

CHHATTISGARH RAJYA UPCHARYA GRIHA TATHA ROGOPCHAR SAMBANDHI
STHAPNA EVAM ANUGYAPAN NIYAM, 2013

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Sthapanaye Anugyapan Adhiniyam , 2010 (No. 23 of 2010), Lhe State Government, hereby, makes the tollowing rules, the same have been previously published as required by sub-section (I) or Section 1 8 orthe said Adhiniyam, namely : 1

2. Short title, extent and commencement.- (1) These rules may be called the Chhattisgarh State Upcharyagriha Tatha Rogopchar Sambandhi Sthapanaye Anugyapan Niyam, 2013. (2) They shall extend to the whole State of Chhattisgarh. (3) They shall come into force from the date of its publication in the Official Gazette. Definitions.- (I) In these rules, unless the context otherwise require, (a) (b) (c) (d) (e) (f) "Act" means the State of Chhattisgarh Upcharyagriha Ihatha Rogopchar Sambandhi Sthapanaye Anugyapan Adhiniyam, 2010; "Appellate Authority" means the authority defined in rule 9 of these rules; "AYUSH" means Ayurveda, Yoga, Unani, Siddha and Homeopathy systems of medicine; "Schedule" means a Schedule appended to these rules; "State Government" means the Government of Chhattisgarh; "Unethical Act" means any unethical act defined in Chapter 6 or any misconduct defined in Chapter 7 of the Indian Medical Council (Professional conduct, Etiquette, and Ethics) Regulations 2002. (2) Words and expressions used and not defined in these rules, but defined in the Act, shall have the same meaning respectively assigned to them in lhe Act. Supervisow Authority.- (1) The DistricL Collector of lhe concerned district shall be 3. the Supervisory Authority under these rules and shall be assisted by a District Committee in discharge of the functions assigned to it under the Act. (2) The Supervisory Authority shall consider the rccommendations made by the District Committee in an matters and shall make decisions relating to registration and (or grant of licenses to a Clinical Establishment. 4. 5. 6. 8. 20 2013 unctions of Supervisory Authority.- The Supervisory Authority shall perform all functions necessary to regulate the functioning of Clinical Establishments in the State of Chhattisgarh, which are as follows:- (a) (b) (c) (d) (e) (D To grant/renew, suspend or cancel registration/license of a Clinical Establishment as per the provisions under Section 3, 6, 8 and 9 of the Act; To enforce imposition of penalties as provided for under Section 4 and 12 of the Act; To obtain fees for registration / issue of license as required under Section 5 of the Act; To enforce standards as required under Section 7 and 18(2) of the Act; To inspect and investigatc as required under Section I I of the Act; To investigate complaints related to shallful negligence with the provisions of the Act, as required under Section 13 and 14 of the Act: Provided that, the above functions of the Supervisory Authority are not exhaustive in nature. Office of the Supervisory Authority.- The Supervisory Authority shall maintain an office be designated as "Office of (. ...district name) Clinical Establishment Registration and Licensing Authority". The office shall work as the Secretariat of the District Committee. The office shall be served by appropriate staff who shall report to the Chairperson of the District Comnlittee. Income of the office of Supervisory Authority.- The fees / penalties payable by the Clinical Establishments s atl become the income of the office of the Supervisory Authority of the concerned district and shall be used for the purposes of carrying the activities assigned to it. Initial corpus of the Supervisory Authority.- The State Government may provide grant- in-aid to the Supervisory Authority to supplement its resources, provided that, the quantum ot' stich grant-in-aid shall be determined on the basis of an assessment of their income and expenditure. District Committee.- (i) The constitution of the District Committee shall be as follows:- Chief Medical and Health Officer (CMHO) District Collector's nominee [Not below the rank of Deputy Collector] Page 2 of 57 Chairperson Member 738 (SS) 3. 4. S. 6. 7. (2) (3) (4) 20 2013 Commissioner/CMO of the IJrban Local Body of the Headquarter Town the District CEO, Zilla Panchayat Representative of Chhattisgarh Environment Conservation Board District Ayu'rveda Officer Civil surgeon, District Hospital Member Member Member Menlhcr Member-Secretary At least 50 % of the members must be present in order to torm quorum in any meeting of the District Committee. The representation from the Urban Local Body/Municipal Corporation shall be compulsory. The District Committee may form one or more teams for the purpose of inspection of Clinical Establishments. Such team(s) shall comprise of minimum 4 members, from various disciplines including a representative from AYUSH and the representative of Urban Local Body shall compulsorily be present. The reports of Inspection 'l'eam(S) Shail be placed before the Digrict Committee for making recommendations to the Supervisory Authority in respect to Clinical Establishments, inspected by the team(s)

9. Appellate Authority.-Jb Following authorities are delegated the powers 10 perform the functions of the Appellate Authority, to consider appeals against the orders issued by the Supervisory Authority, as provided under Section 10 of the Act:- a) Director of Health Services- In respect of all Allopathic Clinical Establishments, other than hospitals attached to Medical Colleges; b) Director of Medical Education- In respect of Medical College Hospitals; c) Director, AYUSH- In respect of Clinical Establishments belonging to Ayurveda, Yoga, Unani, Siddha and Homeopathy systems. (2) The Appellate Authority shall issue a written receipt for every appeal letter / application received by it and shall dispose of the appeal within 90 calendar days from the date of issue of the receipt. 3 of 57 10. (J) The Appellate Authority may confirm, modify or set aside the Authority's order or pass any such an order as it may deem justified.

Prescribed Standards.- (I) Every Clinical Establishment liable to obtain a license under the Act must fulfill the standards prescribed in Schedule I appended to these rules in this regard which may be amended from time to time. (2) No Clinical Establishment shall be allowed to operate without a valid license after the expiry of 9 months from the date of notification of these rules. The time period includes the initial 3 months for application, followed by 6 months for inspection and rectification of gaps, found during the inspection by the District Committee, any delay in the inspection by the District Committee beyond 9 months from the date of notification of these rules, shall entitle the Clinical Establishment to continue its operations until the inspection is done by the committee. (3) The establishments who fail to comply with the prescribed standards after the above mentioned additional period shall not be issued license under Section 6 of the Act. (4) Notwithstanding, anything contained in sub-rule (2) of this rule, the Supervisory Authority may grant an existing Clinical Establishment further time for rectifying the gaps in respect of shortage of nursing staff only, provided that: (a) Such relaxation shall be given against a written request from the owner/proprietor of the Clinical Establishment; (b) The application for relaxation must be made along with the application for registration; (c) The maximum permissible time for rectification of gaps shall not be more than 3 years from the date of grant of registration; (d) During this period the unskilled and untrained staff working in the establishment shall have to undergo a course of nursing/midwifery/paramedical of 6 months duration and obtain a certificate under Chhattisgarh State Skill Development Mission; (e) After the relaxation period of 3 years all the standards as described herein the rules shall be applicable for the establishment and only qualified staff shall be allowed to work in the Clinical Establishment. Page 4 of 57 20 2013 738 (57) 11. Procedure for issue of license.- (I) Procedure for Registration and licensing of existing establishments shall be as follows:- a) All Clinical Establishments already in existence on the date of notification of these rules shall apply for registration to the office of the concerned Supervisory Authority within 90 days from the date of notification of these rules, as per the format given in Schedule 2; b) As per Section 5 of the Act, every application must be accompanied by fees as prescribed in Schedule 3 and in the form of a bank draft or postal order in the name of the Supervisory Authority. The fees prescribed in Schedule 3 may be revised from time to time; c) The Supervisory Authority shall issue a Registration Certificate upon receipt of such application with the prescribed fee. The Registration Certificate shall be issued in the format given in Schedule 4. The Registration Certificate shall be valid for a period of 6 months from the date of issuance; d) The Supervisory Authority shall order the District Committee to inspect the Clinical Establishment of the applicant within the validity period of the Registration Certificate to confirm (or otherwise) eligibility for issue of license; e) Where the Establishment is certified to be operating as per the prescribed standards, the Supervisory Authority shall issue a license under Section 3 and 6 of the Act, which shall be valid for a period of 5 years, as prescribed under Section 8 of the Act. The license shall be issued in the format given in Schedule 5; f) Where it is found on inspection, that the establishment does not fulfill the prescribed standards, Supervisory Authority may refuse to issue a license; g) Where the Establishment fails to obtain a license under these rules, the establishment shall have to apply afresh for license. The fee for application shall be same as prescribed for a new Clinical Establishment. Establishments applying for the second time under these rules shall not be issued Registration Certificate and the establishments shall not be deemed to be registered. (2) Procedure for Licensing of new establishments:- a) Any new Clinical Establishment shall only be allowed to operate after obtaining a valid license. after the Rules have been notified. Page 5 of 57 7.38 (58) b) c) d) e) f) 20 31TR--a 2073 An applicant intending to set up a Clinical Establishment, after the notification of these Rules, shall apply to the concerned Supervisory Authority as per the format prescribed in Schedule 2 along with the fees prescribed in Schedule 3. The Application

form must indicate the date of commencement of Clinical Establishment which shall not be less than 30 days from the date of application. The Supervisory Authority shall indicate a tentative date for inspection in its acknowledgment letter / receipt. Where it is found on inspection that the Establishment does not fulfill the prescribed standards, Supervisory Authority may refuse to issue a license. Where the establishment fails to obtain a license under these rules, the establishment shall have to apply afresh for license. The fee for application shall be same as prescribed for a new Clinical Establishment. Establishments applying for the second time under these Rules shall not be issued registration certificate and the establishments shall not be deemed to be registered. (3) General conditions applicable to all Clinical Establishments are as follows:- a) b) c) d) e) The license shall be kept affixed in a conspicuous place in the Clinical Establishment in such a manner so as to be visible to everyone visiting the establishment; In case the license is lost, destroyed, mutilated or damaged, the Supervisory Authority may issue a duplicate license against the application of the Clinical Establishment and after the payment of fees as prescribed in Schedule 3. A certificate of registration / license issued under this rule shall be marked 'Duplicate' in hand / seal; The license shall be non-transferable. In case of change of ownership or management, the Clinical Establishment shall inform the Supervisory Authority of any such change and shall have to apply again for registration or issuance of a fresh license, as the case may be; In the event of change of ownership / change in the category of license / change in location or closure of the establishment, the license shall be surrendered to the Supervisory Authority; AEI inspection reports of the Supervisory Authority shall be placed in the public domain and shall be available on demand to the General Public; Page 6 of 57 20 2013 738 (59) f) g) License shall be issued/granted in the name of Establishment and the Proprietor and not in the name of the Owner; In case of Multi-Specialty /Super-Specialty hospitals having Diagnostic Facilities or Physiotherapy Units separate application should be filed for licensing of such Diagnostic and Physiotherapy Units. Small Clinical Establishments where routine/small pathological procedures are carried out shall not require separate license under these rules.

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15. Procedure for Renewal of License.- (1) Every Establishment must apply for renewal of its license at least 3 months before the date of expiry of its license. (2) The procedure for renewal shall be the same as for licensing of new Establishments. **Register of Clinical Establishments.-** (1) The Supervisory Authority shall maintain a register indicating category wise list of Clinical Establishments licensed to operate in its jurisdiction. The information shall be in the public domain and shall be easily available on demand to General Public. (2) The Register shall be prepared and updated in the format prescribed in Schedule 6 (Table I) which may be amended from time to time. **Records to be maintained by Clinical Establishments.-** Every Clinical Establishment shall maintain such records of patient treated and / or admitted by it for treatment as prescribed in Schedule 7 and may be amended from time to time. **Reporting of contagious or communicable / notifiable diseases.-** (1) Every Clinical Establishment shall submit the report data and statistics on contagious or communicable / notifiable diseases to the Chief Medical and Health Officer of the concerned district:- a) Immediate written report through e-mail or Fax (within 24 hours or on next working day in case of holidays) as per format in Schedule 8 in case a person with any of the following notifiable diseases is received admitted or treated by a Clinical Establishment like: Dengue, Swine Flu, Bird flu, -tuberculosis, Small Pox, Cholera, Plague, Scarlet fever, Yellow fever, Diphtheria, Typhus, Relapsing Fever, Cerebrospinal Fever, Poliomyelitis, Viral Encephalitis, AIDS, Meningococcal Meningitis or any other disease notified by the Government of India, from time to time; b) Monthly report as per format in Schedule 9. 738 16

17. Participation in National Every Clinical Establishment shall participate in a Health Public Health Programmes subject to such guidelines which the Directorate or Local Services issue in this regard, from time to time. **Participation under various schemes of National/ State Government** shall be voluntary. Statistical reports of National or State Programmes / Schemes like- Caesarean Section Operation, Immunization, Sterilization operation under Family welfare, ('accidents, Sickness ('ill etc- shall be produced before the Chief Medical and Health Officer of the concerned District when demanded. **Obligation to secure Patient's Convenience.-** (1) Every Clinical Establishment ensure that the patient and / or a person authorized by him/ her receives the following:- a) b) c) d) e) The relevant information about the nature, cause, likely outcome of the present illness/ treatment] operation; The relevant information about expected costs and complications; An access to his / her clinical records, at all

times during admission and treatment and after discharge; Photocopy of medical records after discharge or death (after paying fees for photocopy, if necessary); A discharge summary at the time of discharge, which should contain date of admission/discharge, diagnosis, treatment given, operations, investigations, and {0110" up; (2) Every Clinical Establishment shall ensure following rights of the patient and his/her attendant:- a) b) c) Right to dignity and privacy during examination, procedures and treatment: Right to get informed consent before anesthesia, blood and blood product transfusions and invasive/ high risk procedures/ treatment, risks, benefits, alternatives if any and as to who shall perform the requisite procedure. Informed consent includes information in a language and in a manner that patient can understand; can take risks and benefits; has alternatives available and requisite procedures to be performed accordingly; Right of a female patient to have proper privacy during examination. In case of examination by a male doctor, a female attendant must be present; Page 8 of 57 d) e) 1) g) 20 2013 Rights to confidentiality of reports. Such reports and information should not be disclosed to anyone other than the patient or person authorized by the patient; Right of a person suffering from HIV to receive care without any discrimination. Not having a Voluntary Testing and Counseling Centre cannot be a ground to refuse care. For management of patients who are HIV positive, the nursing home should follow guidelines circulated by NACO (National AIDS Control Organization) from time to time; Right to dignity in case of death or withholding of the body by the hospital; Right to referral/transfer to any other facility that the patient or his/her attendant may want/wish; Right to be asked for a prior consent before being examined by students/interns for training. 18. (3) The indoor patients shall be considered to be under the custody of treating physician who shall be solely responsible for the safety of such patients. Procedure of Receipt and Registration of Complaints (Grievance Redressal) at the level of Supervisory Authority.- (t) All communications / complaints in writing (by whatsoever mode they are received) addressed to the Supervisory Authority, either by name or designation, shall be received by the office of the Supervisory Authority. (2) All complaints shall be duly recorded and serially numbered in a register to be maintained by the office of the Supervisory Authority indicating sender's name and address of the complainant as prescribed in Table 2 of Schedule 6. (3) Complaints received by hand shall be immediately registered and an acknowledgement receipt shall be issued across the counter. Complaints received through other modes shall be registered within working day from the date of the receipt of the complaint. (4) For complaints received through Inail / email / fax, an acknowledgement shall be sent to the complainant within 3 working days of the receipt of the complaint. (5) Complaints and other communications requiring urgent attention shall be placed expeditiously before Supervisory Authority. (6) The complaints received in respect to the Chhattisgarh State Upcharyagriha Tatha Rogopchar Sainbandhi Sthapanaye Anugyapan Niyam, 2013, shall be examined through a Committee formed by the Supervisory Authority of the concerned District. The Chairperson of such committee shall be of a rank higher or equivalent to a Deputy Collector and shall include a specialist doctor the concerned discipline. Page 9 of 57 738 (62) 20 19. Miscellaneous.- (I) Employees of the Supervisory Authority to be public servants- The staff of the office of the Supervisory Authority shall be deemed to be public servants within the meaning of Section 21 of Indian Penal Code, 1860. (2) The Supervisory Authority shall have the power to cancel the license of any Clinical Establishment found to be in any unethical practices. (3) Amendments to the rules and for its schedules- The Government may amend these Rules and /or the Schedules, thereof, from time to time. By order and in the name of the Governor of Chhattisgarh. M. M. M]NJ. Deputy Secretary. 20 3-71?1 2013 SCHEDULE -1 (See Rule 10) STANDARDS FOR CLINICAL ESTABLISHMENT 738 (63) A. STANDARD FOR CLINICS 1.1 I.I.I 1.1.2 1.2 1.2.] 1.2.2 I .2.3 I .2.4 1.2.5 1 2.6 2.1 Minimum Infrastructure Requirement: Location and Surroundings- [The clinic shall be located in an open place, having clean surroundings with adequate parking space. The clinic shall not be adjacent to an open sewer, drain or public lavatory or to a factory/establishment emitting smoke or obnoxious odour. Building- The building used for the clinic shall comply with the relevant municipal bye-laws enforced from time to time. The access to the clinic building shall be friendly for the persons with disability. The rooms of the clinic shall be well ventilated, lighted and shall be kept in clean and hygienic conditions. The flooring shall be washable with disinfectants such as not to permit retention or accumulation of dust. Arrangement for taking anti-infective/disinfection measures in all clinical procedures shall be available. Each clinic shall have clean and hygienic toilet. Space Requirements: Individual Allopathic clinics- It shall have the following minimum standards:- Consultation/Treatment room and waiting area 200 sq.ft Individual

AYUSII Clinic- It shall have FC', loxving stapdardr, - 738 (84) 20 20 13 Consultation/Treatment room and waiting area Emergency First Aid: 200 sq.ft 3.1 3.1.1 3.1.2 3.1.4 3.1.5 3.3 4 4.1 4.1.1 4.1.3 Every doctor has a professional obligation to extend services to protect life. All the clinics must provide immediate medical aid in all cases of medical emergency. All clinics providing medical care and are registered under these rules must have the following functional life saving equipments:- Ambu Bag Oxygen cylinder with flow meter, catheter and mask IV infusion set and [V fluids like Normal saline, dextrose and ringer lactate There should be staff trained in cardio pulmonary resuscitation Emergency Medicines In case a patient is brought in a critical condition 10 a clinic and it is decided 10 refer the patient to a hospital, the patient shall be treated and stabilized before being referred / shifted to the hospital, provided also that the patient shall be transferred to a higher centre or Nursing Home/Hospital, accompanied by a medical attendant along with all medical records (including X-rays, investigation reports, clinical notes). It is also expected that the doctor who had treated the patient initially shall keep in touch with the institution to which the patient has been transferred to, so as to remain aware of the patient's condition. Entrance zone: Signage- Prominent display boards in local language and Pictorial depiction Boards/Charts providing information regarding the services available and the timings of the institute. Boards or charts Proprietor's Name. Name of The doctor, his qualifications, Stream of Discipline practised. Address. Telephone number. Enrolment Id (if Outpatient Department). 12 of 57 20 2013 738 42.1 4.2.2 4.2.3 4.2.4 4.2.5 5. 6. 6.1 6.2 6.3 Clinics for various Medical disciplines If there are more than one clinic in an Establishment then there shall be separate cabins for various disciplines available in the clinic with separate provision for examination which ensures privacy to the patient. The cabins shall be provided with Doctor's Chair Table, Patients Chair, Attendants' Seat, Wash Basin, Ray Film View Box and other set of tools as may be required for different disciplines. Separate toilets for male and female in the premises in case of Polyclinics and common toilet in case of a single clinic. [If there is a pharmacy in the premises it should be located in an area conveniently accessible to the patients. Emergency Room: The emergency room should have an easy access to the incoming patients. Treatment Room: Minor OT • Dressing Room/Injection Room Human Resource: Clinical services shall only be provided by a qualified Medical practitioner as described in the Act. Support Services: Electricity- Provision for continuous supply of electricity and power back up should be there. Water Supply- Provision for safe drinking water and hand washing arrangements shall be there. All Clinics have to maintain firefighting equipments like extinguishers as prescribed municipal authorities. Waste Disposal; The Disposal of wastes in the hospital shall be in accordance with Bio-Medical Waste (Management and Handling) Rule

1998. Provisions shall be made for segregation and safe disposal of biomedical wastes. sharps and syringes either by their resources or through tie-up with Common Biomedical Waste Treatment Facilities. Page 20 20 13 B. STANDARDS FOR MEDICAL LABORATORY Pathological laboratory: a. b. Small Lab: Routine clinical Procedures like HB, TLC, DLC, Urine Sugar (Blood and Urine) Large Lab : Above Procedures plus Blood • Urea, Cholesterol, LET. Lipid Profile, Bio Chemistry. Microbiology, Histopathology, Common Hormone Assay T 3, T4, TSH, Prolactin. Urine and Blood Culture, Elisa Test, etc 1.1 1.2 1.3 1.4 1.5 L6 The minimum area of the laboratory should be: 120 + 40 Sq. ft The clinical laboratory should be provided with 600mm wide and 900mm high bench of length about 2 metres per technician and enough room for pathologist in charge of the laboratory. Each laboratory bench should have a laboratory sink with swan neck fittings. reagent shelving. gas and power point and counter cabinet. Top of the laboratory bench should be acid alkali proof. All clinical laboratories should keep records properly with the name of the patients, their address and [the name of the referral doctor along with the details of investigation results. All Pathology labs have to maintain firefighting equipments like extinguishers as prescribed by municipal authorities. All labs should have Personal Protective Equipment (PPE) for the staff. Clean toilet facility sample collection with due privacy. Supervisory Doctor- 3.6.1 Minimum qualification to run a small laboratory is an MBBS degree. 1.6.2 Minimum qualification to run a large Laboratory shall be in Pathology. 1.7 Technical Personnel. The technical person performing tests under the supervision of the supervisory doctor should have the following qualifications:- 7.1 Diploma in Medical Laboratory Technology (with a course of at least of one year). 7.2 Any such course approved by the (Government of Chhattisgarh. From time to time. 1.8 2. 2.1 2.4 2.5 3. 38 (67) Collection Centre- Collection Centre can be run by a or a trained IUESC. The collection centre should have a of at least 80 sq ft area, where facilities of collection and storage of samples and proper transportation of samples from

centre Io Enedical lab should be provided. The transportation should be done carefully with proper [naintenance of cold chain. Radiology And Imaging: The role of Radiology Centre is to provide Radio Diagnostic Serv ices and therefore, it shall be run by appropriately qualified specialist in Radiology and if-naging. The Radio l)agnosis Units generally deal with Radiography, Ultrasonography (USG). Nuclear medicine and Computed Axial Scanner (CT Scan), Magnetic Resonance Imaging (MRI) etc. Such I nits shall have X-Ray and normal Ultrasonography facilities. Apart from 'his it shall have facilities like Colour Doppler, Echocardiography, Computed Axial Tomography Scan (C I' scan), Magnetic Resonance Imaging (NfRf) and Qtber Nuclear Medicine related tests. All Establishinents having Radiology and Imaging facilities must Fulfil} c'laoes laid down in the SAFETY MA.\ICAI_, by ATOMIC ENERGY REGULA]ORY BOARD. Some ofthe • Availability of lead screen near the control panel and lead aprons for technicians. • Availability of T LD badges with routine evalnation of technicians tor exposure to Prominent display of 1020 and caution signage especially for the pregnant ladies in locat language. Ine walls oi roojn "Tierc primary beam falls shall nat be less than thick and • Windovv's shall be lead painted or shie[dcd "'ith 1.7 nun lead, if thete, The Center should have been approved by the Atomic Energy Regulatory Body. Ultrasonography: A!' Estah'lishments Clltrasonography should have a license unde v the PC-PNDT Act. ne to cne z par'. able machine. the use of such jnachine shan 738 (68) 4. 4.1 4.1. I 4.1.2 4.2 4.2. I 42.2 5. 5.1 5.2 5.3 6.1 6.2 Qualifications: Supervisory Doctor- Minimum qualification for X.Ray and Sonography shall be MBBS with Training/Diplon•a in a relevant discipline, approved by the Government. of Chhatlisgarh. Minimum qualification for higher levels of services (CT Scan, MRI etc.) shall be N'fD Radiology/ Radio Diagnosis / Diploma in Nledical Radiology and Electrology / Diploma in Medical Radio Diagnosis/DipIorna in Medica Radiology OT any other Qualification/ Degree or Diploma recognized by MC[. Technical Personnel- The technical perqon performing the tests under supervision of the supervisory doctor should have one of follov;ine. qualifications :- Diploma in X-ray and fnaging awarded by a Cniversity. State Government or Celtral Technical Board. Any such course approved by Governnnenl of Chhattisgarh, from time to time. Support Services: Electricity- Provision for continuous supply of electricity' and power back up shall be there. Water Supply- Provision for safe drinking water and hand washing arrangements shall be there. All Radiology Labe-Kave Io maint'ain equipments like extinguishers as prescribed by Municipal Authorities. Equipment: l'he Centers must be provided with all instilliT:efits.reqegpmnts required for elncroency & basic life support. The clinic providing interventional have instrutnents/ 'contrast HI ust to deal with any allergic ar:d:cr anaphylactic cotuplications that Inay arise. Waste Disposal: •l'he Disposal ot• 11". N ledical Waste (Ntanaeement and seqrc-•gation itnd safe dispr,s.al e haqni'äl shall bc in accordance with Bio- R Llle. provisions shall be Ilhlde For c. STANDARDS FOR MATERNITY HOMES (Definition as per 2(e) of the Act) 2. Minimum Infrastructure and Space Requirements for OPD of l'he nuaternity home: Must fulfill the standards prescribed for the clinics in Part A of this Schedule. the above: The basic tminimurn facilities to be provided by the Apart Froni Ndaternity Homes are as follows: Maternity Facilities- a. b. c. d. Ail Matell)ily Homes should be able LO carry out procedures like Suction and Evacuation. Dilatation And Curettage. Caesarean Section and Caesarean Hysterectomy on an emergency basis; Blood transfusion facilities shall be available within the premises or a dedicated blood bank facility on the panel of the institution. The natues. addresses and telephone numbers of such licensed blood banks have to be prominently displayed; -Maternity Hornes should have Gynecologists, Surgcons, Anesthetists. and Pediatricians on rotes. Provision for hol water shall be there. All Maternity Homes must have: OPD Arca- The Illinilnum standnrds for all individual OPDs shall have to bc as mentioned in the standards for Clinics ill Patt A of this Schedule. IPD Block- Floor space per bed in ward Distance between two beds C 'learance bed Minimum Area Required 100 sq. ft. tar one bed and additional sq. ft. for e verv additional hed in the rool.n 738 (70) Width of doors in the wall Bath & toilet Number of urinals Number of toilets and baths Number of wash basins Operation Theatre (sterile zone) Instrument Sterlization Scrubbing up (there should be proper zoning into protective, clean zone and sterile zone Labor Room with Toilets Doctor's Duty Room Nurses Station Ward Store Trolley Bay Consulting Room and Examination Room 20 2013 3 ft. 36 sq. ft. I per 6 bed I per 6 bed I per IO bed 300 sq feet 50 sq. ft. 25 sq. ft. 140 sq. ft. + 20 sq. ft. 100 sq. ft.(with toilet) 100 sq. ft.(with toilet) 100 sq. ft. 30 sq. ft. 120 sq. ft. 2.4 2.5 Labour Room- a. b. c. d. e. f. Labour Table New Born Resuscitation Unit Emergency Medicines Shadow Less Lamp Instruments for Assisted Deliveries Minor Surgical Instruments New Born care area- a. This unit shall be located within or in close proximity to labor room b.

Radiant Warmers must be kept in this area. Page 18 of 57 c. d. 20 2013 E:ergency Medicines Suction Machines 3. 4. 5

6. Minimum equipments required for Maternity home: Labor Table a.b. Foetal Monitor (Doppler or Cardiotocograph) Neonatal Resuscitation Kit c. One suction machine with povver back up & one standby foot suction machine d. Minimum one oxygen cylinder for 8 beds or part, with one standby cylinder e. f. Ambu hag, Oxygen mask catheter, and nebulizers Minitnu:n one Infant Warmer g. All instruments equipments required for emergency & basic life support h. Emergency Tray Dressing Trolley k. Instruments & equipments required for Emergency Obstetric Care (L.S.C.S, Obstetric Hysterectmny, Forceps) Defibrillator. Diagnostic Services: Diagnostics Services like Pathological Lab, USG, Foetal Monitor and empanelled blood bank tie up, portable X-ray, ECG machine, if available shall be as per the standards prescribed in Standards of Diagnostics in Parl B of this Schedule. Support Services: a. b. c. Electricity- Provision for continuous supply of electricity and power back up shall bc there. Water Supply- Provision for drinking water and hand washing arrangenuznts shall be there. Fire All Maternity Homes have to Inaintdin firefighting equipnnents like fire extinguishers, Waste Disposal: The Disposal of wastes in the hospital shall he in accordance "ith Bio-Medical Waste (Managenrnt and Handling) Rule. 199S. Provisions shall be made for segregation and safe disposal of hi0lnedical vcastes. sharps and syrinues either by their rcsources or through tie-up V', ich ('011i111Qn Bionnedical Facilities. 738 (72) D. g-at-e,-r-€ 20 STANDARDS FOR PHYSIOTHERAPY UNIT It is an establishment where massaging, electrotherapy, hydrotherapy, medical gymnastics or any other similar processes are usually carried on for the purpose of treatment of disease or deformity. Following standards Shall] be maintained for the Physiotherapy Unit:- 1. 2. 2.] 2.2 3. 3. 5. 7. 9, 4. a. b. c

5. Minimum Infrastructure and Space Requirements: Same as prescribed for a clinic in Part A of this Schedule. Human Resource: Such Establishments shall be under direct supervision of Bachelor of Physiotherapy from a recognized univerSity or institute, Male or female employees providing such therapy shall be under direct supervision of a qualified Physiotherapist as mentioned above and shall possess a minimum qualification of higher secondary and minimum practical experience as prescribed by the MCI in Physiotherapy department of any hospital. Equipments: Short Wave Diathermy Magnetic Therapy Interferential therapy Paraffin wax bath Ultra Sound Therapy. Support Services: 2. 4. 6

8. Microwave Diathernw Laser rl'herapy Lumbar Traction and Cervical Traction Hot Packs Electricity- Provision for continuous supply of electricity and power back up shall bc there. Water Supply- Provision thr safe drinking water and hand washing arrangelments shall be there. Fire satety- All Physiotherapy ljnits have to maintain firefighting equiprnnels like fire extinguishers. Waste Disposal: The Disposal of wastes in the hospital shall be in accordance with Bio-Medical W'aste (IManagement and Handling) Rule. 1998, Provisions shall be Inade för segregation and safe disposal of biornmedical wastes. sharps and syringes either by their OVvrt) resources or through lie-up ith ('_Q1)ltnon Biomedical Waste Facilities. 20 2013 HOSPITALS AND NURSING HOMES 738 (73) 1. 1.1 1.2 1.3 1.3.1 1.3.2 .3.3 1.3.4 2. 3. 4. 4.1 The Basic Minimum Facilities Provided by a Nursing Home/Hospitals includes: Emergency First Aid- As prescribed for a clinic in part A of this Schedule. Indoor Admission facilities- The Hospital/Nursing Home shall provide indoor facilities for various disciplines. Other Services- The facility shall have ear-marked space for OPD block as per standards as prescribed for clinics in Part A ofthis Schedule. Services of one Medical Practitioner on duty shall be available 24hrs for attending emergency calls of indoor patients, 24hrs duty of Medical Practitioner shall not be compulsory if Day Care Centres are available. But availability of Doctor is compulsory till a patient is there in the Hospital. Diagnostic Services if available shall be as per standards prescribed for Medical Laboratories in part B of this Schedule. Services of Physiotherapist if available shall be as per standards prescribed for Physiotherapy Units in Part D of this Schedule. OPD Block: Minimum Infrastructure requirement: As prescribed for a clinic. Entrance zone: As pæcribed for a clinic. Inpatient Department: Wards- a. b. c. d, e. f. g. h. lthe ward Should have Enough space btween beds (as prescribed in clause g of Part E of this Schedule) Separate toilets for males and females Separate room for infectious patients Firc fighting equipments/evacuation plan]exit plan and fitc alarm Emergency Tray Suction Machine Oxygen cylinder with Mask & Atnbu Bag Dressing Trollev Separate q:ar-ds for Inalcs and females page 21 Of 57 738 (74) 4.2 4.3 20 2013 Intensive Care Unit (If available)- Intensive Care Unit shall be well supported by medical and paramedical staff in order to provide Resuscitation and Shoft Term Cardio Respiratory Support including Defibrillation.

Following standards shall be maintained for intensive Cave Units:- Entrance door- 4 ft wide a. Space per ICU bed- 100 sq. ft. b. Distance between two adjacent beds- 3.5ft c. Curtain/partition between beds d. Bedside Supply- centralised oxygen supply facilities must be available. e. f. Suction Machine beside each bed g. Non Invasive Electronic Monitoring- SP02, HR, Rhythm, NIBP, Temperature. h. Ventilator And Defibrillator . Crash Cart "Trolley/ Resuscitation rrray In- House Basic Clinical Lab J. k. Imaging Facilities- X-Ray, (JSG, FCCi Qualified Resident Medical Officer Nurse and support staff Separate hand washing facility n. Wheelchairs/Stretchers o. Separate Mediciiiea•fit Consumable Storage. p. Operation Theatre Complex/ Zone- Pre-operative room / area a. b. Changing room staff Scrub Area c. d. Sterilization Roonl store e. f. Provision hot water Operation Table g. h. Shadow Less Lamps . Post-Operative (Recovery) Room Page 22 oi 57 ECG, 4.4 4.5 5. 5.) a. b. c. d. e. f. 5.2 a. b. c. 6. fir-fi* 20 2013 Labour Room - As prescribed for Maternity Homes in Part C of this Schedule. kNew Born Care Unit- As prescribed for Maternity Homes in Part C of this Schedule. Support Services and Neccsarv Requirements For Staff: Support Services- Diet- Diet may either be outsourced or adequate separate space for cooking shall be provided. Hygicnic food as advised by the physician shall be available Io the patients. CSSD (Central Sterile Supply Department) (Compulsory for hospitals with 100 beds or more)- Adequate space and standard procedures for sterilization and sterile storage shall be available. A practical protocol for quality assurance of CSSD shall be developed. Laundry- There Shall] bc separate storage facility for dirty and clean linen and also for infected/soiled and non-infected /non soiled linen. Electricity- Provision for continuous supply of clectricity and power back up shall be there. Water Supply. Provision for safe drinking water and hand washing arrangements shall be there. Fire Fighting equipments- All hospitals to have fire fighting equipments like Fire Extinguishers. Necessary requirements for staff- The staff employé&-shall be free from any contagious disease and shall be provided with clean uniforms suitable to the nature of their duties. The workers shall be medically examined at the time of employment and periodical checks of the staff should bc done. Staff shall be ensured for medical hazards and statuary rules of einployment shall be followed. Equipment: The Nursing Homes shall provide and maintain the föllowing:- All instruments/equipments required for emergency and basic support a. b. ECG Machine Emergency Tray c. d. One Suction Nlachine & one Standby Foot Suction Machine XiliniInuttl one o.xv gen cylinder for 8 beds kVilh one Standby Cylinder e. l)efl bri tla 23 of 57 738 (76) g. h. j. 20 2013 Infusion Pump Dressing Trolley Faci}ity for power back up Fire Fighting Equipments/ Evacuation Plan 6.1 6.2 7. Minimum requirements of Operation Theatre- Operation •yable a. b. Boyles Machine Laryngoscope with 5 blades of different sizes c. d. Endo Tracheal •rubes of all sizes with connections Pulse Oxymeter/ Multi - Parameter Monitor e. f. Electric Suction Machine with generator connection Foot Suction Machine g. h. Emergency Tray with Medicines . Autoclave . Shadow Less Lamp k. Electric Cautery . Defibrillator m. Oxygen cylinders in sufficient number Minimum Instruments and Equipments required for Nursing Home [Hospital- Minimum required instruments & equipments shall vary as per particular specialty/super speeiaL\$, however, a list has been provided as per Indian Public Health Standards (Amcxure —A). Requirement of Human Resource in case of Super-Speccialtv /Multi-Speciality Hospitals as per availability: Hospitals / Nursing Ilomes tnulti-specialty / super-specialty services must have specialists in the relevant discipline either on their pay roll ur as a panelist in their kist of consultants. The minimum qualification required for such specialists shall be as indicated in the table below:- Specialty / Discipline Super Specialist CiclEeral Surgeon Physicial) Obstetrician & (Gynaecologist Desirable Qualifications DNB!MCI i/DW Post PG Ecliowship (Cienera! Surgery) (General Medicine) Page 24 57 Paediatrics Orthopaedics ENT Specialist Anaesthetist Eye surgeon Dental Surgeon Pathologist Radiologist Psychiatrist Dennatologist General Practitioner (allopathy) General practitioner (ayush) Specialist of A YCSH 20 2013 MS/DNB/(. ORTH MS/DLO MD/MS/DOMS/DNB/(Ophthalmology) BDS MD/DNB/DCP MI)/DNB/DMRE/DMRD/DMR MD/DPM/DNB MD/DNB/Diploma MBBS/ or any other degree in medicine BAMS/BHMS/ BUMS/Siddha'Yoga Post Graduace in AYUSH allopathic 7.1 7.2 S.No 2. Resident Medical Officers / General Duty Medical Officers- Every Hospital / -Nursing Ilome must have at least one Resident Medical Officer / General Duty Medical Officer for every 20 beds. Nursing staff and other supportive staff- Minimum nursing and other support staff shall be in the ratio indicated below: Category of Staff which For how should be available in anv Patients many f Number provided to be nursing home/hospital/maiernity home Nurse / Midwife General Duty Attendant Sweeper is on 8 hourly basis(per shift) 20 20 IO beds or its part beds or its part beds or its part 8. 738 (78) Physical Standards: 20

2013 Specification of areas for Clinical Establishment Minimum floor space per bed in ward Minimum distance between two beds Minimum clearance between bed and wall Minimum width of doors in the ward Bath & Toilet Number of Toilets and Baths Number of Wash Basins Minimum area of Operation Theatre (sterile zone) up to 10 beds > 10 and < 30 beds > 30 beds Area for Instrument Sterilization Area for scrubbing up Area for pantry (Nil more than 20 beds) Labor room with Toilets duty room Nurses Station Area for USG Minimum Area Required 100 sq. ft. for one bed and additional 60 sq. ft. for every additional bed in the room 6 ft. 60 mm I per 6 bed per 10 bed 140 sq. ft. 200 sq. ft. 300 sq. ft. 50 sq. ft. 140 sq. ft. 20 sq. ft. 100 sq. ft. (with toilet) 100 sq. ft. (with toilet) I AS per PNI_YV Guidelines Page 26 of 57 738 (79) Area for laboratory Physiotherapy unit with equipments Ward Store Trolley Bay Consulting Room and Examination Room 20 2033 120 sq. ft. +40 sq. ft. 160 sq. ft. 100 sq. ft. 9. 9.1 9.2 9.3 9.4 10. Emergency Medical Services: All Nursing Homes wherever registered medical practitioner/s are engaged, must primarily attend the emergency patients and provide basic life support without considering the financial ability of the patient, and then refer, if necessary, to the nearest private/public hospital with suitable medical report about the ailments, as early as possible. Golden Hour Treatment Protocols shall be followed. Every Nursing Home shall have all logistics for emergency basic life support with trained medical and paramedical personnel. Every nursing home shall ensure that they must prescribe rational drugs to their patients and follow the provisions of the Drugs and Cosmetics Act

1940. Every Nursing Home has a professional obligation to extend its services with due expertise for protection of life in emergency or in disaster Waste Disposal: '[The Disposal of wastes in the hospital shall be in accordance with Bio-Medical Waste (Management and Handling) Rule, 1998. Provisions shall be made for segregation and disposal of biomedical wastes, sharps and syringes either by their own resources or through tie-up with Common Biomedical Waste Treatment Facilities. 738 (80) 20 SCHEDULE 2 (See Rule 11) FORM CE 1: APPLICATION FOR REGISTRATION / ISSUANCE OF LICENSE / RENEWAL OF LICENSE [CLINIC (ALLOPATHIC/AYUSH) AND PHYSIOTHERAPY UNIT] Application for Registration / Renewal of registration under The Chhattisgarh State Upcharyagriha Tatha Rogopchar Sambandhi Sthapanaye Anugyapan Adhiniyam. 2010 Name of the establishment: . State 2. D. 4

6. Address: Village/ District : Tel.No. (With STD code)... Year of starting: . Taluka Pin code.... ..
.....FaxNo., Mobile No.... Location: Ownership: Municipal Corporation n Others Individual
Proprietorship [] Zi Registered Partnership Registered Company / Charitable Name of owner Of clinic:
Name of person in charge of clinic: . Page 28 of 57 CO-OPERATIVE SOCIETY PSU Corporation 738 (81)
Designation . Address: Village/ Town: District : State Tel. No. (With STD code).. Email id... 20
2013 . Education Qualification Taluka Pin code..... FaxNo. Mobile 8, 9, 10

11. System of Medicine offers (please tick whichever is applicable): Allopathy Homeopathy Yoga and Naturopathy Physiotherapy Infrastructure Details: Area of Establishment (in sq.ft). .. Total Area ...Constructed Area.... .. . Whether biomedical waste disposal license Municipality/ Municipal Corporation? Yes obtained from Panchayat/ Whether clearance obtained from CG Environment Conservation Board? C] Yes iNo, page 29 Ot 57 738 (82) 20 2013 12. S. No Human resource: Total no. of staff as on date of application Please furnish the following table:- Category of staff Name Qualification Registration No. (where applicable) Nature service temporary/ permanent / visiting consultation (Separate sheet to be attached f various categories of staff) 13. Payment option for registration fees: 1. Online payment 2. Demand draft Amount (in Details Receipt No. . 30 of 57 3. Postal order 20 2013 DECLARATION 738 (83) on my behalf and on behalf of my company/ society/ association] body. hereby, declare that the statements made above are correct and true to the best of my knowledge and I shall abide by all the rules and regulations under the Chhattisgarh State Upcharyagriha Tatha Rogopchar Sambandhi Sthapanaye Anugyapan Niyam, 2013. I, further undertake to intimate to the appropriate Registering Authority any change in particulars given above. Place: Date: Name of Signatory Authority with Official Seal page 31 Of 57 73B (84 20 2013



FORM - CE-2: APPLICATION FOR REGISTRATION / ISSUANCE OF LICENSE / RENEWAL OF
LICENSE [MEDICAL LABORATORY AND DIAGNOSTIC SERVICES] Application for Registration /
Renewal of registration under 'The Chhattisgarh State Upcharyagriha Tatha Rogopchar Sambandhi
Sthapanaye Anugyapan Adhiniyam, 20) 0 Name of the establishment: . 2 3. 4. 5. 6

7. Address : Village/ Town:... . District . Tel. No. (With STD code). Email Year of starting: State .
Taluka Pin code.... Fax No. . Mobile No.. Location Ownership: Municipal Corporation Others
Individual Proprietorship Registered Partnership Registered Company / Charitable Name of owner of
Medical Laboratory: . CO-Operative Society PSU Corporation Name of person incharge of Medical
Laboratory: . [Designation] . . Educational Qualification . District State 8. 9. 10. 11. 12

13. Tel.No. (With STD Email Providing testing and diagnosis: Laboratory: Pathology Lab Diagnostic and
imaging centre: X-Ray 20 3-FTk1 2013 . . Pin code.... Fax No. . Mobile No... Collection Center
Sonography Magnetic Resonance imaging (MRI) isotope Scans Infrastructure Details: Area of
Establishment (sq. ft). Total Area Constructed Area.... obtained from 738 (85) •Any other
Panchayat/ Whether biomedical waste disposal license .Municipality/ Municipal Corporation? Yes No.
Whether clearance obtained from CG Environment Conservation Board? Yes No. Whether clearance
obtained from BARC/AERB? iWhether registered under I/C-PNDT Act? Page 33 of 57



14. S.20 2013 Human resource: Total 110. of staff as on the date of application . Please furnish the following table:- Category of Name staff Qualification Registration No. (where applicable) Nature service of (Separate sheet to be attached for various categories of staff) Payment option for registration fees: 1, Online Payment 2. Demand draft Amount (in words).. Detail.... ... Receipt No, . 3, Postal order
Page 34 of 57 20 2013 DECLARATION 738 (87) on my behalf and on behalf of my company/ society/ association/ body, hereby, declare that the statements made above are correct and true to the best of my knowledge and I shall abide by all the rules and regulations under the Chhattisgarh State Upcharyagriha Tatha Rogopchar Sambandhi Sthapanaye Anugyapan Niyam, 2013. I, further undertake to intimate to the appropriate Registering Authority any change in particulars given above. Place: Date:
Name of Signatory Authority with Official Seal 35 of 57 20 2013 738 (88)



**FORM - CEO: APPLICATION FOR REGISTRATION / ISSUANCE OF LICENSE 1 RENEWAL OF LICENSE IHOSPITAL/MATERNITY HOMES/NURSING HOMESI Application for Registration /
Renewal of Hospital/Maternity Homes/Nursing Home registration under The Chhattisgarh State
Upcharyagriha Tatha Rogopchar Sambondhi Sthapanaye Anugyapan Adhiniyam, 2010 1. 2. 3. 4. 5**

6. Name of the Establishment: .Address : Village/ »rown:..... . District : Tel. No. (With STD code)....
Email id.. Year of starting: . Taluka Pin code.... Fax No. . . Mobile No.... Location :
Ownership: DMunicipal Corporation [3 Others a Individual Proprietorship [3 Registered Partnership
Registered Company Trust / Charitable Co-()perative Society [3 PSU C] Corporation Name of owner of
Hospital/Maternity Homes/Nursing Homes): 57 Name of person in-charge: Designation . Address:
Village/ Town: District: Tel. No. (With STD code). Email 8. 9. 10. ...State . 20 2013 . Education
Qualification Faluka Pin code.... Fax No. . Mobile No..... System of Medicines offered
(please tick whichever is applicable): 738 (89) Siddha Allopathy Ilomeopathy Ayurveda Unani C] Yoga
and Naturopathy Providing inpatient care; Hospital Nursing Home Any other (please specify). ... Providing
Diagnosfic Services: Laboratory: Pathology Lab Diagnostic and imaging centre: D Magnetic Resonance
Imaging (MRI) 11. infrastructure details: Arca of Establislunent (in square meters). Area [3 Maternity
Home Collection Center Sonography Isotope Scans C] CT scan Any other 37 138 (90) a. b. e. d. e.
Outpatient Department; Specialty wise distribution of OPD clinic:- Specialty In Patient Department: Total
No. of 20 2033 No. of rooms Remarks Specialty wise distribution of beds (in case the hospital is more
than 100 beds):- Specialty No. of rooms Remarks Whether Biomedical Waste Disposal License
Municipality/ Municipal Corporation? obtained from Yes Whether clearance obtained Board? No. from
Chhattisgarh No. Environment Panchavat/ Conversation Whether clearance obtained from BARC/AERB?
Whether registered under PC-P.NDT Act? E No. Page 38 af 57 20 '013 738 (91) 12. s. No I. 2. 3. 4. 5. 6
Human resource: Total no. of staff as on date of application . Please furnish the following table:- Category
of staff Name Qualification Doctor Nursing staff Para medical staff Phannacist Support staff Other please
specify Registration Nature of service No. (where tempera/ permanent applicable) /visiting / consultation
(Separate sheet to be attached for various categories of staff) 13. Payment option fees: I. Online payment
2. Demand draft Amount (in Details . Receipt No

3. Postal order 738 (92) 20 DECLARATION on my behalf and on behalf of company/ society/
association/ body, hereby. declare that the statements made above are correct and true to the best of my
knowledge and I shall abide by all the rules and regulations under the Chhattisgarh State Upcharyagriha
Tatha Rogopchar Sambandhi Sthapanaye Anugyapan Niyam, 2013. I, further undcertakc to intimate to the
appropriate Registering Authority any change in particulars given above. Place: Date: Name of Signatory
Authority with Official Seal Page 40 S7 2013 SCHEDULE 3 (See Rule 11) 738 (93) SCHEDULE OF
FEE FOR REGISTRATION / ISSUANCE OF LICENSE / RENEWAL OF LICENSE Individual Clinic (All Pathies) (a) Graduates (b) Post- Graduate diploma and degree holder (c) Poly clinics & other Clinic
Nursing Home and/or Maternity Homes or Hospitals (a) Up to 10 beds (b) 11-20 beds (c) 21-30 beds (d)
Illlore than 30 beds Pathological Laboratory (a) Pathological I aboratory (b)CoNection Centre for
Pathological Labs IMAGING, X- RAY & OTHERS (a) USG/ ECHO/ Color Doppler/ X-Ray/ ECT,
F.F.C., F.MG, Endoscopy (b) MR]/ CT Scan/ Angiography Amendment fees (In addition to original fee)
Duplicate Copy of License 41 57 Municipal Corporation Registration Fee (in Rs.) 700 1 500 700/doctor
2000 3000 4000 sooo 1 ooo I OOO I OOO 3000 800 500 Other Areas Registration Fee (in Rs.) 350 750
350/doc10r I OOO I sOO 2000 2.500 500 500 1 500 500 738 (94) 20 2013 SCHEDULE 4 (See Rule 11)
FORMAT FOR RECEIPT FOR REGISTRATION UNDER CHHATTISGARH STATE
UPCHARYAGRIHA TATHA ROGOPCHAR SAMBANDHI STHAPANAYE ANUGYAPAN NIYAM
2013 Registration No.... It is, hereby, certified that the Establishment . Address.... the
ownership of Mr./Mrs . has paid a total sun-I of Rupees • ...under(in figure) (in words) and is registered
under the C'hhattisgarh State I,'pcharyagriha Tatha Rogopchar Sambandhi Sthapanaye Anugyapan Niyam,
2013. This registration, however, does not guarantee the above mentioned establishment, the license under
the Act. The registration Certificatc wili bc valid till Name of the Supervisory Authority. ... Signature
Issuance Date . Page 42 of 57 20 SCHEDULE 5 (Sce Rule 11) FORMAT OF LICENSE 738 (95)
FORMAT FOR THE LICENSE UNDER SECTION 4 OF THE CHHATTISGARH STATE
UPCHARYAGIUHA TATHA ROGOPCHAR SAMBANDHI STHAPANAYE ANUGYAPAN
ADHINIYAM, 2010 License No.... Subject to tenns and conditions specified in Schedule I of the these

rules, license is, hereby, granted to Clinical Establishment (Name).. Address... Propriewr's Name.... Address.... Registration ND.... dated... . under the State Upcharyagriha Tatha Rogopchar Sambandhi Süagmaye Anugyapan Adhiniyam, 2010 to establish (run the Clinical Establishment. (Individual Clinic/Polyclinic/ Physiotherapy Clinic/Pathology Lab/ Radiology and Imaging centre/ Nlalellity Home/ Hospital! Nursing Honie under the systetn of Medicine viz: AllopaKhy/Ayurvedic/Homoeopathy/ Unani/ Siddha/ Naturopathy) for a period of -S years i.e. From... Scal . Supervieory Authority Dale: Place: of 57 738 (96) SCHEDULE 6 (See Rule 13, Clause 8.2) TABLE 1: FORMAT FOR THE REGISTER OF CLINICAL ESTABLISHMENTS District Status as on .. . Sl. No. Name address Clinical Establishment and of Category of Clinical Establish ment of Date registrati on Date issue renewal license Remarks of Validity of / registration of / license (*)Indicate entry / page number of the applications iölder TABLE 2: FORMAT FOR MAINTAINANCE OF COMPLAINTS OF CLINICAL ESTABLISHMENTS S. No. Name of Complainant Address of the complainant Investigat Action Name of Remarks Clinical Establishment against whom the complaint is made ion done Taken (*)Fnter cages registered Appel!atc Authoritv 44 of 57 fraiQ; 20 2C13 SCHEDULE 7 (Rule 14) MEDICAL RECORDS 738 (Every Nursing Home(Clinical Establishment shall maintain and preserve Inedical records for a period of five years from the date of the patient attending the hospital. Following records Shail be maintained:- OPD Records: The paper" of a patient attending the OPD should contain the Doctor's namc and detailed clinical notes including patient's name, age, occupation, chief complaints, onset/duration/progress of illness, past history, persona] history, family history, detailed examination findings, provisional diagnosis and advised. IPD Records: The Nursing Home shall keep the following details of the patients admitted in the Nursing Home as an in-door patient, t a nely 2. 3. (ii) (iii) Records of admission Discharge / DOWLAMA/ Absconding/Death of the patient; Records of Treatment These registess!ys to be duly maintained and updated chronologically , copies of which have to be kept in the record room of the nursing home for at least 5 years. lne information in this regard shall be supplied to the Supervisory Authority, as and when required. Other Registers to be maintained: Other Registers to be maintained are:- ii. ill. v. Labor Room Register Operation Theater Register MTP register (if registered under the Medical Ternfination of Pregnancy Act. Legal Register LaboratQty Registet Radiologv and Register Ulltra.sonograph\ Register 57 138 () viii. x. xi. xiii. fE7i• PC-PND'V Register Medical Certificate Register with certificates in duplicate Complaint Register Birth Register (Notified to such Inedicaï officer as authorized) Death Register (in such ibrmat as prescribed by Government/State Level Authority) Information in terms of Government Pro -nan'lmes I arcas of work (e.g. maternal health, child health, immunization. lännily planning, vector borne disease, Nationa] Leprosy Eradication Progrannne. Rcvised National TB Control Programme, Integrated Disease Surveillance Project. NRJIM initiatives, Janani Suraksha Yojana) 20 2013 INTIMATION OF BIRTH OF A CHILD OCCURRING IN NURSING HOME AS PER BIRTH AND DEATH REGISTRATION FORM A BIRTH REGISTER Following entries are to be made in the birth register:- 2. 3. 4. 5. 6

7. Date of birth: Gender: Name of the child, if any. Father's Name: Permanent address: Mother's Name: Place of birth: 1. If institutional then Hospital/lastitution Name: 2. If Home Delivery then Address: Page 47 of 5? 738 (100) 20 2013 BIRTH REPORT STATISTICAL IN FORMATION (This part to be detached and sent for statistical processing) Address of the mother: Religion of the family: 2. 3. 4. 5. 6. 7. 8. 9. 10. l]. a. Hiadu b. Muslim c. Sikh d. Christian Father's education: Mother's education: Father's/Mother's occupation: Age of lne mother at the time of marriage: Age of the mother at the time of this birth : Total number Of the children born alive: Type of attention at delivery: ('[ick the appropriate entry below) Institutional — Private "Government Delivery at Home Method of delivery: (Tick the appropriate entry below) 1. Normal 2. Forceps/ Vau{un 3. Caesarean Birth weight (in Kgs.) (If available): Page 48 c.f 57 20 2013 FORM B DEATH REGISTER LEGAL INFORMATION Following entries are to be made in the Death register:- . Date of Death: 2. Namc of the deceased: 3. Sex of the deceased: 4. Age of the deceased: 5. mace of Death: 738 (101) a. b. c. If institutional then Hospital/]nstitution Name: If Death at home then Address: Other (Specify).. Page. 49 cf 57 20 2013 DEATH REPORT STATISTICAL INFORMATION (This part to be detached and sent for statistical processing) Address of the deceased: Religion of the dceased: 2. 3. 4. 5. 6. 7. a. Hindu b. Muslim c. Sikh d. Christian Occupation of the deceased: Type of medical attention received before death: a. Institutional b. Medical attention other than institutional c. No medical at(entiou Was the cause of death medically certified? Name of Disease or Actual Cause of Death.

Yes NO. In case of death of a female, whether the death occurred during pregnancy or at the time of delivery or within 6 weeks of the Delivery : No 20 SCHEDULE 9 (See Rule 15) 738 (103) MONTHLY REPORT OF CONTAGIOUS OR COMMUNICABLE / NOTIFIABLE DISEASES Month Name of the disease (Category of disease Total no. of patients admitted Date of first patient admitted [Total no. of deaths Arca from which maximum patients are admitted Facility Signature . Name of authorised Doctor of the Hospital.... Name and address of the Hospital 738 (104) 20 2013 ANNEXURE - A LIST OF EQUIPMENTS STANDARD SURGICAL SET - 1 (INSTRUMENTS) Gloves surgeon, latex sterilizable, Gloves surgeon, latex sterilizable, S. No. 2. 4. 5. 6. 7. 8. 9. 10. 12 13. 14. 15. 16. 18. 19. 20 Instrument - rray, instrument/dressing with cover. 310 x 200 x 600 mm-ss Gloves surgeon, latex sterilizable, size 6 6-1/2 Gloves surgeon, latex sterilizable, size 7 7-1/2 Gloves surgeon, latex sterilizable, 8 Forceps, backhaus towel, 130 mm Forceps, sponge holding, 228 mm Forceps, artery, pean straight, 160 mm, stainless steel Forceps hysterectomy, curved, 22.5 mm Forceps, hemostatic, halsteads mosquito, straight, 125 mm Forceps, tissue, all/is 6x7 teeth, straight, 200 mm-ss Forceps, uterine, tenaculum, 280 mm, stainless steel Needle holder, mayo, straight, narrow jaw. 175 mm, ss Knife-handle surgical for minor surgery # 3 Knife-handle surgical for major surgery # 4 Knife-handle surgical, size 11, for minor surgery, pkt of 5 Knife-blade surgical, size 15 for minor surgery, pkt of 5 Knife-blade surgical. size 22, for major surgery. pkt of 5 Needles, suture triangular point. 7.3 cm. pkt of 6 Needles. suture round bodied, 3/8 circle No. 12 pkt of (i Page 53 5? Minimum requirement 12 12 12 12 12 4 6 4 4 6 6 4 S. No. 22. 23. 24. 25. 26. 20 2013 Instrument Retractor, abdominal, Deavers, size 3, 2.5 cm x 22.5 cm Retractor, double-ended abdominal, Balfour 3 blade self-retaining Scissors, operating curved mayo-blunt pointed 170mm Retractor abdominal, Balfour 3 blade self-retaining Scissors, operating, straight, blunt point, 170 mm IUD INSERTION KIT 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17

18. Setal sterilization tray with cover size 300 x 220 x 70 mm, S/S, Ref IS:3993 Gloves Surgeon, latex, size 6-1/2 Ref.4148 Gloves surgeon latex, size 7-1/2 Ref. 4148 Bowi, metal sponge, 600 ml, Ref. IS: 5782 Speculum vaginal bi-valveusco's Graves small ss Forceps sponge holding, straight 228 mm Semken 200 Sound uterine simpson, 300 mm graduated UB 20 mm Forceps uterine tenaculum duplay DBL-CVD, 280 mm Forceps tissue - 160 mm Anterior vaginal wall retractor stainless Torch without batteries Gloves surgeon, latex, size 7, Ref: 4148 Gloves surgeon, latex size 6 Ref. IS: 4148 Battery dry cell 1.5 V 'D' Type for Item 7G Speculum vaginal bi-valveusco's/Graves Medium ss Forceps artery, straight, Pean, 160 mm Scissors operating. straight. 145 mm, Blunt/Blunt Forceps uterine vulsellum curved, Museux, 240 mm Page 54 of 57 738 (105) Minimum requirement 2 6 6 1 1 6 6 738 (NORMAL DELIVERY KIT S. No. 2. 4. 5. 6. 8

9. Instrument Trolley, dressing carriage size 76C, and 84 cm high.Ref. 4769/1968 Towel, trolley 84 cm x 54 cm Gown, operation. cotton 2013 long x 46 cm wide Cap. operation, surgeon's 36 x 46 cm Gauze absorbent non-sterile 200 mm x 6 m as per IS: 171/1985 Tray instrument with cover 450 mm (L) x 300 mm (W) x 80 mm (H) Macintosh, operation. plastic Mask, face. surgeon's cap of rear ties: B) Beret type with elastic hem Towel. glove EQUIPMENT/CONSUMABLES FOR ANAESTHESIA S. No. 4. 5. 6. 7. 8. 9 Instrument Facemask, plastic w/rubber cushion and headstrap; set of 4 Airway Guedel ot Berman, autoclave rubber Laryngoscope. set with infant, child Catheter, endotracheal w/cuff, rubber set Forceps, catheter, Nagill. adult and child sizes Connectors. catheter. straight/curved Cuffs for endotracheal catheters Breathing tubes. hoses, connectors Vaporiser, halothane Needle. spinal Page 55 of 57? Minimum requirement 2 2 2 3 Minimum requirement 4 4 4 20 3-TT1a: a 2013 EQUIPMENT FOR OPERATION THEATRE 2. 3. 4. 5. 6. 7. 8

9. Instrument Diathermy machine Dressing drum all sizes Lamps shadowless: Ceiling lamp Lamps shadowless: Portable type Steriliser Suction Apparatus Trolley for patients Trolley for instruments Boyle's Apparatus with accessories 738 (107) Minimum requirement BLOOD STORAGE AND I ESSENTIAL EQUIPMENTS FOR LABORATORIES & TRANSFUSION CENTRES Instrument Rod, flint-glass, 1000 x to dia, set of two 2.3. 4. 5. 6. 7. 8. 9. 10. 12 Cylinder, urastilling, graduated W/pouring lip, glass, 50ml Bottle, wash, polyethylene W/angled delivery tube, 250 ml Timer, clock, interval, sprina wound, 60 minutes x 1 minute Rack, slide drying nickel/silver, 30 slide capacity Tray. staining. stainless steel 450 x 350 x 25 mm (Chamber, counting, glass. double Neubauer ruling Pipette, serological glass, 0.05 ml x 0.0125 ml Pipette, serological glass, 1.0 ml x 0.10 ml Counter. differential. blood cells, 6 unit Centrifuge, micro-hematocrit. 6 tubes. 240v Cover glass for counting chamber (item 7),

Box DI i 2 Page 56 of S 7 Minimum requirement 2 6 6 13. 15. 16. 17. 18. 19. 20. 21. 20 2013 Tube, capillary, heparinized, 75 mm x 1.5 mm, vial of 100 Lamp, spirit W/screw cap. Metal 60 mi Lancet, blood (Hagedorn needle) 75 mm pack of IO ss Benedict's reagent qualitative dry components tor soln Pipette measuring glass, set of two sizes IO ml, 20 ml Test tube, w/o rim, heat resistant glass, 100 x 13 mm Clamp, test-tube, nickel plated spring wire, standard type Beaker, HRG glass, iow form, sct of two sizes, 50 mi, 1 50 ml Rack, test-tube wooden with 12 x 22 mm dia holes 10 IO 2 24 3

