

No. V.11011/02/2016-PNDT  
Government of India  
Ministry of Health & Family Welfare  
(PNDT)

.....

Nirman Bhawan, New Delhi  
Dated the 17 February, 2017.

To

The Members  
Central Supervisory Board  
(As per list enclosed)

Subject: Minutes of the 25<sup>th</sup> Meeting of the Central Supervisory Board, held on 05<sup>th</sup> January, 2017 at Committee Room 'A', Vigyan Bhwana Annexe, New Delhi - reg.

Sir/Madam,

Please find enclosed herewith the Minutes of the 25<sup>th</sup> Meeting of the Central Supervisory Board, constituted under the Pre-conception & Prenatal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994, held on 05<sup>th</sup> January, 2017 at Committee Room 'A', Vigyan Bhwana Annexe, New Delhi under the Chairmanship of Union Minister for Health and Family Welfare, for information and record.

  
(Ajay Kumar)

Under Secretary to the Government of India  
Tel/Fax: 011-23061883

Encl: As Above.

Copy to:

- (1) PS to HFM
- (2) PS to Minister, WCD
- (3) PPS to Secretary (H&FW)
- (4) PPS to Secretary (WCD)
- (5) PPS to DGHS
- (6) PPS to AS & MD (NHM)
- (6) PPS to JS (RCH)
- (7) PS to Dir (RCH)

**Minutes of the 25<sup>th</sup> Meeting of the Central Supervisory Board held under the Chairmanship of Hon'ble Union Minister of Health & Family Welfare on 5<sup>th</sup> January, 2017 at 3.00 pm in Annexe, Vigyan Bhawan, New Delhi**

The 25<sup>th</sup> Meeting of the Central Supervisory Board (CSB), reconstituted under the Pre-conception and Pre-natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994 was held on 05.01.2017 under the Chairmanship of **Shri Jagat Prakash Nadda, Union Minister for Health & Family Welfare** along with **Smt. Maneka Gandhi, Minister of Women and Child Development**. The list of participants is at **Annexure I**.

**Shri. C.K. Mishra, Secretary (Health & FW), MoHFW** welcomed the members of Central Supervisory Board to the meeting and thanked the Hon'ble Ministers for chairing the meeting and members for their presence. He said that the implementation of the Act has been successful in terms of creating deterrence in the society against sex selection though much needs to be done in this direction. He highlighted the initiatives taken by the better performing states of Haryana, Maharashtra and Rajasthan, especially, the very effective nabbing operations undertaken in these states that helped to expose the inter-state, inter-district, and intra-district Sex selection rackets and proved to be a big deterrence to curb the illegal practice of sex selection. He then requested **Smt. Vandana Gurnani, Joint Secretary RCH** to share Action Taken Report on the decisions taken in 24th CSB meeting and the agenda items of this meeting. Then he invited Hon'ble Co-chair and Chair to give their valuable remarks and open the meeting for the discussions.



Smt. Vandana Gurnani, JS, presented the action taken report and the agenda for the meeting.

**Agenda No.1:**

**Confirmation of the Minutes of the 24<sup>th</sup> Meeting of the Central Supervisory Board**

The CSB confirmed the minutes of the 24<sup>th</sup> Meeting.

**Agenda Item No.2:**

**Action Taken Report on decisions taken in the 24<sup>th</sup> Meeting of the Central Supervisory Board held on 05.04.2016**

JS (RCH), MoHFW presented the Action Taken Report with regard to the decisions taken during the 24<sup>th</sup> CSB meeting. JS (RCH) informed that as per the recommendations of CSB, the Ministry of Health and Family Welfare with the support of the United Nations Populations Fund has developed the Standard Operating Guidelines (SOGs) for District Appropriate Authorities (DAAs) on the Pre-conception and Pre-natal Diagnostic Techniques (PC&PNDT) Act, 1994 and the same have been disseminated at the National Capacity Building Workshop, held on 12-13th April, 2016, for the effective implementation of the PC & PNDT Act, 1994.

Further, she informed that as per the recommendation of CSB in 24<sup>th</sup> meeting, the Expert Committee on the proposed amendments to the PC&PNDT Act was reconstituted to ensure due representation of civil society members. The first meeting was held on 4th July, 2016 for wider consultations and further deliberations and the minutes have been issued and circulated to all the participants.



JS (RCH) apprised the members that the draft Manner of Appeal recommended by CSB and approved by Hon'ble HFM has been sent to the Ministry of Law & Justice. The MoLJ has amended the draft notification and sought some clarifications and Ministry Health &FW has provided the same. Once MoLJ clears the Manner of Appeal it will be notified under PC&PNDT Rules, 1996.

JS (RCH) further informed that the proposed amendments to PC & PNDT (Six Months Training) Rules, 2014, recommended by CSB and approved by HFM, for extension of time to registered Medical Professionals to clear Competency Based Exam and other revisions could not be notified since the matter is sub-judice in Hon'ble Supreme Court. The Ministry has filed Special Leave Petition (SLP) 16657-59/2016 against the Hon'ble Delhi High Court judgment dated 17/02/2016 in WP(C) 6968/2011, WP(C) 2721/2011 and WP(C) 3184/2011 declaring PC & PNDT (Six Months Training) Rules, 2014 *Ultra-Vires* to the PC&PNDT Act.

JS (RCH) conveyed that the qualification for veterinary doctors and regulatory mechanism recommended by Veterinary Council of India for registration of Veterinary Hospital using ultrasound machines under PC& PNDT Act has been communicated to all States/UTs, with the concurrence of Department of Animal Husbandry, Ministry of Agriculture.

JS (RCH) also informed that the amendments in Drugs and Cosmetics Act, 1940 to regularize the sale and use of ultrasound machines in the country have been communicated to the Drugs Division, Ministry of Health and Family Welfare. It has been ascertained from the Drugs Division that the process of amending the Drugs and Cosmetics Act is on.



JS (RCH) also apprised that ICMR has been taken on board for the guidance on the new emerging technologies in the field of pre-natal diagnosis. She stated that new technologies in the context of PC&PNDT Act would be accordingly deliberated in the Expert Committee under the joint leadership of Secretary (HFW), Secretary (WCD) and Secretary, M/o Law & Justice.

**Agenda Item No. 3:**

**Recent initiatives taken by MoHFW and the status of implementation of PC & PNDT Act in the States**

JS (RCH) outlined the recent initiatives taken by the Ministry. She stated that the National Inspection and Monitoring Committee (NIMC), has carried out a total of 7 inspections covering 14 districts during 2016-17. As a result of these inspections, 9 clinics have been sealed, 3 clinics and 2 Ultrasound machines have been recommended for sealing and registration of 2 clinics have been suspended. .

She informed that the Ministry of Health and Family Welfare is liaisioning with National judiciary Academy, Bhopal for the sensitization and orientation of Judiciary. She said that the National Judicial Academy (Bhopal) has been requested to develop training programs on PC&PNDT Act to facilitate the trainings of judges and public prosecutors on the issue of sex selection and implementation of PCPNDT law. The first 2 day orientation & sensitisation programme for judiciary in this direction is scheduled on 4th & 5th February 2017 in Bhopal. She also mentioned that the National Capacity Building Programme for State Appropriate Authorities and State Nodal Officers and state level reviews would be taken up during the last quarter of the financial year 2016-17.



She also reported that States/ UTs Inspection and Monitoring Committees (SIMC) have conducted 2,97651 inspections across the country and in the last quarter (July-September 2016), the State of Maharashtra conducted maximum inspections (7318) followed by Punjab (1138) and West Bengal (826). She apprised the CSB on the status of court cases in the various courts at the center and informed that 41 cases are pending in various high courts and 20 in the Hon'ble Supreme Court.

She also informed about the initiative taken by the Ministry of Health and Family Welfare for standardizing form F software to minimize clerical errors and for developing a prototype that could be adopted by all States/ UTs

As regards the status of implementation of the PC&PNDT Act, JS (RCH) mentioned that till date, a total of 2,352 cases have been filed, 386 convictions secured and 108 medical licenses of the convicted doctors have been suspended by the respective State Medical Councils under the PC&PNDT Act. The progress made during last year in terms of cases filed and disposed off showed significant improvement in the implementation of PC& PNDT Act over the previous year.

#### **Agenda Item No. 4:**

**Supreme Court Judgment dated 8th November, 2016 in civil writ petition (WP). No. 349: Voluntary Health Association of Punjab (VHAP) Vs Union of India**

To ensure complete compliance of the directions given in the Supreme Court Judgment dated November 8, 2016 in a civil writ petition (WP). No. 349: Voluntary Health Association of Punjab (VHAP) Vs Union of India, on the implementation of the



PC&PNDT Act and the Rules was placed before the CSB for information and further guidance. It was apprised that the Supreme Court has taken serious note of the declining Child Sex Ratio in the country and has given the comprehensive directions to different stake holders.

It was informed that the Supreme Court has directed to take concrete steps to improve the declining Child Sex Ratio. The apex court has clearly articulated that the free choice cannot be determined by the norms of the society as that would amount to acting in violation of existing law, and further elaborated that the free choice is subject to constitutional and statutory parameters.

It was further informed that the Apex Court has recognized Sex Ratio at Birth as the most reliable indicator to check the prohibited practice of Sex Selection and has directed all the States/ UTs to maintain a centralized database of civil registration of birth records and display on the website, the birth information regarding the number of boys and girls being born for each District, Municipality, Corporation or Gram Panchayat.

It was stated that the apex court has recognised that the training prescribed under the PC&PNDT Act is imperative for realising the objects and purpose of this Act and has directed all the States and Union Territories to implement the Pre-conception and Pre-natal Diagnostic Techniques (Prohibition of Sex Selection) (Six Months Training) Rules, 2014.

It was further stated that the judgement have reiterated the significance of the statutory authorities prescribed under the Act and has directed the competent



authorities to take steps to constitute/ reconstitute statutory authorities and ensure regular meetings. Competent authorities are also directed to impart periodical training to the Appropriate Authorities to carry out the functions as required under various provisions of the Act.

It was informed that the apex court has given clear directions to the Appropriate Authorities to duly comply with the provisions (Section 22&23) which prescribe punishments and penalties for the violations of the PC&PNDT Act and Rules so that the legally inapposite acts are immediately curbed. Further, quarterly Progress Report to the Government of India are to be submitted on a regular basis through the State Governments.

It was further informed that the apex court has given equal importance to the need for behavioural change of the society towards girl child through awareness campaigns through electronic and mass media. It has directed to give wide publicity with regard to the provisions of the Act and pertaining to the grave dangers the society will face because of gender biased sex selection followed by pre-birth elimination of girl child. The incentive schemes for girls have also been advised by the apex court to be taken up by the States/UTs.

It was stated that the apex court has also given elaborate directions to the judiciary including: issue of appropriate directions to the concerned Courts to fast track and deal with promptitude the complaints received under the PC&PNDT Act and accordingly submit the quarterly report to the High Courts through the concerned Sessions and District Judge; Director of Prosecution /Law Secretary to take stock of the lodging of prosecution under the PC&PNDT Act; High Courts to constitute a



Committee of three Judges to oversee the progress of the PNDT cases; periodically training of judicial officers in the Judicial Academies or Training Institutes to sensitize and develop the requisite sensitivity as projected in the objects and reasons of the law; State Legal Services Authorities to involve the para-legal volunteers and emphasis on this campaign.

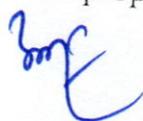
Responding to the Supreme Court judgment, CSB members welcomed the directives given by the Supreme Court and recommended that the Ministry must ensure complete compliance of the directions specified for the effective implementation of the various provisions of the PC&PNDT Act through the State Governments.

#### **Agenda Item No. 5**

##### **Amendments Proposed to the PC& PNDT Act**

JS (RCH) then introduced the next agenda regarding the proposed amendments to the PC&PNDT Act. She apprised that as per the decision of the 24th meeting of the Central Supervisory Board, the Expert Committee has been reconstituted to re-examine the proposed amendments in the provisions of the Act. The first meeting of the Expert Committee was held under the Chairmanship, Joint Secretary (RCH) on July 4, 2016 but the deliberations were inconclusive.

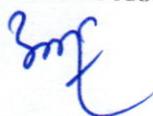
She specified that in spite of the fact that the Expert Committee could not arrive at any consensus regarding the proposal to set pecuniary punishments for the offences such as not wearing of name plate on the dress, not keeping a copy of the Act in the registered medical facility, and not displaying the board disclaiming sex selection at a prominent place in the medical facility prescribed under PC&PNDT Rules. The Ministry proactively examined the proposal internally and decided to place it before



the CSB with due approval of the competent authority for further deliberations. Further, the Ministry also considered the proposal to include a declaration from the patient for confirming the veracity of his/her personal details recorded in Section A: 3, 4, 5 and 6 of Form F to place before the CSB for consideration.

She further informed that in midst of these administrative developments, the Supreme Court in its Judgment dated November 8, 2016 in a civil Writ Petition (WP). No. 349: Voluntary Health Association of Punjab (VHAP) Vs Union of India made specific observations regarding the amendments in the PC&PNDT Act and Rules with special reference to Writ Petition (Civil) No. 575 of 2014 filed by Indian Medical Association (IMA). She stated that the apex court has said that the prayers of IMA - "framing appropriate guidelines and safeguard parameters, providing for classification of offences.....to add certain provisos/exceptions to Sections 7, 17, 23 and Rule 9 of the Rules", in Writ Petition (Civil) No. 575 of 2014 cannot be entertained and, accordingly Hon'ble Supreme Court has declined to interfere. In view of these facts, she requested the Board to guide the Ministry as to how the process of amendments in the PC&PNDT Act could be taken forward.

Responding to the facts **Hon'ble Minister for Women and Child Development Smt. Maneka Sanjay Gandhi, Co-chair** of the Board said that a Supreme judgment does not stop the legislative process and the amendments proposed by various bodies of doctors could be considered. She further added that the provisions including wearing of name plate on the dress, keeping a copy of the Act in the registered medical facility, and displaying the board disclaiming sex selection at a prominent place, provide scope for unnecessary harassment of medical professionals



by the Appropriate Authority under the PC&PNDT Act . Responding to the observations of the Co-chair, **Hon'ble Minister for Health and Family Welfare, Shri Jagat Prakash Nadda and Chairperson** of the board said that Ministry of Health and Family Welfare will take the advice of Ministry of Law And Justice in this regard and accordingly start the legislative process of amendments in this direction.

**Ms Ranjana Kumari, Director of Centre for Social Research** and Social Scientist, said that harassment of medical professional on these grounds is absurd. However, she elaborated that the harassment is an implementation issue and legal remedies are available for the same. The amendments will not ensure obliteration of the same but would rather open flood gates for further amendments that could defeat the objectives of this Act. She added that the authorities will always have scope of new ways and means for harassment if they so desire.

**Mr Naveen Jain, Mission Director, Rajasthan** agreed that the incidents of the harassment of doctors for the noncompliance of these provisions have been reported from some districts in Rajasthan. He further said that the amendment is not the solution but appropriate and judicious implementation by District Appropriate Authorities has to be ensured by the respective states.

After due deliberations, the CSB recommended that the Ministry may take advice of Law Ministry in light of the Supreme Court judgement on this matter and accordingly proceed for the proposal of setting pecuniary punishments for the three offences - not wearing of name plate on the dress, not keeping a copy of the Act in the registered medical facility, and not displaying the board disclaiming sex selection at a prominent place in the medical facility. Besides including a declaration from the



patient for confirming the veracity of his/her personal details recorded in Section A: at points no.3, 4, 5 and 6 of Form F, may be considered.

**Agenda Item No. 6**

**Action taken against the impugned judgment of Hon'ble High Court of Delhi dated 17.02.2016**

JS(RCH) apprised the Central Supervisory Board regarding the Delhi High Court judgement dated 17.02.2016 in WP 6968 of 2015, WP 2721 /2014 and WP 3184/2014 titled Indian Radiological Imaging Association (IRIA) versus UOI, that has struck down the Rule 3(3)(1)(b) holding it to be *Ultra-Vires* the PC&PNDT Act and declaring section 2(p) of the Act defining a Sonologist or Imaging Specialist, as bad.

JS (RCH) stated that the Delhi High Court judgement dated 17.02.2016 will have far reaching implications on the implementation of PC&PNDT Act. She said that with respect to conclusions drawn for section 2(p) and 3(3) (1) (b) in the judgment, all doctors possessing medical qualification (MBBS) under the IMC Act without undergoing any training prescribed under Six Months Training Rules, 2014 will be eligible to get employed to conduct ultrasound scans in a diagnostic centre. Further, she said that the judgment will also exempt doctors not conducting maternal pre-natal diagnostic procedures from complying with the provisions of the Act and Rules by giving an undertaking/affidavit which will nullify the very purpose of the Act.

She informed that Ministry of Health and Family Welfare has filed an SLP (16657-59/ 2016) against the Delhi High Court and thereafter, moved an application



(I.A. Nos. 7-9 of 2016 in SLP (C) No. 16657-59 of 2016) in the Supreme Court asking for grant of stay against the order of the Delhi High Court. She further informed that the High Court judgment is having snow balling impact and has led to pronouncement of similar judgements by the High Courts of Madras, Himachal Pradesh and Punjab and Haryana. SLPs have been filed for urgent interim stay of all these judgements. She also gave details regarding the stay orders that have been passed by the High Courts of Madhya Pradesh, Rajasthan, Karnataka, Kerala, Patna and Jharkhand for the implementation of Six Months Training Rules in line with the Delhi High Court judgement. She said that to avoid further avoid passing of divergent orders, the Ministry is filing Transfer Petition (TP) in all the 17 matters in the Supreme Court.

While updating on the action taken by the Ministry against the impugned Delhi High Court judgement dated 17.02.2016, she said a ray of hope has emanated from the recent Supreme Court judgment dated November 8, 2016, in the form of direction at para33(o) to "implement the Pre-conception and Pre-natal Diagnostic Techniques (Prohibition of Sex Selection) (Six Months Training) Rules, 2014 forthwith considering that the training provided therein is imperative for realising the objects and purpose of this Act" that were framed during pendency of the above Writ Petition.

In the light of this judgment, she informed that Learned Attorney General of India has advised to move an application in the pending SLP bringing out the inconsistency created by the judgment of Supreme Court dated November 8, 2016 insofar as it directs the UOI to implement the Six Months Training Rules, 2014 that have been struck down by the judgment of Delhi High Court dated 17.02.2016.



She further informed that the biggest challenge the Ministry is facing in implementing the PC&PNDT Act is regarding the renewal of the registered diagnostic clinic that have doctors who could not qualify the Competency Based Test after January, 2017 (*deadline prescribed under Six Months Training Rules, 2014*) in view of varied high court orders staying the implementation Six Months Training Rules, 2014.

Board members appreciated the intense efforts made by the Ministry to resolve the matter through legal recourse.

#### Agenda Item No. 7

#### **Exemption of registration fee for the government diagnostic facilities under the PC&PNDT Act**

Presenting the agenda regarding the proposal for exemption of registration fee provision for the government diagnostic facilities under the PC&PNDT Act, JS (RCH) informed that representations in this regard were received from states. She further stated that the proposal has merit as the registration fee for government facilities paid from the government funds is deposited back in the government account.

She informed that provisioning for exemption of registration fee for the government diagnostic facilities will require amendment in Rule 5, 1994 that prescribe application fee required to be submitted along with the application of registration under the PC&PNDT Rules, 1994.



The proposal was welcomed and unanimously agreed by the board.

**Agenda Item No. 8**

The JS (RCH) introduced the proposal to register ultrasound machine manufacturers at the state level. She said that under the PC&PNDT Act manufacturers/ retailers/ importers/ refurbishers of diagnostic equipment capable of detecting the sex of the foetus are required under Rule 3(A) to sell, distribute, rent to any diagnostic facility unless such facility is registered is under the Act and send the list of those to whom the equipment/ machine has been provided once in three months to the concerned state/ UT Appropriate Authority and to the Central Government. However, she recalled that Central Supervisory Board has addressed this gap in 22nd meeting and has recommended that the ultrasound machines and its accessories may be included under Section 3 of the Drugs and Cosmetics Act, 1940 so that manufacturers/ importers/ refurbishers of ultrasound machines are included in a monitoring system. The requisite amendments in the Drugs and Cosmetics Act, 1940 and rules are under process in the Drugs Division (DFQC) of MOHFW.

She informed that the states like Gujarat, Maharashtra and Delhi have tried to fill this gap in the PC&PNDT Act by taking innovative steps in this direction and have devised mechanisms to register the Ultrasound manufacturers/ retailers/ importers/ refurbishers for monitoring the sale of ultrasound machines in the state for the purpose of effective implementation of Section 25, 26 and Rule 3(A) of the PC&PNDT Act.



She further said that the states including Haryana and Punjab have sent similar proposals to register the Ultrasound manufacturers at the state level for the purpose of effective implementation of PC&PNDT Act for the consideration of CSB.

CSB members appreciated the pro-active approach of the states in this direction and **Hon'ble Minister for Health and Family Welfare, Shri Jagat Prakash Nadda and Chairperson** recommended that an advisory to this effect may be issued by the Ministry to all the states/ UTs for necessary action till proper provisions are included in the the Drugs and Cosmetics Act, 1940 for uniform application in the country.

After agenda was discussed **Hon'ble Minister for Women and Child Development and Co-chair, Smt. Maneka Sanjay Gandhi** acknowledged the importance of effective implementation of PC&PNDT Act and admitted that it has proved crucial and helpful in improving the Sex Ratio at Birth in 58 districts out of 100 districts covered under BBBP Scheme.

She also shared her concern regarding the redundancy of the sealed ultrasound machines that become court property and are lying idle in the various diagnostic facilities or *malkhanas*. She suggested that an effective method may be explored to utilise these unused machines in Govt. hospitals so that public can benefit.

She also said that ultrasound machines should not be targeted as they are providing diagnostic services for pregnant women and her unborn child in the light of increased requirements of medical screening.

**Hon'ble Minister for Health and Family Welfare, Shri Jagat Prakash Nadda and Chairperson** said the states should take up the above proposal and search for



some constructive alternatives to utilize such machines in their respective states. Concluding the meeting, he reiterated that all steps will be taken to ensure effective implementation of PC&PNDT Act and compliance of the judgment of Hon'ble Supreme Court of India. He thanked members of the CSB for their active participation, valuable insights and suggestions that will guide the Ministry in addressing the issue of declining Child Sex Ratio.

The meeting ended with vote of thanks by Secretary Health and Family Welfare to the Chair for his guiding presence



**List of Participant of 25<sup>th</sup> Meeting of Central Supervisory Board held on 5<sup>th</sup> January, 2017.**

1. Sh. Jagat Prakash Nadda, Hon'ble Minister of Ministry of Health & FW
2. Smt. Maneka Gandhi, Hon'ble Minister of Ministry of Women & Child Development.
3. Dr. (Smt.) Kakoli Ghosh Dastidar, MP (Lok Sabha)
4. Dr. (Smt.) Bharti Dhirubhai Shiyal, MP (Lok Sabha)
5. Sh. C.K. Mishra, Secretary Ministry of Health & Family Welfare
6. Dr Jagdish Prasad, Director General of Health Services (DGHS), Ministry of Health & Family Welfare
7. Smt Vandana Gurnani, Joint Secretary (RCH), Ministry of Health & Family Welfare.
8. Sh. K. Moses Chalai, Joint Secretary, Ministry of Women & Child Development
9. Sh. O. Venkateshwarlu, Representative of Ministry of Law & Justice
10. Dr. Manoj Nesari, Advisor Ayurveda, Ministry of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy (AYUSH)
11. Dr. Kamal Buckshee, Former Head, Deptt. of Obstetrics & Gynaecology, AIIMS, New Delhi
12. Dr. Rajnikant H. Contractor, Obstetrician & Gynaecologist, Gujarat
13. Dr. Shubha R. Phadke, Sanjay Gandhi Postgraduate Institute of Medical Sciences, Lucknow.
14. Dr. Shalini Singh, Indian Council for Medical Research, ICMR, New Delhi
15. Dr. V.K. Paul, Prof. & Head, Dept. of Paediatrics, AIIMS, New Delhi.
16. Dr. Rashmi Kumar, Head, Dept. of Paediatrics, King George Medical University, Lucknow.
17. Dr. Ranjana Kumari, Director, Centre for Social Research, New Delhi
18. Smt. Mallika Medhi, Director Health Services, Govt. of Assam.
19. Dr Bidyawati Das, Director Health Services, Govt. of Assam.
20. Sh. Shailendra Singh, Additional RC, Govt. of Tripura
21. Dr. Jignesh Thakkar, Indian Radiological & Imaging Association (IRIA).
22. Dr Harsh Mahajan, Indian Radiological & Imaging Association (IRIA).
23. Dr K K Aggarwal, Indian Medical Association (IMA).
24. Dr R N Tandon, Indian Medical Association (IMA).
25. Dr. Prakash Trivedi, Federation of Obstetric and Gynaecological Society of India (FOGSI)
26. Dr. Ratna Jain, Ex. Mayor of Nagar Nigam Kota, Rajasthan
27. Dr. Parveen garg, Director General of Health Services (DGHS), Govt. of Haryana
28. Dr. Rakesh R. Vaidya, State Nodal Officer, Govt. of Gujarat
29. Dr. Dharam Pal, Director Family Welfare, Govt. of Punjab
30. Dr. Gurvinder Kaur, State Nodal Officer, Govt. of Punjab.
31. Smt. K. Lalita, Assitant Law Officer, National Commission for Women(NCW)
32. Dr. Neelam Singh, Advocate, Supreme Court of India
33. Ms. Ena Singh, UNFPA Representative in India.
34. Sh. Naveen Jain, State Appropriate Authority, Govt. of Rajasthan
35. Sh. Raguveer Singh, State Nodal Officer, Govt. of Rajasthan
36. Dr. Parul Goel , Deputy Secretary, Medical Council of India (MCI)
37. Smt. Manisha Verma, Chief Media, MoHFW

38. Smt. Bindu Sharma, Director (PNDT), MoHFW

39. Sh. Ajay Kumar, Under Secretary, MoHFW.

