

CERTIFICATE-A

*Under Central Service (Medical Attendance) Rules
(To be completed in the case of patients who are not admitted to hospital for treatment)*

Certificate granted to Mrs./Mr./Miss wife/son/daughter of
employed in the

(To be signed by the medical officer-in-charge of the case of the hospital.)

I, Dr. hereby certify :-

- (a) that I charged and received Rs..... for consultations on *(dates to be given)* at my consulting room/at the residence of the patient.
- (b) That I charged and received Rs..... for administering intra-venous/intra-muscular/sub-cutaneous injection on *(date to be given)* at my consulting room/the residence of the patient.
- (c) That the injections administered were not/were for immunizing or prophylactic purposes.
- (d) that the patient has been under treatment at *(name of the Hospital/Nursing Home)* /my consulting room and that the under mentioned medicines prescribed by me in this connection were essential for the recovery/prevention of serious deterioration in the condition of the patient. The medicines are not stocked in the *(name of the hospital)* for supply to private patients and do not include proprietary preparations for which cheaper substances of equal therapeutic value are available nor preparations which are primarily foods, toilets or disinfectants;

S.No	Name of the Medicines	Price
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
TOTAL		

- (e) that the patient is/was suffering from and is/was under treatment from to
- (f) that the patient is/was not given pre-natal or post-natal treatment.
- (g) that the X-ray, laboratory tests, etc., for which an expenditure of Rs..... was incurred were necessary and were under taken on my advice at *(name of hospital or laboratory);*
- (h) that I referred the patient to Dr..... for specialist consultation and that the necessary approval of the *(Name of the Chief Administrative Medical Officer of the State)* as required under the rules, was obtained.
- (i) that the patient did not required/required hospitalization.

**Signature and Designation of the
Medical Officer in-charge of the
case at the Hospital**

N.B. – Certificates not applicable should be struck off. Certificate (e) is compulsory and must be filled in by the Medical Officer in all cases.

Note 1 – In case where double the rates of consultation fees are charged by the A.M.A. for night visits (between 10 p.m. and 6 a.m.) the A.M.A. should furnish a certificate showing why the night consultation was necessary.

Note 2 – Officers, will be required to affix a revenue stamp on the Essentiality Certificate itself when the payment exceeds Rs.500/-. Separate receipts (stamped where necessary) would however be necessary from the Specialists for consultations.

Note 3 – Where the receipts issued by the Government hospitals on authorized forms (printed and numbered and the amount of these receipts is incorporated in the body of essentiality certificate) counter signature of such receipts need not be insisted upon.