



DMA NEWS BULLETIN

FORTNIGHTLY

DELHI MEDICAL ASSOCIATION



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OFFICIAL ORGAN OF DELHI STATE BRANCH INDIAN MEDICAL ASSOCIATION

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President's Pen...

PREVENTIVE STEPS FOR DOCTORS/HOSPITALS TO AVOID LITIGATION..

Level 1. Primary prevention would protect against a complaint being filed

Level 2. Secondary prevention would protect against the defendant (Doctor) from being held negligent

Level 3. Tertiary prevention would prevent against direct financial consequence in case of compensation is awarded

Level 4. Quartic prevention would prevent against professional and psychological stresses.

LEVEL 1-PRIMARY PREVENTION

- Human Element - Attitude
- Behaviour of entire system
- Open communication
- Shared decision making
- Be compassionate
- Update knowledge and skills regularly

LEVEL 2-SECONDARY PREVENTION

The key components are : a) proper documentation, b) preservation and supply of record , c) legally valid consent

(a) Proper documentation

A proper documentation of the date, time and history (in brief), positive physical findings, important negative findings. Plan of action with regards to investigations, consultations, treatment and follow up plans, instructions to junior staff and patient is necessary.

Record history of drug allergy.

Write legibly; date, time and sign every entry; make entries immediately or soon after care is given; only use approved abbreviations; avoid unnecessary comments; do not alter a entry.

Document -oral communications, informed consent, non compliance.

Prognosis should be explained to the patient/attendant in comprehensible language and should be documented.

(b) Preservation and supply of record

Every physician is required to maintain the medical records pertaining to his/her indoor patients for a period of 3 years from the date of commencement of the treatment.

If any request is made for medical records either by the patient/authorised attendant or legal authorities involved, the same may be duly acknowledged and documents are required to be issued/supplied within a period of 72 hours.

(c) Legally valid consent

A doctor has to seek and secure the consent of the patient before commencing a treatment. The consent so obtained should be real and valid, which means that : the patient should have the capacity and competence to consent; his consent should be voluntary and on the basis of adequate information concerning the nature of treatment procedure.

Doctor should disclose - nature and procedure of treatment and its purpose and benefits and effects; alternatives, if any, available; an outline of substantial risks; adverse consequences of refusing treatment. No need to explain remote or theoretical risks involved, which may frighten or confuse a patient and result in refusal of consent for the necessary treatment.

LEVEL 3-TERTIARY PREVENTION

Professional indemnity insurance

To meet the claim of compensation which may be awarded against a doctor for medical negligence which is called deficiency in service under the Consumer Protection Act, 1986. It has now become essential for every doctor to obtain a professional indemnity insurance cover from any one of the insurance companies.

LEVEL 4-QUARTIC PREVENTION

Defending litigation by forming medical defence societies and strong peer group

The professional, social and psychological aspects of such litigations can be fought only by providing a strong peer support and by formation of medical defence organisations/societies at local, state and national levels and assist in such situations and if necessary take up cover of defence on behalf of doctors against alleged medical negligence.

DON'T FOR DOCTORS :

- Don't prescribe without examining the patient, even if he is close relative or friend.
- Never examine a female patient without presence of female nurse/attendant, especially during genital and breast examinations.
- Don't insist on the patient to tell the history of illness or be examined in the presence of others. He has a right to privacy and confidentiality.
- Don't examine a patient when you are sick, exhausted or under the influence of alcohol or any intoxicating substance.
- Don't prescribe/administer a drug which is banned.
- Don't do anything beyond your level of competence.
- Don't refuse the patient's right to know about the diagnosis and treatment of his illness.
- Don't issue death certificates unless you have yourself verified it.
- Don't issue a false medical certificate.
- Don't refuse first aid/ medical care to accident and emergency cases even if it is a medicolegal case.
- Don't talk loose with patients/relatives.
- Never talk loose of your colleagues.

Dr. Girish Tyagi
President



Hony. State Secretary's Pen...

Dear Friends,

At the outset I wish you all a very happy Dussehra and Durga Puja. It significantly quoting the natural example of victory of Good over evil. May God grant all your wishes and bless with good health success and happiness to you and your family members.

The government has reconstituted Central council of Health and family welfare. The council led by the Union Minister of Health and Family Welfare and elected members from various authorities including medical associations and eminent individuals. On behalf of members of Delhi Medical Association I congratulate Dr. D.S Rana, Dr. Harish Gupta, Dr. Ajay Kumar and Dr. Kamal Buckshee for being appointed as individual members for the council. We hope they will work hard and make policies for the welfare of the medical profession.

The Central Council of Health and Family welfare set up under Article 263 of the constitution, is a premier advisory body to the health Ministry and enables consideration and recommendation of board lines of policy with regard to matters concerning health and family welfare.

Medico profession are facing and going through various problems and issues pertaining to their medical establishments. Imposition of various acts and rules upon them. We have constantly touch with the CM, HM and officials of concerned departments to solve the issues.

Recently, Ministry of Health and Family Welfare, Delhi Government notified draft Delhi Health Bill 2019, a bill to provide for the registration and regulation of clinical establishments rendering services in recognized system of medicines in the NCT of Delhi, for comments and objections. I request you all to go through the bill and send your comments and objections to the Director, Directorate of Health Services, Delhi or email at dirdhs@nic.in till 23rd Oct 2019.

Last but not the least I pay my deep condolences to Respected Dr K.L. Tuli, Sr. leader, member of Karol Bagh Branch and Past President of Delhi Medical Association who passed away on 3rd October, 2019.

Dr. Arvind Chopra
Hony. State Secretary

HONY. ASSOCIATE EDITOR

Dear all,

It was really heartening to note about overwhelming number of medicos across the country are now getting more vigilant and actively involving themselves in the events of mass public awareness for all the social causes of national importance.

A large scale participation of fraternity in recent swachh bharat events and 'plogging'(picking plastic garbage while jogging) are inspiring examples of it.

Though a distinct class of intellectuals, visionaries, reformers and technical experts have been warning about the foreseen environmental catastrophe because of exponential rise in use of disposable plastics or Styrofoam . but the same was not realized, in its full seriousness by the regulatory authorities and public at large, till the problem came to the gigantic proportions.

The extensive use of disposable plastics though not banned by even many developed nations , poses serious threat to the public sanitation in addition to environmental hazards of recycling.

Presumably, the near perfect citizen's awareness and statutory vigilance in countries like USA, about good segregation, disposal with thorough neatness and advanced level of recycle mechanism has allowed them to take all the big advantages, the plastic packing system offers the mankind and yet keep in check



all the sinister environmental threats posed by such almost non degradable single use materials.

With a judicious use, and wise and committed disposal with perfect segregation and recycling process, the plastic wrappings have certainly offered us a wonderful and economical packing and protective layers on all the organic, non organic and bio materials with universal application.

Apart from additional research, development of technology and local innovations in perfect segregation, collection, disposal and recycling, it is imperative on public at large for a committed awareness and vigilance to protect the environmental or sanitation hazards of plastic or thermacol packing stuff, so that the human race keeps on enjoying the advantages offered by this wonderful material than to curse it from all around.

It may sound otherwise when I state that it is not the plastic which failed us but , we failed to use it judiciously and stop abusing it.

Yes, till we learn to use it , I welcome all the steps to ban single use plastics, since right now the human race do not deserve the advantages offered by it.

Dr. Kamal Parwal
Hony. Associate Editor

Congratulations to



Dr. D.S. Rana
Chairman Managing Board
Sir Ganga Ram Hospital



Dr. Harish Gupta
Sr. Consultant Surgeon
Past President, DMA



Dr. Ajay Kuamr
Chairman and HOD BLK Inst. of
Digestive and Liver Sciences BLK Hospital



Dr. Kamal Bukhsee
Sr. Consultant
Indraprastha Apollo Hospital, New Delhi

*for being appointed as the member (Individual) for Central Council for
Health and Family Welfare reconstituted by Government.*

Dr. Girish Tyagi
President, DMA

Dr. Arvind Chopra
Hony. State Secretary, DMA

BRANCH NEWS

Activity Reports of IMA East Delhi

Launch of Nikshay Portal for TB Notification and CME on Mandatory-Notification of T.B. and Its Legal Aspects & Biomedical Waste Management Tips on 6th September, 2019 at IMA-EDB Bhawan.



RTM on Boosting Endogenous Progesterone

RTM on Boosting Endogenous Progesterone on 10th September 2019 at IMAEDB Bhawan. Speaker Dr. Vandana Gupta spoke about Boosting Endogenous Progesterone - A Novel Therapeutic Strategy to Improve Clinical Outcomes. Attended by more than 20 doctors.



RTM on Role of Cranberry and D Manose in UTI

IMA East Delhi Branch organized by RTM on Role of Cranberry and D Manose in UTI on 12th September 2019 at IMAEDB Bhawan. Speaker was Dr. Radha Jain. Attended by 26 Gynaecologist.



Workshop on USG Training Module

IMA East Delhi Branch organized USG Workshop Module on USG – To Improve Your Scanning Skills on 18th September 2019 at IMA EDB Bhawan. Speakers were Dr. Ponnam Goyal, Dr. Neelam Lekhi, & Dr. Kuldeep Singh and attended by more than 40 doctors & appreciated by one and all.



CME on Basics of ECG

IMA- East Delhi Branch in association with Max Super Speciality Hospital, PPG organized a CME on Basics of ECG & Management of MI patients Pre & Post Intervention on Friday, 20th September 2019 at IMAEDB Bhawan, Karkardooma, Delhi. Speaker was Dr Manish Agrawal, Senior Consultant & Unit Head, department of Cardiology. It was attended by more than 50 doctors and appreciated by all.



RTM on Bacterial Vaginosis

IMA East Delhi Branch organized by RTM on Bacterial Vaginosis on 25th September 2019 at IMAEDB Bhawan. Speaker was Dr. Poonam Goyal.



Diabetic Nephropathy & its Management

IMA- East Delhi Branch in association with Max Super Speciality Hospital, PPG organized a CME on Diabetic Nephropathy & its Management on Friday, 25th September 2019 at IMAEDB Bhawan, Karkardooma, Delhi.

Speakers were Dr Satish Chandra Chhabra, Senior Director & HOD, Department of Nephrology & Dr Manik Chhabra, Attending Consultant, Department of Nephrology. It was attended by more than 50 doctor.



PLOG ACTIVITY 02.10.2019

IMA East Delhi Branch celebrated the 150th Birth Anniversary of Mahatma Gandhi by carried out PLOG activity - Picking plastics while waling for 2 km on 2nd October 2019 early morning at IMAEDB Bhawan.



IMA JANAKPURI BRANCH

IMA janakpuri branch participated in the swatch bharat campaign by joining the "Plogging" activity on 2nd October at District Park Janakpuri. As a part of "Doctors for Clean India" drive, IMA janakpuri Doctors have been participating in the plogging every Sunday Morn in various Markets and Parks and also educating and inspiring the local community. Dr. Gagan, Hony Sec. IMA-JP

BRANCH NEWS

IMA DNZ BRANCH

IMA - DNZ PLOG ON SAWACHTA DIWAS/ GANDHI JAYANTI ON 02 OCTOBER

Indian Medical Association-Delhi North zone , one of the biggest branches of Indian Medical Association , Organised PLOG (Picking plastic while walking/ jogging) on 2nd October , Gandhi Jayanti as Swachhata Diwas at 7.30 am starting from Deep Market , Ashok Vihar to our branch office at Wazirpu

The PLOG was joined by Dr. Girish Tyagi, President DMA, many Past Presidents of IMA-DNZ , Office bearers, senior members, many members of NGOs including Green Hands, Godiva Pharmaceuticals, RWAs and ordinary public. Good number of Ladies also joined. President Dr. N.N. Jha said it should become of our daily routine rather only one day. Dr. Naresh Chawla, Convener said that we should as role models of Society influence general public by self doing. Dr. Abhishek Kumar , Hony Secretary said that like in western World, this habit should be inculcated right from School to whole life.

Regards

Dr N N Jha - President DNZ

Dr. Naresh Chawla, convener

Dr Abhishek Kumar - Hony Secy

Dr H N Gangwal-Hony Fin Secretary.



IMA SOUTH DELHI BRANCH

Dear Sir,

With meeting with Mr Satyendra Jain, Health Minister Delhi Govt, in very cordial & homely environment. Dr Arun Gupta, President DMC was also present on our request.

Dr Sandeep Sharma, Dr B R Goyal, Dr Raghav Agarwal, Dr Sanjeev Bansal, Dr Pankaj Sharma, Dr K P Singh represented IMA SDB to discuss few issues related to doctors.

Dr Sandeep Sharma took the lead.

Few points were related to Radiologist, which were aptly addressed & minister called officer to act accordingly.

Few points, he said after election.

We discussed about DPCC, charging electricity & water at normal rate than commercial rate etc.

On 04/10/19

Dr. R.K. Sinha

Secretary, IMA South Delhi Branch



BRANCH NEWS

IMA WESTOWN BRANCH

IMA Westown on 2nd October 2019 organised a **CLEANLINESS DRIVE AND PLOGGING ACTIVITY** to create awareness about condemn use of plastics in our life.



Organized a **FREE MOVIE SHOW** for the Doctors and family of IMA Westown on 2nd October 2019 for their entertainment. The show was sponsored by Jeevan Jyoti Clinic & Nursing Home, Vikaspuri, New Delhi.



IMA Karol Bagh Branch

IMA KBB, with the active participation and support of IMA HQs, DMA and Departments of IMAH and Cardiology, SGRH, organised Delhi Fitness Run on 29th September 2019, on World Heart Day. This strengthened the Fit India Movement, launched by our Hon. Prime Minister Shri Narendra Modi. The event was flagged off from Navyug School and around 1000 participants took part in the 15km, 10km, 5km, 3km runs and 5 km walkathon. The races were kickstarted by Dr. R.V. Asokan, HSG, IMA HQs, Dr. Girish Tyagi, President, DMA, Dr. Rajesh Acharya, President, IMA KBB, Dr. S.P. Byotra, Vice Chairman, Sir Ganga Ram Hospital, Dr. J.P. Sawhney, Chairman, Cardiology, SGRH and Dr. Sudhir Kalhan, Chairman, IMAS Deptt, SGRH.

First 3 runners in each category were given trophies. The fastest runners, male and female, in the 15 km category were given 32 inches LED TV courtesy Sh. Vijay Gupta of Zenox Electronics. In the end the Organising Chairman Dr. Rajesh Acharya thanked all the participants, organisers and sponsors for making the event a huge success. In the evening at Lalit Hotel, Dr. Acharya was felicitated by IMA President's Appreciation Award for the initiative.



BRANCH NEWS

DMA 2km Run / Walk / Plog on 2nd October



DELHI MEDICAL ASSOCIATION

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DMA NEWS
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- Matter should be either in PDF format or Curve CDR Format.
- Matter should be sent by 1st date of the month for the issue of 10th & by 15th for the issue of 25th of the month.
- GST will be charged @5% extra or the rate will be decided by the Govt. time to time.

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Dr. Grish Tyagi
President, DMA
M: 9868116491

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Dr. Arvind Chopra
Hony. State Secretary, DMA
M: 9910515062

OBITUARY

DMA regrets to inform the sad demise of Sr. Member Respected **Dr. Inder Jit Verma** on 3rd October 2019. We pray to God to rest his soul in peace and give strength to the family to bear this irreparable loss.

Dr. Girish Tyagi
President

Dr. Arvind Chopra
Hony. State Secretary

Glimpses of Kavya Goshthi
held on 28th September 2019 at DMA House Daryaganj, New Delhi



FIRST DMA PHOTO DIRECTORY PROFORMA 2019



**The LAST DATE TO SUBMIT THE PROFORMA FOR
DMA PHOTO ID IS 31st OCTOBER 2019.**

Members are requested to send their proforma along with one photograph at DMA Office latest by 31st October 2019. Also, send Cheque of Rs. 120/- in favour of Delhi Medical Association to DMA Office, Daryaganj, New Delhi.



(Surname)

(First Name)

(Middle Name)

Name

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Date of Birth Marriage Anniversary

Blood Group

Educational Qualification

Name of College(MBBS)

University

Speciality

Year of Joining (MBBS)

Residential Address

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Mobile 1. 2.

Landline Res..... Clinic.....

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Spouse (Dr./Mr./Ms) Spouse DMA No.

Dr. Girish Tyagi
President
M: 9868116491

Dr. Arvind Chopra
Hony. State Secretary
M: 9910515062

Dr. Ashwini Dalmiya
Chairman, Directory Committee
M: 9811542055



SECOND ANNOUNCEMENT



Sir Ganga Ram Hospital
Generations of Healing & Trust...



ON
**Sunday
10th November 2019**



8:00 am to 5:00 pm

VENUE

**India Habitat Centre, Lodi Road
New Delhi**

COMPLIMENTARY REGISTRATION IS ON

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Message from the Chairman



Dr D S Rana
Chairman
Board of Management

The Sir Ganga Ram Hospital (SGRH) Annual CMEs are customized for primary care physicians. The interactive sessions on everyday clinical care issues and variety of sub-specialty topics offer a unique platform to the General Practitioner for updating him on multi-disciplinary challenges.

Besides the scientific deliberations, the lively sessions of 'Medical Premier League', 'Meet the Masters' and 'Medical Quiz' have been received with great enthusiasm. Hundreds of delegates have won gifts and prizes from these programs as well as from the 'Early Bird' and 'Not Out' sessions.

I extend my full support and best wishes for the 11th Annual CME being organised on Sunday, 10th of November, 2019. I am sure that all those who participate will enjoy and benefit.

Best wishes,

CME Secretariat



Dr Harbansh Lal | Department of CME
Chairman

SGRH Annual CME
Department of Ophthalmology
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AIIMS TOPPERS MAY 2019



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The Delhi Health Bill 2019

(Revised Bill)

A Bill

CHAPTER I

STATE COUNCIL FOR CLINICAL ESTABLISHMENTS

Establishment of the Council

1. (1) The State Government shall, by notification constitute a State Council for clinical establishments called the State Council for Clinical Establishments.
- (2) The State Council shall consist of—
 - a) Secretary, Health, Government of National Capital Territory of Delhi, ex-officio who shall be the Chairperson;
 - b) Director General Health Services, Government of National Capital Territory of Delhi,
 - c) Director of AYUSH, GNCTD, ex-officio who shall be the member;
 - d) One representative of Delhi Medical Council constituted under section 3 of the DMC Act, 1997 to be nominated by GNCTD
 - e) One representative of Delhi Dental Council constituted under section 21 of the Dentist Act, 1948 to be nominated by GNCTD
 - f) One representative of Delhi Bhartiya Chikitsa Parishad constituted under Section 3 of Delhi Bhartiya Chikitsa Parishad Act, 1998 to be nominated by GNCTD
 - g) One representative of Homeopathic System of Medicine, Delhi constituted under section 3 of the Delhi Homeopathy Act, 1956 to be nominated by GNCTD
 - h) One representative each nominated by GNCTD from the below mentioned Councils on a rotational basis for a period of 1 year
 - (i) Delhi Nursing Council constituted under section 3 of the DNC Act, 1997
 - (ii) Delhi Pharmacy Council constituted under section 19 of the Pharmacy Act, 1948
 - (iii) Delhi Council for Physiotherapy & Occupational Therapy constituted under section 3 of the Delhi Council for Physiotherapy & Occupational Therapy Act, 1997
 - i) two eminent doctors of GNCTD having 25 years experience nominated by GNCTD;
 - j) two eminent doctors nominated by GNCTD;
 - k) one representative from the Law Department to be nominated by GNCTD;
 - l) one eminent person in the field of Law to be nominated by GNCTD;
 - m) two eminent persons working in the field of Social

Work to be nominated by GNCTD;

- n) President from the below mentioned Associations on a rotational basis for a period of 1 year;
 - (i) State Indian Medical Association
 - (ii) State Association of AYUSH
 - (iii) State Dental Association
- o) one representative from the line of laboratory and diagnostic centres to be nominated by GNCTD;
- p) one representative from a consumer organization working in the field of health in the State to be nominated by GNCTD;
- q) Officer of the level of CMO from Directorate of Health Services of health services to be nominated under section (3) as member secretary;

Secretary of the Council

- (3) The Government shall appoint an officer not below the rank of additional director of health services to be the secretary of the Council and provide such other resources and staff as it considers necessary for carrying out its functions and duties for implementation of the provision of the Act and rules.

Term of office of members of the Council

- (4) The nominated members of the State Council shall hold office for three years but shall be eligible for renomination for maximum of one more term of three years.

Provided that the person nominated, shall hold office for such period till she/he hold appointment of the office by virtue of which She/he was nominated to the Council.

Allowances to the nonofficial members of the Council

- (5) The non official members of the State Council shall be entitled for such allowances as may be prescribed.

Procedure and conduct of business

- (6) The quorum, procedure for the conduct of business and other related aspects of the Council shall be as prescribed.
- (7) The state council shall meet at least once in three months
- (8) The functions of the State Council may be exercised notwithstanding any vacancy therein

Disqualifications for appointment as member

- (9) A person shall be disqualified for being appointed as a member of the State Council if he—
 - a) has been convicted and sentenced to imprisonment for an offence which, in the opinion of the State Government, involves moral turpitude; or
 - b) is an undischarged insolvent; or
 - c) is of unsound mind and stands so declared by a competent court; or
 - d) has been removed or dismissed from the service of the Government or a Corporation owned or controlled by

the Government; or removed by respective recognised Council.

- e) has, in the opinion of the State Government, such financial or other interest in the Council as is likely to affect prejudicially the discharge by him of his functions as a member.

Functions of State council:

2. Functions of State Council.

- a) determine within a period of two years from when it is established, standards for the clinical establishments;
- b) classify the clinical establishments into different categories and prescribe the minimum standards for each category of clinical establishments periodically;
- c) safeguard the interests of patients and health care providers, as prescribed;
- d) provisions for maintenance of records and reporting of data and information mandatorily provided, relevant to public health by clinical establishment, including their periodicity, analyze the data and make it available in public domain;
- e) conduct medical, clinical and social inspection and audits of the clinical establishments and take necessary action as prescribed;
- f) compile and publish electronically a State Register of Clinical Establishments as prescribed;
- g) hear appeals against the orders of the Registration Authority as prescribed;
- h) publish electronically an annual report on the status of implementation of the Act and rules and submit it in the prescribed manner to the Government.
- i) appoint assessors (individual or institutional) for assessment and inspection of the clinical establishments, as prescribed;
- j) direct to cancel registration of such clinical establishments where there is imminent danger to public health and the health and safety of patients and staff, as prescribed;
- k) recommend to the State Government any modification required in the penalties and rules in accordance with the changes in technology or social conditions;
- l) perform any other function determined by the State Government from time to time.

3. Clinical establishment of different systems shall be classified into such categories, as may be prescribed by the State Council, from time to time.

Classification of clinical establishment

4. Different standards may be prescribed for classification of different categories referred to in subsection (B):

State Council to follow consultative process

5. The State Council shall follow a consultative process for classification of clinical establishment and determining the minimum standards and shall have regard to the local

conditions in accordance with such procedure as may be prescribed.

Power to seek advice or assistance.

- 6. (1) The Council may associate itself with any person or body and obtain technical assistance or advise as it may deem necessary for carrying out the provision of the act and rules made under
- (2) The council may appoint such sub-committees as it deems fit with members or persons who are not members of the Council for such period, not exceeding two years, for the consideration of any particular matter.

Provided the State Council in exceptional circumstances may extend the term beyond two years.

CHAPTER II

AUTHORITY AND CONDITIONS FOR REGISTRATION

Authority for registration.

- 7. (1). The State Government shall, by notification, constitute a State registration authority for registration of clinical establishments, with the following members, namely:-
 - a. Officer of the level of CMO from Directorate of Health Services of health services, who shall be the Chairperson;
 - b. One representative of Director General Health Services;
 - c. Director of AYUSH, GNCTD or his/her nominee;
 - d. One representative, nominated by the State Government, from a registered professional medical association working in the State of the concerned recognized system of medicine being practiced in the clinical establishment seeking registration for a period of three years;
- (2) Notwithstanding anything contained in sub-section (1) for the purposes of provisional and permanent registration of clinical establishments the Additional Director, Head of Office, DGHS, the chairperson shall exercise the powers of the authority as per procedure that may be prescribed.
- (3) A casual vacancy of the non- official member in the Authority, shall be filled by the Health Secretary by making fresh nomination and the member so nominated shall hold office only for the remaining term of the person in whose place s/he is so nominated.
- (4) The State Government may provide the Registration authority with such resources as it considers necessary for carrying out its functions and duties as provided for implementation of Act and rules

Functions of the registering authority

8 The registering authority shall perform the following

functions, namely:-

- a) grant, renew and cancel registration of a clinical establishment or suspend the services (wholly or partly) of a clinical establishment;
- b) enforce compliance of the provisions of the Act and the rules made thereunder;
- c) ensure that the registered clinical establishment maintains the minimum standards and call for periodic reports and/or inspect the institution to ensure the same.
- d) investigate complaints of breach of the provisions of the Act or the rules made thereunder and take appropriate action;
- e) cancel registration of such clinical establishments where there is imminent danger to public health and the health and safety of patients and staff;
- f) submit periodic reports of such nature as directed by the State Council;
- g) report to the State Council on a quarterly basis the action taken against non-registered clinical establishments;
- h) perform such other functions as may be prescribed by the State Council and/or the State Government.

Registration for clinical establishments.

- 9 (1) All clinical establishments in Delhi shall be registered with the Authority under the provisions of this Act and the rules made thereunder.
- (2) No person shall run a clinical establishment unless it has been duly registered in accordance with the provisions of this Act and the rules.
- (3) If any clinical establishment is in existence at the time of the commencement of this Act, an application for provisional registration shall be made within three months from the date of the notification of this Act and rules;

A clinical establishment which comes into existence after notification of this Act, shall apply for provisional registration as prescribed

Once the minimum standards have been notified for the particular category, the Clinical establishments shall apply for permanent registration within 3 months.

Provided that in order to prevent hardship to existing clinical establishments that may not meet the minimum standards the State Council may provide them time to acquire the same for permanent registration within two years of the notification of the minimum standards.

(4) Any clinical establishments proposed to be established after the notification of the minimum standards before commencing its functioning shall acquire permanent registration.

Where a clinical establishment is offering services in more than one system of medicine, such clinical establishment

shall apply for separate provisional or permanent registration for each services of the concerned system of medicine under this Act:

Provided that a laboratory or a diagnostic centre which is a part of a clinical establishment need not be registered separately.

Condition for registration and continuation

10 For registration and continuation, every clinical establishment shall fulfil the following conditions, namely:

- (a) the minimum standards according to the system and category of the clinical establishment as developed by the State council and notified by the government;
- (b) the minimum qualification and requirement of personnel as may be developed by the State council; and notified by the government;;
- (c) shall maintain the medical records of patients as published by the State council;;
- (d) shall furnish to the authority or the State Council or the State Government such information or data as published by the State council;
- (e) shall comply with standards of safety, infection control as published by the State council;
- (f) shall not compel patients to purchase medicines or medical devices from a particular pharmacist or supplier;
- (g) shall provide information as prescribed on discharge regarding the diagnosis, results of investigations, treatment given, condition at the time of discharge and advice to the patient. Copies of relevant medical, diagnostic reports and detailed itemised bills and receipts be made available to the patient on payment;
- (h) shall display information in Hindi and English at a conspicuous place regarding availability of facilities, services and rates, package rates, fees charged, and charter of patient rights for the information of the patients, as prescribed;
- (i) clinical establishments who are allotted land at concessional rates by government land owning agencies shall provide treatment completely free of any charges to the extent of percentage of IPD and OPD patients as may be notified from time to time;
- (j) shall mandatorily comply with the orders issued in the public interest and protection of public health and during public health emergency by the Directorate of Health Services, Government of the National Capital Territory of Delhi, periodically;
- (k) shall declare commission or incentives taken or given for patient referral to any individual or institution for any purpose within 24 hrs. of such payment in any form along with reports as may be prescribed
- (l) shall on being directed by Directorate of Health Services, Government of the National Capital Territory of Delhi, cooperate and provide such reasonable

assistance during public health emergency and medical aid essential for victims of acid attack and natural or man-made calamity including outbreak of epidemics or disaster

CHAPTER III

PROCEDURE FOR PROVISIONAL AND PERMANENT REGISTRATION

Application for provisional registration.

- 11 (1) All clinical establishments in Delhi shall be registered with the registering authority.
- (2) Where a clinical establishment is already registered under any existing law requiring registration of such establishments, it shall apply for registration as referred to in subsection (1)
- (3) For the purposes of provisional registration an application alongwith prescribed fee shall be filed online by the clinical establishments to the registering authority in such form, manner and fees as may be prescribed under the rules of this Act

No inquiry prior to provisional registration

- (4) The authority may not conduct any inquiry prior to the grant of provisional registration Provided the authority has reasons to believe that the information being provided is false or incorrect may inspect or cause to be inspected the clinical establishments before grant of provisional registration

Certificate of Provisional Registration

- (5) The authority shall, within a period of thirty days from the date of receipt of such application, grant or reject provisional registration in such form and containing such particulars and such information, as may be prescribed.

If the registration is not granted or declined within this period it shall be deemed to be granted.

The provisional registration granted as per subsection

- (3) if found to be not as per the provisions, then the officer responsible for not rejecting or granting it will be punishable under the provisions of the Act.
- (6) Notwithstanding the grant of the provisional certificate of registration, the authority shall publish in such manner, as may be prescribed, particulars of the clinical establishments in the public domain.

Validity of provisional registration.

- (7) Every provisional registration shall be valid for a period of two years from the date of issuance of the certificate of registration.

Renewal of provisional registration.

- (8) The application for renewal of registration shall be made before 31st January of the applicable year and, in case the application for renewal is made after the expiry of the provisional registration, the authority

shall allow renewal of registration on payment of such enhanced fees, as may be prescribed.

Time limit for provisional registration.

- (9) Where clinical establishments in respect of which standards have been notified by the State Government, provisional registration shall not be granted or renewed beyond
- (10) the period of three years from the date of notification of the standards in case of clinical establishments which came into existence before the commencement of this Act;
- (11) the period of two years from the date of notification of the standards for clinical establishments which come into existence after the commencement of this Act but before the notification of the standards;

Application for permanent registration.

- 12 (1) For the purposes of permanent registration an application along with prescribed fee shall be filed online by the clinical establishments to the registering authority in such form, manner and fees as may be prescribed under the act and rules of this Act

- (2) The authority may not conduct any inquiry prior to the grant of permanent registration Provided the authority has reasons to believe that the information being provided is false or incorrect may inspect or cause to be inspected the clinical establishments before grant of permanent registration

Provided that all new clinical establishments which apply after the notification of minimum standards would be inspected before grant of permanent registration

- (3) After the clinical establishments submits the application along with the required evidence of having complied with the prescribed minimum standards, the authority shall cause to be displayed of information in the Delhi Government clinical establishment website for a period of thirty days for filing objections, supported with substantive proof, if any, before processing for grant of permanent registration in such manner, as may be prescribed.
- (4) The authority shall, within a period of ninety days from the date of receipt of such application, grant to the applicant a certificate of permanent registration in such form and containing such particulars and such information, as may be prescribed.

If the registration is not granted or declined within this period it shall be deemed to be granted.

The permanent registration granted as per subsection (1) if found to be not as per the provisions, then the officer responsible for not rejecting or granting it will be punishable under the provisions of the Act.

Standards for permanent registration

- 13 (1) Permanent registration shall be granted only when a

clinical establishments fulfils the prescribed minimum standards in entirety.

Provided that the Authority is of the opinion that the clinical establishment has not achieved the minimum standard notified and has submitted incomplete information or if relevant documents are not provided, it shall inform the applicant of its intention to disallow permanent registration with reasons for the same.

Allowing or disallowing of registration.

- (2) The authority shall pass an order immediately after the expiry of the prescribed period and within the next ninety days thereafter either –
 - (a) allowing the application for permanent registration; or
 - (b) disallowing the application:

Provided that if objections supported with substantive proof, are received within the period referred to in the preceding section, such objections supported with substantive proof shall be communicated to the clinical establishments for response within a period of thirty days.
- (3) The authority shall record its reasons and communicate to the applicant, if it disallows an application, for permanent registration.
- (4) The process of deciding permanent registration should be completed within ninety days of application, otherwise the clinical establishments would be deemed to be registered.

Certificate of permanent registration.

- (5) The authority shall, if it, allows an application of the clinical establishments, issue a certificate of permanent registration in such form and containing such particulars, as may be prescribed.

Validity permanent registration

- (6) The certificate shall be valid for a period of three financial years from the date of issue.

Renewal of permanent registration

- (7) Application for renewal of permanent registration shall be made sixty days prior to the expiry of the validity of the certificate of permanent registration and in case the application for renewal is made after the expiry of such date, the Authority may allow such application on payment of such enhanced fees as may be prescribed.
- (8) The disallowing of an applicant for provisional and permanent registration shall not debar a clinical establishment from reapplying after providing such evidence, as may be required, of having rectified the deficiencies on which grounds the earlier application was disallowed. This will not involve additional fees within thirty days.

Display of the certificate of registration

14 The provisional or permanent certificate shall be kept

affixed in a conspicuous place in the clinical establishment in such manner so as to be visible to everyone visiting such establishment

Acknowledgement of application

15. The authority shall acknowledge the receipt of the application for provisional & permanent registration as the case may be in such form as prescribed

Verification of application

16. The registering authority may verify and conduct enquiry or inspect where necessary for provisional or permanent registration

Certificate to be nontransferable

- 17 (1) The certificate of provisional or permanent registration shall be non-transferable.
- (2) In the event of change of ownership, location or category the certificate of registration in respect of such clinical establishment shall be surrendered to the Authority and the clinical establishment shall apply afresh for grant of certificate of registration in such manner as may be prescribed.
- (3) In the event the clinical establishment ceasing to function the certificate of registration in respect of such clinical establishment shall be surrendered to the authority
- (4) In the event of addition of facility and services to the clinical establishment, the same should be informed to the authority and in a form and manner as prescribed

Display of information

18. The authority shall cause to be published in the Delhi government clinical establishment website the details of the clinical establishment that have been granted provisional or permanent registration as prescribed

Publication of expiry of registration

19 The authority shall cause to be published within such time and in such manner, as may be prescribed, the names of clinical establishments whose provisional and or permanent registration has expired or ceased to function.

Compliance for provisional and permanent registration

20 It shall be the responsibility of the authority to ensure that the registered clinical establishments maintain the prescribed standard as long as the registration remains valid and the authority shall call for periodic reports and shall assess, inspect or cause to be inspected any registered clinical establishment to check compliance of the standards. The results of the assessment / inspection shall be made available in the public domain in such manner as may be prescribed.

Cancellation of provisional and permanent registration.

- 21 (1) Any time after any clinical establishment has been provisionally or permanently registered, registration may be cancelled, suspended or partly suspended by the authority or state council or State Government if,—
 - a) the conditions of the registration are not being

complied with;

- b) there is imminent danger to the safety of patients and staff by the clinical establishment
 - c) there is non-compliance with the orders of the Directorate of Health Services, Government of the National Capital Territory of Delhi, from time to time
- (2) It may issue a notice to the clinical establishment to show cause as to why its registration under this Act and rules should not be cancelled or suspended or partly suspended for the reasons to be mentioned in the notice.

Provided that the authority may restrain immediately the clinical establishment from carrying on if there is imminent danger to the health and safety of public, patients and staff.

- (3) If after giving a reasonable opportunity to the clinical establishment, the registration authority is satisfied that there has been a breach of any of the provisions of this Act or the rules made thereunder, it may, by an order, without prejudice to any other action that it may take against such clinical establishment, cancel or suspend fully or partly its registration as per provisions of sub section 1 (a).

Inspection of registered clinical establishments.

- 22 (1) The registration authority shall have the right to cause an inspection of, or inquiry in respect of any clinical establishment, to be made by such multi member inspection or assessment team as prescribed as it may direct and to cause an inquiry to be made in respect of any other matter connected with the clinical establishment and that establishment shall be entitled to be represented there at with due notice.
- (2) The authority shall communicate to the clinical establishment the views of that inspection with reference to the results of such inspection or inquiry and may, after ascertaining the opinion of the clinical establishment thereon, advise that establishment upon the action to be taken.
- (3) The clinical establishment shall report to the registration authority, the action, if any, which is proposed to be taken or has been taken upon the results of such inspection or inquiry and such report shall be furnished within such time, as the registration authority may direct.
- (4) Where the clinical establishment does not, within a reasonable time, take action to the satisfaction of the authority, it may, after considering any explanation furnished or representation made by the clinical establishment, issue such directions within such time as indicated in the direction, as that authority deems fit, and the clinical establishment shall comply with such directions.

Power to enter.

- 23 The authority or an officer / assessors authorized by it may, if

there is any reason to suspect that anyone is carrying on a clinical establishment without registration, enter and search in the manner prescribed, at any reasonable time and the clinical establishment, shall offer reasonable facilities for inspection or inquiry and be entitled to be represented thereat:

The authority or the state council may carry out inspection of registered clinical establishment suo motto or if it has been brought to its notice that the clinical establishment is not complying with the provisions of the act and rules made.

However no such inspection shall be conducted within three months from the date of the first inspection and not more than two inspections shall be conducted within one year unless it is to verify the claim of clinical establishment that a defect pointed out in the has been rectified or directed by the state government.

Grievance Redressal

- 24 (1) The State Council shall set up a grievance redressal mechanism as prescribed to receive, investigate and take action about any clinical establishment regarding violation of the provisions of the Act or Rules made thereunder,
- (2) If a patient or his / her next of kin is aggrieved by violation of the provisions of the Act and rules may complain as prescribed

CHAPTER IV

REGISTER OF CLINICAL ESTABLISHMENTS

Register of clinical establishments.

- 26 (1) The Council shall compile, maintain and publish a register electronically to be known as the State Register of Clinical Establishments in such form containing such particulars as may be prescribed.
- (2) The registration authority shall supply in digital format to the State Council of clinical establishments a copy of every entry made in the register of clinical establishments in such manner, as may be prescribed to ensure that the State Register is constantly up-to-date.
- (3) The State Council shall send periodic returns for updating the National Register as required by Government of India or the National Council constituted under the Clinical Establishments (Registration and Regulation) Act, 2010 (Central Act 23 of 2010);

CHAPTER V

PENALTIES & APPEALS

- 26 Whoever contravenes any provision of this Act or any of the rules shall, if no penalty is provided elsewhere, shall be punished for the first offence with a fine which may extend

to rupees five lakhs and for any subsequent offence with fine which may extend to rupees ten lakhs and cancellation of registration.

Provided that taking into account the nature of contravention, category, size, turnover, type of clinical establishments and local conditions of the area in which the establishment is situated shall be taken into account while determining the quantum of penalty.

- 27 Whoever contravenes the provision of 11 (1) of this Act shall be punished for the first offence with a fine of rupees two lakhs and for subsequent offence with fine of rupees five lakhs and closure of clinical establishment.

Penalty

28 These provisions will be in addition to the penalties and punishments as may be prescribed under any other law in force.

29 Any amount of penalty or other amount due under this Act which remains unpaid shall be recoverable as arrears of land revenue

30 Any medical practitioner who knowingly serves in a clinical establishment which is not duly registered under this Act shall be liable to a monetary penalty which may extend to twenty-five thousand rupees.

31 (1) Appeal against an order of the registering authority refusing to grant, renew, suspended or cancel registration of a clinical establishment shall lie to the state council in the prescribed manner and within the time limit prescribed for the same.

Provided that the State Council may entertain an appeal preferred after the expiry of the prescribed period if it is satisfied that the applicant was prevented by sufficient cause from preferring the appeal in time.

- (2) Every appeal under sub-section (1) above shall be made in such form and be accompanied by such fee as may be prescribed.
- (3) The manner of filing the appeal referred to in subsection 1 above shall be such as may be prescribed.
- (4) The Government may, suo-motu or on application made to it, call for the records of any case in which an order has been passed by the Council and if it appears to the Government that the order is improper or illegal, it may, after giving an opportunity of being heard to the concerned, pass such order as it deems fit under the provisions of the Act and rules

Disobedience of order, obstruction and refusal of information.

32 (1) Whoever wilfully disobeys any direction lawfully given by any person or authority empowered under this Act to give such direction, or obstructs any person or authority in the discharge of any functions which such person or authority is required or empowered under this Act to discharge, shall be liable to a monetary penalty which may extend up to twenty five thousand

rupees.

- (2) Whoever being required by or under this Act to supply any information wilfully withholds such information or gives information which she/he knows to be false or which he does not believe to be true, shall be liable to monetary penalty which may extend up to one lakh rupees.
- (3) For the purpose of adjudging under Section 28, 29 and 32 the authority shall hold an inquiry in the prescribed manner after giving the any person concerned a reasonable opportunity of being heard for the purpose of imposing any criminal and or monetary penalty.
- (4) While holding an inquiry the authority shall have power to summon and enforce the attendance of any person acquainted with the facts and circumstance of the case to give evidence or to produce any document which in the opinion of the authority, may be useful for or relevant to the subject matter of the inquiry and if, on such inquiry, it is satisfied that the person has failed to comply with the provisions act and rules it may by order impose the monetary penalty specified in those subsections to be deposited within thirty days of the order in the account referred to in sub-section 36 (2)
- (5) Any person aggrieved by the decision of the registration authority may prefer an appeal to the State council within a period of three months from the date of the said decision.

Penalty for minor deficiencies

33 Whoever contravenes any provision of this Act or any rule made thereunder resulting in deficiencies that do not pose any imminent danger to the health and safety of any patient and can be rectified within a reasonable time, shall be punishable with penalty that may extend to one thousand rupees.

Contravention by companies

- 34 (1) Where a person committing contravention of any of the provisions of this Act or of any rule made thereunder is a company/ firm/trust/association, the controller of clinical establishment thereof, shall be deemed to be guilty of the contravention and shall be liable to penalty as mentioned in Section 28 and 29:
- (2) Provided that nothing contained in this sub-section shall render any such person liable to any punishment if he proves to the satisfaction of the registration authority that the contravention was committed without his knowledge or that he had exercised all due diligence to prevent the commission of such contravention if the registration authority is satisfied to that effect.
 - (3) Notwithstanding anything contained in sub-section (1), where a contravention of any of the provisions of this Act or of any rule made thereunder has been

committed with the consent or connivance of, or is attributable to any neglect on the part of, any director, manager, secretary or other officer of the clinical establishment company firm/trust/association,, such director, manager, secretary or other officer shall also be deemed to be guilty of that contravention and shall be liable to penalty.

Explanation.— For the purposes of this section,—

- a) “company” means an association of persons and includes a body corporate, society, trust, firm or other association of individuals; and b) “director”, in relation to a firm, means a partner in the firm.

Offences by Government clinical establishments

- 35 (1) Where an offence under this Act has been committed by any Department of Government within a period of six months after the commencement of this Act, the head of the clinical establishment shall be deemed to be guilty of the offence and shall be liable to be proceeded against and punished accordingly:

Provided that nothing contained in this section shall render such head of the clinical establishment liable to any punishment if he proves that the offence was committed without his/her knowledge or that s/he exercised all due diligence to prevent the commission of such offence.

- (2) Notwithstanding anything contained in sub-section (1) where an offence under this Act has been committed by an Institution of Government and it is proved that the offence has been committed with the consent or connivance of, or is attributable to any neglect on the part of, any officer, other than the head of the clinical establishment, such officer shall also be deemed to be guilty of that offence and shall be liable to be proceeded against and punished accordingly.

Recovery of Penalty

- 36 Any amount of penalty or other amount due under this Act which remains unpaid, shall be recoverable as arrears of land revenue

CHAPTER VI

FINANCE AND ACCOUNTS

Levy of fee by State Government.

- 37 (1) The State Government may charge fees for different categories of clinical establishments, as may be prescribed.
- (2) The amounts collected by way of fees and penalties by the State Council and the Registration Authority shall be credited to such separate account and shall be utilized for the activities connected with the implementation of the provisions of the Act, as prescribed:

CHAPTER VII

MISCELLANEOUS

Protection of action taken in good faith.

- 38 (1) No suit, prosecution or other legal proceedings shall lie against any authority or any member of the local registering authority or any officer authorized on his behalf in respect of anything, which is in good faith done or intended to be done in pursuance of the provisions of this Act or any rule made thereunder.

- (2) No suit or other legal proceedings shall lie against a State Government in respect of any loss or damage caused or likely to be caused by anything which is in good faith done or intended to be done in pursuance of the provisions of this Act or any rule made thereunder.

- 39 The State Government may facilitate single window applications and clearances for clinical establishments falling under the purview of the Department of Health and Family Welfare, Government of the National Capital Territory of Delhi.

Furnishing of returns, etc.

- 40 Every clinical establishment shall, within such time or within such extended time, as may be prescribed in that behalf, furnish to the authority or the State Council such returns or the statistics and other information in such manner, as may be prescribed by the State Government, from time to time.

Power to give directions.

- 41 Without prejudice to the foregoing provisions of this Act, the authority shall have the power to issue such directions, including furnishing returns, statistics and other information for the proper functioning of clinical establishments and such directions shall be binding.

Employees of the authority, etc. to be public servants.

- 42 Every employee of the authority and the State Council or appropriate forums shall be deemed to, when Acting or purporting to Act in pursuance of any of the provisions of this Act, be public servants within the meaning of section 21 of the Indian Penal Code.

Power to remove difficulties.

- 43 (1) If any difficulty arises in giving effect to the provisions of this Act, the State Government may, by order published in the Official Gazette, make such provisions not inconsistent with the provisions of this Act as may appear to it to be necessary or expedient for removal of the difficulty:

Provided that no such order shall be made after the expiry of a period of two years from the date of commencement of this Act.

- (2) Every order made under this section shall, as soon as may be after it is made, be laid before each House of

State Legislature.

Laying of rules.

- 44 Every rule made by the State Government under this Act shall be laid, as soon as may be after it is made, before the State legislature, while it is in session, for a total period of thirty days which may be comprised in one session or in two

or more successive sessions and if, before the expiry of the session immediately following the session or the successive sessions aforesaid, the House agrees in making any modification in the rule or the House agrees that the rule should not be made, the rule shall thereafter have effect only in such modified form or be of no effect, as the case may be; so, however, that any such modification or annulment shall be without prejudice to the validity of anything previously done under that rule.

Power of State Government to make rules.

45 The State Government may, by notification, make rules for carrying out all or any of the provisions of this Act

46 The State Government may, as and when consider necessary, by notification amend the Schedule Savings.

Repeal

47 The Delhi Nursing Homes Registration (Amendment 2005)

Act, 1953 is hereby repealed from date of enactment of this Act.

2) The state Council shall consist of-

- a) Secretary, Health Government of National Capital Territory of Delhi ex officio who shall be the Chairperson.
- b) Director General Health Services, Government of National Capital Territory of Delhi.
- c) Director of AYUSH GNCTD, ex-officio who shall be the member.
- d) One representative of Delhi Medical Council constituted under section 3 of the DMC Act, 1997 to be nominated by GNCTD,
- e) One representative of Delhi Dental Council constituted under section 21 of the Dentist Act, 1948 to be nominated by GNCTD.

Ministry of Health & Family Welfare , Govt. of Delhi, NCT introduced Draft Delhi Health Bill (revised).

You are requested to go through it & send your comments / Suggestions / Objections to DMA at delhimedicalassociation@gmail.com and Director DGHS at dirdhs@nic.in till 20th October, 2019.

You can also download the draft from health.delhigovt.nic.in

Dr. Girish Tyagi
President, DMA

Dr. Arvind Chopra
Secretary, DMA



OBITUARY

DMA regrets to inform the sad demise of Sr. Member and Past President of DMA Respected **Dr. K.L. Tuli** (98yrs) on 3rd October 2019.

We pray to God to rest his soul in peace and give strength to the family to bear this irreparable loss.

Dr. Girish Tyagi
President

Dr. Arvind Chopra
Hony. State Secretary



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