

(c) and (d) All possible steps are being taken to expedite completion of the new AIIMS as per the timelines approved by the Cabinet.

New AIIMS projects are being assigned on EPC mode in the nature of lump sum contract basis with a fixed cost.

Filling up of Faculty & Non-faculty posts in the new AIIMS is being undertaken keeping in view the services and facilities planned in the AIIMS by taking serving Faculty from Government Medical Colleges/Institutes on deputation basis and contractual engagement of retired Faculty of Government Medical Colleges/Institutes.

Visiting faculty scheme in new AIIMS has been formulated to allow national and international faculty to work in new AIIMS for teaching and academic purposes. Overseas Citizens of India have been allowed to join as teaching faculty in new AIIMS.

The six functional AIIMS hospitals are also equipped with medical equipments required for rendering healthcare services.

Generic medicines stores

†3422. SHRI HARNATH SINGH YADAV: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of Government and private sale and storage centres of generic medicines in the country, State-wise numbers thereof;

(b) whether the effects of allopathic and generic medicines are similar, if so, the reasons for higher prices of allopathic medicines available at allopathic medical store as compared to generic medicines; and

(c) whether Government is aware of the fact that Government and private doctors discourage patients to use generic medicines, if so, whether Government has any action plan to maximise the usage of generic medicines?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) Under Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP), a total of 5440 dedicated retail outlets selling affordable generic medicines are functional in the country as on 15.07.2019. State-wise breakup is given in Statement (*See below*).

†Original notice of the question was received in Hindi.

(b) There is no definition of generic or branded medicines under the Drugs & Cosmetics Act, 1940 and Rules, 1945 made thereunder. However, generic medicines are generally those which contain same amount of same active ingredients) in same dosage form and are intended to be administered by the same route of administration as that of branded medicine. Further, drugs manufactured in the country, irrespective of whether they are generic or branded, are required to comply with 'the same standards as prescribed in the Drugs and Cosmetics Act, 1940 and Rules, 1945 made thereunder for their quality. As such they are expected to have similar effects.

The price of an unbranded generic version of a medicine is generally lower than the price of a corresponding branded medicine because in case of generic version, the pharmaceutical company does not have to spend money on promotion of its brand. The sale of a generic version is incentivized by a pharmaceutical company by keeping a high trade margin for wholesalers and retailers.

(c) Medical Council of India (MCI), has notified an amendment in Clause 1.5 of Indian Medical Council (Professional Conduct, Etiquette and Ethics) Regulations, 2002 vide notification dated 21.09.2016, which stipulates that "Every physician should prescribe drugs with generic names legibly and preferably in capital letters and he/she shall ensure that there is a rational prescription and use of drugs". MCI has further issued a circular on 21.04.2017 vide which all the Registered Medical Practitioners under the Indian Medical Council (IMC) Act have been directed to comply with the aforesaid provisions.

Statement

State-wise details of Janaushadhi Kendras as on 15.07.2019

Sl. No.	Name of the State	Number of Janaushadhi Kendras
1	2	3
1.	Andaman and Nicobar Islands	2
2.	Andhra Pradesh	181
3.	Arunachal Pradesh	24
4.	Assam	79
5.	Bihar	155

1	2	3
6.	Chandigarh	5
7.	Chhattisgarh	206
8.	Dadar and Nagar Haveli	14
9.	Daman and Diu	4
10.	Delhi	96
11.	Goa	8
12.	Gujarat	494
13.	Haryana	160
14.	Himachal Pradesh	57
15.	Jammu and Kashmir	56
16.	Jharkhand	54
17.	Karnataka	524
18.	Kerala	465
19.	Lakshadweep	0
20.	Madhya Pradesh	145
21.	Maharashtra	358
22.	Manipur	35
23.	Meghalaya	1
24.	Mizoram	19
25.	Nagaland	15
26.	Odisha	174
27.	Puducherry	14
28.	Punjab	164
29.	Rajasthan	127
30.	Sikkim	2

1	2	3
31.	Tamil Nadu	539
32.	Telangana	117
33.	Tripura	24
34.	Uttar Pradesh	840
35.	Uttarakhand	176
36.	West Bengal	106
TOTAL		5440

Export of food items under purview of food regulator

3423. SHRI DHARMAPURI SRINIVAS:

SHRI T. G. VENKATESH:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has received any proposal from the country's food regulator to bring export of food items under its regulator purview;

(b) if so, the details thereof; and

(c) the stand of Government in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) to (c) Yes. A proposal to include 'Export' within the ambit of Food Safety and Standards Act, 2006, along with other proposals for amendments to the said Act, has been received from Food Safety and Standards Authority of India (FSSAI) and is under consideration.

Implementation of Rashtriya Kishor Swasthya Karyakram

3424. SHRI HUSAIN DALWAI:

PROF. M. V. RAJEEV GOWDA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of the good practices that have worked under the Rashtriya Kishor Swasthya Karyakram (RKSK) in various implementing States and the plans to scale up the programme based on the good practices, across the country;