

APPENDIX - XIV

ESSENTIALITY CERTIFICATE

CERTIFICATE 'A'

(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 Mr. .... employed in
the .....

- 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/subcutaneous injections
on ..... (dates to be given) at ..... my
consulting room/at 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 .....
hospital/my consulting room and that the undermentioned 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 hospital) for supply to private patient
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.

Table with 3 columns: Sl.No., Name of Medicines, Price. Rows 1-4.

- (e) that the patient is/was suffering from .....
and is/was under my treatment from ..... to .....
(f) that the patient is/was not given pre-natal or post-natal treatment.
(g) that the X-ray, Laboratory test etc. for which an expenditure of Rs. ....
was incurred were necessary and were undertaken on my advice at .....
..... (name of the 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 Officer of the
State) as required under the rules was obtained.
(i) that the patient did not require/required hospitalization.

Dated:

Signature of AMA/Designation of the
Medical Officer and Hospital/
Dispensary to which attached