



PRIVATE HEALTH SERVICES REGULATORY COUNCIL

Medical Centers/ Channel Centers

- 1. Name of the Medical Centre/ Channel Centre M.C. HOSPITAL
- 2. Address Ampara Road Samarithurai
- 3. Date of Establishment -
- 4. Province EASTERN District AMPARA.
- 5. Name of the Owner DR. A. J. MOHAMED RAFI
- 6. Name of the Medical Director/ In-charge DR.A. J. MOHAMED RAFI Sri Lanka Medical Council (SLMC) registration no. - 27496
- 7. Number of Full Time Doctors **\forall L

 [Please attach a list of names and Sri Lanka Medical Council (SLMC) registration numbers of the Full Time Doctors]
- 8. Number of Part Time Doctors 20 (LIST ANNEXED)
 [Please attach a list of names and Sri Lanka Medical Council (SLMC) registration numbers of the Part Time Doctors]
- 9. Name of the Nurse In-charge Mr. Sulaima Lebbe Marzosk.
 Sri Lanka Medical Council (SLMC) registration no. 2921
- 10. Number of Nurses ONE.

11. Consultation Rooms

the each room or area 70 sq.ft.	80

b. Equipments

Examination bed	4
Table and chairs	8
Wash basin	4
Weighing scale	4
Adequate ventilation and illumination	V

c. Waiting Area

Seating facilities for minimum of 10 persons per consultation room with sanitary facilities	For 35
Adequate ventilation and illumination	

12. Sample Collection Room

a. Floor area
(Minimum floor area 100 sq.ft.)

Adequate sanitary facilities

b. Equipments

Arm chair	
Bed	
Medical wast	given to B.H. Samun hurai
Safe waste disposal	given to B.H. Samunthurai Jes sage disposal.
Toilet facilities	

Adequate illumination	

X-Ray Room 13.



Registration number and date
of the license issued by the
Atomic Energy Authority

AM /06/A/MR-01/2/2022 Nate & issue 01-6-2022.

N.A. **Emergency Treatment Unit** 14.

Floor area a. (Minimum of 100 sq.ft. per patient) Suitable floor and walls for Easy cleaning Adequate ventilation and Illumination

Equipments b.

Oxygen	
ECG recorder	
Nebulizer	
Sucker	
Emergency trolley with supplies	
Necessary facilities and equipment for resuscitation	
Laryngoscope	レ`

15. C.S.S.D.

Auto clave	a es	
Sterilization facilities	5	

16 Indoor Pharmacy/ Drug Store

17. Parking

Number of parking slots	

18. Waste Disposal

Method of Clinical Waste Disposal (According to the Central Environmental Authority requirements)	Honded over to B.H. Tamus Musais for Sago Lisposal (letter annexed).
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19. Company/Business registration no. - STR/S/451.

20. Provincial Director's Comments - Recommended for regulation.

Name of the Provincial Director of Health Services - Dr. D. G.M. Costa.

Dr.D.G.M.COSTA
Provincial Director of Health Services

Eastern Province, Tricomalee

Signature

Seal

Date