

## CENTRAL GOVT. HEALTH SCHEME

### Introduction

The Central Govt. Health Scheme in India is comprehensive health care to the CGHS Beneficiaries.

The Central Govt. Health Scheme is applicable to the following categories of people residing in CGHS covered cities:

1. All Central Govt. Servants paid from Civil Estimates (other than those employed in Railway Services and those employed under Delhi Administration except members of Delhi Police Force).
2. Pensioners drawing pension from Civil Estimates and their family members – ( Pensioner residing in non- CGHS areas also may obtain CGHS Card from nearest CGHS covered City )
3. Hon'ble Members of Parliament
4. Hon'ble Judges of Supreme Court of India
5. Ex- Members of Parliament
6. Employees & Pensioners of Autonomous Bodies covered under CGHS (Delhi)
7. Ex- Governors and Ex-Vice Presidents
8. Former Prime Ministers
9. Former Judges of Hon'ble Supreme Court of India and Hon'ble High Courts
10. Freedom Fighters
- 11.

The It provides service through following categories of systems:-

- (a) Allopathic
- (b) Homeopathic
- (c) Indian System of Medicines e.g.
  - (i) Ayurveda
  - (ii) Unani
  - (iii) Yoga
  - (iv) Sidha System

### The main components of the Scheme are:

1. The dispensary services including domiciliary care.
2. F. W. & M.C.H. Services
3. Specialists consultation facilities both at dispensary, polyclinic and hospital level including X-Ray, ECG and Laboratory Examinations.
4. Hospitalization.
5. Organization for the purchase, storage, distribution and supply of medicines and other requirements.
6. Health Education *to* beneficiaries.

The dispensary is the backbone of the Scheme. Instructions on these various matters have been issued from. time to time for the guidance of the specialists and medical Officers. With the rapid and continuous expansion of the Scheme, however, not only situation has changed and problems arisen but also. the rapidly expanding staff have

not approved practices, procedures and instructions in regard to their various duties and responsibilities. In the following paragraphs is set *out* the gist of provisions of the Scheme, various instructions and order issued from time to time *to* serve as a Compendium for the guidance of the CGHS staff.

## **2. DISPENSARY**

### **General:**

1. The Chief Medical Officers/Medical Officer In charge of the dispensaries are responsible for proper and smooth working of the dispensary and to ensure observance of such orders as may be issued. by the competent authority of CGHS from time to time.
2. The Chief Medical Officers/Medical Officers In charge will take round of the dispensary every morning and evening to ensure cleanliness, and see that the staff are in position in their respective place of duty. He should also make surprise round of the dispensary to ensure smooth functioning of the dispensary.
- 3. Attendance Register:** All staff members of the dispensary" should note down the time of their arrival and departure in the Attendance Register. The Medical Officer In charge will countersign the Attendance Register daily and which will remain in his/her personal custody.
- 4. Punctuality:** C.M.O./Medical Officer In charge will ensure strict punctuality of all categories of staff and anyone coming late should be dealt with as per relevant orders.

### **5. Working hours of the dispensary:**

*Morning (OPD)*

7.30 A.M. to 1.30 P.M.

*Limited(Emergency ) Services (at 24 hr. Functional Dispensaries only)*

1.30 P.M.- 7. 30P.M. and

7.30 P.M. – 7.30 A.M. next day

*Holidays : (at 24 hr. Functional Dispensaries only)*

7.30 A.M.-1. 30P.M.

1.30 P.M.-7 .30P.M. and

7.30 P.M. – 7.30 A.M. next day

(c) *Central Secretariat & Nirman Bhawan (F.A. Post)*

Central Secretariat: 9.00 A.M.-5. 00P.M (5days)

Nirman Bhawan 9.30 A.M. -5.30 PM. (5 days)

*Parliament House Annexe, Medical Centre*

Physician : 10. 00A.M.-6.QO P.M.

(During Inter-session)  
10.00 A.M. to till both the House rise during session.  
Radiologist, Pathologist, )  
Laboratory Physiotherapy - 9.00A.M.to 5.00P.M.

*Parliament House (F.A. Post)*

Medical Officer Incharge /Medical Officer

10.00A.M.-6.00 P.M.

(During inter-session) .. 9.00A.M. to 5.00 P.M.

During the Parliament Session, the First Aid Post, Parliament House and Medical Centre ,Parliament House Annexe will function with skeleton staff till both the houses rise on that day.

*Lunch break in all F.A. Posts 2.00 P.M.-2.30 P.M.*

*Vithal Bhai Patel House(F.A. Post) 6 days working*

On workingdays:

10.00A.M.-5.00P.M.

Saturday

10.00 A.M.-1.00 P.M.

2nd Saturday Closed Holiday

(d) *Continuous dispensaries(12Hours working-Double Shift )*

Daily 7.30A.M.-1.30P.M.

1.30 P.M.-7. 30P.M.

(g) Specialist consultation at .Hospital/Polyclinic/

Nodal Points: The working hours of the Specialists at the nodal points/ polyclinic/laboratories are fixed by Dy. Director of the concerned CGHS.

## **6. Skeleton Staff:**

The Medical Officers In charge will depute skeleton staff to clear the patients after closing hours. The patients already attended to by the Medical Officers must be attended to and served by the dispensary staff before closing the counters.

## **7. Distribution of workload:**

The Medical Officer Incharge will ensure even distribution of workload amongst various doctors working- in the dispensary. He should also adjust his/her workload of patients depending upon the various administrative work at hand. However, the choice of Medical Officer should be kept in view in distributing the numbers to the beneficiaries for respective doctors. All patients should be attended in turn only. However. serious cases may be seen out of turn at the discretion of the concerned Medical Officers.

**Separate queue is maintained for Senior Citizens.**

## **9. Particulars in OPD Prescription:**

The -CGHS token number, name, age, sex, Diagnosis diagnostic code No. and treatment should be written legibly in full. If more than one medicine is prescribed each should be numbered serially. On each subsequent visit the medicines to be repeated will be indicated by their serial numbers. Quantity of medicine to be issued will be written clearly.

#### **10. Registration Timings:**

The registration will be stopped 15 minutes before scheduled closing time of dispensary. However, no serious patient shall be returned back unattended in the dispensary.

#### **11. Reports & Returns:**

The daily return of patients will be prepared and maintained by the clerk in the dispensary. The Medical Officer In charge will ensure timely submission of all reports /return.

#### **12. Issue of Medicines:**

Normally medicines should be issued for a period of 3/4 days according to the merit of a Case. But in chronic cases medicines may be issued up to three months by CMO i/c.

#### **13. Daily information regarding non-available items:**

The Storekeeper in consultation with dispensary Pharmacist will circulate daily the list of non-available items, so that medical officers can prescribe only the available medicines to the patients. Similarly arrival of medicines amongst the non-available list should be re-circulated by the Pharmacist promptly to all Medical Officers.

#### **14. NOTICE Board**

The following notice should be prominently displayed in each dispensary:

- (a) Complaint/suggestion Book is available with Chief Medical Officer Incharge.
- (b) Bringing of CGHS Token Card is essential during every visit.
- (c) Dispensary timings.
- (d) Visiting days of various specialists.
- (e) Immunisation programme, well baby clinic and ante-natal programme.
- (f) Residential address with telephone numbers of Area Welfare Officer.
- (g) Residential address with telephone numbers of
  - (i) Zonal Addl. Director
  - (ii) Addl. Director (HQ)
  - iii) Director (CGHS),
  - iv) DGHS

**15. Uniform:** All staff must wear prescribed uniform in the dispensary while on duty.

**16. Antimalaria Treatment:** The blood slides of all fever cases should be taken in the dispensary and presumptive and curative treatment of Malaria should be given promptly. But presumptive treatment should not be given by the CGHS dispensary without taking thick and thin blood Smear slide for Malarial Parasite.

**17. Domiciliary Visits:**

(a) All Medical Officers including specialists are expected to attend to domiciliary calls from patients when necessary. Such Attendance is to be restricted to cases where the Specialists/ Medical Officer is satisfied of its necessity due to the inability of the patient to attend the hospital/dispensary on account of severity of illness, or when long hospitalization is not feasible due to the protracted nature of illness.

(b) Domiciliary visits, except in cases of emergent nature, should be made before or after the dispensary working hours.

(c) Such visits, requested during the working hours should be made by the Medical Officers receiving the call and not left to the doctor on emergency duty.

(d) In case a visit becomes necessary during the working hours the Chief Medical Officer Incharge/ Medical Officer Incharge should be informed to *ensure* that as far as possible not more than one Medical Officer is absent from the dispensary at anyone time, during the working hours. He should keep Chief Medical Officer Incharge informed of his/her departure and arrival from the visit. Relevant entries of Domiciliary visits by the Medical Officers must be made and signed by him before he leaves the dispensary for visit.

(e) Lady doctors are exempted from paying domiciliary visits during 8.00 P.M. to 6.00 A.M.

(f) The domiciliary visits should also be undertaken on phone call after ascertaining the basic information regarding nature of illness, address, token No., name of calling person with phone number etc. The Medical Officer before proceeding on visit should recheck by phone if he doubts the genuineness of the call.

( h ) All Medical Officers should carry emergency bag containing BP instruments, Sterile syringe, thermometer and emergency medicines. The medicines of emergency expended during domiciliary visit should be immediately replaced.

**18. Injections:**

(a) Injections containing penicillin and other medicines known to cause hypersensitivity reactions will be given after observing all precautions in view of the possibility of hypersensitive reactions. These will include a careful history of the patient and the family. A skin sensitivity test is obligatory. These injections will not be given in the absence of suitable anti-dotes.

(b) A register will be maintained in each dispensary recording all such hypersensitive reactions as per pro-forma.

(c) When a hypersensitive reaction occurs the same will be intimated telephonically to the Zonal HQ, Directorate and to the Medical Stores Depot (to be followed up with a written report).

Sufficient samples from the same batch along with relevant information will be sent to the M.S. Depot for chemical analysis and administrative action to prevent further incidents.

(d) The sterile Syringes and needles should be kept in covered trays. The used disposable syringes should be destroyed kept separately. There should be separate sterile syringes/needles to be kept in readiness for use in case of drug reaction.

(e) The emergency tray containing drugs to be used during Penicillin and other type of reactions should be kept in readiness.

(f) No injection must be administered by any unauthorized Person.

### **19. Specialist consultation:**

(a.) The General Medical Officers of the dispensary are on the lines of Family Physicians. However, in some cases the Specialist Consultation is required in diagnosing the case and the line of treatment to be adopted by the attending Physician. Specialists will be regularly available in Central Govt. Hospitals. They will also be visiting various medical centers/polyclinics on specified days.

(b) The Specialists will also visit dispensaries as per scheduled days for examination and advise patients referred to them by the Medical Officer of the concerned dispensaries. This programme of sessions will be arranged by the senior Specialist in consultation with the Director.

(c) Reference to the Specialist should always be accompanied by full clinical report of the case, treatment given if any, laboratory investigations done along with provisional diagnosis of the case and advise the line of treatment to be followed by attending medical officer. He can mention the date of revisit if required.

(d) The Specialist will record their name in block letters along with rubber stamp in each prescription for easy identification by the dispensary medical officer.-

(e) Cases should be referred to the Specialists by designation and not by name.

(f) The patient should be referred to the Specialist on due date as per programme issued by the referral hospital from time to time. However, urgent cases can be sent to Specialist on all days.

(g-) In case Specialist modifies or changes the diagnosis of a patient, this should be reflected in statistical data.

(h) Medical Officer/Specialist may refer a case to the Hospital for special laboratory investigations X-Ray per admission duly filling up requisition slip.

(i) The medicines for admitted patients should be provided by the Hospital authority in case of Delhi. In case of outside Delhi, the medicines, as and when required are to be provided by the respective dispensary on production of authentic prescription of the Hospital concerned.

(j) Once a patient is discharged from Hospital, the health care and supply of medicines is to be borne by the parent dispensary from which he was referred.

(k) Officers drawing a pay of Rs. 4000 and above may, if they so desire, can consult CGHS Specialist directly by prior appointment. However, it is preferable to consult medical officer of the dispensary first who is their family Physician.

(I) All consultant and Specialists other than Ophthalmic, ENT, Dental, Surgical are expected to attend to domiciliary calls, among patients entitled to direct consultation and also for emergency calls as and when desired by the attending Medical Officers of the dispensaries. Prescription for medicines by the specialists should be issued under their Own signature and not that of any Junior Medical Officer attached to them.

## **20. Procedure for Reference to Non-CGHS Hospitals- CGHS Recognized Hospitals and Diagnostic centres:**

CGHS/ Govt. Specialist / CMO i/c advises specific treatment procedure / test. Permission to undergo same at one of the recognized Hospitals / Diagnostic centre is granted by CMO i/c in case of pensioner CGHS beneficiaries / ex- Members of Parliament / Freedom Fighters / ex- Governors , etc., by CMO i/c of Concerned dispensary and by Rajya Sabha Secretariat as the case may be in case of Hon'ble Members of Parliament and by HOD in case of Serving Govt. employees and by Autonomous bodies in case of serving employees and pensioners of Autonomous bodies covered under CGHS.

If the beneficiary seeks permission from a CGHS recognized hospital in another CGHS city , other than the city where he is registered , permission shall be granted by Addl. Director / Joint Director CGHS of concerned city. However , no TA/DA shall be permitted if treatment facilities are available in the city of residence; TA as per entitlement is permitted if no treatment facilities are available in city of residence.

OPD treatment in private recognized hospitals is not permitted except in case of Satellite cities of Delhi , viz., Noida, Gurgaon, Faridabad and Ghaziabad , wherein the CMO i/c can directly refer the beneficiaries to recognized hospitals and in post operative follow up cases of Cardiac surgery, Cancer treatment, Kidney transplantation, Hip/Knee Joint Replacement , Neurosurgery and Accident cases.

OPD medicines are to be collected through concerned dispensary except in case of emergency , in which case reimbursement shall be considered by HOD of department / Joint Director/Addl. Director of CGHS in case of pensioners , etc.,

In permitted post operative cases , for conditions as stated above, the beneficiaries may purchase from chemist and claim reimbursement. However, an utilization certificate from the treating doctor is required to be submitted.

## **21. Emergency Services:**

To cater for emergencies after the normal working hours of the dispensaries, a number of dispensaries will be kept open all the twenty four hours of the day. These will be designated as functioning dispensaries.

(a) The Director, CGHS may fix from time to time the name of dispensaries which shall

function during non-working hours, on Sundays and other closed holidays for rendering medical aid, only in case of emergency.

(b) Such a dispensary may function independently or in combination with any other dispensary/ dispensaries for emergency arrangements as per instructions of the Director, CGHS from time to time.

(c) The Chief Medical Officer In charge/ Medical Officer In charge Of the functioning dispensary will prepare in advance a roster of all categories of staff who are to perform emergency duties in the functioning dispensary. A copy of the emergency roster will be sent by him to all the attached dispensaries and Zonal Head Quarter.

(d) The emergency service will be in summer from 7.30 P.M. till opening time of routine dispensary hours next morning. The Emergency Medical Officer and the Group 'D' Staff will hand over the charge to the relieving Medical Officer/Group 'D' staff respectively.

(f) Timings of Sunday/Holiday emergency duties staffing pattern.

Morning Shift : ( 7.30 A.M. to 1.30 P.M.)

One Medical Officer

One Grade IV Staff

One Safaiwala '7.30 A.M.-10.30 A.M.

Day Shift : ( 1.30 P.M. to 7.30 P.M. )

One Medical Officer

One Grade IV staff

Night Shift ( 7.30 P.M. to 7.30 A.M. next day)

One Medical Officer

Night Chowkidar/Grade IV Staff.

The medicines as listed will be kept in an. emergency almirah which will be under lock and key. A copy of list of emergency medicines will be pasted on the inside of the door of the almirah. All medicines should be accounted for in a register as per procedure followed in the dispensary. One of medical officers should be responsible for replacement of medicines for emergency use. Each Medical Officer will record in the O.P.D. register (emergency) the daily summary of expenditure incurred by himself/herself. The indent for replacement of medicines is to be sanctioned by the Medical Officer In charge. The key for Emergency almirah and Telephone key should be handed over to the relieving Medical Officer along with full account of medicines used and balance left. The Medical Officer Incharge/Chief Medical Officer Incharge will have overall responsibility for smooth functioning of emergency unit.

## **22. First aid treatment to non-CGHS patient:**

The non-CGHS patient must also be given first aid treatment in CGHS dispensary. Serious non CGHS patient should also be attended in the dispensary to save a life on humanitarian ground and should be advised to attend at the earliest opportunity a non-CGHS Hospital / Dispensary.

## **23. Dispensary store:**

Medical Officer Incharge will be overall incharge of Medical Store and shall supervise the indenting, receipts, maintenance and issue of stores. All the relevant registers and records should be maintained in accordance with instructions issued from time to time.

#### **24. Regular Indent:**

The Chief Medical Officer Incharge shall scrutinize the regular indent thoroughly before its submission. He should note down the following: ;

- (i) Daily average attendance of patients for last month,
- (ii) Indent should be section-wise.
- (iii) Each copy should be page marked.
- (iv) Detailed indenting instructions circulated must be followed.
- (v) by hand/Urgent indent

The urgent indent can be sent any day and must be limited to urgent medicines only and the medicines should be supplied on the same day or next day latest. By hand indent can be sent to MSD as per procedure.

#### *Procedure of indent:*

C.M.O./M.O. Incharge should note down following information.

- (1) Date of last regular indent.
- (2) Number of pages
- (3) Total number of items in the indent.
- (4) Each page should be initialed by the store-keeper and Chief Medical Officer Incharge/Medical Officer In-charge.
- (5) The Store-keeper will certify the correctness of column 3 to 8 before putting up the indent for signatures of Chief Medical Officer Incharge/Medical Officer Incharge.
- (6) Non-drug and stationery items shall bear separate indent number and number of items which must be specified there in all such indents.

#### Life item register:

The Store-keeper shall maintain a life item register and circulate the name of medicines which are likely to expire within three months and the Chief Medical Officer Incharge should ensure timely consumption of these medicines

The medicines before being issued from store to the various counters must be sanctioned by CMO *i/c*

#### Indent for 'imported drugs:

The specialist should issue one certificate that all available medicines have been tried without satisfactory result. The following drug may be indented for the patient showing dose and duration of treatment {i.e., total quantity to be indented).

Two Photostat copies of the prescription are to be submitted along with an application from the beneficiary 'with a request to supply the medicines. The original prescription will have to be submitted for verification along with the application, which will be returned to the beneficiary duly verified. The specialist should mention if possible, the name- of company and country and any other relevant information about the drug to be imported by the MSD to facilitate early procurement of the drug.

## **25. LOCAL PURCHASE INDENT:**

(a) The Storekeeper will prepare the local purchase indent daily as per necessity and put up to Chief Medical Officers Incharge for checking / signature along with his initial.

(b) The total No. of prescriptions being sent is to be noted on the body of the indent and the prescriptions shall be recounted on receipt of stores from authorised chemists.

(c) The Sl. No., quantity indented and date should be noted by the Chief Medical Officer Incharge on the body of prescription so that the same medicines once supplied are not re-indented by mistake or otherwise.

(d) The quantity received should be specifically mentioned by the Storekeeper in the receipt column and necessary certificate is to be endorsed about the items received (total items received) and the items not received (Sl. Nos. to be mentioned) and to be countersigned by the Chief Medical Officer/Medical Officer Incharge. The Chief Medical Officer Incharge should also physically verify the items.

(e) The medicines which are not supplied by the Chemist may be authorized to be purchased from open market in the same city/town. The beneficiary should be advised to claim the bill within the month from the date of indent. The Store-keeper will fill up the form in duplicate and endorse the same along with the cash memo to the Chief Medical officer Incharge for counter signature.

(f) The non-formulary medicines should be issued after obtaining dated signature and address of the beneficiary.

(g) The listed medicines should be taken into ledger. The chits should be issued by the Chief Medical Officer Incharge only, who will do so after duly verifying the local purchase indent file and note accordingly on the prescription.

(h) The local purchase indent should be prepared as per standing instructions.

Before sending the indent the following shall be ensured.

(1) Rubber stamp of Chief Medical Officer Incharge put.

(2) Prescriptions bear the rubber stamp of the prescribed Specialist/Hospital.

(3) Out of list items have not been included unless prescribed by Consultant Specialist/Head of Unit.

(4) Non-admissible items have not been included.

(5) Prescription is valid for the period of indent.

(6) Quantity indented as per the prescribed quantity.

(8) Prescriptions are arranged serially.

(9) Prescription are indented after registration.

(i) The medicines issued to the patient should be noted on the body of prescription  
(1) Name of medicines; (2.) Quantity; (3) Date of issue:and (4) Signature of Storekeeper.  
A rubber stamp may be suitably made for the purpose.

(j) The local purchase medicines shall be issued by the Store-keeper.

(k) The local purchase medicines if not collected by the beneficiaries within 15 days should be taken into stock ledger.

(m) The medical officer concerned will sign against each serial No. of medicines indented.

(n). The chemist must mention the batch number and name of manufacturers while supplying local purchase medicine, must be checked by storekeeper and Chief Medical Officer Incharge before accepting the medicine.

(o) Medicines available in Medical Store Depot / Dispensary :

No medicine should be indented for local purchase if it is available in Medical Store Depot/ Dispensary.

## **26. CGHS Cards:**

### 1. Definition of Family:

In accordance with the initial instructions, the term of 'Family' for the purposes of the Scheme shall consist of the Government servant's wife or husband, as the case may be children and stepchildren and parents who are mainly dependent on and residing with the Government servant concerned. Subsequently in pursuance of the recommendations of the Fourth Central Pay Commission, it has been decided that for availing the medical facilities under the scheme, parents, sisters,. widowed sisters, widowed daughters, minor brothers and children will be deemed dependent on the Government employee if they are residing- with him and their income from all sources including pension and pension equivalent of DCRG benefit is less than Rs. 1500/- per month.

### 2. Entitlement of the Scheme:

All Central Govt. Servants paid from Civil Estimates (other than those employed in Railway Services and those employed under Delhi Administration except members of Delhi Police Force) having their head quarters in cities where the Scheme is functioning and members of their families, are entitled for the CGHS medical facilities.

### 3. Transfer:

In case the. Central Govt. Employees is transferred to uncovered city leaving behind his family, the Government Employee is not entitled for the medical benefits either for himself or for his family under the Scheme but will be governed under CS(MA) Rule.

In the event of the posting of the Central Govt. Employee to North Eastern Region " Andaman and Nicobar Is-lands & Lakshadweep and his family members continue to stay in an area covered by the Scheme temporary family permit for availing CGHS benefits will be issued to the family members by depositing advance usual contribution. But in such cases the Central Govt. Employee himself will be governed under CS(MA) Rule.

#### 4. Temporary Visit in Covered City:

Central Govt. employees and dependent family members who are beneficiaries of the CGHS. and who may be visiting other cities where the scheme is operating and stay in the areas covered by the Scheme are entitled for free medical attendance / treatment under the said scheme. (Necessary authority/ temporary cards for medical treatment in any of those cities, should be issued by the respective departments in case of serving employees.) Medical facilities should be restricted to period not exceeding six months after which fresh authorities may be issued, if necessary. Similar facilities are also available to pensioners and the dependent family members if holding. CGHS Cards and permission shall be granted by CGHS of the city visiting.

#### 6 Production of CGHS Card:

The production of CGHS Card is obligatory at every visit to enable correct identification of the patient and to prevent misuse of card. The misuse of card is a cognizable offence. However, in view of humanitarian service, essential and immediate treatment should not be denied to the patient but the beneficiary should be advised to bring the CGHS Card at the time of subsequent Visits and if considered necessary, a note may be made in OPD ticket of the patient. The production of CGHS Index Card in the dispensary will enroll the card holder as a member of the said dispensary.

**The renewal of Pensioners' card** shall be done in the dispensary. The Indian Postal Order should be sent to Pensioner Cell, Nirman Bhavan/DDO Office outside Delhi, regularly on or before 6<sup>th</sup> day of the following month. Before accepting the I.P.Os the Chief Medical Officer in Charge must see the date of issue of I.P.O/ DDS' which should be within one month of issue from the Post Office. The Chief Medical Officer in charge will obtain a certificate from each pensioner for any rise of pay/pension due to incremental rise after every two years for calculation of rate of pension or the fact may be verified from his pension payment order before revalidation of card. The Chief Medical Officer in Charge may therefore re-fix the rate of contribution accordingly. In case of Pensioner the transfer of card from one dispensary to another shall be done by the Chief Medical Officer in Charge of the dispensary.

#### 8. Registration of CGHS Card in dispensary:

Card Holder must deposit the Index Card in the dispensary and obtain receipt from the receiving clerk. The receiving clerk, will initial the token card in confirmation. Until he deposits the Index Card. he is not entitled for treatment in the said dispensary. On transfer to another dispensary the Card Holder must collect the index card from the dispensary and deposit the same along with necessary forms (in duplicate) to the new dispensary which has been allotted to him. It is only after the deposition of Index Card in the dispensary that the members mentioned in the token card are entitled to obtain CGHS facilities.

#### 9. Surrender of CGHS Card:

The CGHS Identity Card held by the beneficiary other than Pensioner, General Public, Ex- MPs etc. must be surrendered to the issuing authority in the following events:-

- (a) Retirement /Resignation
- (b) Death of Government Servant.
- (c) Transfer of Govt. Servant to another office. The Govt. servant if transferred to another office where he/ she is again entitled far CGHS benefits must apply and obtain a new Identity Card.

Pensioners, EX-M.Ps Member of General Public etc. are also required to surrender their Identity Cards to the issuing authority on its expiry in case they no longer desire to avail CGHS facilities.

#### 10. Misuse of CGHS Card:

If the Medical Officer detects a case of misuse of CGHS Token Card by unauthorized person, he will bring to the notice of Chief Medical Officer Incharge and / or the matter reported to the Zonal HQ/ etc. for further necessary action.

#### 11. Loss of Identity Card:

As a lost card is likely to be misused the card holder must inform immediately to the Police and inform the following with a, copy of F.I.R.

- (i) Issuing authority.
- (ii) M.O. Incharge of the concerned dispensary.
- (iii) Headquarters of CGHS in the cities other than Delhi. A duplicate card can be issued after realising penalty of Rs. 5/- for 1st instance. 2nd... instance Rs. 7/-, 3rd and subsequent instance Rs. 10/-

#### 12. Dependence Certificate:

Every Card Holder must certify that the parents /Dependents whose names have been included in the token card, normally reside with him. Such a certificate must be furnished at the time of issue of Token Card and renewed every January. Otherwise the parents shall be treated as non entitled persons. The certificate must also state that the income from all sources does not exceed Rs. 1500/--p.m. .

#### **27. Medical Certificate and fitness:**

(1) The Medical Officer and Specialist must issue the Medical Certificate as and when recommended by them. They should not write advised on the prescription without issuing Medical Certificate.

(2) The Medical fitness certificate can be issued by any Medical Officer after scrutinizing the facts from the original Medical Certificate.

(3) Medical Certificate / fitness of dependent school children should be issued by the attending doctor.

(4), The Medical Officer is authorized to issue Medical Certificate for appointment of D category staff only but for lady staff of Category C & D can be issued by Lady Medical Officer only.

(5) For dependent children:- For the dependent children Medical Certificate can be issued for seeking admission to Educational Institution competitive examinations etc. provided if it does not involve any special investigation. The Medical Certificate should be issued on plain paper as per proforma.

"Certified that Shri/ Kumari.....S/ o. .... CGHS Token No. .... is advised rest.... days w.e.f. .... '.

MEDICAL OFFICER

"Certified that Shri/ Kumari S/o .....Shri.. .....CGHS TokenNo..... is fit to join class with effect from . . . . ."

MEDICAL OFFICER

(6) Medical fitness certificate:-

When a Govt. Servant asks fitness certificate after Sunday Govt. holidays the Medical Officer can indicate the specific date from which the Govt. Servant is declared fit to resume duty .

(7) Maternity leave:-

A female Govt. Servant (including an apprentice) may be granted maternity leave by an authority competent to grant leave for a period which may extend up to the end of 3 months from the date of commencement. It shall not be restricted to six weeks from the date of confinement.

(8) In case of miscarriage Abortion the leave can be given for the minimum period necessary up to a maximum of 42 days.

## **28. Registration of births in the CGHS dispensaries:**

(1) All births (including still-births) which take place in the families covered by the scheme should be registered in the CGHS dispensary to which the beneficiary is attached.

(2) The registration by the dispensary will be in addition to the registration required to be done by the municipal authorities under the law.

(3) The birth/still birth be reported to the dispensary within 10~days of its occurrence.

(4) The event should be reported in the prescribed form available with the dispensaries.

(5) The event may be reported by the beneficiary himself or' by his representative.

- (6). A certificate shall be issued by the dispensary on the registration of live birth"
- (7) The event should be registered even if it has occurred outside the covered areas of the CGHS provided the wife generally stays in any of the covered areas.
- (8) All births (including still-births) occurring in families of employees of semi-government organizations covered by the scheme should also be registered with the dispensaries, in accordance with these instructions.
- (9) Careful compliance with these instructions is essential as the name of the newly born child will be included in the CGRS Identity Card of the beneficiary concerned only on production of birth registration certificate from the concerned dispensary.

### **28. Submission of Medical Reimbursement claims in respect of Pensioners:**

Medical reimbursement claims of Pensioners are to be submitted to Addl. Director / Joint Director of concerned City.

However , in Delhi , Addl. Directors of four zones , viz., Central , East, North and South Zones are delegated Financial Powers to be at par with the AD/ JD of other cities w.e.f. 1/4/2005. The medical claims of pensioners are to be submitted to the CMO incharge of the concerned CGHS Dispensary who shall send them to the Addl. Director of concerned zone.

### ***DUTIES 'OF VARIOUS STAFF WORKING IN DISPENSARIES.***

#### ***CHIEF/MEDICAL OFFICER INCHARGE:***

##### ***Administration:***

Chief/Medical Officer In charge will take round daily to observe whether all staff are in their respective place of duty, cleanliness and sanitation. He should also make surprise round in between to ensure smooth functioning of the dispensary. He will ensure that all staff are in position to start work at the scheduled time. He will maintain an attendance) a register for his staff, which he will place on his table and he will ensure that all, members of the staff note down the time of arrival and departure in the attendance register. He will countersign the attendance register daily which will be in his personal custody and which he will remove from his table half an hour after opening hour of the dispensary and at the time of closing of the dispensary. He will record absence or leave, late arrival etc. appropriately in red and take –suitable action and/or report defaulter to the competent authority. He will be responsible for maintenance of discipline! and order in the dispensary including use of prescribed uniform by the dispensary staff. . He will be responsible for disbursement of pay of dispensary/according to the instructions. He will ensure as far as possible. patients load is equally distributed among Medical Officers posted to this dispensary. He will adjust his own patient's load keeping in view his additional duties. He will arrange a Group 'D' staff to take over the charge from the Chowkidar in the morning session and to hand over the charge to the Chowkidar in the evening session.

### **Permission for Investigations / Treatment in private recognized hospitals**

CMO i/c shall issue permission for Investigations / Treatment procedures as per the specific tests / treatment procedures as advised by CGHS / Govt. Specialist / CMO in a CGHS recognized Diagnostic Centre / Hospital of the choice of beneficiary in respect of pensioners / Ex-Mps, Freedom fighters , tec.,.  
. Such permission in respect of serving employees is granted by HOD.

*Accounting of Stores:*

-He. will 'scrutinize and countersign- the expenditure of drugs from the stock ledgers of medicines issued by the store-keeper to various units of the dispensary as per demand register. He will countersign all the entries in receipt column of medicines as per vouchers of indents .

*IMPREST MONEY: ... ]*

One imprest money register will be maintained by the Chief Medical Officer In charge /Medical Officer Incharge for recoupment of. paid up vouchers' duly certified to be sent to AD.

*Area Welfare officer.*

. There. is a. Co-ordination Committee of the officers In Which A.D. is a member of the High Power Committee wherein matters relating to CGHS other than. Policy matters are discussed.

Necessary action is taken whenever suggested by the Committee. The Chief Medical Officer Incharge will form Area Welfare Committee ,in consultation with Area Welfare Officer and hold meetings regularly to solve any problems of the dispensary. The Committee will try to settle any complaint against the dispensary/Staff. The minutes of the meeting should be recorded and forwarded to the Zonal Headquarter/Addl. Director (HQ)

*Outside Delhi*

Chief Medical Officer/Medical Officer Incharge shall form Co-ordination Committee to solve the problem of C.G.H.S. complaints- against the dispensary staff.

*Residential Address of staff.*

The Chief Medical Officer Incharge will maintain the record of residential addresses of all the staff members along with Telephone numbers if any.

*Casual Leave/Compensatory Off /Station leave Permission*

He will maintain the Casual Leave record and grant Casual Leave and Compensatory off to all staff working in the dispensary other than himself/herself. He can also grant station leave permission. In exceptional cases he may consult Zonal Hq./ Addl Director for advice.

*11. Punctuality.*

He will ensure punctuality and deduct day Casual Leave from Casual Leave account for late coming, for each late attendance. But late attendance up to an hour on not more than

two occasions in a month may be condoned by the Competent authority, if he is satisfied that it is due to unavoidable reasons. In case such a course 'does not ensure punctual attendance, suitable disciplinary action may be taken against the Govt Servant concerned in addition to deducting half a day's casual leave to his casual leave account for each occasion of such late attendance.

12. He will maintain a daily diary and record all the important incidents occurring in the dispensary.

*13. Family Welfare Programme & M.C.H.*

We will be overall incharge of family Welfare Programme with the help of medical social worker and other Medical Officers and Para Medical Staff to conduct and supervise the Family Welfare Programme to achieve the target successfully.

*14. Preventive /Prophylactic treatments-*

He will organize Preventive and Prophylactic treatment to the beneficiaries. The various immunization Programmes and antenatal Check-ups should be organized in the dispensary.

*Health Education.*

The Health Education Programme should be Organized in the dispensary. *Weeding out of Old Records.*

." The Chief Medical Officer '. incharge will undertake the weeding out of old records

*Uniform:*

The Chief Medical officer Incharge should. ensure that all staff wear the prescribed uniform while on duty,

*Revalidation of Pensioner Card:*

The Chief Medical Officer In charge is to revalidate the pensioner Card as and when required, It should be done either annually or bi-annually i.e., "June and December

*II Relieving Duty of Medical ()officers:*

The Chief Medical Officer Incharge will depute Medical Officers on relieving duty in turn.

*Safai work in absence of Safaiwala:*

The Chief Medical Officer incharge is authorized to appoint one Safaiwala on daily wages basis as and when required .

*Evacuation of Serious Patients:*

The Chief Medical Officer Incharge or attending Medical Officer should ensure safe evacuation of serious patient by calling the ambulance from the hospital/any other arrangements depending upon the Seriousness of illness.

*22. Minor Surgical Work:*

The facilities for minor surgical Work such as opening of abscess or stitching of wound should be available in the dispensary.

*Important Circular file (Guard file)*

The Chief Medical Officer Incharge will maintain the guard file and all important circulars should be filed serially with page mark and keep the file in his personal custody.

*Chit Books:*

The Chief Medical Officer Incharge will keep an account of chit books and issue the same to the Medical Officers as per proforma already laid down.

*Handing over of charge:*

The Chief Medical Officer Incharge while proceeding on leave, transfer will hand over the charge of the dispensary to the Senior most Medical Officer of the dispensary if the name of specified medical officer is not mentioned by the Competent authority. He will prepare a list of articles In quadruplicate to be handed over to the relieving Officer, one copy to the Zonal Headquarters , third, copy will be kept by the relieved Officer and 4th Copy will be in the dispensary file.

The following articles shall be handed over to the relieving Officer:-

1. Duplicate Keys.
2. Guard File.
3. Compendium.
4. Chit Books.
5. Imprest ledger.
6. Inspection Book.
7. Complaint Book, "
- ~ 8. Surprise Check Register.
9. Attendance Register.
10. Casual Leave Register.
11. Compensatory Off Register.
12. Confidential files.
13. He should obtain 'No Demand Certificate' from the store-keeper of the dispensary duly countersigned. by the relieving :Medical Officer Incharge. One copy- of no demand certificate should be for warded to the Zonal Headquarters.
14. Any other important records, files and articles.

*Brass Seal:*

He should ensure sealing of stores with brass seal and the brass seal should be in his personal custody.

*Preparation of Acquittance Roll:*

1. Separate Sheet should be used for each category of staff e.g. one sheet of staff Nurse, one sheet for L.D.C. one sheet for Storekeeper etc. or as per the direction of D.D.Os.
2. Name of dispensary in block letters.
3. stamp of the dispensary at the top with date in each sheet. .
4. Each sheet should have serial number and initial of Medical Officer Iricnarge.

He will be responsible for overall consumption/ control of *issue* of drugs etc. He will be at par with the Specialist regarding issue of Specialist items listed in CGHS formulary.

**Duties of Chief, Medical /Sr. Medical Officer/M.O.:**

1. The Medical Officer will provide Comprehensive Medical care including preventive and curative, Family Welfare and MCH and Health Education to the beneficiaries.
2. He will also scrutinize the- CGHS Token number before providing treatment. As per rules, production of card is necessary at the time of each Visit, whether new case or old.

3. He will restrict himself to- general list of the formulary. But in case 'he has to prescribe any specialist item he should take prior concurrence from Chief Medical Officer In charge. He will not write of his own, any medicine meant for consultants/Specialist.

*4. Issue of Chit:*

All Medical Officers must issue chits for restricted medicines in his/her own handwriting. The chits must show the name and quantity (in words and figures) clearly and must be signed and properly dated. No cutting/Overwriting will be allowed on chits.

*5. Domiciliary Visit:*

He/she should undertake domiciliary visit as per instructions issued from time to time and should not avoid the same. Even by implication beneficiaries must not be asked to provide transport.

*6. Family Welfare Programme MCH and . Health Education:.*

All Medical Officers must take active interest to promote the Family Welfare programme, MCH and Health Education.

7. He/she should help Chief Medical Officer Incharge, Medical Officer Incharge in maintaining cleanliness of the dispensary, supervision of the work at dressing room, injections room and checking of various dispensary accounts and general administration, as desired by the medical Officer Incharge/C.M.O. I/C.

*8. Specialist Consultation: .*

The Medical Officer may refer a case to a specialist according to the instructions, already laid down.

*9. Emergency Duty:*

The Medical Officer is required to perform emergency duty by turn during non-working hours and on Sundays and Gazetted holidays in functioning dispensary as per instructions issued from time to time.

10. The Medical Officer will keep the medical certificate fitness certificate books and Chit books and authority slips under his safe custody and under no circumstances this will be handled by any other staff.

11. The Medical Officer will perform such other .duties as may be assigned to him by the Medical Officer Incharge/Zonal Headquarters. or Directorate from time to time.

**DUTIES OF STOREKEEPER / PHARMACIST INCHARGE OF STORES:**

1. The Storekeeper will be responsible to the Medical Officer Incharge and the Medical Officer entrusted with the supervision of dispensary stores for the safe, storage. protection from loss, damage or deterioration in the condition, of stocks entrusted to his charge.

2. He will arrange to keep stores in a neat and orderly manner and ensure that all containers, bottles, packages, etc. are properly labeled.

3. He will prepare and submit regular indents to the Medical Store Depot in accordance with the delivery programme issued by the Depot from time to time. He will follow meticulously, all indenting procedures circulated from time to time.

4. He will take necessary steps to replenish stocks well in time to avoid any difficulty in supply on account of any item going out of stock. He shall bring to the notice of the Chief Medical Officer Incharge / Medical Officer Incharge, The items running short and prepare by hand urgent indents for submission to the. Medical Stores Depot.

5. He will bring to the notice of the Medical Officer Incharge and submit urgent demands within time when the stock require replenishment to allow replacement to be made before actual depletion occur. He will ensure that a buffer stock of a minimum of 15 days is always available in respect of listed items.
6. The Store keeper will duly initial the indent on each page and thereafter have it countersigned by the Medical Officer Incharge before submission as per instructions issued from time to time. He. will also initial all cuttings / overwriting / alternations made in the indent. Proper care should be taken to ensure that such occasions are rare.
7. He will examine, count, measure or weigh as the case may be before the Stores are received in the dispensary. At the time of receipt he will check that the quantities are correct and are not of very short expiry and that the stores are in good condition. He will immediately bring to .the notice of Medical Officer .Incharge any thing found to the contrary before the store are accepted. He will otherwise be responsible for any defect detected at a subsequent occasion.
8. He will bring to the notice of the Medical Officer Incharge stocks of such preparations which are accumulating in the dispensary store beyond the need of the dispensary and contact the M.S. Depot for their liquidation. Such action must be started six months in advance of the date of expiry, if any.
9. He will be responsible for correct accounting of all stores and for maintaining stock and issue registers and inventories in respect of both consumable stores and dead stocks. He shall make entries in the registers and file the vouchers in serial order and produce the same for checking/inspection at the time of verification of stores cum countersignature of the entries 'in the registers by Medical Officer Incharge. He will make all entries in clear & legible, handwriting, cuttings / overwriting must be avoided as far as possible.
10. He will initial all entries in the stock ledger pertaining to the receipts and issue of the stores, Receipt entries will be made in red ink and issued entries in blue ink.
11. He shall issue to Pharmacists etc. stores under his custody only on the authorization of the Medical officer incharge.
12. The Storekeeper will be responsible for obtaining written acknowledgement from the persons to whom the items are issued from the stores. These should be maintained in the register.
13. He will pay special attention to the short life items and maintain the record in the short life register and put this upto the Medical Officer Incharge at the beginning of each month pointing out such preparations which are likely to expire in three months time. He should ask for specific orders of the Medical Officer Incharge for their disposal. A list of all such items and their quantities must be put up in a register to the Medical Officer Incharge and his orders obtained in writing.
14. He will be responsible for the issue of local purchase medicines received from the authorized chemists after obtaining the signatures / residential address / date of receipt of the beneficiaries concerned or their representatives. He will assist Chief Medical Officer Incharge regarding issue of non-availability certificate of items and reimbursement of claim thereof if any.
15. The storekeeper will prepare a list of medicines procured on local purchase which are not collected by the beneficiary even after 15 days.

The medicines should be carried over in the local Purchase register at a separate place to be issued to the patient as per written instruction of Medical Officer Incharge after obtaining proper receipt from the beneficiary.

16. He will comply with all instructions regarding store-Custody and accounting procedure issued by the Directorate / M. S. Depot from time to time or prescribed order the General Financial Rule.

17. On transfer or while proceeding on leave he will hand over the charge of the store to his successor and furnish a handing over and taking over charge to the Medical Officer Incharge. He should prepare a Triplicate list of stock ledgers/ file etc. as follows and hand over the same to the relieving store keeper a copy of which should be handed over to the Medical Officer Incharge duly signed by both the relieving and relieved storekeeper.

A. Current:-

1. Stock ledgers of medicines Vol. I, n, m etc.
2. Stock ledger of Dead Stock Item.
3. Local Purchase register.
4. Demand file of various counters.
5. Receipt Vouchers of MSD. & others.
6. Register showing indents placed to MSD and other.
7. Register showing inventory of Dead Stock item.
8. Life Expiry register.
9. Daily Store Information file etc.

B.Old.

1. Details of old register and files handed over.

18. Pharmacist i/c stores will assist in dispensing work whenever so desired by the Chief - -Medical Officer Incharge of the dispensary.

19. Pharmacist i/c stores will prepare the no demand certificate to the staff transferred from the dispensary after verifying his records. The no demand certificate would be signed by Medical Officer Incharge.

20. *Opening of New ledger / register*

He will follow the instruction as already laid down for opening of new ledger / register. While opening a new stock ledger for consumable items sufficient space must be left for each item, depending upon its consumption pattern so that the same ledger can last for maximum possible period. A new stock ledger need not be started every year. as this is only a waste of stationery and does not serve any useful purpose. A new stock ledger should be started, as far as possible only on 1st of April of the year concerned. While opening a new ledger balances in the old ledger must be carried forward correctly giving the cross reference in both the old as well as the new ledgers.

21. He will carry out any other duty assigned to him by the Medical Officer Incharge, commensurating with the nature of work

DUTIES STAFF NURSE (Dispensary)

1. She will be responsible for the efficient functioning of the injection room.

2. She will ensure that syringes, needles etc. are sterilized and maintained properly in aseptic condition ready for administration of injection. She will maintain a separate tray for penicillin and injection, containing Penicillin.
3. She will keep ready at all times a spare syringe and requisite injections to combat anaphylactic shock and emergent condition.
4. She will check the condition of ampoule, its contents, the date of expiry etc. before administering an injection.
5. She will administer all subsequent injections of Penicillin (Single 01' in combination) while the test dose and the first dose of Penicillin will invariably be administered by a Medical Officer Personally.
6. She will specifically enquire from the patients about any adverse reaction to an injection any time previously.
7. The staff Nurse will not administer intravenous injections.
8. In the event of a reaction to an injection she will immediately call the Medical Officer and render all possible help that may be necessary. She will make all entries in the drug reaction register.
9. She will maintain a record including summary in a register of the injectable received and administered by her. The register shall be checked by the Medical Officer periodically at least once a week.
10. She will be in uniform when on duty.
11. She will maintain demand register as per instructions laid down.
12. She will maintain a register of all injections administered in the dispensary daily. The column shall be Date. S1. No. Name of Injection. Separate register shall be maintained for new and old cases. The registration clerk shall add the number of old cases in the daily attendance as shown in the OPD register for the purpose of statistics.
13. She will be responsible for proper functioning, of Oxygen Cylinder.
14. She will keep upto date account of expenditure and balance of injections received from Store.
15. She will draw full Linen from the store of the dispensary for use in various rooms. She will keep full account of issue of the same. She will prepare the list of the Linen items to be condemned.
16. She will be responsible for the washing and cleanliness of the Linen through the Dhobi engaged by the Chief Medical Officer Incharge. She will prepare Dhobi bill for reimbursement.
17. She will Actively assist lady Medical Officer/ Chief Medical Officer Incharge for promoting for Family Welfare Work and MCH Services in the absence of regular F.W. Staff. In the absence of regular Malaria Surveillance Worker, she will assist the Medical Officers preparing blood slides for detection of Malaria Parasites.
18. She will perform any other duties as may be assigned to her by the Directorate / Chief Medic & Officer Incharge commensurating with the nature of work.

#### **Dresser**

1. The dresser will be responsible for overall management of the Dressing Room.
2. The Dresser will be responsible for dressing of wounds.
3. He will also render first aid in emergency cases and help the Medical Officer in handing the injured. .~

4. He will prepare lotions and ointments under the guidance of the Pharmacist and label them properly and issue to the patients in accordance with the instructions of the Medical Officers.
5. He will keep the Dressing Room clean and tidy. All containers of lotions, powders and ointments shall be kept properly labeled, stoppered and arranged.
6. He will keep medicaments for Eye and Ear in a separate tray.
7. The lotions, paints, etc. for dressing will be kept in a separate tray.
8. He will prepare the drum of dressing material for sterilisation and autoclave them as per prescribed procedure, to enable dressings to be performed under- aseptic condition.
9. He will take proper care of the soiled dressings and put the same in a covered Waste receptacle. These soiled dressings will be disposed off as per laid down procedure.
10. In the case of a female patient, he will not perform the dressing except in the presence of a relative of the patient or the female attendant of the dispensary.
11. He will maintain proper accounts of the medicaments drawn from the stores and issued to the beneficiaries.
12. He will keep bulk container, bottles/jars etc. properly covered, corked and stoppered.
13. He will keep the weighing scales in a clean and working condition.
14. He will maintain a register of dressing performed daily. The L.D.C. will obtain the figures of old cases and add the same to his daily attendance in the OPD register for the purpose of statistics. The columns of register shall be:-  
*Date Sl. No. T. No. Name of patient*
15. The dresser while on duty will wear a white apron.
16. The dettol lotion should be changed daily.
17. He will perform any other duty assigned by Medical Officer Incharge commensurate with the nature of work.

#### ***FEMALE ATTENDANT***

1. The Female Attendant will be responsible for regulating the flow of patients to the consulting room of the Medical Officer.
2. She will assist the Medical Officer in the Examination of the patients.
3. She will be present in the Dressing Room whenever required to do so.
4. She will assist the Medical Officer in sterilization of various equipment used by the Medical Officer for injection and for examination.
5. The Female Attendant may accompany the Lady Medical Officer for a domiciliary visit to examine a case of abortion etc. as and when required.
6. She will maintain the cleanliness of the dispensary including the verandah. She should clean all the furniture of the dispensary. The doors and Windows should be cleaned daily and the glass panes should be cleaned regularly. She will maintain proper display of various posters etc. in the dispensary.
7. She will perform any other duty assigned by Medical Officer Incharge Commensurate with the nature of work.

#### ***Duties of the Chowkidars***

1. The Chowkidar will take the charge of the dispensary premises on completion of the evening session of the dispensary. For this purpose he must report at least 15 minutes before closing time.

2. He will ensure that all the rooms are properly bolted and locked So as to exclude the possibility of entry by any un-authorized person.
3. He will inspect the lock and seal of the medical store on taking over duty and show the same to the duty Medical. Officer/Medical Officer Incharge / Storekeeper at the time of his relief from duty.
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4. He will check that almirah containing stores placed out side the rooms are properly locked and sealed. Any deficiency noticed will be brought to the. notice of the Chie: Medical Officer Incharge.
5. At the time of closing the rooms, he will ensure that all lights, heaters, fans etc. are put off and the Water taps are closed.
6. The Chowkidar will not sleep while on duty.
7. He will not leave the dispensary till the arrival of the morning Shift staff and that after showing *the* locks and. seals as intact.
8. The Chowkidar will give proper guidance and help any patient who calls at. the dispensary at night. .
9. The Chowkidar is responsible for the safety of the dispensary and. its properties and his responsibilities include the safety of the compound in which the dispensary is situated.
10. The inventory showing dispensary property in the Verandah/Compound should be taken over by the Chowkidar and any discrepancy should be brought to the notice Of Chief Medical Officer Incharge.
11. He will perform any other duty assigned to him by Medical Officer In charge Commensurating with the nature of work.

#### *DUTIES~OF DISPENSARY CLERK*

1. .He will be responsible for the maintenance of revalidation of Pension Cards and timely submission of IPOs / DDs to the Office.
2. He will be responsible for indenting and keeping records of all stationary and consumable articles and receipt of dead stock items.
3. The dispensary clerk will be at the seat well before the opening of the dispensary and will not leave the counter after closing time till all the patients seen by the Medical. Officers have .been registered. His duties inter-alia will include:-
  1. Issue of priority token to patients as per instructions issued on the subject.
  2. Registration of old and new cases reporting to the dispensary. He shall also obtain figures of old cases from the dressing room and from the Staff Nurse for compilation of daily OPD attendance.
  3. Work relating to birth registration, addition and deletion from family, transfer of dispensary etc.
  4. Receipt and dispatch of dispensary dak.
5. Work relating to the filing, renewal and alterations in the Index Cards, and maintenance of Index Cards.
6. Work relating to compilation and preparation of various statistical reports and administrative returns.

7. Maintenance of up-to-date list of Index Cards and number of beneficiaries attached to the dispensary.
8. Maintenance of Casual Leave account of the dispensary staff.
9. Assist the Medical Officers in the administrative work of the dispensary.
10. Filing of standing orders and instructions and their circulation to all Medical Officers on duty, night duty and regular duty.
11. Circulation and posting of important Communications among all members of dispensary staff.
12. He will be responsible for the maintenance of revalidation of Pension Cards and timely submission of I.P.Os./ D.Ds. to the office.
13. He will be responsible for indenting and keeping records of all stationery and other consumable articles except dead stock.
14. He will perform any other duty assigned to him by Medical Officer Incharge Commensurating with the nature of work.

#### **Duties of Pharmacists**

1. The Pharmacist will be personally responsible for the correct dispensing as Per prescriptions issued by the Medical Officer and for the safe custody of the stores received by him. He will issue medicines, mixtures, etc. In accordance with the instructions issued by the Directorate/, Medical Stores/Depot/Medical Officer Incharge from time to time.
2. The Pharmacist will at all times be courteous and helpful in dealing with the patients and under no circumstances enter into arguments, whatsoever, with a beneficiary, but report the matter to the Chief Medical Officer Incharge.
3. He will be in position at the dispensary well before opening time of dispensaries of medicines to beneficiaries.
4. He will be personally responsible to see that the dispensing' room is kept absolutely clean all the time, bottles are Properly corked and well dusted. He will maintain weighing scales and balance in good working condition.
5. He will dispense stock mixtures and medicines properly measured and weighed. He will issue an original packing to a beneficiary only after breaking the seal.
6. The Pharmacist will write the name of the medicines with details of the doses on the mixture bottle, container, envelope and ,also explain the \_doses verbally where required.. If medicines are issued in plastic (PVC) envelope small slips shall also be put inside giving the name of medicines and its dosage.
7. The Pharmacist(s) will remain on duty to clear the patient even at the end of the dispensary hours.
8. The Pharmacist will maintain proper account of the items issued to him, dispensed by him and the balance in stock with him.
9. "The Pharmacist will immediately comply with the instructions and arrange for the stocks with him to be checked at any time by the Medical Officer Incharge or other Medical Officers and any other officer deputed by the Zonal Headquarters.
10. In the temporary absence of store-keeper, the Pharmacist will perform the duties of the store-keeper whenever required by the Chief Medical Officer Incharge.
11. The Pharmacist will prepare daily summary of expenditure of medicines in a register and obtain countersign attested of Chief Medical Officer Incharge.
- 12: He will draw all non-restricted medicines in demand register as per instruction laid down.

13. He will paste the inventory list on the pigeon hole table and ensure its corrections and see that the list is kept upto date.

14. He will perform any other duty assigned by Medical Officer Incharge commensurate with the nature of work.

#### *DUTIES OF SAFAIWALA:*

1. He will report for duty half an hour before the opening time of the dispensary to sweep and mop the dispensary floors etc. so that work can start at the scheduled hour.

2. He will daily sweep and mop the floors of the dispensary building and surroundings, clean all wash basins, latrines and urinals, spittoons etc. He will empty waste paper baskets, dust.bins etc. at the provided places. These duties will be performed before the opening and at the time of closing of the dispensary and at such other times as is necessary.

3. He will clean the walls/cisterns with a brush/broom at least once a week.

4. He will perform telephone duties on both working and closed days besides loading and unloading of stores etc.

5. He will ask for and obtain in time sweeping material like brooms, mops etc. for the performance of his duties.

6. When posted at the laboratory he will perform the cleaning duties pertaining to the laboratory and its surroundings as required.

7. He will wash and clean laboratory slides, bottles etc. used for investigation purposes and correctly dispose off the specimens after the completion of their examination and are no longer required, under the supervision of laboratory technician / laboratory attendant.

8. He will perform any other duty assigned by Medical Officer Incharge commensurating with the nature of work.

#### *DUTIES OF F.P. STAFF*

##### *Duties of Social Workers / LHV / PHMIMSW / ANM*

1. Plan and organize extension services that will meet area needs and utilize available resources.

2. Assist Medical Officers in maintaining cooperative productive working relations with formal leaders and with official and non official agencies

3. To identify and list formal and informal leaders in the area-help the convene -meetings.

4. To assist in arranging for training programme for leaders and also participate in it .

5. To survey the area and prepare a list of target couples for each locality in their area.

6. To visit each house in the jurisdiction of the dispensary for motivational purpose and to maintain a record of such visits.

7. To assist the M.O. in running antenatal, postnatal, well baby clinic and immunization programme.

8. Indent & maintain proper record of. conventional contraceptives or other issuable article for issue to beneficiaries Timely action shall be taken to obtain supplies regularly.

9. To assist the Medical Officer in IUCD insertions.

10. To motivate and accompany patient desirous of MTP or sterilization to hospital if necessary.

11. Assist the M.O. in any other way to achieve the objectives of Family Welfare Programme.

12. To organize audio Visual Programme as films show exhibitions etc. in the -locality, of public education and information.

13. To Visit local leaders at required intervals to keep them informed about the activities and assist them in developing programme. To arrange periodic meetings with local leaders.
14. To prepare cases for vasectomy or IUCD or sterilization.
15. To assist Medical Officer in arranging IUCD and Vasectomy Camps. .
16. Prepare map of the area for Purpose of evaluation of the programme. .
17. To .perform any other duty assigned by the Medical Officer IIC commensurating with the nature of work.

### *FAMILY WELFARE ACTIVITIES*

The beginning of Family Welfare activities in Central Government Health Scheme was made in 1955 when Family Welfare Centres in six dispensaries were established under a full time- Lady Medical Officer. In the year 1976 each allopathic dispensary of Central Government Health Scheme Delhi was given one Family Welfare worker for Family Welfare and M.C.H. services. I.U.D. programme was introduced under C.G.H.S. in 1965 in three centers and it was subsequently extended to all allopathic dispensaries of C.G.H.S. Delhi in December, 1976.

In other C.G.H.S. Centres the Family Welfare Programme depends upon the State Govt. Hospitals and other recognized hospitals, where Central Govt. Health Scheme beneficiaries avail facilities.

#### *FAMILY WELFARE ACTIVITIES IN C.G.H.S., DELHI*

In C.G.H.S. Delhi at present 87 allopathic dispensaries, two Maternity Centres and one Gynae.& Maternity hospital are functioning to provide Ante-Natal, Post-Natal. Family Welfare and M.C.H. services to the CGHS beneficiaries. In addition to "these services Lodi Road. II and Chitra Gupta Road dispensaries have a separate set up of M;S.W. to distribute conventional contraceptives. Distribution centres have also been set up in some of the larger offices and Industrial Establishments.:

Besides giving advice and guidance to the married couples, the centres also supply family planning materials. Family Welfare Cell, C.G.H.S. Delhi arranged to impart training in I.U.C.D. insertion to a number of lady Medical Officers as well as Family Planning Para Medical Staff with a view to enable them to conduct the programme more effectively with enhanced skill.

### *FAMILY WELFARE ACTIVITIES*

#### *.A. FAMILY ELANNING ..METHODS*

1. Sterilization
2. I:U.D.
3. Nirodh ,... ,
4. Oral Pills

..

#### *B. MATERNAL & CHILD HEALTH*

1. Ante-natal/Perinatal/Post-natal Check ups.

#### *C. IMMUNISATION ,*

1. D.P.T.
2. polio
3. T.T...
4. D.T
5. Measles & MMR
6. B.C.G. (Given by public Hospital / Local Bodies)

*D. INFORMATION, EDUCATION AND COMMUNICATION ACTIVITIES*

1. Documentaries/Film Shows.
2. Orientation Training Camp.
3. Seminars.
4. Composite Programmes.
5. Group meetings.
6. Mass meetings.
7. Well baby Shows.
8. Exhibitions.

*FAMILY WELFARE SERVICES UNDER CGHS , DELHI:*

The Central Government Health Scheme provides free of cost. a package of Family Welfare services to the CGHS beneficiaries and to those who are not. Certain benefits, however are available to Government employees only. It provides consultation and guidance at the dispensary level to all eligible couples and specialized services in the CGHS Hospitals. It supplies conventional contraceptives (Such as Nirodh)to the beneficiaries - free of cost.

*COPPER-T (IUCD):*

The- facility for insertion of Copper- T is. available at CGHS dispensaries. The Insertion is performed by trained lady Medical Officers.

*ANTE-NATALAND POST-NATAL CHECK-UP*

Each dispensary provides facilities for regular ante-natal and post-natal check-ups of female beneficiaries.

*WELL BABY CLINIC:*

The health of small babies and children is well cared for at the dispensaries and. necessary expertise, consultation, immunization and treatment are "provided to the beneficiaries.

*IMMUNISATION PROGRAMME- :*

The entire range of essential immunization programme is carried out in dispensaries to protect children against Polio, diphtheria, Whooping cough,-tetanus

*MEDICAL TERMINATION OF PREGNANCY:*

The facilities for medical termination of pregnancy can be availed of in the CGHS: approved hospitals and CGHS Maternity Centres (e.g. Srinivaspuri and Kalkaji in New Delhi) along with Maternity Hospital, Rama Krishna Puram.

*ADMISSION.. OF MATERNITY CASES:*

The beneficiaries are advised to get the names registered in the CGHS approved hospitals well in time so that the patient can get all medical facilities in time.

If the beneficiaries intend go for confinement in a recognized private hospital they can obtain permission from concerned department , once pregnancy is confirmed by Medical Officer of CGHS Dispensary / Govt. Specialist. However, ante natal check up is to be obtained through dispensary / Govt. Hospitals.

*VASECTOMY AND TUBECTOMY;*

These terminal methods of sterilization can be availed of at the CGHS approved hospitals/Centers, as approved institution by Directorate of Family Welfare, Delhi Administration .