

Sr No.	Name of the professional	Father's name	Name of medical degree or diploma obtained and university with the month and year of passing qualification	Registration number	Date of Registration	State	Name of hospital or institute with complete address for purposes of teaching or research or practice of medicine	Name of person in institution or hospital who will be responsible for legal issues regarding patient care provided by doctor concerned
NRH/0029701	DR. SHAILAJA JAMES	JOHNY JAMES	BHMS October-2020 Tamil Nadu Dr M G R Medical University, TAMIL NADU	NCH-00019	03-04-2025	ANDAMAN AND NICOBAR ISLANDS		Dr. Shailaja James
NRH/0067024	DR K P MUHASINA BIBI	K P MOHD RAFIQUE	BHMS November-2023 OTHER	NCH-00035	03-10-2024	ANDAMAN AND NICOBAR ISLANDS		Dr. K.P. Muhasina Bibi
NRH/0070154	DR. C.M. SHAHEEN	C.A. MAJEED	BHMS January-2016 The West Bengal University of Health Sciences, WEST BENGAL	NCH-00053	30-12-2024	ANDAMAN AND NICOBAR ISLANDS		Dr. C.M. Shaheen