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Two days after the Supreme Court ordered guidelines on telemedicine practice in the wake of novel coronavirus (COVID-19) outbreak, the Union Ministry of Health and Family Welfare came with the same on March 25, 2020.

The guidelines were prepared in collaboration with NITI Ayog.

Telemedicine comprises remote diagnosis and treatment of patients by means of telecommunications such video, phone, chatting apps, etc.

India did not have any set of guidelines on the practice till now. There is no legal framework to encourage medical practitioners to provide remote medical consultations during a pandemic.

According to the guidelines, only registered medical practitioners (RMP) enrolled in the State Register or the National Register under the Indian Medical Council Act 1956, can practise telemedicine, but

f after completing an online course.

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RMPs will need to complete the course within three years of

(https://api.whatsapp.com/send?text=COVID-19: Union health ministry issues guidelines for telemedicine https://www.downtoearth.org.in/news/health/covid-19-union-health-ministry-issues-According to the guidelines, for legendicing copyrultation should not

be anonymous. The RMP should ensure that there is a mechanism

for a patient to verify ontact det issuing a prescription, patient. The document also ga nformation or aspects of telemedicine, includir platforms can for diagno and treatment and ho chnology can rated to pr robust healthcare serv On March 23, the Sup burt took u Interest Litigation (PIL) seeking telemedicine pr to reduce patient-doct take a call on the same https://www.downtoearth.org

The PIL was filed by Vijay Agarwal, president of non-profit

Consortium of Accredited Healthcare Organisations, and health and safety professional Keerthi D'Souza on March 20.

A three-judge bench headed by the Chief Justice of India Sharad Arvind Babode directed the office of Additional Solicitor General of India to ask ministries concerned to look into the matter.

The petition quoted a positive COVID-19 patient in Mumbai who failed to fully disclose his travel history, causing the hospital to be placed under lockdown and several others in isolation.

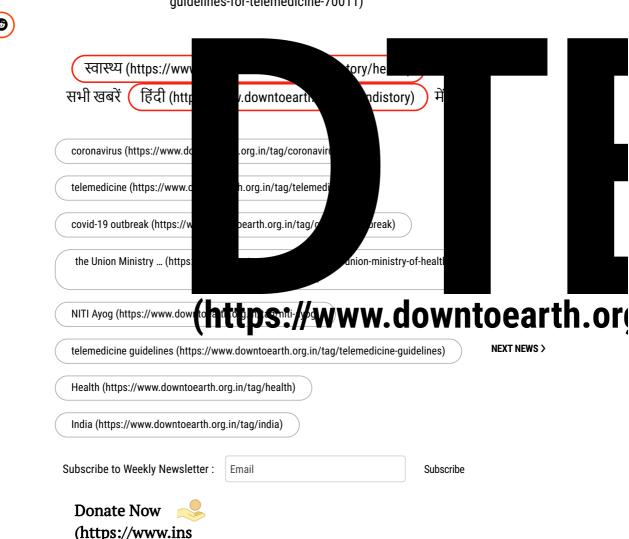
"Hospitals in India remain at a risk of spreading COVID-19 amongst co-patient and visitors and their family members. India has limited medical resources. Doctors should not be infected during this pandemic," Agarwal said.

Indian medical professionals, however, have been hesitant to offer remote consultations owing to doubts over legality of the practice.

In 2018, the Bombay High Court denied anticipatory bail to gynaecologists who inter alia prescribed medicines over telephone and were prosecuted under Section 304 IPC that deals with punishment for culpable homicides.

directives disallowing their members to do remote consultations. (https://api.whatsapp.com/send?text=COVID-19: Union health ministry issues guidelines for telemedicine blebse://www.downiesarthlorg.in/news/health/covid-figurine-diealth-ministry-issues-guidelines which finally Wolfff what come up with. Now, they have in be disseminated to medical practitioners to help them fight (https://api.whatsapp.com/send?text=COVID-19: Union health ministry issues guidelines for against COVID-19; said?text=COVID-19: Union health ministry issues guidelines for telemedicine https://www.downtoearth.org.in/news/health/covid-19-union-health-ministry-issues-felemedicine Society of India.

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COVID-19 spurs return of the natives to Uttarakhand ghost villages

Lockdown, loss of employment force migrants back

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📠 A 'ghost' village, Peeda, in Uttarakhand's Pauri Garhwal district Photo: Megha Prakash

The Uttarakhand government arranged transport for 564 residents to return to their native, ghost villages across the state, after the Union government called for a nation-wide lockdown on March 25, 2020 to curb the novel coronavirus disease (COVID-19) pandemic.

The Himalayan state has been grappling with a migration problem for a long time — people leaving their native villages in search of education and employment.

This results sparsely-populated ghost villages in the state's rural, hilly areas. These villages are dotted with locked houses and have poor amenities.

The villages are mostly populated with those who have no option but to stay back, including women and elderly people. The nation-wide lockdown has resulted in a reverse migration

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in he number of those returning to their villages in Uttarakhand may (https://api.whatsapp.com/send?text=COVID-19: Union health ministry issues guidelines for fise in the coming days, as the state government attempts to help telemedicine https://www.downtoearth.org.in/news/health/covid-19-union-health-ministry-issues-residents reach their native villages.

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Nearly 40-50 people returned in Tehri Garhwal district's Kandisaur tehsil, according to Pr a patwari government's revenue Devalsari — a village l 50 kilometre om hill stat Mussoorie — is also fi Migration statu ram panchayats entage) District 26 to 35 year nore than 35 year ge Uttarkashi 30 36.56 32.77 26 43.49 29.79 Chamoli 28 Rudraprayag 29.2 29 Tehri Garhwal 29.82 27.12 Dehradun owntoearth.or Pauri Garhwal Pithoragarh 29.1 **NEXT NEWS >** 23.97 Bageshwar 33.92 42.1 29.19 42.22 28.59 Almora Champawat 25.23 45.49 29.29 Nainital 29.48 44.57 25.96 Udham Singh Nagar 16.66 43.34 40 Haridwar 13.99 52.79 33.22

Source: Rural Development and Migration Commission Report, September 2019

"In my village, many left for jobs leaving behind their old parents or locked houses for their extended family or neighbour to take care," said Ganesh Nautiyal, a resident of Devalsari. "The village is bustling with activity once again as many have returned," he added.

Nautiyal himself earlier migrated from Landour, around 45 km away from the village, where he runs a small eatery. He returned to his village after the lockdown.

Vast swathes of land in the ghost villages earlier lay in waste as these areas were unsuitable for cultivation.

There is lack of water and conflict with animals like monkeys and wild pigs makes it difficult to grow crops.

The young earlier rarely came to these villages, sometimes only for

religious rituals (https://api.whatsapp.com/send?text=COVID-19: Union health ministry issues guidelines for telemedicine https://www.sedomitgoarth.org.in/news/sedomitgoarth.o

Pauri Garhwal district, according to District Magistrate Dheeraj

in Garbyal.

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A similar trend was seen in Rudraprayag district's Jakholi block. Nearly 30 per cent of t lents fr rk in Delh sabhas had left village Bengaluru a capital Dehradun, acc o Pradeep Th the Jakholi pramukh. Interim report on status ation in gram par (in percen agricultural prduce by wild animals destruction of Employment District 41.77 Uttarkashi wntoearth.or 49.3 Chamoli Rudraprayag 52.9 4.43 4.27 3.26 5.11 5.72 **NEXT NEWS >** Tehri Garhwal 53.43 7.84 18.24 3.07 6.17 2.47 4.26 5.52 Dehradun 56.13 6.33 12.5 1.2 2.08 1.4 1.65 18.7 Pauri Garhwal 52.58 11.26 15.78 5.35 2.53 6.27 3.21 19.52 2.36 Pithoragarh 42.81 10.13 4.97 4.66 4.08 11.48 41.39 9.09 14.49 4.32 2.18 1.45 3.42 23.65 Bageshwar 47.78 8.61 11.75 3.81 8.37 2.68 10.99 6.02 Almora Champawat 54.9 6.67 10.24 5.46 6.31 4.3 6.65 5.46 Nainital 53.7 7.79 10.37 4.96 4.94 2.1 6.38 9.76 Udham Singh 65.63 4.27 3.52 0.6 0.38 5.4 2.6 17.6 Nagar 1.62 2.73 0.05 0.64 1.69 15.85

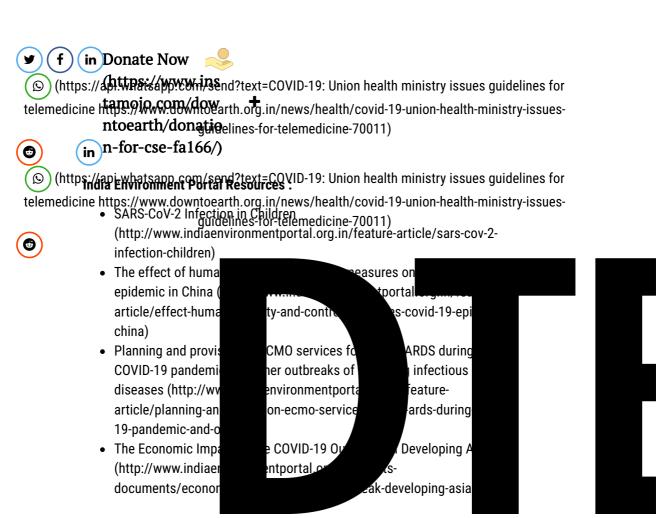
Source: Rural Development and Migration Commission Report, September 2019

500-600 people employed with the private sector returned to their families in the past few days, he said.

The maximum migration to urban areas would earlier happen from Almora and Pauri Garhwal districts.

The state government had set up a migration commission of Palayan Aayog to deal with the issue of ghost villages in 2017.





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