

# The M.P. Civil Services (Medical Attendance) Rules, 1958

MADHYA PRADESH

India

## The M.P. Civil Services (Medical Attendance) Rules, 1958

### Rule

### THE-M-P-CIVIL-SERVICES-MEDICAL-ATTENDANCE-RULES-1958 of 1958

- Published on 8 June 1973
- Commenced on 8 June 1973
- [This is the version of this document from 8 June 1973.]
- [Note: The original publication document is not available and this content could not be verified.]

The M.P. Civil Services (Medical Attendance) Rules, 1958Published vide Notification No. 24-A-1000-17-Gen., published in M.P. Rajpatra, Part 4 (Ga), dated 8-6-1973, pages 308-333In exercise of the powers conferred by the proviso to Article 309 of the Constitution of India and all other powers enabling it in this behalf the Governor of Madhya Pradesh hereby makes the following rules for regulating the medical attendance and treatment of Government servants, namely:-

#### 1.

(1)These rules may be called The Madhya Pradesh Civil Services (Medical Attendance) Rules, 1958.(2)They shall apply to-(a)Government servants under the rule-making control of the State Government while they are on duty or on deputation or on leave or under suspension within Madhya Pradesh;(b)Government servants employed on contract basis;(c)Home Guards while under training or on duty;(d)Whole-time servants paid from contingencies;(e)Members of the work charged establishment employed continuously on monthly wages in all the Departments or in the project undertaken by the State.(3)These rules shall not apply to -(a)Retired Government servants;(b)Part-time Government servants;(c)Honorary workers working under the State Government.(4)They shall come into force immediately on their publication in the "Madhya Pradesh Rajpatra".

#### 2.

In these rules, unless the context otherwise requires,-(1)"Authorised Medical Attendant" means the medical officer authorised by the Government as the authorised medical attendant for the medical attendance and treatment of the Government servants :Provided that if there is no medical officer

authorised by the Government for the headquarter at which the Government servant falls ill, the authorised medical attendant shall be any medical officer stationed at the headquarters of such Government servant; and includes-(a)the Medical Officer-in-charge of a hospital maintained by a local authority or aided by Government in so far as medical attendance and treatment at such hospitals is concerned; and(b)all Medical Officers at the Medical College Hospitals in so far as treatment at the Medical College Hospitals is concerned but shall not include honorary Medical Officers in respect of treatment given by them outside such hospitals :Provided that in respect of a Government servant who is out of his official headquarters whether on duty, leave or any other cause, the authorised medical attendant during such period shall be the Medical Officer of equivalent rank stationed at the place where such Government servant is on duty or stays for spending his leave;(c)"Civil Surgeon" includes a District Medical Officer;(d)"Family" means-(i)The wife or husband of a Government servant.(ii)The parents, legitimate children including children adopted legally and step children of such Government servant residing with and wholly dependent on that Government servant.(e)"form" means a form appended to these rules;(f)"Hospital" means a hospital maintained by the State Government or by a local authority or any other hospital aided by the State Government or such private hospitals as may be recognised as hospitals for purposes of these rules and includes a maternity home;(g)"Government servant" means a person to whom these rules apply under sub-rule (2) of Rule 1;(h)"Medical Officer" means a Civil Surgeon, Assistant Surgeon or an Assistant Medical Officer, as the case may be, and includes a member of the training staff of a Medical College who treats patients in the hospital attached to such college.(i)"Treatment" means the use of all medical and/or surgical facilities available at the hospital in which the Government servant is treated and includes-(i)the employment of such pathological, bacteriological, radiological or other methods as are considered and certified in writing as necessary by the authorised medical attendant;(ii)the supply of such medicines, vaccines, sera or other therapeutic substances as are ordinarily available in the hospital;(iii)such nursing as is ordinarily provided to in-patients by the hospital;(iv)blood transfusion;(v)ultra-violet light; and(vi)in the case of females,-(a)treatment during confinement (pre-natal and post-natal treatment) including treatment for abortion; and(b)douching.

### 3.

(1)Subject to the provisions of sub-rule (3) a Government servant shall be entitled free of charge; to medical attendance by the authorised medical attendant.(2)If the authorised medical attendant is of opinion that the case of a Government servant is of such a serious or special nature as to require medical attendance by a Medical Officer other than himself he may move the Director of Health Services, Madhya Pradesh, to arrange for the deputation of such Medical Officer, for the purpose of consultation. In such cases, the deputed Medical Officer, whether he be of the rank of Civil Surgeon or a subordinate officer shall not be entitled to charge any fees for the professional services rendered to the Government servant.(3)In case of demand for medical attendance at the residence of the Government servant, the authorised medical attendant shall attend to the patient at the residence of the Government servant as often as may be deemed necessary, if he considers the case to be of sufficiently serious nature as to demand his attendance at the residence. A Government servant whose demand for such attendance is not complied with may report the matter to the Director of Health Services if the authorised medical attendant is the Civil Surgeon and in any other case to the

Civil Surgeon whose decision shall be final :Provided that where the residence of the Government servant is at a distance of more than five miles from the headquarter of the authorised medical attendant the attendance of the authorised medical attendant shall not be required except in extraordinary circumstances.

#### 4.

(1)A Government servant shall be entitled to treatment in a hospital free of charge. If any amount is paid by a Government servant on account of such treatment, accommodation in hospital, diet or on any other account it shall be reimbursed to him in the manner and to the extent provided in these rules.(2)The Medical Officer-in-charge of the hospital may place the patients in any ward he considers appropriate.

#### 5.

A Government servant suffering from a mental disease shall be entitled to medical attendance, treatment, accommodation and diet free of charge at a Government Mental Hospital in the State for a period not exceeding two years from the date of his admission to such hospital :Provided that in case of a Government servant whose salary exceeds one hundred rupees per mensem, half of the prescribed maintenance charges shall be borne by him.

#### 6.

A Government servant shall pay in the first instance bills, if any, preferred by the hospital authorities on account of medical attendance, treatment, room-rent or diet or on any other account and may, thereafter, prefer claim for reimbursement thereof in accordance with these rules.

#### 7.

[(1) Expenditure incurred on purchase of drugs prescribed by the authorised attendant in full :Provided that-(1)If a Government servant submits medical reimbursement bills in respect of treatment of himself or any member of his family as an out-door patient exceeding Rs. 250/- (Rupees two hundred fifty) per month for four times in a year or continuously for three months, the Controlling Authority shall seek second opinion of the Chief Medical and Health Officer and only on receipt of a favorable recommendation, shall pass the medical reimbursement bill. In case of treatment by any Indian system of Medicines or Homoeopathy second opinion of the Divisional Officer Ayurveda or District Ayurveda Officer in-charge, as the case may be, shall be obtained instead of the Chief Medical and Health Officer.(2)If, in a year, bills for medical reimbursement exceeding Rs. 3,000/-(Rupees three thousand) are received from a Government servant the Controlling Authority shall get, all such bills exceeding the said limit examined by the Medical Board consisting of the Divisional Joint Director of Health Services, Chief Medical and Health Officer, Specialist of the disease concerned, Divisional Officer, Ayurveda or District Ayurveda Officer in-charge of the district, as the case may be and such bills shall be passed by the Controlling

Authority only on the recommendations of the Board.(3)If the bills for medical reimbursement presented by a Government servant in a year exceed Rs. 5,000/- (Rupees five thousand) then all such bills exceeding the above said limit shall be got scrutinized by a Board consisting of the Director Medical Services, Director of Medical Education, Director of Indian Systems of Medicine and Homoeopathy and the Controlling Authority shall pass such bills in accordance with the recommendations of the said Board only.The above proviso shall not be applicable in respect of reimbursement bills relating to :-(a)In-door patients; and(b)Patients suffering from such disease in respect of which the Chief Medical and Health Officer concerned has issued a certificate in the prescribed proforma to the effect that the treatment for the disease is required or likely to continue for a prolonged period.Note. - Such certificate shall not be issued for a period exceeding one year at a time but may be renewed from time to time for such period as may be necessary not exceeding one year at a time and the Chief Medical and Health Officer shall maintain a register containing particulars of such certificates issued by him in such manner as may be prescribed by the Government.]

## 8.

(1)Application for reimbursement shall be in Form I and shall be submitted to the controlling authority within six months from the date on which the expenditure is incurred :Provided that where the Government servant is himself the controlling authority, the limit of six months shall be calculated with reference to the date of presentation of the claim to the treasury officer.(2)Every application made under sub-rule (1) shall be accompanied by an essentiality certificate in Form II duly signed by the authorised medical attendant of the treatment, room rent and diet charges duly countersigned by him :Provided that where the drugs prescribed by the authorised medical attendant are outside the priced vocabulary of the Medical Stores Depot, the essentiality certificate in Form II shall in addition be countersigned by the Civil Surgeon in cases where he is not himself the authorised medical attendant.

## 9.

The authorised medical attendant shall in respect of each Government servant maintain in the form of a diary or memorandum the details, including place and the date of treatment or examination conducted by him which shall form the basis for the certificate to be given by him in Form II.

## 10.

(1)The claims of Government servants for reimbursement of medical expenses under these rules shall be disposed of by the drawing and disbursing officer concerned.(2)All bills for medical expenses shall be countersigned by the controlling authorities who are empowered to countersign travelling allowance bills of the Government servant concerned. It shall be the duty of the controlling officer to scrutinize carefully before signing or countersigning a claim in respect of medical expenses, that the claim is genuine and is covered by the rules and that charges claimed are supported by the necessary cash memos, receipts, certificates, etc. The controlling authority may reject such claims as do not satisfy these conditions.(3)[ The amount due on account of

reimbursement of medical expenses incurred shall be drawn on the Form M.P.T.C. 24A and paid over to them.] [Substituted by M.P. Rajptra, Part 4(Ga), dated 28-4-1978.](4)Charges on account of medical attendance and treatment shall be debitable to the sub-head "Allowances and Honoraria" subordinate to the major head concerned except in the case of members of the work-charged establishment where they shall be debitable direct to the work concerned.

## **11.**

(1)Rules 3 to 10 shall, in so far as they relate to medical attendance and treatment at hospital apply to the members of the family of a Government servant in the same manner and to the same extent as they apply to Government servant :Provided that where another child is born to a Government servant where there are three or more children living, the additional child so born shall not be entitled to the concession admissible under these rules.(2)A Government servant shall also be entitled for reimbursement of the charges incurred by him for the treatment of his wife during the confinement (including pre-natal and post-natal treatment and treatment for abortion) :Provided that no reimbursement shall be made if three or more children are living on the date of such confinement.

## **12.**

(1)A Government servant shall also be entitled to reimbursement of expenditure incurred by him on medical attendance and treatment of himself and the members of his family under the Ayurvedic, Unani, Homeopathic or Biochemic systems of medicines in the same manner and to the same extent as laid down in the foregoing rules :Provided that the expenditure incurred on purchase of such medicines shall be reimbursable in respect of medicines mentioned in Annexure annexed to these rules on the signature of the authorised medical attendant and the medicines out of the Annexure shall be reimbursable on the countersignature of the Principal/Divisional Officer Ayurveda/ Superintendent of the dispensary.(2)For the purposes of reimbursement under this rule, a Vaidya, a Hakim or a Homoeopathic or a Biochemic Doctor-in-charge of a hospital shall be deemed to be an authorised medical attendant.

## **13.**

On the coming into force of these rules the Madhya Pradesh Civil Services (Medical Attendance) Rules, 1955, the Madhya Bharat Government Servants (Medical Attendance) Rules, 1951, and the Central Services (Medical Attendance) Rules, 1944 shall stand repealed :Provided that such repeal shall not affect the previous operation of the rules so repealed or anything done or any action taken thereunder :Provided further that all claims for medical reimbursement relating to the period prior to the coming into force of these rules shall be governed by the provisions of the rules, applicable to the Government servant concerned immediately before the coming into force of these rules. Form I Form of Application[See Rule 8(1)]N.B. - Separate form should be used for each patient

**1. Name and designation of the Government servant (in block letters)**

**2. Office in which employed.**

**3. Pay of the Government servant as defined in the Fundamental Rules, and any other emoluments, which should be shown separately.**

**4. Place of duty.**

**5. Actual residential address.**

**6. Name of the patient and his/her relationship to the Government servant.**

N.B. - In the case of children, give the following information namely (state age also). (1) Date of birth. (2) Number in order of birth (3) Total number of children

**7. Place at which the patient fell ill.**

**8. Nature of illness and its duration.**

**9. Details of the amount claimed-**

I. Medical attendance, -(i) Fees for consultation indicating -(a) the name and designation of the Medical Officer consulted and the hospital or dispensary to which attached; (b) the number and dates of consultations and the fee paid for each consultation. (c) whether consultations were held at the hospital, at the consulting room of the medical officer or at the residence of the patient. (ii) Charges for pathological, bacteriological, radiological or other similar tests undertaken during diagnosis indicating -(a) the name of the hospital or laboratory where the tests were undertaken; and (b) whether the tests were undertaken on the advice of the authorised medical attendant; and if so, a certificate to that effect should be attached. (iii) Cost of medicines purchased from the market. (List of medicines, cash memos, and essentiality certificate should be attached). II. Hospital treatment - Charges for hospital treatment, indicating separately the charges for -(i) Accommodation (state whether it was according to the status or pay of the Government servant and in cases where the accommodation is higher than the status of the Government servant, a certificate should be attached to the effect that the accommodation to which he was entitled was not available). (ii) Diet (iii) Surgical operation or medical treatment. (iv) Pathological, bacteriological, radiological or other similar tests indicating -(a) the name of the hospital or laboratory at which undertaken; and (b) whether undertaken on the advice of the Medical Officer-in-charge of the case at the hospital. If so, a certificate to that effect should be attached. (v) Medicines (vi) Special medicines (List of medicines, cash memos and the essentiality certificate should be attached). (vii) Ordinary nursing. (viii) Special nursing, i.e. nurses specially engaged for the patient. State whether they were employed on the advice of the Medical Officer-in-charge of the case at the

hospital or at the request of the Government servant or patient. In the former case a certificate from the Medical Officer-in-charge of the case and countersigned by the Medical Superintendent of the hospital should be attached.(ix)Any other charges, e.g., charges for electric light, fan, heater, air conditioning etc. State also whether the facilities referred to are a part of the facilities normally provided to all patients and no choice was left to the patient.Note. - If the treatment was received by the Government servant at his residence give particulars of such treatment and attach a certificate from the authorised medical attendant.Rs.....

## 10. Total amount claimed.

## 11. List of enclosures

Declaration to be signed by the Government servantI hereby declare that the statements in this application are true to the best of my knowledge and belief and that the person for whom medical expenses were incurred is wholly dependent upon me.Dated.....Signature of the GovernmentServant and office to which attached.Form IIForm of essentiality certificate[See Rule 8 (2)]A. - In case of medicines not included in the priced vocabulary of the Medical Store Depot.Certified that Shri/Shrimati/Kumari..... son/wife/daughter/father/mother of Shri..... employed in the..... has been under my treatment from..... to..... for..... (name of the disease) at the..... hospital as indoor/outdoor patient and that the undermentioned medicines have been prescribed by me in this connection. These medicines are not included in the priced vocabulary of the Medical Stores nor are they preparations which are primarily foods, toilets or disinfectant.These medicines were absolutely essential for the treatment of the aforesaid Government servant.

S. No. Names of Medicines Cost

.....Signature and designation of the authorisedmedical attendant/Signature of the MedicalOfficer-in-charge of the case at the hospital.B. - In case of medicines included in the priced vocabulary of the Medical Stores Depot.I certify that Shri/Shrimati/Kumari..... son/wife/Daughter/father/mother of Shri..... employed in the..... has been under my treatment from..... to..... for..... (name of the disease) at the..... hospital as indoor/outdoor patient and that the undermentioned medicines have been prescribed by me in this connection. These medicines are included in the priced vocabulary of the Medical Stores and are out of stock/not available in the..... hospital. They do not include any medicines proprietary or otherwise, outside the aforesaid priced vocabulary nor are they preparations which are primarily foods, toilets or disinfectants.

S. No.	Name of Medicines	P.V.M.S. No.	Cost
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.....Signature and designation of the authorisedmedical attendant/Signature of the MedicalOfficer-in-charge of the case at the hospital.C. In case of Insulin treatment.Certified that Shri/Shrimati/Kumari..... wife/son/Daughter/father/mother of Shri/Shrimati..... employed in the..... has been under my treatment for diabetes at hospital as outdoor/indoor patient and that insulin prescribed by the..... was for treatment during the initial stages/in the hospital, of the

disease for which no reimbursement has been made extending over the period, from..... to..... the patient having developed complications necessitating hospitalisation.....Authorised Medical Attendant/Medical Officer-in-charge of the case at the hospital. Appendix V List of Admissible Allopathic Medicines included in New P.V.M.S. List

Nomenclature	Proprietary Brand generally prescribed by Medical Profession	New P.V.M.S. No.
(1)	(2)	(3)
<b>A</b>		
Acetylsalicylic Acid	....	01207
Achromycin (Ear) So In	....	P01154
Albucid	....	P01147
Alcohol (Spirit Ractified)	....	01450
Alcopar	....	P01001
Aludrox 'MH'(Gel)	....	P01039
Aluminium Hydroxide Dridecel	....	01091
Amethocaine HCL	....	01251
Ammoniated Camphor Liniment	....	01356
Ammonium Bicarjonate	....	01451
Ammonium Chloride	....	01361,01362
Aminosal Vitrum	....	01448
Anaesthetic Ether	....	01234
Antrenyl Drops	....	P01042
Aromatic Spirit of Amonia	....	01262
Atropine Sulphate	....	01104
Antistine Drop	....	P01156A
<b>B</b>		
Bellodonna Dry Extract	....	01105
Bellodonna Liquid Extract	....	01106
Benadryl Expectorant	....	P01158
Benadryl Syrup	....	P01060
Benzyl Benzoate application	Ascabioa Uni-Scab	01326
Benzathine Penicillin 6 Lacs	....	01011
Benzathine Penicillin 12 lacs	....	01012
Benzyl Benzoate	....	01327
Benzoic Acid	....	01041
Bephenium Hydroxynaphthoate alcopar	....	01001
Bleaching Powder	....	01475,01495



Boric Acid	....	01452
C		
Capsule Ampicillin	Ceficillin, Ampipen, Sesipan, Brocellin, Novamex	01009
Capsule Benadryl	....	P01059
Capsule Certramycetin-C	....	P01004
Capsule Chloramphenicol, 250 mg.	Chloromycetin, Chloramphysin, Rechlor	01016
Capsule Chloramphenicol & Extrostrep	Chlorostrep Kapseals	01012
Caps. Streptomycin, 125 mg. Capsule Strepto Paraxine	....	01021
Capsule Chlorestrep	....	P01005
Capsule Chlortetracycline, 250 mg.	Aureomysin	01019
Capsule Delantine	....	P01114
Capsule Diphenhydramyne 'HCL'50 mg.	Benadryl	01132
Capsule Entrostrep	....	P01005
Capsule Indomethacine, 25 mg.	Indocid	01213
Capsule Intestopan Forte	....	P01025
Capsule Ledermycin	....	P01007
Capsule Mystecline-C	....	P01009
Capsule Oxy-Tetracycline HCL, 250 mg.	Terramycin S.F.	01039
Capsule Restacline	....	P01012
Capsule Sandocycline	....	P01014
Capsule Sodium Fusidate, 250 mg.	....	01027
Capsule Sodium Diphenythydan, to in 100 mg.	Dilantin Caps.	01232.
Capsule Strepto-Paraxin	....	P01005
Capsule Tetracycline, 250 mg.	Veovocycline, Alcycline	P01035
Capsule Troxidone, 300 mg.	Tridione	01233
Capsule Vit A concentrated	....	01425
Capsule Vit A and D	....	01443
Caffeine Citrate	....	01264
Caladryl Lotion	....	P01061
Calamine	....	01352
Calcium Gluconate	Calcium Hydroxide	01466
Calcium Hydroxide	....	01353/01352
Calomel	....	01122
Castor	....	01121

Chlorodyne	....	01148
Chloramphenicol Oral Suspension	....	01020
Chloramphenicol & Streptomycin Suspension	Entrostrep Chlorostrep Strepto Paraxin	01032
Chloroform	....	01235
Chlorosol	....	01335
Chloroform Spirit	....	01453
Chloral Hydrate	....	01244
Codeine Phosphate	....	01311
Codeine Phosphate Syrup	....	01312
Cetrimide	....	01331
Compound Syrup of Hyphosphites	....	01265
Cresol	....	01333
Cresol with Soap Solution	....	01334
Crocin Syrup	....	P01015
Crystal Violet	....	01042
Chlorpramazine HCL	Largactil Syrup	01278
Chloramphenicol (Ear) Drops	....	01304
Chloromycetin (Ear) Drops	Chloromycetin	01305
Chloropycetin (Ear) Drops	....	P01155
Chloromyphycin Dry Syrup	....	P01003
Chlorostrep Suspension	....	P01006
Cyproneptadine Syrup	Perioctin Syrup	01156
D		
Decadron (Eye/Ear) Soin	....	P01149
Demethyl Chloret Drops	Ledermycin Drops	01022
Dettol Solution	....	P01162
Dextrose Monohydrate	....	01159
Diethylcarbamazinc Citrate Syrup	Benocide, Hetrazon, Herogen, Ciplagon, Filazyme	01002/01003
Digene Gel	....	P01039
Dilentin Suspension	....	P01115
Dilosyn Expectorant	....	P01158/P01060
Dilosyn Syrup	....	P01062
Diphenydramine Elixer	Benadryl	01153
Disinfecting Fluid Grade I Class A	....	01473
Disinfecting Fluid Grade I Class B	....	01474

Dried minium Hydroxide Gel	....	01098
E		
Enterstrep Suspension	....	P01006
Ephedrine HCL	....	01146
Ethyl Chloride	....	01236
Ethylmorphine HCL	....	01313
Eucalyptus Oil	....	01336
F		
Feirgenol Solution	....	P01062
Ferrous Sulphate Dried	Fersolate	01170/01171
Framycetin (Oph) Drops	Soframycin eye drops	01295
Furoxone Suspension	....	P01022
G		
Glycerine	....	01454
Glycerine of Pepsin	....	01099
Gum Indian	....	01455
H		
Halothane	Elouthane	01237
Hexamine	....	01366
Hematropine Hydrobromide	....	01296
Hydrocortisone Acetate (Oph Drop)	Efcorlin	01297
I		
Ichthammol	....	01338
Iron and Ammounium Citrate	....	01175
INJECTIONS		
Injection Analgin	Novalgin Metamizolne	01211
Injection Adrenaline Tartrate	....	01144
Injection Adminophyline	....	01188
Injection Ampicillin Sodium	Ampepen, Bisepen, Biocellin, Anticellin	01010
Injection Amylobarbitone Sodium	....	01241
Injection Aneurine HCL (Vit. B)	....	01418
Injection Ascorbic Acid (Vit. C)	....	01415
Injection Atropinie Sulphate	....	01103
Injection Avil	....	P01057
Injection Aquavitron	....	P01198
Injection Baralgan	....	P01103
Injection Benzathine Penicillin 6 lacs	....	01011

Injection Benzathine Penicillin 12 lacs	....	01012
Injection Benzyl Penicillin Sodium I.M.2 lacs	....	01013
Injection Benzyl Penicillin 5 lacs	....	01014
Injection Benzyl Penicillin 10 lacs	....	01015
Injection Betamethasone Phosphate	Betnesol	01405
Injection Betnesol	....	P01204
Injection Butazolidiri	....	P01101
Injection Ca-Glacto Gluconate	....	P01213
Injection Ca-Glacto Gluconate C	....	P01214
Injection Carbochol	....	01152
Injection Calcium Pantothenate	....	01420
Injection Calcium Gluconate	....	01467
Injection Calciferol (Vit.D)	....	01419
Injection Cortisone Acetate	....	01406
Injection Cephaloridine	....	01018
Injection Chloramphenicol	Chloromycetin	01017
Injection Chloromphenicol Sodium Succinate	....	01033
Injection Chloroquine Sulphate	Resochin	01056
Injection Chlorophyramine Meleate (Glaxo)	....	01128
Injection Chlorpromazine HCL	Largactil	01275
Injection Clauden	....	P01075
Injection Complamina	....	P01087
Injection Cyanocobalmin (Vit.B12) 25 meg.	Macrafoline (Glaxo)	01421
Injection Cyanocobalmin (Vit.812) 100 meg.	....	01422
Injection Cyanocobalmin (Vit.B 12) 1000 meg.	....	01423
Injection Cyanocobalmin (Vit.B 12) 500 meg.	Redisol-H	01424
Injection Cyclophoscephamide	Endoxan, Asta	01076/01077
Injection Decadurbin	....	P01199
Injection Decadron Phosphate	Dexamethazone	P01207
Injection Dehydroemetine, 60 mg.		01048
Injection Deoxycortisone Acetate	...	01409

Injection Deriphyline		P01091
Injection Dianabol	...	P01202
Injection Dehydergotamine	A (Sandoz) Dehydergot	01148
Injection Deslonaside		01185
Injection Duraboline, 10 g.	...	P01201
Injection Duraboline, 25 g.	...	P01200
Injection Duvidilan		P01089
Injection Dextran 40 in 5% W / V Dextrose		01155
Injection Dextran 40 in Sodium Chloride		01156
Injection Dextran 110 in 5% W/V Dextrose		01157
Injection Dextran 110 in Sodium Chloride	...	01158
Injection Chloromphenicol Polmitate 125 mg.		01032
Injection Dextrose 25% W/V Sol.		01160
Injection Dextrose 5% ml. bottle	...	01161
Injection Degoxin	...	01186
Injection Diamorphine HCL	...	01187
Injection Dimethyl Chlor Amino HCL	...	01129
Injection Emetine HCL 30 mg.	...	01051
Injection Emetine HCL 60 mg.		01052
Injection Endoxan Asta	...	P01028
Injection Ephedrine HCL	...	01145
Injection Ergometrine Malcate	...	01378
Injection Flexdil	...	P01122
Injection Folic Acid	...	P0428
Injection Frusomide	Laisx	01371
Injection Fuructadex	...	P01072
Injection Gardinal Sodium	...	P01119
Injection Gallamine Triethiodine	Flexidil	01260
Injection Halapryramine	Synopen	01135
Injection Heparin Sodium		01168
Injection Hyaluronidase	Hyalase	01162
Injection Hydroxyethyltheophyline	Derphylein	01192
	Prolution	01392

Injection Hydroxyprogesterone Capronate		
Injection Hydrocotrisone Acetate	....	01410
Injection Imferon	Iron, IM/IV Uniferon	P01079
Injection Imferon-intramuscular	....	01173
Injection Imferon-intravenous	....	01174
Injection Inderal	....	P01094
Injection Impiramine HCL	Tofranil	01267
Injection Insulin	....	01384
Injection Insulin Protamine Zinc	....	01385
Injection Insulin Zinc Suspension	....	01386
Injection Insulin NPH	....	01387
Injection Iron I.M.	Imferon, Uniferon Jectofer	01173
Injection Iron I.V.	Imferon	01174
Injection Isoxsuprine HCL	Duvadilan	01194
Injection Irgapyrin	....	P01109
Injection Loargactil	....	P01134
Injection Laxix	....	P01184
Injection Levarternol Bitartrate	....	01206
Injection Lignocaine HCL 30ml.	Xylocaine	01253
Injection Lignocaine HCL 50ml.	Xylocaine	01255
Injection Liver Crude	....	01176
Injection Mecalvit-IM	....	P01215
Injection Manodions Sod. Bisulph (Vit.K)	....	01167
Injection Methedrine	....	P01125
Injection Methergin	....	P01189
Injection Micoren	....	P01086
Injection Morphoine Sulphate	....	01215
Injection Methodone	Physeptone, Linetus	01214
Injection Methylamphetamine HCL	Methedin	01269
Injection Methylegrometerine Maleate	Methergin	01379
Injections Nalorphine HBr	Lethidrone	01322
Injection Nandrolone Phenyl-Propionate	Durabolin	01399/01400
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Injection Physeptone	....	P01112
Injection Phethidine	....	01218
Injection Phenylbutazone & Amino-Pyrine	....	01212
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Injection Phaniramine Meleate	....	01147
Injection Polymyxin B Sulphate	....	01026
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Tablet Meccaptopurine, 500 mg.	....	01078
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Tablet Neo-Octinum	....	P01045
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Tablet Nicotinamide	....	01432
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Tablet Pecitane	....	P01140
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Tablet Phenytoin Sodium, 100 mg.	Eption	01230
Tablet Phenobarbitone 60 mg.	Gardonal	01246
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Tablet Promethazine HCL, 10 mg.	Phenergan	01143
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Tablet Probenecid 500 mg.	Benemid	01472
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Tablet Reboflavine, 3 mg.	....	01438
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Tablet Serotena	....	P01128
Tablet Serepax	....	P01145
Tablet Segontin	....	P01098
Tablet Sodium Amino Salicylate	....	01069
Tablet Sodium Citrate	....	01365
Tablet Sodium Phenobarhiton, 100 mg.	Gardenal Sodium	01250
Tablet Amino Salicylate 503 mg.	(Sodium P.A.S.)	01069
Tablet Sorbitrate	....	P01099
Tablet Siquil	....	P01142
Tablet Sarbide, Nitrate, 100 mg.	Sorbitrate	01199
Tablet Spasmindon	....	P01048
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Tablet Sulphamoxole, 500 mg.	Sulfuno	01093
Tablet Sulphaphenozole, 500 mg.	Orisul	01092
Tablet Sulphasalazine, 500 mg.	....	01084
Tablet Sulphafurazole, 500 mg.	....	01085
Tablet Sulphamethizole, 500 mg.	Uroculosil	01089
Tablet Sulphamethizole, 100 mg.	Uroculosil	01083
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Tablet Taka-Siastase & Pepsin Co.	....	P01152
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Tablet Thiacetazone, 75 mg.	Unithiben Forte	01071
Tablet Thiacetazone, 50 mg.	....	01072
Tablet Thiacetazone, 150 mg.	....	01073
Tablet Thiamine HCL (B), 100 mg.	....	01441
Tablet Thioridazine, HCL 25 mg.	Mellaril	01287
Tablet Thioridazine, 100 mg.	Mellaril	01288
Tablet Tofranil	....	P01130
Tablet Tolazoline HCL 25 mg.	Priscol	01151
Tablet Tolbutamide, 500 mg.	Restinon	01388
Tablet Triamcinolone, 4 mg.	Kenacort, Ledercot	01412
Tablet Triflupromazine, 10 mg.	Siquil	01292
Tablet Triflupromazine, 5 mg.	Eskazine, Terfluzin	01289
Tablet Trifluoperazine, 1 mg.	Eskazine, Terfluzin	01290
Tablet Trihexphenidyl, HCL 2 mg.	Pacitane	01293
Tablet Trancylpromine, 10 mg.	Parnate	01274
Tablet Trisulphapyridines, 500 mg.	....	01094

Tablet Unienzyme	....	P01053
Tablet Urolucosil	....	P01037
Tablet Vaganin	....	P01100
Tablet Valium	....	P01131
Tablet Vegetable Laxatixe	....	01120
Tablet Vitamin B Complex	....	01445
Tablet Vitamin B with Vit. C	....	01446
Tablet Xanthinol Nicotinate, 150 mg.	Complamina	01205
Tablet Yeast Dried	....	01427
TINCTURE		
Tincture Ammoniated Valerian	....	01261
Tincture Belladonna	....	01107
Tincture Benzoin Compound	....	01329
Tincture Compound Cardamom	....	01116
Tincture Ginger Strong	....	01109
Tincture Hyoscyamus	....	01110
Tincture Inpeccaeuanha	....	01316
Tincture Lobelia Ethereal	....	01321
Tincture Opium Camphorata	....	01115
Tincture Opium	....	01216
Tincture Senagoe	....	01323
Tincture Urginea	Tin Scilia	01376
Tineafax Power	....	P01171
Talc Purified	....	01360
Tetracycline (Ear) Drops	Achromycin	01006
Teracycline HCL (Pediatric) Drops	....	01034
Trichloroethylene	Trilene	01240
Turpentine Liniment	Eutheria	01358
Turpentine Oil	....	01361
V		
Vit. A and D Concentrate Solution	....	01442
W		
Water Purified	....	01456
Weak Iodine Solution	....	01350
X		
Xylocaine 2% Jelly	....	01252
Xylocaine 4% Topical Suspension	....	01254

Xylometazoline (Nasal) Drops	Otrivin	01308
Z		
Zinc Oxide	....	01355
Zinc Oxide & Salicylic Acid (Lassar's Paste)	....	01303
Zinc Sulphate	....	01303
SOME OTHER NUMBERS		
Silogel-sus	....	P01070
Biciples Syp.	....	P01334
Nosspotone Syp.	....	P01266
Ultran Syp.	....	P01051
Strepecor Syp.	....	P01013

Appendix VIII[Public Health and Family Planning Department No. 3172/34/XVII-Med-IV/75, dated 27-8-1975]Constitution of Central/divisional/district Invalidating and Medical BoardThe State Government are pleased to constitute the Central/ Divisional/District Invalidating and Medical Boards as below :-Central Invalidating and Medical BoardI. There shall be a Central Invalidating and Medical Board at the State Headquarters (Bhopal), which would function under the Presidentship of the Director of Medical Services, Madhya Pradesh. This Board shall give a second opinion on the findings of the Devotional Boards and would function more in the capacity of an Appellate Authority. This Board will not be competent to entertain cases directly.The Board shall comprise of the following members :-

President - Director of Medical Services, Madhya Pradesh.

Members - Professor of MedicineProfessor of Ophthalmology.OnePrivate Practitioner.

[One more member could be co-opted from any speciality, if and when required for advice].II. The Private Practitioner, who is appointed on the Board, shall serve for a term of one year. After this period, either he has to be reappointed or another doctor would be nominated as a member by the Government, to serve on the Board. However, he shall continue to work on the Board even after the expiry of the period of one year, till he is reappointed or another person is nominated.III. The Board shall meet once a month, on the first Saturday. If that happens to be a Gazetted holiday, then on the next working day.IV. Cases shall be examined by the Board only under the following two conditions :- (a)When a person examined by a Divisional Board, goes in appeal against their findings;(b)When the Head of Office, under whom the person examined by tire Divisional Board is serving, doubts the findings of the Divisional Board and desires to have a second opinion.V. The Divisional Medical Board, while forwarding an appeal against its own findings, shall given in detail the conclusion arrived at. No appeal shall be directly entertained.VI. The Divisional Boards shall ensure that a period of atleast 10 clear days is available between the date of receipt of the appeal by the Central Board and the date of its next meeting.VII. Special meetings of the Board can be convened on any working day subject to a maximum of two such meetings in a month provided the President so orders.VIII. When either party prefers an appeal to the Central Board, an amount of Rs. 30 shall have to be deposited as fee. The splitting up of share will be done in the following manner :- (a)President and three regular members Rs. 5-00 each- Total: Rs. 20.00(b)Government's share to be deposited in Treasury - Rs. 10.00.(c)When a Specialist is to be co-opted, he shall have to be paid

Rs. 5.00 and on such an occasion the Government's share would be reduced to Rs. 5.00 only. IX. The Board shall frame rules for its own working and also issue necessary guidelines to the Divisional and District Boards. Divisional Invalidating and Medical Boards I. Such Boards shall function at the Divisional Headquarters of the State, under the Chairmanship of the Divisional Joint Director of Health Services. This Board shall examine the cases of all Gazetted Officers for initial appointment, as well as cases of employees of all categories [excepting Class IV] in connection with long leave, commutation of pension and also those cases of Class III and IV employees who prefer an appeal against the decision of the Civil Surgeon/District Medical Board. II. The Board shall comprise of the following :-

President - Joint Director of Medical Services, Divisional.

Members - Reader in Medicine Reader in Ophthalmology. One Private Practitioner.

(One more member could be co-opted from any Speciality, if and when required for advice.) III. The private practitioner who is appointed on the Board, shall serve for a term of one year. After this period, either he has to be reappointed or another doctor would be nominated as a member by the Government, to serve on the Board. IV. The Board shall meet on the first Saturday of every month. If that day happens to be a Gazetted holiday, then on the next working day. V. No cases of invalidation shall be entertained by the Board directly. The Head of Office shall first refer the case to the Civil Surgeon of the District with full particulars. The Civil Surgeon after a preliminary examination, shall satisfy himself as to the incapacity for further service and shall then draw up a succinct statement of the case and send the whole record at least 10 days before the meeting of the Board. [The form on which the Civil Surgeon shall forward his report is appended]. VI. All cases appearing before the Board either for examination for initial appointment or for commutation of pension shall have to deposit a fee of Rs. 24.00 in advance. The splitting up of share will be done in the following manner :- (a) President and three regular members : Rs. 4 each- Total Rs. 16.00. (b) Government's share to be deposited in the Treasury- Rs. 8.00. (c) When a Specialist is to be co-opted he shall have to be paid Rs. 4.00 and on such occasion the Government's share would be reduced to Rs. 4.00 only. District Invalidating and Medical Board I. Such Boards shall function at all District Headquarters under the Chairmanship of the Civil Surgeon of the district. II. These Boards shall examine all the staff belonging to Class IV services for purposes of invalidation and Class III and Class IV staff for fitness for public service. III. The District Board shall comprise of the following members :-

President - Civil Surgeon

Members - Resident Medical Officer I/C of the District Hospital.

Specialist in Medicine or Ophthalmology. In case one is not available then another senior Assistant Surgeon. IV. All cases appearing before the Board for obtaining a Physical Fitness Certificate for initial appointment, shall have to pay Rs. 16.00, in advance. The splitting up of share will be done in the following manner (a) President and two regular members Rs. 4.00 each- Total Rs. 12.00. (b) Government's share to be deposited in the Treasury- Rs. 4.00 V. Relevant rules and regulations for the functioning of the District Invalidating and Medical Boards shall be framed by the President of Central Invalidating and Medical Board. Form of Certificate for Incapacity for Service by a Medical Board [A] Statement of ease for Invalidating Board :

- 1. Rand and name.**
- 2. Age according to service-book.**
- 3. Age according to his own statement.**
- 4. Age according to his appearance.**
- 5. Pay.**
- 6. Duration of service.**
- 7. Leave throughout service.**
- 8. Hospital leave or sick leave [with dates].**
- 9. Date of return from last sick leave.**
- 10. Disease or reasons for invalidation.**
- 11. Habits.**
- 12. Previous illness and periods of being in hospital in the preceding three years.**
- 13. Result of Medical treatment, if any.**

Medical History. History of the case and present condition. Opinion of the Civil Surgeon. Date..... Signature [B] Proceedings of the Medical Board: Certified that we have carefully examined..... s/o..... His age is, by his own statement..... years, and by appearance about ..... years. We consider..... to be completely and permanently incapacitated for further service of any kind in the Department to which he belongs in consequence of..... His incapacity does not appear to us to have been caused by irregular or intemperate habits.

President:    Members:

Dated.....

Necessary amendment in the Madhya Pradesh Medical Manual will be made in due course. Appendix IX [Directorate of Health Services Circular No. Gen/MR/74/49867-C, dated 29-4-1974]. [General, instructions/orders issued by Director of Medical/Health Services, Madhya Pradesh to the Authorised Medical Attendants and other Medical Officers.] It has been observed that the Authorised Medical Attendants as well as the countersigning authorities are not paying their



proper attention towards the performance of their duties with the result that all sorts of irregularities are pointed out by the various drawing and disbursing officers and also by the Accountant General, Madhya Pradesh. It is, therefore, re-emphasized once again that while signing or countersigning the reimbursement bills the following points should be kept in mind :-(1)The A.M.A. should not treat the patients at their own residence. In emergencies either the patient should be treated at his residence or brought to the Hospital where better facilities exist.(2)The period of six months mentioned in sub-rule (1) of Rule 8 of the Madhya Pradesh Civil Services (Medical Attendance) Rules, 1958 should be counted from the date of purchase of medicines and not from the date of actual payment, if purchases are made on credit.(3)When the countersigning authority is satisfied that the medicines prescribed are very expensive and the A.M.A. has not taken due care in prescribing cheaper and equally effective medicines, he should not countersign the bill. In such cases it will be the responsibility of the A.M.A. to make good the loss to the patient if demanded.(4)The countersigning authority should countersign the Essentiality Certificate only when the medicines prescribed are actually exhausted.(5)The A.M.A. should indicate the names of medicines on the certificate in their own hand writing and in Block Letters.(6)The A.M.A. should write in words the amount of bill in their own hand writing.(7)The A.M.A. should not prescribe Dry Fruits as they are not reimbursable.(8)The A.M.A. should indicate clearly their designation and Degree while signing the reimbursement bills. The name should also be legible.(9)When supplementary protein diet is included, it is essential that a certificate to this effect is attached to the Bill by the A.M.A.(10)Classification regarding PVMs and Non-PVMs drugs should be done correctly. The present practice of assigning imaginary numbers is not correct.(11)The countersigning authority should keep a close watch on the working of the A.M.As. under his control. The erring Doctors should be cautioned in writing. In case of repeated failure to comply with the instructions the names of the defaulters should be reported to the Director for debarring them for reimbursement work.(12)While completing the certificate the following points need special mention :-(a)Disease.(b)Duration.(c)Occupation and correct address.[Directorate of Health Services Circular No. VI/MR/747118997- 119106-C, dated 8-10-74].A doubt has been raised as to whether Medical Officers working in specialised out-door can treat patients outside their Speciality or not? It is clarified for information of all concerned that the Specialised out doors such as T.B. Clinic/Mental Hospitals/Leprosy Centre etc., will be for the treatments of the Speciality concerned. However these Medical Officers, can treat the cases of diseases other than their Specialities at their consulting room in case they are not in receipt of N.P.A. or restricted practice allowance. Where Specialist Clinic/Hospitals are available patients of concerned Speciality will be treated only in these clinics/Hospitals and not in General Hospitals. Treatment of Government servants for Cancer within the State. In our State we have got two fully equipped hospitals at Indore and at Jabalpur for investigations and treatment of Cancer cases. The Government have been kind enough to spend lakhs of rupees in providing the most modern equipment as well as qualified and trained staff to these hospitals. Therefore all the concerning doctors and specialists are requested that they should refer all Cancer cases either to Indore Cancer Hospital or Jabalpur Cancer Hospital. If after examination at these institutions the Senior Radiologist-cum-Medical Specialist of these institutions certifies that the required treatment is not available in their institutions then only they should recommend the cases to Cancer Hospital outside the State of Madhya Pradesh. Appendix X[P.H.D. Memo No. 4611/489/XVII-M-IV, dated 15-5-1965]. Unification of rules regarding (a) Definition of Well-to-do Patients, (b) charging of fees for operations, pathological and radiological tests,

examinations, dental works etc., and (c) sharing of fees recovered from Well-to-do patients between Government and the doctors attending on the patients. Ref. - This Department Memo No. 3005-884-XVII-Med. IV, dated 22-8-1963, addendum No. 3157-384-XVII-Med. IV, dated 29-8-1963. In connection with the application of paragraphs 460 and 467 of the Madhya Pradesh Medical Manual (which were made applicable to M.K. region only as communicated to you vide D.O. letter No. 1886-2391 /XVII-M.I., dated the 28th April, 1962 from Shri S.K.S. Chib, Government are further pleased to order as under in modification of this Departments memo under reference. (i) All persons or members of their family dependent on them having an income of more than Rs. 6000 per annum occupying a paying or general ward or treated as out patients and all persons occupying paying or private wards whatever their income may be shall be liable to pay such fees as may be prescribed for different kinds of treatment unless they are entitled to free treatment under any other rules such as Madhya Pradesh Civil Services (Medical Attendance) Rules, All India Services (Medical Attendance) Rules etc. (ii) Fees will be received on the items and at the rates shown in enclosed Appendix 'A'. (iii) The fees will be apportioned between Government on the one hand and the doctor and his assistants on the other in the ratio specified below, subject to an overall provision that the share of any such person shall be limited to his monthly pay, excluding special pay and allowances and that any excess over such monthly pay shall be retained by such persons only to the extent of Rs. 20% thereof :-

1.	Operations	Surgeon	25%	
		Asstt. Surgeon	10%	
		Anesthetist	10%	
		Nurses	03%	
		Inferior Servants	02%	
			50%	Government share 50%
2.	Radiology	Radiologist	28 □%	
		Tech. Assistant	05%	(in case untrained 2% rest going to Radiologist)
			33 □%	66 □% Government share.
3.	Pathology	Pathologist	28 □%	
		Tech. Assistant	5%	(In case untrained 2% rest going to Pathologist).
			33 □	66 □% Government share.
4.	Dental work	Dentist	35%	
		Anesthetist	10%	(If not employed this will go to the Dentist)
		Tech. Assistant	05%	(If untrained 2% rest going to the Dentist).
			50%	50% Government share.

**4. Government are further pleased to decide that the above mentioned orders will come into force with effect from the 1st June, 1965 throughout the whole State.**

Appendix 'A' Statement Showing the Items on which and the Rates at which Fees are to be Charged.

	Items	Rate
<b>Operation Fees</b>		
1.	Operations on brain	200
2.	Abdominal Sections cancer of bowel, stone in the Kidney, Excision of the Kidney and excision of upper jaw.	200
3.	Amputations at or excisions of the shoulder or hip joints, removal of breast and auxiliary glands etc. for cancer.	200
4.	Trephining mastoid antrum, radical mastoid operations and operations of equal gravity.	150
5.	Cataract, amputations of arms, forearms or leg, thigh, radical cure of hydrocele, operations for hemorrhoids and such other operations	75
6.	Endeletion to tonsils.	
7.	Other simple operations requiring an anesthesia	25
7.	Confinement	50
<b>Pathological and Bacteriology test fees</b>		
1.	Microscopical examination of smears of blood pus, Sputum, throat swabs, urine deposits etc.	2
2.	Blood counts Red, White or differential	2
3.	Blood picture complete	5
4.	Widal's test	5
5.	Kahn test	5
6.	Wasserman test	10
7.	Estimation of Hemoglobin	25
8.	Culture of organisms and report	10
9.	Animal inoculation and report	20
10.	Ordinary examination of urine	2
11.	Quantitative and microscopic examination of urine for bacteria.	3
12.	Culturing urine	10
13.	(a) Estimation of sugar in urine	2
	(b) Estimation of blood sugar	5
14.	(a) Faces microscopical examination of	2
	(b) Faces Cultivation and Planting	10

15.	Preparation of autogenous vaccine with report and 12capsules.	16
16.	Microscopical examination of sections	10
17.	Blood Sedimentation test	2
18.	Sugar tolerance test	10
19.	Culture blood (for culture and identification of organismcomplete).	5
20.	Culture throat swabs etc.	5
21.	Section cutting and histological examination of	10
22.	Blood grouping	2
23.	Congulation and bleeding time	2

#### X-Ray Examination

1.	X-Ray Skigraphy for head, chest, abdomen and joints	15
2.	X-Ray Skigraphy for limbs, neck and shoulder	10
3.	X-Ray screen examination and X-Ray therapy for sitting	3
4.	X-Ray examination of teeth per film	2/8/-
5.	Extremities bones and joints	10
6.	Screening of bones of extremities	3
7.	Screening of abdomen after opaque meal	3
8.	Cheque meal examination of alimentary tract depending uponmunika of films.	20

#### T.B. SECTION

1.	Artificial Pneumothorax Initial	5
2.	Artificial Pharmothorax Refill	10
3.	Phrenic Nerve Operation	50
4.	Theracoscopy and cauterization of Adhesions	100
5.	Examination and filling in of Admission forms of otherSanatoria.	5
6.	Phecumo-peritoncum fills	100
7.	Therocoplasty each stage	100
8.	Blood transfusion	25

#### Electrical Treatment

1.	Ultra Violet message and Ionisation, Diathermy.	1
2.	Calvnic or Faradic current or Suniaiodel	1
3.	Celled bath	1
4.	Ionisation	2
5.	Infra Red	1
6.	Medical Diathermy	2
7.	High frequency current	1
8.	Heat Bath	1

9.	Reaction of degenerative test	2
10.	Coutery	2
11.	Short wave therapy	2
12.	Inducto-therapy	2
13.	Fever therapy	10
14.	Electro cardiogram	10
Fees for dental works		
1.	Extraction by novocation	2
2.	Extraction under nitrous oxide gas or Chloroform	6
3.	Sealing and Cleaning teeth (Per tooth)	3
4.	Treating nerves and filling (Per tooth)	5

Appendix XI Public Health and Family Planning Department The State Government hereby makes the following rules for regulating medical attendance and the treatment of Freedom Fighters. The Madhya Pradesh Freedom Fighters (Medical Attendance and Treatment) Rules, 1975

## **1. (i) These rules may be called the Madhya Pradesh Freedom Fighters (Medical Attendance and Treatment) Rules, 1975.**

(ii) They shall apply to the Freedom Fighters as defined in clause (Kha) of Rule 2 of the Madhya Pradesh Swatantrata Sangram Samik Samman Nidhi Niyam, 1972. (iii) They shall come in force from the 2nd October 1975.

## **2. In these rules, unless the context otherwise requires,-**

(a) "Authorised Medical Attendance" means-(i) in the Medical College Hospital/Ayurvedic College Hospital-Lecturer on clinical side and above; (ii) in District Headquarters Hospital, the Civil Surgeon/Additional Civil Surgeon or Specialist or any other doctor in Government Employ to whom reference is made by Civil Surgeon; (iii) at the Tehsil Hospital or Primary Health Centre the senior most Assistant Surgeon or Specialist of the level, if any; (iv) at a dispensary (Allopathic or indigenous) the officer incharge; (b) "Hospital" means a hospital or dispensary maintained by the Government; (c) "Family" means in relation to the Male Freedom Fighter his wife and in relation to Female Freedom Fighter her husband and parents who are wholly dependent on Freedom Fighter; (d) "Treatment" means the use of all medical and surgical facilities available at the hospital in which the Freedom Fighter is treated and includes :-(i) the employment of such pathological, bacteriological, radiological and other investigations as are considered and certified in writing as necessary by the Medical Attendant; (ii) the supply of such medicines, vaccines, serum or other therapeutic substances as are ordinarily available in the Hospital; (iii) such nursing as is ordinarily provided to inpatients by the hospital; (iv) blood transfusion; (v) ultra-violet light; (vi) in case of females-(a) treatment during confinement (pre-natal and post natal treatment) including treatment for abortion; and (b) douching.

**3. (i) A freedom fighter whose income does not exceed Rs. 350.00 per month shall be entitled to medical attendance by the Authorised Medical Attendant free of charge**

(ii) If the Authorised Medical Attendant is of opinion that the case of freedom fighter is of such a serious or special nature as it requires attendance by any doctor other than himself, he may move the Director, Medical Services to arrange for the deputation of such other doctor for the purpose of consultation, in which case, the deputed doctor irrespective of his rank, shall not be entitled to charge any fees for the professional services rendered to the freedom fighter. (iii) In exceptional case where Civil Surgeon/Superintendent decides a Freedom Fighter may be admitted the facility of private ward free of charge. Family member will however be entitled to free treatment in General Ward to the extent prescribed by the Authorised Medical Attendant. (iv) A Freedom Fighter who is suffering from Mental disease shall be entitled to medical attendance, treatment, accommodation and diet free of charge at a Government Mental Hospital in the State for a period not exceeding two years from the date of admission. (v) In case the medicines are not in stock in Government Hospital/dispensary but are essential for the recovery or prevention of serious deterioration, the Authorised Medical Attendant may make local purchase subject to availability in the local market, on the countersignature of the Civil Surgeon of the District/Superintendent of the Hospital as the case may be. (vi) All the facilities to the freedom fighters are contained in these rules, shall be available only on the production of an Identity Card issued by the Collector of the district, the monthly income of the freedom fighter shall be specifically mentioned in it. (vii) Freedom fighter who are in Government services may opt these rules within 3 months from the date of promulgation of these rules. In the absence of an option they shall be governed by Medical Attendance Rules of the service concerned. (viii) Freedom fighter whose demand for such attendance as mentioned in the above rules, is not complied with may report the matter to the Director, Medical Services, Joint Director of Ayurvedic as the case may be whose decision shall be final.

**Appendix XII Rules of T.A. for Medical Advice and Treatment [Extracts from M.P. Travelling Allowance Rules]**

**S.R. 115-General rule.** - If in order to obtain medical advice, a Government servant is compelled to leave a station at which he is posted and at which there is no medical officer of Government and travels to another station, he may, on production of a certificate from the medical officer consulted that the journey was, in his opinion, absolutely necessary, draw travelling allowance for the journey.

**Note.** - The expression 'medical advice' in the above rule should be held to include the necessary medical examination and treatment obtainable at reasonable expense to Government.

**S.R. 116-Journey to obtain Medical Certificate.** - If a Government servant, whether gazetted or non-gazetted, is compelled to travel to another station to get a certificate, from a medical board to enable him to obtain leave on Medical Certificate he may draw travelling allowance for the journey, provided that no travelling allowance will be allowed if the Board does not declare him unfit. Travelling allowance is also not admissible for a journey to procure health certificate on first appointment to Government service, or for a journey to appear before a medical board for obtaining a certificate of fitness to return to duty.

**Note.** - Travelling allowance is not admissible under the above rule for a journey to obtain a Medical Certificate in support of an application for extension of leave.

**S.R. 117-Previous permission necessary, if obtainable.** - The journeys contemplated by Rules 115 and 116 should not be undertaken without the previous permission of the Controlling Officer, if such permission can be obtained without risk to the Government servant requiring medical advice.

**S.R. 117-A.** - A Government

servant who is compelled to join the Postal Life Insurance Scheme may, if he has to make a journey to undergo the prescribed medical examination, be allowed to draw actual expenses, limited to the travelling allowance admissible for a journey on tour without daily allowance for halts. S.R. 118. - Deleted. S.R. 119-Journey to appear before a Medical Board preliminary to retirement. - (a) A Government servant, who is directed by his official superior in the interests of the public service, to apply for an invalid pension may, if he be required to make a journey in order to appear before a medical board, or an officer competent to grant a medical certificate of incapacity for further service, draw his actual travelling expenses, subject to a maximum of the amount of travelling allowance calculated for the journey. If it be necessary for him to return to his headquarters after appearing before the medical board, or an officer competent to grant a medical certificate of incapacity for further service, he may draw his actual expenses subject to the same maximum. In both cases his travelling allowance bill must be supported by a certificate that he was directed to apply for an invalid pension in the interest of the public service and that he did not voluntarily ask to retire. (b) A competent authority may allow actual expenses as limited by clause (a) of this rule to be drawn by a Government servant who voluntarily applies for an invalid pension; provided that the authority is satisfied that the circumstances of the applicant are such as to justify the concession. Appendix XIII Form M.P.T.C.24-A (See Subsidiary Rule 275) Medical Charges Reimbursement Bill No..... District.... Voucher No..... List No..... for..... 20..... Detailed Medical Bill of the Establishment of the..... for the month of ...20.... Head of Account

Major Head..... Grant No./Appropriation.....

Minor Head..... Group Head.....

Detailed Head..... Sub-head, or unit appropriation.....

Voted/charged

Sl. No.	Section of Establishment and name of the incumbent	Gross claim	Recovery of advance	Net amount payable	Remarks
(1)	(2)	(3)	(4)	(5)	(6)

1.2.3.4.

Net amount required for payment (in words) Rs..... Certified that I have satisfied myself that the amount included in bills drawn 1 month/2 months/3 months previous to this date with the exception of those detailed below (of which the total amount has been refunded by deduction from this bill) have been disbursed to the Government servants therein named and their receipts taken in the office copy of the bill or in a separate acquittance roll. Details of medical charges refunded

Section of Establishment and name of incumbent      Period      Amount..... Signature of the drawing officer Designation.....

Appropriation Rs..... P. For 20.... Expenditure including this bill      Passed for Rs..... (Rupees.....)..... Signature of the Controlling Officer Designation..... Received contents.

Dated..... 20.....      Signature of the Drawing Officer  
Pay Rs..... (Rupees.....)

Examined and  
entered.

Treasury  
Accountant

Treasury Officer

For use in Audit Office Admitted. Objected to Reasons for objection

Auditor Superintendent Gazetted Officer

Direction for note Note. - The bill should be supported by the Essentiality Certificate, receipt and bills etc. [Substituted by Notification F.2-39-93-XVII-Med-IV, dated 2nd November, 1995.]