

Annexure VI

Annual/ Half yearly reporting format for ART Expert be submitted to Maharashtra Bovine Breeding Authority, Pune

1. Name of ART Expert:
2. Registration No. (if any):
3. Qualification:
4. Contact Number:
5. Email ID:
6. Affiliated Organization / Clinic:
7. District & Address:
8. Type of ART Services rendered

A. Details of MOET/OPU (Ovum Pick UP) Work done

Sr. No.	No of Donor Stimulated for MOET	No of Donor Stimulated for OPU	No of Donor used for OPU(Stimulated & No stimulated)	No of Oocytes Aspirated	Remark

B. Details of IVF Work done

Sr. no.	No of Oocyte under Maturation	No of Oocyte Fertilized	No of Embryo Produced	Source of Semen used	No of Embryo Frozen	Remark

C. Details of ET done Work done

Sr. No	No of Recipient Animal Synchronized	No of Embryo Transfer done			No of Pregnancy Confirmed	Conception Rate	No of calf born	Remark
		Fresh	Frozen	Total				

9. Training / Event Participated

Sr. No.	Date	Training Name	Place

Date:

Name and Signature of ART Expert

Place: