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and Assam and all Union Territories except Delhi. Other States may adopt the Act under clause (1) of Article 252 of the Constitution.

In terms of the Clinical Establishments (Central Government) Rules, 2012 notified under this Act, the clinical establishments are required to follow Standard Treatment Guidelines as may be issued by Central/State Governments, display their rates at a conspicuous place and charge the rates for each type of procedures and services within the range of rates determined from time to time in consultation with the State Governments. The National Council for Clinical Establishments has approved a standard list of medical procedures and a standard template for costing of medical procedures which has been shared with the States/UTs where the Act is applicable for taking appropriate action by them. The implementation and enforcement of the said Act falls within the remit of the States/Union territories.

Unlawful nexus between doctors and diagnostic centres

1702. SHRI SANJAY RAUT: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether Government's attention has been drawn towards raid by the Income Tax Department on a few Bengaluru-based doctors and diagnostic centres which Seems to have blown the lid off a doctors diagnostic centre commission nexus as the raid on five medical diagnostic centre chains in Bengaluru shows that doctors are paid for referring medical tests;
 - (b) if so, the details thereof and Government's reaction thereto; and
- (c) the details of steps taken or proposed to be taken against such unlawful nexus between doctors and diagnostic centres in the country?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) and (b) Recently, during November-December, 2017, the Directorate of Income Tax (Investigation), Bengaluru conducted search & seizure actions *inter-alia* on some doctors and medical diagnostic centres based in Bengaluru. The preliminary investigations have revealed that some doctors were paid commission by some diagnostic centres for referring medical tests from these diagnostic centres. However, disclosure of information in respect of specific asses *See*s is prohibited except as provided under section 138 of Income-tax Act, 1961.

(c) In order to regulate the conduct of doctors, the Medical Council of India (MCI), with the prior approval of the Central Government, has notified Indian Medical

Council (Professional Conduct, Etiquette and Ethics) Regulations, 2002. As per clause 6.4.1.2 of the above said regulations, any rebates & commission is considered unethical. MCI or the appropriate State Medical Councils have been empowered to take disciplinary action against a doctor for violation of the provisions of the aforesaid Regulations. As and when complaints are received for the violation of code of ethics by doctors, such complaints are referred by MCI to the concerned State Medical Councils where the doctors/medical practitioners are registered. The MCI is an Appellate Authority.

Rise in caesarean deliveries

1703. SHRI MAHESH PODDAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) whether it is a fact that there is a sharp rise in the caesarean deliveries in India;
 - (b) if so, the details thereof; and
 - (c) what steps Government is taking in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) According to NFHS 4 (2015-16) survey data, 17.2% births are delivered by caesarean section while according to NFHS 3 (2005-06) survey data, 8.5% births are delivered by caesarean section.

- (b) Details of state-wise births delivered by caesarean section are given in the Statement (*See* below).
- (c) WHO in its statement released in April 2015 states that at population level, caesarean section rates higher than 10% are not associated with reductions in maternal and newborn mortality rates.
 - In this regard a communication *vide* OM M. 12015/182/2015-MCH has been sent to all the State Principal Secretary and Mission Directors of all States and UTs urging them to share the WHO statement with all the Obstetricians and Gynecologists working in their respective states. In addition States have been suggested to conduct periodic prescription audits in private sector which could also be extended to public sector.
 - Government of India also has written *vide* OM M. 12015/182/2015-MCH to Federation of Obstetrical and Gynecologists in India (FOGSI) to share the