

O.P.D. AND GENERAL WARD PATIENTS:

- (1) Registration charges for general OPD/Speciality clinic will be Rs. 10/- valid for one calendar year against the earlier charges of Rs. 1/-.
- (2) Patients admitted to general ward would be charges as follows:
 - (i) Admission charge (non-refundable) Rs. 25/-
 - (ii) Daily hospitalisation charges (inclusive of Food) Rs. 35/- per day.
- (3) the daily hospitalisation charges will include all procedures and routine investigations.
- (4) All medicines and disposables are to be provided by the patient and life-saving medicines and disposables will, however, be provided by the hospital in emergency and will be replaced by the patients and their relations.
- (5) In respect of Casualty, all patients will be treated free of cost, including charges for procedures and investigations. Any patient shifting from the Casualty to the general ward or the private ward would be charged at the prescribed rates for general/private wards from the time he/she is admitted to these wards. The patient will not be levied any charges for procedures/investigations while in Casualty even if he is admitted to the private ward/general ward subsequently.

For all general ward patient if a patient is not able to pay all payments, would be waived off.

- (6) Poor patients get exemption for registration charges, admission charges for general ward and are also provided medicines and other surgical items as per recommendation by Medical Social Worker and treating physician.

Amount Released by who for mental Health Programme

2538. SHRI PARAG CHALIHA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the amount so far released by World Health Organisation for Mental Health Programme in the country and how much out of that was earmarked for Assam and other States in the North East;

(b) whether the whole amount was utilised by Assam and other States in the North-East, if not, the reasons therefor;

(c) the impact of the Mental Health Programme of 1982 in the States mentioned above; and

(d) whether Government of India have a proposal to upgrade Lokpriya Gopinath Bardoloi Institute of Mental Health at Tezpur a fullfledged institute like NIMHANS at Bangalore and if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI A. R. ANTULAY): (a) and (b) There is no separate Mental Health Programme being supported by World Health Organisation during 1994-95 Biennium.

(c) The State of Maghalaya, Tripura and Assam in the North-East are reported to have established the Mental Health Authority in pursuance of the State Mental Health Rules, 1990, under the Mental Health Act.

(d) No, Sir. However, financial support has been extended by the Central Government in compliance with Supreme Court's directions.

Amount Allotted for Development of women and Children in Punjab

2539. SHRI IQBAL SINGH: Will the Minister of RURAL AREAS AND EMPLOYMENT be pleased to state:

(a) the amount allotted to the State Governments in the country under the

programme for development of women and children in rural areas for the years 1994-95, and 1995-96, State-wise; and

(b) the amount of fund allotted to Punjab during the last three years and what are the achievements so far?

THE MINISTER OF STATE IN THE MINISTRY OF RURAL AREAS AND EMPLOYMENT (DEPARTMENT OF RURAL EMPLOYMENT AND POVERTY ALLEVIATION) (SHRI VILAS BABURAO MUTTEMWAR):

(a) The State-wise allocation of funds for income generation activities (IGA) under the Development of Women and

Children in Rural Areas (DWCRA) programme for 1994-95 and 1995-96 is given in the enclosed Statement (*see below*).

(b) The amount allocated to Punjab during the last three years and the achievements is given in the enclosed Statement. II (*See below*).

During the current financial year allocation to Punjab is Rs. 1.66 crores of which 22.64% has been utilised upto October, 1995. Total number of groups formed during the current financial year so far is 242 and the total number of women beneficiaries is 2954.

Statement-I

State-wise allocation of funds under DWCRA Programme for 1994-95 and 1995-96

(Rs. in lakhs)

Sl. No.	State/Union Territories	Allocation for 1994-95	Allocation for 1995-96
1.	Andhra Pradesh	111.57	718.75
2.	Arunachal Pradesh	21.74	44.75
3.	Assam	138.02	283.75
4.	Bihar	159.75	760.50
5.	Goa	3.95	9.00
6.	Gujarat	37.54	258.25
7.	Haryana	71.29	146.50
8.	Himachal Pradesh	36.94	76.00
9.	Jammu & Kashmir	107.01	220.00
10.	Karnataka	79.19	387.00
11.	Kerala	27.66	180.00
12.	Madhya Pradesh	198.06	698.75
13.	Maharashtra	136.65	572.00
14.	Manipur	15.81	61.25
15.	Meghalaya	53.50	110.00
16.	Mizoram	5.93	17.00
17.	Nagaland	13.83	30.50
18.	Orissa	65.36	405.75
19.	Punjab	80.56	165.75
20.	Rajasthan	128.74	309.50
21.	Sikkim	21.13	43.50
22.	Tamil Nadu	109.59	487.75
23.	Tripura	5.93	22.50
24.	Uttar Pradesh	229.37	1017.00
25.	West Bengal	114.91	451.50
<i>Union Territories</i>			
1.	A & N Islands	1.98	5.80

Sl. No.	State/Union Territories	Allocation for 1994-95	Allocation for 1995-96
2.	Daman & Diu	1.67	3.20
3.	Lakashdweep	1.98	2.80
4.	Pondicherry	1.98	3.20
5.	D. & N. Haveli	1.98	3.20
TOTAL		2036.80	7495.45

Statement-II

Amount allocated and achievements under DWCRA in Punjab

	1992-93	1993-94	1994-95	1995-96 (upto Oct., 95)
Amount allocated (Rs. in Lakhs)	31.92	72.20.	80.56	165.75
Amount utilised (Rs. in lakhs)	49.00.	39.60	68.34	37.53
No of groups formed	336	545	502	242
No. of beneficiaries	6526	6050	6151	2954

Anti-Cancer Drug

2540. SHRI KRISHAN LAL SHARMA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that a leading indigenous pharmaceutical company has developed a new anti-cancer drug known as Intaxel;

(b) whether it is also a fact that the treatment with the said drug is 50% economical as compared to the imported drug;

(c) whether the pharmaceutical company has filed for patent rights in the U.S.A. for process leading to the marketing of the drug; and

(d) if so, the results thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI A.R. ANTULAY): (a) Yes Sir. Intaxel which is a brand of Paclitaxel is available for the treatment of metastatic ovarian cancer resistant to first line therapy.

(b) The indigenously manufactured drug is less than half the cost of the imported drug.

(c) No, Sir. Intaxel is a formation of natural Paclitaxel which cannot be patented.

(d) Does not arise.
Financial Assistance from NRF to Gujarat

2541. SHRIMATI NANDIREN JETHABHAI PATEL: Will the Minister of INDUSTRY be pleased to state:

(a) whether Gujarat Government has