

**CITIZEN'S CHARTER**

**OF**

**DIRECTORATE OF HEALTH SERVICES  
(GOA STATE)  
2018**

**DIRECTORATE OF HEALTH SERVICES  
CAMPAL, PANAJI-GOA**

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## **FOREWORD**

Today in addition to the facilities in Government sector, private services also play a significant role in providing health care. In order that the health care does not become a tool for exploitation of the vulnerable section, Government of India has taken measures such as Consumer Protection Act, accreditation of Private Hospitals etc. The Consumer Protection Act seeks to provide better protection to the interest of the consumers and settlement of consumer disputes and matters connected therewith. As such, the health care providers in the country are now alert to the need of providing quality health care. Accreditation is a kind of star rating, as existing in the case of tourism industry, on the basis of levels of service, efficiency as well as cleanliness. Thus, accreditation involves the evaluation of health care facility's performance. The main aim of Citizen's Charter is to raise quality, extend accountability besides providing information, choice and redressal mechanism.

Equity of access to health facilities and securing a prominent place for health in the overall developmental framework is one of our major concerns. At the ground level, a number of key issues need to be addressed viz. better management, more efficient administration, greater accountability and improved quality and performance of services in the health sector. Until recently the provider has dominated in the provision of health services. The focus now has to be on the user. Accordingly the charter sees the public services through the eyes of those who use them. I am sure the up-dated "Citizen's Charter" would contribute in a significant manner in bringing together the provider and the user for further improving the health care delivery system. Needless to mention that success of this charter would largely depend on the support and co-operation we receive from the users.

*Panaji - Goa.*  
*Dated: 15/ 10 /2018*

(J. Ashok Kumar)  
Secretary (Health)

## INTRODUCTION

Goa is considered as one of the best performing states in the health & medical care. Directorate of Health Services (DHS) has an important role in the provision and administration of health services. In order to raise the quality, extend accountability and deliver the services fairly, effectively and courteously, 'Citizen's Charter' for Directorate of Health Services has been prepared. The charter seeks to provide a framework which enables our users to know:

- The services available in the hospitals and other institutions under the Directorate.
- The quality of services they are entitled to.
- The means for redressal of complaints regarding denial or poor quality of service.

Thus, the essential principles behind the charter are to ensure transparency, public participation and accountability as also quality service, besides information, choice and redressal mechanism wherever possible.

### **Achievements in Health Care system in Goa**

- Goa has been able to reduce the birth, death, and Infant Mortality Rate more drastically in the post Liberation period.
- Health care system has been able to make positive contribution towards increasing life expectancy.
- Health Care system has been able to reduce Maternal Mortality by achieving almost 99%(HMIS-2017-18) institutional deliveries and a vigorous antenatal checkup programme.
- The Child Immunization coverage is over 95 %( HMIS 2017-18).
- There is significant decline in Anemia in mothers and children malnutrition and Communicable diseases.

### **Challenges before the present health care system in Goa**

- The size of the elderly population (65+) has increased.
- The declining sex ratio in the age-group 0-6 years.
- Increase in lifestyle disorders (Non-Communicable Diseases) and road traffic accidents.

## HEALTH STRUCTURE & SERVICES IN GOA

Goa has one of the most extensive health infrastructures in India. Directorate of Health Services has an important role to perform in Health delivery by providing preventive, promotive, curative and rehabilitative health services to the people through primary health care approach. The health care infrastructure has been developed as a three-tier system namely, Primary, Secondary, and Tertiary care.

### **Sub- Centres (216)**

Sub-Centre is the most peripheral contact point between the Primary Health Care System and the community and is manned generally by Multi-Purpose Health Workers (Male & Female) and an Attendant.

### **Rural Medical Dispensaries (30)**

In addition, there are Rural Medical Dispensaries (RMDs 30 in number) in remote and inaccessible areas manned by a Rural Medical Officer and Pharmacist and an attendant where regular OPDs are conducted.

### **Primary Health Centres (25)**

Primary Health Centres catering 24x7 emergency services with attached hospitals ranging with 12 to 70 beds. In all there are 25 Primary Health Centres. Out of which 15 have attached hospitals and headed by a Health Officer and the remaining 10 PHCs are non-bedded providing only OPD facilities and headed by Medical Officers. The PHCs are the nodal agencies to provide preventive, promotive, curative services.

### **Urban Health centres (4)**

There are four Urban Health Centres each located at Panaji, Mapusa, Margao and Vasco providing public health services in these towns.

### **Community Health Centres (4)**

The Community Health Centres cater 24x7 emergency services with attached hospitals with minimum 30 beds and are headed by a Health Officer. The services of specialist doctors are made available along with additional facilities.

### **Sub District Hospital (2)**

Two Sub District Hospitals are established at Ponda and at Chicalim and renders 24x7 medical services.

### **District Hospitals (2)**

There are two District Hospitals in Goa. In South Goa District, Hospicio Hospital, Margao and in North Goa District, North Goa District Hospital, Mapusa. They render secondary care services with specialist in different faculties.

### **Other Hospitals (1)**

There is one other hospital namely T.B. Hospital, Margao under this Directorate.

### **OUT PATIENT DEPARTMENTS (OPDS)**

- OPDs are conducted in all the Hospitals, CHCs PHCs, RMDs, Homeopathic & Ayurvedic Clinics, STD clinics UHCs except (UHC Vasco), on all working days i.e. except Sundays and Public Holidays.

<b>Days</b>	<b>Timing</b>
<b>Monday to Friday</b>	<b>9.00 a.m. to 1.00 p. m.</b>
	<b>2.00 p.m. to 4.30 p.m.</b>
<b>Saturday</b>	<b>9.00 a.m. to 1.00 p.m.</b>

- Weekly OPDs on fixed days are generally conducted in all the sub-centres.

- Each patient attending OPD has to pay Rs.20/= (Rupees twenty only) and at District Hospitals at Mapusa/ Margao and Sub District Hospitals at Ponda/Chicalim Rs. 100/- (Rs. One hundred only) as registration fee for OPD paper except medico-legal cases, prisoners brought by police, pregnant women and sick neonates.
- OPD consultations, investigations and treatment are free in all the hospitals and other centers under the Directorate. However, in two District Hospitals only for certain categories, investigations are charged as per the rates notified by the Government.
- Medical Certificates / NOCs are issued on the fees as prescribed and notified by the Government.

### **INPATIENT DEPARTMENTS (IPDS)**

- IPDs are functioning in all Hospitals, CHCs, PHCs (except Colvale, Corlim, Chinchinim, Loutolim, Cortalim, Ponda, Navelim, Porvorim Mayem and Chimbel).
- All patients who need hospitalization are admitted as inpatients and treated free, inclusive of diet.
- Every patient is issued one Attendant Pass.
- Visitors are generally allowed during visiting hours only i.e. 4.00 pm to 6.00 pm.
- Patients from the other States are charged Rs 50 per bed per day and 30% of the package rated for procedure under Deen Dayal Swasthya Seva Yojana (DDSSY).

### **LABORATORY SERVICES**

- In all the CHCs, PHCs and UHCs laboratory services are available for conducting routine basic investigations.
- In both District Hospitals facilities of biochemistry in addition to other routine investigations are available.
- Malaria parasite testing facilities are available at PHCs/CHCs/Hospitals, at malaria clinic at Head Quarters (DHS) Campal, Panaji.
- In both District Hospitals facilities for ECG are available. Also, ultrasound, x-ray, CT scan facilities are available.

### **CASUALTY AND EMERGENCY SERVICES**

- Casualty and emergency services are provided 24 x 7 in all the hospitals, CHCs, and PHCs with attached beds.  
Patients requiring specialized investigations/treatment are referred to the nearest CHC/District Hospital/Goa Medical College depending on the case, after providing proper medical aid within the scope of the equipments and the facilities available at Health Centre / Hospital. List of Government Hospitals, Health Centers with Beds under DHS in Goa is annexed at Annexure - I

### **AMBULANCE SERVICES**

The ambulance services are available in all the Hospitals.

## **BLOOD BANKS**

There are two blood banks, one each at Hospicio Hospital, Margao and North Goa District Hospital, Mapusa.

The address and contact phone Nos of Blood Banks attached to district hospitals are given below.

<b>Address</b>	<b>Telephone Nos.</b>
Hospicio Hospital, Margao	2703801
North Goa District Hospital, Mapusa	2253387 ext-260

## **Additional Services**

- There are 14 Homeopathic Clinics, 32 Ayurvedic Clinics, 26 ophthalmic clinics and 29 Dental Clinics located at various PHCs / CHCs. Besides there are three STD clinics in Urban Towns namely at Mapusa , Margao, and Vasco.
- The Directorate and its peripheral units are responsible to issue NOC to establishments when referred by local authority. The concerned parties of the establishment have to submit an application in triplicate to the concerned Health Officer / Medical officer in-Charge of PHCs / CHCs / UHCs in their respective Jurisdiction.

## **Medical Store Depot (MSD)**

- Medical Store Depot is responsible for procuring and distributing medical equipments and medicines to all the Hospitals, and Health Centres.
- The Medical Store Depot supplies Drugs, which includes Allopathic, Ayurvedic & Homeopathic and Surgical items including Chemicals and reagents to all RMDS, PHC'S, CHC's and district hospitals under Directorate of Health Services. It also supplies Machinery and Equipment.
- All the lifesaving and essential drugs are continuously made available to all the hospitals, PHC's and CHC's under Directorate of Health Services as per their requirements by floating Public Tenders.

## **NATIONAL RURAL HEALTH MISSION- NATIONAL PROGRAMMES**

### **Reproductive and Child Health Services (RCHS) – (RMNCH+A)**

Family Welfare Programme, also known as Reproductive mother and Child Health Programme + Adolescent focuses on the total well-being of the woman as well as offspring and Adolescents. This programme is designed so that people have the ability to reproduce and regulate their fertility; women are able to go through pregnancy and childbirth safely; the outcome of pregnancy is successful in terms of maternal and infant survival and well-being; and couples are able to have sexual relations free of the fear of pregnancy and contacting disease. It is a need-based, client-centered, demand-driven, high quality and integrated services. The programme offers the following package of services:

#### **For the mothers/Pregnant Woman**

- Screening of antenatal cases by doctors at the Health Centres/Hospitals wherein all the cases are screened for anemia, HIV, Syphillis, Diabetes, Hypertension, Urinary tract infection.

- TT Immunization-During the first pregnancy the mother-to-be, receives two doses of Tetanus Toxoid. If the second pregnancy occurs within the first three years she receives one booster dose.
- At least 4 Antenatal care visits for early identification of maternal complications.
- Deliveries by skilled birth attendants.
- Post-Partum care.
- Promotion of Institutional Deliveries.
- Management of Obstetric emergencies.
- Birth spacing.
- Prophylaxis to prevent anaemia/treatment of anaemia.
- Prevention/Treatment of RTI/STI.

#### **For the child**

- Essential newborn care.
- Promotion of exclusive breast feeding and weaning.
- Universal Immunization Programme.
- Vitamin A prophylaxis: Nine doses of Vitamin A are given to children. The 1<sup>st</sup> dose is given at 9 months age followed by the other doses, each given at 6 months interval till the age of 5 years.
- Appropriate management of diarrhoea.
- Appropriate management of ARI (Acute Respiratory Infection).
- WIFS –(5<sup>th</sup> to 10<sup>th</sup> Std) School Students are given supplementation for Anemia.
- National De-worming Days observed biannually in February and August.

#### **For Eligible Couples**

- *Prevention of Pregnancy*
  - Temporary Methods - Prevention of pregnancy – Condoms (for males) and Oral Contraceptive pills, Insertion of Intra Uterine Device (IUD) e.g. Copper T, Emergency Contraceptive Pill, Centchroman weekly pill and Injectables (for female) Antara.
  - Permanent Methods – The accepted methods of sterilization are vasectomy (for male) and tubectomy (mini lap or laproscopy) for female.
- Safe abortion/Medical Termination of Pregnancies. Nischay pregnancy test kits are available at all the Health Centres including Sub-Centres, for early detection of pregnancy so that safe abortion services can be provided at the earliest to the beneficiaries.

#### **Rashtriya Bal Swasthya Karyakram (RBSK) Programme:**

- Under (RBSK) Programme, children in the age group of 0-18 years are screened for 4Ds: Defects, Deficiencies, Diseases & Developmental delays & disabilities, by dedicated Mobile Health Teams (MHTs) comprising of 2 Ayush doctors, a nurse and a pharmacist.
- In Goa there are 15 MHTs which screen children in schools & anganwadis.
- The children found with 4Ds are referred as per need to Primary Health Centres/Community Health Centres/District Hospitals or District Early Intervention Centres for further management wherein they are managed by a team of psychologist, paediatrician, physiotherapist, audiologist, speech therapist, etc.

## **School Health Programme**

- Health Checkup of all School children and Follow-up under RBSK programme.
- Detection of anaemia by hemoglobin estimation.
- DPT at 5 years, TT at 10 years and 16 years.
- Information Education Communication (IEC) programme.

## **Adolescent Reproductive and Sexual Health**

- Teen/Yuva clinics at GMC/CHC/PHC.
- Educational Programmes on Adolescent Health.
- Management of RTI/STI.
- Counseling.

## **Janani Suraksha Yojana (To promote institutional deliveries)**

- The beneficiaries (Pregnant Women) belonging to BPL Families or any pregnant woman belonging to Schedule Cast/Schedule Tribes, for institutionally delivered women only.
- Rural Area-Rs. 700/-, Urban area: Rs. 600, Home Deliveries: Rs. 500/- ( All payments are done by PFMS)

## **Janani Shishu Suraksha Karyakram**

This GOI scheme is introduced in this state and the following services are made available under the scheme

### ➤ ***Entitlements for Pregnant Women***

- Free delivery
- Free Caesarian section
- Free drugs and consumables
- Free diagnostics (Blood, Urine tests and Ultrasonography etc)
- Free diet during stay (upto 3 days for normal delivery and 7 days for caesarian section)
- Free provision of blood
- Free transport from home to health institution, between health institutions in case of referrals and drop back home
- Exemption from all kinds of user charges

### ➤ ***Entitlements for Sick Newborn/ infants***

- Free and zero expense treatment
- Free drugs & consumables
- Free Diagnostics
- Free provision of blood transfusion, if needed.
- Free transport from home to health institution, between health institutions in case of referrals and drop back home
- Exemption from all kinds of user charges

## **Miscellaneous**

- Sub-Centers have fixed days in a week every month for immunization sessions, OPDs etc. They are focal points for various community-based activities.
- Village Health & Nutritional Days observed at the village level every month.

- Outreach sessions in slum areas/labour concentrations in relation to immunization and detection/management of ailments.
- Reproductive and child health camps wherein services towards adolescent girls, mothers, children are rendered especially in relation to immunization, health checkups, detection of ailments, pap smears screening for cervical cancers, health education etc.
- Information, education and communication activities utilizing all media channels including print, electronic and others.
- Health Check-ups and Nutrition education in Anganwadis.

## IMMUNIZATION

# Immunization Schedule



**Be Wise!  
Get your child fully immunized**

Pregnant Women	TT	
• Early in pregnancy		If pregnant women have received 2 doses of TT within last 3 years, then only one booster dose is given.  Ideally TT 2 or booster dose should be given before 36 weeks of pregnancy. However, it may be given even if more than 36 weeks have passed.
• 4 weeks after 1 <sup>st</sup> dose		

For infants	BCG	Hepatitis B	Pentavalent (Hepatitis B, DPT & Hib)	OPV	IPV	Measles	JE
• At birth							
• 1 ½ months (6 weeks)							
• 2 ½ months (10 weeks)							
• 3 ½ months (14 weeks)							
• 9 (completed) – 12 months							

For children	DPT	OPV	MMR	JE	TT
• At 15 months					
• At 16 – 24 months					
• At 5 – 6 years					
• At 10 years & 16 years					
• At 10 years & above	 <b>Rubella vaccine</b> is to be given for Adolescent Girls only				

**Vitamin A Supplementation:-** Total 9 prophylactic doses of Vitamin A are given with a gap of 6 months between doses. 1<sup>st</sup> dose is given along with Measles vaccine at 9-12 months and 2<sup>nd</sup> to 9<sup>th</sup> doses to children from 16 months to 5 years of age twice a year with minimum of 6 months gap between two doses. 

Birth dose of Hepatitis B is given only within 24 hours after birth and zero dose of OPV is given up to 15 days after birth

## **NATIONAL VECTOR BORNE DISEASES CONTROL PROGRAMME**

### **Strategies for control of Vector Borne Diseases**

#### **Surveillance**

- **Active Surveillance:** It is carried out by Multi-Purpose Health Worker (MPHW) / Surveillance Worker in the community and also at the construction sites for active collection of slides. Rapid fever survey is conducted whenever a malaria case is detected.
- **Passive Surveillance:** Blood smear for Malaria Parasite is examined in all fever cases reported to all the Sub-centre / PHCs / CHCs / UHCs/ District Hospitals.
- Pro-active surveillance for Dengue & Chikungunya at PHCs / CHCs/ UHCs/ District Hospitals.
  - Representative sample survey round the year for processing IgM Mac ELISA antibodies at Sentinel Site Hospital.
  - Investigation of increased febrile illness in the community.
  - Investigation of all hemorrhagic diseases and all viral syndromes with fatal outcome at the Sentinel Sites Hospitals.

#### **Early detection and complete treatment**

- Blood Smear examination of every suspected Malaria patient is conducted and report made available within 24 hours.
- Whenever reporting within 24 hrs is not possible Rapid Diagnostic Kit is used for early detection to facilitate treatment for both types of Malaria.
- Treatment is available free of cost at all the peripheral centres & District Hospitals.
- Each detected case is thoroughly investigated by using the well designed investigating format.
- Follow up smears are repeated on 7<sup>th</sup> and 14<sup>th</sup> day of treatment course for every detected & investigated case of malaria.
- Special attention is given for pregnant women & children as regards to treatment, management of malaria at high risk areas, etc.
- Admission facility is available at all bedded PHCs/CHCs and District Hospitals.

#### **Integrated Vector Control**

- Antilarval measure: Antilarval measures are to be carried out at the construction sites by the respective contractor / builder. At some places UHCs/CHCs/PHCs are carrying out the antilarval measures to prevent mosquito breeding. Spraying of Mosquito Larvicidal Oil is also done in public drains for this purpose.
- Introduction of Larvivorous fish in mosquito breeding places is carried out by all peripherals health centres. 22 fish hatcheries are functioning. Free distribution of this fish is done for introduction in unused wells and other mosquito breeding sites.
- Anti-adult Mosquito measures:
  - Ultra-Low Volume (ULV) and Thermal fogging as per GOI guidelines is carried out subsequent to any threat of epidemic, focal outbreaks and death in the community due to Vector Borne Diseases.
  - Personal Protection Method: Prevention of entry of mosquitoes in houses at dusk & dawn by closing doors and windows, keeping young children fully clothed, use of mosquito nets while sleeping.

## **Source Reduction**

- Cleanliness drives are conducted in the community with the help of Village Health and Sanitation Committees, involving locally elected representatives and the locals.
- As a part of pre-monsoon preparedness, special drives are undertaken for source reduction of mosquito breeding sites viz. removal of discarded tyres, properly disposing pet bottles, plastic cups and other discarded water receptacles.

## **Legislative Measures**

- Legislative measures at construction sites are carried out as per the provisions of the Goa Public Health Act, 1985 and Rules 1987.

## **Epidemic Preparedness and Rapid Response (EPRR)**

- EPRR does early identification and control of epidemic to prevent large scale morbidity and mortality. Early warning signals which include epidemiological & entomological parameters, climatic factors i.e. rain fall, temperature and humidity, operational factors i.e. inadequacy and lack of trained manpower, developmental projects with population congregation is monitored.
- There is a linkage with Integrated Diseases Surveillance Programme (IDSP) at state level for obtaining early warning signals on regular basis.
- Both districts have rapid response teams consisting of Epidemiologist, Entomologist and laboratory technician, the Health Officer, Medical Officer i/c Health Workers, Supervisors, Community Volunteers of affected area are also involved in epidemic response activities.
- All requisite logistic support identified as buffer stock at the PHCs/CHCs/UHCs is readily available to the epidemic response team immediately at the time of requirement.

## **Supportive Interventions**

- Information Education Communication (IEC) / Behavior change communication (BCC) activities create mass awareness about preventive / control aspects of the diseases and the role to be played by the community and accordingly support public participation under Vector Borne Diseases Control Programme. Strategies comprise of
  - Printing of leaflets, brochures etc. and distribution among the community.
  - Advocacy / Inter-sectoral co-ordination meetings.
  - Involvement of Mass media Channels including print and electronic.
  - Folk media activities namely dramas and street plays.
  - Display of mobile hoardings.
  - Cleanliness Drives through schools and village committees.
  - Competitions/Campaigns in educational institutions and with Non-Governmental Organizations.

## **Lymphoedema Management in Chronic Filariasis Patients**

- Chronic Filariasis cases are line listed and are visited at regular interval by the respective Medical Officers and other Health Officials for home-based morbidity management.
- There are 4 National Filariasis Control Programme units in State of Goa viz Urban Health Centre Mapusa, Panaji, Vasco & Margao. These units regularly carry out night

blood collection for detection of micro filaria carriers and also free treatment provided for Micro Filaria carrier at all the health facilities.

### **Dengue, Chikungunya**

- There are 3 designated Sentinel Site Hospitals viz District Hospital North Goa, Hospicio Hospital, Margao (South Goa) and Goa Medical College which have IgM Mac ELISA testing facilities of suspected cases.

### **Japanese Encephalitis**

- ELISA facility for testing samples of Japanese Encephalitis is available free of cost in one SSH i.e. Goa Medical College, Bambolim.
- JE vaccination is introduced in the routine immunization programme in two doses at the age of 9 months and 18 months.

### **NATIONAL LEPROSY ERADICATION PROGRAMME (NLEP)**

- Reducing Grade II Disability due to leprosy is the highest priority of current NLEP strategy. Undetected cases at later stage lead to active disease transmission & occurrence of Grade II Disabilities in new patients.
- Active case finding in the form of the Leprosy Case Detection Campaign (LCDC), Sparsh Leprosy Campaign, Focused Leprosy Campaign will result in reversal of this trend. The objective is to reduce the disease burden & Stigma discrimination in the state of Goa.
- Services under NLEP
  - Awareness Generation (IEC) on leprosy
  - Active case finding in the community to search for hidden cases
  - Voluntary reporting by patients to the nearest health facility for free diagnosis & Multi Drug Treatment (MDT).
  - Confirmation of diagnosis by BI/MI at our laboratory.
  - Supply of free Multi Drug Treatment (MDT) to patients
  - Supply of single dose Rifampicin to contacts of index cases
  - Treatment of reactions & deformities in District Hospitals & Goa Medical College
  - Free Referral of special cases to the District Hospitals & Goa Medical College & Hospitals.
  - Assessment of disability status of cured People Affected with Leprosy (PALs) twice a year through Prevention of Deformity (POD) Camps.
  - Free MCR footwear's (2 pairs) in a year for needy PALs.
  - Self-Care Kits for patients with Ulcers & Deformities.
  - Reconstructive Surgery for correction of deformities & an incentive of Rs. 8000/- is disbursed to the beneficiaries & Rs. 5000/- for support to Government Institutions (RCS units) conducting the surgery.
  - Financial Assistance for supportive medicines during treatment & during follow up for all PALs.

### **NATIONAL PROGRAMME FOR CONTROL OF BLINDNESS**

In Goa the National Programme for Control of Blindness was started in the year 1981 keeping in view the main objective to reduce blindness incidence from 1.10% to 0.30% by year 2020, this programme is now incorporated in to the Primary Care component of the

health subject along with other programmes. The Directorate of Health Services implements the National Programme for Control of Blindness to render ophthalmic service at three levels.

- At the Primary Level it renders services through the Primary Health Centre and Community Health Centres along with its peripheral network.
- At the Secondary Level through the referral units mainly the District Hospitals, at Asilo Hospital, Mapusa & Hospicio Hospital, Margao.
- At Tertiary Level through Goa Medical College Hospital, Bambolim.

### **Services provided**

- Free eye checkup followed by operation. Cataract surgeries are conducted at Goa Medical College, Bambolim, District Hospitals & Sub District Hospital.
- Under the School Health Programme detection and correction of Refractive Error for Primary and Secondary School Students is carried out by Ophthalmic Assistants
- Screening and free spectacles for near work to Old person is a component of Programme Implementation Plan under NPCB.
- Cataract Detection Camps on annual schedules held at various PHCs/CHCs. Preference in operations is given to these patients alongwith free treatment. It is proposed to hold total forty such major camps during the year 2018-19.
- Medical Retina clinic are set up for screening patients with diabetes at Primary Health Centres, Community Health Centres, District Hospitals, Sub District Hospitals to reduce the incidence of blindness due to Diabetic Retinopathy.

### **SEXUALLY TRANSMITTED DISEASES CONTROL PROGRAMME (STDCP)**

- S.T.D Programme closely co-ordinates with The Goa State AIDS Control Society (GSACS) and execute Sexually Transmitted Disease control measures via The STD Clinics, the Community Health Centres, Urban Health Centres, Primary Health Centres and the community.
- The infrastructure under the STD Control Programme consists of three main STD Clinics at
  - Asilo Hospital Mapusa.
  - Hospicio Hospital Margao.
  - Baina Vasco.
- There is separate Unit of Skin and STD at Bambolim under Goa Medical College.
- Presently, all four STD Clinics/ Units report to GSACS. GSACS further sends a consolidated report to National Aids Control Organization (NACO) New Delhi.

In order to create awareness and prevent spread of sexually transmitted infections (STIs) in community, the following activities are carried out through the CHCs/PHCs:

- Awareness Programmes are being conducted among adolescent population, through sex education.
- Early diagnosis and prompt treatment at all the Health Centres, on the Syndromic approach, with referral to Skin and VD Department, Goa Medical College, Bambolim for specialized treatment. Kits are supplied for treatment free of cost.

- Promoting contact tracing and counseling through the STD Clinics and Government Health Centres. Very recently counselors have been posted by GSACS at the STD clinics.
- Reducing the Sexually Transmitted Disease stigma through Information Education Communication (IEC).
- Promoting condoms, safe sex and behavioral changes through health education.
- Screening antenatal cases in all Primary Health Centres to rule out syphilis, to prevent adverse effect on the newborn.
- Spreading of STD/RTI/HIV/AIDS awareness to rural population and Urban slums.
- Popularizing the syndromic management of STD at Primary Health Centres /UHCs/CHCs.

## **REVISED NATIONAL TUBERCULOSIS CONTROL PROGRAMME (RNTCP)**

### **Services offered under RNTCP**

- Diagnosis of TB: Sputum examination for Acid Fast Bacilli (AFB) for diagnosis and follow up is done in 21 Designated Microscopy Centres (DMC) and also sputum collection for diagnosis is also done at all PHCs/CHCs/District Hospitals. Newer and shorter MDR TB treatment is available for drug resistance patients as per DST pattern.
- CBNAAT facility is offered in both districts for presumptive TB among PLHIV, Paediatric & extrapulmonary cases.
- Also all notified cases are tested by CBNAAT for Rifampicin Resistance (Universal Drug Sensitive Test)
- Daily Anti-TB Regimen rolled out in Goa on 30<sup>th</sup> October, 2017 as per Revised Technical & Operational Guidelines.
- Active case finding in vulnerable population, diabetes mellitus, HIV patients, immunocompromised patients, old age homes, special schools was done.
- The PPM coordinators have interacted with Private practitioners, private hospitals, private nursing homes, clinics, for TB notification and started collecting TB notification from private sector.
- TB patients notified by private sector, are offered free public health services like RBSL test, HIV test, CBNAAT test for notified TB Patients and home visit (if patient's give consent for counseling, follow ups etc.)
- Newer and shorter MDR TB treatment is available for drug resistance patients as per DST pattern.

## **INTEGRATED DISEASE SURVEILLANCE PROJECT (IDSP)**

- IDSP is a district-based surveillance programme, intended to detect early warning signals of impending outbreaks and help initiate an effective response in timely manner. It also provides trend of ongoing diseases in the state. At National level the programme is monitored by Central surveillance unit (CSU), established at National Centre for Disease Control (NCDC), Delhi.

- State Surveillance unit (SSU) has been established at Directorate of Health Services, Campal, Goa. Also District Surveillance units (DSU) are identified at both districts.
- Two District Public health laboratories are identified and strengthened in order to investigate for outbreaks, (South Goa District Hospital & North Goa District Hospital).
- Media scanning and verification cell was established in Goa, under IDSP in May 2017. It detects and shares media alert with concerned Health centres for verification and response.
- IDSP monitors situation of Seasonal Influenza (H1N1) and Kyasanur Forest Disease (KFD) in the State. The programme also responds in timely manner to surveillance challenges in the state including emerging and reemerging diseases. In case of any suspected disease for which testing facilities are not available in the state, such samples are referred to referral laboratories outside Goa through IDSP. Currently samples for Seasonal Influenza (H1N1) & KFD are referred to Manipal Centre for Viral Research, Manipal University, Karnataka.

## **NATIONAL IODINE DEFICIENCY DISORDERS CONTROL PROGRAMME**

Iodine is an essential micro nutrient. It is required at 100-150 micrograms daily for normal human growth and development. The disorders caused due to deficiency of nutritional iodine in the food/diet are called Iodine Deficiency Disorders (IDDs).

Goiter is only the tip of the iceberg. Iodine deficiency results in physical and mental retardation. It affects people of all ages, both sexes and different socioeconomic status. It could result in abortion, stillbirth, mental retardation, deaf-mutism, dwarfism, squint, cretinism, goiter of all ages, neuromotor defects etc.

It is well established fact that with the exception of certain types of goiter, Iodine Deficiency Disorders are permanent and incurable. However, all these disorders can be easily prevented before they occur. The simplest method to prevent the broad spectrum of IDD is to consume Iodated salt daily. This is the most effective and inexpensive mode to prevent IDD. The supply of Iodated salt is to ensure availability of not less than 150 micrograms of iodine per person per day. Since salt is consumed by all every day, the supply of iodated salt will ensure the availability of iodine for normal body function. The average consumption of iodated salt per person per day is about 10gms. This consumption is in moderate amount.

National Iodine Deficiency Control Programme is implemented in order to prevent, control and eliminate iodine Deficiency Disorders in Goa, by banning the sale of non-Iodized salt for edible purpose, which was notified from 15<sup>th</sup> August 1997.

### ***Activities conducted under programme***

- Monitoring Consumption of adequately iodated salt.
  - By qualitative testing of salt at household level with the help of salt testing kits, which are supplied at all Sub centre level.
  - By quantitative testing of salt samples at (household/ Consumer level samples) at IDD monitoring Laboratory, established at Directorate of Health services, Campal- Panaji.
- Conducting IDD Surveys to identify the magnitude of IDD.

- Conducting trainings.
- Dissemination of information, education and communications in order to generate awareness in general public on importance of consuming adequately iodated salt.

## **NON-COMMUNICABLE DISEASE CELL**

### **National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS)**

*Activities under National Programme for Control of Cardiovascular Diseases, Diabetes, Cancer & Strokes (NPCDCS)*

- Opportunistic Screening, IEC activities, diagnosis and treatment are done at all peripheral health facilities
- Opportunistic screening at all levels in the Health care delivery system from sub-centre and above for early detection of diabetes, hypertension and common cancers.
- Population Based Survey by house to house activity to identify patients suspected of Diabetes, Hypertension, Anemia, etc.
- NCD Screening camps for detection Diabetes, Hypertension, Common Cancer (Oral, Breast, Cervical) is carried out by all peripheral health facilities monthly, positive cases are being referred to District Hospital for further management. Population based screening for Non Communicable Diseases like Diabetes, Hypertension every 1 yearly and Breast Cancer, Cervical Cancer & Oral Cancer every 5 yearly for all the individuals above 30 yrs is being done.
- Early diagnosis treatment and prevention of complications of Diabetes is carried out.

## **NATIONAL TOBACCO CONTROL PROGRAMME (NTCP)**

Under National Tobacco Control Programme, District Tobacco Control Cell (DTCC) is set up in North & South districts, under the charge of Senior Psychiatrist, and assisted by Social Worker, Counsellor, Data Entry Operator.

### **Activities:**

- Awareness Programmes on COTPA Act 2003 and ill effects of tobacco are conducted regularly in all the Schools & educational institutions by Social Worker, Psychologist & Counsellor.
- Anti-Tobacco IEC posters have been distributed to all secondary schools and also Posters showing different health hazards of Tobacco. These are especially made for the school children and the non-tobacco users to make them aware and say no to Tobacco.
- Tobacco Control Committees are constituted in majority schools in Both the Districts of Goa.

## **Enforcement of COTPA Act 2003 in GOA**

Enforcement squads constituted for each District for implementation of COTPA Act 2003 including imposing penalties. Each squad comprises of Jt. Mamlatdar & Executive Magistrate, PSI, Sanitary Inspector and NGO Member. (VHAG, NOTE, GOACAN)

### **Intervention**

- Workshop for Enforcers including field enforcement drive on 11/04/2018 at South Goa and on 12/04/2018 at North Goa by the UNION.
- Goa Dental College & Hospital also conduct Tobacco Cessation Counselling.

- Goa Entertainment Society also organizes programme on World No Tobacco Day to educate the Society.

### **DISTRICT MENTAL HEALTH PROGRAMME**

Under District Mental Health Programme (DMHP) in South Goa, Psychiatric OPD at Hospicio Hospital and outreach sessions inclusive of OPD and IEC activities are conducted regularly at the peripheral health centers.

### **NATIONAL PROGRAMME FOR HEALTH CARE OF ELDERLY (NPHCE)**

Activities conducted under the National Programme for Health Care of Elderly (NPHCE) in Goa.

- Weekly Geriatric OPD has been started from the year 2017 at District Hospital, Sub District Hospital.
- Free diagnosis and medicines for elderly available at all centers.
- Separate beds are earmarked for elderly in District Hospitals.
- Wherever old age homes are present, the local PHC conducts visits and examines the sick and elderly and referrals done to higher centers if needed.
- We are in process of developing of Geriatric Health Care units in District Hospitals. For this, Human Resource has been recruited and they will be functioning shortly.
- Procurement of Assistive aids and equipments for elderly will be done this year 2018-19. The process of tendering and procuring will be done and these will be placed at all Health facilities.
- Awareness in healthy life styles for elderly is being done by CHC and PHC.

### **National Programme for Prevention and Control of Deafness (NPPCD)**

- Audiometry machines are installed and also Audiologist are recruited at both the District Hospitals.
- Medical Officers & RBSK Doctors are trained by Senior ENT Surgeon in detecting Hearing Impairment in School Health Programme.
- Surgical procedures like Tympanoplasty, etc. are being done at both the District Hospital like.

### **MEGA MEDICAL CAMP**

The Mega Health Camp are being organized by the health department of state government of Goa at different Primary Health Centre & Community Health Centre all over the Goa. The aim is to organize the camp and provide all sorts of medical facilities to the patient under one roof.

Mega Medical camps are also being conducted as pilot project under Sattari taluka which will be replicated in other parts of Goa involving Goa Medical College & Hospital and Goa Dental College & Hospital consultants and the Mobile Dental Van.

The services are provided under Mega Medical Camp for local people like Gynaecology OPD, Medicine OPD, Paediatrics OPD, Surgery OPD, ENT OPD, Ophthalmology OPD, Orthopaedic OPD, Dental OPD, Skin OPD, Dental Mobile Van and Tuberculosis Van.

## **HEALTH AND WELLNESS CENTRE (HWC)**

Health and Wellness team will consist of MPH and ANM who will enable Family Folders and Individual Health Cards to individual family members and also inform the family of what services the HWC offers. The HWC team will have a record of the Family Health Card, for which Digital Format would be implemented depending on the State readiness, so as to facilitate referrals and enable a continuum of care to the population.

For conditions that require long term treatment, drug supplies will be available at the HWCs, so that patients don't have to travel far from their homes for prescription and refills, and the Comprehensive Primary Health Care (CPHC) team can also monitor compliance through follow-ups and counselling.

RMD Thana, RMD Keri, RMD Diwar, RMD Usgao and RMD Sada has been identified as health and wellness centres in the first phase for the North Goa and South Districts. UHC Mapusa under NUHM, RMD Guleli, RMD Cola, RMD Neturlim to be operationalized in the second phase. These Health and Wellness Centres will deliver comprehensive primary health care services which are stated below.

- Comprehensive Maternal Health Care Services (to be provided in those sites equipped to serve as 'deliver point')
- Comprehensive Neonatal and Infant Health Care Services.
- Comprehensive Childhood and Adolescent Health Care Services.
- Comprehensive Contraceptive Services.
- Comprehensive Reproductive Health Care Services
- Comprehensive Management of Communicable Diseases.
- Comprehensive Management of Non-Communicable Diseases.
- Basic Ophthalmic Care Services.
- Basic ENT Care Services.
- Screening and Basic Management of Mental Health Ailments.

The above mentioned RMD's will be functioning as Health and Wellness Centres in the first phase which will provide Comprehensive Primary Health Care at the level of Sub – Centres and these services will be provided by the Medical Officers, the ANM's will be responsible for the Population Enumeration Survey, Data Collection and Compilation on the NCD Application which in turn will sync in the PHC Portal. This mechanism of online data entry will help to have a strong data base of the Non – Communicable Diseases and also prognosis of the patients and for upward and downward referrals for further evaluation and management of the patients. This application also will generate work plan for the ANM's for effective patient intervention and time management.

### **STEMI Project Goa :-**

STEMI – stands for ST Elevation Myocardial Infarction; a heart attack caused by complete blockage of blood vessel in heart. Goa will be first state in the country to launch a state-wide STEMI care program based on latest guidelines. Program will be free to Goa residents.

- Goa Medical College will serve as center for angioplasty for acute STEMI patients.
- Nine sites within the DHS will serve as thrombolysis centers; these will further be expanded to a total of twelve Centers. Additional site could be added based on ongoing program evaluation to provide uniform prompt access to heart attack/STEMI care in the most remote region.

- The program will use modern technology to expand the reach of expert Cardiology care to remote areas of Goa.
- Department of Cardiology at Goa Medical College is being expanded to seven cardiologist from the initial three cardiologist.
- Forty Medical Officer from the Directorate of Health Services have been trained in providing care for the STEMI.
- Five Cardiac ambulances are being launched with each ambulance staffed by a trained doctor and advance EMT.
- Government is providing newer thrombolytic drugs to treat STEMI; though 10 time much more expensive than the currently used Streptokinase it is more effective and safer.
- Program expects to treat about 1500 patients in its first year.
- We expect to see decrease mortality from the acute STEMI, shorter hospital stays and a quicker return to normal life.
- This is a landmark change in the manner in which STEMI patients will be treated with service available throughout Goa.

## **DIALYSIS**

This programme is monitored and supervised by PMO's office. Dialysis in the Public Sector is in the Public Private Partnership (PPP).

- The centres where dialysis is carried out:
  - Goa Medical College
  - Hospicio Hospital
  - CHC Canacona
- New Centre where Dialysis have been started recently:
  - Asilo Hospital
  - PHC Balli
  - PHC Navelim
  - CHC Valpoi
  - Sub District Hospital, Ponda

## **GOA PUBLIC HEALTH ACT**

No objection certificates (NOC) from sanitation point of view are issued by the Health Officers / Medical Officers Incharge in their areas of Jurisdiction in accordance with the Goa Public Health Act, 1985 Rules 1987 and subsequent Amendments for establishments of commercial, industrial and other establishments and construction purposes. Complaints received under Goa Public Health Act are attended by the respective local Competent Health Authority.

## **SPECIAL CELL AT DIRECTORATE OF HEALTH SERVICES**

- A. Issue of Licenses: Director of Health Services issues licenses
- Under the provisions of Goa Medical Practitioner's Act, 2004 (Goa) Act 9 of 2004, For practicing/establishing Modern Medicine, Dental, Alternate Medicine, Clinics and Hospitals / Diagnostic Centers / Pathological Laboratories.
  - Under the provisions of Goa Public Health (Amendment) Rules 2010.
    - a) License is issued for establishing a unit of SPA / MASSAGE PARLOUR.
    - b) Licence/Permit is issued to operate Ambulance.

## MEDICLAIM SCHEME

Under Mediclaim scheme, financial assistance to the maximum extent of Rs. 1.50 lakhs per illness is provided for availing super specialties which are not available under the State Government hospitals, to residents of Goa, who have been staying in Goa for a minimum period of 15 years, and whose annual household income is less than Rs. 1,50,000/- per annum.

Medical treatment covered are (i) Neurological Disorders; (ii) Cardio-Thoracic Surgery; (iii) Kidney transplantation; (iv) Plastic Surgery; (v) Radiotherapy; (vi) Total Replacement of Joints; (vii) any other major diseases/illness.

In order to avail this facility, the concerned person/individual has to apply to the Director of Health Services, Panaji, Goa in the prescribed Form C & D (Annexure VII & VIII) enclosing there with:

- Passport size recent photograph of the patient on Form 'C' or 'D'.
- Photo copy of election card and Ration Card of the patient. If the patient is a minor, photo copy of election card of either of the parent
- Medical Certificate in Form -A (Annexure V) from the Medical Superintendent, Goa Medical College, Bambolim, indicating that the patient is referred to some other recognized Hospital since the facilities are not available at Goa Medical College
- Income certificate in Form-B (Annexure VI) from the concerned Mamlatdar.

Mediclaim Certificate will be issued by the Medical Superintendent, Goa Medical College (GMC), Bambolim on the recommendation of the concerned Unit Head of the Department of GMC or the Sr. Consultant of District Hospitals either at Mapusa or Margao attached to the Directorate of Health Services after ascertaining that the particular case cannot be treated at the Government Hospital in the State of Goa including GMC. Based on this certificate, Director of Health Services, Panaji-Goa will issue a letter authorizing the concerned Hospital to render required Medical treatment to the said patient for the relevant procedure within the monetary limit specified in the said authority letter under Goa Mediclaim Scheme.

In case any patient has gone to recognized institute outside Goa for treatment which is not available in Government Hospitals in Goa, without Mediclaim Certificate, he shall apply directly to the Director of Health Services, Panaji, Goa along with relevant documents/papers. The amount of Mediclaim facility is up to Rs.3.00 lakhs in case of open Heart Surgery; Kidney transplants, Nuero Surgery including medicines for post-operative care. However maximum limit for Cancer is up to Rs. 5.00 lakh and Rs. 8.00 lakh for Bone Marrow transplant disease.

Government has extended the existing Mediclaim scheme to cover Cerebral Palsy and Skeletal Birth Defects including Speech Defects and Hearing Defects.

For the patient taking treatment in Goa Medical College for Cancer / Total Hip / Knee replacement, the cost of drugs/medicines, chemotherapy is reimbursable to the patient up to the maximum extent of 60 per cent of the amount admissible, for the relevant procedure, under the Goa Mediclaim Scheme.

Government has conveyed facility of financial assistance to the patients undergoing Continuous Ambulatory Peritoneal Dialysis (CAPD), the procedure which could be done at home, subject to the above monetary unit. The patients can avail the super speciality Medical treatment under this scheme in any of the following recognized hospitals in Goa State or outside Goa State.

List of the hospitals recognized under for Goa Mediclaim Scheme, Medical Reimbursement and the treatment covered under each hospital is appended as Annexure III & IV.

The Specimen Forms are appended as Annexure V, VI, VII, VIII, and IX.

Super Specialty treatments are covered under the scheme:

<u>Sr. No.</u>	<u>Nature of Sickness</u>	<u>Permitted ceiling limit for Treatment</u>	
(i)	CAPD Dialysis	15000 P.M 13000 P.M **	** (raised to 15600/-)  or actual expenses Whichever is the least.
(ii)	Plastic surgery.	1.5 lakh	
(iii)	ICU, NICU, PICU, Trauma Care	1.5 lakh	
(iv)	CABG/PTCA (Angiography & Angioplasty)	1.5 lakh	
(v)	Open Heart Surgery (Valve replacement, MVR, VSD, ASD)	3.00 laks	
(vi)	Kidney Transplantation	3.00 lakh	
(vii)	Neuro Surgery	3.00 lakh	
(viii)	Radio therapy/Chemotherapy (Cancer)	5.00 lakh	
(ix)	Cochlear implant	1.5 lakh	
(x)	Spastic child, cerebral palsy, skeletal deformities	1.5 lakh	
(xi)	And Bone Marrow Transplant	8.00 lakh	

\*\* The amount of Dialysis has been increased from Rs.13000/- to Rs.15,600/- per month per patient w.e.f 30/6/15 with an increase in the number of dialysis per month from 10 to 12 dialysis @ Rs. 1300/- per dialysis.

## **DEEN DAYAL SWASTHYA SEVA YOJANA**

The Scheme is to provide Universal Health Cover through Insurance for the Entire Resident Population of Goa. Health Insurance could be an innovative way of overcoming financial handicaps, improving access to quality medical care and providing financial protection against high medical expenses to the people of State of Goa. DDSSY covers entire resident population\_of the State, residing in Goa for five years and more.

- Benefits under this scheme should be provided on a cashless basis to the Beneficiaries upto the limit of their annual coverage, as per details as under:
  - Cover of upto ₹ 2.5 lakhs per annum for a family of three or less members.
  - Cover of upto ₹ 4 Lakhs for a family of four and more members.
  - The Insurance benefits can be availed individually or collectively by members of the family.
  - An individual is free to take a higher cover directly from the Insurance Company by paying higher premium, without having any impact on existing government policy and facilities.

### ***Insurance Cards: One card for one family (Registration fees)***

- Goa Electronic Ltd. (GEL) will provide the cards
- On payment of Rs. 200/ for family of 3 and less and Rs. 300/- for family of 4 and above
- Concession of 50% for OBC/SC/ST /Differently abled head of family.

### ***Documents required***

- Application forms
- Aadhaar cards of all family members
- Ration card (if any)
- Residence Proof - Passport/Driving license/Bank Account/Election Card / Residence Certificate.

### ***Empanelled Hospitals***

A total of 6 Government Hospitals, 1 Government aided hospital and private Hospitals 34 (in Goa) & 10 (outside Goa) have been empanelled.

***Secondary/Tertiary Medical/ Surgical procedures covered:***

- Total of 447 procedures identified after extensive consultations (Team of 9 doctors from DHS/GMC selected procedures based on experience and CGHS/Other State Scheme Lists)
- These procedures require hospitalization & high out of pocket expenses-hence covered under insurance.
- Graded costing to account for facilities available at hospitals and incentivize improvement (A, B & C grades)
- Highest possible rates of different procedures adopted from CGHS/States/National Excellence Institutes

***Additional Beneficiary & Other Information***

Goa Government employees and their dependents that are governed under the existing Medical Attendance Rules shall be entitled to opt for enrollment under the scheme, by giving the required option in the form appended, to be submitted by the concerned employee to his / her Head of Office / Department. Option once exercised shall not be changed for a period of one year.

***Additional Procedures which Goa has included***

- Medication for chronic lifestyle diseases like Diabetes, Hypertension. Amount shall not exceed Rs. 15000/- per annum.
- Medication for debilitating disorders like Epilepsy, Multiple Sclerosis and Cerebral Palsy
- Mental Health/Ayurveda hospitalization (based on NIMHANS/AYUSH) advise and restricted only to Government Hospitals/Institutions
- High end Diagnostics only on the referral of Govt. Hospitals /Doctors and at rates discovered and fixed by GMC.

The DDSSY Scheme is run departmentally through the TPA-Paramount Health Services & Insurance TPA Pvt. Ltd. without involvement of Insurance Company from 01/06/2018 onwards. The payments will be made directly by the DDSSY Cell of the DHS.

## INSTITUTE OF NURSING EDUCATION

This Institute offers three nursing education programs namely: The Auxiliary Nurse Midwifery, Bachelor in Science Nursing and Master in Science Nursing Program.

### Details of Nursing Education programs run at the Institute of Nursing Education, Bambolim Goa

Name of the Program	Duration and start of academic	Current Admission requirement (education, age, sex)	Current fee structure	Diploma/ Degree	Yearly intake capacity	Affiliated to/Examining Body
M. Sc. Nursing	2 Years October	B.Sc. (Nursing)/Post Basic B.Sc. (Nursing) programme from a Nursing Institution recognized by the Indian Nursing Council, with a minimum of 55% aggregate marks.	Approx. Rs. 58000/- per year	Post Graduate Degree	25 students	Indian Nursing Council, New Delhi and Goa Nursing Council, Bambolim, Goa and Goa University, Taleigao Plateau, Goa
		Be a Registered Nurse and Registered Midwife/Equivalent.				
		Have a minimum of one-year work experience after B.Sc. (Nursing) OR one year prior to or after Post Basic B.Sc. (Nursing).				
		Be a life member of the Trained Nurses Association of India				
		No age bar				
	Males and Females					
B. Sc. Nursing	4 years September	XII Science 45% in PCBE	Approx. Rs. 20800/- per year (including books and uniform)	Graduate Degree	100+3*	Indian Nursing Council, New Delhi and Goa Nursing Council, Bambolim, Goa and Goa University, Taleigao Plateau, Goa
		45% in National Eligibility cum Entrance Test (NEET)				
		Not less than 17 years as on 31 <sup>st</sup> December of the year of admission				
		Males and females				
Auxiliary Nurse Midwifery	2 years October	XII Science, Vocational stream [ Health Care Science (HCS)], Arts and Commerce through Central Board of Secondary Education (CBSE)/ Indian Certificate of Secondary Education (ICSE)/ Higher School Secondary Certificate Examination (HSSCE) equivalent examination with 45% marks in aggregate	No fees	Diploma	40	Indian Nursing Council, New Delhi and Goa Nursing Council, Bambolim Goa
		English as medium of instruction				
		17-35 years				
		Only for females				

\*supernumerary quota for students from Jammu and Kashmir

### ***The address and contact details***

Principal,  
Institute of Nursing Education, Bambolim Goa 403202  
Tel No. 0832-2459727 e-mail: principal-ine.goa@ nic.in

## **ENVIRONMENTAL & POLLUTION CONTROL WING**

### **Laboratory**

- Environment and Pollution control wing laboratory under Directorate of Health Services, Campal provides facilities for analysis of water of all Hotels, Public and Government agencies from Goa as well as neighboring state.
- Testing of water
  - Drinking Water
  - Well and Bore well water
  - Spring water in the state.
  - River and sea water purify
  - Water used for construction purpose
  - Mining water and other stagnated water from mining areas.
- The water samples sent by all Health Centers under Directorate of Health Services are analyse for its purity.
- Most of the samples are charged as per Government approved rates.

### ***The contact phone No. of the Environmental & Pollution control wing:***

Environment and Pollution Control wing  
Directorate of Health Services  
Campal, Panaji Goa  
Contact No. 0832-2225646

## **AYUSH**

- AYUSH Dispensaries namely, Ayurvedic & Homeopathic Dispensary are established at all PHC's, CHC's, UHC's, Sub-District Hospitals and District Hospitals.
- Presently, there are 29 Ayurvedic Physicians (on Regular Post), 12 Homeopathic Physician (2 Regular and 10 contractual basis) and are conducting OPD in various Health Centres where free Ayurvedic & Homeopathic medicines are provided by Government of Goa to all at all the Health Centres.
- The Post of Dy. Director (AYUSH) was filled up to look after administration and management of AYUSH Cell, under DHS, Panaji.
- State AYUSH Society Goa was established under National AYUSH Mission guidelines of Ministry of AYUSH, Government of India, New Delhi. and implemented Centrally Sponsored Scheme for promotion of AYUSH Health Care facilities to public in the State.

## **EMRI SERVICE**

GVK EMRI is providing Emergency Medical Services in Public Private Partnership (PPP) framework through a fleet of 65 ambulances in the state of Goa. Out of these 65

ambulances 18 ambulances are Basic Life Support(BLS) and 20 are state of the art Advanced Life Support ambulances (ALS), 2 ambulances are specially designed for Neonatal (Age up to 1 month) Emergencies and are equipped with Incubators and Ventilators for Neonates, 35 First Responder Bikes (FRB) to reach the incident and provide pre hospital care to stabilize the victim in least period of time and 5 Advanced Cardiac Care Ambulances (CCA) to cater all the cardiac related emergencies. Goa is the first state which has launched these Advanced Cardiac Care Ambulances in India.

Further to this GVK EMRI has also initiated ECC- Emergency Care centres- the first one being in Canacona. A total for 4 ECC will be set up during this year. ECC's are being set up to provide immediate attention and care and stabilize the patient before transporting to a higher Health Infrastructure.

#### Medical Emergency services

- Call types e.g. Emergency Calls, Enquiry and Others
- Dispatches includes Medical, Police and Fire Emergencies
- Medical Emergencies e.g. Vehicular Traumas, Non-Vehicular Traumas, Pregnancies and Deliveries, Acute Abdomen, Cardiac Emergencies, Diabetic, Epilepsy, Fevers, Burns, Animal Bites, Poisoning, Suicides, Assaults and Behavioral Problems.
- Police Emergencies cover harassment/RTA and offences like Bodily Offences, Property Offences and others.

#### **DENTAL SERVICES**

Under the Directorate of Health Services, there are 29 dental clinics

- 2 at District Hospitals - North Goa District Hospital, Mapusa & South Goa District Hospital (Hospicio), Margao.
- 2 at Sub-District Hospitals - SDH Ponda & SDH (Cottage) Hospital, Chicalim
- 4 at CHCs, - CHC Canacona, CHC Curchorem, CHC Pernem & CHC Valpoi.
- 19 PHCs - PHC Aldona, PHC Balli, PHC Betki, PHC Bicholim, PHC Candolim, PHC Cansarvanem, PHC Cansaulim, PHC Chinchinim, PHC Corlim, PHC Cortalim, PHC Curtorim, PHC Pilliem-Dharbandora, PHC Loutolim, PHC Madkai, PHC Quepem, PHC Sanguem, PHC Sanquelim, PHC Shiroda & PHC Siolim.
- 1 at UHC Panaji and 1 at RMD Keri.

#### *Activities*

- OPD is held four days a week,
- School visits are conducted two days a week.
- They provide promotive, preventive and curative dental care to the people.
- School children are also examined periodically under this programme.

#### **GOA STATE AIDS CONTROL SOCIETY**

- *Integrated Counseling and Testing Centres at:*
  - Goa Medical College, Bambolim
  - Tuberculosis and Chest Diseases Hospital, St. Inez, Panaji
  - Hospicio Hospital, Margao

- North Goa District Hospital, Mapusa
- Cottage Hospital, Chicalim
- CHCs at Canacona, Curchorem, Pernem and Valpoi
- Sub District Hospital, Ponda and PHC, Candolim.
- *Facility Level Integrated Counseling and Testing Centers at:* All Primary Health Centers and Urban Health Centers under Directorate of Health Services.
- CD4 cell count testing facility of HIV/AIDS patients is available at Goa Medical College (Dept. of Microbiology), Bambolim.
- Sexually Transmitted Diseases/ Infections related services at:
  - STD clinic, Cottage Hospital. Chicalim.
  - STD clinic, Hospicio Hospital, Margao
  - STD clinic, North Goa District Hospital, Mapusa
  - Skin and V.D. Dept., Goa Medical College, Bambolim.
  - All Health Centers under Directorate of Health Services
- Free drugs for treatment of Opportunistic Infections in HIV/ AIDS patients is available at Goa Medical College, Bambolim; North Goa District Hospital, Mapusa; Hospicio Hospital, Margao.
- Prevention of Parent-to-Child Transmission of HIV infection during pregnancy: Programme includes counseling, testing and drug administration to HIV positive pregnant ladies & Syrup NVP to babies born to HIV+ve positive mothers at
  - OBG Dept., Goa Medical College;
  - Hospicio Hospital, Margao
  - North Goa District Hospital, Mapusa.
  - Sub District Hospital, Ponda
- Early Infant Diagnosis: As early as six weeks, babies born to HIV positive mothers can be tested to rule out HIV infection in the babies at the below mentioned centers.
  - Goa Medical College, Bambolim
  - North Goa District Hospital, Mapusa
  - Hospicio Hospital, Margao
  - Cottage Hospital, Chicalim
- Antiretroviral Treatment Centre at Goa Medical College (Opp. Paediatric OPD): Free antiretroviral drugs for eligible HIV +ve adults and children.
- Facility Integrated ART Centre: Hospicio Hospital for South Goa District
- Link ART Centre plus: North Goa District Hospital, Mapusa.
- Link ART Centre: Sub District Hospital, Ponda, and Cottage Hospital, Chicalim.
- Viral load testing facility: at ART Centre, GMC, Bambolim. Blood samples taken once a week.
- Blood Banks: Three Government Blood Bank Supported by Goa State AIDS Control Society and three Private Blood Bank which are Monitored by Goa State Blood Transfusion Council.

- Availability of free condoms at all health facilities for prevention of STIs including HIV/AIDS and pregnancy.
- Targeted Intervention (TI) projects are undertaken through the following NGOs funded by Goa SACS to create awareness among High Risk Groups and Core Groups.
  - Life Line Foundation,
  - Sai Life Care,
  - Desterro Eves Mahila Mandal,
  - Rishta,
  - Community Resource Foundation,
  - Presentation Society,
  - Humsaath trust Goa & Zindagi Goa.

## **CENTRAL RIGHT TO INFORMATION ACT 2005**

Under the right of information act 2005 (Central Act No 22 of 2005), adopted by the Government of Goa and published in the Official Gazette of Govt. Notification No 10/2/2005-LA dated 7/7/05, Directorate of Health Services, Panaji has appointed the following Officials as Assistant Public Information Officer and Public Information Officer

Public Information Officer (PIO)	–	Dy. Director (HIB)
Assistant Public Information Officer (APIO)	–	Head Clerk, Special Cell, DHS
First Appellate Authority	-	Director of Health Services

Besides, the above, the Officer-in-charge of all Hospitals/CHCs/PHCs under this Directorate are designated as Public Information Officers for their respective units.

## **COMPLAINTS AND GRIEVANCES**

All the complaints and grievances may be addressed to the following Officers who are designated as Public Grievances Officers

- Director of Health Services, Public Grievance Officer – State level
- Dy. Director (Public Health) (for DHS Head Quarters)
- Medical Supdt. Cum Dy. Director, North District (Asilo) Hospital, Mapusa (for the North District)
- Medical Supdt. Cum Dy. Director, Hospicio Hospital, Margao (for the South District)
- Medical Supdt. Cum Dy. Director, Sub District Hospital, Ponda (for Sub District Hospital Ponda)
- Medical Supdt. Cum Chief Medical Officer, T. B. Hospital, Margao  
T. B. Hospital Margao.
- Health Officer, Cottage Hospital, Chicalim (for Cottage Hospital, Chicalim)
- All Health Officers, Medical Officers i/c of respective CHCs/PHCs/UHCs will be the Public Grievances Officer for the concerned CHC/PHC/UHC.

**ANNEXURE -I**

**List of Government Hospitals, Health Centers with Beds under DHS in Goa**

<b>Sr. No.</b>	<b>Hospitals / Centre</b>	<b>No. of Beds</b>
	<b>Hospitals</b>	
1	North Goa District Hospital, Mapusa	300
2	Hospicio Hospital, Margao	230
3	Sub District Hospital, Ponda	220
4	T.B.Hospital, Margao	68
5	Sub District (Cottage) Hospital, Chicalim	60
	<b>CHCs</b>	
1	Canacona	70
2	Curchorem	50
3	Pernem	40
4	Valpoi	30
	<b>PHCs</b>	
1	Aldona	12
2	Balli	24
3	Betki	12
4	Bicholim	30
5	Candolim	12
6	Casaulim	12
7	Cansarvarnem	12
8	Curtorim	12
9	Dharbandora	15
10	Marcaim	12
11	Sanguem	20
12	Sanquelim	70
13	Shiroda	24
14	Siolim	12
15	Quepem	24
	<b>Total</b>	<b>1371</b>

## ANNEXURE -II

### Time schedules for services provided by Directorate of Health Services

S. N	Services	Maximum time taken provided all requisite documents are submitted	
1	General OPD	Conducted from Monday to Friday (9.00a.m. to 1.00p.m. & 2.00p.m. to 4.30 p.m.) Saturday (9.00a.m. to 1.00p.m.)	
2	Case paper registration	From Monday to Friday (9.00a.m. to 12.00 noon) & (2.00p.m. to 3.30 p.m.) Saturday (9.00a.m. to 12.00 noon)	
3	Slide Examination for Malaria (SMP)	Conducted from Monday to Friday between 9.00a.m. to 4.30 p.m.: Reports given within 24hrs. Except Saturday (9.00a.m. to 1.00p.m.): Reports given on Monday.	
4	Diabetic OPD	On Fixed days (OPD Timing)	
5	Yellow fever Vaccination	UHC Panaji: every Wednesday 9.00a.m. to 12.00noon UHC Margao: every Friday 9.00a.m. to 12.00noon.	
6	Sanitary cards / Health Cards	OPD Timings: Cards issued within 24hours except Saturday (cards made on Saturday issued on Monday).	
7	Immunization (as per Universal Immunization programmes)	Monday & Thursday (9.00a.m. to 1.00p.m.)	
8	Antenatal OPDs	Every day at District Hospitals. Fixed days at Sub-District Hospitals, PHCs, CHCs, & UHCs wherein Gynecologists are deputed from Directorate of Health Services.	
9	NUHM OPD All services under various National Health Programmes are provided during OPD hours especially in the slum areas	UHC Mapusa	UPHC Khorlim
			Tuesday & Friday 9.30a.m. – 1.00p.m
		PHC Chimbel	UPHC Indiranagar
			Monday/Wednesday/Saturday 9.00a.m. – 1.00p.m.
		UHC Margao	UPHC Davorlim
			Monday to Friday 2.30p.m. – 4.30p.m.
		PHC Cortalim	UPHC Zuarinagar
	Weekly once 9.30a.m. -1.00p.m.		
10	Swimming Certificate/ Medical Fitness Certificates/ OPV Certificates	Issued on the same day. <i>By paying necessary fees</i>	
11	<b>Homoeopathy:</b> OPD Daily & Office Administration	Conducted from Monday to Friday (9.00am to 4.30pm) Saturday (9.00a.m. to 1.00p.m.)	
12	Dental OPD	Conducted from Monday to Friday (9.00 a.m. to 4.30 p.m.) Saturday (9.00a.m. to 1.00p.m.)	
13	<b>Leprosy</b>		
	Bacteriological Index & Morphological index is done to aid confirmation of diagnosis in leprosy	Reporting is done on the next day of taking stit skin smear	1 day
	MDT (Multi Drug Therapy) is given free of cost to patients affected with Leprosy.		
14	Hospitals / CHCs/PHCs/UHCs Medical Fitness Certificate	After Examination	On all working days
15	District Hospitals Disability Certificate	Application forms Photographs	On fixed days

**ANNEXURE -III**  
**HOSPITALS WHERE CREDIT FACILITY IS AVAILABLE**

<b>Sr.</b>	<b>Name of the Hospital</b>	<b>Diagnosis (Treatment)</b>
1	Fortis Hospital, Bangalore	Cardio- vascular surgery, Pediatric Cardioplogy and other such high-end treatments which are not available at Goa Medical College.
2	Manipal Hospital, Bangalore	Cardiology, Cardio-thoracic Surgery, Nephrology, Urology
3	Sagar Apollo Hospital, Bangalore	Open Heart Surgery and By-Pass Surgeries, Angioplasty and coro-stenting, Neurosurgery, cat-scan, MRI for which treatment is not available at GMC, Bambolim.
4	Chodankar Nursing Home, Porvorim.	Pediatric Surgery and Endoscopic surgeries. Cardiac City angiography Thoracic and Vascular Surgery Procedure.
5	Ruby Hall Clinic, Pune	Those super specialties which are not available in GMC and other Hospitals under state Govt.
6	Manipal Goa Cancer & Gen. Hosp., Dona Paula	Only for cancer treatment like radiotherapy and other types of anti-cancer treatment which are not available in GMC. Dialysis. Thoracic & Vascular surgery
7	Apollo Victor Hospital, Margao	Cardiac procedures and Urological procedures Gastoentrolgy Thoracic & Vascular Surgery, Nephrology and Laproscopic procedure and Kidney dialysis.
8	Gomantak Ayurvedic Mahavidyalaya Shiroda, Goa	Snchama, Svedana, Parisheka, Dhara, Vamana, Verichana, Nasya, Basti, Siddha Basti, Rakta Mokshna and allied Procedures for which treatment is not available in GMC and other hospitals under DHS
9	K.L.E.S. Hospital, Belgaum	Cardiovascular surgery, Neurological disorders, Cardio-thoracic surgery, kidney transplantation. Plastic surgery, Radiotherapy, Total replacement of joints and other major disease / illnesses for which treatment facilities as certified by the Medical Superintendent, GMC are not available in the Govt. Hospital in the State of Goa.
10	Kasturba Hospital, Manipal	Cardiovascular surgery, Neurological disorders, Cardio-thoracic surgery, kidney transplantation. Plastic surgery, Radiotherapy, Total replacement of joints and other major disease / illnesses for which treatment facilities as certified by the Medical Superintendent, GMC are not available in the Govt. Hospital in the State of Goa.
11	V.M. Salgaonkar Medical Research	Cardiovascular surgery, Neurological disorders, Cardio-thoracic surgery, kidney transplantation. Plastic

	Centre, Vasco	surgery, Radiotherapy, Total replacement of joints and other major disease / illnesses for which treatment facilities as certified by the Medical Superintendent, GMC are not available in the Govt. Hospital in the State of Goa.  Haemodialysis for the patient within the state of Goa, Cochlear implant surgery w.e.f 9/6/2016
12	Grace Intensive Cardiac Centre and General Hospital, Margao	Haemodialysis for the patient within the state of Goa
13	Children's Orthopaedic Centre, Mumbai	Paediatric facilities which are not available in G.M.C.,
14	Campal Clinic, Panaji	Thoracic Vascular surgeries, Trauma care, Neonatal Intensive care unit, Intensive care unit, paediatric Intensive care unit.
15	Shankara Netralaya Hospital, Chennai	Super specialties in Ophthalmic care
16	Belgaum Cancer Hospital Pvt. Ltd. Belgaum	Linear Acceleration based treatment and Intracavitary Radiotherapy
17	Gauns Child Care Hospital, Mapusa	Paediatric ICU, Neonatal Intensive Care Unit
18	Vision Multispeciality Hospital, Mapusa	(1) Intensive Care Unit, Surgical Intensive Care Unit, Gastroenterology Procedure & Thoracic and Vascular Surgeries. (2) Vitreo retinal Services and orbit/Oculoplasty Services (3) Haemodialysis
19	Vintage Hospital and Medical Research Centre Pvt. Ltd, St. Inez, Panaji-Goa	Ventilatory Care and Haemodialysis
20	Usgaonkar's Children Hospital and NICU, Ponda	Paediatric ICU, Neonatal Intensive Care Unit
21	R.G. Stone Hospital, Porvorim Goa	Haemodialysis in the Renal failure cases.
22	Savoikar Clinic and Nursing Home, Ponda	Haemodialysis in the Renal failure cases.
23	Classic hospital, Margao	Neonatal intensive care
24	Vishwa Sanjivani Health Centre, Multispeciality hospital, Vasco-da-Gama	Dialysis-Rs. 1300/- per dialysis for 12 dialysis per month
25	Royal hospital, Margao	-do-
26	Mangalore Institute of Oncology Hospital, Mangalore	Oncology, Surgical Oncology and radiation oncology

**ANNEXURE -IV**

**HOSPITALS WHERE CREDIT FACILITY IS NOT AVAILABLE**

<b>Sr.</b>	<b>Name of the Hospital</b>	<b>Diagnosis (Treatment)</b>
27	Madras Medical Mission Hospital, Chennai	Cardiovascular surgery, Neurological disorders, Cardio-thoracic surgery, kidney transplantation. Plastic surgery, Radiotherapy, Total replacement of joints and other major disease / illnesses for which treatment facilities as certified by the Medical Superintendent, GMC are not available in the Govt. Hospital in the State of Goa.
28	Jaslok Hospital, Mumbai	-do-
29	Wanless Hospital, Miraj	-do-
30	KEM Hospital, Mumbai	-do-
31	Bombay Hospital, Mumbai	-do-
32	P.D. Hinduja Hospital, Mumbai	-do-
33	Sion Hospital, Mumbai	Cardiovascular surgery, Neurological disorders, Cardio-thoracic surgery, kidney transplantation. Plastic surgery, Radiotherapy, Total replacement of joints and other major disease / illnesses for which treatment facilities as certified by the Medical Superintendent, GMC are not available in the Govt.Hospital in the State of Goa.
34	Wadia Hospital, Mumbai	-do-
35	J.J. Hospital, Mumbai	-do-
36	Johari Nursing Home, Mumbai	Paediatric facilities which are not available in Goa Medical College
37	B.L. Kapur Memorial Hospital, 5, Pusa Road, New Delhi	Cardiology, Cardio thoracic and Vascular Surgery, Surgery, Nephrology, Neonatology, Paediatrics, Paediatric Surgery, Nuclear Medicine, Bone Marrow Transplant treatment.
38	Wockhardt Hospital, Mumbai	Pediatric Cardiology, Pediatric Cardiac Surgery, Specialties in Ophthalmic surgery viz Cornea & Keratoplasty, Vitrioretinal Services & Glaucoma Services along with General cardiology & Cardiothoracic Surgery
39	Tata Memorial Hospital, Mumbai	Cancer treatment

**Annexure-V**

**FORM –A**

**MEDICAL CERTIFICATE**

This is to certify that the patient.....  
.....is suffering from.....  
.....facilities for treatment of which are not available in this  
State. The patient is, therefore, advised to seek such facility outside this State.

.....  
Signature of Medical Superintendent  
Goa Medical College

Office Seal.

**Annexure -VI**

**FORM ‘ B’  
INCOME CERTIFICATE**

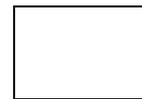
This is to certify that ..... is a permanent  
resident of Goa residing for the last 15 (fifteen ) years and having his/her residence  
at.....H.No.....Ward.....  
.....Village.....,taluka.....  
....and that his/her income and that of the members of the family from all sources does not  
exceed Rs.1,50,000/- per annum.

It is further certified that.....  
is a voter and his/her name is registered at Sr.No.....of Voters  
list/holding permanent Ration Card No.....maintained in this  
office.

It is certified that.....  
parent/guardian of the minor is a voter and his name is registered at Sr.No..... of voters  
List/holding permanent Ration Card No..... maintained in this  
office.

.....  
Signature  
Mamlatdar  
Office Seal

**Annexure-VII**



Affix passport size recent Photograph of the patient

**F O R M ' C '**

***(Application for Self-Treatment under Mediclaim Scheme)***

Name : .....

Address : .....

: .....

Dated : .....

Phone No. ....

To,  
The Director of Health Services,  
Mediclaim Cell,  
Campal, Panaji, Goa.

**Sub: Treatment under the Mediclaim Scheme.**

Sir,

I have to proceed to ..... (place) for Medical treatment at ..... (Name of Hospital) as required under the scheme. I am submitting herewith the following certificates: -

Certificate from the Medical Superintendent, Goa Medical College, that facilities for my treatment are not available in this State.

Certificate from the Mamlatdar of ..... certifying that the total income of my family members does not exceed Rs. 1,50,000/- per annum and that I am a permanent resident of Goa residing for the last 15(fifteen) years and I am registered in the Voters List.

OR

Certified copy of the P.P.O. bearing No. .... confirming that the patient is a retired State Government employee.

I shall be obliged if a letter recommending me for medical treatment at ..... (name of the hospital) is kindly issued to me immediately for admission in the hospital.

Yours faithfully,

( )

Encl: As above.

**Annexure - VIII**



Affix recent passport size Photograph of the patient

**F O R M 'D'**

(Application for treatment under Mediclaim to be submitted on behalf of the patient when the patient is minor)

Name : .....

Address : .....

: .....

Dated : .....

Phone No. ....

To,  
The Director of Health Services,  
Mediclaim Cell,  
Campal, Panaji, Goa.

Sir,

My ..... (relationship) ..... (name of the patient) is to be taken to ..... (place) for medical treatment at ..... (name of hospital) as required under the scheme. The following certificates are submitted: -

1. Certificate from the Medical Superintendent, Goa Medical College, Bambolim that facilities for his/ her treatment are not available in this State.
2. Certificate from the Mamlatdar of ..... (taluka) that the total income of my/his family does not exceed Rs. 1,50,000/- per annum and that he/she is registered in the voters list (not applicable, if minor).
3. Shri/Smt/Kum. is permanent resident of Goa residing for the last 15 (fifteen) years.

OR

Certified copy P.P.O. bearing No. .... confirming that the patient is a retired State Government employee.

I shall be obliged if a letter recommending him/her for treatment at ..... (name of the hospital) .....(place) is kindly issued to me immediately for admission in the hospital.

Yours faithfully,

( )

Encl: As above.

**Annexure – IX**

No. DHS/Med/F- /17-18/  
Government of Goa,  
Directorate of Health Services,  
Campal, Panaji-Goa  
Dated: / /2017.

**FORM 'E'**

(Format of undertaking to be given to the hospital / patient in respect of treatment and payment)

To,  
The Medical Director,

\_\_\_\_\_  
\_\_\_\_\_

Dear Sir,

This is to certify that \_\_\_\_\_, aged \_\_\_\_\_ years is eligible for benefits under the Mediclaim Scheme of Government of Goa.

The reimbursement per illness under the Mediclaim Scheme will be limited to Rs. \_\_\_\_\_/- ( \_\_\_\_\_) or actual hospital expenses, whichever is the least, in respect of the following:-

- 1) Room board and nursing expenses including surcharge if any, limited to Rs. 250/- per day;
- 2) I.C.U.
- 3) Surgeon's and Anaesthetist's fees;
- 4) Anaesthesia, blood, oxygen, operation theatre, surgical appliances;
- 5) Diagnostic materials and X-rays;
- 6) Medical Practitioner's Consultant's and Specialist's fees;
- 7) Medicines and Drugs.

\_\_\_\_\_  
\_\_\_\_\_

We enclose a Xerox copy of the Certificate dated \_\_\_\_\_ issued by the Medical Superintendent, Goa Medical College, and undertake to reimburse you up to Rs. \_\_\_\_\_/- ( \_\_\_\_\_) on receipt of your bills.

Kindly admit him/her in general category and render necessary treatment and send us the claim for and your bills, duly signed by the patient, for settlement. The next date of appointment may be intimated to the patient for our reference.

Thanking you in anticipation.

Yours faithfully,

( \_\_\_\_\_ )  
Director of Health  
Services

Copy to:-

NOTE: He/ She is further advised that in case he / she is called again for follow up treatment by the treating doctor from recognized Hospital outside the State of Goa he / she should obtain fresh certificate from the respective treating doctor for re- examination / re – treatment.