#### Rajasthan Employees Compensation (Occupational Diseases) Rules, 1965

RAJASTHAN India

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#### Rule

## RAJASTHAN-EMPLOYEES-COMPENSATION-OCCUPATIONAL-DISEA of 1965

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Rajasthan Employees Compensation (Occupational Diseases) Rules, 1965Published vide Notification No. F. 3(40) Lab./62, dated 26.8.1965-Published in Rajasthan Gazette Part 4-C, Extraordinary, dated 27.8.1965In exercise of the powers conferred by clauses (p), (q) and (r) of sub-section (2) of Section 32 of the [employees] [Substituted 'workmen's' by Notification No. G.S.R. 99, dated 13.1.2017 (w.e.f. 27.8.1965).] Compensation Act, 1923 (Central Act 8 of 1923), the State Government hereby makes the following rules, the same having been published previously in the Rajasthan Rajpatra, Part II (b) dated the 16th May, 1963, as required by sub-section (1) of Section 34 of the said Act, namely:-

#### 1. Short title & commencement.

(1)These rules may be called the Rajasthan [Employees] [Substituted 'Workmen's' by Notification No. G.S.R. 99, dated 13.1.2017 (w.e.f. 27.8.1965)] Compensation (Occupational Diseases) Rules, 1965.(2)They shall come into force on such [date] [Came into force on 20.9.1965 vide Notification No. F. 3(40) Lab/62, dated 18.9.1965-Published in Rajasthan Gazette, Part 4-C, Extraordinary, dated 18.9.1965.] as the State Government may, be notification in the Rajasthan Gazette, appoint.

#### 2. Application.

- These rules shall apply to all [employees] [Substituted 'workmen' by Notification No. G.S.R. 99, dated 13.1.2017 (w.e.f. 27.8.1965).] employed in any employment mentioned in Part C of Schedule III of the Act.

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#### 3. Definitions.

- In these rules, unless the context otherwise requires,-(a)"Act" means the [employees] [Substituted 'workmen's' by Notification No. G.S.R. 99, dated 13.1.2017 (w.e.f. 27.8.1965).] Compensation Act, 1923 (Central Act 8 of 1923);(b)"Asbestosis" shall mean,-(i)a pulmonary fibrosis which manifests itself radiologically as a ground glass appearance of the pulmonary field, of striations or reticular formations more or less marked, particularly diffuse at the bases or diffuse stippling or reticulation over extensive areas of both lung fields, whether or not accompanied by signs of pulmonary tuberculosis; and(ii)colinacally, by the presence of asbestos bodies in the sputum, accompanied by tracheo-bronchits and emphysema.(c)"Bagassosis" means a disease which-(i)manifests itself as an acute allergic response due to sensitisation of the individual to bagasse dust; and(ii)radiologically, consists of increase in the vascular shadows and increase in haziness and reticulation all over the lungs and increase in the hilar densities and some meeting. In acute phases patchy shadows resembling broncho pneumonia may be seen;(d)"Medical Board" means the Pneumoconiosis Medical Board constituted by the State Government under Rule 4 or any Medical Board recognised by the State Government for the purpose of these rules;(e)"Pneumoconiosis" means silicosis or coal miners pneumoconiosis or asbestorsis or any of these diseases accompanied by pulmonary tuberculosis.

#### 4. Constitution of Pneumoconiosis Medical Board.

(1) The State Government shall constitute [one or more Pneumoconiosis Medical Board or Board] [Substituted 'Pneumoconiosis Medical Board or Board' by Notification No. F 3(40) LAb/62/Part II, G.S.R. 58, dated 6.8.2013, Rajasthan Gazette Extraordinary Part 4(C)(I), dated 16.9.2013, page 99 (w.e.f. 27.8.1965).] for the conduct of medical examinations, submission of medical reports and the grant of medical certificates in pursuance of these rules: Provided that with respect to [employees] [Substituted 'workmen' by Notification No. G.S.R. 99, dated 13.1.2017 (w.e.f. 27.8.1965).] employed in mines, the State Government may recognise any Medical Board for the purpose of these rules.(2) The Board constituted or recognised under sub-rule (1) shall consist of three specially qualified medical practitioners of whom one shall be a Radiologist.(3)One member of the Medical Board shall be appointed as the Chief Medical Officer whose duty it will be to supervise working of the medical arrangements under the Act and these rules with a view to securing a uniform standard of efficiency.(4) Any certificate given by the Medical Board shall not be granted except with the authority of at least two members of the Board. (5) Any Certificate given by the Medical Board or Appellate Board, as the case may be under these rules shall be considered as final in respect of medical findings and shall be accepted as prima facie evidence in any proceedings.] [Substituted by Notification No. G.S.R. 99, dated 13.1.2017 (w.e.f. 27.8.1965)](6)[\*\*\*] [Sub-rule (6) omitted by Notification No. F. 3(40) Shram/62, dated 24.2.2005. G.S.R. 61-Rajasthan Gazette, Extraordinary, Part 4-C(I), dated 28.2.2005, /page157(1).] = 2006 RSCS/II/P. 401/H.232.]

### 4A. [ Constitution of Pneumoconiosis Appellate Board. [Inserted by Notification No. G.S.R. 99, dated 13.1.2017 (w.e.f. 27.8.1965)]

- The State Government may constitute one or more Pneumoconiosis Appellate Board at appropriate place to hear appeal against any certificate given by the Pneumoconiosis Medical Board.

#### 4B. Appeal.

(1)Any employee aggrieved by a certificate given by the Pneumoconiosis Medical Board under Rule 4 may, within thirty days, from the date on which the certificate is issued to him, prefer an appeal to the Appellate Board constituted in this behalf by the appropriate government: Provided that the Appellate Board may entertain the appeal after the expiry of the said period of thirty days, if it is satisfied that there was sufficient cause for delay in filing the appeal. (2)On receipt of an appeal under sub-rule (1), the Appellate Board shall, after giving opportunity of being heard and after necessary examination as deem fit by it, confirm or modify the certificate of the Pneumoconiosis Medical Board as expeditiously as possible.]

### 5. Medical conditions under which pneumoconiosis may be considered to be an occupational disease.

(1) The diagnosis of pneumoconiosis shall be earned out with all the necessary technical guarantees. Proof of the degree of development of the pathological or anatomical changes in the respiratory and cardiae systems shall be furnished by the radiographic record and other laboratory records, which shall be accompanied by the report of a full clinical examination, including a report of the industrial history of the person concerned, the record of all occupations in which he had been employed, the nature of the harmful dusts to which he was exposed and the duration of such exposure.(2)For entitlement to compensation, silicosis and coal miners pneumoconiosis shall fulfil the following radiological and clinical conditions: -(a)the radiological examination of the [employees] [Substituted 'workmen' by Notification No. G.S.R. 99, dated 13.1.2017 (w.e.f. 27.8.1965).] must reveal:-(i)the appearance of generalised micronodular or nodular fibrosis covering a considerable part of both lungs fields whether accompanied or not by signs of pulmonary tuberculosis;(ii)in addition to marked accentuation of the pattern of both lungs, the appearance of once or several pseudolumoral fibrotic formations, whether accompanied or not by signs of pulmonary tuberculosis; or(iii) the appearance of both of these types of fibrotic lessions at once, whether accompanied or not by signs of pulmonary tuberculosis; (b) serial radiological pictures taken over a period during periodical medical examinations shall as far as possible be considered in making definite diagonosis in cases where doubt exists;(c)radiological interpretation shall be based on the standard international classification laid down by the International Labour Organisation (Geneva classification);(d)the clinical examination of the [employee] [Substituted 'workman' by Notification No. G.S.R. 99, dated 13.1.2017 (w.e.f. 27.8.1965).] concerned must reveal a decrease or deterioration of the respiratory function or cardiac function, or a deterioration of the state of general health, caused by the pathological processes specified above.(3)[\*\*\*] [Sub-rule (3) omitted by Notification No. F. 3(40) Shram/62, dated 24.2.2005. G.S.R. 61-Rajasthan Gazette, Extraordinary, Part 4-C(I), dated 28.2.2005, /page157(1).] = 2006 RSCS/II/P. 401/H.232.]

# 6. [ Evaluation of disablement. [Substituted by Notification No. F. 3(40) Shram/62, dated 24.2.2005. G.S.R. 61-Rajasthan Gazette, Extraordinary, Part 4-C(I), dated 28.2.2005, /page157(1).] = 2006 RSCS/II/P. 401/H.232.]

(1)The evaluation of disablement shall be made by reference to the physical (anatomical, physiological and functional) and mental capacity for the exercise of the necessary functions of a normally occupied life which would be expected in a healthy person of the same age and sex. For such assessment, recognized cardio-respiratory function tests shall be used to assess the degree of cardio respiratory impairment.(2)It shall be determined whether the disablement is temporary or permanent and also the percentage loss of function as it pertains to the loss of working capacity for receiving compensation.(3)Assessment of disablement shall be given in multiples of 10 and shall be proportionate to the loss of earning capacity, total disablement being taken to be 100% loss of an award of compensation can be made is 40% loss of earning capacity. Explanation. - For the purpose of this rule, "permanent disablement" shall mean such disablement as is certified to be permanent by the [Medical Board or Appellate Board, as the case may be,]]

7. [] [Renumbered by Notification No. F. 3(40) Shram/62, dated 24.2.2005. G.S.R. 61-Rajasthan Gazette, Extraordinary, Part 4-C(I), dated 28.2.2005, /page157(1).] = 2006 RSCS/II/P. 401/H.232.] Application of autopsy.

- In case of death of the claimant application for autopsy shall suffice and the finding of the postmortem shall be delivered to the dependant for compulsory claim purposes.

8. [ Certification of cases. [Added by Notification No. F. 3(40) Shram/62, dated 24.2.2005. G.S.R. 61-Rajasthan Gazette, Extraordinary, Part 4-C(I), dated 28.2.2005, /page157(1).] = 2006 RSCS/II/P. 401/H.232.]

considered fit)(2)Permanent disablement. - The disability is of a permanent nature and is assessed at...... per cent.(3)Death. - Death is attributable to the contacting of the disease.(Cancel out portions not applicable)

Place..... Signature of the qualified

Dated..... Medical Practitioner

Form 'B'Endorsement to be made by Medical Board in cases of Permanent Disability or DeathThis is to certify that Shri....... is/was suffering from pneumoconiosis/pneumoconiosis with pulmonary tuberculosis, and the contracting of the decease is/was reasonably attributable to his employment in......(1)Permanent disability. - It is certified that the disability is of a permanent nature and is assessed at........... per cent.(2)Death. - It is certified that the death of Shri....... is attributable to the contacting of the decease.

Place..... Signature of Members

Dated..... of Medical Board

Note. - The Medical Board may call for any further information that may be considered necessary by it from the Medical Practitioner concerned before counter signing certificate in case of death.][Form-C] [Added by Notification No. G.S.R. 99, dated 13.1.2017 (w.e.f. 27.8.1965)]Certificate to be made by Appellate BoardThis is to certify that Shri .................................. is/was suffering from Pneumoconiosis/Pneumoconiosis with pulmonary tuberculosis and the contracting of the disease is/was reasonahly attributable to his employment in.........(1)Permanent Disability. - It is certified that the disability is of a permanent nature and is assessed at percent.(2)Death. - It is certified that the death of Shri ........... is attributed to the contracting of the disease.

Place..... Signature of Members

Dated..... of Appellate Board

Note. - The Appellate Board may call for any further information that may be considered necessary by it from the medical practitioner or medical board.