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2.	Dr. Ms. Soofia Bilques	SMO	South Avenue	Aug 1995
3.	Dr. S.A.R. Zaudi	CMO (NFSG)	Sarojini Nagar	14/10/2009
4.	Dr. Ali Murtaza	CMO	Sarojini Nagar	1/7/1989
5.	Dr. Syed Wadadul Hasan	MO	Sarojini Nagar	5/9/2008
6.	Dr. Syed Ahmed	SMO	Darya Ganj	31/5/2007
7.	Dr. Shabana Parveen	MO	Darya Ganj	13/2/2008
8.	Dr. Kausar Parveen	CMO (NFSG)	Nariana	May 2002
9.	Dr. Mustaq All	CMO	Shahdara	24/4/2009
10.	Dr. Talat Usmani	CMO (NFSG)	UMSD, Sarojini Nagar	Sept, 2009

Mandatory treatment of traffic accident victims by hospitals

1906. SHRI A. ELAVARASAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Ministry has decided to make it mandatory for all hospitals and doctors to treat traffic accident victims and women in labour irrespective of whether initial payments have been made or not;

(b) if so, the details thereof;

(c) whether the Medical Council of India has also accepted the proposal;

(d) whether the Law Commission had earlier proposed a law which would make it illegal for hospitals and doctors to refuse treatment on the ground that it is a medicolegal case or that the patient is not able to pay immediately, and the Ministry has started action on the proposal; and

(e) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) 'Health' is a state subject and it is primarily the responsibility of the State Governments to issue any directive in this regard.

However, the Central Government has enacted the Clinical Establishments (Registration and Regulation) Act, 2010 and the Sub-section (2) of Section 12 of this Act stipulates that the clinical establishments shall undertake to provide within the staff and facilities available, such medical examination and treatment as required to stabilize the emergency medical condition of any individual who comes or is brought to such clinical establishments. This Act has come into effect from 1.3.2012 in the States of Arunachal Pradesh, Himachal Pradesh, Mizoram and Sikkim and all Union Territories. The States of Uttar Pradesh, Rajasthan and Jharkhand have also adopted this Act. The Act when adopted by the states will help them in enforcing the above provisions of the Act.

(c) to (e) The 201st report of Law Commission along with the Model Law in this regard was received and had already been circulated to the States/Union Territories to examine, adopt and enact the Model Law and also to develop a protocol for payment for the emergency medical care rendered to the accident victims/women under labour by a hospital/medical practitioner. The States had also been requested to develop appropriate sustainable strategy to meet the fund requirements.

The Medical Council of India (MCI) has informed, *inter-alia*, that the Model Law on “Medical Treatment after Accidents and during Emergency Medical Condition and Women under Labour” contained in the 201st Report of Law Commission of India is acceptable. However, they have also informed that the Model Law requires wider consultation with Professional Associations, Indian Medical Association, Doctors, State Governments, etc.

Plan allocation for health sector

1907. SHRIMATI JAYA BACHCHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the Plan Panel has proposed an increase of about 200 per cent in Plan allocations for the health and family welfare for the Five Year Plan (2012-17);

(b) if so, the details of benefits the general public may get and whether more hospitals would be opened in the country in the urban and rural areas in particular; and

(c) if so, the details thereof?