed	Total number of students	Name of the employer with contact details	Programme graduated from
				Enclosed	
2023-2024	46	21	46		BAMS
				DR SALSABEELA, MOMMYS AYURVEDIC CLINIC, THUERUNAVAYA ROAD, ANAPPADI, MALAPPURAM, PH,9778755004	
				DR ARATHI OMANAKUTTAN, THIANUSUKHAM AYURVEDA CLINIC, KAZHAKOOTAM, OLD JUNCTION, TRIVANDRUM PH-8137055840	
				DR IRSHANA.P, DR U .BAPPUTTY HAJIS ULLAT VAIDYASHALA , MAMPURAM CHEMMAD PH-8593837002	
				DR SUMMAYYA, GHD, PUTHUKKOD, PALAKKAD, PH-9447743498	
				DR HARITHA.M, ARDOR LAXMI NARAYANA MEMORIAL MEDICAL COLLEGE ,CHIKMANGLORE,PH 8217858036	
				DR SURYA K S,SUKHODAYA AYURVEDA HOSPITAL,KANGIRAPALLY,KOTTAYAM PH:8129039862	
				DR ABHIRAM,PUNARNAVA AYURVEDA HOSPITAL , COIMBATORE PH-9400779627	
				DR PANCHAMI RAJEEV,ENKAY AYURVEDIC VILLAGE PVT LTD, MUMBAI PH:9805857331	
				DR VIDYA K S,DR ASHNAS WELLNESS CLINIC, KANNUR PH:8136901780	

L. Anitha
 PRINCIPAL
 K.M.C.T. AYURVEDA MEDICAL COLLEGE
 MANASSERY PO
 MUKKAM
 KOZHIKODE
 K.M.C.T. AYURVEDA MEDICAL COLLEGE





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			DR AKHILA REMANAN,ROCKHOLM AT THE LIGHT HOUSE BEACH AYURVEDA RESORT , KOVALAM,TRIVANDRUM PH:8078944393	
			DR MIDHUN O M , AYURNAVA KERALA AYURVEDIC TREATMENT CENTRE, GURGOAN, NEWDELHI PH:8943890870	
			DR ASWANI V,AYURNAVA KERALA AYURVEDIC TREATMENT CENTRE,GURGOAN,NEWDELHI PH:8156885316	
			DR PARVATHI NAYANA P P,BARSANA HOTEL AND RESORT, WEST BENGAL ,PH:7559821078	
			DR RASHA,DR RAVI'S MULTI SPECIALITY CLINIC BENGALURU PH:9947201110	
			DR SREERAM P P,SHADANGA AYURVEDA PVT LTD,GURGOAN,NEWDELHI PH-7736300701	
			DR . DEVAPRIYA T.V, SADAYUSH CLINIC, PALAKKAPPARAMBU, MALAPPURAM PH 7902325806	
			DR SREEKUTTY P V,SREESIDHARAMESHWAR AYURVEDIC MEDICAL COLLEGE, BIDAR,9605223394	
			DR. JULY. P. ASHLY MULTI SPECIALITY CLINIC, KASARGOD PH:6235534623	
			DR. AYSHA SUHAILA , ONENESS BEEJA YOGA ACADEMY PH:9495054899	
			DR NISHA VARGHESE, SREEDHAREEYAM EYE HOSPITAL, ERNAKULAM , PH -0484 4061205	
			DR RISHIKA SAKETH,NANDHA AYURVEDA MEDICAL COLLEGE AND HOSPITAL, 9400629678	

Dr. Akhila Remanan
K.M.C.T. AYURVEDA
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				DR FERINA GAPOOR, EDHINI AYURVEDA HOSPITAL, KATTANGAL, CALICUT, PH- 7034475594	
2022- 2023	36	11	36	DR RUKSANA P K, DR SHAKHER'S ORTHO CARE AYURVEDA AND SPORTS INJURY SPECIALITY CENTRE KOZHIKODE PH 9562397100	BAMS
				DR SREEVEDIYA, MINISTRY OF AYUSH, NEWDELHI PH :	
				DR ASWANT G S, MINISTRY OF AYUSH, NEWDELHI PH 9605932933	
				DR SAJITHA S A JALBEZ, HIMALAYA AYURVEDIC RETREAT CENTRE, CHANGANASSERY, KOTTAYAM PH:7025833195	
				DR AJEESH C C, DHANWANTARI AYURVEDA COLLEGE AND RESEARCH CENTRE, SIDDHAPUR PH :8075602038	
				DR AKSHARA, BHUME NATURE CARE AND WELLNESS, EDAPPAL, KOOTANAD PH:9895199776	
				DR ASLA HAIDER ALIKHAN, TTM AYURVEDA SKIN AND HAIR CARE CLINIC, POOKKOTTUMPADAM, MALAPPURAM PH:9526460859	
				DR NAYANA M VIDAL, HEALTH, BANGLORE PH 9747373174	
				DR SANIYA SAID, CLINIC, MALAPPURAM PH:9048416792	
				DR ARYA KRISHNAN, KRISHNENDHU AYURVEDA PH:8157837047	
				DR NIMISHA P, ATIMA AYURCARE, OLAPEEDUKA, THANUR, MALAPPURAM PH 8589033339	
				DR. GOPIKA T PANICKER, OWN CLINIC, ERNAKULAM, PH:9562218571	
				DR SHARON P VALS, KMCT AYURVEDA MEDICAL COLLEGE PH:9450675898	





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				DR MATHULAKSHMI N K,AYURVEDA COLLEGE COIMBATORE, SULUR	
				DR AMAL THOMAS, JS AYURVED MAHA VIDHYALAYA, GUJARAT PH:98094497709	
				DR.DONY MANUEL, DR PLUS, DIRECTOR AT TELBEGREEN EXPERTS, THODUPUZHA PH:9447214024	
2021- 2022	38	1	38	DR LIDA TREESA LALU,BISHOP BENZIGER PANCHAKARMA AYURVEDA, KOLLAM PH 9544334021	BAMS
				DR SHERHANA V S,MOMMY'S AYURVEDIC WELLNESS AND POST NATAL CARE, TIRUR, MALAPPURAM PH 7558967626	
				DR ASHA L PAPPAN,MEDICAL OFFICER, MEDI ASSIST INSURANCE, TPA, PVT.LTD, BANGLORE PH:9447407296	
				DR SUHAILA LATHEEF,MARIBEL MATERNITY CARE, EDAVANNAPARA PH 9745613456	
				DR SREEKALA V,CENTRAL COUNCIL FOR RESEARCH IN AYURVEDIC SCIENCE, NEW DELHI, 8547900265	
				DR VISMAYA K S,M LIFE METI CARE,VALANCHERY, MALAPPURAM PH :8891841124	
				DR AYSHA SUWAINA,NAGARJUNA AYURVEDA PHARMACY, CHANDAPPADI, KOLATHUR, MALAPPURAM PH :8075843847	
				DR ANRISHA V,VAIDYARATNAM P S WARRIER'S KOTTAKAL ARYA VAIDHYA SHALA, HARIPADPH:62357900057	
				DR.ASWATHY UTHAMAN,ANSURTECH, ULLLOOR JUNCTION, TRIVANDRUM PH :7356542437	
				DR. REMYA A S,COTTIVIL, COIMBATORE PH:8089700477	





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				DR SANDRA PRAKASH S,COTTIVITL, COIMBATORE PH-7034554357	
				DR ANU JOSE,NANDFIA AYURVEDA MEDICAL COLLEGE AND HOSPITAL,ERODE, PH.9495189601	
				DR NIDHIN MOHAN,SANTHIGIRI AYURVEDA MEDICAL COLLEGE, PALAKKAD. PH:9447716643	
				DR SATHYAJA N T,KMCT AYURVEDA MEDICAL COLLEGE, MUKKAM,9048463606	
				DR.ARDRA JI, OWN CLINIC, CALICUT	
2020- 2021	23	2	23	DR ANAMIKA ASHOK,JEEVESS AYURVEDA,POZHUTHIANA PH:8075457725	BAMS
				DR NIFLA FAISAL, DR BENS AYURVEDA HOSPITAL, MARANCHERY	
				DR.ALESIA JOHN , COTTIVITI, PUNE	
				DR NAYANA K R,THAIKATTU MOOS CLINIC,	
				DR GANGAMRUTHA,KOTTAKAL ARYA VAIDHYA SHALA OUTLET,VALYAPARAMBU, KOZHIKODE PH :94978765528	
2019- 2020	33	2	33	DR SHAFNA C H,C H S AYURVEDA CLINIC,PADAPPARAMBU, KOTTAKKAL	BAMS
				DR NOORJAHAN K,ADAM AND EVE AYURVEDA, ABHUDABI PH:9605064660	
				DR ILANI RAHMAN, WEST HERTFORDSHIRE TEACHING HOSPITAL,UNITED KINGDOM	
				DR BINSHIDA T,DR MASTHAN'S MS AYURVEDA HOSPITAL, KUNNUMMAL EDAVANNA , MALAPPURAM PH:9615991506	
				DR SHIMA SHAJU,GOVT AYURVEDA DISPENSARY, POOPARA, IDUKKI PH -8496758414	

Handwritten signature
PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE





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				DR SREELAKSHMI M,AYUR GLOW HEALTH CARE AND BEAUTY CLINIC,VADAKKEMANNA MALAPPURAM PH:9497840126	
				DR PRASEEJA T,KMCT AYURVEDA MEDICAL COLLEGE, MUKKAM PH:9746789885	
				DR RASHIDA, OWN CLINIC, MALAPPURAM,PH:9847257076	



Christina
PRINCIPAL
K.M.C.T. AYURVEDA
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Wellness & Postnatal care

Mommy's
Ayurvedic



Dr.SALSABEELA
BAMS

Thirunnavaya Road, Anappadi
Alathiyur Tirur-Phn 676108 Malappuram, Kerala
@mommaysayur@gmail.com @mommaysayurvedic

☎ 9778 755 004 ☎ 8078 335 009
☎ 8891 004 666 ☎ 8891 005 777

Arshini
PRINCIPAL
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MEDICAL COLLEGE





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Thanusukham The World of Nature
Ayurveda Clinic

Kazhakuttom Old Jn., Tvpm
Ph : 09847924333, 08547999623
thanusukhamayurvedaclinic.com

EXPERIENCE CERTIFICATE

This is to certify that **Dr. Arathi Omanakuttan**, (Registration Number: 26582) has been working in our organization as **Ayurveda Doctor** since 14th November 2023.

She is faithful, utmost loyal, hard working, clinically skilled and her service was found to be excellent.

We wish her all the best in her future endeavors too.

For Thanusukham Ayurvedic Clinic





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Dr. U. Bapputty Haji's

Ullat Vaidyasala

Manguram moqam road - old bridge, Chendam

DOCTORS PANEL

Dr. U MUHAMMED SHAHID

TCMC - 18480

BAMS PDDO

MANAGING DIRECTOR

Dr. U MUHAMMED ABDURAHIMAN

TCMC-18482

BAMS

MEDICAL DIRECTOR (AYURVEDA)

Dr. MOHAMMED NAYEEM PA

MBBS(AIIMS), FID(Diab), FFM(Family Medicine)

TCMC 74108

MEDICAL DIRECTOR (MODERN MEDICINE)

Dr. IRSHANA.P ✕

BAMS

TCMC-27258

MEDICAL OFFICER

Signature
Dr. U. Bapputty Haji's
Ullat Vaidyasala
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NATIONAL AYUSH MISSION ID CARD DETAILS

Office Use Only		ID Card No.
Name	Dr SUMAYYA	
Designation	Yoga Instructor	
Photo (Recent Passport Size Photo)		
Date Of Birth	06-05-1996	
Place of work & District	GEM Palakkad Palakkad	
Address & Email id	Shubha Mani, Tharuvattully, Poyyil PO, Palakkad- 678004. sumayya.poyyilshubha@gmail.com	
Mobile No.	9447743498	
Aadhar Number	308538350480	
Blood group	AB+	
Signature with Office Seal		



Dr. SUMAYYA
- Assistant Professor
in Ayurveda Education
Department - 678 004





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ASHA LAKSHMINARAYANA Rao Memorial AYURVEDIC MEDICAL COLLEGE

(Affiliated to Kerala University of Health Sciences)

(Approved by Council of Karnataka)

National Commission for Indian System of Medicine, Ministry of AYUSH, Govt of India

MANAGER OF ASSISTANT REGISTRAR, KUPPA 577 120, KUPPA

Kuppa - 577 120, Chikmagalur Dist

08452311800 FAX 08452311801 Email: asharao@kmcet.edu.in Website: www.kmcet.edu.in

STD Code 0825
College 21205
Hospital 22284
Mob: 82178 28078

Ref. No.

INSTITUTION ID AYU0007

Date: _____

REF.NO/LAKTK/NO: 2023-24 / S.S

16/02/2024

To,
Dr. DEEPTHA M,
DPO Sri K Haridas,
"Sashambhava Bhavan", Vallanghy, Newmasa,
PALANAKA/576908

APPOINTMENT LETTER

SUBJECT: Appointment as **ASST PROFESSOR/LECTURER**
in the Department of **ASHA TARTRA AND VYAKHARA AYURVEDA**
REFERENCE: Your invitation dated 15/02/2024

-3-

Sir/Madam,

With reference to your application and subsequent interview, we are pleased to appoint you to the post of **ASSISTANT PROFESSOR/LECTURER on PROBATIONARY** basis for the period of One Year in the Department of **ASHA TARTRA AND VYAKHARA AYURVEDA** in **A.S.M. RAO MEMORIAL AYURVEDIC MEDICAL COLLEGE, KUPPA 577 120** with effect from 25/02/2024 with following Terms and Conditions:-

01. The Salary offered to you is **GRADE RS. 35555/- + GRADE PAY RS.5000/- + PF MANAGEMENT SHARE RS.1800/- + FREE QUARTERS RS.5000/- TOTAL: RS. 44335/- (FOURTY FOUR THOUSAND THREE HUNDREDS THIRTY THREE ONLY)**
02. It will be obligatory on your part to give three months' or Ninety days notice as follows three months pay, in lieu of notice. During Notice period, there is no provision to avail leave excepting emergency conditions.
03. You shall not carry any Private consultation or practice without the prior permission of the Management in writing.
04. You will please note that you will work under the overall supervision and control of the Principal and only, in case of necessity you are requested to approach the undersigned.
05. You should not leave the job in the middle of the students year causing disruption of academic work and during the period of your service in this institution, your appointment may be terminated at any time for disobedience, dereliction of duty or any other misbehavior or misconduct.
06. You shall be required to teach any of the subjects allotted to you and you may be put in additional charge of other subjects and works as and when necessary.

Contd...I.



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SUKHODAYA AYURVEDA HOSPITAL

P.O. NO. 15-KANJIRAPALLEY, KOTTAYAM, KERALA - 686507

PH: 04828 262715, Mob - 9744962715, 9907942518, 9847422211

OFFICE LETTER

11-07-24

DR. SURESH K. S.

Kottayam (H)

Postquam P (1)

Thiruv

Pin 686508

PH: 9127403862

Dear Sirs,

We are pleased to extend this offer of employment to you for the position of RESIDENTIAL MEDICAL OFFICER with SUKHODAYA AYURVEDA HOSPITAL KANJIRAPALLEY KOTTAYAM, effective 1-08-24, at a revised salary of INR 28,000 per month.

Your contributions to our team have been greatly valued, and we believe that this adjustment reflects both your dedication to our company and the growing responsibilities of your role.

Please review this offer carefully. If you accept this new salary, please sign and return one copy of this letter to confirm your acceptance of this offer.

We look forward to your continued success with SUKHODAYA AYURVEDA HOSPITAL.

Sincerely,

DR. GLADYS JAMES

General Manager

SUKHODAYA AYURVEDA HOSPITAL

PH: 792742158

Dr. GLADYS JAMES
Reg. No. 7598, General Manager
Sukhodaya Ayurveda Hospital





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InnBuilt

Punarnava Ayurveda



Dr. Abhiram

VG468

Gender

Phone

Male

+919400779627

Department

Designation

DOCTOR

MEDICAL OFFICER

Abhiram
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OFFER LETTER

Date: 21st June 2024

Dear Dr. Panchami Rajeev,

Subsequent to the face-to-face interview you had with us, we are pleased to appoint you to the position of **Consulting Doctor**.

Your Date of joining will be **24th June 2024**

Your consolidated salary will be **Rs. 25,000/- (Twenty-Three Thousand only)** per month all inclusive.

You shall be under the probation period for 6 months from the date of joining extendable up to one year at the end of which your performance will be reviewed. During the employment, if you choose to resign or terminate your employment with us you must serve a notice for 30 days. The company reserves the right to terminate you at any point without notice if found in violation of any of the company policies.

Your joining has been made based on information furnished by you. However, if there is a discrepancy in the copies of documents or certificates given by you as proof of the above, we retain the right to review our offer of employment.

Request you to bring along the below-mentioned documents at the time of joining.

- Passport size Photograph (2 copies)
- Copy of PAN card
- Copy of Aadhar Card
- Copy of Education certificates (SSC/SSC/Graduation/post-graduation/Diplomas etc.)
- Copy of Employment Service Certificate from the previous employer
- Copy of Salary proof of the previous Employer
- Bank Account Details

Please sign the duplicate copy of this letter as a token of acceptance of the same.

We take this opportunity to welcome you to the organization and hope your association with us will be mutually beneficial.

For, Enkay Ayurvedic Village Pvt. Ltd.



Aji Manoj
PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

ENKAY AYURVEDIC VILLAGE PVT. LTD.

Residential Treatment Centre - Mutha Village, Pandal Salsu, Old Pandal - Bahaman Road, Kozhikode - 673602, Kerala
Email: info@ayurvedavillage.com Website: www.ayurvedavillage.com

Corporate Office - Plot Top Park, 2nd Floor, Sector 59A, Old Vellore Railway Station, New Maruthi - 681002
Tel: +91 9588 946111 Email: info@ayurvedavillage.com

Manassery PO, Makkam, 673602, Kozhikode, Kerala

☎ 0495-229 4664 ✉ ayurveda@kmct.edu.in

🌐 www.kmctayurvedacollege.org



MEMBER OF THE AYURVEDA BOARD OF STANDARDS





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Dr. Ashnas
WELLNESS CLINIC

Dr. Ashnas wellness clinic
Pillathara, Near Anna Masjid
Vilayancode, Kannur - 670504

+917558827714, +917558827715
Info@dr.ashnasclinic.com
www.drashnasclinic.com
Dr./health/wellness-clinic

Name: _____ Age: _____ Height: _____

Weight: _____ Blood Pressure: _____

Dr. VIDYA K. S. (BAMS)
KSMC Reg. No. 27102
Dr. ASHNAS WELLNESS CLINIC
VILAYANCODE, PILATHARA
KANNUR, DI. KERALA - 670504

Ashnas

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Appointment order - HR - R -
Jr. Ayurveda Doctor - Dr. Akhila
Remanan - 07/12/2023. Inbox



Human Resour... 12/7/2023

to me, Joseph, Mana... 🗨️ 🔍 ⌂ ⋮

Dear Dr. Akhila Remanan,

Greetings from The Natika Beach Ayurveda Resort,

With regards to your interview conducted, we would like to inform you that we have decided to select you for the position of Jr. Ayurveda Doctor at Rockholm at the Lighthouse Beach, subsidiary of Natika Beach Resorts Pvt Ltd.

The details of your posting are as follows.

Your monthly remuneration is fixed at Rs. $1,40,000/-$ $1,40,000/-$
The only deductions from the mentioned monthly package will be Provident Fund if you choose to avail it.

The first one year is considered to be the probationary period and you will be eligible for an increment every 6 months depending upon your performance.

We will also provide you with Accommodation and Free Meals in the Staff Cafeteria.

It may also be noted that since we have a Common Tipping System, you will be eligible for Tips.

It must also be noted that as per our company policy you





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എറണാകുളം സിറ്റിയിലെ ഹൈസ്കൂൾ കമ്പൗണ്ട്

കോഴിക്കോട് ഹൈസ്കൂൾ കമ്പൗണ്ട്

കോഴിക്കോട് ഹൈസ്കൂൾ കമ്പൗണ്ട്

കോഴിക്കോട് ഹൈസ്കൂൾ കമ്പൗണ്ട്



Date : 22/04/2024

OFFER LETTER

Dear Dr. Mdhun O.M,

This refers to the interview you had with us, we are pleased to inform you that you have appointed as Residential Medical Officer in Ayurveda ayurveda Pvt Ltd., with immediate effect based on the following terms and conditions:

1. Basic Salary	45,000
Food allowance	5,000
TOTAL	50,000

Above all company will provide single accommodation facility.

2. You will be having two month probation period. If your work is not satisfactory during your probation period the employer have the right to terminate the contract.
3. Your duty time will be 9 hrs per day with one weekly off except Saturdays & Sundays.
4. Your posting will be in any of our Delhi NCR branches.
5. If you desired to leave the company you must need to serve one month notice period.

Duties & Responsibilities:

- Arranging consultations with patients and issuing reminders about the closure to the day of each appointment.
- Conducting screening and diagnostic test to reveal health issues.
- Calming anxious and distressed patients.
- Restoring patient to good health by administering or suggesting interventions such as massage, mindfulness and medicines.
- Informing patients about the functions of each treatments.
- Recording and storing your notes after each consultation.
- Monitoring and evaluating the implications of the treatments.
- Tailoring your approach to treatment based on result obtained if needed.
- Follow the ayurveda suggested consultation methodology.

Dr. Mdhun O.M
 FR
 K M C T
 MEDIC





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Date: 22/04/2024

OFFER LETTER

Dear Dr. Aswani V

This refers to the interview you had with us, we are pleased to inform you that you have appointed as **Residential Medical Officer** in Ayurveda ayurveda Pvt.Ltd., with immediate effect based on the following terms and conditions.

1. Basic Salary	40,000
Food allowance	5,000
TOTAL	45,000

Above all company will provide single accommodation facility.

2. You will be having two month probation period. If your work is not satisfactory during your probation period the employer have the right to terminate the contract.
3. Your duty time will be 9 hrs per day with one weekly off except Saturdays & Sundays.
4. Your posting will be in any of our Delhi NCR branches.
5. If you desired to leave the company you must need to serve one month notice period.

Duties & Responsibilities:

- Arranging consultations with patients and issuing reminders about the closure to the day of each appointment
- Conducting screening and diagnostic test to reveal health issues.
- Calming anxious and distressed patients.
- Restoring patient to good health by administering or suggesting interventions such as massage, mudfulness and medicines
- Informing patients about the functions of each treatments
- Recording and storing your notes after each consultation.
- Monitoring and evaluating the implications of the treatments
- Tailoring your approach to treatment based on result obtained if needed
- Follow the ayurveda suggested consultation methodology.

Aswani V
PRINCIPAL
AYURVEDA
MEDICAL COLLEGE



Manassery PO, Mukkam, 673602, Kozhikode, Kerala

☎ 0495-229 4664 ✉ ayurveda@kmct.edu.in

🌐 www.kmctayurvedacollege.org



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Date :- 06.03.2024

Offer of Employment

Dear Dr. Parvathy Nagesa P P

With reference to your application and subsequent interview with us, we are pleased to offer you the post of "Ayurveda Doctor" in Spc Department on the terms and conditions mutually discussed and agreed between us. You are requested to join duty on or before 08 Mar 2024.

Please confirm your acceptance of the above offer by signing the duplicate copy and returning to us.

We sincerely hope that you will discharge all the responsibilities placed with you to the best of your abilities.

Your detailed letter of appointment shall be given to you on joining duty. Please bring your original copy of testimonials.

I personally and behalf of company welcome you to the "Barsana Hotel & Resort" A unit of Beekay Auto Pvt. Ltd." and look forward to a long association.

Thanking You,


Prasen Kumar Path
General Manager


06/03/24

Signature & Date



Khapral Road, Matigara, Siliguri - 734 010, West Bengal (India)
Tel : (0353) 2571662 / 2571663 / 2571664, Fax : (0353) 2571667
email : info@barsanahotels.com www.barsanahotels.com
A Unit of Beekay Auto Pvt. Ltd.



KMCT

AYURVEDA MEDICAL COLLEGE

Approved by NICSM and Affiliated to Kerala University of Health Sciences.



DR. RAVI'S MULTISPECIALTY CLINIC

Dr. Ravi's MultiSpecialty Clinic

No. 11/2, 1st Floor, Sarajon
Marathahalli Rd, Doddaballapur,
Bangalore, Karnataka - 560031

Date: 05/04/2023

DEAR DR. RASHA

I am pleased to extend an offer of employment to you as a DUTY DOCTOR at **DR. RAVI'S MULTISPECIALTY CLINIC**, located in Bangalore. We have carefully reviewed your qualifications, experience, and skills, and we believe that you will make a valuable addition to our team.

We are excited to have you join our clinic, and your employment will commence on **17th MARCH 2023**. As a **Duty Doctor**, you will play a crucial role in providing holistic healthcare services to our esteemed clientele. We are confident that your expertise and dedication to the principles of Ayurveda will contribute significantly to the well-being of our patients.

Details of the employment offer are as follows:

- Position: DUTY DOCTOR
- Commencement Date: 17th MARCH 2023
- Salary: INR 20,000 per month

Benefits:

- Free accommodation on site
- Additional benefits as per company policy

As an employee of **DR. RAVI'S MULTISPECIALTY CLINIC**, you will be expected to perform the following key responsibilities:

- Conducting thorough assessments of patient's health conditions and developing personalized treatment plans.
- Administering various therapies and treatments to patients as prescribed.
- Maintaining accurate and up-to-date records of patients' progress and treatment plans.
- Adhering to all relevant legal and ethical guidelines.

We offer a supportive and inclusive work environment where you will have opportunities for professional growth and development. We value your dedication and commitment to medical principles and will provide you with the necessary resources to enhance your skills and knowledge.

To accept this offer, please sign and return a copy of this letter, indicating your acceptance of the terms and conditions outlined above, by **05/04/2023**. If you have any questions or require further clarification, please do not hesitate to contact me at **+919886809999**.

We eagerly anticipate your favorable response and look forward to welcoming you to our team at **DR. RAVI'S MULTISPECIALTY CLINIC**.

Sincerely,
For and on behalf of
DR. RAVI'S MULTISPECIALTY CLINIC
Dr. Ravi (Doctor)

Authorized Signatory

Dr Rasha

PRINCIPAL
KMCT AYURVEDA
MEDICAL COLLEGE





KMCT

AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.

**കാസർഗോഡിന് ഇതി
മംഗലാവൃതത്ത് യോജ്യാ !**

ashly

ബഹിരാകാശം • അസ്തിമം • ചിന്തയും • ഹൃദയം
സമഗ്രത • മൃതശല്യം • PCOD • കൊളെസ്റ്ററോൾ
മുഖം • ടൈഫോയിഡ് • നവീന നവീന

പാർശ്വവേദനകൾക്കും ചികിത്സ

ഈ 3 ഡോക്ടർമാർക്ക്
പ്രത്യേകം
മുറകളുണ്ട്

കുടുംബം അംഗങ്ങൾക്കും സൗകര്യം

ashly MULTISPECIALITY
CLINIC

Ph: +91 92 288 744 28
അതിർവരമ്പിനടുത്തുള്ള
New Building **RAMA MOO**
www.ashlykerala.com

Ashly
PRINCIPAL
KMCT AYURVEDA
MEDICAL COLLEGE





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.



योग प्रमाणन बोर्ड



Yoga Certification Board

Certificate

SMT. AYISHA SUHAILA

is hereby certified as

Yoga Teacher & Evaluator



by

The Yoga Certification Board

under

the voluntary certification of yoga professionals,
Ministry of Ayush, Government of India

Certificate No.: PG30042343
Validity Period: From 00-jun-2024 to 07-jun-2025
Evaluated by: Indian Yoga Association

(The validity of the certificate depends on the certified professional's continued compliance to prescribed competency standards and rules and regulations prescribed by the ICB for Yoga professionals.)

Authorized Signatory
Indian Yoga Association

Dr. S.P. Madhu
ICB, IYB PACE

Indian Yoga Association,
2d Floor, Amalakkudi Street No. 1, 68-201, Sector 50,
S.B. Nagar, Kozhikode, Kerala - 683002.



Issuing Date: 08-jun-2024

Authorized Signatory
Yoga Certification Board

Sushrutha Sankarapad,
Head of Institution,
Yoga Certification Board,
Ministry of Ayush, Govt. of India,

Yoga Park Road, Taramani, Chennai - 600081
New Delhi - 110002





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.



KERALA STATE MEDICAL COUNCIL (THE COUNCIL OF INDIAN SYSTEMS OF MEDICINE) CERTIFICATE OF PROVISIONAL REGISTRATION



Registration No: 1500
 Name: RISHIKA S
 Qualification: B.A.S INDIAN SYSTEMS OF MEDICINE (BAMS) DIPLOMA IN AYURVEDA
 Date of Registration: 15/06/2022
 Address: KMC/AYURVEDA MEDICAL COLLEGE, KUMARANGAL, P.O. KUMARANGAL, DISTRICT, KERALA

This certificate is valid only for undergoing internship in any approved institution as mentioned in Section 26 of the Indian Medical Councils Act, 1956. The candidate should be an internist while applying for permanent registration.

Registration Number

Date: 15/06/2022

C.No: 177/21



Signature of the
 Registrar
 15/06/2022

Note: 1. This certificate is valid for one year from the date of registration.

2. Submission of this certificate can be verified on applying for work and by using the QR code on the reverse page.

3. This certificate is issued on the basis of address submitted by the candidate for the institution affiliated to this council.

Make the Hospital/Institution Address from Thiruvananthapuram (15/06/2022) (For more details visit the website of the Registrar General's Office, KMC, Kozhikode)

NANDHA
 AYURVEDA MEDICAL COLLEGE AND HOSPITAL
 P.O. 04204 - 222009
STAFF IDENTITY CARD



Dr. RISHIKA SAKETH M.D.(P)
 AYSVD1009
 ASSISTANT PROFESSOR
 BHAKTAVATSALYA

What We Do: BAMS
 National Institute of Engineering College
 Bharat Nagar, Thiruvananthapuram, Kerala
 Phone No: 04704211111 P.O. 04704200778
 0470 - 58 71 1000

SREEDHAREEYAM
 Eye of Ayurveda



Dr. NISHA VAROHESE
 Jr. Medical Officer
 Employee Code : 8703





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NIOSH and Affiliated to Kerala University of Health Sciences

**The Council of Indian Systems of Medicine
Kerala State**



CERTIFICATE OF REGISTRATION



Registration Number	20007
Name	U. SHARDA, SUDHAKARAN
Father's/Guardian's Name	SUDHAKARAN P. M.
Date of Birth	1980-08-01
Professional Address	11, PILLAI, KERALA PUNYAVANASAM, KALASHEET, PONDICHERRY, INDIA
Qualification	B. AYURVEDA (M.D.)
Year of award of	2007
Name of the Institution	AYURVEDA MEDICAL COLLEGE, KMCT
Name of the University	KERALA UNIVERSITY OF HEALTH SCIENCES

I have to certify that the above mentioned person is a graduate of the Kerala State Council of Indian Systems of Medicine, for the Degree of Master of Ayurveda, in the year 2007, at Thiruvananthapuram.

Signature of the Registrar
Date: 14/11/2022
No. 100/20007




REGISTRAR
KERALA AYURVEDA MEDICAL COLLEGE
Kerala State Medical Council
Red Cross Road
Thiruvananthapuram, 695 028

1. Change of address has to be communicated to the Registrar.
 2. Address (Qualification, Year, Institute Name) not correct.
 3. This Certificate is not valid when any person is engaged by the Council of India anywhere.
 4. This Certificate is not valid when the Council is open for transfer of practice or service.
 Kerala State Medical Council, Puthuvayal Road, Thiruvananthapuram-695028, Kerala, India
 Website: www.kmct.edu.in Email: reg@kmct.edu.in Ph: 0495-229-4664



KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number

75666

Name | **Dr. AFEefa K.A**
 Father/Guardian's Name | **ABDUL JABBAR K.M**
 Date of Birth | **14.03.1988**
 Residential Address | **SANGARAPEDUKKAL HOUSE, NORAVALAM, CHENNAIPPET P.O.,
 THIRUVANANTHAPURAM**
 Qualification | **AYURVEDA (B.A.B.S.) BACHELOR OF AYURVEDIC MEDICINE AND
 SURGERY**
 Year of award of Degree | **2022**
 Name of the Medical College | **KMCT AYURVEDA COLLEGE, KODIANGODE**
 Name of the University | **KERALA UNIVERSITY OF HEALTH SCIENCES**

I have to certify that Dr. AFEefa K.A. is registered as a (practitioner) in the (S) Systems of
 Medicine under the Kerala State Medical Practitioners Act, 2021 on the 14th day of November, 2022 at
 Thiruvananthapuram.

Thiruvananthapuram,

Date: 14-11-2022

Sl. No. 436088

Signature of the
 Registrar



REGISTRAR
K.R. BALASUBRAMANI
 REGISTRAR
 Kerala State Medical Council
 Red Cross Road
 Thiruvananthapuram - 695 011

- Information: 1. Change of address must be submitted to the Registrar.
 2. National Qualifications, if any, shall be required to be declared.
 3. The Certificate is not transferable and the fees shall abide by the Code of Ethics applicable.
 4. The Certificate should be surrendered to the Council in case of cessation of practice or demise.

Kerala State Medical Council, Red Cross Road, Thiruvananthapuram - 695011 Kerala, India
 Website: www.medicalcouncil-kerala.gov.in, E-mail: registrar.kmct@kerala.gov.in, Phone: 0471-2507007



KMCT

AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number

26784

Name : Dr R. V. A. R. M.
 Father/Guardian's Name : M. RAJESH K. P.
 Date of Birth : 03-11-1992
 Present Address : K. SURESH, THACHAM, MATHELA P. O. ALICHOODE, MALAPPURAM
 KERALA, PIN-671320
 Qualification : AYURVEDIC MEDICAL BACHELOR OF AYURVEDIC MEDICINE AND
 SURGERY
 Year of Graduation : 2021
 Name of the Medical College : KMCT AYURVEDA COLLEGE, KODIYERU
 Name of the University : KERALA UNIVERSITY OF HEALTH SCIENCES

I hereby certify that Dr. R. V. A. R. M. is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioners' Act, 2021 on the 18th day of December 2023 at Thiruvananthapuram.

Thiruvananthapuram
 Date : 18-12-2023
 S. No. 4487182



REGISTRAR
 K.C.R. HALA USULAMANGALAM
 REGISTRAR
 Kerala State Medical Council
 Med. Officer Road,
 Thiruvananthapuram - 695 001

1. Change of address should be intimated to the Registrar.
2. Additional Qualifications, if any, should be intimated to Registrar.
3. The Certificate is not transferable and its validity shall cease by the time if it is not available.
4. The Certificate should be surrendered to the Council in case of cessation of professional services.

Kerala State Medical Council, Registrar Road, Thiruvananthapuram 695001 Kerala, India
 Website: www.indiansystemsofmedicine.gov.in Email: registration@ksimc.kerala.gov.in Phone: 0471-2452277





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCIAM and Affiliated to Kerala University of Health Sciences

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number
26814

Name: **Dr. Dhama Ashraf**
 Full Name (as in ID Card): **DR.DHAMA ASHRAF M**
 Date of Birth: **11-02-1989**
 Permanent Address: **ANNAMAYYAR MAULI, POTTICHENTHAL, EDUPATHY PD, MALAPPURAM, KERALA, 686133**
 Qualification: **B. AYURVEDACHARYA (MAJOR) OF AYURVEDIC MEDICAL AND SURGERY**
 Year of award of Degree: **2022**
 Name of the Medical College: **KMCT AYURVEDA COLLEGE, KODANAKUDU**
 Name of the University: **KERALA UNIVERSITY OF HEALTH SCIENCES**

I hereby certify that **DR.DHAMA ASHRAF** is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioner Act, 2021 on the 05th day of December 2023 at Thiruvananthapuram.

Thiruvananthapuram
 Date: 05-12-2023
 I No: 412677



REGISTRAR

Sealing of the
 Certificate

K.R. BALABUJARAMANIAN
 REGISTRAR
 Kerala State Medical Council
 Red Cross Road
 Thiruvananthapuram - 686 002

1. Change of address must be communicated to the Registrar.
2. Additional Qualification, if any, should be separately registered.
3. This Certificate is not transferable and the holder shall abide by the Code of Ethics applicable.
4. This Certificate should be surrendered to the Council in case of cessation of practice or death.

Kerala State Medical Council, Red Cross Road, Thiruvananthapuram - 686002 Kerala, India
 Website: www.medicalcouncilkerala.gov.in, Email: register.ksmc@ksmc.gov.in, Phone: office - 0477 2557227



KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCSM and Affiliated to Kerala University of Health Sciences

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number
27661

Name: **Dr. MERVEEN FATIMA**
 Father's/Guardian's Name: **—**
 Date of Birth: **25-03-1985**
 Permanent Address: **MALEELI, PUNJAVATTILAI, HOUSE, APARNA, K.M. ROAD, AYOOR, PIN-686541, DISTRICT AYERHOLE, KERALA, INDIA-686541**
 Qualification: **AYURVEDA BACHCHAN (BACHELOR OF AYURVEDIC MEDICINE AND SURGERY)**
 Year of Award of Degree: **2014**
 Name of the Medical College: **MACT AYURVEDIC COLLEGE, AYOOR**
 Name of the University: **KERALA UNIVERSITY OF HEALTH SCIENCES**

I hereby certify that **Dr. MERVEEN FATIMA** is registered as a practitioner of Indian Systems of Medicine under the Kerala State Medical Practitioners' Act, 2001 on the 27th day of **JUNE 2024** at **Thiruvananthapuram**

This is subject to the
 Date: **27.06.2024**
 S. No: **120595**



REGISTRAR
K. SURESH BABU
 Registrar
 Kerala State Medical Council
 Red Cross Road
 Thiruvananthapuram - 686 001

- Information: - Change of address should be communicated to the Registrar
 1. Address should be notified if any alteration is necessary.
 2. It is subject to the conditions and the conditions stated by the State Medical Council.
 3. This Certificate is valid for continuation for the period of validity of license or permit.

Kerala State Medical Council, Pinnaculum Road, Thiruvananthapuram 686001 Kerala, India
 Website: www.keralastatemedicalcouncil.gov.in / www.keralastatemedicalcouncil.gov.in Phone office: +91 97471 21872/21





KMCT

AYURVEDA MEDICAL COLLEGE

Approved by MCI/WHO and Affiliated to Kerala University of Health Sciences

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number
27043

Name: **Dr. ARJUN PAL A. T.**
 Father/Guardian's Name: **RAJAN A. I.**
 Date of Birth: **20/04/1991**
 Permanent Address: **KUNJATHU THEEDU HOUSE, PULAMBATTA P. O. MALAPPURAM
Kerala, INDIA - 686529**
 Qualification: **AYURVEDASWAMI, BACHELOR OF AYURVEDIC MEDICINE AND
SURGERY**
 Year of award of Degree: **2018**
 Name of the Medical College: **KMCT AYURVEDA COLLEGE, KOTTAYAM**
 Name of the University: **KERALA UNIVERSITY OF HEALTH SCIENCES**

I here by certify that **Dr. ARJUN PAL A. T.** is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioners' Act, 2021 on the 10th day of June 2022.

Practitioner's Signature
Date: 19.06.2022
At: 576332

Signature of the
Registrar

**MOHAMED
N. SUKESH BABU**
Registrar
Kerala State Medical Council
Red Cross Road,
Thiruvananthapuram - 686 001

Information: 1. Change of address must be communicated to the Registrar.

2. National Qualifications, if any, should be appropriately registered.

3. This Certificate is not transferrable and the holder shall abide by the Code of Ethics applicable.

4. This Certificate should be surrendered to the Council in case of resignation or grounds of debarment.

Kerala State Medical Council, Red Cross Road, Thiruvananthapuram-686001 Kerala, India
www.keralastatemedicalcouncil.gov.in, Registrar@keralastatemedicalcouncil.gov.in, Phone: 0471-2522100



KMCT AYURVEDA MEDICAL COLLEGE

Approved by NQMS and Affiliated to Kerala University of Health Sciences

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number

27341

Name : DR. ASHITHA A. P.
Father/Guardian's Name : SHANMUGAIA P.
Date of Birth : 11-10-1991
Permanent Address : MADHUPADU HOUSE, NEDU, PUNAMBA, JALAYANPALLI, SHIRANGU, P.O. KODIMOODU, KERALA, PIN-686202.
Qualification : AYURVEDACHARYA (BACHELOR OF AYURVEDIC MEDICINE AND SURGERY)
Year of Award of Degree : 2014
Name of the Medical College : KMCT AYURVEDIC COLLEGE, KODIMOODU
Name of the University : KERALA UNIVERSITY OF HEALTH SCIENCES

I hereby certify that Dr. ASHITHA A. P. is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioner Act, 2021 on the 10th day of March 2024 at Thiruvananthapuram.

Thiruvananthapuram
 Date: 08-03-2024
 SL No: 4752960



REGISTRAR
SRIHULAL V
 Registrar (M)
 Kerala State Medical Council
 Red Cross Road
 Thiruvananthapuram 695 022

Signature of the
 Candidate

- Information:
1. Change of address must be communicated to the Registrar.
 2. Additional qualifications, if any, should be separately registered.
 3. This Certificate is for 5 years only and its validity shall abide by the Code of Ethics applicable.
 4. This Certificate should be submitted to the Council in case of cessation of practice or demise.

Kerala State Medical Council, Pattom Road, Thiruvananthapuram 695026 Kerala, India
 Website: www.kscimcouncil.org Kerala State Medical Council, Pattom Road, Thiruvananthapuram 695026 Kerala, India
 Phone: 0495-229 4664 Email: ayurveda@kmct.edu.in

Dr. Ashitha A. P.
 08/03/2024
 Thiruvananthapuram





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number
20841

Name : DR. ATHIRA S
 Full Name of the Registrant : DR. ATHIRA S
 Date of Birth : 14-03-1994
 Permanent Address : SUDHAKARANNA, CHALITHOOR RD, S.P. THIRU KATHIRAY ANNYKAL, METTALA, PIN-686202
 Qualification : AYURVEDIC MEDICINE, BACHELOR OF AYURVEDIC MEDICINE AND SURGERY (AMBS)
 Year of award of Degree : 2021
 Name of the Medical College : KMCT AYURVEDA COLLEGE, KODAMBADE
 Name of the University : KERALA UNIVERSITY OF HEALTH SCIENCES

I hereby certify that Dr. ATHIRA S is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioners Act, 1977 on the 13th day of November 2023 at Thiruvananthapuram.

The Registrar
 Date : 13-11-2023
 Dr. K. K. SUDHAKAR



REGISTRAR
 K.K. BALAGURURAMAN
 Registrar
 Kerala State Medical Council
 Red Cross Road
 Thiruvananthapuram - 695 024

Conditions of Registration:

1. Applicant's Qualification, if any, should be correctly given.
2. The Certificate is valid for practice and shall be subject to the Code of Ethics Guidelines.
3. The Certificate is not to be transferred to the Council in case of resignation of practice or death.

Kerala State Medical Council, Red Cross Road, Thiruvananthapuram 695024 Kerala, India
 Phone: +91 9746200000/0471 2231111 Fax: +91 471 2231111 Email: reg@ksmc.kerala.gov.in, info@ksmc.kerala.gov.in



KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCM and Affiliated to Kerala University of Health Sciences

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number
26233

Name : **Dr. ARUNJIT K**
 Father/Guardian's Name : **SUBRAMANIAN K**
 Date of Birth : **25-05-1987**
 Permanent Address : **KILAKKONCHI PARASURAM NOLIC, CHAKKAMADIA, VILLOOR P.O.,
MADAPPURAM, KERALA, INDIA**
 Qualification : **AYURVEDICAPTYA (BACHELOR OF AYURVEDIC MEDICINE WITH
SURGERY)**
 Year of award of Degree : **2023**
 Name of the Medical College : **KMCT AYURVEDA COLLEGE, KODIMON**
 Name of the University : **KERALA UNIVERSITY OF HEALTH SCIENCES**

I hereby certify that **Dr. ARUNJIT K** is registered as a practitioner in the field of Treatment of
Medicine under the Kerala State Medical Practitioners Act, 2021 on the 26th day of July 2023, at
Thiruvananthapuram.

Thiruvananthapuram,
Date : 26-07-2023
Sl. No. 3036443



REGISTRAR
K.R. BALASUBRAMANIAN
REGISTRAR
Kerala State Medical Council
Third Cross Street,
Thiruvananthapuram-695 038

- Important : Change of address must be communicated to the Registrar.
 1. Additional Qualification, if any, should be separately registered.
 2. This Certificate is not transferable and the holder shall abide by the Code of Ethics approved.
 3. This Certificate may be surrendered to the Council in case of cessation of practice or death.

Kerala State Medical Council, Ponnambal Road, Thiruvananthapuram-695022 Kerala, India
 Phone: +91 97461 22222, 46664 Fax: +91 97461 22222 Email: ksmc@ksmc.org.in, ksmc@ksmc.edu.in, Phone/Fax: 0471-222221





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.

**The Council of Indian Systems of Medicine
Kerala State**

CERTIFICATE OF REGISTRATION

Registration Number
2022

Name Dr. ANNA PARVATHI

Physician's Name ANNA PARVATHI

Date of Birth 20/04/1988

Permanent Address 40, SAHAYILLOTTI, ATTAYATTINKANJANPETA, KUCHINGAL PALAYAM, PULAYATHUR, KERALA, INDIA

Qualification B.SURVEDICARVA (BACHELOR OF AYURVEDIC MEDICINE AND SURGERY)

Type of award of Degree B.S.

Name of the Medical College KMCT AYURVEDA MEDICAL COLLEGE

Name of the University KERALA UNIVERSITY OF HEALTH SCIENCES



REGISTRAR
K.R. BALASUBRAMANIAM
Kerala State Medical Council
Red Cross Road,
Thiruvananthapuram - 695 016

I have to certify that Dr. ANNA PARVATHI is registered as a practitioner of Indian Systems of Medicine under the Kerala State Medical Practitioners Act, 2017 on the 14th day of November 2024 at Thiruvananthapuram.

Place of Issuance Thiruvananthapuram
Date 14/11/2024
Sl. No. 410004

Stamp of the Registrar

Remarks

- Change of address must be communicated to the Registrar.
- Additional Qualification, if any, should be (inserted) mentioned.
- The Certificate is not transferable and the holder shall abide by the Code of Ethics applicable.
- The Certificate should be surrendered to the Council in case of cessation of practice in Kerala.

Kerala State Medical Council, Fattoria Road, Thiruvananthapuram - 695016, India
Website: www.ksmc.kerala.gov.in, Email: register@ksmcc.gov.in, Phone: office: 0471-255227

Annam

PRINCIPAL
KMCT AYURVEDA
MEDICAL COLLEGE





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCCM and Affiliated to Kerala University of Health Sciences

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number

2024

Name: **DR. ASMITA CATHERINE P T**

Father/Guardian's Name: **P. A. THARAKAN**

Date of Birth: **08.02.1990**

Permanent Address: **51 THEVENIAVA, 10/227, MARANJUNAKOOTH, CHETHY PE,
MULLUPIYA, KERALA, PIN-686002**

Qualification: **AMBIBHASKARVA GRADUATE OF AYURVEDIC MEDICINE AND
SUSHRUTI**

Type of Award of Degree: **PHD**

Name of the Medical College: **KMCT AYURVEDA COLLEGE, POOYOOR**

Name of the University: **KERALA UNIVERSITY OF HEALTH SCIENCES**

I have by virtue that **DR. ASMITA CATHERINE P T** is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioners' Act, 2001 on the 14th day of November 2021, at Thiruvananthapuram.

Registration Proceeds

Date: **14/11/2021**

Sl. No.: **458608**

Leppan

Signature of the Registrar

Signature of the Registrar

Provisional Certificate of registration shall be discontinued by the Registrar if:

1. Additional qualifications, if any, should be separately registered
2. The Certificate is not surrendered and the holder shall apply for the issue of fresh certificate
3. The Certificate should be surrendered by the holder in case of cessation of practice or death

Kerala State Medical Council, **Palakkad Road, Thiruvananthapuram 686002 Kerala, India**
Website: www.medicallaw.kerala.gov.in, Registration.kam@kerala.gov.in, Phone Office: 0471-2331001

REGISTRAR
K. R. DALASUDRAMAN
KT-3870346
Kerala State Medical Council
Bund Cross Road
Thiruvananthapuram - 686 002



KMCT

AYURVEDA MEDICAL COLLEGE

Approved by NCMH and Affiliated to Kerala University of Health Sciences.

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number:
21987

Name: Dr. ANISLA VIMAR
Father/Guardian's Name: MOULI MOHAMMAD
Date of Birth: 22-05-1989
Permanent Address: CHULLA MAALU, NARAINI ANGARA, MANJUVICHERY P.O. SULLYPOLE,
KURULA, PIN-686022
Qualification: B AYURVEDHOMIYA (BACHELOR OF AYURVEDIC MEDICINE AND
SURGERY)
Year of award of Degree: 2016
Name of the Medical College: KMCT AYURVEDA COLLEGE, KODIANGODE
Name of the University: KERALA UNIVERSITY OF HEALTH SCIENCES

I hereby certify that DR. ANISLA VIMAR is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioners Act, 2021 on the 15th day of May 2024 at Thiruvananthapuram.

Thiruvananthapuram,
Date: 15-05-2024
Dr. No. 4379038



REGISTRAR
BHEEMILLE, V
Registrar
Kerala State Medical Council
West Chingal Road
Thiruvananthapuram, Kerala

- Information 1. Change of address and/or correspondence to the Registrar.
 2. Additional Qualifications, Entry, Status or cessation registration.
 3. The Certificate is not transferable and the holder shall apply to the Council if they apply.
 4. The Certificate should be surrendered to the Council in case of cessation of practice or death.

Kerala State Medical Councils, Puthussery Road, Thiruvananthapuram 686022 Kerala, India
 Website: www.kmctcouncils.kerala.gov.in, Email: register@cmo@kerala.gov.in, Phone office: 0471-2487227





KMCT

AYURVEDA MEDICAL COLLEGE

Approved by NISM and Affiliated to Kerala University of Health Sciences.

**The Council of Indian Systems of Medicine
Kerala State**



CERTIFICATE OF REGISTRATION



Registration Number	2024
Name	Dr. TRISHNEEM
Father/Guardian's Name	RAMSHEKHAR SHANKAR P
Date of Birth	11-04-1999
Presented Address	PO: KALATHYTHUR, VILLAGE: KALATHYTHUR, MALLAPATTIL P.O. THIRUVARUR, KERALA, INDIA-626001
Qualification	B.AYURVEDIYATHA SHAKHILEM OF AYURVEDIC MEDICINE AND SURGERY
Year of Award of Degree	2021
Name of the Awarding College	KMCT AYURVEDA COLLEGE, KOTHIBODE
Name of the University	KERALA UNIVERSITY OF HEALTH SCIENCES

I hereby certify that **Dr. TRISHNEEM** is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioners Act, 2021 on the 15th day of December 2023 at Thiruvananthapuram.

Valid up to: 15-12-2027
U. No.: 2024/2023


REGISTRAR
K.R. BALASUBRAMANIAM
 REGISTRAR
 Kerala State Medical Council
 Red Cross Road
 Thiruvananthapuram, Kerala



Information:

- Change of address has to be submitted to the Registrar.
- Additional Qualification, if any, should be separately reported.
- This Certificate is not transferable and the holder shall abide by the Code of Ethics applicable.
- This Certificate should be surrendered in the Council in case of cessation of practice or death.

Kerala State Medical Council, Thiruvananthapuram, Kerala. Telephone: 0471-2522222
 Website: www.keralastatemedicalcouncil.gov.in Email: ksmc@keralastatemedicalcouncil.gov.in. Phone office: 0471-2522222





KMCT

AYURVEDA MEDICAL COLLEGE

Approved by NCIHA and Affiliated to Kerala University of Health Sciences

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION

Registration Number	27465
----------------------------	-------

Name : DR. NIDA MAJEED

Father's/Spouse's Name : MAJEED A.R

Date of Birth : 28-10-1988

Permanent Address : 11/11, KODIYANNAKAL HOUSE, KODIYANNAKAL PO, CHEVAYUR, MANNASSERY, KOZHIKODE, KERALA, PIN 673602

Qualification : AYURVEDACHARYA (BACHELOR OF AYURVEDIC MEDICINE AND SURGERY)

Year of award of Degree : 2021

Name of the Medical College : KMCT AYURVEDA COLLEGE, KODIYANNAKAL

Name of the University : KERALA UNIVERSITY OF HEALTH SCIENCES



I hereby verify that Dr. NIDA MAJEED is registered as a Broad-based qualified Specialist in Ayurvedic Medicine under the Kerala State Medical Practitioners' Act, 2021 on the 15th day of March 2024 at Thiruvananthapuram.

Registration Number
Date : 15-03-2024
Sl. No. 4757345



REGISTRAR
SHIBULAL P
Registrar (A)
Kerala State Medical Council
Red Cross Road
Thiruvananthapuram, Kerala

Information:

- Change of address must be communicated to the Registrar.
- Additional Qualification, if any, should be intimated to the Registrar.
- This certificate is not transferable and the holder shall issue to the Council of Indian Systems of Medicine.
- This certificate should be surrendered to the Council in case of suspension or revocation of practice.

Kerala State Medical Council, Red Cross Road, Thiruvananthapuram 670002, Kerala, India
Website: www.kmct.ac.in | Email: info@kmct.ac.in | Phone: 0495-229 4664





KMCT

AYURVEDA MEDICAL COLLEGE

Approved by AICTE and Affiliated to Kerala University of Health Sciences

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number
27081

Name : DR. MEDINA ANAND P
 Father/Guardian's Name : K. ANAND P
 Date of Birth : 20-11-1987
 Permanent Address : K/201 HEVSE, SLANGIYAR, CHERUJUVLOOR PO, MALAYURMAL, KERALA
 PIN-612602
 Qualification : AYURVEDACHARYA (BACHELOR OF AYURVEDIC MEDICINE AND
 SURGERY)
 Year of award of Degree : 2023
 Name of the Medical College : KMCT AYURVEDA COLLEGE, KODIYANUR
 Name of the University : KERALA UNIVERSITY OF HEALTH SCIENCES

I bear by certify that DR. MEDINA ANAND P is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioners' Act, 2021 on the 18th day of January 2024 at Thiruvananthapuram.

Thiruvananthapuram,
 Date : 18-01-2024
 SL No: 4412811



REGISTERED
K.R. BALASUBRAMANIAN
 REGISTRAR
 Kerala State Medical Practitioners
 Red Cross Road
 Thiruvananthapuram, KERALA

NOTICE OF THE
 COUNCIL

1. Change of address must be communicated to the Registrar.
2. Additional qualifications, if any, should be promptly reported.
3. This Certificate is not transferable and the holder shall abide by the Code of Ethics applicable.
4. This Certificate should be surrendered to the Council in case of cessation of practice or service.

Kerala State Medical Councils, Red Cross Road, Thiruvananthapuram 695005 Kerala, India
www.medicallcouncils.kerala.gov.in Email: info@kscm.gov.in Phone: 0471-2807111





KMCT AYURVEDA MEDICAL COLLEGE

Approved by M.B.V. and Affiliated to Kerala University of Health Sciences

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION

Registration Number
28818



Name : **Dr. Megha, KRISHNAN**
 Father/Guardian's Name : **S. P. KRISHNAN**
 Date of Birth : **22.08.1996**
 Permanent Address : **ELIDOPPAM, HOUSE CHITTAUVY P.O. PULYERUVA,
 MANGALAM, THIRUVARUR, DISTRICT, KERALA, PIN-605001**
 Qualification : **AYURVEDACHARYA BACHELOR OF AYURVEDIC MEDICINE AND
 SURGERY**
 Year of award of Degree : **2023**
 Name of the Medical College : **KMCT AYURVEDA COLLEGE, KULSHRJOOR**
 Name of the University : **KERALA UNIVERSITY OF HEALTH SCIENCES**

I hereby certify that **Dr. MEGHA KRISHNAN** is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioners Act, 2021 on the 20th day of November 2023 at Thiruvananthapuram.

The Registrar
 Date : 20-11-2023
 St. No. 4302508

Signature of the Registrar



REGISTRAR
K.R. BALA SUBRAMANIAM
 Registrar
 Kerala State Medical Council
 Sea View Road
 Thiruvananthapuram - 695 017

- Notations:
1. Change of address must be communicated to the Registrar.
 2. Address/Qualification, if any, should be reported regularly.
 3. This Certificate is not transferable and its holder shall abide by the Code of Ethics stipulated.
 4. This Certificate shall be surrendered to the Council's care if cessation of practice is desired.

Kerala State Medical Council, P.O. Box 2801, Thiruvananthapuram 695028 Kerala, India
 Website: www.kscmcbasedonmca.gov.in, Email: registration.kscmcb@kscmcb.org.in, Phone: office - 0471-2827227



The Council of Indian Systems of Medicine
Kerala State



CERTIFICATE OF REGISTRATION



Registration Number
26809

Name : Dr. MURSHIDA IRFANA K.
Father/Guardian's Name : KOYARLITTY, K.
Date of Birth : 13-03-1997
Permanent Address : KODANGATTARA (in SHANMUGA, NEELU, VALLURUPINGI) NORTH PG, MALAPPURAM, KERALA, PIN-873314
Qualification : AYURVEDACHARYA (BACHELOR OF AYURVEDIC MEDICINE AND SURGERY)
Year of award of Degree : 2021
Name of the Medical College : KMCT AYURVEDA COLLEGE, KOZHIKODE
Name of the University : KERALA UNIVERSITY OF HEALTH SCIENCES

I have to certify that Dr. MURSHIDA IRFANA K is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioners' Act, 2001 on the 22nd day of December 2023 at Thiruvananthapuram.

Thiruvananthapuram,
Date - 22-12-2023
Sl. No. 4522925



REGISTRAR

K.R. BALASUBRAMANIAN
REGISTRAR
Kerala State Medical Council
Rajiv Gandhi Road
Thiruvananthapuram - 695 015

STRUCTURE OF THE
COUNCIL

1. Change of address must be communicated to the Registrar.
2. Additional Qualifications, if any, should be separately registered.
3. This Certificate is not transferable and its holder shall abide by the Code of Ethics applicable.
4. This Certificate should be submitted to the Council in case of resignation of practice or death.

Kerala State Medical Council, Palarossa Road, Thiruvananthapuram 695016 Kerala, India
 Website: www.medicalcouncil.kerala.gov.in, Email: registrar.kmct@kumc.edu.in, Phone: 0471 2557127




KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCDM and Affiliated to Kerala University of Health Sciences.

**Council of Indian Systems of Medicine
Kerala State**

CERTIFICATE OF REGISTRATION

Registration Number
27048



Name	Dr. ARADHANA NAIR
Father/Guardian's Name	K. NATARAJAN
Date of Birth	19-08-1988
Permanent Address	KONGIL HOUSE, CHEERU/Thalassery, NEELAMPURA PO, THIRUVAR KERALA, 686792
Qualification	AJURVEDICACHARYA BACHELOR OF AYURVEDIC MEDICINE AND SURGERY
Year of award of Degree	2021
Name of the Medical College	KMCT AYURVEDA COLLEGE, KODIYOOR
Name of the University	KERALA UNIVERSITY OF HEALTH SCIENCES

I hereby certify that Dr. ARADHANA NAIR is registered as a practitioner in Indian Systems of
Medicine under the Kerala State Medical Practitioners' Act, 2021 on the 08th day of January 2024 at
Thiruvananthapuram.

The year of registration:
Date: 08-01-2024
Sl. No. 43628/4




REGISTERED
K.R. BALASUBRAMANIAM
REGISTRAR
Kerala State Medical Council
867 Cross Road
Thiruvananthapuram - 695 002

Information:

1. Change of address must be communicated to the Registrar.
2. Additional Qualifications, if any, should be submitted to the Registrar.
3. The Certificate is non-transferable and the holder shall abide by the Code of Ethics applicable.
4. The Certificate should be surrendered to the Council in case of cessation of practice or demise.

Kerala State Medical Council, Redcross Road, Thiruvananthapuram 695002, Kerala, India
Website: www.KMCTAyurveda.edu.in | Email: register@kmsa.gov.in | Phone office: 0471 2582217





KMCT
AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.

ACADEMIC YEAR
2022-23





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.



Dr. Shakeer's Ortho Care

Ayurveda & Sports Injury Speciality Centre

Main Road, Avelam, **POONOOR**
Thachampoyil PO
Kozhikode - 673 573.
Ph: 9446423960, 8301836200

മുഖ്യ ഡോക്ടർമാർ

Dr. MUHAMMED SHAKEER A. E.

BAMS

Fellowship in Orthopedic Rehabilitation

Trained from Apollo Medicals

Hyderabad.

Reg.No.: 12424

Dr. SALEEM CHELATHADAN

BAMS

Fellowship in Sports Rehabilitation

Reg.No.: 12001

സഹായ ഡോക്ടർമാർ

Dr. RUKSANA P.K. ✨ BAMS

Reg.No.: 20217

Dr. LULU MUMTHAZ BAMS

Reg.No.: 24773

അധികാരികളും സഹായ ഡോക്ടർമാരും

**Dr. LUKMANUL HAKEEM
KALATHINGAL** BAMS, CSM

Reg.No.: 15187

Dr. MUHAMMED SAFEER P. I.
BAMS MD

Reg.No.: 11653

സഹായ ഡോക്ടർമാർ

Dr. BASIMA A. P. BAMS, M.D.

Reg.No.: 10434

Name: _____ M.I. No. _____

Age: Date: _____



◆ സമയം : 10 AM TO 1 PM, 4PM TO 8 PM. ◆ ഡോക്ടർമാർക്ക് സൗകര്യം ഒരുങ്ങിയിട്ടുണ്ട്. ◆ ഞായറും പൊതുവേദികയും അടച്ചിട്ടുണ്ട്. ◆ ഞായറും പൊതുവേദികയും അടച്ചിട്ടുണ്ട്. ◆ ഞായറും പൊതുവേദികയും അടച്ചിട്ടുണ്ട്. ◆ 8301 836 200, 9446 423 940





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISA and Affiliated to Kerala University of Health Sciences



AYURVEDA, B Block
KPC Complex P.O.
New Delhi-110023
India. No. 011-2610 3011

To,

The President
KMCT Ayurveda Medical College

Re,

Offer of appointment for the post of Assistant Professor (Research Officer) (Ayurveda) (Senior) in the Dept. Level II of the period one month as per 1st CPC pay matrix and scale of Rs. 15600-21200 (78.0) with Grade pay of Rs. 14000 plus DDA - etc.

The candidate,

I am directed to say that on the recommendations of the Local Staff Selection Commission, the President is pleased to offer you appointment to the post of Assistant Professor (Ayurveda) Research Officer (Senior) in the Central Government Health Scheme (CGHS) under the Ministry of Health, Government of India at the following terms and conditions:

- The post is temporary and you will be appointed on an ad-hoc basis only. You will be on probation for a period of one year from the date of appointment, which may be extended at the discretion of the competent authority. The continuation will be after successful completion of probationary period. Failure to complete the period of probation to the satisfaction of the competent authority will render you liable to be discharged from service at any time without any notice and without any reason. After the satisfactory completion of the period of probation, the continuation of the appointment will be after giving three months' notice on either side. The appointing authority reserves the right to terminate your services at any time without any explanation of the stipulated period of notice by making you liable to the same appointment to the pay and allowances for the period of notice in the temporary period during.



20/11/2023

Sl. No.	Name	Grade	Pay Band	Grade Pay	DA	MA	TA	Special Allowance	Dearness Allowance	Dearness Relief	House Rent Allowance	Medical Allowance	Conveyance Allowance	Telephone Allowance	Travel Allowance	Other Allowances	Total
1	Dr. [Name]	AS-1	15600-21200	14000	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%

For and on behalf of the President
[Signature]

20/11/2023

Sl. No.	Name	Grade	Pay Band	Grade Pay	DA	MA	TA	Special Allowance	Dearness Allowance	Dearness Relief	House Rent Allowance	Medical Allowance	Conveyance Allowance	Telephone Allowance	Travel Allowance	Other Allowances	Total
1	Dr. [Name]	AS-1	15600-21200	14000	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%

20/11/2023


Sl. No.	Name	Grade	Pay Band	Grade Pay	DA	MA	TA	Special Allowance	Dearness Allowance	Dearness Relief	House Rent Allowance	Medical Allowance	Conveyance Allowance	Telephone Allowance	Travel Allowance	Other Allowances	Total
1	Dr. [Name]	AS-1	15600-21200	14000	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%

Sl. No.	Name	Grade	Pay Band	Grade Pay	DA	MA	TA	Special Allowance	Dearness Allowance	Dearness Relief	House Rent Allowance	Medical Allowance	Conveyance Allowance	Telephone Allowance	Travel Allowance	Other Allowances	Total
1	Dr. [Name]	AS-1	15600-21200	14000	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%




KMCT
AYURVEDA MEDICAL COLLEGE


Approved by NIOSA and Affiliated to Kerala University of Health Sciences



Himalaya Ayurvedic
RETREAT CENTRE
PERUNNA P.O., CHANGANACHERRY




Dr. Sajitha S A Jaleel
BAMS
Sandeep S Nair



Proprietor

himalayaayurvedicr@gmail.com
Mob : 91 62384 38394





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.





KMCT
AYURVEDA MEDICAL COLLEGE

www.ttmoushadhasala.com

മുടിയുടെ | മടി കാര്യത്തിൽ | വേണ്ട



PRP & GFC TREATMENT

പുരോഗാട്ടുപാടത്തു

Dr Asla Haideralikhon
BSc, BAMS, FMC, FSR
Skin And Hair Specialist



TTM Ayurveda
Skin & Hair Care Clinic

N.K. Plaza, Chulliyode Road, POOKOTTUWADAM

FOR BOOKING : 04931 262 005 , 9645 780 124

Head Office: TTM Oushadhasala
Pullangode, Kalkavu, Malappuram Dt., Kerala



TRUST & LIFE
2002 PIONEER PRACTICE
CERTIFIED MEMBER: AYURVEDA



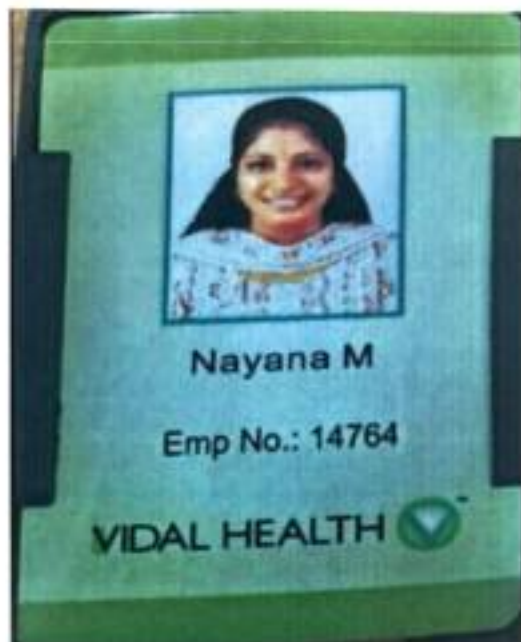
Manassery PO, Makkam, 673602, Kozhikode, Kerala
☎ 04931262 4664 88 ayurveda@kmct.edu.in





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.



Santhya





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences

KRISHNENDU
AYURVEDA
Since 1908

Dr. ARYA KRISHNAN
ID NO: D004

Manassery PO., Ph: 0479 2486337, Web: www.krishnendu.edu.in

Handwritten signature and stamp

Manassery PO, Mulkam, 673602, Kozhikode, Kerala

☎ 04964049 4664 ✉ ayurveda@kmct.edu.in

🌐 www.krishnendu.edu.in





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.

ATHMA AYUR CARE
OLAPEDKA, TANUR
Mob: 9874781487

Dr. NIMISHA.P
BAMS, CDY
Consultant Physician
Reg No. 25351

Name:	Age:	Sex:	Date:
-------	------	------	-------

Prescribing Consultant *R*

Diagnosis

Prescription



Nimisha
PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE



KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.



Dr. Gopika T. Panicker, B.A.M.S.
Reg. No. 25369

Ph: 9778797959

Date _____

Name _____ Age _____ Sex _____

Rx



INNOVATION AND
ENTREPRENEURSHIP





KMCT
AYURVEDA MEDICAL COLLEGE



KMCT
AYURVEDA MEDICAL COLLEGE



Dr.Sharon P Vals
Associate Professor
EMP. No: 5502



Sharon

Authorised Signatory





KMCT
AYURVEDA MEDICAL COLLEGE





KMCT
AYURVEDA MEDICAL COLLEGE



J. S. Ayurved Mahavidyalaya

College Road, Nadiad-387 001. (Gujarat) INDIA

Tele : 0268-2520724

LECTURER



Dr. Amal Thomas



B. Lakshmi

Card Holder Sign

Issuing Authority



KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.



सत्यमेव जयते

Annexure B

GSTIN	32AAJCT092P1ZU
Legal Name	TELEGREEN PRIVATE LIMITED
Trade Name, if any	TELEGREEN PRIVATE LIMITED

Details of Managing / Whole-time Directors and Key Managerial Persons

1		Name	DONY MANUEL
		Designation/Status	DIRECTOR
		Resident of State	Kerala
2		Name	ROSAN CHACKO
		Designation/Status	DIRECTOR
		Resident of State	Kerala



Lohithan
PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE



KMCT AYURVEDA MEDICAL COLLEGE

Approved by NIOSM and Affiliated to Kerala University of Health Sciences.

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number

24155

Name

Dr ANAS POOKKATIL

Father/Guardian's Name

MR. ANANT K.P.

Date of Birth

11-04-1987

Permanent Address

POORAYIL, VILLAGEM, P.O. THODUPUZHA, THIRUVANANTHURAI,
MALAPPRAM DISTRICT, PIN-686107

Qualification

AYURVEDACHARYA (DIPLOMA) OF AYURVEDIC MEDICINE AND
SURGERY

Year of Award of Degree

2022

Name of the Medical College

KMCT AYURVEDA MEDICAL COLLEGE, THIRUVANANTHURAI

Name of the University

KERALA UNIVERSITY OF HEALTH SCIENCES

I have to certify that Dr ANAS POOKKATIL is registered as a practitioner in Indian Systems of
Medicine under the Kerala State Medical Practitioners Act, 2021 on the 28th day of May, 2022.

Thiruvananthapuram

Thiruvananthapuram

Date: 28-05-2022

Sl. No. 225/1918



Dr. Anas Pookkattil
REGISTRAR
&
GRANDY, T.S.
20/1/2022

SMALLTOWN MEDICAL CHAMBER
202-2022 ROAD
THIRUVANANTHAPURAM-686002

Signature of the
Registrar

Information: 1. Change of address must be communicated to the Registrar

2. Additional Qualifications, if any, should be submitted to the Registrar

3. This Certificate is for individuals, and the holder shall abide by the Code of Ethics written

4. This Certificate should be surrendered to the Council in case of violation of code of ethics.

Kerala State Council of Health Sciences, Medicine Road, Thiruvananthapuram 686008 Kerala, India
Website: www.kmctayurveda.com/kmct.edu.in Email: reg@kmsi.kerala.gov.in Phone: 0471-2411071





The Council of Indian Systems of Medicine
Kerala State



CERTIFICATE OF REGISTRATION



Registration Number
26317

Name Dr. NISHILA N K
Father/Guardian's Name A V ANJANLAL
Date of Birth 20 11 1980
Permanent Address 14801A, THILASHANMUKH, PAMAKULAM ROAD, MANJURUWU, KOZHICODI, KERALA, PIN 686012
Qualification 4 YEAR BACHELOR'S DEGREE IN AYURVEDA MEDICINE AND SURGERY
Year of Award of Degree 2022
Name of the Medical College KMCT AYURVEDA COLLEGE, KOZHICODI
Name of the University KOTLA UNIVERSITY OF HEALTH SCIENCES

I hereby certify that Dr. NISHILA N K is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioners' Act, 2001 on the 28th day of March 2023, at Thiruvananthapuram.

Thiruvananthapuram
Date - 29-03-2023
G. No. 200050



REGISTRAR
K.R. BALASUBRAMANIAM
REGISTRAR
Kerala State Medical Councils
Red Cross Road
Thiruvananthapuram - 686 036

SIGNATURE OF THE CANDIDATE

- Important:**
- Change of address must be communicated to the Registrar
 - Additional Qualification, if any, should be separately registered
 - This Certificate is not transferable and the holder shall abide by the Code of Ethics regulations
 - This Certificate should be surrendered to the Council in case of cessation of practice or demise.

Kerala State Medical Councils, Red Cross Road, Thiruvananthapuram-686036 Kerala, India
 Website: www.medicalcouncils.kerala.gov.in, Email: registrar.ksmc@kerala.gov.in, Phone: office - 0471-2557227



KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCM&I and Affiliated to Kerala University of Health Sciences

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number
25348

Name : **DILKOPAN, B**
 Father/Guardian's Name : **CHANDRAN, S**
 Date of Birth : **30/06/1980**
 Permanent Address : **105/1, GALATHI HOUSE, KODUNGODD, P.O., MALLAPPURAM, KERALA, PIN- 686102**
 Qualification : **AYURVEDIC DIPLOMA (BACHELOR OF AYURVEDIC MEDICINE AND SURGERY)**
 Year of award of Degree : **2007**
 Name of the Medical College : **KMCT AYURVEDA COLLEGE, KODUNGODD**
 Name of the University : **KERALA UNIVERSITY OF HEALTH SCIENCES**

I have to certify that **DILKOPAN, B** is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioners' Act, 2001 on the 08th day of March 2023 as illustrated against

This certificate is valid,
Date : **08-03-2023**
S. No. **3030435**



K.R. BALAKRISHNAN
REGISTRAR
 Kerala State Medical Council
 First Floor, Room
 Thiruvananthapuram - 695 002

Approved by the
COUNCIL



Information : Change of address must be communicated to the Registrar

- 1. Addressed Qualification / Category should be separately registered.
- 2. You furnished a self-attestation and the same shall also be by the State if there applicable.
- 3. This Certificate should be surrendered to the Council in case of cessation of practice or death.

Name State Medical Council, KODUNGODD, First Floor, Room 080201, Kerala, India
 Website: www.kscmi.kerala.gov.in, Email: register@kscmi.kerala.gov.in, Phone: office - 0471-2801327





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCDIM and Affiliated to Kerala University of Health Sciences



The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number
26388

Name: **Dr. Abhinav Balakrishnan**
 Father/Guardian's Name: **Abhinava Kumar K**
 Date of Birth: **26-11-1995**
 Permanent Address: **AKKAS PETA, MURUKKUNNELL, MURUKKUNNELL P.O., MALAPPURAM DISTRICT, PIN 576303**
 Qualification: **AYURVEDACHARYA (BACHELOR OF AYURVEDIC MEDICINE AND SURGERY)**
 Year of Award of Degree: **2017**
 Name of the Medical College: **KMCT AYURVEDA COLLEGE, KODIYOOR**
 Name of the University: **KERALA UNIVERSITY OF HEALTH SCIENCES**

I hereby certify that **Dr. Abhinav Balakrishnan** is registered as a member of the Kerala State Council of Indian Systems of Medicine under the Kerala State Medical Practitioners Act, 2021 on the 29th day of March 2023 at Thiruvananthapuram.

Thiruvananthapuram
 Date: 29-03-2023
 S. No: 2071/2023

Signature of the Registrar



REGISTRAR

K.R. BALAKRISHNAMOORTHY
 REGISTRAR
 Kerala State Medical Councils
 Red Cross Road
 Thiruvananthapuram - 695 002

1. Change of address shall be communicated to the Registrar.
2. Additional Qualifications, if any, should be separately registered.
3. This Certificate is not transferable and the holder shall abide by the Code of Ethics prescribed.
4. This Certificate should be surrendered to the Council in case of cessation of practice as directed.

Kerala State Medical Councils, Red Cross Road, Thiruvananthapuram 695002 Kerala, India
 Website: www.keralamedicalcouncils.gov.in, Email: register@kmsc.kerala.gov.in, Phone: 0471-4207107



KMCT

AYURVEDA MEDICAL COLLEGE

Approved by NCTM and Affiliated to Kerala University of Health Sciences

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number
29973

Name: **Dr. NEHA KAREEM C.P**
 Father/Guardian's Name: **ABU L. KAREEM C.P**
 Date of Birth: **14-11-1996**
 Permanent Address: **C. P. ROAD, SHANMUGHAN, ANJALIES P. O. MALAPPURAM, KERALA, PIN-673008**
 Qualification: **AYURVEDICARTS BACHELOR OF AYURVEDIC MEDICINE AND SURGERY**
 Year of award of Degree: **2020**
 Name of the Medical College: **KMCT AYURVEDA COLLEGE, KODIMON**
 Name of the University: **KERALA UNIVERSITY OF HEALTH SCIENCES**

I hereby certify that Dr. NEHA KAREEM C.P is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioners' Act, 2021 on the 26th day of May 2023 at Thiruvananthapuram.

Thiruvananthapuram:
Date: 26-05-2023
Sl. No: 2620K1



REGISTRAR
K.R. BALASUBRAMANIAM
REGISTRAR
Kerala State Medical Council
Ravi Cross Road
Thiruvananthapuram - 695 001

Signature of the Registrar

- Intimations / Change of address must be communicated to the Registrar:
 1. Additional Qualifications, if any, should be separately registered.
 2. The Certificate is non-transferable and the holder shall abide by the Code of Ethics applicable.
 3. The Certificate should be surrendered to the Council in case of cessation of practice or demise.

Kerala State Medical Council, Rameswari Road, Thiruvananthapuram 695002 Kerala, India
 Website: www.medicallcouncil.kerala.gov.in, Email: registration@kstmco.gov.in, Phone office: 0471-2617227



The Council of Indian Systems of Medicine
Kerala State



CERTIFICATE OF REGISTRATION



Registration Number

23261

Name : D. SREERAVATH, K.C.
 Father's/Janaka's Name : SURESH K.
 Date of Birth : 02-07-1986
 Permanent Address : MATHEWUPPA, POOLADUVALIL, ERUMBILATHAL, P.O. KODUMBE, KERALA
 PIN-673301
 Qualification : B. AYURVEDA (M.D.) BACHELOR OF AYURVEDA MEDICINE AND
 SURGERY
 Year of Award of Degree : 2022
 Name of the Medical College : KMCT AYURVEDA COLLEGE, KODUMBE
 Name of the University : KERALA UNIVERSITY OF HEALTH SCIENCES

I hereby certify that Dr. SREERAVATH, K.C. is registered as a graduate in Indian Systems of Medicine under the Kerala State Medical Practitioners Act, 2001 on the 05th day of March 2023 at Thiruvananthapuram.

Thiruvananthapuram
 Date : 23-03-2023
 SL No. 3347770



REGISTRAR
K.R. SALASUBRAMANIAM
 REGISTRAR
 Kerala State Medical Council,
 Post Office P.O.
 Thiruvananthapuram - 670 001

Government of Kerala
 2023-24

1. Change of address must be communicated to the Registrar.
 2. Additional Qualification, if any, should be intimated to Registrar.
 3. If Certificate is not valid/revoked and the holder shall apply to the State of Registration for Certificate renewal to take effect to the Council in case of renewal of practice in Kerala.
- State Ayurved Medical Councils, Healers Road, Thiruvananthapuram 670 001 Kerala. In the absence of the above mentioned service you can Enquire/apply to the nearest office. Phone: 0471-251-2000





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NIOSW and Affiliated to Kerala University of Health Sciences

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number
25439

Name : **Dr SHARADHA KOODER**

Father's/Quartern's Name : **MADEEN - A**

Date of Birth : **19 06 1986**

Permanent Address : **PALYADIKKONDIHOLE, KEDAMPYK, VARANCHERU PO., THEEDUR,
KITTALA, PINNACLE**

Qualification : **BACHELOR OF AYURVEDIC MEDICINE AND
SURGERY**

Year of award of Degree : **2012**

Name of the Medical College : **KMCT AYURVEDIC COLLEGE, KOTTAYAM**

Name of the University : **KERALA UNIVERSITY OF HEALTH SCIENCES**

I have to certify that **Dr SHARADHA KOODER** is registered as a practitioner of Indian Systems of Medicine under the Kerala State Medical Practitioners Act 2011 on the 30th day of *March* in the year of *2012* at *Thiruvananthapuram*.

This certificate is valid from **30-03-2012**
SL No: **25439/2012**

Signature of the Registrar



REGISTRAR
K.R. BALASUBRAMANIAN
REGISTRAR
Kerala State Medical Councils
Raj Chitra Road,
Thiruvananthapuram - 695 007

Attention: 1. Change of address must be communicated to the Registrar.

2. Renewal/Qualification, if any, should be submitted to the Registrar.

3. The Certificate issued hereafter will be valid only when the date of expiry is reached.

4. The Certificate should be surrendered to the Council in case of resignation/expiration or demise.

Kerala State Medical Councils, Keddampy Road, Theedur Varancheru P.O., Kottayam - 686 007
Website: www.keralastatemedicalcouncils.gov.in, Email: registrar@kmsc.gov.in, Phone: 0471-2543912





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number

20009

Name : SUBASHY A. M.
 Father/Guardian's Name : S. SAGARAN A. M.
 Date of Birth : 19-11-1997
 Particulars Address : ADARSH MEDICAL COLLEGE, WEEVILLOO P.O., THALASSERY, KERALA, PIN-690510
 Qualification : AYURVEDIYANARYA BACHELOR OF AYURVEDIC MEDICINE AND SURGERY
 Year of award of Degree : 2022
 Name of the Medical College : KMCT AYURVEDA COLLEGE, KOSHIKODE
 Name of the University : KERALA UNIVERSITY OF HEALTH SCIENCES

I have by virtue of Dr. SACHIN A. M.'s registration as a practitioner in Indian Systems of Medicine under the Kerala State System of Practitioners Act, 2007 on the 26th day of June 2022 at Thiruvananthapuram.

This is attested on behalf of the Council of Indian Systems of Medicine, Kerala State.
 Date : 28-06-2022
 Tel. No. 2659777



PROCTOR
K. R. BALASUBRAMANIAM
 KERALA STATE
 Manasa Square, 5th Floor, Crossroads,
 Red Cross Road,
 Thiruvananthapuram - 695 024

Information : Change of address must be communicated to the Registrar.
 1. Multiple Qualifications : If any, should be declared on registration.
 2. This Certificate is valid throughout the State and is renewable every three years by the Code of Ethics regulations.
 3. This Certificate should be submitted to the Director in case of suspension of practice or removal.
 Kerala State Medical Council, Rajagopal Road, Thiruvananthapuram 695025 Kerala, India
 Registration number: 20009/2022/2022. For further information contact: 0471 2659777



KMCT

AYURVEDA MEDICAL COLLEGE

Approved by NCSA and Affiliated to Kerala University of Health Sciences.

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number
20782

Name : **Dr. YASHNI K.C**
 Family/Guardian Name : **Ms. Srinivas**
 Date of Birth : **11/01/1991**
 Permanent Address : **KOTTAPPAKALU, HILLS, KOTTAYAM DISTRICT, MALAPPURAM
 DISTRICT, PIN-686102**
 Qualification : **AYURVEDIC BACHELOR OF AYURVEDIC MEDICINE AND
 SURGERY**
 Year of award of Degree : **2023**
 Name of the Medical College : **KMCT AYURVEDIC COLLEGE, KODIKKOT**
 Name of the University : **KERALA UNIVERSITY OF HEALTH SCIENCES**

I here by certify that **Dr. YASHNI K.C** is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioners' Act, 2021 on the 21st day of July 2023, at Thiruvananthapuram.

Thiruvananthapuram,
Date : 21-07-2023
Dr. N. S. SANKAR



K.J. BALASUBRAMANIAM
REGISTRAR
Kerala State Medical Council
Red Cross Road
Thiruvananthapuram, 695 024

Signature of the
Registrar

- Notations: 1. Change of address must be communicated to the Registrar.
 2. Address/Qualification, if any, should be regularly registered.
 3. The Certificate must be renewed, and the holder shall abide by the Code of Ethics applicable.
 4. The Certificate should be surrendered to the Council in case of cessation of practice or death.

Kerala State Medical Council, Periyar Road, Thiruvananthapuram-695024 Kerala, India
 Website: www.kmct.ac.in/colleges/ksmct; Email: ksmtc@ksmct.ac.in; Phone: 0471-2511211





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCBHM and Affiliated to Kerala University of Health Sciences.

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION

Registration Number
20429



Name: **Dr. P. RESHVA NAIR**
 Father/Guardian's Name: **V. ABRAJAN**
 Date of Birth: **07-08-1987**
 Permanent Address: **VELLAPPAZHAYAL, P.O. CHANGANASWARI, THIRUVARUR, KERALA, 776004**
 Qualification: **B. AYURVEDACHARYA (DEGREE) OF AYURVEDIC MEDICINE AND SURGERY**
 Year of award of Degree: **2020**
 Name of the Medical College: **KMCT AYURVEDA COLLEGE, KODIMUR**
 Name of the University: **KERALA UNIVERSITY OF HEALTH SCIENCES**

I have to certify that **Dr. P. RESHVA NAIR** is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioners Act, 2021 on the **18th day of August 2023** at Thiruvananthapuram.

Thiruvananthapuram
Date: **18-08-2023**
Sd/-: **MSYRMA**

Signature of the
Council's



REGISTRAR
K.R. BALASUBRAMANIAN
REGISTRAR
Kerala State Medical Council
Red Cross Road
Thiruvananthapuram - 695 006

- Information: 1. Change of address must be notified to the Registrar.
 2. Addressed Quotations, if any, should be intimated to Registrar.
 3. This Certificate is valid. Candidates with the names shall appear by the Council of India's approval.
 4. This Certificate should be surrendered to the Council in case of cessation of practice or death.

Kerala State Medical Council, Thiruvananthapuram, Kerala, India
Website: www.medicallcouncilofkerala.gov.in / Email: registrar@kmsa.gov.in / Phone: office: 0471-267321





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCIAM and Affiliated to Kerala University of Health Sciences

The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number
25798

Name: Dr. YOONIE P F
 Father/Guardian's Name: YOUNIS P F
 Date of Birth: 14.05.1995
 Permanent Address: THAKASSERY MEDICAL HOUSE, THAKASSERY PO., THIRU. MALAPPURAM, KERALA, PIN 676132
 Qualification: AYURVEDIC MEDICAL BACHELOR OF AYURVEDIC MEDICINE AND SURGERY
 Year of award of Degree: 2023
 Name of the Medical College: KMCT AYURVEDA MEDICAL COLLEGE
 Name of the University: KERALA UNIVERSITY OF HEALTH SCIENCES

I have to certify that Dr. YOONIE P F is registered as a practitioner in Indian Systems of Medicine under the Kerala State Medical Practitioners' Act, 2001 on the 08th day of May 2023 at Thiruvananthapuram.

Thiruvananthapuram,
Date: 08-05-2023
Dr. No. 3428048

SEAL OF THE
COUNCIL



REGISTRAR
K.J. BALASUBRAMANIAM
SECRETARY
Kerala State Medical Council
East Coast Road
Thiruvananthapuram - 676 025

Information: 1. Change of address has to communicate to the Registrar.

2. Additional Qualification, if any, shall be necessary registered.
3. This certificate is not valid unless the AYURVEDIC BOARD shall advise to the State of Kerala authorities.
4. This Certificate should be presented to the Council in case of cessation of practice or services.

Website: Kerala Medical Council, Hatties Road, Thiruvananthapuram-676025, Kerala, India
 Website: www.kscimcouncil.com.gov.in, E-mail:registrar@kscimcouncil.com, ifsc@kscimcouncil.com



KMCT
AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.

ACADEMIC YEAR 2021-22



Handwritten signature

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.

BISHOP BENZIGER
AYURVEDA

Dr. Lida Treesa Lalu
Junior Doctor

Seeyal, Pannakkalthurutha, Neendakara, Kottam,
PIN: 686533, TEL: 974654941 9605296145

E-mail: bishopbenzigerhealthcare@gmail.com
www.bishopbenzigerayurveda.com

E. A. J.
Director

Manassery
AYURVEDA

Dr. SHERHANA V S
BAMS, DAC
(Reg No: 20005)

Manassery P.O., MUKKAM, Kozhikode, Kerala
 ☎ 9776 790 004 ☎ 9678 232 000
 ☎ 8897 004 644 ☎ 8897 006 777

Labhin



KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences



Asha L Pappan
MA16540
Blood Group : B+ve
Emergency Contact : 8848143646

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Dr. SUHAILA LATHEEF
M.B.B.S., M.D. (AYURVEDA)
M.D. (GYN&OBSTETRICS)
M.D. (PEDIATRICS)
M.D. (PSYCHIATRY)

Ashalee
PRINCIPAL
KMCT AYURVEDA
MEDICAL COLLEGE






KMCT AYURVEDA MEDICAL COLLEGE


Approved by NCISM and Affiliated to Kerala University of Health Sciences.

Central Council for Research in Ayurvedic Sciences
Ministry of AYUSH
Government of India

1292. 2009/2009/2009/2009 FEB 2015


ID# / Name: DR. SREEKALA V
Employee Code: 21001605830121
ID# / Designation: R.O. (AY)
Address / Office: KARI, CHALLOOR



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VALANCHERY, MALAPPURAM




A-

VISMAYA K S
RMO
ID No: 215

DOB: 16.06.1997
Joining Dt: 06.01.2023
Ph: 8891843124

Arshad
K.M.C.T. AYURVEDA MEDICAL COLLEGE





KMCT AYURVEDA MEDICAL COLLEGE

Approved by MCOAM and Affiliated to Kerala University of Health Sciences

**ചന്ദ്രപ്പടി കൊളത്തൂർ നാഗാർജ്ജുനയിൽ
ബിരുദം ആരംഭിക്കാൻ വരെയുള്ള വിവരങ്ങളിൽ
ഡോക്ടറുടെ സേവനം ലഭ്യമാണ്...**

ഡോ. ആയിഷ സുവൈന. A M
BAMS, MBA (HAM)
Reg : No : 24835
ജനനത്തീയതി 4 മണി മുതൽ 6 മണി വരെ

പ്രശ്നം വിശദീകരിക്കാൻ

അലർച്ചകൾ	നാസികാലസ്യം, മുട്ട് അലർച്ച, നടുവേദന, കഴുത്ത് അലർച്ച, തലവേദന
മൂത്രസംബന്ധ പ്രശ്നങ്ങൾ	മൂത്രാമിശ്രണം, മൂത്രാമിശ്രണം, മൂത്രാമിശ്രണം, മൂത്രാമിശ്രണം
കുടലിനടപ്രശ്നങ്ങൾ	പ്രതികൂലം, മൂത്രാമിശ്രണം, മൂത്രാമിശ്രണം, മൂത്രാമിശ്രണം
കുടലിനടപ്രശ്നങ്ങൾ	അലർച്ചകൾ, അലർച്ചകൾ, അലർച്ചകൾ, അലർച്ചകൾ
മൂത്രസംബന്ധ പ്രശ്നങ്ങൾ	മൂത്രാമിശ്രണം, മൂത്രാമിശ്രണം, മൂത്രാമിശ്രണം, മൂത്രാമിശ്രണം
കുടലിനടപ്രശ്നങ്ങൾ	പ്രതികൂലം, മൂത്രാമിശ്രണം, മൂത്രാമിശ്രണം, മൂത്രാമിശ്രണം
മൂത്രസംബന്ധ പ്രശ്നങ്ങൾ	മൂത്രാമിശ്രണം, മൂത്രാമിശ്രണം, മൂത്രാമിശ്രണം, മൂത്രാമിശ്രണം
കുടലിനടപ്രശ്നങ്ങൾ	പ്രതികൂലം, മൂത്രാമിശ്രണം, മൂത്രാമിശ്രണം, മൂത്രാമിശ്രണം

നാഗാർജ്ജുന

ആയുർവ്വേദ ഫാർമസി

ചന്ദ്രപ്പടി ALP SCHOOL - ന്നിരുടെ ചന്ദ്രപ്പടി, കൊളത്തൂർ

ബന്ധപ്പെടാൻ : +91 9633 9844 97, +91 8848 7502 26

ആയുർവ്വേദ ഫാർമസി നാഗാർജ്ജുന

Handwritten text: "കുടലിനടപ്രശ്നങ്ങൾ" and "മൂത്രസംബന്ധ പ്രശ്നങ്ങൾ"





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.

Dr. AAYISHASUWAINA A M
BAMS, MBA(HAM)
Reg No: 24835

Mob: 8075843847
Consultation Time
Clinic : 04.00PM - 06.00PM
Home : 07.00AM - 09.00AM
06.00PM - 08.00PM
SUNDAY HOLIDAY

Name : Age : Date :

R_x

(Handwritten Signature)
PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

എം.എസ്.എസ്.എസ്.



കാശാർമ്മുന
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എ.എ.എ.എ.



ആരോഗ്യ സഹായക സേവനം



KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.

DR. ANJUSHA.V BAMS
Registered Medical Practitioner
Reg No. 24377 (CMC)

Sl. No.

Date: _____

**VAIDYARATNAM P. S. WARRIER'S
KOTTAKKAL ARYA VAIDYASALA**

(Authorized Dealer)
Ezhikkakki, In. Harpal - 686664
Phone: 9455018037, 9405440362

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Principal
KMCT, AYURVEDA
MEDICAL COLLEGE





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences



Uthman
PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE





KMCT
AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences

COTIVITI



Sandra
PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

Sandra Prakash S

Emp Code : 163239

Blood Group : B+ve





KMCT
AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.



NANDHA

AYURVEDA MEDICAL COLLEGE AND HOSPITAL

PITCHCHANDAMPALAYAM (Po), ERODE - 638 052. (T.N)

Ph: 04294 - 222009



Dr. ANU JOS

M.D (Ayu)

Assistant Professor

Kriya Shareera

eternity

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE

[Signature]
Chairman





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences.

Gurucharanam Saranam

Santhigiri

ESTD. 1958

IDENTITY CARD



Dr. NIDHIN MOHAN
ASSISTANT PROFESSOR
NCISM ID : AYST02091
KUHS ID : A 25792

Santhigiri Ayurveda Medical College

Glassery P.O., Kodumba (Via), Palakkad - 678 551
Ph: 0491 2574574, 2574343, Fax: 0491 2574574
e-mail: samc@santhigiriashram.org
website: www.samc.edu.in



[Signature]
Principal

[Signature]

PRINCIPAL
K.M.C.T. AYURVEDA
MEDICAL COLLEGE





KMCT AYURVEDA MEDICAL COLLEGE

Approved by NCISM and Affiliated to Kerala University of Health Sciences



Sathyaja
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M.C.T. AYURVEDA MEDICAL COLLEGE





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Dr. ARDHRA E
BAMS (Ayurvedacharya)
Reg No: 25409

Ardhra (E)
Kattamparamba PO
Kozhikode 08
PH: 989222017

Name: Age: Date:

Ardhra

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The Council of Indian Systems of Medicine Kerala State



CERTIFICATE OF REGISTRATION



Registration Number
24800

Name : **DILAKSHA JOSEPH**
 Father/Guardian's Name : **JAYAN M.J.**
 Date of Birth : **11-10-1997**
 Permanent Address : **1172 NILA VILA, RAJIV GANDHI, KOTTAYAM DISTRICT, KERALA, PIN-686574**
 Qualification : **AYURVEDHARSHA (BACHELOR OF AYURVEDA MEDICINE AND SURGERY)**
 Title or award of Degree : **BDS**
 Name of the Medical College : **KMCT AYURVEDA MEDICAL COLLEGE**
 Name of the University : **KERALA UNIVERSITY OF HEALTH SCIENCES**

I have to certify that **DILAKSHA JOSEPH** is registered as a practitioner in Indian System of Medicine under the **NMSB** State Model of Practitioner Act, 2021 on the 05th day of August 2022 at **Thiruvananthapuram**.

Practitioner's Signature
 Date : **04-08-2022**
 Place : **THIRUVANANTHAPURAM**



K.R. BALAKRISHNAN
 REGISTRAR
 Kerala State Medical Council
 First Floor, Room
 Mahatma Jayaprakashan Road, 695 016

- Conditions : One set of address card to be submitted to the Registrar.
1. This certificate should not be used as evidence of registration.
 2. This certificate is not transferable and its validity shall expire by the Date of Office appointment.
 3. This certificate should be submitted to the Council in case of cessation of practice or renewal.

KMCT Ayurveda Medical College, Pedduru Road, Thiruvananthapuram-695026, Kerala, India
 Kerala State Medical Council, 695016, Kerala, India. Registration Number: 24800, PIN: 695016

EXHIBIT
 NCISM
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ACADEMIC YEAR 2020-21



U. Abraham

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COTIVITI



Alisha John

Emp. Code : 162146

Blood Group : B+ve

Alisha John

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THE TRAVANCORE-COCHIN COUNCIL OF INDIAN SYSTEMS OF MEDICINE.



REGISTRATION OF MEDICAL OFFICERS



REGISTRATION NUMBER	
22751	
Name	Dr. JYOTHI K
Former Qualification	MBBS
Date of Birth	20/11/1990
Presented Address	KOLLAM MEDICAL OFFICERS P.O. KALAPATHI SALAM, THE COON, KOLLAM, PINNACODE
Qualification	B.A.M.S. (PRACTICING) & BACHELOR OF AYURVEDIC MEDICINE AND SURGERY
Year of Award of Degree	2016
Name of the Medical College	KMCT AYURVEDA MEDICAL COLLEGE, KOLLAM
Name of the University	KERALA UNIVERSITY OF HEALTH SCIENCES

I hereby certify that Dr. JYOTHI K is registered as a practitioner in Indian Systems of Medicine under the Travancore-Cochin Medical Practitioners Act, 1903 on the 20th day of October 2020 at the above address.

Principal's Signature
Date: 30-10-2020
Sl. No: 64300




REGISTRY
TRAVANCORE-COCHIN
20, COLLEGE STREET, COCHIN-4
200008 (Kerala)

(Signature)
PRINCIPAL
KMCT AYURVEDA
MEDICAL COLLEGE

Attention: 1. Change in address has to be communicated in writing.
2. Additional Qualifications, if any, should be separately registered.
3. The Certificate is not transferrable, and the holder shall abide by the Code of Ethics applicable.
4. The Certificate should be surrendered to the Council in case of relocation, resignation or death.

Telephone: - Cochin Medical Council, Railway Road, Thiruvananthapuram, 695022 Kerala, India.
Website: www.medicallcouncil.kerala.gov.in, Cochin Medical Council Website: www.cmc.org.in, Phone: office: 0471-2572222





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THE TRAVANCORE-COCHIN COUNCIL OF INDIAN SYSTEMS OF MEDICINE



REGISTRATION DOCUMENT

REGISTRATION NUMBER

2235



Name : Dr. ANITHA M
Father/Guardian's Name : ANAND K
Date of Birth : 20-01-1984
Permanent Address : MALLIYIL PULUPALAYAM, PONDY, TRIPUNITHURAI P.O. KODIMON, KERALA. PIN-673302
Qualification : AYURVEDA BASHI (BACHELOR OF AYURVEDIC MEDICINE AND SURGERY)
Year of award of Degree : 2010
Name of the Health College : KMCT AYURVEDA COLLEGE, KODIMON
Name of the University : KERALA UNIVERSITY OF HEALTH SCIENCES

I hereby certify that Dr. ANITHA M is registered as a practitioner of Indian Systems of Medicine under the Travancore-Cochin Medical Practitioners Act, 1951 in the 1094th of October 2022 at Thiruvananthapuram.

Travancore-Cochin,
 Date: 15-10-2022
 Sd/-: SGT/SM



DR. ANITHA M
 1094th of October 2022

Signature of the Candidate

Notes: 1. Change of address must be communicated to the Registrar.
 2. Additional Qualifications, if any, should be reported to the Registrar.
 3. This Certificate is not valid unless and till the holder has valid the Date of Birth certificate.
 4. This Certificate will be surrendered to the Council in case of cessation of practice or death.
 Travancore - Cochin Medical Council, Arakkulam Road, Thiruvananthapuram-695002 Kerala, India.
 Website: www.medicinescouncils.gov.in, Email: register@mscouncils.gov.in, Phone: office: 411-211021

Anitha
 PRINCIPAL
 C.T. AYURVEDA
 MEDICAL COLLEGE
 KMCT AYURVEDA
 MEDICAL COLLEGE
 KODIMON





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AYURVEDA MEDICAL COLLEGE

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ACADEMIC YEAR
2019-20

Ambro
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K.M.C.T. AYURVEDA
MEDICAL COLLEGE





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**CHS
AYURVEDA
CLINIC**

ഡോ. സുരേഷ്കുമാർ എ.ഒരവ

BAMS
Cosmetology (AYU)
Reg. No: 22528

ചികിത്സാ സമയം
(മുൻപ് ട്രീറ്റ് ചെയ്യാൻ)

09:30 AM - 01:00 PM, 02:00 PM - 05:00 PM
(മുൻപ് ട്രീറ്റ് ചെയ്യാൻ)

ഡോ. ഷഹീന സി.എച്ച്

BAMS, Cosmetology (AYU)
Adi Diet & Diabetics
Reg. No: 23090

ചികിത്സാ സമയം
ഇന്റർമീഡിയേറ്റ് ട്രീറ്റ് ചെയ്യാൻ

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MINISTRY OF HUMAN RESOURCES
& EMIRATISATION

الإمارات العربية المتحدة
وزارة الموارد البشرية
والسوقية

الإسم : نورهان كوربان محمد كوربان

Name : NOORJAHAN KORBAN MUHAMMAD KUTTY KORBAN

Work Permit No : 112721490

رقم بطاقة العمل : 112721490

Expiry Date : 29/01/2026

التاريخ : 29/01/2026

Personal NO : 112721490117

الرقم الشخصي : 112721490117

Profession : طب عام

المهنة : طب عام

Nationality : الهند

الجنسية : الهند

مركز أبدي و حياة القدس التخصص : د ب م

التخصص : د ب م

Establishment : ADAM AND EVE SPECIALIZED MEDICAL CENT

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ADAM & EVE
ayurveda

Dr. Noorjahan K
BAMS
Ayurveda Practitioner

054 584 1962 | drnoorjahan@aesmc.com

Pink Building, Floor No: 01 & 02
Next to Royal Rose Hotel, Electra Street
P.O. Box: 48157, Abu Dhabi, UAE
Tel: 02 307 1199, Mob: 056 418 4499

ayurveda@aesmc.com | www.aesmc.com





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NHS
West Hertfordshire
Teaching Hospitals
NHS Trust

Hani Rahman
Clinical Coder
Clinical Coding Department

Dr. T. BEERMASTHAN
BAMS. (Reg No: 5936/A)
9447 718 566

Dr. BINSHIDA. T.
BAMS. (Reg No: 24163)
9645 994 506

മരുന്നില്ല
Dushadhi

Dr. Miss Parvathi's
MS AYURVEDA HOSPITAL
Kunnummal, Edavanna,
Malapuram Dt.
Ph: 9447 718 566, 9645 994 506





KMCT

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Card No.1146



KERALA GOVERNMENT
INDIAN SYSTEMS OF MEDICINE



PEN.976691
Dr.SHIMA SHAJU E S
Medical Officer
Govt.Ayurveda Dispensary, Pooppara



Dr. SHIMA SHAJU E S
Medical Officer
Govt.Ayurveda Dispensary, Pooppara



Valid up to 27-03-2029



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Ayurglow

healthcare and beauty clinic
Main Road, Vadakkemanna, Malappuram

Dr. Sreelakshmi. M

(BAMS, MSc. psychology, M.A.Bhami)

Date: _____

Name: _____ Age: _____ Sex: _____

R_x



FOR BOOKING: +91 9497 840 126

ചിട്ടയായ രോഗം
എല്ലാ ദിവസവും - am to - pm





KMCT

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Dr. Rashida
B.A.M.S
M.Sc. Psychology
Reg. No. 20889

Mob: 9847231976

Name _____ Age _____
Place _____ Date _____

R

Rashida
PRINCIPAL
K.M.C.T. AYURVEDA
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**THE TRAVANCORE-COCHIN COUNCIL
OF
INDIAN SYSTEMS OF MEDICINE**



CERTIFICATE OF REGISTRATION



REGISTRATION NUMBER	21767
Name	Dr. ANJALI K.C.
Father/Guardian Name	CHANDRAN K.M.
Date of Birth	1984/1991
Permanent Address	METTILALAM GRAVE AMPU, KANNUR, PIN 671113, KERALA.
Qualification	BYEDYASACHARYA (GRADUATE OF AYURVEDIC MEDICINE AND SURGERY)
Year of award of Degree	2014
Name of the Medical College	KMCT AYURVEDA COLLEGE, KANNUR
Name of the University	KERALA UNIVERSITY OF HEALTH SCIENCES

I hereby certify that Dr. ANJALI K.C. is registered as a practitioner in Ayurvedic System of Medicine under the Travancore-Cochin Medical Practitioners Act, 1913 on the 26th day of October 2014 at Thiruvananthapuram.


REGISTRAR
**THE TRAVANCORE-COCHIN COUNCIL OF
INDIAN SYSTEMS OF MEDICINE**
REGISTRATION OFFICE, 2ND FLOOR, KANNUR
21767-001, KANNUR
TEL: 0495-2294664

Thiruvananthapuram

Date: 26-10-2014

Sl. No: 10230

Information:

1. Change of address must be communicated to the Registrar.
2. Additional qualifications, if any, should be separately registered.
3. This Certificate is not transferable and the holder shall abide by the Code of Ethics applicable.
4. This Certificate should be surrendered to the Council in case of cessation of practice or demise.



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THE TRAVANCORE-COCHIN COUNCIL OF INDIAN SYSTEMS OF MEDICINE



CERTIFICATE OF REGISTRATION



REGISTRATION NUMBER

21567

Name	IN. ART & P.
Full Name	DR. ADITHYAN S.P.
Date of Birth	27.8.1990
Permanent Address	ANANTHAPURAM, THEPPANADI MEDICAL COLLEGE, KERALA
Qualification	AYURVEDA (M.D.) (GENERAL) AYURVEDIC SURGERY (M.S.)
Year of award of Degree	2019
Name of the Medical College	KMCT AYURVEDA MEDICAL COLLEGE
Name of the University	KERALA UNIVERSITY OF HEALTH SCIENCES

I hereby certify that Dr. ADITHYAN S.P. is registered as a graduate in Ayurveda System of Medicine under the Travancore-Cochin Medical Practitioners Act, 1913 with effect from 01 October 2019 at Thiruvananthapuram.

Here is my stamp:

Date: 08-10-2019

M. No. 991

Information

1. Change of address must be communicated to the Registrar.
2. Additional qualifications, if any, should be separately registered.
3. The Certificate is not transferable and the holder shall abide by the Code of Ethics applicable.
4. The Certificate should be surrendered to the Council in case of cessation of practice in service.



Handwritten signature and stamp: Dr. Adithyan S.P., Travancore-Cochin Council of Indian Systems of Medicine

