



GOVERNMENT OF INDIA  
MINISTRY OF HEALTH

# A HAND BOOK ON MEDICAL EXAMINATION

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## P R E F A C E

Government servants have to be examined by the appropriate medical authorities for various purposes *e.g.* initial appointment, quasi-permanency, confirmation, leave, invalidation, etc. The orders on the subject are so scattered that difficulty is being experienced in the various Ministries etc. With a view to minimising this difficulty an attempt has been made in this Hand Book to incorporate all the relevant orders, decisions and interpretations. It is hoped that this compilation will be useful to the Ministries, Departments and Offices of the Government of India in the task of administering the rules and orders.

It is proposed to keep this Hand Book up-to-date by issuing correction slips as and when necessary. The errors and omissions that may be found in this Volume may kindly be brought to the notice of the Ministry of Health.

V. K. B. PILLAI,

*Secretary to the Government of India,  
Ministry of Health.*

NEW DELHI,  
Dated the 13th June, 1960. }

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## APPENDICES

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## APPENDIX I

*Regulations as to the physical examination of candidates for admission into the technical and Non-technical services Class I and Class II (Gazetted) under the Government of India except posts of Assistant Aerodrome Officers in the Civil Aviation Department and Defence services personnel.*

### I. Technical (Gazetted)

(a) Railway Engineering Services (Civil, Electrical, Mechanical and Signal), Transportation (Traffic) and Commercial Department and posts of the Marine Establishment.

(b) Central Engineering Classes I & II, Telegraph Engineering Class I, Electrical Engineering Classes I and II, Survey of India Classes I & II and Class I and II posts in the Engineering branch of the Overseas Communication Services. Technical Officers, Class I & II of the Inspection wing of the Directorate General of Supplies and Disposals.

(c) Similar other Services as may be declared technical for the purposes of these regulations.

### II. Non-technical (Gazetted)

(a) I.A.S., I.P.S., I.A. & A.S., Indian Customs Service, Indian Railway Accounts Service, Indian Defence Accounts Service, Medical Stores and Establishment Department of the Superior Revenue Establishment of the Indian Railways and Railway Protection Force, Chemists and Metallurgists and any other posts not connected with the train working or use of trolley, Income Tax Officers Class I, (Grade II) and Class II Service, Indian Postal Service (Class I), Military Lands and Cantonments Service, Classes I & II, Geological Survey of India, Classes I and II and other Central Civil Services Classes I & II, Technical Officers of Wireless Planning and Co-ordination Organisation, Classes I & II.

#### (b) Indian Police Service.

(These regulations are published for the convenience of candidates and in order to enable them to ascertain the probability of their coming up to the required physical standard. But it must be clearly understood that the Government of India reserve to themselves an absolute discretion to reject as unfit any candidate whom they may consider, on the report of the Medical Board, to be physically disqualified and that their discretion is in no respect limited by these regulations. These regulations are intended merely for the guidance of Medical Examiners and are not meant to restrict their discretion in any way).

1. To be passed as fit for appointment a candidate must be in good mental and bodily health and free from any physical defect likely to interfere with the efficient performance of the duties of his appointment.

2. (a) In the matter of the correlation of age, height and chest of candidates of Indian (including Anglo-Indian) race, it is left to the Medical Board to use whatever correlation figures are considered most suitable as a guide in the examination of the candidates. If there be any disproportion with regard to height, weight and chest girth, the candidate should be hospitalised for investigation and X-ray of the chest taken before the candidate is declared fit or not fit by the Board.

(b) However, for certain services the minimum standards for height and chest girth without which candidates cannot be accepted, are as follows :—

	Height	Chest-girth (fully expanded)	Expansion
(1) Railway Engineering Service (Civil, Electrical, Mechanical and Signal) Transportation (Traffic), and Commercial Department Railway Protection force and posts on the Marine Establishment and Class I & II posts in the Engineering Branch of the Overseas Communication Services.	5 ft	33"	2"
(2) Indian Police Service.*	5ft 5"	33"	2"

(\*Not applicable to women candidates).

The minimum height prescribed is relaxable in case of candidates belonging to races such as Gorkhas, Garhwalis, Assamese Tribals, etc., whose average height is distinctly lower.

3. The Candidate's height will be measured as follows : He will remove his shoes and be placed against the standard with his feet together and the weight thrown on the heels and not on the toes or other sides of the feet. He will stand erect without rigidity and with the heels calves, buttocks and shoulders touching the standard ; the chin will be depressed to bring the vertex of the head level under the horizontal bar, and the height will be recorded in inches and parts of an inch to quarters.

4. The candidate's chest will be measured as follows :—

He will be made to stand erect with his feet together, and to raise his arms over his head. The tape will be so adjusted round the chest that its upper edge touches the inferior angle of the shoulder blades behind and lies in the same horizontal plane when the tape is taken round the chest. The arms will then be lowered to hang loosely by the side, and care will be taken that the shoulders are not thrown upwards or backwards so as to displace the tape. The candidate will then be directed to take a deep inspiration several times and the maximum expansion of the chest will be carefully noted, and the minimum and maximum will then be recorded in inches, 33-35, 34-36½, etc. In recording the measurements, fractions of less than ¼ inch should not be noted.

5. The candidate will also be weighed and his weight recorded in pounds; fractions of a pound should not be noted.

6. The candidate's eye-sight will be tested in accordance with the following rules. The result of each test will be recorded :

There shall be no limit for minimum naked eye vision. The naked eye vision of the candidates shall, however, be recorded by the Medical Board or other medical authority in every case, as it will furnish the basic information in regard to the condition of the eye.

The standards for distant and near vision with or without glasses shall be as follows :—

	Distant Vision		Near Vision	
	Better Eye	Worse Eye	Better Eye	Worse Eye
1	2	3	4	5

1. Railway Engineering Services (Civil, Electrical, Mechanical and Signal), Transportation (Traffic) and Commercial Department and posts on the Marine establishment, Central Engineering, Classes I & II, Telegraph Engineering Class I, Electrical Engineering Classes I & II, Survey of India, Classes I & II and Class I & II posts in the Engineering branch of the Overseas Communication Services. Technical Officers, Class I & II of the Inspection Wing of the Directorate General of Supplies & Disposals . . . . .

6/9          6/9          0.6          0.8

OR

2. I.A.S., I.F.S., I.A. & A.S., Indian Customs Service; Indian Railway Accounts Service; Indian Defence Accounts Service; Medical Stores and Establishment Department of the Superior Revenue Establishment of the Indian Railways and Railway Protection Force, Chemists and Metall-

6/6          6/12

1	2	3	4	5
<p>lurgists &amp; any other posts not connected with the train working or use of trolley ; Income Tax Officers (Class I, Grade II and Class II) Service; Indian Postal Service Class I, Military Lands and Cantonments Service, Classes I &amp; II, Geological Survey of India, Classes I &amp; II, and other Central Civil Services, Classes I &amp; II; Technical Officers of the Wireless Planning and Co-ordination Organisation, Classes I &amp; II.</p>				
<p>3. Indian Police Service.</p>				

*N.B.*—When the age of the candidate at the time of first appointment is 35 years or more the corrected visual acuity will be reduced by one step *i.e.*

6/12	6/12
	OR
6/9	6/18

NOTE 1.—In respect of Services mentioned at 1 and 3 above, total amount of Myopia (including the cylinder) shall not exceed—4.00D. Total amount of Hypermetropia (including the cylinder) shall not exceed +4.00D.

NOTE 2.—In respect of services mentioned at 2 above, total amount of Myopia shall not exceed—8.00D and total Hypermetropia shall not exceed + 6.00 D in the case of candidates above the age of 20 years and —6.00 D and + 6.00D in the case of those upto the age of 20 years.

NOTE 3.—Fundus Examination:

Wherever possible fundus examination should be carried out and results recorded. The necessity for carrying out such examination is left to the discretion of the Medical Board.

NOTE 4.—Colour vision

- (i) The testing of colour vision shall be essential in respect of services mentioned at 1 and 3 above, as also for medical, Railway Protection Force and Chemist and Metallurgist under the Ministry of Railways.
- (ii) Colour perception should be graded into a higher and a lower Grade depending upon the size of the aperture in the lantern as described in the table below ;

Grade	Higher Grade of colour perception	Lower Grade of colour perception
1. Distance between the lamp and candidate	16'	16'
2. Size of aperture	1.3mm.	13 mm.
3. Time of exposure	5 Sec.	5 Sec.

For the services concerned with the Safety of the Public higher grade of colour vision is essential but for others lower grade of colour vision should be considered sufficient. The same standards of colour vision should be applicable in respect of all engineering personnel in whose case colour perception is considered essential irrespective of the fact whether their duties involve field work or not.

- (iii) Satisfactory colour vision constitutes recognition with ease and without hesitation of signal red, signal green and white colours. The use of Ishihara's plates, shown in good light and a suitable lantern like Edridge Green's shall be considered quite



dependable for testing colour vision. While either of the two tests may ordinarily be considered sufficient in respect of the services concerned with road, rail and air traffic, it is essential to carry out the lantern test. In doubtful cases where a candidate fails to qualify when tested by only one of the two tests, both the tests should be employed.

**NOTE 5.—Field of Vision :**

The field of vision shall be tested in respect of all services by the confrontation method. Where such test gives unsatisfactory or doubtful results the field of vision should be determined on the perimeter.

**NOTE 6.—Night Blindness :**

Night Blindness need not be tested as a routine, but only in special cases. No standard test for the testing of night-blindness or dark adaptation is prescribed. The medical Board should be given the discretion to improvise such rough tests e.g. recording of visual acuity with reduced illumination or by making the candidate recognize various objects in a darkened room after he/she has been there for 20 to 30 minutes. Candidates' own statements should not always be relied upon, but they should be given due consideration.

**NOTE 7.—Ocular conditions other than visual acuity:**

(a) Any organic disease or a progressive refractive error which is likely to result in lowering the visual acuity should be considered as a disqualification.

(b) Trachoma :

Trachoma, unless complicated shall not ordinarily be a cause for disqualification.

(c) Squint :

For services mentioned at 1 and 3 above where the presence of binocular vision is essential, squint, even if the visual acuity is of the prescribed standard should be considered as a disqualification. For other services the presence of squint should not be considered as a disqualification if the visual acuity is of the prescribed standard.

(d) For regular class I/II posts *one-eyed* persons are to be regarded as *unfit*. However, *one-eyed* individuals should not be altogether excluded from employment in Class I and Class II Services on a contract basis provided the visual acuity in the functioning eye is 6/6 for distant vision and 0.6 for near vision and the refractive error is not more than + or -4.00D.

The above standards are not intended for the Defence Services personnel.

**7. Blood Pressure.**

The Board will use its discretion regarding Blood Pressure. A rough method of calculating normal maximum systolic pressure is as follows :—

(i) With young subjects 15-25 years of age the average is about 100 plus the age.

(ii) With subjects over 25 years of age the general rule of 110 plus half the age seems quite satisfactory.

*N. B.*—As a general rule any systolic pressure over 140 and diastolic over 90 should be regarded as suspicious and the candidate should be hospitalised by the Board before giving their final opinion regarding the candidate's fitness or otherwise. The hospitalization report should indicate whether the rise in blood pressure is of a transient nature due to excitement etc. or whether it is due to any organic disease. In all such cases X-ray and electrocardiographic examinations of heart and blood urea clearance test should also be done as a routine. The final decision as to the fitness or otherwise of a candidate will, however, rest with the Medical Board only.

*Method of taking Blood Pressure*

The mercury manometer type of instrument should be used as a rule. The measurement should not be taken within fifteen minutes of any exercise or excitement. Provided the patient and particularly his arm, is relaxed he may be either lying or sitting. The arm is

supported comfortably at the patient's side in a more or less horizontal position. The arm should be freed from clothes to the shoulder. The cuff completely deflated, should be applied with the middle of the rubber over the inner side of the arm, and its lower edge an inch or two above the bend of the elbow. The following turns of cloth bandage should spread evenly over the bag to avoid bulging inflation.

The brachial artery is located by palpitation at the bend of the elbow and the stethoscope is then applied lightly and centrally over it below, but not in contact with the cuff. The cuff is inflated to about 200 mm. Hg. and then slowly deflated. The level at which the column stands when soft successive sounds are heard represents the Systolic Pressure when more air is allowed to escape the sounds will be heard to increase in intensity. The level at which the column well-heard clear sounds change to soft muffled fading sounds represents the diastolic pressure. The measurements should be taken in a fairly brief period of time as prolonged pressure of the cuff is irritating to the patient and will vitiate the readings. Re-checking, if necessary, should be done only a few minutes after complete deflation of the cuff. (Some times as the cuff is deflated sounds are heard at a certain level; they may disappear as pressure falls and reappear at a still lower level. This 'Silent Gap' may cause error in reading).

8. The urine (passed in the presence of the examiner) should be examined and the result recorded. Where a Medical Board finds sugar present in a candidate's urine by the usual chemical tests, the Board will proceed with the examination with all its other aspects and will also specially note any signs or symptoms suggestive of diabetes. If, except for the glycosuria the Board finds the candidate conforms to the standard of medical fitness required they may pass the candidate "fit subject to the glycosuria being non-diabetic" and the Board will refer the case to a specified specialist in Medicine who has hospital and laboratory facilities at his disposal. The Medical Specialist will carry out whatever examinations, clinical and laboratory, he considers necessary including a standard blood sugar tolerance test, and will submit his opinion to the Medical Board, upon which the Medical Board will base its final opinion "fit or unfit". The candidate will not be required to appear in person before the Board on the second occasion. To exclude the effects of medication it may be necessary to retain a candidate for several days in hospital, under strict supervision.

9. The following additional points should be observed :—

- (a) that the candidate's hearing in each ear is good and that there is no sign of disease of the ear. In case it is defective the candidate should be got examined by the ear specialist. Provided that if the defect in hearing is remediable by operation or by use of a hearing aid, a candidate cannot be declared unfit on that account provided he/she has no progressive disease in the ear. (*This provision is not applicable in the case of Railway Services*) ;
- (b) that his/her speech is without impediment;
- (c) that his/her teeth are in good order and that he/she is provided with dentures where necessary for effective mastication (well filled teeth will be considered as sound);
- (d) that the chest is well formed and his chest expansion sufficient; and that his heart and lungs are sound;
- (e) that there is no evidence of any abdominal disease;
- (f) that he is not ruptured;
- (g) that he does not suffer from hydrocele, a severe degree of varicocele, varicose vein or piles;
- (h) that his limbs, hands and feet are well formed and developed and that there is free and perfect motion of all joints ;
- (i) that he does not suffer from any inveterate skin disease;
- (j) that there is no congenital malformation or defect;
- (k) that he does not bear traces of acute or chronic disease pointing to an impaired constitution;
- (l) that he bears marks of efficient vaccination; and
- (m) that he is free from communicable disease.

10. Screening of the chest should be done as a routine in all cases for detecting any abnormality of the heart and lungs, which may not be apparent by ordinary physical examination. Where it is considered necessary a skiagram should be taken.

When any defect is found it must be noted in the Certificate and the medical examiner should state his opinion whether or not it is likely to interfere with the efficient performance of the duties which will be required of the candidate.

**NOTE.**—Candidates are warned that there is no right of appeal from a Medical Board special or standing, appointed to determine their fitness for the above services. If, however, Government are satisfied on the evidence produced before them of the possibility of an error of judgement in the decision of the first Board, it is open to Government to allow an appeal to a second Board. Such evidence should be submitted within one month of the date of the communication in which the decision of the first Medical Board is communicated to the candidate otherwise no request for an appeal to a second Medical Board will be considered.

If any medical certificate is produced by a candidate as a piece of evidence about the possibility of an error of judgement in the decision of the first Board, the certificate will not be taken into consideration unless it contains a note by the medical practitioner concerned to the effect that it has been given in full knowledge of the fact that the candidate has already been rejected as unfit for service by the Medical Board.

#### MEDICAL BOARD'S REPORT

The following intimation is made for the guidance of the Medical Examiner :

The standard of physical fitness to be adopted should make due allowance for the age and length of service, if any, of the candidate concerned.

No person will be deemed qualified for admission to the Public Service who shall not satisfy Government, or the appointing authority, as the case may be, that he has no disease constitutional affection, or bodily infirmity unfitting him, or likely to unfit him for that service.

It should be understood that the question of fitness involves the future as well as the present and that one of the main objects of medical examination is to secure continuous effective service, and in the case of candidate for permanent appointment to prevent early pension or payments in case of premature death. It is at the same time to be noted that the question is one of the likelihood of continuous effective service, and the rejection of a candidate need not be advised on account of the presence of a defect which in only a small proportion of cases is found to interfere with continuous effective service.

The Board should normally consist of three members, (i) a Physician (ii) a Surgeon and (iii) an Ophthalmologist, all of whom should as far as practicable, be of equal status. A lady doctor will be co-opted as a member of the Medical Board whenever a woman candidate is to be examined.

Candidates appointed to the Indian Defence Accounts Service are liable for field service in or out of India. In the case of such a candidate, the medical board should specifically record their opinion as to his fitness or otherwise for field service.

The report of the medical board should be treated as confidential.

In cases where a medical board considers that a minor disability disqualifying a candidate for Government service can be cured by treatment (medical or surgical) a statement to that effect should be recorded by the medical board. There is no objection to a candidate being informed of the Board's opinion to this effect by the appointing authority and when a cure has been effected it will be open to the authority concerned to ask for another medical board.

## APPENDIX II

*Standard of medical fitness in regard to eyesight of Government servants in the Aerodrome Organisation of the Civil Aviation Department who have to deal with Aircraft Operations*

Category of post	Minimum visual standards required
1. Aerodrome Operators, Grade I	<ul style="list-style-type: none"> <li>• without glasses 6/60 each eye</li> <li>• with glasses 6/6 each eye</li> </ul>
2. Aerodrome Operators, Grade II } Fire Foreman } Fire Operators }	<ul style="list-style-type: none"> <li>without glasses Better eye 6/6</li> <li>Worse eye 6/60</li> <li>with glasses 6/12 each eye</li> </ul>

- (a) Myopic correction requiring a lens of more than 6 dioptries in any meridian should cause rejection.
- (b) Hypermetropia of more than 4 Dioptries should not be allowed.
- (c) Colour test—Normal or defective safe.
- (d) Night Blindness should be a cause for rejection. No disease of the eyelids likely to become chronic or media or retina producing a visual impairment to constitute a cause for failure in the efficient performance of these duties should be present. Squint, a tendency to undue ocular fatigue or recurrent headaches should also be a cause for rejection.
- (e) The Aerodrome Operators, Grade I, will be examined with reference to these standards annually. Aerodrome Operators Grade II, Fire Foremen and Fire Operators will be examined after every two years.

### APPENDIX III

#### *Medical Report Form for examination of candidates for Gazetted Services*

**(A) Candidate's statement and declaration.**

The candidate must make the Statement required below prior to his Medical Examination, and must sign the Declaration appended thereto. His attention is specially directed to the Warning contained in the Note below:—

1. State your name in full (in bolck letters) . . . . .
2. State your age and birth place . . . . .
3. (a) Have you ever had small-pox, intermittent or any other fever, enlargement or suppuration of glands, spitting of blood, asthma, heart disease, lung disease, fainting attacks, rheumatism, appendicitis? . . . . .

OR

- (b) any other disease or accident requiring confinement to bed and medical or surgical treatment? . . . . .
4. When were you last vaccinated? . . . . .
5. Have you or any of your near relations been afflicted with consumption, scrofula, gout, asthma, fits, epilepsy, or insanity? . . . . .
6. Have you suffered from any form of nervousness due to over-work or any other cause? . . . . .
7. Furnish the following particulars concerning your family:—

Father's age if living, and state of health	Father's age at death and cause of death	No. of brothers living, their ages and state of health	No. of brothers dead, their ages and cause of death

Mother's age, if living, and state of health	Mother's age at death and cause of death	No. of sisters living, their ages and state of health	No. of sisters dead, their ages and cause of death

All the above answers are to the best of my belief, true and correct.

Candidate's signature  
Signed in my presence  
Signature of Chairman of the Board.

**NOTE.**—The candidate will be held responsible for the accuracy of the above statement. By wilfully suppressing any information he will incur the risk of losing the appointment and, if appointed, of forfeiting all claims to Superannuation Allowance or Gratuity.

**B. Report of the Medical Board on (name of candidate)**

**Physical Examination.**

1. General development: Good.....Fair.....Poor .. .  
 Nutrition : Thin.....Average.....Obese.....  
 Height (without shoes).....Weight.....  
 Best Weight..... When? .....Any recent change  
 in weight? ..... Temperature.....

**Girth of Chest:—**

(1) (After full inspiration)

(2) (After full expiration)

2. Skin : Any disease .....
3. Eyes : (1) Any disease.....  
 (2) Night blindness.....  
 (3) Defect in colour vision.....  
 (4) Field of vision.....  
 (5) Visual Acuity.....

Acuity of Vision	Naked eye	With Glasses	Strength of glasses		
			Sph.	Cyl.	Axis
Distant Vision R.E. L.E.					
Near Vision R.E. L.E.					

4. Ears : Inspection.....Hearing : Right Ear.....  
 Left Ear.....

5. Glands.....Thyroid .....

6. Condition of teeth.....

7. Respiratory System; Does physical examination reveal anything abnormal in the respiratory organs?.....

If yes, explain fully.....

8. Circulatory System :

(a) Heart : Any organic lesions?.....Rate : Standing.....  
 After hopping 25 times.....

2 minutes after hopp ng.....

(b) Blood Pressure : Systolic.....Diastolic.....

9. Abdomen : Girth..... Tenderness.....Hernia.....  
 (a) Palpable: Liver.....Spleen.....Kidneys.....  
 Tumors.....  
 (b) Hemorrhoids.... .. Fistula.... ..

10. Nervous System : Indications of nervous or mental disabilities.....  
 .....

11. Loco-Motor System : Any abnormality.....

12. Genito Urinary System : Any evidence of Hydrocele, Varicocele, etc.

Urine Analysis :

- |                         |             |             |
|-------------------------|-------------|-------------|
| (a) Physical appearance | (b) Sp. Gr. | (c) Albumin |
| (d) Sugar               | (e) Casts   | (f) Cells   |

13. Report of Screening/X-Ray Examination .....

14. Is there anything in the health of the candidate .....  
 likely to render him unfit for the efficient dis-  
 charge of his duties in the service for which he is .....  
 a candidate?

15. In case the candidate is examined for more than .....  
 one service/post, state for which services has he  
 been examined and found in all respects quali-  
 fied for the efficient and continuous discharge .....  
 of his duties and for which of them he is consid-  
 ered unfit.

NOTE.—The Board should record their findings under one of the following three categories:

- (i) Fit  
 (ii) Unfit  
 (iii) Temporarily Unfit on account of.....

Place .....	Chairman .....
Date .....	Member .....
	Member.....

**APPENDIX IV**

**Central Overseas Scholarships Scheme/Foreign Languages Scholarships Scheme**

**CERTIFICATE OF HEALTH**

**(To be filled by a Civil Surgeon/Staff Surgeon/D. M. O./Presidency Surgeon/Commissioned Medical Officer in Armed Forces)**

Name of applicant.....Age.....

Address ..... (Street and Number) ..... (City) ..... (State) .....

Subject of study.....

Country of study.....

***I. History.***

Check after each disease and symptom with(+) for positive finding and (—) for negative finding:

- |                     |     |            |     |              |     |
|---------------------|-----|------------|-----|--------------|-----|
| P. H. Scarlet Fever | ( ) | Diphtheria | ( ) | Tuberculosis | ( ) |
| Rheum fever         | ( ) | Pneumonia  | ( ) | G.C.         | ( ) |
| Typhoid             | ( ) | Malaria    | ( ) | Lues         | ( ) |
| Smallpox            | ( ) | Cholera    | ( ) |              |     |

**Inventory by symptoms:**

- |                 |     |                 |     |             |     |
|-----------------|-----|-----------------|-----|-------------|-----|
| Gen. headache   | ( ) | Fever           | ( ) | Vertigo     | ( ) |
| Eyes            | ( ) | Vision          | ( ) | Spots       | ( ) |
| Ears : Tinnitus | ( ) | Deafness        | ( ) | Epistaxis   | ( ) |
| Nose            | ( ) | Obstruction     | ( ) | Cough       | ( ) |
| Cardio-resp.    | ( ) | Chest Pain,     | ( ) | Hemoptysis  | ( ) |
| Expectoration   | ( ) | Short of breath | ( ) | Tachycardia | ( ) |
| Palpitation     | ( ) | Pain            | ( ) | Type        | ( ) |
| G.I.            | ( ) | Night sweat     | ( ) |             |     |

Give details of any injury, illness, or operation during the past five years : (Be sure to list all illnesses or injuries).

**Period of Disability.**

Month and year Month and year

Injury or illness.....From.....To.....

From.....To.....

Operation.....From.....To.....



**II Physical Examination**

Height.....	Weight.....	
Check for normal.		Describe abnormalities:
Head	Nose	Lungs
Eyes	Pharynx	Heart
Ears	Neck	Abdomen
	Hernia	Reflexes

**III. Lungs**

Comment more fully on condition of applicant's lungs.....  
 .....  
 .....

**IV. Summary**

I believe this applicant (is) (is not) physically able to carry on a full course of study involving long hours of work in a college or university in the United States/Canada/U.K./Continent of Europe etc.

In my opinion the applicant's health and physical condition is:

Excellent	<input type="checkbox"/>
Good	<input type="checkbox"/>
Fair	<input type="checkbox"/>
Poor	<input type="checkbox"/>

She/he was successfully vaccinated against smallpox on (Date).....

She/he was successfully inoculated against typhoid on (Date).....

She/he presents no evidence of communicable diseases or of over-fatigue and has no physical defects.....

**Remarks:**

Signature .....

Address .....

Date.....

Signature of candidate:

Date:

## APPENDIX V

### *Medical Report Form for Commutation of Pension*

FORM—C

MEDICAL EXAMINATION BY THE.....  
(here enter the medical authority)

#### PART I

*Statement by the applicant for commutation of portion of his pension.*

The applicant must complete this statement prior to his examination by the.....  
 .....and must sign the declaration appended thereto in the presence of  
 that authority.

*A. Form to be filled in by applicants governed by Rule 3 of the Civil Pensions (Commutation) Rules.*

1. State your name in full  
(in Block letters).
2. State place of birth.
3. State your age and date of birth.
4. Furnish the following particulars concerning your family:—

---

Father's age if living and state of health	Father's age at death and cause of death	Number of brothers living, their ages and state of health	Number of brothers dead their ages and cause of death
---	---	---	---

---

Mother's age if living, and state of health	Mother's age at death and cause of death	Number of sisters living their ages and state of health	Number of sisters dead their ages at and cause of death
--	---	---	---

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5. Have any of your near relations suffered from tuberculosis (consumption, scrofula), cancer, asthma, fits, epilepsy, insanity or any other nervous disease?

6. Have you ever been abroad? Where and for what period and how long since?

7. Have you ever served in the Navy, Army, Air Force, or in any Government Department?

8. Have you ever been examined?

(a) for life Insurance or/and

(b) by any Government medical officer or State Medical Board, Civil or Military?

If so, state details and with what result?

9. Have you ever—

(a) had small-pox, intermittent or any other fever, enlargement or suppuration of glands, spitting of blood, asthma, inflammation of lungs, pleurisy, heart disease, fainting attacks, rheumatism, appendicitis, epilepsy, insanity, or other nervous disease, discharge from or other disease of the ear, syphilis, gonorrhoea or

- (b) had any other disease or injury which required confinement to bed or medical or surgical treatment, or
  - (c) undergone any surgical operation, or
  - (d) suffered from any illness, wound or injury sustained while on active service with His Majesty's Forces during the war which began in 1914?
10. Have you rupture?
  11. Have you varicocele, varicose veins?
  12. Is your vision in each eye good?
  13. Is your hearing in each ear good?
  14. Have you any congenital or acquired malformation defect or deformity?
  15. When were you last vaccinated?
  16. Is there any further matter concerning your health not covered by the above questions which should be communicated to the medical authority?

*B. Form to be filled in by applicants governed by Rule 4 of the Civil Pensions (Commutation) Rules.*

1. Name in full (In Block letters).
2. Date of birth.
3. Have you ever been granted leave on medical certificate? If so state periods of leave and nature of illness.
4. Has any application for insurance on your life ever been declined or accepted at an increased premium?
5. Have you ever been told that you had albumen or sugar in the urine?

Do you rise at night to urinate?

Are you now or have you ever been on special diet for your health?

Has there been any marked increase or decrease in your weight within the past three years? If so, how much.

6. Have you been under the treatment of any doctor within the last three months? If so, for what illness.

*Declaration by applicant*

(To be signed in presence of the medical authority)

I declare all the above answers to be, to the best of my belief, true and correct.

I will fully reveal to the medical authority all circumstances within my knowledge that concern my health and fitness.

I am fully aware that by wilfully making a false statement or concealing a relevant fact I shall incur the risk of losing the commutation I have applied for and of having my pension withheld or withdrawn under Article 351, Civil Service Regulations.

Signed in presence of.....

Applicant's Signature.

Signature and Designation of Medical Authority.

PART II

(To be filled in by the examining medical authority)

1. Apparent age.
2. Height.
3. Weight.
4. Girth of abdomen at level of umbilicus.
5. Pulse rate—
  - (a) Sitting.
  - (b) Standing.
 What is character of pulse?
6. What is condition of arteries?
7. Blood pressure—
  - (a) Systolic.
  - (b) Diastolic.
8. Is there any evidence of disease of the main organs—
  - (a) Heart.
  - (b) Lungs.
  - (c) Liver.
  - (d) Spleen.
  - (e) .....
  - .....
  - .....
9. Does chemical examination of urine show (i) albumen, (ii) sugar? State specific gravity.
10. Has the applicant a rupture? If so, state the kind and if reducible.
11. Describe any scars or identifying marks.
12. Any additional information.

PART III

I/We have carefully examined A. B. and am/are of opinion that:—

Either he is/is not in good bodily health and has the prospect of an average duration of life/is not a fit subject for commutation or (in the case of an impaired life which is yet considered a fit subject for commutation) "as.....is suffering from.....his age for the purpose of commutation, i. e., his age next birth should be taken to be.....years more than his actual age".

Station.....

Dated.....

Countersigned (in cases where Regulation 7(ii) (b) (2) applies).

Left hand thumb and finger impressions of non-gazetted Government servants.

(Signature and Designation of Examining Medical Authority).

Reviewing Medical authority.

## APPENDIX VI

### Form of Medical Certificate in Hindi to be produced from Vaid, Hakims and Homoeopaths for purposes of Leave

प्रार्थी के हस्ताक्षर.....

अराजक व्रित्त अफसर के छुट्टी लेने, छुट्टी बढ़ाने या उसमें परिवर्तन करने के लिये डाक्टरी प्रमाण-पत्र ।

मैं, ..... भली प्रकार परीक्षण के पश्चात् प्रमाणित करता हूँ कि ..... , जिनके हस्ताक्षर ऊपर हैं, .....से पीड़ित है, और मेरे विचार में स्वस्थ होने के लिये ..... से ..... दिनों के लिये उनका कार्य से अनुपस्थित रहना अत्यन्त आवश्यक है ।

हस्ताक्षर.....

सरकारी चिकित्सा परिचर  
अथवा  
रजिस्टर्ड चिकित्सक

तारीख  
स्थान

### प्रमाण-पत्र

प्रार्थी के हस्ताक्षर.....

हम, चिकित्सा समिति के सदस्य

मैं, .....का सिविल सर्जन  
.....का रजिस्टर्ड चिकित्सक

प्रमाणित करते हैं । करता हूँ कि हमने/मैंने विभाग के.....का, जिनके हस्ताक्षर ऊपर हैं, भली प्रकार परीक्षण कर लिया है । आप अब निपेग हैं और सरकारी काम करने के योग्य हैं । हम, मैं यह भी प्रमाणित करते हैं/करता हूँ कि इस निर्णय के पूर्व हमने/मैंने उस/उन मूल डाक्टरी प्रमाण-पत्र (पत्रों) और विवरण (विवरणों) की (या उसकी/उनकी प्रमाणित प्रतियों की) जिसके/जिनके आधार पर छुट्टी मंजूर की गई या बढ़ाई गयी थी, जांच कर ली है, और निर्णय करते समय उसका/उनका ध्यान रखा है ।

तारीख  
स्थान

हस्ताक्षर.....  
पद.....

## APPENDIX VII

*List giving particulars of Administrative Medical Officers in the State and Union Territories.*

S.No.	Name of the state/union territory	Designation of the post and address	Telegraphic address
1	2	3	4
<b>STATES</b>			
1	Andhra Pradesh	Director of Medical Services, Andhra Pradesh, Hyderabad. (Dn.)	Medserand Hyderabad (Dn.)
2	Assam	Director of Health Services, Assam, Shillong.	Hosprisons Shillong.
3	Bihar.	Director of Health Services, Bihar, Patna.	Health Services Bihar Patna.
4	Maharashtra	Surgeon General with the Govt. of Maharashtra, Bombay.	Hospitals Bombay.
5	Gujerat	Director of Medical Services Gujarat, Ahmedabad.	
6	Jammu & Kashmir	Director, Health Services Jammu and Kashmir Govt., Jammu (Tawi)/ Srinagar.	Hospitals Jammu/ Srinagar.
7	Kerala	Director of Health Services, Kerala State, Trivandrum-1.	Director of Health Services, Kerala State, Trivandrum-1.
8	Madras	Director of Medical Services, Madras-6.	Sericarias Madras.
9	Madhya Pradesh	Director of Health Services, Madhya Pradesh, Indore.	Dirhealth Indore.
10	Mysore	Director of Medical Services in Mysore, Bangalore.	Senorgen Bangalore
11	Orissa	Director of Health Services, Orissa, Bhubaneswar.	Dirhealth Bhubaneswar.
12	Punjab	Director, Health Services Punjab (4th Floor New Sectt. Building), Chandigarh.	Dirhealth Chandigarh
13	Rajasthan.	Director of Medical and Health Services, Rajasthan, Jaipur.	Rajmedical Jaipur.
14	Uttar Pradesh	Director of Medical & Health Services, Uttar Pradesh, Lucknow.	Uphospitals or Dis-health Lucknow.
15	West Bengal	Director of Health Services, West Bengal, Calcutta.	Dirhealth Calcutta.
<b>UNION TERRITORIES</b>			
16	Andaman & Nicobar Islands.	Senior Medical Officer, Andaman & Nicobar Islands, Port, Blair.	Medical Port Blair.

1	2	3	4
17	Delhi . . . .	Superintendent of Medical Services, Delhi Administration Delhi-6.	
18	Himachal Pradesh . . . .	Director of Medical & Health Services, Himachal Pradesh, Simla-4.	Himhosp Simla.
19	Manipur . . . .	Director of Medical & Health Services, Manipur Imphal.	Medmanipur Imphal.
20	Tripura. . . .	Superintendent V.M. Hospital (Health Directorate), Agartala.	Health Agartala.
21	Laccadive, Minicoy and Amindivi Islands are under the administrative control of the Administrator, Kozhikode. There is no Senior or Chief Medical Officer in the Islands.		
22	Pondicherry	Director of Medical Services Pondicherry.	

**APPENDIX VIII**  
**INDIAN MEDICAL COUNCIL ACT, 1956**

**The First Schedule**

*Recognised Medical qualifications granted by Universities or Medical Institutions in India.*

University or Medical Institution	Recognised Medical qualification	Abbreviation for Registration
1	2	3
University of Allahabad.	Bachelor of Medicine & Bachelor of Surgery.	M.B.,B.S. . All.
University of Bombay	Licentiate in Medicine and Surgery.	L.M. S. . Bombay.
	Bachelor of Medicine & Bachelor of Surgery.	M.B.,B.S. . . Bombay.
	Doctor of Medicine.	M.D. . . . Bombay.
	Master of Surgery .	M.S. . . . Bombay.
	Diploma in Anaesthesiology.	D.A. . . . Bombay.
University of Calcutta	Licentiate in Medicine and Surgery.	L.M. S. . . Calcutta.
	Bachelor of Medicine	M.B. . . . Calcutta.
	Bachelor of Medicine and Bachelor of Surgery.	M.B.,B.S. . . Calcutta.
	Doctor of Medicine	M.D. . . . Calcutta.
	Master of Surgery .	M.S. . . . Calcutta.
	Master of Obstetrics	M.O. . . . Calcutta.
	Diploma in Ophthalmic Medicine and Surgery.	D.O.M.S. . . Calcutta.
University of Lucknow	Diploma in Gynaecology and Obstetrics.	D.G. O. . . Calcutta.
	Bachelor of Medicine & Bachelor of Surgery.	M.B., B. S. . . Lucknow.
	Doctor of Medicine	M.D. . . . Lucknow.
University of Madras	Master of Surgery .	M.S. . . . Lucknow.
	Licentiate in Medicine and Surgery.	L.M.S. . . Madras.
	Bachelor of Medicine & Master of Surgery.	M.B. ,C.M. . . Madras.



1	2	3
University of Madras —contd.	Bachelor of Medicine & Bachelor of Surgery.	M.B., B.S. . . . Madras.
	Doctor of Medicine	M.D. . . . Madras.
	Master of Surgery .	M.S. . . . Madras.
University of Patna .	Bachelor of Medicine and Bachelor of Surgery.	M.B., B.S. . . . Patna.
	Doctor of Medicine.	M.D. . . . Patna.
	Master of Surgery .	M.S. . . . Patna.
University of Andhra	Bachelor of Medicine & Bachelor of Surgery.	M.B., B.S. . . . Andhra.
	Doctor of Medicine.	M.D. . . . Andhra.
	Master of Surgery .	M.S. . . . Andhra.
	Licentiate in Medicine & Surgery.	L.M.S. . . . Andhra.
	Diploma in Laryngology and Otology.	D.L.O. . . . Andhra.
	Master of Surgery (Genl. Surgery.)	M.S (Genl. Surg.) . . . Andhra.
	Master of Surgery (Orthopaedics)	M.S. (Ortho.) . . . Andhra.
	Diploma in Veneral Diseases.	D.V.D. . . . Andhra.
College of Physicians and Surgeons of Bombay.	Membership of College of Physicians and Surgeons Bombay.	M.C. P. S. (Bombay). This qualification shall be a recognised medical qualification only when granted after the 30th April, 1944.
	Fellowship of College of Physicians and Surgeons, Bombay in Medicine, Pathology Surgery or Dermatology.	F. C. P. S. (Med.) (Bom.) F. C. P. S. (Path.) (Bom.) F. C. P. S. (Surg.) (Bom.) F. C. P. S. (Drm.) These qualifications shall be recognised medical qualifications only when granted after the 1st April, 1954.
	Fellowship of the College of Physicians & Surgeons, Bombay in Midwifery and Gyanaecology, Ophthalmology and Diplomas of the said College in	F. C. P. S. (Mid. & Gyn.) F. C. P. S. (Ophth.) D. P. B. (Dip. in Path. & Bact.) D. G. O. (Dip. in Gyn. & Obsts.) D. C. H. (Dip. in Child Health.) These qualifications shall be recognised medical qualifications under this Schedule only when they are held by persons holding any other medical qualifications specified in this Shedule.

1	2	3
	Pathology, and Bacteriology, and Gynaecology and Obstetrics, and Child Health.	
University of Agra	Bachelor of Medicine and Bachelor of Surgery.	M.B., B.S. . Agra.
University of East Punjab.	Bachelor of Medicine and Bachelor of Surgery.	M.B., B.S. . East Punjab.
East Punjab State Medical Faculty.	Licentiate in Medicine and Surgery.	L.M.S. East Punjab. This qualification shall be a recognised one only when granted on or after the 15th August, 1947 provided the holders thereof had passed the F. Sc. Examination before taking up medical studies.
University of Delhi	Bachelor of Medicine & Bachelor of Surgery.	M.B., B. S. . Delhi.
	Diploma in Tuberculosis Diseases.	D.T.D. . Delhi.
University of Gauhati	Bachelor of Medicine & Bachelor of Surgery.	M.B., B.S. . Gauhati.
State Medical Faculty of West Bengal.	Membership of the State Medical Faculty of West Bengal	M.M.F. . West Bengal.
University of Bihar	Bachelor of Medicine & Bachelor of Surgery.	M.B., B.S. . Bihar.
University of Poona	Bachelor of Medicine & Bachelor of Surgery	M.B., B.S. . Poona.
University of Utkal	Bachelor of Medicine & Bachelor of Surgery.	M.B., B.S. . Utkal.
University of Gujerat.	Bachelor of Medicine & Bachelor of Surgery.	M.B., B.S. . Gujerat.
University of Nagpur	Bachelor of Medicine & Bachelor of Surgery.	M.B., B.S. . Nagpur.
University of Osmania	Bachelor of Medicine & Bachelor of Surgery.	M.B., B.S. . Osmania.
University of Mysore	Bachelor of Medicine & Bachelor of Surgery.	M.B., B.S. . Mysore. This qualification shall be a recognised qualification only when granted after the 31st December, 1932.

1	2	3
University of Rajputana.	Bachelor of Medicine & Bachelor of Surgery.	M.B., B.S. . . Rajputana.
	Master of Surgery in General Surgery.	M.S. (Genl. Surg.) . . Rajputana.
	Doctor of Medicine in Medicine & Therapeutics.	M.D. (Med. & Thera.) Rajputana.
	Doctor of Medicine in Pathology.	M.D. (Path.) . . Rajputana.
	Master of Science in Physiology.	M.Sc. (Physiology) . . Rajputana.
	Master of Science in Medical Pharmacology.	M.Sc. (Med.) (Pharm.) . . Rajputana.
University of Rajasthan.	Bachelor of Medicine & Bachelor of Surgery.	M.B., B.S. . . Rajasthan.
	Master of Surgery in General Surgery.	M.S. (Genl. Surg.) . . Rajasthan.
	Doctor of Medicine in Medicine & Therapeutics.	M.D. (Med. & Thera.) . . Rajasthan.
	Doctor of Medicine in Pathology.	M.D. (Path.) . . Rajasthan.
	Master of Science in Physiology.	M.Sc. (Physiology) Rajasthan. These qualifications shall be recognised medical qualifications only when granted on or after the 1st July, 1957.
	Master of Science (Med.) (Pharm.)	M.S. (Med. Pharm.) . . Rajasthan.
University of Baroda	Bachelor of Medicine & Bachelor of Surgery.	M.B., B.S. . . Baroda.
	Doctor of Medicine .	M.D. (Med.) . . Baroda.
	Master of Surgery .	M.S. (Surg.) . . Baroda.
	Master of Science in Physiology.	M.Sc. (Physiology) . . Baroda.
University of Travancore.	Bachelor of Medicine & Bachelor of Surgery.	M.B., B.S. . . Travancore.
University of Kerala .	Bachelor of Medicine & Bachelor of Surgery.	M.B., B.S. . . Kerala.
University of Karnatak.	Bachelor of Medicine & Bachelor of Surgery.	M.B., B.S. . . Karnatak.

1	2	3
University of Aligarh	Diploma in Ophthalmology.	M.B.B.S. . Aligarh. This qualification shall be recognised medical qualification under this schedule only when it is held by persons holding any other medical qualification specified in this schedule.
Vikram University	Bachelor of Medicine and Bachelor of Surgery.	M.B., B.S. . . Vikram
	Doctor of Medicine (Pharmacology)	M.D., (Pharmacology). . . Vikram
	Doctor of Medicine (Pathology)	M.D., (Path.) . . . Vikram
	Doctor of Medicine (Physiology)	M.D., (Physiology) . . . Vikram
	Doctor of Medicine (Medicine)	M.D., Medicine. . . . Vikram
	Master of Surgery (Ophthalmology)	M.S., (Oph.) . . . Vikram
	Master of Surgery (General Surgery)	M.S., (Genl. Surgery). . . . Vikram
	Master of Surgery (Anatomy)	M.S., (Anatomy). . . . Vikram
	Master of Surgery (Obstetrics and Gynaecology).	M.S., (Obst. & Gyn.)-. . . . Vikram
	Diploma in Tuberculosis Diseases.	T. D. D. . . . Vikram
	Diploma in Child Health.	D. C. H. . . . Vikram
	Diploma in Medical Radiology & Electrolgy.	D.M.R.E. . . . . Vikram

### THE SECOND SCHEDULE

*Recognised Medical Qualifications granted by medical Institutions outside the Provinces*

Country	Qualifications
UNITED KINGDOM.	Registrable qualifications admitting primarily to the Medical Register granted by licensing bodies in the United Kingdom, as shown in Table 'E' set out in the Medical Register printed and published from time to time under the direction of the General Medical Council in pursuance of the Medical Acts, 1858, 1886 and 1950.

Other Countries	Registrable Qualifications		Abbreviations
	Title	Nature of qualification as stated on diplomas	
1	2	3	4
<b>AUSTRALIA—</b>			
<i>New South Wales—</i>			
University of Sydney (c)	M.B., M.D., Ch. M., B.S.	Medicine & Surgery.	U. Sydney.
<i>South Australia—</i>			
University of Adelaide (a) (c)	M.B., B.S., M.D. M.S.	Medicine and Surgery	U. Adelaide.
<i>Victoria—</i>			
University of Melbourne	M.B., M.D., B.S. M.S.	Do.	U. Melbourne.
<b>BURMA—</b>			
University of Rangoon	M.B., B.S.	Do.	U. Rangoon.
<b>CANADA—</b>			
<i>Alberta—</i>			
College of physicians and Surgeons of the Province of Alberta (b)	Member.	Do.	C. P. and S. Alta.
University of Alberta (b).	M.D.	Do.	U. Alberta.
<i>Manitoba—</i>			
College of Physicians and Surgeons of the Province of Manitoba (b).	Member	Do.	C.P. & S. Man.
University of Manitoba (c)	M.D., M.D., C.M.	Do.	U. Man.
<i>North-West Territories—</i>			
College of Physicians and Surgeons of the Province of North-West Territories (b) (When held in conjunction with Licence of the College of Physicians and Surgeons of the Province of Saskatchewan or the Province of Alberta).	Member.	Do.	C.P. & S.N.W. Terr.
<i>Nova Scotia—</i>			
Nova Scotia Provincial Medical Board (a) (c).	L.M.S.	Do.	N. Scotia P.M. Bd.
Dalhousie University (a) (c)	M.D., C.M.	Do.	Dalhousie U.
<i>Prince Edward Island—</i>			
Prince Edward Island Medical Council (b).	L.M.S. }	Do.	M. Co. P.E.I.
<b>CEYLON—</b>			
Ceylon Medical College (a) (c).	L.M.S.	Do.	Ceylon M. Coll.

1	2	3	4
<b>HONG KONG—</b>			
University of Hong Kong (a) (c).	M.B., B.S., M.D., M.S.	Medicine and Surgery.	U. Hong Kong.
<b>ITALY—</b>			
All Royal Atalia. Universities (d).	M.D.	Do.	..
<b>JAPAN—</b>			
All Imperial Universities (e)	M.B. (Igakushi) M.D. (Igaku Hakushi).	Do.	..
Any Government or Prefec- tural special colleges desig- nated by a Minister of Education of Japan (c).	M.B. (Igakushi)	Do.	..
<b>MALTA—</b>			
Royal University of Malta	M.D.	Do.	U. Malta.
<b>NEWFOUNDLAND—</b>			
Newfoundland Medical Board (b).	L.M.S.	Do.	Medicine and Nffd. M.Bd. Surgery.
<b>NEW ZEALAND—</b>			
University of New Zealand	M.B., Ch.B. Ch.M. M.D.	Do.	U. N. Zealand.
<b>PAKISTAN—</b>			
Punjab University	L.M.S., M.D. M.B.B., M.S. M.B., B.S.	Do.	U. West Punjab.
Panjab State Medical Faculty. (f).	L.M.S.	Licentiate in Punjab. Medicine & Surgery.	
<b>PONDICHERRY—</b>			
Medical School, Pondicherry.	Medicine de L' Ecole de Pon- dicherry (Diplo- ma.)		
<b>UNION OF SOUTH AFRICA—</b>			
University of South Africa (b)	M.B., Ch.B.	Medicine & Surgery.	U.S. Africa.
University of Cape Town (a) (b).	M.B., Ch.B. M.D., Ch.M.	Do.	U. Cape Town.
University of the Witwaters- rand. Johannesburg (a) (d).	M.B., Ch.B. M.D., Ch. M.	Do.	U. Witwatersrand.

1

2

3

4

STRAITS SETTLEMENTS AND  
FEDERATED MALAYA STATES.—

The King Edward VII College  
of Medicine, Singapore (a)  
(c).

L.M.S.      Medicine & Singapore      Med.  
Surgery      College.

(a) The qualification must be included in Table (F) of the British Medical Register as published from time to time by the General Council of Medical Education and Registration of the United Kingdom.

(b) When granted on or before the 31st October, 1937.

(c) When granted on or before the 31st March, 1942.

(d) When granted on or before the 10th October, 1940.

(e) When granted on or before the 8th December, 1941.

(f) This qualification shall be a recognised one only when granted before the 15th August, 1947, provided the holders thereof had passed F.Sc. examination before taking up medical studies.

(g) This qualification shall be a recognised qualification only when granted after the 31st December, 1932.

The Third Schedule

PART I

*Recognised Medical Qualifications granted by Medical Institutions  
not included in the First Schedule*

Name of Medical Institution or licensing authority	Recognised medical qualification	Abbreviation
1	2	3
College of Physicians and Surgeons of Bombay.	Licentiate of the College of Physicians and Surgeons, Bombay.	L.C.P.S. (Bom.).
	Fellowships of the College of Physicians and Surgeons, Bombay in Midwifery and Gynaecology, Ophthalmology, and Diplomas of the said College in Pathology, and Bacteriology, and Gynaecology and Obstetrics, and Child Health.	F.C.P.S. (Mid. & Gyn.). F.C.P.S. (Ophthalmology) D.P.B. (Dip. in Path. & Bacc.). D.G.O. (Dip. in Gyn. & Obst.). D.C.H. (Dip. in Child Health).
	These qualifications shall be recognised qualifications under this Schedule only when they are held by persons holding any other medical qualifications specified in this Schedule.	
State Medical Faculty, Bombay.	Licensed Medical Practitioner	L.M.P. (Bom.).

1	2	3
State Medical Faculty of Bengal	Licentiate of the Medical Faculty, Bengal.	L.M.F. (Bengal).
	This qualification shall be a recognised medical qualification only when granted before the 15th August, 1947.	
	Licentiate in Medicine and Surgery (Nat.) West Bengal.	L.M. & S. (Nat.) (West Bengal).
State Medical Faculty of West Bengal.	Licentiate of the Medical Faculty, West Bengal.	L.M.F. (West Bengal).
	Licentiate in Medicine & Surgery (Nat.) (West Bengal).	L.M. & S. (Nat.) (West Bengal).
Government of Bengal	Licensed Medical Practitioner. (Campbell Medical School).	L.M.P. (Campbell Medical School).
	Diploma of Medical College (Bengal).	Dip. Med. Coll. (Bengal).
	Licensed Medical Practitioner (Dacca Medical School).	L.M.P. (Dacca Medical School).
	This qualification shall be a recognised medical qualification only when granted before the 15th August, 1947.	
State Medical Faculty of Uttar Pradesh.	Fellow of the State Medical Faculty (U.P.).	F.S.M.F. (U.P.).
	Member of the State Medical Faculty.	M.S.M.F. (U.P.).
	Licentiate of the State Medical Faculty.	L.S.M.F. (U.P.).
State Board of Medical Examination, U.P.	Licensed Medical Practitioner, (U.P.).	L.M.P. (U.P.).
East Punjab State, Medical Faculty.	Licentiate in Medicine and Surgery.	L.M.S., East Punjab.
	This qualification shall be a recognised one only when granted on or after the 15th August, 1947, to a person other than any person referred to in the entry relating to East Punjab State, Medical Faculty in the First Schedule provided he had passed the pre-medical examination.	
State Medical Faculty of Punjab.	Fellow of the State Medical Faculty (Punjab).	F.S.M.F. (Punjab).
	Member of the State Medical Faculty (Punjab).	M.S.M.F. (Punjab).
	Licentiate of the State Medical Faculty.	L.S.M.F. (Punjab).
Government of Punjab	Licensed Medical Practitioner (Lahore).	M.P.L. (Lahore).
	This shall be a recognised medical qualification only when granted before the 15th August, 1947.	



1	2	3
Hyderabad Government . . .	Licentiate in Medicine & Surgery (Osmania).	L.M. & S. (Osmania).
	Licensed Medical Practitioner (Hyd.).	L.M.P. (Hyd.).
Government of Mysore . . .	Licensed Medical Practitioner (Mysore).	L.M.P. (Mysore).
Mysore Medical School . . .	Licensed Medical Practitioner (Mysore Medical School).	L.M.P. (Mysore Medical School).
Andhra University . . .	Licentiate in Medicine & Surgery (Andhra U.).	L.M. & S. (Andhra U.).
Assam Medical Examination Board.	Licensed Medical Practitioner (Assam).	L.M.P. (Assam).
	Licensed Medical Practitioner (B. W. Medical School, Dibrugarh).	L.M.P. (B. W. Medical School, Dibrugarh).
Board of Examiners, Medical College, Madras.	Licensed Medical Practitioner (Madras).	L.M.P. (Madras.)
	Diploma in Medicine & Surgery.	D.M.S. (Madras) Lic. Apoth. (Madras).
C. P. (or M. P.) Medical Examination Board.	Licensed Medical Practitioner (C.P. or M.P.).	L.M.P. (C.P. or M.P.).
Orissa Medical Examination Board.	Licensed Medical Practitioner (Orissa).	L.M.P. (Orissa).
Bihar and Orissa Medical Examination Board.	Licensed Medical Practitioner (Bihar & Orissa).	L.M.P. (Bihar & Orissa).
	Licensed Medical Practitioner (Temple Medical School, Patna.)	L.M.P. (Temple Medical School, Patna).
King Edward Hospital Medical School, Indore.	Diploma or certificate in Medicine and/or Surgery.	Diploma or certificate in Medicine and/or Surgery.
Travancore University . . .	Ditto.	Ditto.
Rangoon University . . .	Licentiate in Medicine and Surgery.	L.M. & S. (Rangoon U.)
	This qualification shall be a recognised medical qualification only when granted before the 1st April, 1937.	
Burma Medical Examination Board.	Licensed Medical Practitioner.	L.M. P. (Burma).
	This qualification shall be a recognised medical qualification only when granted before the 1st April, 1937.	

1	2	3
Aligarh University . . . . .	Diploma in Ophthalmology.	D.O. (Dip. in Ophthalmology) (Aligarh University).

This qualification shall be a recognised medical qualification under this Schedule only when held by persons holding any other medical qualification specified in this Schedule.

## PART II

### *Recognised Medical Qualifications granted by Medical Institutions Outside India not included in the Second Schedule*

M.D. (Berlin)

M.D. (Paris)

M.D. (Amsterdam)

M.D. (Freiburg, Germany)

M.D. (Vienna)

M.D. (Toronto, Canada)

M.D. (Heidelberg)

M.B.B.S. (Dacca)

M.D. (Bonn). (Specialist for Women's diseases & Obstetrics)

M.B.B.S. (Ceylon)

M.D. (Munich)

Licentiate Diploma of Medico Surgical College of Nova-Gova.

## APPENDIX IX

### *Duties of the Staff Surgeon, Fort William, Calcutta*

The Staff Surgeon, Fort William, Calcutta, is responsible for the grant of medical certificates to the Central Government servants in Calcutta. Medical examination is mainly required for the following purposes:—

- (i) determination of physical fitness for Government service;
- (ii) Leave;
- (iii) invalidation from Government service and the grant of usual and other extraordinary pensions under the Chapter XXXVIII of the Civil Services (Extraordinary Pension) Rules or the Superior Civil Service (Extraordinary Pension) Rules, 1935, as the case may be; and
- (iv) Commutation of pensions.

2. As regards item (i), the Staff Surgeon shall furnish this certificate on the request of the Head of the Department employing the Government servant and the Staff Surgeon shall not charge any fees.

3. The certificate for purposes of leave falls into two categories, namely, (a) the initial certificate produced by the applicant; and (b) the countersignature of the initial certificate. Non-gazetted Government servants are to obtain this certificate from the medical practitioners who attend on them. The Staff Surgeon is not responsible for examining them free of charge for this purpose and is entitled to his fees. If the Head of a Department sends a non-gazetted employee to the Staff Surgeon for a second medical opinion, no charge is to be levied by the Staff Surgeon for such countersignatures. As regards the gazetted staff the Staff Surgeon is required to examine the officers requiring leave on medical grounds without any charge. The same applies to certificate required by Government servants, before returning from leave on medical grounds.

4. The Staff Surgeon may be allowed to charge a fee of Rs. 16/- when he is required to examine a non-gazetted Central Government servant at the latter's residence in Calcutta and that the fee paid in this connection should be reimbursed to the Government servant concerned. Before however the Staff Surgeon conducts such examination the Government servant should invariably produce a certificate from his attending doctor that he is unable to appear before the Staff Surgeon at Fort William even in an ambulance.

5. The Staff Surgeon is required to examine candidates for usual and extraordinary pensions and Government servants to be invalided from service without any fee.

6. Fees for medical examination for purposes of commutation of pension are paid by the Government servants themselves.

7. In the matter of treatment of Government servants who go for treatment to the Staff Surgeon his position is like the other Presidency Surgeons in Calcutta and he may charge his fees.

8. It is clear that countersignature of an initial certificate after a patient has recovered has no meaning and if the Staff Surgeon feels that he cannot express an opinion at that stage he is free to say so.

## APPENDIX X

*Schedule of fees prescribed for medical examination for physical fitness etc. of the Central Government by medical officers of State Governments*

Sl. No.	Name of State	Medical examination by a Civil Surgeon, Presidency Surgeon, or District Medical Officer			Medical examination by a provincial Medical Officer/Asstt. Surgeon, Class I.	Medical examination by a subordinate Medical Service/Officer/Asstt. Surgeon, Class II.	By a Medical Board for all classes of Officers and Officials
		Officers of the All India Service	Other gazetted Officers	Subordinate non-gazetted Officers			
1	2	3	4	5	6	7	8
		Rs.	Rs.	Rs.	Rs.	Rs.	Rs.
1	Andhra . . .	16	16	16	5	3	16
2	Assam . . .	16	10	5	3	2	16
3	Bihar . . .	10	10	5	8	2	16
4	Maharashtra . . . (i) Mofussil (ii) Bombay and Poona	16	10	5	3	2	16
5	Gujarat . . .	16	10	5	5	2	16
6	Jammu and Kashmir.	16	10	5	3	2	16
7	Kerala . . .	16	10	5	8	2	16
8	Madras . . .	16	16	16	5	3	16
9	Madhya Pradesh	16	16	16	5	2	16
10	Mysore . . .	16	10	5	3	2	16
11	Orissa . . .	16	10	5	4	2	16
12	Punjab . . .	16	10	8	5	2	16
13	Rajasthan . . .	16	10	5	3	2	16
14	Uttar Pradesh . . .	16	10	5	4	2	16
15	West Bengal (all places other than Calcutta).	16	10	5	3	2	16

## APPENDIX XI

### *Countries grouped in the same climatic zones*

#### **Group 1**

- (i) Burma
- (ii) Ceylon
- (iii) East Pakistan
- (iv) Singapore
- (v) Malaya
- (vi) Philippines
- (vii) Vietnam
- (viii) Indonesia
- (ix) Thailand
- (x) Hongkong Colony
- (xi) Mauritius
- (xii) Madagascar
- (xiii) Vientiane (Laos)

#### **Group 2**

- (i) Aden
- (ii) Ghana
- (iii) West Indies
- (iv) Muscat
- (v) West Pakistan
- (vi) Nigeria

#### **Group 3**

- (i) U.S.A.
- (ii) Japan
- (iii) Australia
- (iv) New Zealand
- (v) U.K.
- (vi) All countries in Europe except U.S.S.R., Turkey, Yugoslavia, Berne (Switzerland), Sweden, Hungary, Czechoslovakia and Poland.

#### **Group 4**

- (i) U.S.S.R.
- (ii) China
- (iii) Afghanistan (Kabul only)
- (iv) Turkey
- (v) Yugoslavia
- (vi) Canada
- (vii) Sweden
- (viii) Hungary
- (ix) Czechoslovakia
- (x) Poland

*Group 5*

- (i) Iran
- (ii) Syria
- (iii) Lebanon
- (iv) Iraq
- (v) Egypt
- (vi) Sudan
- (vii) Morocco
- (viii) Central African Federation
- (ix) Saudi Arabia
- (x) East British Africa
- (xi) Kandhar (Afghanistan)
- (xii) Argentine
- (xiii) Jalalabad
- (xiv) Brazil
- (xv) Chile
- (xvi) Mexico.

*Miscellaneous Group 6*

- (i) Ethiopia
- (ii) Switzerland (Berne only)
- (iii) Tibet (Lhasa, Gyantse)
- (iv) Nepal
- (v) Keral and Yatung.

NOTE.—Medical examination in respect of countries listed in Miscellaneous Group-6, has to be done irrespective of the fact whether the transfer takes place from a Mission abroad or from the Headquarters keeping in view the special characteristics of these places or countries.

[Ministry of E.A. letter No. F.1(9)MP/57(Co.432/58), dated the 22nd November, 1958.]

## APPENDIX XII

*\*List of India Missions abroad where locally recruited staff is exempted from producing a certificate of physical fitness on appointment*

1. Saigon.
2. Rabat.
3. Khartoum.
4. The Hague.
5. Kandhar.
6. Kabul.
7. Canberra.
8. Khorramshahr.
9. Btidapest.
10. Stockholm.
11. Norway.
12. Ottawa.
13. Bangkok.
14. Belgium.
15. Geneva.
16. Zahidan.
17. New York.
18. Jalalabad.
19. Phnom Penh.
20. Vientiane.
21. Damascus.
22. Baghdad.
23. Bonn.
24. New Zealand.
25. Ankara.
26. Surabaya.
27. Belgrade.
28. Accra.
29. Muscat.
30. Hamburg.
31. Nairobi.
32. Vienna.
33. Rio-de-Janeiro.
34. Mexico.
35. Peking.
36. Moscow.
37. Karachi.
38. Trinidad.
39. Berne.
40. Buenos Aires
41. Salisbury.
42. Aden.
43. Warsaw.
44. Cairo.
45. Beirut.
46. Kobe.

47. Shanghai. (\*at the discretion of the officer.)
48. Prague.
49. Tokyo.
50. Madrid.
51. Hanoi.
52. Paris.
53. Kuala Lumpur.
54. Lagos (Nigeria)
55. Singapore.
56. Bucharest.

\*(Ministry of External Affairs letter No. F. 10 (1)M.P./56-GA, dated the 3rd October, 1959, as amended from time to time.)