

Subject: CHARTER OF DUTIES OF OFFICERS IN THE MEDICAL CADRE OF CENTRAL ARMED POLICE FORCES (CAPFs), ASSAM RIFLES (AR) AND NATIONAL SECURITY GUARD (NSG) [COMBINELY REFER AS FORCES]

After considering the existing role of Medical Officers at various levels in the Forces, their pattern of duty and practices being followed in different Forces, a board had deliberated on the duties and responsibilities of the medical officers and submitted its recommendations to the Ministry of Home Affairs.

Based on the examination of the recommendations of the board and the views of the Forces on the same, it has been decided that in supersession of all the earlier orders in this regard, the duties and responsibilities of the ADG(Med), Director (Med), IG(Med), DIG(Med) and GDMOs/Specialist Medical Officers in the Forces shall be as under:

1) The overall supervision and management of health care delivery system/ services

- a) The overall supervision and management of health care delivery system and services in a Force will be under the command of the DsG concerned (upto the level of Unit hospitals i.e. MI Rooms, Mobile Units and 10, 20 and 30 bedded hospitals) in consultation with the Director (Med) of the force as per the extant guidelines and instructions issued by the Ministry of Home Affairs.
- b) The overall supervision and management of health care delivery system and services through the composite/ referral hospitals will be under the command of the respective DsG of the Force under overall supervision of MHA through the ADG(Med).

2) Additional Director General (Medical)

- a) **Assisting MHA in the overall supervision and monitoring:** As head of the combined medical services of CAPFs, Additional Director General (Medical), will assist MHA in the overall supervision and monitoring of the health care delivery system and services at all levels.
- b) **Advising the DGs concerned regarding the management of health care delivery system and services in the forces:** He will advise the DsG concerned regarding the management of health care delivery system and services including the Composite/Referral Hospital of the Force and in general as per the extant guidelines and instructions issued/ approved by the MHA
- c) **Responsible for close supervision and monitoring of Health Infrastructure facilities in all Forces:**
 - i) He will inspect all the Composite Hospitals (CHs) at least once in a year and submit inspection/ visit report including shortcomings and remedial measures to respective DsG of the Force and MHA.
 - ii) He may also monitor 10, 20 and 30 bedded CAPF hospitals through Dir(Med), IG(Med), DIG(Med) and other Medical Officers, as the case may be.
- d) **Recruitment, Appointments, promotions, Transfer, Posting, Deputations:**

- i) He will render necessary advice on the following issues:
 - a. Recruitment of GDMOs, Specialists and Dental Doctors in Forces on a regular basis.
 - b. Engagement of GDMOs, Specialists and Dental Doctors on contract basis.
 - c. Part-time engagement of doctors on an honorarium basis at specific places.
 - d. Appointments/ promotions on the medical posts of the level of DIG and above.
 - e. Advise MHA on transfer-posting proposals of Specialists and GDMOs with PG qualification received from forces for consideration of MHA.
- ii) Advise and guide the Forces individually or jointly for the recruitment of GDMOs, Specialists & Dental Doctors and may issue instructions on the subject in consultation with MHA and MoH&FW, Govt. of India and with the approval of MHA.
- iii) Ensuring implementation of MHA's guidelines by the Forces for the recruitment of GDMOs, Specialists, Dental Surgeons and doctors appointed on contract.
- iv) As already circulated vide this Ministry's Order No. I.45020/7/2012-Pers.II dated 5.7.2012, inter-force transfer/ posting/ deputation of all the medical officers in all streams and at all the levels will be done by the Ministry of Home affairs in consultation with the ADG(Med).

e) SHAPE categorization and Implementation of SHAPE Policy:

- i) Assist MHA in regulation and monitoring of medical categorization system (popularly referred as SHAPE categorization) in its totality
- ii) He will ensure the proper implementation of SHAPE System Issuing clarifications and resolution of disputes, if any, arising in the implementation of SHAPE System.
- iii) Assist DGs in dealing with the appeals against the SHAPE categorization through respective medical Directorates.
- iv) Recommending cases to the Highest Medical Board under the Home Secretary for consideration whenever proposals in this regard will be received by the forces.

f) Overall Cadre planning and management of Medical, Para-Medical and Nursing cadres in CAPFs: He will render necessary advice to the MHA, as and when sought by MHA and/ or have become necessary for reasons to be recorded in writing, on the issues relating to the -

- i) Overall Cadre planning and management of Medical, Para-Medical and Nursing cadres in Forces including Cadre progression, Cadre re-structuring etc.
- ii) Overall supervision of all General Duty Medical Officers (GDMOs), Specialists, Dental Officers.
- iii) Administrative and cadre management at the level of DIG (Med) and above.
- iv) Pay, allowances, perks and privileges of various medical cadres.
- v) Acceptance, Reviewing and /or initiating authority for the APARs of various medical posts as per the channel of rendition approved by the Government.
- vi) Changes in the APAR format of GDMOs/ Specialists/ Dental officers.

g) Formulation of policies and Standard Operating Procedures (SOPs) on matters relating to health care delivery system and services: He will render necessary advice on the formulation of policies and SOPs on the following matters relating to health care delivery system and services:

- i) Referring Force personnel to other/ higher/ referral centres/ hospitals.
- ii) Training of Medical and Para-Medical personnel
- iii) Biomedical waste management at all levels of hospitals.

- iv) Emergency evacuation of field casualties at every level.
- v) Disaster management
- vi) Implementing and Monitoring HIV/AIDS Action Plan of MHA.

h) Capacity Building, Training and Research relevant to CAPFs & AR:

- i) Recommending cases for permissions to GDMOs/Specialists/Dental Officers for Post Graduate Courses/ Higher Studies/ Foreign Assignments / Deputations / Courses in foreign countries and Training to MHA.
- ii) Advise MHA on formulation of regulations for the Training of Medical and Para-Medical personnel, including syllabus and training standards for the 10/20/30/50/100 and 200 bedded CAPF hospitals and other similar hospitals to be established.
- iii) Formulation and application of the policy for professional activities and development of medical/dental/nursing officers and other ranks by way of continuing medical education, workshops, training programmes, refresher courses, higher education courses etc. so as to keep the medical personnel updated at all levels.
- iv) Providing leadership for research in Medical and health care field. Plan and create suitable infrastructure for such research within the Forces. Provide a platform for interaction with academic and research institutions.
- v) Devising and implementing mechanism for statistical survey of the health of the force members on various health parameters and indices as feasible to create a sound information base for planning health policy for force members and their families.

i) Dealing with the other Medical Authorities as Representative of MHA. He will liaise with DG Health Services of Central/ State Governments, DG, Armed Forces Medical Services and other Medical Authorities as MHA's designated representative.

j) He will render necessary advice to the MHA, as and when sought by the Ministry regarding:-

- i) **Revision of SHAPE categorization from time to time**
- ii) **Empanelment of hospitals in the private sector:** Empanelment of hospitals in the private sector for the treatment of the Force personnel and their families.
- iii) **Periodical reporting to the MHA** regarding the day to day working and overall status of the Health Care System.

k) For performing the duties and responsibilities as mentioned above, ADG(Med) may seek assistance, advice or help of the Directors(Med) or other officers of the various forces.

l) Any other duty/responsibility/case relating to medical and health matters of the Force personnel assigned by the MHA, Government of India from time to time.

3) STAFF OFFICER TO ADDL. DIRECTOR GENERAL (MEDICAL)

As Staff Officer to ADG (Med), he shall assist ADG (Med) for discharging all the duties and responsibilities assigned to ADG (Med) and shall also be responsible for:

- a)** Office establishment of ADG (Medical) including controlling and monitoring the work of all the officers and staff posted in the ADG (Medical) Office and administration and discipline of the officers and staff of the ADG (Medical) office.
- b)** Putting up the proposals, requests from different Forces on the subjects related to Medical & Health Care of Force members and their dependents.

- c) Supervising, scrutinizing and monitoring movement of files/dak among Forces, MHA and any other agencies to and from ADG (Medical) office.
- d) To act as a nodal officer for HIV/AIDS Action plan among all Forces.
- e) Signing/issuing letter and instructions on the subjects approved/concurred by ADG (Medical) or desired by the MHA.
- f) Custodian of all stores and equipments held on charge of the ADG (Medical) office.
- g) Any other duty/responsibility assigned by ADG (Medical) or MHA from time to time.

4) DIRECTORs MEDICAL of CAPFs, AR and NSG

- a) **Assisting ADG (Med) in the overall supervision and monitoring:** As head of the medical set-up of a Force, he will assist ADG(Med) in the overall supervision and monitoring of the health care delivery system and services at all levels.
- b) **Advising the DG concerned regarding the management of health care delivery system and services in the force:** He will be responsible for advising the DG concerned regarding the management of health care delivery system and services in the force as per the extant guidelines and instructions.
- c) **Responsible for close supervision and monitoring of Health Infrastructure facilities and provision of Health care facilities in a Force:**
 - i) He will ensure timely & comprehensive inspections of all CAPF hospitals, including the composite hospitals and referral hospitals (50, 100 and 200 bedded hospitals), directly and through IG (M)/ DIG (M) concerned.
 - ii) He will also supervise all the existing 10, 20, and 30 bedded hospitals and any 10/20/30 bedded hospitals to be established in future through IG(M), DIG(M) and other Medical Officers.
 - iii) Ensuring proper and optimum utilization of the medical assets/ gazettes as well as the services of the contractual GDMOs/ Specialists in the Force concerned.
 - iv) Planning and executing comprehensive Medicare of troops during hostile situations, during war and when on internal security duty.
 - v) Circulating medical alerts and Monitoring situations during outbreak of epidemics/ pandemics and to make available the required drugs/ vaccines for the same.
 - vi) Supervising preventive management of epidemics/diseases.
 - vii) Monitoring HIV/AIDS prevention and control programme in the force.
- d) **Recruitment, Appointments, promotions, Transfer, Posting, Deputations:**
 - i) He will render necessary help, assistance and advice to DG and ADG(Med) on the following issues:
 - a. Recruitment of GDMOs, Specialists and Dental Officers or regular/ contract basis as per the extant instructions on the subject and issue necessary directives wherever required to subordinate formations.
 - b. Part-time engagement of doctors on honorarium basis at specific places.
 - ii) Recommending the intra-force transfers/ postings/ deputation of medical officers of all ranks up to CMO (SG) to the DG/SDG/ADG. Intra-force/ inter-force transfer /posting of specialists and GDMOs with PG Qualifications in CAPFs and ARs in Composite Hospital will be done as per MHA F.No.1-45024/05/2011-Pers dated 07.12.2011. Director (Medical) will submit a proposal after getting approval of DG concern to MHA through ADG (Medical) CAPFs in such cases.
 - iii) Centralized recruitment of nursing, paramedical and other hospital staff in the Force concerned with the approval of DG of the Force concerned. Such recruitment will be done by the Dir(Med)/IG(Med) of the Force. However, CISF may continue with their present system of recruitment of Paramedical Staff.

iv) He will ensure implementation of MHA's guidelines by the Force for the recruitment of GDMOs, Specialists MOs, Dental Surgeons and contractual doctors.

e) Medical Boards and SHAPE categorization:

- i) Regulation, monitoring and implementation of medical categorization system (popularly referred as SHAPE categorization) within the force under the overall guidance of ADG(Med)
- ii) Monitoring and analysis of health statistics of force members as also timely disposals of low medical category and invalidation cases.
- iii) As an Appellate authority of various medical boards of the Force concerned if rank of Director (Medical) is of IG.
- iv) Assist ADG (Med) in resolution of disputes, if any, arising in the implementation of SHAPE System.
- v) Assist DG in dealing with the appeals against the SHAPE categorization

f) Cadre planning and management of Medical, Para-Medical and Nursing cadres in the CAPF concerned. He will render necessary advice to the DG and ADG(M) on the issues relating to the

- i) Supervision of all General Duty Medical Officers (GDMO), Specialists, Dental Officers
- ii) As the cadre controlling authority of Nursing and Para-Medical cadres, he will be responsible for the transfer/ posting/ deputation and movement of Nursing and Para-Medical personnel.
- iii) The comments and recommendations of Dir (Med) are mandatory to process the disciplinary cases against the Medical and Para-Medical cadres.
- iv) Accepting, Reviewing and /or Initiating authority for the APARs for various medical posts including nursing officers & sub-officers, para medical posts, etc. as per the channel of rendition approved by the Government.

g) Implementation of policies and SOPs on matters relating to health care delivery system and services: He will ensure implementation of policies and SOPs relating to health care delivery system and services for:

- i) Referring Force personnel to other/ higher/ referral centres/ hospitals.
- ii) Training of Medical and Para-Medical personnel
- iii) Biomedical waste management at all levels of hospitals.
- iv) Emergency evacuation of field casualties at every level.
- v) Disaster management

h) Capacity Building, Training and Research

- i) Initiating and processing cases of Post Graduate Courses/ Higher Studies/ Foreign Assignments / Deputations / Courses in foreign countries/ Training of Medical Officers, Nursing and Para-Medical personnel for the approval of DG of the Force concerned
- ii) Implementation of regulations for the Training of Medical and Para-Medical personnel, including syllabus and training standards, for the 10/20/30/50/100 and 200 bedded hospitals and other similar institutions to be established in future.
- iii) Implementation of the policy for professional activities and development of medical/ dental/ nursing officers and other ranks by way of continuing medical education, workshops, training programmes, refresher courses, higher education courses etc. so as to keep the medical personnel updated at all levels within the Forces.

iv) Implementing mechanism for statistical survey of the health of the force members on various health parameters and indices as feasible to create a sound information base for planning health policy for force members and their families.

i) Procurement of medical store, medicines and equipment and AMC of equipment

- i) Issuing instructions on standardization of equipments in hospitals and medical units of the Force concerned.
- ii) Issuing necessary permission for purchase of equipments not included in the PET or list of authorization in various hospitals of the force.
- iii) Authorizing AMC for all major/costly equipments.
- iv) Seeking sufficient budget for the various hospitals under the Force concerned and monitoring the expenditure of the funds allocated to the various hospitals under different heads.
- v) Granting administrative approval and expenditure sanction within the power of head of Department in respect of medical stores, hospital necessities and equipments, etc., (except in NSG where IG (HQ) is declared as HOD). Such power will be enjoyed by Dir(Med) if he is of the rank of IG in those cases where the limit, as per the DFPR's relevant provisions, is beyond the competence of the Medical Superintendent of the Hospital.
- vi) Writing off losses in respect of all kinds of medical stores and equipments through provisioning directorate of the forces as per practice in prevalent in the forces.

j) Treatment in the Force and other Hospitals

- i) Engagement and empanelment of hospitals in private sector for the treatment of Force personnel and their family.
- ii) As a designated authority to permit treatment of force members and their dependents wherever required in Force hospitals or Government hospitals or such private hospitals as recognized for the treatment of Government employees, whether within or outside the State where particular force personnel or their family member has fallen sick.
- iii) Periodic review of dietary requirement for troops /recruits as per their working conditions and physical requirements and convey to field formations.

k) As the designated authority of Forces concerned to liaise and execute any action with Army authorities, ADG (Medical), other Forces, State Governments, Medical Council of India and other Government and private agencies on matters concerning health and medical care of force personnel and their dependents.

l) Providing guidance and monitoring for civic action and border management programme schemes concerning health and medicare of the target civil population residing in the area of jurisdiction of specific Force formation.

m) Periodical reporting to the DG concerned/ADG (Med) regarding the day to day working and overall status of the Health Care System/health of the force personnel, of the force concerned.

n) Reporting of Director (Medical)

- i) On all technical matters, the Director (Medical) will report to the DG of the Force concerned under intimation to ADG (Med).

- ii) However, on administrative and financial matters, the Dir(Med) will directly report to the DG of the Force regarding all the unit hospitals/Composite Hospitals.
 - iii) Administrative and financial matters related to the Referral hospitals will be routed through ADG (Med) and Other CHs only administrative matters may be routed through ADG(Medical).
- o)** For the duties and responsibilities mentioned above Dir(Med) may seek assistance, advice or help of the other Medical officers of the force.
 - p)** Any other duty/ responsibility/ case relating to medical and health matters of the Force personnel assigned by the MHA, DG or ADG(M) from time to time.

5) MEDICAL SUPERINTENDENT (MS)/ INSPECTOR GENERAL (IG) IN-CHARGE OF 200 BEDDED REFERRAL HOSPITAL, ITBP OR 100 BEDDED HOSPITALS.

a) Administrative Management of the Composite Hospital/ Referral Hospital

- i) As the head of the hospital, Medical Superintendent (MS)/Inspector General (IG) will exercise powers of Head of Department in respect of respective hospital.
- ii) Assigning duties among the medical officers (Specialist, GDMO and Dental Surgeon), nursing officers and other staff under his command.
- iii) Assigning duties of Administrative officers, Accounts Officers, Personnel Officer, Training Officer, Stores Officer, Mess Officer and such other duties to any Doctor, Nursing officers, Paramedical officers/staff and other staff posted under his charge, as deemed fit, for efficient functioning of the hospital services.
- iv) Initiating/Reviewing/Accepting Authority for the APARs in respect of the officers and staff posted under his command and control as per the channel of rendition.
- v) MS/IG will exercise administrative powers over all GDMOs /Specialist MOs/Dental Surgeons and other staff posted or attached under his command.
- vi) MS/IG will have disciplinary power over the Non-Gazetted staff. Disciplinary matters involving Gazetted officers will be referred to the competent authority as per the extant guidelines and will be dealt accordingly.
- vii) MS/IG will not act as a superior disciplinary authority for the force members admitted in the hospital for treatment or those on temporary duties or on training with the hospital. All such cases will be referred to the parent unit for taking suitable disciplinary action against the individual.
- viii) Ensuring Proper and timely projection/utilization of budget.
- ix) For conducting /getting conducted medical audit periodically.

b) Professional and Operational Management of the Composite Hospital/Referral Hospital Medical Superintendent (MS)/ Inspector general (IG)

shall be responsible for:

- i) Issuing necessary instructions on maintenance of health and hygiene to the formations which are dependent on the hospital concerned for their Medicare either directly or by referral.
- ii) Supervising the medical care and treatment of the patients, both outdoors and indoors and shall issue instructions on it as deemed fit.
- iii) As the inspecting authority for the hospitals as placed under his supervision by general or specific order of MHA/DG of Force concerned /ADG(Med).
- iv) Ensuring proper utilization of the various equipments available in the hospitals.

- v) Recommending "leave kind due" to the patients on medical grounds, on the advice of the Physicians-in-Charge of the case.
- vi) Keeping healthy liaison with the various Hospital in the locality, both in the Government as well as private sector.
- c) SHAPE Category Management:** Approving authority of the medical category (SHAPE category) in respect of officers posted in the Referral Hospital/100 Bedded Hospital, as applicable, and of the officers and NGOs being discharged with low medical category from the hospital concerned and for all other force members, if asked to do so, by general or specific order, of the DG of the Force concerned or the ADG (Med).
- d)** Organizing professional events like workshops, seminars, refresher courses, research activities for refreshing and updating the knowledge of medical, nursing officers and other staff by way of in his own hospital or outside, as deemed fit.
- e)** Rendering professional duties as per his area of specialty as also looking after the patients in OPD for providing consultation.
- f)** The incumbent may delegate his Head of Office and Drawing & disbursing powers to any officer under his command, a deemed fit. The provisions of GFPR would apply in this regard.
- g)** Any other duty /responsibility assigned by DG/SDG/ADG of the Force concerned or ADG (Medical).

6) MEDICAL SUPERINTENDENT (MS)/ DEPUTY INSPECTOR GENERAL (DIG),50 BEDDED HOSPITAL

a) Administrative Management of the Composite Hospital

- i. As the head of the 50 bedded Composite hospital, he will exercise powers appropriate to his rank and status in respect of the hospital.
- ii. Assigning duties among the medical officers, nursing officers and other staff under his command.
- iii. Assigning duties of administrative officer, Accounts officer, Personnel Officer, Training Officer, Stores Officer, Mess Officer and such other duties to any officer out of the medical officers, nursing officers and other staff posted under his charge, as deemed fit, for efficient functioning of the hospital services.
- iv. As the Initiating/Reviewing/Accepting authority for the APARs in respect of the officers and staff posted under his command and control as per the channel of rendition.
- v. Exercise administrative and disciplinary powers over the staff posted or attached under his command.
- vi. Ensuring Proper and timely projection/utilization of budget.
- vii. For conducting /getting conducted Medical Audit periodically.

b) Professional and Operational Management of the Composite Hospital- Medical Superintendent (MS)/ Deputy Inspector general (DIG) shall be responsible for:

- i. Issuing necessary instructions on maintenance of health and hygiene to the formations which are dependent on the hospital concerned for their medicare directly or by referral.
- ii. Supervising the medical care and treatment of the patients, both outdoor and indoors and shall issue instructions on it, as deemed fit.

- iii. As the inspecting authority for the hospitals, 30 bedded or smaller as placed under his supervision by general or specific order of MHA/DG of Force concerned/ADG (Med).
 - iv. Ensuring proper utilization of the various equipments available in the hospitals.
 - v. Recommending "leave kind due" to the patients on medical grounds, on the advise of the Physician-in-charge of the case.
 - vi. Keeping healthy liaison with various hospitals in the locality, both in the Government as well as the private sector.
- c) SHAPE Category Management:** As the approving authority of the medical category (SHAPE Category) in respect of GOs and NGOs posted in the formations falling under his jurisdiction for medical care, by general or specific order, of the DG of Force concerned or the ADG (Med).
- d)** Organizing professional events like workshops, seminars, refresher courses, research activities for refreshing and updating the knowledge of medical, nursing officers and other staff by way of in his own hospital or outside, as deemed fit.
- e)** Rendering professional duties as per his area of speciality as also looking after the patients in OPD for providing consultation.
- f)** Any other duty / responsibility assigned by DG/SDG/ADG/Sector IG/Director (Med) of the Force concerned or ADG (Med).

7) MEDICAL OFFICER (Specialist Grade-II Jr & Sr and Grade-I)

a) The Specialist shall be responsible for his Specialty concerned.

- i) He will supervise Junior/Senior Residents and other doctors posted in the department concerned, if any, under his charge.
- ii) The relative seniority between a Specialist and GDMOs with PG qualification in same specialty will be decided on the basis of their grade pay, if grade pay is the same then it will be decided on the basis of Post PG experience of the two and the senior among them will be the In charge of the specialty/Department concerned. In certain exceptional situations the Medical superintendent may decide the In charge of the specialty on the basis of services seniority if the grade of the two is the same.
- iii) The Specialist will also guide and provide training to the junior/senior Residents, and paramedical staff in the specialty concerned as per the instructions of the MS.

b) Duties & Responsibilities related to the Patient Care: As a Specialist, he shall be delivering such specialized services in his own and allied fields of specialty and shall be responsible for:

- i) Proper medical care and treatment of patients concerning his speciality, who report to him either directly or those who are referred to him by user units/peripheral units/other formations.
- ii) Attending patients in OPD & Indoors concerning his specialty as per the hospital timings and will be on call during rest of the day.
- iii) Providing emergency specialist care regarding their concerned speciality, on call to the patients referred by Duty Medical Officer attending the hospital emergency or any indoor patient requiring speciality care, on all seven days of the week.
- iv) In case of critical/acute shortage and in the absence of GDMOs, a specialist may be required to perform the duties as Duty Medical Officer (DMO) at the discretion of MS.

- v) Accompanying patients with serious illness to referral hospital/Higher Centres, if required.
- vi) Maintaining proper record for case history sheet of the patients under his treatment.
- vii) Briefing the concerned Specialists/Physician-in-charge/Medical Superintendent regarding the treatment and course of action to be followed with respect to the patients under his charge, whenever he proceeds away from the hospital either on duty or on leave.

c) Other Professional Duties & Responsibilities:

- i. Advising Medical Superintendent on matters concerning his speciality and on other subjects whenever asked to do so.
- ii. Ensuring proper maintenance and functioning of equipments under his charge, of his concerned speciality and for their timely repair, whenever required.
- iii. Organizing training/workshop in his speciality for junior/senior Residents and other doctors, nursing and paramedical staff as per the instructions of the MS.
- iv. Providing specialist opinion with regard to any case assigned to him concerning his speciality by ADG (Med)/IG(Med)/DIG(Med) or any other competent authority.
- v. Acting as member/Presiding Officer of the Medical Boards being set-up from time to time, as and when asked to do so by the Competent Authority.
- vi. Furnishing his opinion, concerning his speciality, to assess the medical SHAPE category of the force personnel and in case the personnel has been opined to be in low medical category (other than SHAPE-I), for processing the case for confirming such medical category.
- vii. In war-like situations and in operations in ANO area etc. the specialist may also be deployed on temporary duty basis as deputed by the competent authority / MS in the areas.

d) Other Duties & Responsibilities:

- i. Smooth and efficient functioning, general upkeep, hygiene & sanitation of the section, ward, department of which he is In-Charge.
- ii. Ensuring availability of essential supplies in his respective ward, section, department by timely projecting the demands for all kinds of stores, medical equipments, hospital accessories etc.
- iii. Bringing all important matters to the notice of the Medical Superintendent or the designated authority which require their attention immediately as per instructions.
- iv. Timely intimating all cases of death, cases of surgical fatality & medico legal complications, dangerously ill cases, etc. to the Medical Superintendent.
- v. Ensuring timely flow of recorded information between his ward/section/ department and the office of the Medical Superintendent and other sections/ward/departments.
- vi. Carrying out the duties as Administrative Officer, Drawing & Disbursing Officer, Procurement and Stores Officer, In-Charge of a sections/wards/ department etc. and other assignment as and when assigned by the IG(Med)/DIG(Med)/Medical Superintendent or any other competent authority.
- vii. Any other duty assigned by the ADG (Med)/IG(Med)/DIG(Med)/Medical Superintendent or any superior authority from time to time.

8) GENERAL DUTY MEDICAL OFFICER-GDMO (MO/AC TO CMO (SG)/ COMMANDANT) including those with PG qualification, posted in Composite/ Referral Hospitals.

a) Duties & Responsibilities related to Patient Care:

- i. Attending the OPD and indoors as assigned to him by the Medical Superintendent.
- ii. Visiting/ accompanying patients with serious ailments to the hospitals.
- iii. Maintaining proper record of case history sheet of the patients under his treatment.
- iv. Properly briefing the Physician- In- Charge regarding the treatment and course of action to be followed with respect to the patients under his charge, whenever he proceeds away from the hospital either on duty or on leave.

b) Other Professional Duties & Responsibilities:

- i. Performing emergency duty as per the duty roster of the hospital.
- ii. Carrying out annual medical examination of the force personnel, medical examination during recruitments and as member of the medical Boards being set-up from time to time, as and when asked to do so by the Medical Superintendent and / or Competent Authority.
- iii. Furnishing his opinion to assess the medical SHAPE category of the force personnel and in case the personnel has been opined to be in low medical category (other than SHAPE-I), for processing the case for medical board proceedings for confirming such medical category.
- iv. Ensuring proper maintenance and functioning of equipments under his charge, of his concerned specialty, and for their timely repair, whenever required, in case he possesses postgraduate qualifications.

c) Other professional Duties & Responsibilities of GDMOs with PG Qualification

In addition to the duties described herein above the GDMO with PG qualification will also be assigned following responsibility:

- i. Delivering specialized services as per his qualification and for the proper medical care and treatment of patients concerning his speciality either directly reporting him or are referred to him. As regards the patients pertaining to his field of speciality, he will attend to them in OPD & indoors as per the hospital timings.
- ii. Advising Medical Superintendent on matters concerning his speciality and on other subjects whenever asked to do so.
- iii. Organizing training/ workshop/ teaching in his speciality for other doctors, nursing and paramedical staff.
- iv. He will perform regular DMO duties.

d) Other Duties & Responsibilities:

- i. Smooth and efficient functioning of the section/ward/department of which he is In- Charge.
- ii. Carrying out the duties as Administrative Officer, Drawing & Disbursing Officer, Procurement and Stores Officer, In- Charge of a section/wards/department, etc. as and when assigned by the IG (Med)/DIG (Med) / Medical Superintendent or any other competent authority.

- iii. Bringing out all important matters to the notice of the Medical Superintendent or the designated authority which require immediate attention, as per instructions.
- iv. Ensuring timely flow of recorded information between his ward/section/department and the officer of the Medical Superintendent and other sections/ward/department.
- v. General upkeep, hygiene & sanitation of the ward, section, department under his charge.
- vi. Ensuring availability of essential supplies in their respective ward, section and department.
- vii. Any other duty assigned by the ADG(Med) /IG (Med) /DIG(Med)/Medical Superintendent or any other superior authority.

9) GENERAL DUTY MEDICAL OFFICER {MO/AC TO CMO (SG)/ COMMANDANT including those with PG qualification, when posted in Duty Bn, Training Centres and formations other than Composite Hospital.

a) As a General Duty Medical Officer, he shall perform the duties as per the duty roster of the duty Bn/Training Centers/Hospital concerned.

b) Professional Duties & Responsibilities:

- i. Attending sick report of his unit/ formation and provide treatment to the force members & their dependents.
- ii. Attending to all emergency cases.
- iii. Supervising preventive immunization among force members and their families.
- iv. Visiting Subordinate formations/units as per the extant instructions.
- v. Carrying out annual medical examination of the force personnel, medical examination during recruitments and as member of the Medical boards being set-up from time to time, as and when asked to do so by the Medical Superintendent and/or Competent Authority.
- vi. Causing health awareness among force members and their families by Information Communication Education methods.
- vii. Procurement and maintenance of all kinds of medical stores.
- viii. Advising the formation commander on all matters concerning health of the force members and their families.

c) Other Duties & Responsibilities:

- i. Monitoring the state of hygiene & sanitation in the force cantonment area and will keep the formation commander informed on the subject.
- ii. Maintaining, monitoring and analyzing statistical data of medical category of force members, their periodical review and invalidation as the case may be.
- iii. Submission of various kinds of reports and returns of his formation and subordinate units to the senior officials/ formations.
- iv. Arranging evacuation of patients to concerned/nearest hospital.
- v. Any other duty assigned by the ADG (Med) /IG (Med)/DIG (Med)/Medical Superintendent or any other superior authority from time to time.
