# चिकित्सा परिचर्या नियमावली MEDICAL ATTENDANCE RULES

D. PK Rown



# कोल इण्डिया लिमिटेड

. 10, नेताजी सुभाव रोड, कलकता-700 001

## COAL INDIA LIMITED

10. NETAJI SUBHAS ROAD CALCUTTA 700 001

DR. B. BHAUMIK Med. Supdt CMS OFFICE

## CONTENTS

		1,00	19, 170
Chapter I	Title, Commencement of Rules, etc.		5
Chapter II	Definitions, Authorised Medical Attendant, Competent Authority, etc.		4
Chapter III	Treatment—Eye Treatment, Dental Treat- ment Diabetic Treatment, etc.		ü
Chapter IV	Treatment by Specialists and other Special facilities		8
Chapter V	Medical Reimbursement—Bates of different items, etc.		9
Chapter VI	Rules relating to Medical facilities in respect of piece-rated, daily rated and monthly rated employees guided by NCWA except the monthly rated non-executives of Ex-NCDC who were guided by Corporation Rules framed by NCDC and appointed before 15.8.1967 and also those non-executives guided by Civil Rules, Railway Rules and those who are getting medical allowance of one month's pay in a year.		16
Chapter VII	Treatment for non-entitled patients in com- panies hospitals/dispensaries		10
Chapter VIII	Rules relating to Medical Examination		20
Chapter IX	Savings-Relaxation of Rules, etc.		255
Annexure 1	Form No. 1: Form of Certificate to be obtained from Hospital-in-Charge regarding Special Nurse/Attendant		28
Ånnexure II	Form No. II: Application form for Medical Reimbursement		27
Annexure III	Form No. III: Report of Medical Exami- nation		28
Anhexure IV	Form No. IV : Pre-employment Medical Examination— Candidate's Statement and		
	Declaration		30

### CHAPTER I MEDICAL ATTENDANCE RULES

#### 1. Title

These Rules may be called the Coal India Limited Medical Attendance Rules.

#### 2. Commencement of Rules

These Rules shall come into force with effect from 26th December, 1981.

### 3. Extent of Application

- (a) Officers employed in the executive cadre of Coal India Limited.
- (b) Management Trainees/Junior Executive Trainees or Officers on Deputation/Foreign service, or officers guided by Civil Rules/Railways Rules and re-employed officers to the extent provided in their terms of appointment.
- (c) Monthly rated non-executive employees of ex-NCDC who were appointed before August 15, 1967 (Pre-Wage Board), who were guided by what were known as "Corporation Rules" framed by ex-NCDC Limited and are already in receipt of medical reimbursement under CMAL Medical Attendance Rules.
- (d) Eligible dependant family members as specified under Rule 12 of Chapter II of these Rules, of employees as mentioned in Rules 3(a) to 3(c) above.
- (e) The daily rated, piece rated, Post Wage Board monthly rated employees guided by NCWA and eligible family members of their families as laid down in Rule 12, Chapter II of these Rules will be entitled to medical facilities limited to the extent as laid down in Chapter VI of these Rules.

### Note (i)

Employees who are getting a month's salary/wages in a year as Medical Allowance towards medical expenses, will not be covered by these Rules.

#### Note (ii)

Subject to the availability of the facilities and at the discretion of the Medical Officer-in-Charge of the hospital/dispensary, persons who are not entitled to medical facilities under these Rules, may be given medical attendnace and treatment in Company's hospital/dispensary in case of emergency on payment. Recovery of charges from non-entitled person will be made as per Rules specified in Chapter VII of these Rules. The charges may be revised by Coal India Limited as and when necessary. All charges from non-entitled patients will be credited to Company's account.

## 4. Interpretation

In case of doubt or dispute in respect of interpretation of any provision specified in these Rules, the matter will be referred to Coal India Limited and the decision(s) given by Coal India Limited will be treated as final:

- F-12 11 E

#### DEFINITIONS

- "Company" means Coal India Limited (in short, CIL) and includes its subsidiary companies, namely, Eastern Coalfields Limited (ECL), Bharat Coking Coal Limited (BCCL), Central Coalfields Limited (CCL), Western Coalfields Limited (WCL) and Central Mine Planning & Design Institute Limited (CMPDIL). Coal India Limited includes North Eastern Coalfields (NEC).
- "Chief Medical Officer" (CMO) means the Chief Medical Officer of Coal India Limited or its subsidiary companies or any other officer specified for the purpose under these. Rules by Chairman/Managing Director of a Company.
- 3. "Authorised Medical Attendant" (AMA) means any Medical Officer in the service of the Company or any Doctor in a panel of Doctors already approved by Company or in case where no Medical Officer of the Company is available at the station, any Government Medical Officer at the station or a Medical Practitioner duly registered with any State Medical Council (Allopathic System) of India.
- 4. "Entitled Employees" means those employees mentioned in Sub-rule (a), (b) and (c) of Rule 3 of Chapter I of these Rules.
- Note: Unless otherwise mentioned "employee" in all Chapters of these Rules, excepting Chapters VI, VII, VIII and IX, will mean "entitled employee".
- 5. "Competent Authority" means such Officers as specified by Chairman/Managing Director of a Company for the purpose of these Rules.
- "Controlling Officer" means such officers of the Company as may be so specified by the Chairman/Managing Director from time to time.
- 7. "Hospital" means hospital of the Company, Government hospital, hospitals recognised by Central Government under Central Government Health Service Scheme, a hospital maintained by a local authority and any other hospital with which arrangements have been made by the Company, for the treatment of its employees.
- 8. "District" means a revenue district of the State Government.
- 9. "Station" means place of posting of the employee concerned.
- 10. "Medical Attendance" means medical treatment by an Authorised Medical Attendant including such pathological, bacteriological, radiological or other methods of examination and investigation for the purpose of diagnosis and treatment (curative and/or preventive) as are considered necessary by the Authorised Medical Attendant, subject to entitlement being confined within the limitation(s) laid down in these Rules.

- 11. "Pay", for the purpose of these Rules, means the basic pay, and includes special pay, personal pay, deputation allowance, non-practising allowance of Medical Officers and acting/charge allowance.
- 12. The term "Family" means an employee's wife, legitimate children stell children parents residing with and wholly dependent on him

#### Note:

- (i) The husband of female company employee residing with and wholly depend into in her may also be allowed this concession.
- (ii) The terms "family" does not include dependent relations such as widowed sister, aunt etc. The term "legitimate children" does not include adopted children except those adopted legally.
- (iii) Children would mean unmarried son aged upto 18 years, student but unin mind con and unmarried and unemployed daughters.
  - (iv) The wholly/mainly dependent parents who normally reside with the Company's employee concerned and whose total monthly income does not exceed the pay of the Company's employee, subject to the maximum income of the parents being Rs. 350/- per month.

#### CHAPTER III

#### TREATMENT

- All entitled employees and their eligible dependants will get free medical treatment.
   in company's hospital/dispensaries.
- "Treatment" means medical, surgical and nursing facilities etc., as an convelered necessary by the Authorised Medical Attendant and will include:
- (i) Employment of pathological, bacteriological, and other methods for diagnostic or therapeutic or preventive purposes; and
- (ii) Supply of medicines, vaccines, sera or other therapeutic and prophylactic substances including blood transfusion.

#### Note:

- (1) Supply of medicines and other items as may be declared as non-reimbursable from time to time, will not be covered.
- (2) Cost of toilet articles, food (including protein preparations such as protinex, protinules, etc.), beverages, wines are not reimbursable.
- Treatment will also mean and include the following with exceptions shown under each:
- (a) Eye treatment: Treatment of all types of eye diseases, testing of eyes for correction of errors of refraction once in three years for entitled employees and their eligible family members and provision of eye prosthesis will be allowed, but cost of spectacles is inadmissible.
- (b) Dental or/and gum treatment: All types of dental or/and gum treatment will be covered except dental treatment needed for cosmetic purposes. Denture will not be provided.
- (c) Diabetic treatment: Anti-diabetic treatment will be covered.
- (d) Sexually transmitted diseases (Veneral diseases): Treatment of sexually transmitted diseases will be covered.
- (e) Anti-rabic treatment.
- (f) Physiotherapy : Electrotherapy and all other forms of physiotherapy are covered.
- (g) Prophylactic immunisation: Prophylactic immunisation will be covered.
- (h) Mental diseases: Mental illnesses including delerium tremens will be covered.
- (i) Treatment of sterility: Treatment of sterility will be admissible.
- (i) Family planning: All permanent measures for family planning like Vasectomy. Tubectomy and other means of sterilisation and among temporary measures Intra-Uterine Contraceptive device, and medical termination of pregnancy (MTP) will be covered for medical reimbursement.
- (k) Prenatal (ante-natal), and post-natal treatment: This treatment will be covered.

#### Diet

4. Diet, if charged for separately, over and above cabin/bed charges, in hospital/nursing homes, will not be covered/reimbursed. But, there will be no deduction for diet from cabin/bed rent where charges for diet is included in bed/cabin rent.

## Attendance and Treatment at Residence

Medical attendance and treatment should normally be sought in the Company/ Government/Coal Mines Welfare Organisation (CMWO) hospital/dispensary. In except onal cases, where removal of the patient to the hospital/dispensary is considered dangerous. Use of the nations, the Authorised Medical Attendant, may, at his dispressor attendant.

#### Treatment of Employees Question on and

6. If any entitled employees and/or his entitled dependant falls ill out of station white on LTC/Leave/Tour and obtains treatment in a Government hospital, the Company will allow reimbursement of the actual cost of treatment. In case of treatment by a private practitioner, or in a private nursing home or a private hospital, the reimbursement will be limited to the ceilings laid down in Chapter V.

### Temporary Separation

7. If any eligible dependant member of the family of an entitled employee goes out of station temporarily and falls sick, he can avail treatment outside the place of employment of the entitled employee, but reimbursement will be admissible for treatment upto a maximum period of two months during a calender year. Reimbursement will be limited to the ceiling laid down in Chapter V.

#### Note:

(1) If the dependant of an entitled employee permanently resides away from the place of posting of the employee, no medical reimbursement will be admissible excepting in case of children living away from their parents for purpose of study and/or training.

(2) If the wife of an entitled employee stays away temporarily from the place of posting of the employee for the purpose of confinement, reimbursement for delivery, including ante-natal, natal and post-natal treatment will be admissible, but it will be limited in a total period of 3 months.

## Treatment of Entitled Employee's Eligible Dependants on Transfer

8. On transfer of an entitled employee, his eligible dependants will be entitled to medical treatment at the declared home town of the employee or in place of last posting or in such other place as may be approved by the Controlling Officer, upto six months from the date he hands over charge at the previous station. Medical reimbursement will be limited to the ceilings laid down in Chapter V.

#### CHAPTER IV

## TREATMENT BY SPECIALISTS AND OTHER SPECIAL FACILITIES

- 1. Under special circumstances, when suitable treatment is not available in the hospital of the Company, an Authorised Medical Attendant may refer a case to a private specialist/clinic/nursing homa/nospital, provided he certifies the non-availability of treatment and obtains prior permission of the Chief Medical Officer concerned. If it is not possible to obtain prior permission due to urgency, it should be reported to CMO within 48 hours for his post-facto-approval.
- 2. If there is an arrangement of the Company with any private specialist/clinic, etc., for treatment, the AMA should refer the case to such specialists/clinics, etc. possibility of such reference to nearby Government/CMWO hospital should also be explored.
- 3. In case of such reference, the patient will attend clinic/nospital where the specialist is attached to, except on emergencies when the specialist may be called at the patient's residence, in which case, a certificate stating the nature of illness and inability of the patient to attend the Doctor's clinic is to be obtained from the Authorised Medical Attendant.
- 4. Diseases which require special and continued treatment for a long time like heart disease, T.B., Cancer, Leprosy, etc., special arrangement for treatment may be made with approval of the Chief Medical Officer concerned.
- In all cases referred to above, reimbursement will be made as per limitations laid down in Chapter V.

#### CHAPTER V

# MIDICAL REIMBURSEMENT IN RESPECT OF ENTITLED EMPLOYEES AND HIS ELIGIBLE FAMILY MEMBERS

- Where an entitled employee of the Company and/or his entitled family member is treated in a hospital/clinic/nursing home not established by the Company and required to hav charges for such treatment, or where an employee is authorised by the Medical Attendant to purchase medicines/vaccine etc. from outside and pay for investigation, he will be simburated the medicine expenses to the extent specified in the schedule hereunder.
- An entitled employee and/or his eligible dependent receiving medical attendance and realment as an in-patient, will be entitled to reimbursement for accommodation expenses in the hospital according to schedule in this chapter. If accommodation of the entitled mass is not available, accommodation of higher class may be allowed provided the Medical appropriate of the hospital certifies regarding the non-availability of appropriate class at accommodation at the time of admission and that admission could not be delayed without danger to the health of the patient. As far as possible, the patient should be moved to the appropriate class of accommodation as soon as available.
- Continuation of treatment by a registered private practitioner or specialist shall, be a limited to a period of 30 days and a total of 8 consultations (inclusive of consultation with the general practitioner and specialist) for a single spell of illness, after which period the realient is to be examined by a Company's Doctor who will advise further course of action, wherever Company's Doctor is available at the station; otherwise the employee will get a report from the AMA about the disease and the treatment and submit the same to CMO and obtain permission to continue further treatment. In case further consultations or visits are required, approval of the CMO for such continuation will be required.

### Physiotherapy

Massage treatment by a trained masseur or a masseur with a Government recognised certificate, electrotherapy, (Diathermy, Ultrasonic, etc.) and all other forms of physiotherapy are reimbursable as per rates in the schedule hereunder subject to a limit of 20 sittings. In special cases, where prolonged physiotherapy is considered essential, the expenses for more than 20 sitting will be reimbursable provided prior approval of CMO is obtained.

## Charges for Special Nursing and Attendants

Charges for special nursing and attendants are not normally admissible. However, it may be allowed if special Nurse/Attendant is engaged as per specific advice in writing (see per Form I, Annexure I) of the Medical Superintendent/Specialist of the hospital/nursing home where the patient is being treated in that the services of special nurse and/or attendant were essential. Special nurse and/or attendant will be allowed for a period of ten days. If it is necessary for more than ten days, permission of CMO will be necessary. The actual expenses subject to the limitation as per Schedule under this Rule will be re-imbursed. Reimbursement of expenditure for special nurse/attendant will not be admissible for treatment at residence.

## Operation Charges

6. Actual expenses for operation as incurred in a Government hospital will be reimbursed. In case the operation is undergone in a private hospital/nursing home, actual expenditure may be reimbursed, subject to the cellings laid down in the Schedule of this Chapter.

### gates Tax

7. tiales Tax, paid by the employees white purchasing medicines from the market, is reimbursable but packing and forwarding charges for such purchases are not reimbursable.

### SCHEDULE OF CHARGES

The charges for medical reimbursement in cases treated by private practitioner and in private Institutions will be subject to the ceilings as shown below. Rates indicated in Group I relate to Delhi, Dhanbad, Ranchi, Nagpur, Kanpur, Asansol and all State Capitals. Group II relates to all other places. If actuals are less than these rates, only actuals will be payable.

I Consultation	Charges	Group I	Group II
(a) Specialist (b) General pract	itioner	Rs. 40/- per visit Rs. 16/- per visit	Rs. 20/- per visit Rs. 10/- per visit

Note:

- (a) A specialist should be consulted only after a primary consultation with the Authorised Medical Attendant/General practitioner.
- (b) If any subsidiary company has any arrangement with local specialists/practitioner, the rates of consultations/operations, etc., already determined by the respective company will be paid instead of the above schedule of charges.

## II. Accommodation

Cat	egory of employees	Entitlement of accommodation	Group	1	Group II
(a)	Executives and entitled non-executives with pay upto Rs. 1950/-	Paying ward/cabin/nursing hom		50/-	Rs. 30/-
(b)	Executives with pay betw Rs. 1951/- to Rs. 2750/				Rs. 50/-
(0)	m mand I I bearing	-do-	Rs.	100/-	Rs. 75/-

## III. Operation Fee (excluding operation theatre charges and anaesthetists fee)

Simple	Surgery	· Minor Surgery		Maj	or Surgery
May to tee-		(Requiring Gen	eral Anaesthesia	):	****
Gr, 1	Gr. II	Gr. I	Gr. 11	Gr. 1	Gr. 11
Bi 125:	Rs75/-	Rs. 300/-	Rs. 250/-	Rs. 600/-	Rs. 500/-

Note: The classification of different surgeries into simple, minor and major is shown under Clause XVII below.

Sall Sall	Gr. 1	Gr.	11
a) Extraction or filling	Rs. 16 per touth	Rs. 10 per t	
(i) Bealing of teeth	Rs. 16 per sitting	Rs. 10 per s	
A CARACTER AS A CONTRACTOR	In a single course of	scaling of ten	th, charges
	upto four sittings me	reimbursable.	
e) A.C.T.	Rs. 32/- per tooth	Rs. 20/- per	touth
d) For any other type of denta	al and/or	Dr. 107	nor sitting
gum surgery	Rs. 15/- per sitt	ing, No. 107-	unto fou
	(Reimbursement	will be illinted	upto too
K (C,	sittings).		-
and according to case.	action of impacted wisdom to under oral surgery and reimbur	sement will be	as per rue
and according to case.	inder oral surgery and reimbur	sement will be	as per rue
bone disease will fall used according to case.  // Delivery Charges, Abo	inder oral surgery and reimbur	sement will be	nation o
bone disease will fall used according to case.  // Delivery Charges, About Pregnancy (m.t.p.)	ortion, Miscarriage and N	sement will be	Gr. II
hone disease will fall used and according to case.  It Delivery Charges, About Pregnancy (m.t.p.)  Normal delivery, abortion, respection, respectively.	ortion, Miscarriage and N	Gr. I  Rs. 200/- Rs. 300/-	Gr. II Rs. 125/ Rs. 250/
bone disease will fall used according to case.  // Delivery Charges, About Pregnancy (m.t.p.)	ortion, Miscarriage and N	Gr. I Rs. 200/-	Gr. II Rs. 125/ Rs. 250/
hone disease will fall used and according to case.  Delivery Charges, About regnancy (m.t.p.)  Normal delivery, abortion, respective delivery  Major operative delivery	ortion, Miscarriage and N	Gr. I  Rs. 200/- Rs. 300/- Rs. 600/-	Rs. 125/ Rs. 250/ Rs. 500/
hone disease will fall of and according to case.  It pelivery Charges, About regnancy (m.t.p.)  Normal delivery, abortion, responsible to the control of the	rtion, Miscarriage and Miscarriage and Miscarriage and MTP	Gr. I  Rs. 200/- Rs. 300/- Rs. 600/-	nation of
hone disease will fall of and according to case.  VI Delivery Charges, About regnancy (m.t.p.)  (a) Normal delivery, abortion, respective delivery  (b) Minor operative delivery  Note: Labour room charges  VII. Pathological, Bacteriology  Type of Tests	rtion, Miscarriage and Miscarriage and Miscarriage and MTP	Gr. I  Rs. 200/- Rs. 300/- Rs. 600/- e been shown	Rs. 125/ Rs. 250/ Rs. 500/ separately

TO/DO/Hb/ESR of blood, Malarial Parasite, Microfitaria, Absolute Eccinophil Count, Platelan eduht, Reticulocyte count, PBlood IFIlm Morphology, Bleeding & Coagulation (BT, CT), Kahn's flocculation test, VDRL, Widal's test, Aldehyde test, Blood sugar, most use, Total Serum Chloesterol, Serum Cholesterol (Free), Serum Cholosterol (Easter), Protein of Blood (Total), Serum Albumin, Serum Globulin, Serum N.P.N. Serum (Blood Urea Nitrogen), Serum Creatin, Serum Uric Acid, Serum Bilirubin, Thymological Protein of Urea, Stool examination (Routine), Urine (Quant, Alb/Sugar only), Urine manifestor for Urea, Stool examination (Routine or Conc. method), Routine examination of putum, any culture (Blood/Urine/Pus/Eye Swab/Urethral Swab/Vaginal Swab/nasal awab except Sputum Culture of AF.B.), any sensitivity test after Culture, Uretheral smear to milarodopic examination, Skin scrapings for AFB, Blood Typing, Rh factor determination.

## The following tests may be regarded as special tests

Complete Haemogram, i.e. Hb. and RBC and PVC, MCV, MCH, MCHC and TCDC of WBC, Serum Sodium (Na), Serum Potassium(K), Serum Chlorid (cl), Co-combining power, Serum Calcium, Serum Inorg, Phosphorous, Serum Acid Phosphotase, Serum Alkaline Phosphotase, Total Lipids, Mantoux test, R.A. Factor, Urine-Diastase, Urine examination for Porphyrinogen, Urine for Pregnancy test, Coombs test, Histopathological examination Endometrium or any others tissue-each block. L.E. cell Phenomenon, Casoni's reaction, Cervical/vaginal throat or any other smear for Peps test, serum SGOT and

Note: !! Actual cost of tests which are super-special in nature will be reimbursed if approved by CMO/MS/Dy MS. -

· · · · · · · · · · · · · · · · · · ·			100	
VIIII C	TOPHOS	or X-ray		A1
VIII. VI	1017100	OI A-I av	examina	tion
* * * * * * * * * * * * * * * * * * *				

VIII. Chai	rges for X-ray e	xaminati	on							
(luis sehi	ות בייר מול ווקו ל	.,					Gr. I	. 0	3r. 11	1
(a) Radio	graphy (Large si	ze each pl	áte).			Rs.	·40/-	Rs.	30	)/-
(b) Radio	graphy (Medlum ajtar Barium me	/small siz	each pl	até)	y	Rs.	25/-	T'As.	É48	1/1
(c) X-ray	after Barium me	I much to	ואנו אולנו	th tib	jana vje	. 3 .	· \$ 16.76	777		17
1.750.2(U)19.1	Oasophagus only		0				80/-		60	
	Stomach and bu	qeunuy o	aly! if:	Tit 113	section.	Rs.	200/-	PARS!	150	ji:
(ii) X	Enema (Large inte	stine and	rectum)				200/-			
	full follow throug				0.49		275/			
	graphy intravenou		rade				250/-			
	Holecystography				•	Rs.	140/	Rs.	105	12
(f), Intrav	enous Cholecysto	graphy/C	holangio	graphy		Rs.	250/-	Rs	190	13
(g) Bronc	hography/Myelo	graphy				Rs.	250/-	Rs.	190	1.
The state of the s	कर विकासमाध्ये कर	99 - 5, 1	28		. ;(Plu	s mino	operat	ion ch	arge	9)
(h) Hvste	ro-salpingograph	v/Vasogra	phy/Cvs	to-Urati	hrography	Re	150/-	B.	115	, "
A (16101) b	here is tide the	. In F. 57	dustrate	1 15	=1 :- (Plu	s minor	operat	ion ch	arge	113
(I) Angio	graphy-Angiocar	diography	/Pneumo	- uncan	halograph	w	opo.c.		o.g.,	"
Lumbe	er air study per fil	m		· ······		Re	50/-	D.c	40,	, .
Ne-10		y /44			(Plu		operat			
	Catheterisation	per film		P.	V		50/-			
100	nde i je ye.	11. 4			(Plu		operat			
(k) X-ray	in operation theat	re/ward (	with port	able ma	chine)	rat '	וןאייר:	1 1 2 1	Filhar	3
PAPE POFFIL	m⊤(a) :: Large size	rassita.		٠,	*,		80/-		.*	A 3
	(b) i Medium/						64/-			
	X-ray per plate						20/-			
ATT STATE	cost of Barlum n	Salva in					20,			7
to the reference	cost of Barium m	leai/Contr	ast medi	a/dye is	s charge	i sepa	rately, i	t will	be te	. 4
HUB LAND	A 1 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				. '				F . 7	$i_{ij}$
A PARTY	Charges (Each (	856)	•1					1. 5		2.7
AL CHILL	ctors chamber	2 y p.		15 17 19			50/4			
<b>发生</b>	Survey of patient	Min in	witte .			Rs.	00/36	Rs.	80/	Ç.
STATE OF THE	charges (Eech c	830)	1.15 14	7101		Rs.	50/1	Rs.	120/	
- 1 ( 1 ) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CIMILIDA'N' '	AS 25 100	Control of the Control		CT. 187 (St.		E		4 1 M P	C 750

without his net net a see		. Med		. 0	sitting / a Reg		sitting ma-
Intramuscular or Subcutaneous Intra articular	Rs.	7/- 10/- 16/-	6	*.	Rs.	3/-	
XIV Special Nursing/Attendants				- (	Gr. 1	G	i. II
(a) Special Nurse—per shift of 12 hours (b) Attendant—per shift of 12 hours	F.			Rs. Rs.	25/- 10/-		16/- 8/-
The second secon							

#### XV. Blood Transfusion

(I) Blood

Rs. 120 per 150 ml.

(ii) Blood belonging to Rh neg. group

Rs. 180 per 25q ml.

(Charges will be the same for both Group I and Group II cities).

#### AVI Operation Theatre Charges/Labour Room Charges.

Up to a maximum of Rs. 100/- is reimbursable for both Group I and Group II cities,

#### XVIII Simple, Minor and Major Surgeries

- (A) All operation which does not equire general anaesthesia may be treated as simple an asurgery unless concerned CMO decides otherwise.
- (B) The following operations will be regarded as minor operations:

#### Clamaral surgery ......

- (i) Inquinal Hernia-Unilateral (not strangulated).
- (II) Hydrocele all fhrms, except when skin excision is involved.
- (III) Anal fissure/fistula in Ano:
- (IV) | Superficial cyst or Non-malignant tumer.
- (v) Suprepublic Cystostomy/dilatation of uretha under general anaesthesia.
- (vi) Simple Harelip without cleft Plate Imperforated Anus.
- (vii) Drainage of Liver Abscess.
- (VIII) Rib Resection.
- (the) ! Tracheotomy. 5

### Orthopsadix surgery . . . .

Closed Reduction and Plastering of all Fracturs.

Alb Fracture (Simple).

peration except removal of eye-ball.

#### Oral surgery

(I) Impacted wisdom tooth.

#### E.N.T.

- (i) S.M.R.
- (ii) Antrostomy.
- (III) Peritonciller Abscess.

#### Gynaecological & Obstetrical operations

- (i) D & C.
- (II) D & E.
- (III) D & C & Coutory.
- (iv). Simple Amputation of Cervix.
- (v) Polypectomy.
- (vi) Local Valvectomy.
- (vii) Removal of Vaginal Cyst.
- (vill) Vaginal Ligation/Purpural Tubectomy.
- (C) All other operations except mentioned in the above and requiring general angesthesia may be regarded as major surgery.

#### Travelling Allowance

- Travelling allowance may be paid in the following cases:
- (a) Actual expenditure incurred by the patient in travelling, subject to maximum of a single Rail fare by the class to which the employee is himself entitled as on transfer from the Headquarters of the employee to the place of medical treatment and back will be reimbursed. No daily allowance will be allowed.
- (b) Where an attendant accompanies a patient on the authority of the Chief Medical Officer, actual Rail fare by II class for such an attendant may be also be reimbursed. However, in case an attendant travels by higher class and in the circumstances of the case the Chief Medical Officer considers travelling by attendant in a higher class is justified, actual fare of such higher class may be reimbursed, subject to such higher class is class being not higher to which the patient is entitled. No daily allowance will be allowed.
- (e) In case an escort is deputed by the Company, (such escorts are normally medical or para-medical persons) the escort will be considred as on duty and shall be entitled to TA and DA as per Company Rule.

## Procedures to be Followed While ordering Reimbursement

- 9. All claims for reimbursement will be submitted in the proforms on Form No. II in Annexure II along with the supporting vouchers, cash memos, receipts, etc. to the Controlling Officer who will carefully scrutinise each claim applying the relevant rules and orders before allowing reimbursement. The Controlling Officer of the employee may, after consultation with AMA or CMO, disallow any claim which are not covered by the Rules and Orders of the company or otherwise not admissible or if not satisfied about the genuit neness of the claim.
- 10. Claim will ordinarily be entertained only if preferred within six months from the date of completion of treatment. However, cases after six months will be admissible only when approved by the competent authority who has been delegated with powers to accept time-barred claims.

#### Oral surgery

(i) 'Impacted wisdom tooth.

#### E.N.T.

- (i) S.M.R.
- (ii) Antrostomy.
- (iii) Peritonciller Abscess.

#### Gynaecological & Obstetrical operations

- (i) D&C.
- (ii) D & E.
- (iii) D & C & Coutory.
- (iv), Simple Amputation of Cervix.
- (v) Polypectomy.
- (vi) Local Valvectomy.
- (vii) Removal of Vaginal Cyst.
- (vili), Vaginal Ligation/Purpural Tubectomy.
- (C) All other operations except mentioned in the above and requiring general anaesthesia may be regarded as major surgery.

#### Travelling Allowance

- 8. Travelling allowance may be paid in the following cases:
- (a) Actual expenditure incurred by the patient in travelling, subject to maximum of a single Rail fare by the class to which the employee is himself entitled as on transfer from the Headquarters of the employee to the place of medical treatment and back will be reimbursed. No daily allowance will be allowed.
- (b) Where an attendant accompanies a patient on the authority of the Chief Medical Officer., actual Rail fare by II class for such an attendant may be also be reimbursed. However, in case an attendant travels by higher class and in the circumstances of the case the Chief Medical Officer considers travelling by attendant in a higher class is justified, actual fare of such higher class may be reimbursed, subject to such higher class is class being not higher to which the patient is entitled. No daily allowance will be allowed.
- (c) In case an escort is deputed by the Company, (such escorts are normally medical or para-medical persons) the escort will be considred as on duty and shall be entitled to TA and DA as per Company Rule.

## Procedures to be Followed While ordering Reimbursement

- 9. All claims for reimbursement will be submitted in the proforma on Form No. II in Annexure II along with the supporting vouchers, cash memos, receipts, etc. to the Controlling Officer who will carefully scrutinise each claim applying the relevant rules and orders before allowing reimbursement. The Controlling Officer of the employee may, after consultation with AMA or CMO, disallow any claim which are not covered by the Rules and Orders of the company or otherwise not admissible or if not satisfied about the genul neness of the claim.
- 10. Claim will ordinarily be entertained only if preferred within six months from the date of completion of treatment. However, cases after six months will be admissible only when approved by the competent authority who has been delegated with powers to accept time-barred claims.

## Physiotherapy

10/-. Rs. 16/-Rs. per sitting per sitting

Gr. 11

benn	injec	rtion	Ch	arg	83	i
間,カチカカイモ	0750 I <b>#</b> 1737			100		

Wilden Alberte and

(III) injection Charges	By a Regd. Medical Practitioner	By a Regd. Pharma- clst/Regd. Nurse
Intramuscular or Subcutaneous Intravenus Intra-articular	Rs. 7/- Rs. 10/- Rs. 16/-	Rs. 3/-

## XIV. Special Nursing/Attendants

XIV. Special Norsing/Accommune	Gr. 1 Gr. 11
(a) Special Nurse—per shift of 12 hours (b) Attendant—per shift of 12 hours	Rs. 25/- Rs. 16/- Rs. 10/- Rs. 8/-
61	may off Courses

## XV. Blood Transfusion

Blood Transfusion	Rs. 120 per 250 ml.
(i) Blood	
	Rs. 180 per 25d ml.
(ii) Blood belonging to Rh neg. group	

(Charges will be the same for both Group I and Group II cities).

## MVI Operation Theatre Charges/Labour Room Charges.

Up to a maximum of Rs. 100/- is reimbursable for both Group I and Group II cities.

## XVII. Simple, Minor and Major Surgeries

- (A) All operation which does not equire general anaesthesia may be treated as simple an asurgery unless concerned CMO decides otherwise.
- (B) The following operations will be regarded as minor operations:

## General surgery :- ....

- (i) Inquinal Hernia-Unilateral (not strangulated).
- (II) Hydrocele'all fhrms, except when skin excision is involved.
- (iii) Anal fissure/fistule in Ano:

00 . 1

- ((IV) & Superficial cyst or Non-malignant tumer.
- (v) Suprapuble, Cystostomy/dilatation of uretha under general anaesthesia.
- (vi) Simple Harelip without cleft Plate Imperforated Anus.
- (VII) Drainage of Liver Abscess.
- (VIII) Rib Resection!
- ((x) | Tracheotomy.'S

## Orthopaedix and derype

- (I); Closed Reduction and Plastering of all Fracturs.
- Rib Fracture (Simple).

n except removal of eye-ball.

or neps populate

#### Part reimbursement of Medical Expenses

- Normally, a claim for medical reimbursement will be entertained and allowed on the completion of treatment of the patient. But, in case a patient is suffering from acute of chronic diseases like Cancer, T.B., Leprosy, heart disease, mental or any other diseases where the treatment is prolonged and spread over a period of more than 30 days, reimburse ment of medical expenses maybe allowed at intervals of every 15 days, at the discretion of the Controlling Officer.
- 12. Advances for Medical Attendance and Treatment to Entitled Employees
- (a) The Controlling Officer may, on the recommendation of the authorised medical attendant, grant an advance for medical treatment.
- (b) The advance will be admissible subject to the following terms and conditions:
  - (i) The amount of advance shall not exceed 2 month's pay of the entitled employee or Rs, 2000/- or the amount as certified by the Authorised Medical Attendant/Dy MS/CMO to be the approximate cost, whichever is less.
  - (ii) In exceptional cases, where medical advance more than Bs. 2000/- is needed, sanction of CMO and functional director will be necessary.
  - (iii) The advance shall be adjusted against the reimbursement of medical expenses that is admissible under the rules and any excess amount, shall be recovered from the employee concerned.
- 13. Financial Power to Sanction on Reimbursement of Medical Bills
- (a) Respective Controlling Officers will have full financial power to sanction reimbursement of medical bills for the treatment taken within or outside the district/station, if the bills are otherwise found complying with the provisions of CIL Medical Attendance Rules.
- (b) All complicated or doubtful claims should be processed through the CMO before sanction is accorded by the Controlling Officer.

#### CHAPTER VI

# RULES RELATING TO MEDICAL FACILITIES IN RESPECT OF PIECE RATED, DAILY RATED AND MONTHLY RATED EMPLOYEES

Autor relating to medical facilities in respect of piece rated, daily rated and monthly rated employees guided by NCWA except the monthly rated non-executives of Ex-NCDC who were guided by Corporation Rules framed by NCDC and appointed before 15.8.67 and also those non-executives guided by Civil Rules, Railway Rules, those Ex-NCDC non-executives who are getting medical reimbursement as per CMAL/CIL Medical Attendance Rules and also those who are getting medical allowance of one month's pay in a year.

The Rules contained in this chapter exclusively apply to employees covered in the title hereof and also the members of their family if eligible as per Rules 12. Chapter II.

- Buch employees and their family members are entitled to free medical treatment only to the extent available at the Company's hospital/dispensaries and the hospitals maintained by Coal Mines Labour Welfare Organisation. In special cases, they may also be allowed for treatment in a Government Hospital/Local Self Government Rospital.
- If the medicines prescribed by the Colliery Medical Officers are not available in the dispensaries, nor purchased and supplied by the Colliery Management and have to be produced by the workmen themselves, the cost of the same will be reimbursed on presentation of the cash memo. If the listed medicines as prescribed are not available, alternatives certified by the Colliery Medical Officer will be permissible and the cost will be reimbursed, if the medicines have to be purchased by the workmen.
- In cases referred by the competent Medical Authority of the coal company to outside hospitals the expenditure for treatment shall be reimbursed at the rates applicable for general ward of the hospital concerned. The patient and the escort, if recommended by the Medical Officer of the Company will be eligible for T.A. (excluding D.A.) from the Company.

to convenience before

- If a workman falls seriously ill where on sanctioned leave at his home town and he has to be hospitalised in a Government or a Local self-government hospital, hospitalisation expanditure including the cost of medicine will be reimbursed by the Company at rates applicable for the general ward of the hospital.
- In cases referred by the Medical Officer of the colliery to Coal Mines Welfare Organisation hospitals, if the medicines prescribed by the Doctors are not supplied by the CMWO hospitals or the coal company hospitals/dispensary and have to be purchased by the workman, the cost of the same shall be reimbursed by the coal company and the company will claim the amount from the CMWO.
- 7. Free diet will be supplied to indoor patients in the Company hospitals.

Note: The usual prescribed procedure for reimbursement of medical expenses will, however, have to be observed. The essentials are given below.

Medical Reimbursement of Employees Mentioned in this Chapter and their Entitled Family Members

- (i) Will be paid from the hospital/dispensary drug imprest on production of cash memu.
- (II) On production of;
  - -Reference letter;
  - -Prescriptions/cash memo;
    - -Discharge certificate; and
    - -Essentiality certificate.
- (III) Same as (ii) except reference letter.
- (iv) On production of CMWO's prescription, cash memos.

#### CHAPTER VII

# TREATMENT OF NON-ENTITLED PERSONS IN COMPANY'S HOSPITALS/DISPENSARIES

Non-entitled cases will not be treated or admitted under normal circumstances. However, serious/emergency cases may be treated/admitted on the discretion of M.O.I./C. hospital/dispensary subject to availability of beds and/or other facilities.

2. The following are the charges to be levied from non-entitled patients treated in the

Company's hospital/dispensary:

I. Accommodation

(a) General ward

 In respect of close relation of employees who are not entitled to free treatment i.e. brother, sister, father-in-law, mother-inlaw etc.

Rs. 12.00 per day (inclusive of diet)

(ii) Employees of Government departments like Directorate of Mines Safety, Railways, Post Office, Police Department etc. located in company areas and their wives/husbands/dependent children

Rs. 20.00 per day (inclusive of diet) Rs. 20.00 per day (inclusive of diet)

(iii) In respect of others not mentioned above

Note: Minor children below 5 years (age to be assessed by Company Doctor) shall be charged half of the above rates.

(b) Cabin for all classes of patients of single bed (non-airconditioned) inclusive of diet

Item No. 1(a) (i)
Rs. 50/- per day
Item No. 1(a)(ii)
Rs. 65/- per day
Item No. 1(a)(iii)
Rs. 65/- per day
Rs. 75.00 per day

(6) Cabin (air-conditioned) for all classes

II. Injection Charges for OPD Patients

(i) I. M. Injections (ii) I. V. Injections III. Dressing Charges Rs. 4.00 per injection Rs. 8.00 per injection

Rs. 4.00 for each dressing (minor) Rs. 8:00 for each dressing (major)

IV. Delivery Charges, etc.

Cabin Genl. ward Rs. 250.00 Rs. 150.00 (a) Normal delivery/abortion/miscarriage Rs. 250.00 Rs. 350.00 (b) Assisted labour requiring services of Doctor (a) Operative labour viz. forceps, version including Rs. 300.00 Rs. 500.00 caesarian section Operation Fees Rs. 600.00 Rs. 400.00 (a) Major surgery Rs. 450.00 Rs. 300.00 (b) Minor surgery requiring G.A. Rs. 100.00 Rs. 50.00 (c) Simple surgery

- Note: (1) Plaster materials should be purchased by the party. Cases operated as OPD cases shall pay charges as per rates for patients in general ward.
  - (2) Classification of operations vide Chapter V. of M.A. Rules

## Dantal Operation Charges for Indoor and OPD Patients of all Classes

(a) Tooth extraction (b) Filling of Tooth Rs. 15.00 per tooth Rs. 20.00 per tooth

Pathological Examination Charges for Indoor and OPD for all Classes of

Ordinary.

Rs. 20/-

Rs. 40/-12
Classification of type of pathological test—vide Chapter V of M.A. Rules.

Marky Examination for Indoor and OPD Patients of all Classes

Hates for all non-eltitled panients will be as per Chapter V, Rule 9 (viii) (Group I) at M.A. Rules.

Physiotherapy

Rs. 10/- per sitting

Madicines

medicines to be charged at actual cost plus 10% as incidental charges. Common and mixture, powder, cintment etc. may be supplied free of charges to non-entitled.

Consultation Charges at OPD for all Class of Patients

MO/MS/Sn Specialist

Rs. 40.00

By MB/Specialist

Rs. 20.00 Rs. 15.00

Rs. 15.00 and other charges paid by non-entitled patients should be depo-

the Car Letter as mentioned in Chapter V of M.A. Rules.

TMO is authorised to fix the rates of services rendered which are not covered by these

amount of charges realised on account of treating non-entitled patients should be a separately in the Annual Financial Statement.

manual in respect of near relative of employees may be adjusted from the salary bill amployee concerned. An undertaking from employee concerned shall be obtained a salary bill and a salary bil

mailents shall deposit 10 day's approximate charges (accommodation charges) and the etc.) in advance prior to admission.

#### CHAPTER VIII

#### RULES RELATING TO MEDICAL EXAMINATION

#### Pre-employment Medical Examination

a Company Medical Officer or by a Medical Board Consisting of company's Medical Officers formed as per orders of CMO

Medical examination will be done as per standards laid down below

A standard form should be used to record the findings: (vide Annexure Form No. III), The Form No. IV (vide Annexure) requires to be filled up by the candidate. Physical standard for pre-employment medical examination. The minimum physical standard for the above is as under:

- A. Minimum Physical Standard for all Classes of Employees Directly Connected with Coal Mining (Mining, Geological, Survey, Mechanical, Electrical, Nics, Open Cast, Personnel, Mining Trainees, Authorised Drivers and Watch and Ward Employees, Etc.)
- (i) A candidate must be in sound mental and physical health and free from any physical defect likely to interfere with the efficient performance of his duty. He should not be grossly over-weight or under-weight.
- (II) Minimum standard of height may be relaxed to 60" in case of watch and ward candidates belonging to races such as Gorkhas, Garhwallis and Assamese Tribals etc. Height must be taken without shoes.
- (iii) Hearing must be good and there should be no progressive disease affecting hearing.
- (Iv) Speech must be without impediment, excluding stammering of moderate degree.
- (v) Chest measurement: The girth of the chest in full expiration should be recorded to determine the range of expension (between the minimum and maximum). In all doubtful cases the functional capacity of the lungs may be tested.

In the examination of candidates the following table of correlation of height and chest girth will be applied.

Height		Chest Measurement				
In inches	In cm	On full expiration		On full inspiration		
	_	In inch	In cm	In inch	In cm	
Between 621 & 65	Between 159 & 165	30	75	32	- 81	
Between 65 & 68	Between 165 & 173	31	79	33	84	
Between 68 & 70	Between 173 & 178	32	81	34	86	
Between 70 & 72	Between 178 & 183	33	84	35-1	90	
More than 72	More than 183	34	86	36-1	93	

- (vi) Chest must be well formed, the lungs and heart must be normal. After 20 hops (or stands and squattings) pulse should return to normal within 3 minutes. There should be no evidence of Chronic palmonary, bronchial, laryngeal, valvular diseases or gross arterioseleresis.
- (vii) Blood pressure should be normal in recumbent posture
- (viii) The teeth must be in good order, decayed or broken teeth must be properly stopped or crowned and deficient teeth replaced by artificial teeth where necessary. Gums should be in healthy condition.
- (ix) There should be no hernia.
- (x) There should be no hydrocele. In case there is a hydrocele the person may be permitted to get operated within 3 months and if the operation is successful, he may be declared fit.
- (xi) The limbs, hands, fingers, feet and toes must be well formed and developed with
- (xii) Candidates should not suffer from chronic or extensive ulcers, ailments of skin of other system. Subjects of Palsy, Paralysis and Epitepsy are to be rejected.
- (xiii) Vision should be of the following standards:

	Naked eye	Corrected with glass	es Near visio
Better eye	6/12	6/6 0.6	
Vorse eye	6/24	6/9	0.8
or Each eye hypermetropia	6/18	6.49	0.8

#### Note:

- (a) Total Myopis in the above standard should not exceed-6D.
- (b) Manifest Hypermetropia should not exceed--3D, total.
- (c) In case of total error of refraction about—2D. Ophthal-moscopic examination should be conducted to detect any progressive morbid changes of the choroid, or retina.
- (d) Night blindness and colour blindness: Candidate's night vision will be tested to ascertain whether or not he suffers from night blindness. Tests also should be done for colour blindness.
- (a) In case of defective vision due to nebula of the comea the candidate will be rejected
- Squint or any morbid condition subject to risk or aggravation or recurrence in either eye may cause rejection of a candidate.
- (xiv) Urine should be examined particularly for the presence of sugar and albumin.
- (xv) Examiners will use their own discretion as to the scope of the general physical examination in each case, and will judge cases on their merits, taking into consideration the prospective duties of the examinees. In the examination of the candidate's hearing the speaking voice test will be employed.

The examiner will speak in an ordinary conversational voice, the examinee will be at a distance of three yeards and with his back to the examiner, the ears will be eparately tested by the occulsion of other ear. It should be uncerstood that the question of fitness involves the future as well as the present, that the main object of medical examination are to secure continuous effective service, to prevent early retrement and payments in case of premature death or payments of arcidents compensation attributable to physical deficiencies and unusual medical expenditure on imployees of poor physique.

- (xvi) Particulars against items Nos. 1 to 4 in the prescribed medical examination form are to be furnished by the appointing authorities concerned to the medical examiner.
- The report of the medical examination should be treated as confidential.
- (aviii) Personal statement and declaration should be obtained from all candidates for medical examination in the prescribed form.
- Minimum physical standard required for recruitment to posts other than group 'A'.
- (i) A candidates must be in good mental and bodily health and free from any physical likely to interfere with the efficient performance of his duty. He should not be grossly over-weight or under-weight.
- (III) Hearing must be good and there should be no progressive disease affecting hearing.
- (iii) Speech must be without impediment, stammering of moderate degree excluded.
- (iv) Chest must be well formed with minimum girth not less than 30 inches (76 cm) on full expiration and not less than 32 inches (81 cm) on inspiration.
- (v) Height must not be less than 60 inches without shoes.
- (vi) Respiratory system: Lungs should be sound and free from any chronic bronchial or laryngeal disease.
- Circulatory system: There should be no evidence of enarigement of heart, chronic vaccular disease or gross arteriosclerosis. Blood pressure should be normal in recumbent normal. Pulse should return to normal within 3 minutes after 20 hops or standard and aguattings.
- (viii) There should be no Harnia.
- There should be no Hydrocele. A person with Hydrocele may be declared fit after successful operation within three months after pre-employment medical examination.
- (a) The limbs, hands, fingers, feet and toes must be well formed and developed with

(xi) Candidates should not suffer from chronic ailments of skin or other system. Subject of Palsy, Paralysis and Epilepsy are to be rejected.

(xii) Vision should be of the following standard:

Class of service		Better eye (Distant	With glass	or Without glas≶	Worse ey (Near
		vision)	worseeye.	better eye	vision)
Class   & II employees		6/9	6/12	0.6	8.0
mina i di ii si Bistasa			70		
		6/6	6/18	0.6	0.8
Class II Senior Subordinate					
employees		6/12	6/12	0.6	-
			or		
		6/9	6/18	0.6	
Junior Suborcinate Class III,	Section 1	6/12	Nil	No stan	dard
Class IV employees excluding		.000MIH-0000	01		
watch & ward personnel		6/18	6/18		

Note: Total Myopia should not exceed 6D, Hypermatropia (total) should not exceed —4D. For total myopia over—4D presence of any progressive disease must be eliminated by fundus examination.

- (xiii) Alimentary system: The candidates should have sufficient number of natural or artificial teeth for mastication and healthy gums.
- (xiv) Genito urinary system: There should be no evidence of Kidney disease and uring about the particularly examined for presence of sugar and albumin. Duration of pregnancy if present, should be recorded in case of female candidates.
- (xv) Skeleto-nervous system: The limbs should be well formed and developed and function of all limbs should be within normal limits. Any deformity should be recorded. There should be no evidence of paralysis, palsy and epilepsy...
- (xvi) Cutaneous system: There should be no evidence of extensive and chronic skin
- examination in each case, and will judge cases in their merits. For hearings the speaking voice test will be employed. The examiner will speak an ordinary conversational voice; the examinee will be at a distance of three yards and with his/her back to the examiner; the ears will be separately tested by the occulsion of the other ear.
- the bould be understood that the question of fitness involves the future as well as the present that the main object of medical examination are to secure continuous effective service to prevent early retirement and payments in case of pre-mature death or payments of accident compensations attributable to physical deficiences and unusual medical expensions on employees of poor physique.

- (xviii) The blood pressure of candidates will be examined. The excamination of will be compulsory for all categories of candidates and the question should be passed in the presence of the examiner.
- (xix) Particulars against item No. 1 to 4 in the presenced Medical Examination Foldare to be furnished by the appointing authorities concerned to the Medical Examination
- (xx) The report of the medical examination should be treated as confidential
- (xxi) Personal statement and declaration should be obtain from all candidates for medicities examination in the prescribed form.

#### Medical Examination for Re-employment

In case of re-employment after superannuation, the person concerned will be medically a
examined by a Medical Board constituted by CMO of the company for issue of a certificate of fitness. No fees will be charged for such medical examination except for investigation, facilities for which are not available in the company.

#### 3. Medical Examination for Retirement on Medical Ground

- (i) An employee who desires to retire on medical grounds or an employee who has been reported as permanently incapable of performing his duties on medical grounds, will be examined by a Medical Board constituted by CMO.
- (ii) An Appealate Medical Board will be constituted by CMO, if necessary,

#### 4. Medical Examination in Connection with Leave on Medical Ground

- (a) Leave application of a Company employee on medical grounds should be supported by a medical certificate either from a Doctor of the Company, or from a private registered practitioner in case where Company's Doctor is not available at the station. In the former case the certificate of fitness should be obtained from the Doctor of the Company and in the latter case the certificate of fitness obtained from the private registered practitioner should be countersigned by a Doctor of the Company.
- (b) In case of application for Leave on medical ground, or for prolonged illness or where administration may so desire, the certificate of registered practitioner for leave on medical ground should be issued or countersigned by the Doctor of the Company as the case may be.
- (c) In case referred to above where certificates are issued or countersigned by the Doctor of the Company, no fees will be charged.
- (d) Employees returning to duty from medical leave should report to the Company Medical Department either with or without medical certificate etc. as the case may be, for certification of their fitness to return to duty. Belated submission of fitness certificate to the Company Medical Department for countersignature will not be entertained.

#### 5. Periodical Medical Examination

Periodical medical examination of coal miners will be conducted as per Mines Act, 1952 and Mines Rules, 1955. The procedure of above examination will be as per said Act and Rules.

#### CHAPTER IX

#### SAVINGS

## Relaxation of Rules

- The Chairman, CIL and CMDs of the subsidiery companies may relax the procession of any of these rules in exceptional circumstances.
- Cases already decided shall not be reported.
- 3. These rules can be withdrawn at the discretion of the CIL without any notice and assigning any reason thereunder.
- CIL reserves to itself the right to alter and/or to amend any rule or issue a new rule thereunder at any time and without assigning any reason thereof.
- These rules are applicable when medical treatment is undertaken in India. There
  is no provision in these rules for treatment outside India.

#### COAL INDIA LI MITED

#### "COAL BHAWAN" 10. NETAJI SUBHAS ROAD,KOLKATA-700 001

Ho CIL/C5A(vi)/50706/1-IS

Dt. 10.07.2003.

#### OFFICE MEMORANDUM

Sub:- Amendment of Rule 12(iii) and (iv) i.e. the defination of 'Family' of chapter -II of Medical Attendance Rules of Coal India Limited.

The CIL Board of Directors in its 208th meeting held on 25th June 2003 has approved the following amendments to the existing provisions of rule 12(iii) and rule 12(iv) i.e. the defination of 'Family' of Chapter-II of Medical Attendance Rules of CIL:

Billio No.	Existing Provisions	Amendment
12 (iii)	aged upto 18 years, smdent	son: Children would mean unmarried son but aged upto 25 years or till he starts and Earning whichever is earlier, student but unmarried son and unmarried and unemployed daughter.
12(10)	who normally reside with Company's employee concerned a whose total monthly income does exceed the pay of the Compan employee, subject to the maxim	the wholly/mainly dependent parent the who normally reside with the and Company's employee concerned and not whose total monthly income does not also exceed the pay of the company's employee, subject to the maximum on income of the parent being Rs.1500/- per month.

The above amendment will be effective from the date of issue of the

Sd/( N.R. JANAKIRAMAN )
General Manager(Personnel)
CIL. Kolkata

Office of the Chief of Med. Services, BCCL Koyla Bhawan, Koyla Nagar, Dhanbad-826005

MCCL/CMS/F-126/

1050 (A)

Dated: 22.07.2003

remarked for information to :-

114 Medical Services, C.H., Dhanbad.

MAN Hospital Incharge.

MAN Area Medical Officer.

MIN CMO, PHC/FW, Kalyan Bhawan.

Medical Supdt. IfC, Koyla Nagar Hospital/Apex Medical Board/Karmik Nagar Dispensary.

10 CMS, BCCL Sr. Finance Officer, Medical Deptt., Keyla Bhawan.

AAAI file/Medical Attendance Rules file/

Marker copy.

(Dr.A.K.Chakraverty) Medical Supdt.(HO)

## कील इपिछ्या लिमिटेड

10, नेताची पुताब रोड, कनकसा-760 001 कोन : 220-9980, शाम : कोलद्रश्विया टेथेक्स : 21-7180, सीमाईएस इन



Coal India Limited

10. HETAJI BUZHAR KOAD, CALCUITA-TTO LIT PHOTE: 220-8080, GRAMS, CGALIKET

TEC 22: 21-7120 CH 12"

Dated: 20.05.2000 29 5 - 6

No CIL/CSA(vi)/50706/ 861

#### OFFICE MEMORANDUM

The CIL Board of Directors at its 241st meeting held on 24th March, 2008 has approved the following amendments to the existing provisions of Rule-12(i) and incorporate Note-(v) in the definition of "Family" of Chapter-II of Medical Attendance Rules of CIL.

Hale No.	Usesting provisions rules .	Amendment
Hule-126+	The Instead of female Company employee residing with and wholly dependent on her may also be allowed this concession.	To be deleted
		To be added/incorporated  (v). Spouse will continue to be dependent for the purpose of these rules, irrespective of his/her official status as an employee elsewhere. This will be subject to submission of a declaration that he/she has not claimed the medical reimbursement from his/her employer to avoid double claim for an individual and a certificate from his/her employer to the effect that the Company is not paying medical reimbursement

The above amendment will be effective from the deleter issue of the marnorandum;

This issues with the approval of the Competent Authority.

(H.Rdjdr)

GeneralManager(Pors.)

Distribution

LUMBERT BETT OF WELSTELL SELMCLEMEDIL.

LINDSHIP IN LODG & DINKING OF

United the rotal Subsidiaries.

LDCP&OLCMPDII

SCYO, CH

ACLM, CB.

JCGM, CH., New Delhi CGM, DCCqDankuni CGM/NEC, Guwahati, Assant,

R.J.D. HCM, Rauchi J.D. Singereni Colliery, Singereni, Kothagudem, A.P.

9.CGM(MP&BC) IS to Chairman, CH. 1S to D(P&BC), CH. (CGM(F), CH.,

10.15 CEMBIRD CIL, Kolkata Sc.ES to GMO), CIL.

ILAH HODS AIFRSON.

12 Goard Lile

Color Sy Es/Ts + CMD

COAL INDIA LIMITED

'COAL BHAWAN'

16 (1111) \* 10 NETAJI SUBHAS ROAD

CALCUTTA-700001

Med 57261 (147) / 760

Dated, 11th Nov'99.

## OFFICE MEMORANDUM

Revision and amendment of Medical Attendance Rules of Coal India Limited.

CIL Board in its 185th meeting held on 30th September, 1999 approved moder Chapter-V of Medical Attendance Rules of CIL. Accordingly, the relevant of Charges under Chapter-V (as per enclosed Annexure) of MAR stands modified in terms of this order.

This revision of rates as per Annexure enclosed hereto will be effective from the

Havised schedule of charges.

12.1989.

(C. H. KHISTY) DIRECTOR(P&IR)

hairman-MD, ECL, BCCL, CCL, WCL, SECL, NCL, MCL, CMPDIL

Director(Tech)/Director(Fin), ClL, Calcutta

Director(P), ECL, BCCL, CCL, WCL, SECL, NCL, MCL

Director-Incharge, NEC, Guwahati

Director(F), ECL, BCCL, CCL, WCL. SECL. NCL. MCL

Director(O), CMPDIL, Ranchi

Recutive Director(MS)/CIL, BCCL, Dhanbad

All CMO, ECL, BCCL, CCL, WCL, SECL, NCL, MCL, Kalla & Jagjeevan Nagar Hospitals.

thief Vigilance Officer, CIL, Calcutta.

CGM(P), CIL, Calcutta.

COM(S&M)/CGM(F), CIL, Calcutta

All HODs, CIL, Calcutta

GM/GM(Admn.)CIL, Delhi.

All RSOs, CIL

Dy MS, CIL, Calcutta.

information to:-1. All Members of Standardisation Committee of JBCCI.

- 2. All Members of Sub-committee of JBCCI on MAR.
- 3. TS to Chairman/TS to D(P&IR), CIL, Calcutta.
- 4. ES to Chairman/D(P&IR),CIL, Caicutta.

#### AS PER CHAPTER- V OF MEDICAL ATTENDANCE RULES

The charges for medical reimbeursement in cases of treatmement by private practioner in private clinic and in private institution will be subject to ceiling as indicated below.

	Group I Metropolitan Cities & all State Capitals	Group II  CII. Subsidiary Hqrs & other big cities where patients are referred Code.	Group III All other places,				
Consultation Charges							
General Practitioners	80/-	60/-	40/-				
Specialist	150/-,	125/-	100/-				
Super Specialist	_ 250/-	175/-	125/-				

Notes:

Specialist should be consulted only after a primary consultation with the authorised attendant/general practioner.

If any subsidiary has any arrangement with local specialist/practioner, the rates of-

above schedule of charges.

2	Accommodation					
1	Non Executives	300/-	200/-	150/		
li.	Executives upto E5	500/-	300/-	200/-		
ini	Executive M1 & above	650/	500/	300/+		
iv	Board level	Actual	Actual	Actual		
V	For ICU / ICCU (All Executives)	Actual	Actual	Actual		
3	Surgery					
i	Simple	400/-	325/-	200/-		
ii	Minor	1000/	700/-	500/-		
iii	Major & Radical	5000/-	4000/-	3500/-		
4	Anesthesia					
i	Minor	500/-	300/-	1 250/-		
ii	Major	1000/-	700/-	500/-		
iii	QT/Labour room	800/-	500/-	300/-		
5	Maternity					
î	Normal Delivery/Abortion/MTP	700/-	500/-	400/-		
11	Minor operation/ Assisted delivery (Forcep/Vacuum)	1000/-	700/-	500/-		
iii	Ceasarian section (Major operation)	5000/-	40(x)/-	3500/-		
_	The second of the second contract of the seco					

Votes :

The classification of the type of surgery will be irrespective of the type of anaesthasia required. In case of loubt, clarification may be obtained from the CMS of the company.

comporary pacing to be regarded as minor surgery.

implementation of pace maker (external) should be charged as minor surgery. Cost of pace maker to be paid charactely. As regards the type of pacemaker to be implemented, specific justification of the operating briteon is to be obtained before the consideration of reimbursement.

Radiology	Gr.I	Gr.II	Gr.111
Radiography large size (x & ay)	100/-	80/-	70/-
	80/-	60/-	50/-
Medium size  X-ray after Berium meal	600/-	450/	450/-
	500/-	450/	450/-
a) Oesophagus only	500/-	450	450/-
b) Stomach & Duodenum	800/-	600/-	600/-
c) Enema (Large Intestine & Rectum)	1000/-	800/-	600/-
d) Full follow through	TUOW-	27.0	
Pyelography	7501	500/-	500/-
n) IV (Intravenous)	600/-	500/-	500/-
b) Retrograde	500/-	600/-	500/-
c) Oral Cholecystography	700/-		
d) I.V. Cholecystography	700/-	6007-	500/-
e) Bronchography/Myelography (No minor surgery charges)	700/-	600/-	500/-
f) Hysterosalpingography	700/-	600/-	600/-
g) Cysto-urethrography (No minor surgery charge)	700/-	600/-	600/-
h) Imaging/Ultrasonography (Upper Abdomen)	400/-	350/-	350/-
i) Imaging/Ulirasonography (Lower Abdomen)	450/-	. 350/-	350/-
j) Imaging/Ultrasonography (Whole Abdomen)	800/-	700/-	700/-
k) Angiocardiography	Actual(not exceeding pac	kage of National Heart Institute	economy class)
1) Angiography Cardiac Cath			T 7547
m) X-ray in operation theatre with portable M/c	2504-	150/-	150/-

mease of patients referred officially for super speciality services, operation charges and the off charges will be reimbursed at actual for all employees, both executives & nonexecutives.

ķ.	Dental .					
	a) X ray Plates Dental	50/-	50/-	40/-		
	b) Tooth extraction (per tooth)	50/-	50/-	40/-		
	c) Simple Impacted Tooth	100/-	80/-	. 60/-		
	d) Scalling(not more than 4 sittings	50/-	40/-	- 40/-		
	e) Filling	100/-	80/-	60/-		
	f)Root canal treatment(i) Anterior	250/-	200/-	150/-		
	g) Root canal treatment (ii) Posterior	350/-	250/-	250/-		
	Pathology					
	a) Ordinary	70/-	50/-	50/-		
	b) Special	100/-	90/-	70/-		
	e) Super Special	Actual	Actual	Actual		

1.

10	Injection					
	a) Intramuscular or subcutaneous	7.2.399.392	Rs.10/-			
	b) Intravenus					
	c) Intra-articular	1	ks.200/-Plus cost of Drug	1 1 1 1 1 1 1 1 1		
	d) Dressing Charges)		Rs.15/- OPD per dressing.			
-	e) Stiching charges	Total Control of	Rs.SO/- OPD			
11	Special Nursing	Group-I	Group-Il			
•	a) Special Nurse for 12 hrs.	100/-	80/-			
	b) Attendent for 12 hrs	40/-	30/-	-11/0-2		
12	EEG.	(a) A	wake 300/- (b) Sleep 350/-			
	ECG					
	(a) Doctors Chamber		80/-	- Philippi		
	(b)At Residence(certificate of immobility to be produced)	120/-				
13	Physiotherapy	Gr.I 40/-per day	Gr.II 30/-per day	7		
14	ECT	Actuals				
15	Blood	Actuals from Registered Licenced Blood Bank				
-		The second secon				

#### Note:

Doners should be encouraged. The to doners (entitled class of employees and also non employees) on recommendations of treating Doctors indicating no. of units required & scruiting by CMS of Subsidiary Companies may be considered.

( Open 1.1195)