

INDIAN MEDICAL ASSOCIATION  
TAMILNADU STATE BRANCH

**Leadership Manual - 2022**



**Dr. R. PALANISWAMY**  
State President



**Dr. N.R.T.R. THIAGARAJAN**  
State Secretary



**Dr. V.N. ALAGAVENKATESAN**  
State Finance Secretary

**“Be Committed to IMA. Your Association Your Security”**



**FORM No. II**

(See Rule 8 of the TamilNadu Societies Registration Rules, 1978)

**CERTIFICATE OF REGISTRATION UNDER SECTION 10 OF THE TAMIL NADU SOCIETIES REGISTRATION ACT, 1975 (TAMILNADU ACT 27 OF 1975)**

**CERTIFICATE OF REGISTRATION OF SOCIETIES**

**SL. NO. : 333 of 2013**

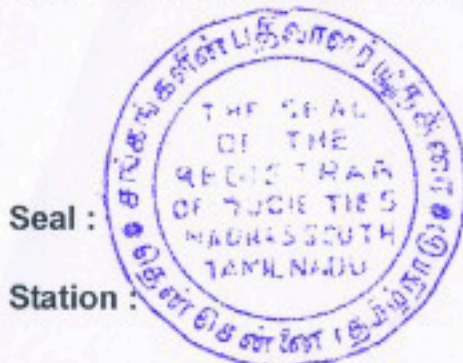
I hereby Certify that

**“INDIAN MEDICAL ASSOCIATION TAMILNADU BRANCH”**

has this day been Registered Under The Tamil Nadu Societies Registration Act, 1975 (Tamil Nadu Act 27 of 1975).

Given under my hand at **CHENNAI SOUTH** this 30<sup>th</sup> day of **JULY 2013**.

(Note : District Transfer DRO Selam (West) - R egn. No.208/2003)



Seal :

Station :



Signature of the Registrar

*[Handwritten Signature]*  
சங்கங்களின் பதிவாளர்  
தென்சென்னை



# INDIAN MEDICAL ASSOCIATION

## TAMILNADU STATE BRANCH

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Although every care has been taken in the publication of this Manual, the author, the publishers and the printers shall not be responsible for any loss or damage caused to any person on account of errors or omissions which might have crept it. The publishers shall be obliged if mistakes are brought to their notice for carrying out corrections in the next issue.

- Editor



# INDIAN MEDICAL ASSOCIATION

## TAMILNADU STATE BRANCH

### LEADERSHIP MANUAL - 2022

Name :

Family Details :

Address :

Blood Group :

Name of the Branch :

Contact Number :

Branch President :

Contact Number :

Branch Secretary :

Contact Number :

Executive Committees Members

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

Contact Number :  
 Contact Number :  
 Contact Number :  
 Contact Number :  
 Contact Number :  
 Contact Number :  
 Contact Number :  
 Contact Number :  
 Contact Number :  
 Contact Number :

Date of formation of Branch

Permanent Project

Ongoing Project

## IMA PRAYER



May everybody be happy

May everybody be healthy

May everybody be free from pain

May everybody be free from sorrow

May we be the healing cure

Beyond every greed & lure.

## இந்திய மருத்துவச் சங்கம் வேண்டுகல்



எல்லோரும் மகிழ்வுடன் வாழ

எல்லோரும் நலமுடன் வாழ

வலி என்னும் தொல்லை நீங்கி

அல்லல் செய்யும் இன்னல் நீங்க

பேராசை, பிரதிபயன் அகற்றி

பிணி போக்கும் பெரும் பணி ஆற்றுவோம்.

## PHYSICIAN'S PRAYER



Dear Lord,  
 Thou Great Physician  
 I kneel before thee  
 Since every good and perfect gift  
 Must come from thee, I pray  
 Give skill to my hands,  
 Clear vision to my mind  
 Kindness and sympathy to my heart  
 Give singleness of purpose,  
 Strength to life atleast a part of the burden  
 Of my suffering fellow-men and  
 a True Realization of the rare privilege that is mine  
 Take from my heart all guile and Worldliness  
 that with the simple Faith of a child I rely on thee.

## மருத்துவரின் பிரார்த்தனை



எல்லாம் வல்ல இறைவா!  
 உலகின் சிறந்த மருத்துவன் நீயே!  
 உன்னை மண்டியிட்டு வணங்குகின்றேன்!  
 உன்னிடமிருந்து நல்லதும் சிறந்ததும்  
 என்னை அடைய பிரார்த்திக்கின்றேன்!  
 எனது கரங்களுக்குத் திறமையைத் தாரும்.  
 எனது மனத்திற்கு தெளிவானப் பார்வையைத் தாரும்!  
 இருதயத்திற்கு இரக்கத்தையும், கனிவையும் தாரும்!  
 எனக்கு அளிக்கப்பட்ட சிறப்புத் தகுதியை  
 தக்க வைக்கும் எண்ணம்  
 வாடும் மக்கள் படும் பாட்டினை சிறிதளவாவது போக்கிட  
 ஒன்றுபட்ட எண்ணத்தையும் வலிமையையும் தாரும்.  
 என் மனதிலிருந்து தகாத எண்ணங்களையும்  
 உலகளவு ஆசையையும் அறவே ஒதுக்கி  
 பணி செய்திட அருளுமாறு  
 குழந்தை போன்று உன்னைச் சார்ந்து வேண்டுகின்றேன்.

## FLAG SALUTATION



We, the members of Indian Medical Association stand here to salute our national flag. Its honour and glory shall be our light and strength and its course shall be our course. We pledge our allegiance to it and realizing our responsibilities as the accredited members of this national organization, We swear we will dedicate everything in our power to see it fly high in the comity of nations.

Jai Hind!  
Long Live IMA!

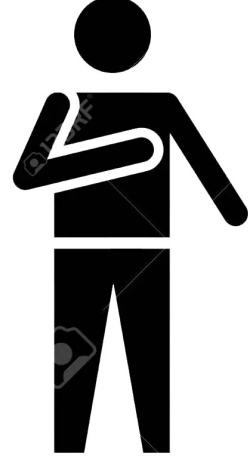
### கொடி வணக்கம்

இந்திய மருத்துவச் சங்கத்தின் உறுப்பினர்களாகிய நமது தேசியக் கொடியை வணங்க இங்கு குழுமியிருக்கின்றோம். அதன் மகிமையும், மாண்பும் நமக்கு ஒளியாகவும், வலிமையாகவும் அமையும். அக்கொடி காட்டும் வழியே நம்முடைய வழி. தேசிய அமைப்பின் அங்கீகாரம் பெற்ற உறுப்பினர்களாகிய நாம் நமது பொறுப்புகளை உணர்ந்து உண்மையாக நடந்துகொள்வோம் என்று உறுதி கூறுகிறோம். அர்ப்பணிப்புடனும், கடமையுணர்வுடனும் முழுமூச்சாகச் செயல்பட்டு உலக நாடுகளின் மத்தியில் நமது தாயின் மணிக்கொடி செம்மாந்து பட்டொளி வீசி பறந்திடச் செய்வோம்.

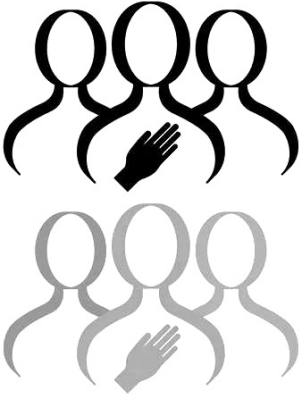


## CONVOCAATION PLEDGE

“We shall, in thought, word and deed,  
 Ever endeavour, to be scrupulously honest,  
 In the discharge of our duties,  
 In our profession, and  
 Shall uphold the dignity, and  
 Integrity of our profession, and  
 The honour of our university.  
 We shall uphold, and advance social order, and  
 The well-being of our fellow members, and  
 Shall devote all our energy  
 To promote the unity, and integrity, and  
 The secular or our country”



## பட்டமளிப்பு உறுதிமொழி



நமது எண்ணம், சொல், செயல் ஆகியவை  
 எப்பொழுதும் முயற்சி செய்தலிலும்,  
 நேர்மையாக இருத்தலிலும் இருக்க வேண்டும்.  
 நமது கடமைகளை நிறைவேற்றுவதிலும்  
 நமது பணியிலும்  
 கண்ணியத்தை நிலைநாட்ட வேண்டும்.  
 நமது தொழிலின் நேர்மை மற்றும்  
 நமது பல்கலைக்கழகத்தின் பெருமையைக் காத்து  
 நமது சமூக ஒழுங்கை நிலைநிறுத்துவோம்,  
 முன்னேற்றுவோம்.  
 நமது ஒற்றுமை, மதச்சார்பற்ற  
 நமது நாட்டின் ஒருமைப்பாடு, நமது சக உறுப்பினர்களின்  
 நல்வாழ்வு ஆகியவற்றிற்காக  
 நமது ஆற்றல் முழுவதையும் பயன்படுத்துவோம்.

# INDIAN MEDICAL ASSOCIATION

TAMILNADU  
STATE BRANCH

## STATE PRESIDENT'S MESSAGE

### “Be Committed to IMA Your Association Your Security”

At the outset let me convey our sincere gratitude on behalf of Self and the Principal office bearers to each and every one of you, for entrusting us with the onerous responsibility of stewarding this premier Association for the ensuing year. While our parent body is triumphantly marching to its Centennial in another six years, our State Unit had earlier celebrated the Diamond Jubilee. Though from the modest beginning of 222 members, we had grown manyfold, still a lot more is in increasing our strength.

IMA is implementing its flagship programs - Schemes and Wings effectively. Social security schemes like PPLSSS, FSS, FBS and HPS.

Besides these the following wings are carried out. NHB, IMA-CGP and PMW. We aspire to encourage individual members to showcase their talents in Fine Arts, Sports and other Skills. Our objective is to amplify our image by way of service and better interaction with the community around us.

We have assumed the mantle, aware of the daunting task ahead. Banking on your full Involvement, devised the following Projects for execution in this year.

Health Projects : Camps for detection of Diabetics and Cancer, Blood donation, full Health checkup for our own members, creating awareness on health for Ladies and medical insurance policies for members and also the Public.

School Projects: Enhancing the understanding of the students on Organ, Eye and Blood donation. Oral hygiene and safety measures like hand wash and wearing masks in public. Eye and Dental screening. Educating on road safety having traffic awareness. Essential first aids. Basic life support knowledge for Teachers and Students.

Environmental Projects : Green the nation- Organizing massive Tree Plantations- Even our Scriptures have mentioned Vriksha Boshini

Yagnas. Effective Bio medical disposal. Adopting Swatch Bharath guidelines.

Self and Skill Development Projects : Constructing IMA Halls - Auditoriums for each branch. Starting new blood banks. Possessing basic knowledge in accounts, audits information and about our association's Constitution, essential Rules and Procedures.

Since 1940, many Doyens had adorned this exalted position with decorum. We are confident that, we would certainly match their performance if not excel, with your whole hearted participation.

We are confident that this Leadership training program will be very useful to all the Branch office Bearers and this Leadership Manual will be a guide to go through when ever a clarification needed in your Branch administration and activities. Looking forward a successful year.

**TOGETHER WE SUCCEED!**

**- Dr. R. PALANISWAMY**



# INDIAN MEDICAL ASSOCIATION TAMILNADU STATE BRANCH



## STATE SECRETARY'S MESSAGE

### Respected Leaders and friends,

It is a great privilege for me to interact with you all through the Leadership manual 2022. Indian Medical Association circulates the Presidents, Secretaries and other office bearers every year or once in two years. Hence the new leaders need to know the knowledge of leadership to control, run the office smoothly. IMA TNSB is conducting such leadership training every year to the upcoming new leaders. One should utilise the opportunity to know the aim, motto, programme of IMA TNSB, and disseminate the National and State programmes at the branch level without any ambiguity.



“Leadership is a process of social influence, which maximizes the efforts of others, towards the achievement of a goal”. The leader should have thorough knowledge in all the programmes to influence the members towards the programme. He should inspire others by his experience, talent and the skill. Following the ethics of our profession is more important, which need to emphasise to the members often. Above all being a leader of IMA, should know the activities of IMA and accomplish the goal.

Membership is our strength, which is to be encouraged with all our colleagues. Unity of the members is important to achieve the goal. Meeting the members through the regular branch meetings are required to share the views of the members and take forward to State and National level, as per the requirement, for which the association is created for. There are many welfare, protection, learning, service programmes, which are to be known to every member through the leaders. The respect of the leaders is based on his calibre in running the association.

There are lot of programmes, instructions, orders attached to this leadership manual, every leader should learn the efforts put by the state office and encourage the members to develop our great organisation.

**Thanking you all. Long live IMA.**

**- Dr. N.R.T.R. Thiagarajan**

## INDIAN MEDICAL ASSOCIATION (HQS.)



(Registered under the Societies Act XXI of 1860)  
 Mutually Affiliated with the British & Nepal Medical Associations  
 I.M.A. House, Indraprastha Marg, New Delhi - 110 002.  
 Telephones : +91-11-2337 0009, +91 9999 11 6375, +91 9999 11 6376  
 Website : www.ima-india.org; e.mail : hsg@ima-india.org



**Dr. SAHAJANAND Pd. SINGH**  
 National President

**Dr. J.A. JAYALAL**  
 Imm. Past National President

**Dr. JAYESH M. LELE**  
 Hony. Secretary General

**Dr. ANIL GOYAL**  
 Hony. Finance Secretary

Indian Medical Association is the only representative, national voluntary organisation of Doctors of Modern Scientific System of Medicine, which looks after the interest of doctors as well as the well being of the community at large.

The founding fathers wayback in 1928, while struggling for liberation of the Motherland from British rule simultaneously felt the need of a national organisation of the medical profession. Before that, some members of the profession- a selected few - were members of the British Medical Association, which had opened branches in India to cater to the local needs. These stalwarts, ultimately succeeded in formation of Indian Medical Association and reached an agreement with the British Medical Association that they will have no branch in India, and got mutually affiliated, which relationship continues till today.



Indian Medical Association in the year 1946 helped in organisation of the World body, namely, World Medical Association, and thus became its founder member. As an organisation it has been, and continues to play an important role in its deliberations. It hosted the III World Conference on Medical Education under the joint auspices of W.M.A. and I.M.A. in New Delhi in 1966.

*Today, I.M.A. is a well established organisation with it's Headquarters at Delhi and State / Terr. Branches in 34 States and Union Territories. It has over 3,47,243 doctors as its members through more than 1753 local branches spread all over the country.*

### OBJECTIVES :

- To promote and advance medical and allied sciences in all their different branches and to promote the improvement of public health and medical education in India.
- To maintain the honour and dignity and to uphold the interest of the medical profession and to promote co-operation amongst the members thereof;

- To work for the abolition of compartmentalism in medical education, medical services and registration in the country and this to achieve equality among all members of the profession.

### **HOW THE I.M.A. FUNCTIONS :**

The general control management and direction of the policy of the Association is vested in the 'Central Council' to which local branches send representatives and which meets once a year to lay down policies. It delegates its powers to 'WORKING COMMITTEE' (A representatives body of all state Terr. Branches) for implementation of programmes and activities (but without powers to change the rules). This committee meets at least three times a year to execute various activities for welfare of members and the people in matters of health.

### **NATIONAL HEAD QUARTERS :**

The National Headquarter of the IMA is situated at New Delhi, and its Journal Office functions from Calcutta. For Housing the headquarters of the Association, a six storeyed building has been constructed at Indraprastha Marg, New Delhi and a Building of IMA housing the J.I.M.A has also been constructed at 53. Creek Row, Calcutta.

President IMA and three vice-presidents are elected by all the members of association, while the Electoral College for the other offices is the Central Council.

Similar situation prevails at the State level, under the Jurisdiction of the State Branches the local branches are established which functions autonomously within the frame work of the IMA constitution.

Over 100 local/state branches have their own buildings where provision of stay for members is possible.

For those who fulfill the membership qualification, to become a member of IMA, the prescribed form in triplicate be filled & given to the nearest branch along with requisite membership fees.

### **HISTORY OF IMA**

- IMA was started on 28-12-1928.
- IMA has to date (Sept.1990) 78,000 members including 9,000 life members IMA has 23 State Branches and 9 Territorial branches and 1274 local branches.
- IMA safeguards interest of its members and participates in all national health programmes.

### **IMA IN RETROSPECT**

1. The Indian Medical Association celebrated its Diamond Jubilee in the year 1988 and is completing 72nd year of its glorious functioning on the occasion of the 76th All India Medical conference being held on the 28th December, 2000 at Calcutta.

2. Prior to the formation of the Association, four All India Medical Conferences had been held the first at Calcutta in 1917 under the Presidentship of Lt. Col. Raghavendra Rao, the second at Delhi in 1918 with Sir Nil Ratan Sircar as the President, the third in 1919 with Dr. M. N. Odedar as its President and the Fourth at Nagpur in 1920 under the Presidentship of Rao Bahadur Dr. Maharaj Krishnan Kapur. It was at the 5th conference held at Calcutta on 28th December, 1928 under the Presidentship of Dr. G. V. Deshmukh of Bombay, that a resolution was adopted forming an All India Medical Association with the objects of promotion and advancement of medical and allied sciences in their different branches, the improvement of public health and medical education in India and the maintenance of honor and dignity of the medical profession. In the year 1930, the All Indian Medical Association and the body was duly registered under the Societies Registration Act, XXI of 1860.
3. The association had come in to being at a time when there was political unrest and the country was passing through big turmoil. Yet, it was a matter of great satisfaction that the stalwarts of the medical profession in those days like Dr. K. S. Ray, Sir Nil Ratan Sircar, Dr. B. C. Roy, Dr. M. A. Ansari, Col. Bholu Nath, Major M. G. Naidu, Dr. B.N. Vyas, Dr. D. Silva, Dr. N. A. Ghosh, Dr. D. A. Chakravathi, Dr. Viswanathan, and Capt. B. V. Mukherjee actively participated in the promotion of the Association. Some of these stalwarts were also active in the Indian National Congress and had their terms in the jail for participating in the struggle for participating in the struggle for Independence of the country.
4. Though the Association was formed with only 222 members. Yet even with this numerical strength, it could achieve its position of strength, it could achieve its position of strength and command respect from the British rulers. It could prevent the appointment of British rulers. It could prevent the appointment of British IMS Officer as a Commissioner of Medical Education in 1929 and it could achieve to organize an all India Medical Register and include the licentiates in it. The Medical Council of India Act was got amended to have an elected President in place of a nominated one and it was a matter of a pride that Dr. B. C. Roy, one of the most illustrious past Presidents of IMA, became the first elected President of Medical Council of India followed by many other illustrious presidents of IMA gracing the exalted chair including the past president of the Medical Council of India Late Dr. A. K. N. Sinha.
5. The Headquarters Office of the IMA was originally located in Calcutta. At the suggestion of Dr. S. C. Sen supported by Dr. B. V. Mulay, Dr. Chamanlal C. Mehta and Maj. General Amirchand, the IMA Headquarters was shifted to Delhi in January 1949, after the attainment of Independence. The Journal of IMA continued to be published from Calcutta. Dr. S. C. Sen also obtained a plot of land in Indraprastha Estate, New Delhi at

the concessional rates from the Government and the project of construction of IMA Building thereon was undertaken, supported by Dr. B. V. Mulay, Dr. Chamanlal Mehta, Dr. C.S.Thakar, Dr.A.P.Mitra, Dr. Ved Prakash, Dr. R.C.Goulatia, Dr. P.C. Bhatia and Dr. D.S. Mehra. The foundation stone of IMA House was laid by the first President of India, Dr. Rajendra Prasad on September 19, 1958 and the construction of the building was started under the supervision of Dr. P.C.Bhatia who supervised it brick by brick. With his untiring efforts, the building was completed and opened on September 6, 1964 by the then President of India, Dr. S. Radhakrishnan.

6. During the British Rule, some selected members of the profession were members of the British Medical Association which had branches in India. The stalwarts of IMA ultimately succeeded in reaching an agreement with British Medical Association that they would have no branches in India and got mutually affiliated, which relationship continues even today. In the year 1964, IMA helped in the organization of the world body viz., the World Medical Association and thus became its founder member through the efforts of Dr. S.C.Sen, Dr. R.V.Sathe, the then President, IMA held the chair of the President of WMA when the WMA met in New Delhi in 1962. It's a matter of pride that another illustrious Past President of IMA Dr. A.K.N. Sinha also held the office of the WMA. The IMA has been playing an important role in the deliberations of the World Medical Association at New Delhi in the year 1966. later developments, however, forced us to take decision to withdraw from World Medical Association in 1985, since the organization refused to expel South Africa despite its dismal record of racial discrimination. The Indian Medical Association after consideration of all aspects of the matter decided in February, 1993 that IMA may again become a member of the World Medical Association. In pursuance of the above, 45th General Assembly of the World Medical Association at its meeting held on October 2-5, 1993 approved IMA's membership of the WMA. The IMA has continued to play an important role in the affairs of the Commonwealth Medical Association.
7. IMA has been pursuing the academic activities and continuing education of its members through its academic wings viz., IMA College of General Practitioners (IMA CGP) and the IMA Academy of Medical Specialities (IMAAMS). Through the IMA CGP which is a Founder member of the World Organization of the National Colleges and Academies, (WONCA), third Conference on General Practice was hosted by the IMA in the year 1968. It is a matter of pride that the first ever Fellowship of the World Organization was conferred on one of our illustrious Past Presidents, Dr. P.C. Bhatia.
8. Over the period of 72 years, the IMA while maintaining its glorious traditions has secured a place of pride in the community, through its 1470 branches with a total membership of

120298 throughout the country. It has been rendering yeoman's service in the field of health care deliver, disease control and eradication. Its services to the community during natural calamities like earthquakes, droughts and floods, famines and epidemics in the pre and post-Independence periods have been highly lauded. Its role and involvement in the formulation and implementation of National Health Programmes e.g. Family Welfare, Maternal and Child Health, Universal Immunization Programme, Oral Rehydration Therapy, AIDS Prevention, Control and Management etc., has been highly significant and has received recognition by the Central and state Governments and the UNICEF. The IMA and its branches have been running many community service Projects and a number of branches have established Family Welfare Clinics, Immunization Centres, Ambulance Services, Blood Banks, Polio Eradications and RCH programmes, etc.

9. The affairs of the association are managed by the elected members of the Central Council and the Working Committee which lay down the policies and deliberate on the day to day activities of the Association. It has a number of Standing Committees which look after the specified subjects entrusted to them under the various terms of references. Each State and Local Branch holds regularly Scientific and Medical Meetings and elects its Office bearers once a year. The State Branches organize their respective state conferences every year during which, besides organizational matters, they have scientific sessions for the benefit of their members in the various specialities in medicine.
10. Indian Medical Association publishes a Scientific Journal called 'Journal of the Indian Medical Association' a copy of which is mailed to each and every member of the Association. "Your Health" in English and "Aap Ka Swasthya" in Hindi are published regularly and cater to health education needs of the lay public. Some of the State Branches are also publishing their bulletins in English and/or Regional languages. IMA News is published monthly by the IMA Headquarters. Besides this, IMA College of General Practitioners has a publication named "Continuing Medical Education" Bulletin. With a view to make it more relevant to Family Medicine, the title of this Bulletin has been changed to "Family Medicine – India" from the year 1996. The College has published a number of books. It is hardening to note that most of the articles had been voluntarily subscribed by the members of the Association. The IMA Academy of Medical Specialities is now publishing the Annuals Quarterly, containing original articles, interesting case reports, review articles by eminent medical specialists and super specialists.
11. IMA College of General Practitioners has been conducting regular examinations twice a year and the successful candidates became eligible for the award of Fellowship.
12. The IMA AMS also awards Fellowships every year to selected highly distinguished specialists. ●

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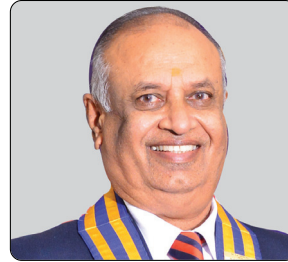


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# INDIAN MEDICAL ASSOCIATION TAMILNADU STATE BRANCH

(Registered under the Societies Act 1975 333 / 2013)

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## HISTORY OF INDIAN MEDICAL ASSOCIATION TAMIL NADU STATE BRANCH

### A Brief Sketch

The Indian Medical Association (IMA) Tamilnadu is a voluntary organization, representing the entire spectrum of the modern allopathic medicine and its specialties in our State. The organization was started in the year 1940, by a band of dedicated doctors who ever deeply committed in upholding the dignity of the medical profession and also in the improvement of the quality of the medical service to the people of Tamilnadu especially to the poor. The doctors hailing from Chennai City, (formerly Madras) and from the rural districts of Tiruchirappalli, Coimbatore, Vellore, Salem and Tirunelveli, took an active part in building up the Tamilnadu IMA. Several State Presidents and Secretaries of IMA TNSB belonged to these districts. IMA TAMILNADU is registered in the state society in the year 2002 and is submitting its accounts and by laws annually as per the rules of the society. Its number in the society registration which is now in Chennai is 333 / 2013.

Today the IMA has branches in all the towns of Tamilnadu and it has a vast membership representing all the specialities of Modern Medicine. The IMA TNSB is affiliated to the IMA Head Quarters, New Delhi.

IMA Tamilnadu is the second largest branch in India, only behind Maharashtra. It is the first state to introduce monthly bulletin TIMA registered and sent to members as a registered news print availing postal concession. It has also got the unique distinction of electronic voting system to be implemented as the first state in our country. The second state to start its own professional indemnity scheme in 1996. One of the few state to start the FSS schema way back in 2004, only two other states had such schemes earlier.

The traditional Family practice of Tamilnadu is the Headquarters of COLLEGE OF GENERAL PRACTICE since 2010 when IMA Headquarters moved its wings from Delhi,

with the Secretary post designated to IMA Tamilnadu members.

IMA Tamilnadu has so far give eight National Presidents and several Vice Presidents who have served the National IMA with distinction.

### **Main Aims of Indian Medical Association, Tamilnadu**

*The Main objects of the IMA Tamilnadu are:*

1. To serve the patients better
2. To maintain high professional standards in the practice of medicine.
3. To protect the dignity and the honour of the medical profession.
4. To render Community Service and also to co-operate with the Government in the implementation of its Health Care Programmes.
5. To offer professional protection to the members through various schemes.
6. To conduct CME programmes to the medical practitioners.
7. To have family get together and to promote fellowship among its members.
8. To have dialog with the Govt. official & Political leaders and as representing body for Service providers of health will contribute to various Health policies formulation and implementation.

### **Membership Strength of IMA TNSB**

The membership of IMA is steadily increasing every year. The present membership strength is 38238 spread throughout the State and is the 2nd largest branch in the Country. It has 168 branches. 100% are Life members.

### **Communication with Members**

- e.mail - imatamilnadu@gmail.com
- SMS
- Social Media - What apps Groups
- Website - www.imatn.com
- Journals - TIMA News Letter (Monthly) - Both Hard copy & e-TIMA
- National Journals - JIMA News Letter (Monthly) - Both Hard copy & e-JIMA

### **STATE COUNCIL**

The Members of the governing council (State Council) are being elected by proportional representation, i.e; one State Council Member is elected for every 50 members every year.

The State Council meets once in 3 months and decides about the policies and programmes of the IMA Tamilnadu State. State Council is the supreme body of IMA Tamilnadu State Branch.

### **STATE CONFERENCE**

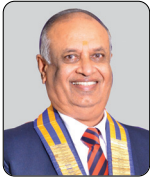
The Annual State Medical Conference of IMA Tamilnadu in the month of December.

### **AWARDS**

Various Awards / Certificates / Medals are being awarded to Branches / Individuals for their best performance / Out-standing activities will be given.

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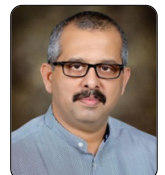
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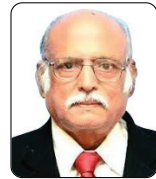


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### STATE PRESIDENTS

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1.	Dr. V.D. Nimbkar, Chennai	1940 - 1941
2.	Dr. Rao Bahadur T.S. Thirumurthi, Chennai	1941 - 1942
3.	Dr. Rao Bahadur T.S. Thirumurthi, Chennai	1945 - 1948
4.	Dr. P.A.S. Raghavan, Tiruchirapalli	1948 - 1950
5.	Dr. U. Krishna Rao, Chennai	1950 - 1952
6.	Dr. K.C. Nambiar, Chennai	1952 - 1954
7.	Dr. Y.P. Vasudevan, Coimbatore	1954 - 1957
8.	Dr. M. Santosham, Chennai	1957 - 1958
9.	Dr. T.V. Sivanandam, Coimbatore	1958 - 1961
10.	Dr. C. Nathamuni Naidu, Ambur	1961 - 1965
11.	Dr. K. Rama Ayyar, Tirunelveli	1965 - 1966
12.	Dr. G.T. Gopalakrishna Naidu, Coimbatore	1966 - 1967
13.	Dr. R.G. Krishnan, Chennai	1967 - 1968
14.	Dr. S.G. Rajarathinam, Coimbatore	1968 - 1969
15.	Dr. S.R. Rajaram, Salem	1970 - 1970
16.	Dr. V. Krishnamurti, Cuddalore	1970 - 1971
17.	Dr. A. Abdul Sathar, Madurai	1971 - 1972
18.	Dr. C. Arumugam, Coimbatore	1972 - 1973
19.	Dr. B. Rama Rau, Chennai	1973 - 1974
20.	Dr. K. Jayaramachandran, Namakkal	1974 - 1975
21.	Dr. T.M. Kumaraswami, Chennai	1975 - 1976
22.	Dr. T. Thirugnanam, Madurai	1976 - 1977
23.	Dr. R. Nanjunda Rao, Chennai	1977 - 1978
24.	Dr. N.V. Muthukrishnan, Tiruchirapalli	1978 - 1979
25.	Dr. T. Subramanian, Madurai	1979 - 1980
26.	Dr. M. Sivakannu, Tiruchirapalli	1981 - 1982
27.	Dr. Jayaseelan Mathias, Nagercoil	1981 - 1982
28.	Dr. J. Sugavanam, Salem	1982 - 1983
29.	Dr. N.S. Chandrabose, Tuticorin	1983 - 1984
30.	Dr. A. Sankaran, Chennai	1984 - 1985

31. Dr. T.K. Ganesan, Coimbatore	1985 - 1986
32. Dr. V. Varadarajan, Thanjavur	1986 - 1987
33. Dr. C.B. Baskaran, Chennai	1987 - 1988
34. Dr. S. Ramadas, Salem	1988 - 1989
35. Dr. V.T.D. Kumaraswamy, Cuddalore	1989 - 1990
36. Dr. V.N. Rajasekaran, Madurai	1990 - 1991
37. Dr. K. Janakiraman, Salem	1991 - 1992
38. Dr. S. Thiagarajan, Tiruchirapalli	1992 - 1993
39. Dr. S. Arulrhaj, Tuticorin	1993 - 1994
40. Dr. P.A. Sivakumar, Villupuram	1994 - 1995
41. Dr. G.V. Ramakrishnan, Chennai	1995 - 1996
42. Dr. T. Kumaraguru, Vellore	1996 - 1997
43. Dr. A.S. Azeem, Madurai	1997 - 1998
44. Dr. R.M. Krishnan, Salem	1998 - 1999
45. Dr. M.S. Ashraf, Tiruchirapalli	1999 - 2000
46. Dr. P.K. Kesavan, Vellore	2000 - 2001
47. Dr. K.R. Balasubramaniam, Erode	2001 - 2002
48. Dr. A. Muruganathan, Tirupur	2002 - 2003
49. Dr. M. Thirunavukkarasu, Salem	2003 - 2004
50. Dr. K. Vijayakumar, Marthandam	2004 - 2005
51. Dr. A. Zameer Pasha, Tiruchirapalli	2005 - 2006
52. Dr. Capt. G. Raghavelu, Tambaram	2006 - 2007
53. Dr. N. Mohandas, Thanjavur	2007 - 2008
54. Dr. L.V.K. Moorthy, Cumbum Valley	2008 - 2009
55. Dr. R. Gunasekaran, Tiruchirapalli	2009 - 2010
56. Dr. S.S. Sukumar, Erode	2010
57. Dr. T. Sadagopan, Vellore	2011
58. Dr. K. Prakasam, Salem	2012
59. Dr. L.P. Thangavelu, Coimbatore	2013
60. Dr. M. Balasubramanian, Tambaram	2014
61. Dr. R.V.S. Surendran, Karaikudi	2015
62. Dr. S. Damodaran, Vellore	2016
63. Dr. T.N. Ravisankar, Tambaram	2017
64. Dr. J.A. Jayalal, Marthandam	2018
65. Dr. S. Kanagasabhpathy, Kumbakonam	2019
66. Dr. C.N. Raja, Erode	2020
67. Dr. P. Ramakrishnan, Tiruchirapalli	2021
68. Dr. R. Palaniswamy, Coimbatore	2022

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7.	Dr. M.P. Jesudasan, Coimbatore	1959 - 1961
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21.	Dr. M. Balasubramanian, Tambaram	1997 - 2000
22.	Dr. J. Ranganathan, Salem	2000 - 2003
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28.	Dr. B. Sridhar, Karaikudi	2018 - 2019
29.	Dr. A.K. Ravikumar, Coimbatore	2020 - 2021
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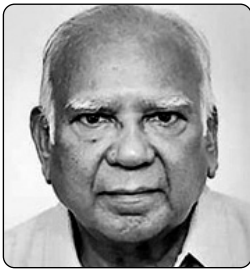
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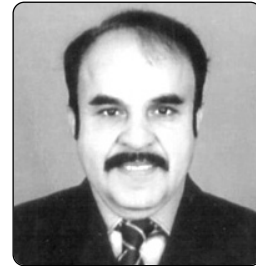
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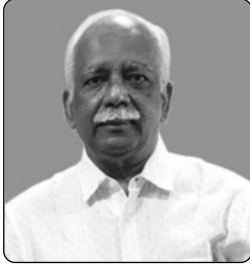
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### LIST OF PAST STATE SECRETARIES OF IMA TAMILNADU STATE BRANCH

**Dr. J. RANGANATHAN**

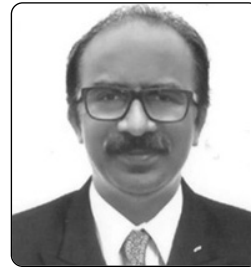
Hony. State Secretary (2000 – 2003), IMA TNSB  
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## **MEDICAL ASSOCIATIONS / NGOs ARE REQUIRED TO REGISTER UNDER SOCIETY /TRUST ACT**

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Every Association/NGO should have its own Constitution/MOU while registering with the respective authorities.

### **What is Constitution?**

A body of fundamental principles or established precedents according to which a state or other organization is acknowledged to be governed.

### **What is Memorandum of Understanding?**

A memorandum of understanding is a document describing a bilateral or multilateral agreement between parties. It expresses a convergence of will between the parties, indicating an intended common line of action. It is often used in cases where parties either do not imply a legal commitment or in situations where the parties cannot create a legally enforceable agreement.

**Constitution:** NGO's have multiple options to select the form of constitution. The different forms of the constitution which can be chosen are as below:

1. Public Charitable Trust.
2. Society.

Each form of the constitution has its own enactment and the provisions contained therein would apply to the respective form.

### **1. Trust:**

It is a legal arrangement in which a person

holds property for the sake of some other person, created for the purpose of charitable and religious purposes. Trust can be constituted by Trust deed. In the case of formation of trust, there are no specific statutes available.

However, Charitable Endowment Act 1890 and Charitable and Religious act 1920 have bearing on the formation of a charitable trust.

To create a **trust**, the property **owner** (called the "trustor," "grantor," or "settlor") transfers legal ownership to a person or institution (called the "trustee") to manage that property for the benefit of another person (called the "beneficiary"). The trustee often receives compensation for his or her management role.

A public charitable trust should be formed only when one wishes to make an endowment of property for perpetuity and the trustees' desire that this property be used only for specified charitable purposes with close control by the original settlers/trustees.

### ***Main Characteristics of Trust are:***

1. Trusts are governed by relevant State Trust Act or Bombay Public Trusts Act
2. 2 persons are required to form a Trust, with no upper limit.
3. Trust is set up by a Trust Deed on non-judicial stamp paper worth some

percentage of the value of the trust property.

4. Trust Deed contains the aims and objectives of forming the Trust and the mode of management of the Trust.
5. The composition of the board changes mainly by appointment and not election.
6. Alteration of the objects laid down in the Trust Deed is difficult and only the settler can modify them.
7. The Charities Commissioner has more power to intervene in the affairs of a Trust than in a society.
8. Trust cannot be dissolved easily.

## 2. Society:

It is an Association of persons who come together by mutual consent to act jointly for a common purpose. The compliance has to be made under Tamilnadu Societies Registration Act 1975. Minimum 7 members in state level and minimum of 9 members in National level society are required for the formation of society. The requisite documents are to be submitted in the office of the Registrar. After the verification of the documents, a Certificate of Registration is issued along with the certified copy of the Bye-Laws of the Society.

Tamilnadu Societies Registration Act 1975 which allows the registration of entries involved in the benefit of society, i.e. promotion of education, literature, science, religion,

charity, social reform, art, crafts, cottage industries, athletics, sports, recreation, public health, social service, cultural activities, the diffusion of useful knowledge or such other useful object with respect to which the State Legislature has power to make laws for the State, which may be prescribed, may be registered under this Act.

### *Main Characteristics of Society are:*

- Societies are governed by Societies Registration Act
- Seven persons are required to form a society with no upper limit
- Members have to file a MoU on non-judicial stamp paper, setting out the objectives of the society before the registrar of societies in the state in which the society is set up.
- The legal requirements are much simpler than in the case of a trust.
- Complete renewal of members is possible and objects can be modified easily
- Easier to wind up a Society
- Society has a more democratic set up with membership and an elected body to manage the Society
- Due to democratic procedures, the Society can be taken over by elements opposed to the founding members

### **Management and Administration:**

Every registered Society shall have a registered office to which all communications

and notices may be addressed and shall file with the Registrar. Date of registration of Society is to be displayed on the outside of its registered office. The registered Society shall maintain register containing the names, addresses and occupations of its members. The registered Society shall have a committee of not less than three members to manage its affairs and shall file with the Registrar a copy of the register maintained from time to time and intimate the change among the members of the Committee.

Society shall keep proper accounts and at the expiration of the Financial year, prepare a receipts & expenditure accounts, balance sheet and get it audited by the qualified auditors. The same is to be placed in the General body for its approval. Submit the audited accounts to the Registrar along with the declaration to the effect that the Society has been carrying on business or has been in operation during the financial year.

### **Registration of Society:**

For the purpose of registration of a Society, there shall be filed with Registrar of the District which the society is formed by a member of the committee of the society or by any person duly authorized by the committee in this behalf,

1. A memorandum specifying,
  - a. The name of the Society
  - b. Objects of the society
  - c. Names, address and occupations of the members of the committee

No Society shall be registered by a name, which is undesirable, like obscene and decorum or likely to promote disharmony or feelings of enmity or hatred or ill-will between different religious, racial, language or regional groups or castes or communities or identical with, or too nearly resembles, the name by which a Society in existence has been previously registered. The word like “Union” or “State” ca not be used.

2. Bye-Laws of the Society.
3. Election Notifications
4. Copies of the General body held
5. Auditor report
6. Declaration that the Society is operational

What is the advantage of Income tax in respect of Trusts/Society?

**Income Tax Department treats both Trusts and Societies** similarly and the procedure for Exemption of Income or Grant of 80G Certificates is same under both entities: we should see the benefits of forming both Trusts and Societies separately so that a decision can be made as to which formation to go for.

### **What is 12AA Registration?**

12AA Registration is a **onetime registration that can exempt Income Tax of an organisation**. After this registration, all income can not be taxed. The application form which is used to request for 12AA Registration is **form 10A**.

### **What is Registration u/s 80G?**

The charitable organizations also need to apply for registration u/s 80G of the income tax act. It provides deduction while computing the total income in the hands of the donor. Further, section 80G applies only to charitable trusts or institution. It does not apply to religious trust or institutions. No deduction shall be allowed to the donee under section 80G in respect of donation of any sum exceeding INR 2,000 unless such sum is paid by any mode other than cash.

The trusts or society can be registered as above depending on the place

Both will have to get 12A, 12AA and 80G to obtain Benefits

### **What are the Benefits of Registration u/s 12A of Income Tax Act, 1961?**

**Section 11 and 12 of the Income Tax Act provides exemptions to NGO's.** Registration u/s 12A is a pre-condition and mandatory requirement for claiming those exemptions. NGO's having 12A registration enjoy tax benefits.

“It is important to note here that notwithstanding the fact that trust, society and section 8 companies are registered as per their respective acts, the registration under section 12A is necessary to claim exemption under Income Tax Act.”

The various benefits of Section 12A/12AA

AND 80G registration are enumerated as below:

- 1) The income applied for charitable or religious purpose will be considered as application of income i.e. expenditure incurred for charitable or religious purpose will be allowed while computing income of the trust.
- 2) The benefit of accumulating or setting aside of income not exceeding 15% for charitable or religious purpose will be available.
- 3) The accumulation of income, which is deemed as application of income as per section 11(2), shall not be included in the total income.
- 4) NGO's receives various grants from government and other agencies. They are eligible to get grants and financial funding from various agencies. These agencies generally make grants to 12A registered NGO's.
- 5) Benefit in Section 80G registration. NGO's have to apply separately for Section 80G registration.

It is important to note that when registration is granted under section 12A, it does not mean that section 80G approval is to be given i.e. registration under section 12A will not provide automatic approval under section 80G. Section 80G applies only to charitable trusts or institution. It does not apply to religious trust or institutions. ●

## HOW TO BECOME AN IMA MEMBER?

### 1. Who all can become a member?

Any Alopactic practitioner registered with Medical Council and the resident of India can become a member .

### 2. Whom should I approach to become a member?

Contact any IMA Member in your area or your friend or any IMA leader.

### 3. Should I become only in my native branch?

No, you can become member in any branch, preferably in the branch where you reside or work.

### 4. How can I become a member?

By downloading the application form, from IMATN.com website or any IMA Branch Website, fill up the details asked for, get the proposal signature from any IMA Life Member and submit to the branch Secretary along with the documents asked for including Aadhaar card xerox.

### 5. How much should I pay?

Ans: It is a life membership one time fee,

For Life member Single

:Rs.13,000/- excluding branch fees.

for Life member Couple

:Rs.20,000/- excluding branch fees.

### 6. Can i become a direct member with

### IMA Head Quarters?

Persons who are in armed forces and who are in frequent transferable job can become a direct member.

### 7. Can i get myself transfered from one branch to another branch within or outside the state?

Yes.

### 8. What is the procedure?

Give a requisition letter to the state office along with No Objection certificate from the respective branches.

### 9. For transfer should i have to pay?

You have to pay only the branch fees to the branch you get yourself transfered.

### 10. I am Medical student can i become a member?

Yes you can join in MSN but you will not have the voting rights.(See MSN/JDN chapter in the manual)

### 11. When and How I will get my membership certificate?

In approximately within a month you can download your life membership certificate and ID card from <http://ima.org.in/memberarea/2-oct-ima-login.php>

(visit imatn.com to know the step by step details of the procedure).

## WHAT YOUR MEMBERSHIP NUMBER DENOTES?

**TN / 2618 / 8 / 82 / 45693 / 1995-96 / L**

**TN** – State of the Member

**2618** – State Membership Serial Number

**8** – Local Branch Code

**82** – Branch Membership Serial Number

**45693** – National Membership Serial Number

**1995-96** – Year of Joining the Association

**L** – Single Membership (CL – Couple Membership)

**State Secretary Office functioning from Theni.  
The bank account are**

**Bank Name : Bank of Baroda                      Branch Name : Theni Branch**  
**IFSC Code : BARB0THENIX (fifth character is Zero)**

<i>Account Name</i>	<i>Account Number</i>
IMA TNSB	74950100004907
Indian Medical Association TIMA News	75260100003930
IMA Paramedical Course	75260100004698
Indian Medical Association CGP	75260100003929
Indian Medical Association PPLSSS	75260100001786
Indian Medical Association FSS	75260100001785
Indian Medical Association Action Fund	75260100003928
Indian Medical Association NHB	75260100001787
Indian Medical Association AMS	75260100001890
Indian Medical Association Election Account	75260100001788
Indian Medical Association Project Committee	75260100001889
IMA Benevolent Fund	74950100000004
IMA END TB Initiative	74950100000629

**State Secretary Office for Communication**

**N.R.T. Hospital , 380, Madurai Road, Theni,**  
Theni District – 625 531.

Cell : 98944 47717 e.mail : drnrtime@gmail.com

**State HQRS Address**

**IMA Tamilnadu State Hqrs,**  
Doctors Colony, Via — Bhrathi Nagar, Ist Main Road &  
Jothi Nagar 9th Street, Off. Mudichur Road,

**Tambaram West, Chennai - 600 045**

Cell: 9087180123. imatamilnadu@gmail.com



**Life Single**

**Rs. 13,000/-**

**Life Couple**

**Rs. 20,000/-**

*(Local Branch Fee would be extra)*

*Membership fee to be drawn in favour of  
'IMA TNSB' by means of DD payable at Theni.*

Please enroll new membership in New MA Form only. Kindly send the Original MA Form along with two xerox copy of the form and xerox copy of the Medical Registration Certificate



**INDIAN MEDICAL ASSOCIATION**

I.M.A. HOUSE, INDRAPRASTHA MARG, NEW DELHI – 110 002.  
Tel. +91-11-2337 8680, 2337 0473; Fax: +91-11-2337 9470, E.mail : inmedici@vsnl.com

**MEMBERSHIP APPLICATION FORM**

Annual / Life / Direct Membership Application Form  
(All details to be filled in Block Letters)



Member's Signature

Membership Proposed by Dr. \_\_\_\_\_ IMA Hqrs. Membership No. \_\_\_\_\_

To  
The Honorary Secretary General, IMA  
IMA House, I.P. Marg, New Delhi – 110 002.

Dear Sir,

I hereby apply to be enrolled as a member of the Indian Medical Association as **LIFE SINGLE / LIFE COUPLE** member through Local Branch \_\_\_\_\_ under the **TAMIL NADU** State / Territorial Branch of IMA.

Member's Name as per MC / SMC Certificate : IN BLOCK LETTERS) : \_\_\_\_\_

Father's / Husband's Name : \_\_\_\_\_ Date of Birth : \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Address (Permanent / Correspondence) \_\_\_\_\_

Pincode : \_\_\_\_\_

Clinic / Hospital Address \_\_\_\_\_

Mobile No. \_\_\_\_\_ Tel. (R) \_\_\_\_\_ Tel. (Clinic/Hospital) \_\_\_\_\_

E.mail ID \_\_\_\_\_ Aadhar No. \_\_\_\_\_ (enclose xerox copy)

QUALIFICATION	M.B.B.S. (1)	(2)	(3)
COLLEGE			
UNIVERSITY			

Designation (Practice / Job) : \_\_\_\_\_

Registration Details : (Photocopy of Registration Certificate to be enclosed with IMA Hqrs. Form)

Registration No. of Medical Council of India / State Council \_\_\_\_\_ Date : \_\_\_\_\_

Service (details) : \_\_\_\_\_

I declare that I am registered with MCI / State Medical Council, I certify that all details / documents furnished are true. If my statement is found to be incorrect Date : \_\_\_\_\_ my membership would stand to be cancelled and the fee paid by me to all sections of IMA will be liable to be forfeited by them. I hereby give undertaking that I shall abide the Rules and Regulations of IMA. Place : \_\_\_\_\_ Signature of the Applicant

Certified that I have verified the qualification and registration of the applicant and his eligibility as per rules of IMA for being enrolled as member of the Indian Medical Association. Forwarded to the Hony. Secretary General along with HFC. \_\_\_\_\_  
Signature & Stamp of Hony. Secretary, Local Branch

Forwarded to IMA Hqrs. along with HFC on _____  Signature & Stamp of <b>Dr. N.R.T.R. THIAGARAJAN</b> Hony. State Secretary, IMA TNSB	Received at IMA Hqrs. along with HFC on _____ Membership confirmed on _____  Signature & Stamp of <b>Hony. Secretary General</b>
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NB : The Local Branch Secretary will keep a photocopy of this form & forward the original form to State / Terr. Branch Secretary along with Admission Fee & HFC and the State will also retain a photocopy of this form & send the original form along with Admission Fee and HFC to IMA HQs. for proper record maintaining. The journal office will be informed by the Hony. Secretary General by providing addressograph lists to JIMA.  
Membership will be commence only after it is approved and confirmed by the Hony. Secretary General, IMA (HQs.)

# ***IMA PROJECTS - 2022***

## **HEALTH PROJECTS**

Cancer awareness programs. Special importance to childhood cancer. This program will be implemented along with Lions Clubs International. IMA CGP Governing Council Member and Past District Governor Lion Dr S Veerapandiyan of IMA Myeladuthurai will be the coordinator. Branches can involve in this activity to help the unprivileged children who are suffering with cancer. The details of this activity will be presented by Dr S Veerapandiyan.

Diabetic detection and Screening. We all know how our patients are put under stress because of not detecting Diabetes early. Screening camps can be conducted regularly in our places. Programs to concentrate on Diabetic Retinopathy and Diabetic foot is most important. Hypertension is yet another disease which is neglected by the public and we can create awareness to monitor blood pressure regularly. The ways and means how we can help the public in these types of Non Communicable Diseases is very much important and this program will be implemented along with Rotary International. Our Past National President and Past District Governor Rtn Dr K Vijayakumar will be the coordinator and guide the Branches for effective implementation.

To encourage Blood donation—motivation of Doctors and public and Blood donation camps to be conducted.

Health check-up for doctor's and their family members through IMA Branches.

## **YOUNG EMPOWERMENT**

In Schools for Students and Teachers awareness programs about organ donation, blood donation, Road safety and traffic awareness has to be conducted. Health check-up camps for oral and dental hygiene, eye screening and training them about First aid and Basic Life support (BLS)

## **ENVIRONMENTAL PROJECTS**

Green the Nation. Massive Tree plantation. Each Branch and Members are requested to plant as many trees as possible with tree guards.

Adopting and strict adherence regarding Bio medical waste management Following and promoting "Swachh Bharat" benefits.

## **SELF AND SKILL DEVELOPMENT PROJECTS**

OWN YOUR HOME - IMA Hall for each Branch. Those Branches not having IMA Hall can try to purchase land and to build a hall.

BLOOD BANKS can be started in the Branches and necessary guidance will be given.

Leadership Training – workshop and seminars for the PSTs and Office bearers. Information

about National and State IMA Functioning, Schemes and Wings of National and State IMA, Constitution and bylaws of our Association will be taken up in the seminar. Branches are requested to add Motivational speech by eminent personalities about basic knowledge regarding Legal, Auditing and Insurance in their monthly meeting.

To conduct CME programmes regularly through IMA CGP and AMS wings.

### **WOMEN DOCTORS WING**

All the IMA Branches in our state are encouraged to inaugurate WDW. Special recognition and awards will be instituted to the Branches under the Leadership of women Doctors. Points will be added to the Branches who are encouraging women Doctors to join IMA.

### **FINE ARTS AND SPORTS**

Standing Committee requested to conduct the sports and cultural events in the middle of the year. Separate events can be organised for our children. All Branches are requested to identify the committee chairperson in their Branches and encouraged to conduct sports and cultural events regularly at Branch level also.

#### **Mission Statement for this Year:**

**INVOLVE YOURSELF MOTIVATE  
OTHERS ACHIEVE SUCCESS.**

#### **Vision Statement for this Year:**

**TOGETHER WE WILL SUCCEED  
IN ALL OUR EFFORTS.**

#### **Slogan:**

**‘BE COMMITTED TO IMA YOUR ASSOCIATION  
YOUR SECURITY’**

Our slogan is aptly endorsed by the immortal words of the great Antony Robbins

**“There is always a way if you are committed”**  
so my dear friends and colleagues

**‘BE COMMITTED TO IMA.  
YOUR ASSOCIATION YOUR SECURITY’**

## **ROLE OF IMA STATE VICE PRESIDENT**

- Function as an effective link between branches of their Zone and State Office.
- Work with state office to develop state goals and its implementation.
- Arrange a Zonal President , Secretary & Treasurer Training programme.
- Visit Branches of your zone in all the possible occasions.
- Organise evaluation meetings of local branch officers.
- Help and co-ordinate with State officials.
- Assist the State President in the administration of the branches by carrying out responsibilities assigned to them.
- Help to promote state theme, state projects, state goals etc.
- Try to help the branches to observe state designated months.
- Sort out any branch problems then and there within the zone and solve them with the cooperation of the state office.
- Conduct branch Presidents and Secretaries meet whenever possible and help the branches to accomplish the targets.
- Conduct inter branch / district meet / Inter district / Interstate / Zonal / meetings or family get together.
- Help to organize combined projects by the neighboring branches.
- Try to form new branches wherever possible.
- Co-ordinate with the branches to improve the attendance of the members.
- Increase the membership of your zone by atleast 20%.
- Intimate the branches about the IMA information to update them.
- Make the branches to undertake atleast one permanent project per branch of your zone.
- Ensure participation of all the branches to attend the state council meet / General body Meet / seminars / CMEs etc.
- Ensure that the branches bring out regular bulletin.
- Make the inactive branches active by visiting the office bearers and prominent members
- See that every branch is sending monthly report to state office with a copy to Vice President.



## NORTH ZONE - BRANCHES - 71

State Vice President 2022 (North)

**Dr. V. SARAVANAN**

‘Girishwari Kaustubam’, 27, Fifth Main Road, R.A. Puram, Chennai – 600 028.

Ph : 2498 1813, 98400 26265, drvsaravanan@gmail.com

### CHENNAI CORPORATION

1. AMINJIKARAI M.G.M. HEALTH CARE BR.
2. CHENNAI ADYAR BRANCH
3. CHENNAI APOLLO OMR BRANCH
4. CHENNAI APOLLO T.L. BRANCH
5. CHENNAI APOLLO VANAGARAM BR.
6. CHENNAI ASHOK NAGAR BRANCH
7. CHENNAI CENTRAL BRANCH
8. CHENNAI CITY BRANCH
9. CHENNAI GREATER CITY BRANCH
10. CHENNAI GTPT BRANCH
11. CH. KAUVERY ALWARPET BRANCH
12. CHENNAI KODAMBAKKAM BRANCH
13. CHENNAI MARINA BRANCH
14. CHENNAI MEDICAL COLLEGE BRANCH
15. CHENNAI METRO BRANCH
16. CHENNAI MINT BRANCH
17. CHENNAI MOGAPPAIR BRANCH
18. CHENNAI NAAM BRANCH
19. CHENNAI NORTH BRANCH
20. CHENNAI PERAMBUR BRANCH
21. CHENNAI PURSAIWALKAM
22. CHENNAI PILLAR CITY BRANCH
23. CHENNAI SOUTH BRANCH
24. CHENNAI VIJAYA BRANCH
25. CH. VILLIVAKKAM – AYANAVARAM BR.
26. CHROMPET Dr. RELA INSTITUTE & MEDICAL CENTER BRANCH
27. GLOBAL IT CORRIDOR BRANCH
28. Dr. METHA’S CHETPET BR.,
29. SIMS VADAPALANI BRANCH
30. POONAMALLEE HIGH ROAD BRANCH
31. PORUR BRANCH
32. SOUTHERN RAILWAY BRANCH
33. TEYNAMPET BRANCH

### CHENGALPATTU DISTRICT

34. CHENGALPATTU BRANCH
35. CHENNAI TAMBARAM BRANCH
36. MADURANTAKAM BRANCH
37. SRM POTHERI BRANCH

### KALLAKURICHI

38. KALLAKURICHI BRANCH
39. TIRUKOILUR BRANCH
40. ULUNDURPET BRANCH

### KANCHIPURAM DISTRICT

41. AMBATTUR – AVADI BRANCH
42. Dr. KMH PALLIKARANAI Branch
43. CHENNAI VELACHERY BRANCH
44. KANCHEEPURAM BRANCH
45. KELAMBAKKAM CHETTINAD HEALTH CITY
46. MELMARUVATHUR BRANCH
47. SRIPERUMBUDUR BRANCH
48. KARPAGA VINAYAGA BRANCH

### RANIPET DISTRICT

49. ARAKKONAM BRANCH
50. RANIPET BRANCH
51. SHOLINGUR BRANCH

### THIRUVALLUR DISTRICT

52. GAMMPA BRANCH
53. MINJUR BRANCH
54. POONAMALLEE BRANCH
55. TIRUVALLUR BRANCH
56. THIRUVOTTIYUR – ENNORE BRANCH

### TIRUPATTUR DISTRICT

57. AMBUR BRANCH
58. TIRUPATTUR BRANCH
59. VANIAMBADI BRANCH

### TIRUVANNAMALAI DISTRICT

60. ARNI BRANCH
61. CHETPET BRANCH
62. CHEYYAR BRANCH
63. POLUR BRANCH
64. TIRUVANNAMALAI BRANCH
65. VANDAVASI BRANCH

### VELLORE DISTRICT

66. GUDIYATHAM BRANCH
67. VELLORE BRANCH
68. VELLORE Dr. IDA CMC BRANCH

### VILLUPURAM DISTRICT

69. GINGEE BRANCH
70. TINDIVANAM BRANCH
71. VILLUPURAM BRANCH



## **EAST ZONE - BRANCHES - 33**

Sr. State Vice President 2022 (East)

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### **ARIYALUR DISTRICT**

1. ARIYALUR BRANCH
2. JAYANKONDAM BRANCH

### **CUDDALORE DISTRICT**

3. CHIDAMBARAM BRANCH
4. CUDDALORE BRANCH
5. KATTUMANNARKOIL BRANCH
6. NEYVELI BRANCH
7. PANRUTI BRANCH
8. VIRDDHACHALAM BRANCH

### **KARUR DISTRICT**

9. KARUR BRANCH
10. MUSIRI KULITHALAI BRANCH

### **NAGAPATTINAM DISTRICT**

11. KOOZHANALLUR BRANCH
12. KUTTALAM BRANCH
13. MAYILADUTHURAI BRANCH
14. NAGAPATTINAM BRANCH

### **PERAMBALUR DISTRICT**

15. PERAMBALUR BRANCH

### **PUDUKOTTAI DISTRICT**

16. ARANTANGI BRANCH
17. PUDUKKOTTAI BRANCH

### **SIVAGANGAI DISTRICT**

18. CHETTINAD BRANCH
19. DEVAKOTTAI BRANCH
20. KARAIKUDI KAUVERY BRANCH
21. MANAMADURAI BRANCH
22. SIVAGANGAI BRANCH

### **THANJAVUR DISTRICT**

23. KUMBAKONAM BRANCH
24. PATTUKOTTAI BRANCH
25. THANJAVUR BRANCH

### **TIRUCHIRAPALLI DISTRICT**

26. LALGUDI BRANCH
27. MANAPPARAI BRANCH
28. SRM IRUNGALUR BRANCH
29. THURAIYUR BRANCH
30. TIRUCHIRAPALLI BRANCH

### **TIRUVARUR DISTRICT**

31. NIDAMANGALAM  
MANNARGUDI BR.
32. TIRUTHURAIPUNDI BRANCH
33. TIRUVARUR BRANCH

## WEST ZONE - BRANCHES - 35



State Vice President 2022 (West)

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### COIMBATORE DISTRICT

1. ANAMALAI BRANCH
2. ANNUR BRANCH
3. COIMBATORE BRANCH
4. METTUPALAYAM BRANCH
5. NORTH COIMBATORE BRANCH
6. POLLACHI BRANCH

### DHARMAPURI DISTRICT

7. DHARMAPURI BRANCH
8. HARUR - UTHANGARI BRANCH

### DINDIGUL DISTRICT

9. BATLAGUNDU BRANCH
10. DINDIGUL BRANCH
11. KODAIKANAL BRANCH
12. ODDANCHATRAM BRANCH
13. PALANI BRANCH

### ERODE DISTRICT

14. ANTHIYUR BRANCH
15. BHAVANI – KOMARAPALAYAM BR.
16. ERODE BRANCH
17. GOBICHETTIPALAYAM BRANCH
18. PERUNDURAI BRANCH.
19. SATHYAMANGALAM BRANCH

### KRISHNAGIRI DISTRICT

20. HOSUR BRANCH
21. KRISHNAGIRI BRANCH

### NAMAKKAL DISTRICT

22. NAMAKKAL BRANCH
23. PARAMATHI VELUR BRANCH
24. RASIPURAM BRANCH
25. TIRUCHENGODU BRANCH

### NILGIRIS DISTRICT

26. GUDALUR BRANCH
27. NILGIRIS BRANCH

### SALEM DISTRICT

28. ATTUR BRANCH
29. METTUR DAM BRANCH
30. SALEM BRANCH

### TIRUPUR DISTRICT

31. DHARAPURAM BRANCH
32. KANGAYAM BRANCH
33. TIRUPUR BRANCH
34. UDUMALPET BRANCH
35. VELLAKOVIL BRANCH

## SOUTH ZONE - BRANCHES - 27



**State Vice President 2022 (South)**

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### **KANYAKUMARI DISTRICT**

1. KANYAKUMARI BRANCH
2. KANYAKUMARI GOVT. MEDICAL COLLEGE BRANCH
3. MARTHANDAM BRANCH
4. NAGERCOIL BRANCH

### **MADURAI DISTRICT**

5. MADURAI BRANCH
6. MADURAI MEENAKSHI BRANCH
7. MADURAI VMC
8. MANAMADURAI BRANCH
9. MELUR BRANCH
10. T. KALLUPATTI BRANCH

### **RAMANATHAPURAM DISTRICT**

11. PARAMAKUDI BRANCH
12. RAMANATHAPURAM BRANCH

### **THENI DISTRICT**

13. CUMBUM VALLEY BRANCH
14. MULLAI PERIYAR BRANCH

### **TENKASI**

15. COURTALLAM BRANCH

### **TIRUNELVELI DISTRICT**

16. AMBASAMUDRAM BRANCH
17. PULIANGUDI BRANCH
18. SANKARANKOIL BRANCH
19. TIRUNELVELI BRANCH
20. VALLIOOR BRANCH

### **TUTICORIN DISTRICT**

21. KOVILPATTI BRANCH
22. TIRUCHENDUR BRANCH
23. TUTICORIN BRANCH

### **VIRUDHUNAGAR DISTRICT**

24. RAJAPALAYAM BRANCH
25. SIVAKASI BRANCH
26. SRIVILLIPUTHUR BRANCH
27. VIRUDHUNAGAR BRANCH



# IMA CALENDER EVENTS

## JANUARY

- 11 - 17 Road safety week
- 15 IMA Community Services Day
- 24 National Girl Child Day
- 26 Republic Day
- 30 World Leprosy Day

## FEBRUARY

- 04 World Cancer Day
- 06 FSC Meeting @ Chennai
- 12. Sexual & Reproduction Health Awareness Day
- 13 PPLSSS - Management Committee Meeting @ Tirunelveli
- 20 NHB - Zonal Meeting @ Erode
- 27 FSS - Management Committee Meeting @ Kumbakonam

## MARCH

- 06 Branch Office Bearers Leadership Training Program @ Chennai
- 08 International Women's Day
- 06-12 World Glaucoma Week
- 10 World Obesity Day
- 12 World Kidney Day
- 18 World Sleep Day
- 15 World Consumer Rights Day
- 16 Measles Immunization Day

20 312th State Council Meeting @ Kallakurichi

24 World Tuberculosis Day

## APRIL

- 07 World Health Day
- 17 World Haemophilia Day
- 24 World Meningitis Day
- 25 World Malaria Day

## MAY

- 01 FSC Meeting @ Chennai
- 01 May Day
- 01 World Laughter Day
- 03 World Asthma Day
- 08 PPLSSS - Management Committee Meeting
- 08 World Red Cross Day
- 08 World Thalassaemia Day
- 12 International Nurses Day
- 15 International Day of Families
- 17 World Hypertension Day
- 22 NHB Zonal Meeting
- 28 International Day of Action for Women's Health
- 29 FSS - Management Committee Meeting
- 31 World No Tobacco Day

## JUNE

- 05 World Environment Day
- 14 World Blood donor day

- 19 313rd State Council Meeting  
 26 International Day against Drug Abuse and illicit Trafficking

**JULY**

- 01 Doctors Day (INDIA)  
 11 World Population Day  
 28 World Hepatitis Day  
 28 World Liver Day  
 29 ORS Day

**AUGUST**

- 01- 07 World breast feeding week  
 07 FSC Meeting  
 12 International Youth Day  
 14 FSS - Management Committee Meeting  
 15 Independence Day  
 19 World Humanitarian Day  
 21 NHB - Zonal Meeting  
 25 - Sep. 8 Eye Donation fortnight & Education for Right  
 28 PPLSSS - Management Committee Meeting

**SEPTEMBER**

- 01- 07 National Nutrition Week  
 08 World Literacy Day  
 10 World Suicide Prevention Day  
 10 World First Aid Day  
 18 314th State Council Meeting  
 21 World Alzheimer's Day  
 22 World Rose Day – Welfare of Cancer patients  
 25 World Day of the Deaf  
 28 World Rabies Day  
 29 World Heart Day

**OCTOBER**

- 01 International Day of Older Persons  
 02 IMA Anti quackery day  
 05 World Teachers Day  
 10 World Mental Health Day  
 12 World Arthritis Day  
 13 World sight day  
 16 World Food Day  
 17 World Trauma Day  
 20 World Osteoporosis Day  
 21 World Iodine Deficiency Day  
 24 World Polio Day  
 29 World Stroke Day  
 30 World Thrift Day

**NOVEMBER**

- 06 FSC Meeting  
 12 World Pneumonia Day  
 13 PPLSSS - Management Committee Meeting  
 14 World diabetes Day  
 20 NHB - Zonal Meeting  
 20 World Day of Remembrance for Road Traffic Victims  
 17 National Epilepsy Day  
 16 World Chronic Obstructive Pulmonary Disease Day  
 25 International day for Elimination of Violence Against Women  
 27 FSS Management Committee Meeting

**DECEMBER**

- 01 World AIDS Day  
 03 International day of persons with Disabilities  
 17&18 IMA TNSB State Conference  
 TIMACON 2022

**INDIAN MEDICAL ASSOCIATION  
TAMILNADU STATE BRANCH**

**STANDING COMMITTEES - 2022**

**Dr. R. PALANISWAMY**, State President & **Dr. N.R.T.R. THIAGARAJAN**, Hony. State Secretary shall be Ex-officio members for the all Committees

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MEMBERS		
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Dr. T. Balaji, Courtallam	94422 77815	balajihospital1@gmail.com
Dr. R. Prakash Kanna, Puliangudi	98652 33052	
Dr. Anbarasu, Pattukottai	98655 42324	dr.anbumahaeswari@gmail.com
Dr. Dhalapathy, Chennai Kodambakkam	98395 69163	

**CHILD HOOD CANCER AWARENESS COMMITTEE**

Dr. S. Veerapandiyan, Mayiladuthurai - Chairman	99422 44996	hondaveera@yahoo.in
<b>MEMBERS</b>		
Dr. M. Tamilselvi, Tiruchirapalli	97860 21686	dr.m.tamil@gmail.com
Dr. Elanthiriyar, Villupuram	99948 77792	
Dr. Sakthivel, Pollachi	98422 23463	drsakthi.gscoc@gmail.com
Dr. S. Kumaravel, Puliangudi	94887 21402	jeyamsurgical@gmail.com
Dr. M. Ramesh, Madurai	9843086669	oncomramesh@gmail.com
Dr. S. Kandasamy, Chennai Velachery	7530072016	drkands18@gmail.com

**N.C.D. AWARENESS COMMITTEE**

Dr. K. Vijayakumar, Past National President - Chairman	94431 61102	drvijaykumark@gmail.com, rtnkvk3212@gmail.com
<b>MEMBERS</b>		
Dr. Thangam Fathima Begum, Tirupur	91766 77690	
Dr. K. Kaliyaperumal, Maduranthagam	70104 45599	drkp.309@yahoo.com
Dr. C. Muralidharan, Dindigul	78670 13191	drcm60@gmail.com
Dr. K. Raja Mohamed, Perambalur	94441 59359	dr_rajamd@yahoo.in
Dr. D. Selvaraj, Tuticorin	94433 67776	drselvarajmd@gmail.com
Dr. Sridhar, Tiruvannamalai	94433 65084	
Dr. S. Pothiraj, Sankarankoil	98421 38390	drspr58@gmail.com, drspothirajumdraviahospital@gmail.com

**ENVIRONMENTAL COMMITTEE**

Dr. V. Janarthanan, Coimbatore - Chairman		hospital@ktvr.com
<b>MEMBERS</b>		
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Dr. Suresh Kumar, Koothanallur		
Dr. T. Senthil, Ambattur Avadi	98403 24333	
Dr. Lakshmi Narayanan, Aranthangi	94431 31765	janagirahospital@rediffmail.com
Dr. K. Elavarasan, Jayankondam	94439 53390	ela_k@rediffmail.com

**BIO MEDICAL WASTE MANAGEMENT COMMITTEE**

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Dr. Sasiraj, Thanjavur	96007 63154	
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<b>TAMIZH COMMITTEE</b>		
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Dr. T. Nalani, Coimbatore	98943 04075	drtnalani10@gmail.com
Dr. T. Rajalingam, Tuticorin	94423 23246	
Dr. K. Magudamudi, Kallakurichi	94880 12599	drmakuds@gmail.com
Dr. Balamurali, Tirupur		
Dr. Rajesh Sengoden, Salem	94433 21151	sengodan.rajesh1974@gmail.com

<b>RESEARCH COMMITTEE</b>		
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<b>MEMBERS</b>		
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Dr. N. Syed Mohamed Buhari, Tirupur	99940 16478	
Dr. H. Bashir Ahmed, Villupuram	94442 80899	drbaashir@yahoo.co.in
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Dr. K. Govindharaj, Tiruchirappalli	98424 55566	
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<b>PROPERTY ACQUIRING AND MAINTENANCE COMMITTEE</b>		
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Dr. Durai Padmanathan, Kovilpatti	99440 68296	
Dr. N.S. Kumaresan, Coimbatore	99430 96666	kumaresanns@gmail.com
Dr G. Vargunapandian - Chennai Kodambakkam	98949 49364	

<b>MEDICAL EQUIPMENTS BULK PURCHASE COMMITTEE</b>		
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<b>MEMBERS</b>		
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Dr. M. Praveen, GAMMPA	98405 00200	praveenmarjunan@gmail.com

## REPORTS OF STANDING COMMITTEES

### ACADEMIC COMMITTEE

**Dr. S. JAYARAMAN**, Chairman

#### ACADEMIC COMMITTEE

Dr. S. Jayaraman, Chennai Villivakkam Ayanavaram - Chairman	92821 03841	drjraman@yahoo.com
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Dr. S. Rekha, Poonamallee High Road	98848 38667	dr.srekha.18@gmail.com
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Dr. T. Anbuselvan, Kanchipuram	98844 39638	
Dr. P. Jayanthkumar, Erode	94426 46960	drpkumar@gmail.com
Dr. R. Bavaharan, Tiruchirapalli	97894 55600	
Dr. V. Nandagopal, Coimbatore	98427 80383	dr_nanda@yahoo.com

The following activities we are planning from Academic Committee of IMA TNSB.

1. Monthly Virtual CME-State level in various health days.
2. Coordinate with CGP and AMS to conduct zonal conferences combinely.
3. Public awareness program through medias like you tube, Face book and twitter to commemorate health days.
4. Planning to conduct awareness walkathon for the general public about various health awareness.
5. Planning to conduct CME along with National IMA as pan India Program for IMA members.

We conducted 1st monthly virtual CME to commemorate Cervical Cancer Awareness on January 28<sup>th</sup> 2022. Dr. Jaishree Gajaraj, Senior Consultant Gynecologist from M.G.M. Health Care, Chennai presented a talk on Prevention and Diagnosis of Cervical Cancer and Dr. Saritha, Clinical and Radiation Oncologist from Billroth Hospitals, Chennai presented Management of Cervical Cancer. Around one hundred members attended in zoom online platform.

### SPORTS COMMITTEE

**Dr. MOHAMED IBRAHIM**, Chairman

#### SPORTS COMMITTEE

Dr. M. Mohamed Ibrahim, Tirunelveli - Chairman	98841 72943	mdibrahimdr@yahoo.co.in
<b>MEMBERS</b>		
Dr. Kumar Kempam, Coimbatore	98422 93246	kumarkempam@yahoo.co.in
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Dr. S.N. Ganesh, Tiruvannamalai	94433 32426	gains64@yahoo.co.uk
Dr. Major S. Chowdari, Vellore	94434 74128	
Dr. E. S. Saravanan, Villupuram	94431 47949	
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Dr. S.N. Nagarajan, Tirupur	91766 77084	
Dr. M. Manobala, Kallakurichi	90033 22588	drmanobala@gmail.com
Dr. V. Bharathidasan, Mayiladuthurai	94442 32115	drbharathi2000@yahoo.com

- Sports committee to address the fitness and sports issues of members throughout the year and not just conduct annual sports event alone
- To create a sports directory of all IMA TNSB members who are interested in various sports
- TNSB sports & Fitness WhatsApp group and Facebook page to be popularized among IMA members
- TNSB Zonal level sports to be conducted by April, May and June
- TNSB State level finals to be completed by June 2022
- Monsoon and Covid lock downs in future, if any, to be considered in timing of events
- In the forthcoming SCM, Offer to be given to branches for the conduct of zonal sports meet.
- Most commonly played sport events alone to be conducted at state level
- Strengthening of Go green activities in all branches
- Regular online meetings to be conducted for innovative sport ideas
- The meeting is adjourned.

## FINE ARTS COMMITTEE

**Dr. PRADEEP KUMAR, Chairman**

FINE ARTS COMMITTEE		
Dr. Pradeep Kumar, Hosur - Chairman	99446 78484	drpradeep007@yahoo.com
<b>MEMBERS</b>		
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Dr. M. Nisha Priya, Kanchipuram	99528 14433	drnishapriya@gmail.com
Dr. Vetrivel, Villupuram	80567 77041	
Dr. Sridharan, Tiruchirapalli	99442 98199	
Dr. Priya Solomon, Marthandam	94420 77750	priyachellajoy73@gmail.com
Dr. L. Sreenivasan, Tirupur	96552 26672	srini2103@yahoo.co.in
Dr. S. Mugunthan, Cuddalore	94432 85204	mugunth2204@gmail.com
Dr. L. Anitha, Coimbatore	98653 68830	

Greetings from Finearts Committee. I would like to thank the office bearers of IMA TNSB for giving me an opportunity as a chairman of fine arts committee.

### Agenda for the year 2022 as follows

- August - west zone and north zone cultural
- September- east zone and south zone cultural.

- October- finals at hosur.

Apart from main events we are conducting monthly contest for all the members and distribute prizes for all the winners.

- January- making the memories of the festival.
- February- couple selfie contest and couple singing contest
- March- photography contest

Further coming months along with other committee members we will planning accordingly. Work shops for photography, clay arts, dance, singing has been planned for kids on monthly basis.

We also started exclusive web site for finearts <http://www.imatnsbfinearts.com/>

## PROJECT / ACTIVITIES COMMITTEE

**Dr. M. ABDULAZEEZ**, Chairman

### PROJECT / ACTIVITIES COMMITTEE

Dr. M. Abdul Azeez, Courtallam - Chairman	94432 26866	drazeezthenkasi@gmail.com
<b>MEMBERS</b>		
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Dr. W. Justine, Tiruchirapalli	98948 15555	mailjus@yahoo.com
Dr. S.T. Prasad, Erode	98427 23055	stprasadped@gmail.com
Dr. Vijay Anand, Sivakasi	99439 10777	vijayadroits@yahoo.com
Dr. S. Sivaramakannan, Chennai Kauvery Alwarpet	99523 11622	drsskbodi@gmail.com

Dear President,

I would like to implement following in all branches

1. All branch should train few students say 50 or 100 plus 2 students who are studying in government school for NEET Examination.
2. From IMA Branch they should conduct Peridic Diabetic, Hypertension Thyroid, Cancer Detection Camps preferably in rural areas.
3. IMA branches can celebrate WHO day Diabetic day kidney day in the colleges by delivering good speech.
4. Wherever CM scheme insurance scheme is there we must treat poor patients through the scheme.
5. A branches should have a good rapport with government doctors wing collectrate and PCB to get our certificate easily.
6. All branch can appoint a person for this for getting CEA PCB Fire certificate, sanitary certificate easily.
7. Every month academic meet sports meeting, cultural meeting should be conducted.

## MEMBERSHIP COMMITTEE

**Dr. V. MADHAVAN, Chairman**

### MEMBERSHIP COMMITTEE

Dr. V. Madhavan, Erode - Chairman	98427 55802	madhuerode@gmail.com
<b>MEMBERS</b>		
Dr. B. Senthilvelkumar, Tiruchirapalli	98424 63639	nalambahospital.trichy@yahoo.com
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Dr. Sivakumar, Sivakasi		
Dr. Sivaprakasam, Attur	94430 91771	
Dr. Vijay Venkataraman, Coimbatore		
Dr. S. Anbarasu, Peramballur	91502 70203	anbusangi@gmail.com

Dear Presidents & Secretaries for the year 2022.

Greetings.

Membership growth is the need of the hour. Only about 30-35% of Medical Professionals in our State are members of IMA. We have to promote Membership in our respective branches by spreading the message about the benefits of our organization. The manner about IMA enriching our personal, professional and social aspects as well.

Please motivate your non – IMA friends to our meetings and explain to them about the amazing resources that are available from IMA Schemes like PPLSSS to protect our practice, FSS to help our Family, FBS our own Mediclaim policy.

The NHB - the largest association of Hospitals, Nursing Homes under one head, which helps us in all our day to day practice problem, also Insurance, Accreditation, CEA, Pollution control etc...

We should motivate Junior Doctors to join our fold and to the effect, I request our Branches to involve themselves with neighbouring Medical colleges and to welcome students joining the Medical Colleges and to participate in students centric activities like issues of NEET, EXIT EXAM. This will help us build rapport with students who would be our future IMA members.

We can attract youngsters through our MSN & JDN network.

We should make new member feel welcome in our branch by conducting an induction ceremony and giving them orientation about all our beneficial schemes.

Looking forward to a growth oriented year ahead.

**INSURANCE COMMITTEE**  
**Dr. T. NIRMAL FERDRICK, Chairman**

**INSURANCE COMMITTEE**

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<b>MEMBERS</b>		
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Dr. B. Kosalram, Coimbatore	94433 65860	koshalram@yahoo.com
Dr. P. Kumaran, Tuticorin	98946 43299	
Dr. Sumoth Krishnan, Udumalpet	94421 78930	dermbc@gmail.com

The Committee discussed the challenges and difficulties faced by members and resolved to address them in association with NHB wing and state leaders.

1. Difficulties in pre auth and claims process by the empanelled hospitals
2. Frivolous technical and non- medical queries raised during pre authorisation and claims process
3. Standardise documentation process and make it uniform for all TPAs and schemes
4. Revision of package rates under CM scheme and GIPSA companies as per scientific costing
5. Scientific costing of procedures with the help of institutions like IIT or big auditing firms that are acceptable to all stake holders
6. To form district level committee / bring together hospitals to work together to face the challenges as one group or if the issues are not addressed to initiate non cooperation with insurance companies to press our demands
7. To develop an app for uniform documentation and support our member hospitals
8. Insurance committee and NHB will take inputs from all stakeholders in IMA and arrive all actionable points for short term and long term.
9. Insurance committee will be initiating a online / direct meeting with NHB office bearers and hospital representatives to understand their problems and challenges.
10. Follow it up with insurance offices, government officials and also explore legal solutions to some of the problems.

If members have any suggestions or inputs to the committee request members to write to Prof. Dr. T. Nirmal Fredrick, [nirmalfred@gmail.com](mailto:nirmalfred@gmail.com) or message to 9840746062

## AAO GAON CHALAN VILLAGE ADOPTION COMMITTEE

வாருங்கள்... கீராடம் செல்வோம்!

**Dr. T.P. MALLIKA**, Chairman

### AAO GAON CHALAN VILLAGE ADOPTION COMMITTEE

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<b>MEMBERS</b>		
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Dr. T. Jayanthi, Dindigul	94425 65670	drtjayandhi@gmail.com

Our Sincere Thanks to Dr. R. Palanisamy Sir Our Beloved President IMA TNSB for Having Given the Golden Opportunity to Us to work in the above Project.

We Humbly Request Our State Officers, Presidents Secretaries & Members of IMA TNSB to kindly Give Hands to Carry out Our "Aao Gaon Chalen Village Committee Project" on a Successful Manner. Dr. T.P. Mallika - Attur, Dr. Amutha Karunanithi - Tambaram, Dr. Priya - Coimbatore, Dr. Thangam Murthy - Courtallam, Dr. Victoria - Kanchipuram, Dr. Jayanthi - Dindigul. Aao Gaon Chalen Village Adoption Committee IMA TNSB, Team.

Please Select any one Deserving Village (Really need Our Service) in your Area and do your Services as Follows :

- Please do Either. Medical or Educational or Community or Social Service as per your Convenience.
- If Possible, Please Join With Other Service Organisations, Rotary Club, Lions Club, JCI, Inner Wheel Club, Red Cross and other Women Service Organisations and please do the Needful.
- If Possible U Can adopt One Village n do All Sorts of requirements according to the Support from Other Service Organisations.
- U please Visit atleast once in a month.
- Please send your Project Photos to this WA Group with Yr reports then and there.
- Please Send your Photos n Reports along with Yr Monthly Reports to your Concerned State Officeres.

U can Select either Old Age People Home or Blind School or Orphan Children School or Home Handicapped Children / People Home Or Govt Rehabilitation Centers or Hill tribe Children School etc, etc, and U can do any Service like Medical Educational Community or Social Services. U can donate Food on your Birthdays or Wedding Days, For Deepavli Pongal and Christmas, Bagreeth Festivals. U please print your Branch Name in the Banner.

U can join with our IMA TNSB Environmental Committee and carry Tree Plantation in year Adopted Village to Achieve Our Goal of. "IMA TNSB GREEN THE NATION".

Please do a lot of Services to the Poor and Needy. May God Bless U All.

## CHILD HOOD CANCER AWARENESS COMMITTEE

**Dr. S. VEERAPANDIAYAN, Chairman**

### CHILD HOOD CANCER AWARENESS COMMITTEE

Dr. S. Veerapandiyan, Mayiladuthurai - Chairman	99422 44996	hondaveera@yahoo.in
<b>MEMBERS</b>		
Dr. M. Tamilselvi, Tiruchirapalli	97860 21686	dr.m.tamil@gmail.com
Dr. Elanthiriyam, Villupuram	99948 77792	
Dr. Sakthivel, Pollachi	98422 23463	drsakthi.gsgcc@gmail.com
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Dr. M. Ramesh, Madurai	9843086669	oncomramesh@gmail.com
Dr. S. Kandasamy, Chennai Velachery	7530072016	drkands18@gmail.com

Dear Branch officers,

Kindly do paediatric Cancer Awareness activities intensely and inform me your activities done so for.

Friends I am not only act as a committee chairman in our association but additionally I am the same coordinator for LIONS CLUBS INTERNATIONAL also throughout Tamil Nadu. Kindly co ordinate with local lions clubs in your area to do the activities. Lions Peale support you socially economically and emotionally. If in any places the sufferers need permanent buildings , logistics kindly contact me I will explain the procedures or else contact our State president also he will direct you. So for lions organisation done 2714 projects in this field in Tamilnadu. Thanks for your patience in reading this. My mail id liondrveera@yahoo.in. Cell : 9942244996

In Thanjavur our past president Dr. N. Mohandas who is also a District co ordinator for Paediatric Cancer had released a booklet for this and also released our Government's advertisement for Paediatric Cancer and also donated a CHEMOPORT for a child receiving chemotherapy.

## TAMIZH COMMITTEE

**Dr. B. ARUL PARI, Chairman**

### TAMIZH COMMITTEE

Dr. B. Arul Pari, Vellore - Chairman	94431 65229	vallalpari@yahoo.com
<b>MEMBERS</b>		
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Dr. T. Nalani, Coimbatore	98943 04075	drtnalani10@gmail.com
Dr. T. Rajalingam, Tuticorin	94423 23246	
Dr. K. Magudamudi, Kallakurichi	94880 12599	drmakuds@gmail.com
Dr. Balamurali, Tirupur		
Dr. Rajesh Sengoden, Salem	94433 21151	sengodan.rajesh1974@gmail.com

Action plan for Tamizh committee :

1. To encourage doctors children to participate in Thirukkural recitation competition to held in all local branches . Bharathiyar songs can also be included .
2. The near by government schools to be included in the Thirukkural recitation competition and the kids to be honoured along with their parents in the local branch IMA meeting.
3. New words in Tamil for the medical terminologies to be published in TIMA on monthly basis. Any interested member can contribute to that space exclusively allotted in TIMA.
4. Kavi Arangam and Pattimandram should be conducted in the branches on important occasions like doctors day, Pongal vizha
5. 'தமிழ் பேசு, தங்கக் காசு' - Titles like these should be kept to improve the oratory skills of members and their kids to participate in oration competition which should be held as frequent as possible.
6. Kavidhai and katturai pottigal should be held at branch level and should be published in TIMA

## RESEARCH COMMITTEE

**Dr. S.G. BALAMURUGAN, Chairman**

RESEARCH COMMITTEE		
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<b>MEMBERS</b>		
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Dr. H. Bashir Ahmed, Villupuram	94442 80899	drbaashir@yahoo.co.in
Dr. M. Kanagavel, Chennai South	94440 83330	drmkvel@yahoo.com
Dr. K. Govindharaj, Tiruchirapalli	98424 55566	
Dr. G. Murugan, Dharmapuri	95855 10931	gannmur78@gmail.com

## ACTION PLAN

**PLAN 1 - CME WORKSHOP** : We will create awareness in research activities in our members and will Conduct the CME WORKSHOP for PG Students and interested members

**PLAN 2 - CLINICAL TRAIL** : Will plan phase IV clinical trail - assess the response and side effects of the proven drug. Will involve many hospitals and clinics

Research Committee will take care of the ETHICAL COMMITTEE APPROVAL

### EXECUTION

1. Study design to be drafted
2. IMA TNSB Approval
3. Application to enroll the study to be invited
4. Eligible hospitals to be selected based on pre defined criteria
5. Ethical Committee approval
6. Study execution
7. Result analysis and publication

Funds to be mobilized from Pharma company and expensed as per approval.

## PROPERTY ACQUIRING AND MAINTENANCE COMMITTEE

**Dr. A.K. RAVIKUMAR, Chairman**

### PROPERTY ACQUIRING AND MAINTENANCE COMMITTEE

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Dr. R. Rabindranath, Attur	98427 50556	geethragunath@gmail.com
Dr. Durai Padmanathan, Kovilpatti	99440 68296	
Dr. N.S. Kumaresan, Coimbatore	99430 96666	kumaresanns@gmail.com
Dr G. Vargunapandian - Chennai Kodambakkam	98949 49364	

Property Acquiring & Maintenance Committee Dear leaders of IMA!

### **Greetings from Property Acquiring & Maintenance Committee.**

Strength and Power of the Association is based on

1. Membership strength and we are 2nd largest Branch in the entire country.
2. The Asset value the Association has got & how those assets are of use to its members and Society.

Though we are 2nd largest branch in the Country, by way of Assets and the benefits which we reap out of it for our members & the society, we are far behind various other State branches like Kerala, Gujarth etc.

You all may be aware that money in loosing its value and the interest the deposits generates has drastically gone down post Covid and hardly we get 4.5%.

The current Assets which IMA TNSB has got like (a) HQs Building Tambaram (b) IMA PPLSSS Guest House Chetpet (c) IMA PPLSSS JVL Plaza Guest House either they are far off, No proper parking space, no Proper meeting Hall Space, Guest rooms are of no Star Hotels Standard, No proper office, Library, Public gathering facility etc. Any Asset should also generate Revenue for the Association so that maintenance of the Assets would be Possible.

With all these points is mind we should plan to purchase a good piece of spacious land /building which will fullfill all our needs which has been discussed in our previous State Council Meetings & Annual General Body Meetings which has permitted to search for a property.

Where to locate? - Preferably close to state highway within Chennai city.

Minimum Area needed – 4 to 5 Grounds (around 20-30 cents)

Mobilization of funds

- Utilizing the Deposits of IMA.
- Contribution from Major Branches as interest free loans.
- Contribution from Interested members as interest free loans.
- Raising loan pledging existing assets.

How to Repay Loan?

- from Membership Fee
- from the income we could generate from the assets IMA has got.

We the Committee members put forward the Ideas to you all to think over and express your Ideas & views on mode of Mobilizing funds, Identifying the property, etc.

## MEDICAL EQUIPMENTS BULK PURCHASE COMMITTEE

Dr. S. NARMADHA, Chairman

### MEDICAL EQUIPMENTS BULK PURCHASE COMMITTEE

Dr. S. Narmadha, Vellore - Chairman	94430 98899, 94420 84462	dr.narmadhaashok@gmail.com
<b>MEMBERS</b>		
Dr. V. Seethaman, Coimbatore	98438 38505	vharisram@gmail.com
Dr. T. Senthil, Ambattur Avadi	98403 24333	
Dr. S. Marimuthu, Thanjavur	94436 01002	vishnucancercentre@gmail.com
Dr. S. Marimuthu, Tuticorin	98944 47770, 86676 42235	drsmms74@gmail.com
Dr. V. Sugavanam, Rasipuram	94433 53483	drsugavanan@gmail.com
Dr. M. Praveen, GAMMPA	98405 00200	praveenmarjunan@gmail.com

The bulk purchase committee was formed this year and hence a relatively new committee. However, the concept about the formation of the committee is not new. The phenomenal success of procuring and purchasing N95 masks at a very subsidised and uniform rates during the peak of the pandemic led to the formation of this committee. Already the unity shown by hospital board has ensured standardised pay scale.

#### Aim of the committee-

The main aim of this committee will be to ensure that our IMA members are able to purchase things required for our practice at a rate that is standardised and subsidised and also to ensure the quality.

#### The need for the committee-

- We as practitioners know that quite often huge variations exist when we purchase things and equipments for our health care establishments. These differences can run in lakhs when we purchase higher end equipments.
- Also the quality of the equipments cannot be guaranteed. Further we do have problems with regards to the annual maintenance.
- The hidden lines behind the contracts and purchase orders are missed in the hustle and bustle of busy practice.

- The young doctors who are just out of medical practice are also naive and confused about the need and availability of the equipments
- Hence, this committee is formed to aid in all these issues.

#### Basic work pattern of the committee-

1. The committee proposes to aid in bulk purchases of things and equipments when need arises.
2. The committee proposes to aid in selection of quality vendors who will have good purchase and after sale credibility.
3. The committee will also ensure rates that are standardised and subsidised for IMA members.
4. The committee will also ensure that there are no hidden clauses proposed by these vendors.

The way forward is to have a medical equipments online purchase site like that of Amazon and Flipkart.

This website will have details of vendors who supply equipments ranging from normal house keeping utilities to the highest equipments needed.

These vendors will be scrutinised for their quality, affordability and also support service

**Work done so far in this regard-**

1. The members along with the state office bearers had a meet on virtual platform

2. Talks are on with people experienced in the same line Medical.

3. Look out for software vendors to help in technical support

The future of medical practice lies in being together, supporting each other and taking care that the huge membership of us gives us some

advantages too. The younger generation of doctors have to face the increasing competitions not only from their peers but also from the other health care systems.

This committee will ensure that we guide the young generations, ensure that our huge unity will bring us advantage in purchases.

The previous office bearers of this wonderful association has showed us it is possible and we from the committee also will ensure the same.

**ENVIROMENTAL COMMITTE**

**Dr. V. JANARTHANAN, Chairman**

**ENVIRONMENTAL COMMITTEE**

Dr. V. Janarthanan, Coimbatore - Chairman

hospital@ktvr.com

**MEMBERS**

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- Spreading awareness among the IMA members in all branches of Tamilnadu about saving the Environment.
- To identify and involve the doctors who are interested in Environmental activities, through Environmental Wing of their respective branches.
- IMA could serve the community at large by our Environmental projects involving the concerned Government departments , Local bodies, service organisations like Lions, Rotary. Environmental activists, Spiritual organisations like ISHA, Brahmakumaris, and Students of school and college eco clubs.
- Initially to arrange an one day seminar for the TN state IMA doctors in the Central zone (Trichy) at the earliest. The speakers could be Medical or Non-medical environmentalists.
- Project tree planting-Green the nation was planned on March 20th (Sunday) during State Council with the permission of the President,

marking World Forest Day (21st March) and Water Day (22nd March).

- The ‘மஞ்சள் பை’ (manjal paii) programme initiated by our Honourable Chief Minister has to be taken up, bags need to be printed with IMA-TNSB logo and distributed to the public in all the hospitals and medical shops. Need big sponsors for this project.
- To involve more members a Jungle walk and Trekking is planned around Coimbatore.
- In our TN state 11 districts are in the coastal zone and the sea is polluted by micro plastics..... Save Marine Environment.... Is planned.
- Involving Corporate Hospitals, Textile business personnel and other Philanthropists as sponsors to the projects planned by this committee for various projects.
- Need to plan well and take up this committee to more innovative projects apart from Tree plantation to - Projects with Broad vision and scientific basis to the public.

# Indian Medical Association Medical Students Network (MSN)

**Dr. K.M. Abul Hasan, Chairperson IMA MSN TN**

## 1) What is IMA MSN & Its Objectives?

The objectives of Indian Medical Association Medical Students Network (IMA MSN) are:

- a. To sensitize the students in Medical college of modern medicine, about IMA and its activities with an aim to enroll them as a member of IMA in future.
- b. To help and guide them regarding future prospect in medical career, education, ethics, research and employment avenues.
- c. To help and guide them to intervene if any problem arises during their educational career.

## 2) What is the Structure of State MSN?

Office bearers of Indian Medical Association Medical Students Network (IMA MSN) State council:

The student members of the state council from amongst themselves will elect the following:-

Indian Medical Association Medical Students Network (IMA MSN) State convener, State General secretary, National council member, two joint secretaries

## 3) How do you form MSN in each college?

The IMA local branch where Medical College/Colleges exist will appoint IMA – MSN Committee with a Patron (IMA Member) to achieve the above objectives

The following will be the elected office bearers of the Indian Medical Association Medical Students Network (IMA MSN)

- a. Chairman
- b. Two vice-chairmen
- c. Secretary
- d. Finance Secretary
- e. Two Joint Secretaries
- f. State Council Member Indian Medical Association Medical Students Network (IMA MSN)
- g. Two class representatives for each class

## 4) What is the fee for MSN Membership – Entrance fee & Subscription?

Membership fee will be a onetime payment of Rs.500. Click here to Join IMA MSN Online Membership: <https://www.ima-india.org/msn>

### **Distribution of the Fee:**

The whole entrance fee will be credited to IMA MSN National Account from which upto 50% can be spent to the Local College MSN Unit Activities and 25 percent to State MSN Unit & 25 percent to National MSN Unit Activities on receipt of report of activities and accounts.

# Indian Medical Association Junior Doctors Network (JDN)

**Dr. K.M. Abul Hasan, Chairperson IMA JDN TN**

## 1) What is IMA JDN & Its Objectives?

**Vision:** IMA JDN should become the main forum for Junior Doctors around the country to network, collaborate and address all the issues of Junior Doctors.

### **Objectives:**

- To be the National Voice of all the Junior Doctors of the country
- To support & solve Junior Doctors issues like work place challenges, job opportunities & violence against them.
- To play a pivotal role in IMA's efforts to solve problems in NMC, CPA etc
- To take-up new demanding challenges like Medical Entrepreneurship, Promoting research, leadership development & exchange programmes with other countries.
- To efficiently connect all Junior Doctors through Social Media with ONLINE JOB PORTAL, IMA PG SATHI and social media conclaves.
- To survey and convey the opinion of junior doctors on variety of issues we have IMA JDN ONLINE SURVEY PORTAL
- Established IMA JDN in 18 states, currently our membership 8407 – All Life members of IMA, Also Holding 1900 Honorary members through social media.

## 2) What is the Eligibility for Membership?

- JDN Members – junior doctors possessing MBBS degree within 10 years after registration in the State medical council. IMA Life members could also be JDN members.
- JDN members outside India - Migrants from India who are staying in foreign countries for the purpose of education or job falling under the definition of Junior Doctors.

## 3) How do you form a local branch JDN?

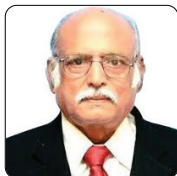
The IMA local branch will appoint an IMA member as IMA – JDN Branch Chairman. If a local branch is associated with/ near a medical college or other educational institute the local IMA branch will appoint a Chairman who is preferably a staff of the institute (this could be an additional coordinator to the above mentioned) to achieve the above objectives.

## 4) What is the Membership fee for JDN?

Individual Membership fee is Rs. 10,000/- rupees, can be paid in 5 yearly instalment. Click here to Join IMA JDN Online Membership: <https://www.ima-india.org/jdn>



## IMA NURSING HOME BOARD - AN OVERVIEW



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**Dr. R. Anburajan**  
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**Dr. R. Rengaraj**  
Treasurer, IMA NHB  
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### I. CONCEPTION :

- Problems in Labour Laws, PF, Construction, Taxation etc., all required separate discussions and dealing with the Government Officials and the public necessitated formation of a separate self-financing, self-supporting autonomous wing under IMA.
- The introduction of CPA and Clinical Establishment Act and PCB Act and prenatal diagnostic Act Organ Transplant Acts all these needed special study by Nursing Homes.
- With increasing demand and the varying functions. We needed a separate NHB wing.

### II. BIRTH :

- The NHB was born in the year 1987 on 1st April.
- The NHB was born the brain child of Prof. Dr. V. Varadarajan the then State President and Dr. V. N. Rajasekaran, the then State Secretary, Dr. K. Janakiraman (outgoing) State Secretary offered to be the first Secretary of the NHB. The formation was subsequently ratified by the State Council at Tuticorin in May 1987.

### III. NAMING :

- The name of the wing shall be Nursing Home Board of Indian Medical Association Tamil Nadu State Branch with an abbreviation as NHB IMA TNSB .

### IV. AIMS :

- To discuss the Hospitals day-today problems.
- To impart the knowledge about Rules and Regulations governing the Hospitals.
- To discuss the problems with the officials for smooth conduct of the Hospitals.
- To discuss with the Politicians and Law makers about the Rules and Regulations and day-today problems, so that these things are taken care of when legislation is made.
- To formulate strategies to Regularize and Standardize the Hospitals needs and their functions.

- To consolidate the hospitals in to one group of a business group so that members have a forum to represent their grievances in the most professional manner.
- To address to all the problems of the hospitals and take it to the concerned platforms for smooth and proper running of hospitals.

## V. FAMILY :

### **ORGANOGRAM**

- 1) **THE CHAIRMAN NHB** will be elected by the members of the NHB.
  - Must be a member of IMA & NHB for 10 years.
  - Should have been a District Co-ordinator in NHB for two terms and attended a minimum of 10 meetings.
  - Period of term is for 2 years and not eligible for re-election for the same post.
- 2) **THE SECRETARY NHB** will be elected by the members of the NHB .
  - Period of term is for 2 years and no re-election.
  - Must be a member of IMA 10 years & NHB 5 years.
  - Should have been a District Co-ordinator in NHB for two terms and attended a minimum of 8 meetings or Past Secretary of IMA TNSB if he is a member of NHB.
- 3) **THE FINANCE SECRETARY** will be nominated by the Chairman & Secretary, preferably from the local branch / district of the Secretary of NHB.
- 4) **DISTRICT COORDINATORS NHB:**
  - Each District will elect a District Coordinator elected by the NHB members in that district. One District Coordinator for every two hundred NHB members in the District.
  - They will have a term of office for two years. They will be responsible for the coordination of the Nursing Home with in their Districts.
- 5) **FOUNDER PRESIDENT HENCE FORTH CALLED ADVISOR:**
  - For his conception and promotion of NHB from its day one till date, Dr.V.Varadarajan shall be the Patron of NHB, for his life time and the post shall cease to exist after his life time.
- 6) **FROM IMA TNSB:**

The IMA President, The President Elect, The Immd. Past President, The State Secretary, The Immt. Past Secretary & The State Finance Secretary

### **FROM NHB:**

Founder President / Patron, Chairman, Immediate Past Chairman, Secretary, Immediate Past Secretary, Finance Secretary, All the District

Coordinators&Past State Presidents and Past NHB Chairmen are permanent invitees

All posts- to contest in any NHB election he/she has to be a member of NHB.

All the posts except the Finance Secretary are filled by elections.

#### **VI. SIBLINGS – MEMBERSHIP :**

- Any Private Nursing Home or Hospital which is represented by a Doctor who is a life member of the Indian Medical Association of the TNSB can become a member. The representing doctor should belong to the Branch of IMA within whose jurisdiction the Hospital is situated or any one branch in a city with multiple branches.
- Any company running the Hospital in many places shall be represented in each place by a local doctor representing the Hospital in that area.
- Day care centers represented by a doctor where they admit patients for monitoring, treating for less than a day.

#### **VII. HOW TO BECOME A MEMBER**

- Application form for enrolment is available with NHB office, same can be downloaded from the official website [www.imanhb.org](http://www.imanhb.org).
- Filled application shall carry details of the name of the owner/hospital with full Postal Address /E-mail ID / Mobile Number of the owner / PAN Number (where ever applicable).The IMA life membership details of the representing doctor should be clearly stated.
- Filled up application should carry the endorsement of the local IMA branch office bearer with his seal.
- Application should give all details regarding the number of beds, man power strength, area of the hospital, facilities available etc., so as to facilitate grading.
- Membership is for five years. For convenience of data maintenance, membership starts in January of that year and ends in December at the end of five years.
- A year is calculated as finished in December even if the member joins in any of the month that year.
- Each member is given a certificate.
- Renewal of membership- Period of membership is five years. This can be renewed with an application. Fee is half the enrolment fee.
- Latest membership fee structure:
  - New Enrollment- General- Rs. 5,000/-; Journal- Rs.3,000/- Total- Rs.8,000/-
  - Renewal- General- Rs.3,000/-; Journal- Rs.2,000/- Total- Rs.5,000/-
  - For any change of name - General- Rs.500/-

**VIII. COMMUNIATION:**

- NHB circulates a quarterly journal by name “NHB EXPRESS”. It shall be edited by the secretary - comes every three months just before the zonal meets carrying useful information on day to day running of hospital, messages from leaders as well as brochure of registration form on the coming meet
- NHB is connected to all its members by emails and whatsapp and via post.
- NHB takes pride in having its own web site [www.imanhb.org](http://www.imanhb.org). The site is monitored by the Secretary’s Office

**IX. FAMILY MEET****ZONAL MEETINGS:**

- NHB zonal meetings were originally conceived to disseminate information to members especially in rural areas in the 4 Zones of Tamilnadu in rotation.
- Planning to have District level meeting also.

**X. GROWTH :**

- TOTAL NUMBER OF REGISTRED HOSPITALS AS ON DATE: 4438
- So far 199 Zonal meetings have been held in an uninterrupted manner.
- Centenary meet held in February 2014 at Mahabalipuram with release of postage stamp to commemorate the 100<sup>th</sup> meeting which was attended by dignitaries like IRDA chief, Health Secretary and Deans of medical Colleges.

**XI. IMPACTS :**

- Approximate number of total bed strength in hospitals with NHB has crossed 100000.
  - Biggest organization of private Hospital in whole of India.
  - Total bed strength more than any small corporate giant.
  - Spread over the whole state from a small village to a metropolis.
- NHB as is the policy of IMA, promises to the state Government to co-operate in all its Health care schemes.
- NHB is a constant invitee for all the meetings of our Health Ministry.

**XI. ACHEIVMENTS :**

- We are regularly invited whenever there is an outbreak of diseases or to implement schemes of the Government like Covid, TB, AIDS or POLIO ERADICATION.
- We are included in vital committees as a respondent – latest is minimum wages committee in which NHB office bearers along with IMA State office bearers have been holding deliberations.

- NHB had meeting with IRDA in Chennai-problems of private Hospitals in insurance covered Health care was discussed.
- Negotiations with GIPSA over package rates were held in Coimbatore- which was partially successful in 2015.
- NHB held negotiation with private health insurer Star Health to empanel all members of NHB- and a formal MOU was signed in 2014.
- NHB along with mother IMA participated in many rounds of talks with state Government for 7 years over Private Clinical establishment act CEA became a doctor friendly act because of our negotiations.
- NHB held Talks with authorities of TNHSP [TN Govt] for comprehensive CMCHS involvement& networking of Hospital to integrate with State's data base; even now it is going on.
- NHB Implements all IMA schemes in its member Hospital –e.g., .....hand washing, blood donation, and Government of India's Clean India Project.
- The collective bed strength of NHB Hospitals Offers you the best avenue to bargain collectively either in purchase of equipments or insurance providers.

#### **FOR YOUR KIND ATTENTION**

- Application Forms for New Enrollment, Renewal & name change for IMA Nursing Home Board can be download from our website [www.imanhb.org](http://www.imanhb.org)
- Our New NHB IMA TNSB Secretariat Address :  
Peace Health Centre,  
48, H/5 South By Pass Road,  
Near New Bus Stand,  
Tirunelveli –627005.  
Office Hours : 9.30 AM to 6.30 PM  
During office hours : 0462 2909889, 7548825544  
Out of Office hours : 8778484015, 9442612138

**Dr. V. VARADARAJAN**

Convener  
98431 91190

**Dr. S. KARTHICK PRABHU**

Chairman  
94432 56147

**Dr. R. ANBURAJAN**

Secretary  
94426 12138

**Dr. R. RENGARAJ**

Finance Secretary  
94432 22509

## IMA COLLEGE OF GENERAL PRACTITIONERS TAMILNADU



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### Dear colleagues, Greeting from IMA CGP,

As we are entering into a new era in our association, we will be getting a lot of new laurels in CGP also. I am happy to introduce our new team of office bearers for the year 2022 – 2023.

### IMA TNSB CGP WING OFFICE BEARERS :

- ❑ CGP Director of Studies : Dr. P. Senguttuvan
- ❑ CGP Faculty Secretary : Dr. D. Senthil Kumar
- ❑ CGP Joint Secretary : Dr. C.P. Shanmugasundaram
- ❑ CGP Joint Secretary : Dr. Rabindranath
- ❑ CGP Representative : Dr. A. Chinnadurai Abdullah
- ❑ CGP Representative : Dr. B. Jeyakumar

- CGP Governing Council Member Regular : Dr. S. Veerapandiyan
- CGP Governing Council Member Alternate : Dr. N. Rajkumar

I thank Dr. R. Anburajan & previous office bearers of the IMA CGP because they have paved the way and definitely with the help of our new team we will bring glory to the wing of IMA TNSB.

### **Our Plans for next two years...**

- To create awareness among all our members regarding CGP and its objectives.
- To increase overall CGP membership at all branch level.
- To form subchapter of CGP wings at branch level (minimum 25 members required to form a subchapter)
- To enroll more members for the CGP courses.
- To create new CGP courses which are more practical after discussion with national headquarters .
- To conduct online CME s more frequently.

I request every member of our IMA to become the member in CGP also by paying Rs.1000. You will be enjoying a lot of benefits and knowledge enrichment which will be useful for your day to day practices.

We have called for CGP courses enrollment and getting good response from our members. We request all our members to share the details in forums.

### **Eligibility Criteria for Registration :**

- 1) Life member of IMA
- 2) Should be a member of College of General Practitioners (Application form can be downloaded from the website, membership fee of Rs:1000/- Should be paid to local branch & forwarded to the state office by local branch secretary)

### **Procedure for Enrollment :**

The course details with short syllabus is published in the TIMA News Letter.

After selecting the course, Kindly fill the course application form and send along with DD to State Office at Tambaram. Kindly Contact State Office CGP wing incharge Mr. Chelladurai. Mobile: 94445 61752 & 7338785360.

## IMA CGP TNSB ONLINE / OFFLINE COURSES

IMA CGP TNSB is conducting the Online / Offline Fellowship Certificate Courses for the members of IMA. Courses will be started through online and will be changed over to contact classes depends upon the pandemic situation. Interested and eligible members can apply. These courses are conducted to empower Practitioners to deliver evidence based medicine to the community, also to acquire more knowledge. This Certificate cannot be registered in the Medical Council nor displayed in the Name Board.

Eligibility : IMA Life Member & IMA CGP Life Member.

Course fee : Rs. 25,000/- ; Duration : 6 Months. All the courses have final exam & Viva.

### ONLINE / OFFLINE COURSES

#### FELLOWSHIP CERTIFICATE IN DIABETOLOGY (FCD)

**Course Coordinator** : Dr. N. Bhavatharini

Sub: General, Lipid, Obesity, Cancer, Hypertension, ECG, Diabetes, Insulin etc.

#### FELLOWSHIP CERTIFICATE IN DIABETIC FOOT CARE (FCDF)

**Course Coordinator** : Dr. A.K. Ravikumar

Sub : Diabetic Foot Care / Prevention / Treatment

#### FELLOWSHIP CERTIFICATE IN RESPIRATORY DISEASE (FCRD)

**Course Coordinator** : Dr. V. Nandgopal

Contact class only at IMA Hall, Coimbatore - Once in a month

Sub : Lung Anatomy, Respiratory Physiology, Respiratory Investigations including Basics of Chest X Ray Interpretation & Spirometry Interpretation, Respiratory Pharmacology, Tuberculosis - Pulmonary & Extra Pulmonary, Asthma & Occupational Lung Diseases, COPD, Pulmonary Hypertension & Cor Pulmonale, Respiratory Infections - Upper and Lower, Respiratory Emergencies, Pleural Diseases, Lung Cancer, Interstitial Lung Diseases, Allergy, Sleep Apnea, Spirometry, Inhalation Device Techniques.

#### FELLOWSHIP CERTIFICATE IN SEXUAL MEDICINE DISEASE (FCSM)

**Course Coordinator** : Dr. D. Narayana Reddy & Dr. M. Balasubramanian

Passed candidates can enrol in Council for Sex Education & Parenthood International (CEEPI) & Practice Sexual Medicine. Sub : Childhood Sexuality, Puberty and Adolescent Sexuality, Sexual Response Cycle- Male & Female, Female Sexual Dysfunction, Sexual Aversion Disorder, Geriatric Sexuality, Evaluation of Sexual Disorders, Sexuality in Special Contingencies etc.

**FELLOWSHIP CERTIFICATE IN PRACTICAL CARDIOLOGY (FCPC)****Course Coordinator** : Prof. Dr. J.S. Bhuvaneshwaran & Prof. Dr. G. Rajendran

Sub : Basics, ECG, Coronary Artery Disease, Congenital &amp; Valvular Heart Disease, Hypertension, Diabetes &amp; other Risk factors, Heart failure.

**FELLOWSHIP CERTIFICATE IN  
REPRODUCTIVE MEDICINE (FCRM)****Course Coordinator** : Dr. Gigi Selvan

Sub : Male Reproductive System, Female Reproductive System, Reproductive Genetics, approach a Sub Fertile Couple, prepare a Couple to Achieve Parenthood, Medical &amp; Surgical Treatments in Male Infertility, Intra Uterine Insemination, ART /IVF / ICSI, Hysteroscopy &amp; Laparoscopy in Female Infertility etc.

**FELLOWSHIP CERTIFICATE IN INFECTIOUS DISEASE  
& INFECTION CONTROL (FCIDIC)****Course Coordinator:** Dr. K. Neminathan

Sub : Introduction to Infectious Diseases, Epidemiology of Emerging &amp; Re-Emerging Infections, Approach to a Case of AFI – Adults / Children, Dengue Diagnosis and Management, Malaria, Filariasis, Scrub Typhus, Leptospirosis &amp; Enteric Fever, Rationale use of Antibiotics including use and misuse / Prescription Audit Principles, Acute Diarrheal Disease Syndrome (Cholera, Diarrhea, Amoebiasis, Giardiasis, Food Poisoning, Worm Infestations etc.), ILI Syndrome, SARI Syndrome with special Focus on COVID-19, Swine Flu, Avian Influenza, SARS, MERS, Measles Mumps and Rubella (MMR) &amp; ARI in Pediatric Age Group, Tuberculosis, Jaundice Syndrome with special focus on Viral Hepatitis, Vaccine Preventable Diseases, Vaccine Preventable Diseases etc.

*For Further details contact :***Dr. P. Senguttuvan**, Director of Studies,  
Cell: 9443223456, E Mail: dr.senguttuvanp@gmail.com**Dr. D. Senthil Kumar**, IMA CGP Faculty Secretary  
Cell: 9047055655, Email: drsenthilrad@gmail.com**Office No. 94445 61752, 73387 85360, 90871 80123.**  
**Whatsapp 94445 61752. email: imatamilnadu@gmail.com****D.D. in favour of 'Indian Medical Association CGP' payable at 'Theni'**  
**Account Name & Number** : Indian Medical Association CGP - 75260100003929  
**Bank Name** : Bank of Baroda      **Branch Name** : Theni Branch  
**IFSC Code** : BARB0THENIX (fifth character is Zero)



## ACADEMY OF MEDICAL SPECIALTIES TAMILNADU STATE BRANCH



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**Dr. Arul Jyothi**  
Joint Secretary, IMA AMS

8586894306  
aruljothiortho@gmail.com

### 1. What is the objective of IMA AMS OBJECT

The Object of IMA Academy of Medical Specialties shall be as given hereunder:

(A) To acknowledge talent, expertise and experience in all specialties, medical and surgical, including basic medical sciences;

(B) To formulate policies and make suggestions and recommendations in the matter of medical educational training, in particular encouraging continuing educational activities;

(C) To promote teaching, training and Continuing Medical Education of its members on an ongoing basis;

(D) To device ways and means to encourage group studies, co-operative activities, research project in both the methodology of educational techniques and field research into

disease/disease complexes, etc.

(E) To compile, educational material, including publication of literature, periodicals, bulletins and books.

### 2. What are the different forms of membership that is available

#### 1. The Academy shall have the following categories of membership:

(a) Life Members: Members of IMA possessing (i) Postgraduate qualification recognised by the Medical Council of India or (ii) any post-graduate qualification awarded by National, foreign Institutions or Academies as approved by the Governing Council of Academy, shall be eligible for enrollment under this category.

(b) Associate Life Members: Members of IMA (i) possessing any post-graduate qualification awarded by a Foreign

Institutions/Academy not recognised by the Medical Council of India; or (ii) Who are actively engaged in a particular recognised speciality for a period of not less than 15 years or more and duly certified by at least two Fellows of the Academy, shall be eligible for enrollment under this category.

(c) Ordinary Members/Ordinary Associate Members: Ordinary Members and Ordinary Associate Members will be those who are eligible for enrollment as Life Members or Associate Life member respectively but pay the membership fee on annual basis as prescribed by the Governing Council from time to time.

(d) Overseas Members: Overseas Members shall be those members who are living outside India and fulfill the eligibility clause for either Life Membership or Associate Life Membership.

(e) Honorary Members: Honorary Members shall be those on whom membership is conferred by the Academy Honoris Causa. The number of such members shall not exceed 10 at any given time.

## 2. What is the membership fees?

(a) Life Membership / Associate Life Membership Fee for those resident in India effective 1st January 1997 will be Rs. 1000.

(b) For Overseas Members (effective from 1-10-1988) - U. S. Dollars 250.

(c) For Ordinary Members/Ordinary Associate Members for those resident in India

- Rs. 100/- per annum (effective from 1.10.1989).

## 3. What are the courses available through IMA AMS

National IMA AMS conducts only Speciality Courses. These courses are not recognised by MCI. These courses are to improve their knowledge and skills in their respective fields the duration of course is one year.

Following is the list of AMS Courses.

1. Infertility
2. Fluorescein Angiography
3. Laser Photocoagulation in Retinal problems
4. Excimer, Laser & Lasik Surgery
5. Phacoemulsification
6. Training in Non-invasive Cardiology
7. Critical Care in Cardiology
8. Advanced Micro-surgery of Ear
9. Functional Sinus Endoscopy
10. Laser in ENT
11. Rhinoplasty
12. Joint Replacement
13. Arthroscopy
14. Spine Surgery
15. Upper GI Endoscopy - a. Basic b. Advanced
16. Laparoscopy - a. Basic b. Advanced
17. Rheumatology
18. Preventive Cardiology (FPC)

All Specialty Courses shall be conducted by State IMA AMS only. Non Speciality Courses shall be conducted by State IMA CGP only.

#### **4. What is the procedure for membership:**

1) The academy Headquarters along shall be competent to confer membership of the Academy.

2) All applications for membership shall be made in triplicate in the membership form prescribed by the Academy headquarters along with the prescribed fees in full and secretary of the State Chapter/Branch.

3) Chapter of through the Convener of the proposed State Chapter/Branch Chapter to be established, as the case may be, who shall forward all applications accomplished by full fees as applicable on the date of application to the Academy Headquarters. No deductions of state chapter's share or Branch Chapter's share of fr shall be made under any circumstances.

4. All applications for enrollment of overseas Members along with the prescribed fees in full, shall be made to Academy headquarters Directly.

#### **5. Please explain the organisation and functions of Branch Chapter's:**

1. A Branch chapter may be established in there are 20 or more Life Members of the Academy in the Branch and shall function under the jurisdiction of the relevant state chapter in accordance with the Rules & Bye-

laws of the Academy.

2. The Branch chapter shall be governed by its elected office-bearers and the Governing Council duly elected by the Membership of the Academy Branch chapter.

3. Each Branch Chapter shall comply with the policies of the Academy as laid down by the Governing Council of the Academy and Board of Management of the State Chapter from time to time and shall restrict it's activities within the local jurisdiction of the Branch unless instructed by the Board of Management of State Chapter for an activity project on a regional basis.

4. The State Chapter/Branch chapter shall frame their respective Bye-laws for the day today administration within the overall framework of the Academy Rules and Bye-laws and which shall be subject to the final approval of the Academy Headquarters.

#### **6. What are the procedure for Fellowship in IMA AMS**

Visit website : [www.ima-ams.org](http://www.ima-ams.org)

#### **1. What are the courses conducted by IMA TNSB AMS?**

IMA TNSB AMS conducts the courses authorised by IMA AMS HQs.,i.e. Fellowship courses of infertility, Laparoscopy & Endoscopy. Necessary certificate have been issued by IMA AMS HQs. The IMA branches want to conduct a y other courses AMS should get accreditation from IMA Accreditation Council, IMA HQs.,New Delhi.

## 2. What is the eligibility to join the courses under IMA AMS?

The candidate must be a IMA life member (fee Rs.13000 for single and Rs.20000 for couple). Must have PG or Diploma.

## 3. Course details:

Duray: 1 year (2 days in a month theory & clinical classes and 80% attendance is much should be given importance). Exam: Theory exam on first day & clinical, log book discussion and general viva on 2nd day examination I. Results will be announced by IMA AMS HQs. Certificate will be issued in convocation graduation day of IMA AMS.

## 4. Course fee:

Course fee Rs.25000/- Share as 40% towards Headquarters share, 40% towards Hospitals or centres share and 20% IMA AMS state Share.

## 5. Are these courses recognised by Medical Council?

No. It's IMA AMS run course to enhance the knowledge of the General Practitioner. Can not be registered in Medical Council. Credit scores can be availed. Can not use this Fellowship as prefix to the name.

## 6. What is the New team proposes to do for the IMA AMS members

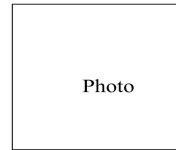
The New team proposes that the skills for the specialist has to be improved and this would add value to the doctor and it proposes to conduct workshops or hands on skills modules on the following...

1. Ultrasound guided regional anaesthesia
2. Maternal and child health
3. Basic ontology
4. Hospital infection control
5. Obstetrics and Gynaecology ultrasound
6. Tropical parasitology
7. Medical genetics
8. Management of gender dysphoria
9. Diabetes latest trends
10. Dermatology updates
11. Community ophthalmology
12. E learning
13. Medical information technology
14. Implantology
15. Pharmacogenomics
16. Music therapy
17. Yoga therapy
18. Accident and emergency
19. Dialysis
20. Critical Care technology
21. Good clinical lab practice
22. Nutrition
23. Health professionals education.

**IMA ACADEMY OF MEDICAL SPECIALITIES HQRS**

(Under the auspices of Indian Medical Association)  
 Headquarters: I.M.A. Building, Esamia Bazar, Hyderabad-500 027.

Tel: 040-24740015; Email: [imaamshyd@gmail.com](mailto:imaamshyd@gmail.com)  
 Fax: 040-24740015; website: [www.ima-ams.org](http://www.ima-ams.org)



**APPLICATION FORM FOR LIFE MEMBERSHIP**

I hereby apply to be elected a Member/Associate Member/Overseas Member/Life Member of I.M.A. Academy of Medical Specialities. My particulars are given below:

I am a member of the Indian Medical Association:

(A) IMA Membership No.....

(B) State .....Branch.....Direct Member.....

(C) Proposed by .....

I have read the Rule & Bye-Laws of the I.M.A. Academy of Medical Specialities and, if elected as a member, I agree to abide by the same.

Place.....

Date.....

**Signature of the applicant**

1. Name in Full (Block Letters).....

2. Date of Birth.....3. Sex.....4. Name of Father/Husband.....

5. Postal Address.....  
 .....  
 .....

6. Land Line No.....Mobile No.....

7. Email ID.....8. Demand Draft No.....

9. Name of the Bank ..... (The Life Membership fee of Rs.1,000/-) DD in the Name of **Indian Medical Association AMS** payable at THENI.

**10. Qualifications:**

	Degree/Diploma	University/Institution	Year Obtained
i.	.....	.....	.....
ii.	.....	.....	.....

Please enclose photo copies of IMA Membership/Degree, Post Graduate & Diploma/Degree/copy of MCI registration

**11. Experience:**

	Designation	Institution	Period: From To
i.	.....	.....	.....
ii.	.....	.....	.....

**12. (a) Membership of Medical Associations:**

- National/International
- 1.....
  - 2.....

**(b) Membership of other Organisations:**

- 1.....
- 2.....

13. Prizes, Medals, Awards etc.

Under-graduate/PG/AfterPGLevel 1.....  
 2.....  
 National or International awards: 1.....  
 2.....

14. Publications:

Title	Name of co-authors if any	Name & Issue of Journals
.....	.....	.....
.....	.....	.....

15. Any other information:

.....  
 .....

Recommended and forwarded to the Honorary Secretary, (IMA Tamilnadu State Hqrs, Doctors Colony, Via — Bhrathi Nagar First Main Road & Jothi Nagar 9<sup>th</sup> Street, Off. Mudichur Road Tambaram West, Chennai - 600 045). To be forwarded to IMA AMS HQRS.

..... Honorary Secretary

..... Branch Chapter

Recommended and forwarded to the Honorary Secretary, I.M.A. Academy of Medical Specialities, I.M.A. Building, Esamia Bazar, Koti, Hyderabad – 500027, Telangana.

..... Honorary State Secretary

..... State Chapter

Date .....

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FOR HEADQUARTERS USE ONLY

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Application received on .....

Category of Membership applied for:

MEMBER / ASSOCIATE MEMBER/ OVERSEAS MEMBER / LIFE MEMBER

Membership approved on.....

Membership No.....

Honorary Secretary  
 I.M.A. Academy of Medical Specialities  
 Head Quarters, Hyderabad

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**Require Documents:** 1. MBBS & PG Diploma Certificates copy, 2. MCI Registration Certificate copy, 3. IMA Life Membership Certificate copy.  
 AMS MEMBERSHIP Rs.1,000/- BY DD IN FAVOUR OF “Indian Medical Association AMS”, PAYABLE AT “Theni”

FILLED FORM IS TO BE SEND TO THE ADDRESS ALONG WITH DD TO:

**DR. N.R.T.R. THIAGARAJAN, HONORARY STATE SECRETARY, IMA TN HQs Building, Doctors Colony, Bharathi Nagar 1<sup>st</sup> main Road, Tambaram West, Chennai 600 045, Cell (Office) 9087180123.  
 Email:imatamilnadu@gmail.com**

## IMA TNSB PARAMEDICAL



**Dr. P. Mannar Mannan**  
*Chairman*  
 IMA Paramedical Wing  
 94432 63342  
 dr.mannarima@gmail.com



**Dr. S. Gowri Shankar**  
*Secretary*  
 IMA Paramedical Wing  
 77085 45554  
 gsdrshankar47@gmail.com



**Dr. K. Thirumavalavan**  
*Joint Secretary*  
 IMA Paramedical Wing  
 9443043452  
 drktvalavan@gmail.com

### PARAMEDICAL COURSES

**AIMS AND OBJECTIVE:**In view of the increasing demand and acute shortage of the trained Nurses and other Allied Health Science professionals in the Hospitals and their important role in the Hospital establishments held by the IMA Members, it is resolved to organize the following Allied Health Sciences by the Indian Medical Association-Tamilnadu State Branch under Paramedical Wing. There is an elected Chairman, Secretary and a Joint Secretary to administer the Paramedical Wing. The certificates issued by the IMA TNSB Paramedical Wing is being accepted by the IMA NHB Hospitals of Tamilnadu, even through the certificates are not approved by the Government or NCI. The candidates will not be able to register in any council or Government job. However, IMA TNSB is trying to affiliate the Paramedical courses with the Nursing Council/Universities..

#### COURSES UNDERTAKEN

Sl.No.	Courses Offered	Duration
1	Diploma in Health Assistant	1 year
2	Diploma in OT Technician	1 year
3	Diploma in Ophthalmic Assistant	1 year
4	Diploma in Lab Technician	1 year
5	Diploma in Diagnostic Technician	1 year
6	Diploma in Dialysis Technician	1 year
7	Diploma in Radiology Technician	1 year
8	Advanced Health Assistant	3 Years

**1. ELIGIBILITY TO CONDUCT PARAMEDICAL COURSES UNDER IMA TNSB:**IMA Member, Hospital must be registered in NHB, Min 15 bedded Hospital, Qualified faculties, Class room etc.

**2. APPROVAL TO CONDUCT PARAMEDICAL COURSES:**Inspection/MOU/

Accreditation Certificate. No course is allowed to conduct without proper approval/ Accreditation Certificate from IMA TNSB.

### 3. FEE STRUCTURE:

**Apply for new course/Renewal fee for a course - Rs. 3000**

(valid for three years)

**One time fee-One year course - Rs. 5000**

**One time fee-Three Year course- Rs. 10000**

(One time payment is collected again, if the training is discontinued)

**Admission fee (incl. Text book, records, I card) - Rs. 1000**

**Exam fee (per subject) - Rs. 200**

**4. DD in favour of: IMA Paramedical Course, payable at Theni**

**In case of online payment: Account details as follows.**

Account name: IMA Paramedical Course/  
Account No: 75260100004698/ IFSC Code: BARB0THENIX Branch: Bank of Baroda, Theni. (online payments are to be intimated to IMA TNSB through email or whatsapp-9444561752)

**5. Academic period - August to June**

**6. Admission**

**- July to October with normal fee of Rs. 1000 per student**

**- Nov to Dec with late fee of Rs. 1500 per student**

**7. Qualification of the student:** X pass for one year course/XII Pass for three-year course/ Male Candidates are not allowed in DHA/AHA.

**8. Application should contain:** Application form (Name with Initial, DOB are as per the X mark sheet) filled by the student, signed by the Inst. authorities and duly stamped, Declaration form in Tamil (Students and the parents must be briefed that the courses

conducted by IMA TNSB are not recognised by Nursing Council or Govt.), photo of High resolution is to be pasted (do not pin or staple the photo or sign over the photo) no additional photo is required), X pass mark sheet copy. (No other document is required at IMA TNSB).

**9. No cancellation of admission/ substitution of student is allowed.**

**10. Study material:** Text book, Record book, Log book & I Card.

**11. Periodical exam/Mid term exam:** Jan, Mar & May (The registration number issued by IMA TNSB is the Hall ticket Number)

**12. Final Exam: June**

Exams are held in a common exam centre with external invigilators.

Institutions are to nominate their staff for the invigilation duty to out stations. TA DA will be provided as per IMA TNSB Norms.

Result/Convocation held subsequently.

**13. Certificate issued by IMA. Not approved by Nursing Council/Govt.**

**14. Paramedical wing office bearers:**

Dr. P.MannarMannan, Chairman. Cell: 9443263342

Dr. S. Gowri Shankar, Secretary. Cell: 7708545554

Dr. K. Thirumavalavan, Joint Secretary. Cell: 9443043452

**15. Address for correspondence:**

**Dr. N.R.T.R. Thiagarajan**

Hony. State Secretary,

IMA TNSB HQs. Building, Doctors

Colony,Bharathi Nagar 1<sup>st</sup> Main Road, Tambaram

West,Chennai-600 045. Email:

imatamilnadu@gmail.com. Cell: 9087180123

**16. Contact person IMA TNSB Paramedical Wing:** Y. Chellathurai, Paramedical Course in-charge, Cell: 9444561752 7338785360 WhatsApp: 9444561752



**INDIAN MEDICAL ASSOCIATION  
TAMILANDU STATE BRANCH**



**PARAMEDICAL WING**

(Forms to Apply for Dip. in Health Assistant -DHA/ Dip. in O.T. Technician-DOT / Dip. In Ophthalmic Assistant -DOA/ Dip. in Lab technician-DLT / Dip. in Diagnostic Technician-D DiagT/ Dip. in Radiology Technician-DRT/ Dip. in Dialysis Technician-DDT/ Advanced Health Assistance (AHA)-3 Years)

**APPLICATION FORM – PARAMEDICAL COURSES**

1. Name of the Course :
2. Name & Address of the Hospital /Institution :
  
3. Office Telephone :
4. E mail :
5. Mobile No. :
6. IMA NHB Number & Branch :
7. Chairman/Head of the Institution :
8. IMA Life Membership Number :
9. Managing Director /Administrator/Principal :
10. IMA Life Membership Number/Branch :
11. Whether proprietorship /Pvt. Ltd./Public Ltd. / Any Other :
12. Address of the functioning Centre :
  
13. Office Telephone :
14. E mail :
15. Address of the Administrative Centre :
  
16. Office Telephone :
17. E Mail :
18. Number of Beds :
19. Census in the past 3 years

:

Year	OP	IP	Labour

20. Laboratory Facilities:- Clinical pathology: Y / N                      Biochemical : Y / N                      Blood Bank : Y / N

21. Equipment Availability:

No. of Microscope:..... Auto Analyser: Y / N      Semi Auto Analysers : Y / N      Flame Photometer : Y / N,      Elisa Reader : Y / N      Cell Counter : Y / N      ABG Machine : Y / N  
Any other .....

22. Operation Theatre :

No. of O.T. Major.....Minor.....Labour.....Septic.....No. of Boyles  
..... Autoclave.....C-arm.....Laparoscope.....Any other.....  
Surgeries performed in last 3 years.....  
.....

If above facilities are not available provide a copy of memorandum of understanding with tie –up centre / unit with their facilities.

23. Mode of Payment ( Demand Draft in favour of “**IMA PARAMEDICAL COURSE**” payable at **THENI**)

Rs.....Demand Draft No .....dated.....  
Bank.....

I promise to abide by the rules and regulation of IMA TNSB to be passed as and when necessary by paramedical Wing for administration and by College of General Practitioners for Education & Training purpose.

All the information provided are the best of my knowledge.

**Date:**

**Seal : Hospital / Institution**

**Signature**

**Note:** Filled form to sent to Dr. N.R.T.R.Thiagarajan, Hony. State Secretary-IMA TNSB, IMA Tamilnadu HQs. Building, Doctors Colony, Via: Bharathi Nagar 1<sup>st</sup> Main Road, Off Mudichur Road, West Tambaram, Chennai-600 045.

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## INDIAN MEDICAL ASSOCIATION TNSB WOMEN DOCTORS WING



**Dr. SANTHA NARAYANAN**  
**Chairman**  
**Cell: 98401 32770**  
**drsantha1953@gmail.com**



**Dr. GNANAMEENAKSHI**  
**Secretary**  
**Cell: 94433 42141**  
**gnameenakshi@gmai.com**

### INSTALLATION

Women Doctors Wing, IMA TNSB -2022 was installed on 12.12.2021 in CIMACON TIMACON -2022 in Coimbatore

#### Chairman:

Dr. SHANTHA NARAYANAN

#### Secretary:

Dr. T. GNANAMEENAKSHI ARUNAN

### RESPONSIBILITIES OF WOMEN DOCTORS WING, TNSB

At a time when lot of focus is on strengthening Women, The Women Doctors Wing will help them in raising their voice. Maintaining the honor and dignity of the women

The WDW will Diligently work for the welfare of women doctors involving the local state & National authorities

Also WDW will foster friendship & unity to bring all Women Doctors together for the

overall welfare and strength of the Indian Medical Association .

### AGENDA

1. Creating new Women Doctors Wing in all branches.
2. Motivating the already existing WDW to take part Enthusiastically in all WDW activities.
3. Conducting seminars, webinars, workshops, etc for women and Girl child health to spread awareness of female health issues, saving the Girl child and promoting sexual safety in young women health, work life balance and leadership.
4. Celebrating all national days in all wings uniformly.
5. WDW will involve women Doctors in all the multi-farious activities of Indian Medical Association and ensure their active participation, thus supporting the IMA at branch level including sports, Fine arts etc.

6. To continue the SWAYAM- the national WDW Project in which we screen and create awareness on cancer breast & cancer cervix.
7. To continue Mission Pink Health- deduction of anemia in adolescent girl and addressing other adolescents issues. Under the guidance of President TNSB Dr. R. Palanisamy sir we want to start a sub committee for Mission Pink Health under WDW TNSB , to strengthen MPH activities and bring to the notice of National MPH Committee. The same will be submitted in the State Council Meeting for the approval.
8. To launch a program which is getting shape in the fourth coming state level WDW Celebration on 13.3.2022 at Tiruppur to be done our WDW for next 2 years.
9. To participate in the National Level competitions and show our talents.
10. To conduct Zonal level Delightful and refreshing meetings and competitions.
11. To start EVES club wherein the Non-medical spouses will be there doing various activities.

### **WDW TNSB JANUARY MONTH ACTIVITIES**

#### ***THE FOLLOWING BRANCHES PARTICIPATED***

1. HOSUR-IMA
2. NAMAKKAL-IMA

3. ERODE-IMA
4. COIMBATORE-IMA
5. ATTUR-IMA
6. TRICHY-IMA
7. CHENNAI SOUTH-IMA
8. THIRUPUR-IMA
9. PERAMBALUR-IMA
10. AMBATHUR AVADI-IMA

### **ACTIVITIES**

- **FOLIC ACID AWARENESS DAY**
- **NATIONAL YOUTH DAY**
- **PONGAL CELEBRATION DAY**
- **NATIONAL GIRL CHILD DAY**
- **LEPROSY AWARENESS DAY**
- **REPUBLIC DAY CELEBRATION**

### **FEBRUARY MONTH ACTIVITIES**

1. WORLD CANCER DAY
2. SEXUAL & REPRODUCTIVE HEALTH DAY
3. VALENTINES DAY
4. THAIMAI PROGRAMME
5. SWAYAM PROGRAMME
6. MISSION PINK HEALTH
7. NEW WDW INSTALLATION IN KRISHNAGIRI
8. WOMEN'S DAY CELEBRATION IN NAMAKKAL IMA.

## PROFESSIONAL PROTECTION LINKED SOCIAL SECURITY SCHEME OF IMA TAMIL NADU

**Dr. P. Manivannan**, MBBS .,D.Ortho ., Hony. Secretary PPLSSS of IMA TNSB.  
Sri Sugam Hospital (1<sup>st</sup> Floor) ,149 E1, Bazaar street, Omalur (po & tk)  
Salem (District) – 636 455. **OFFICE: 04290 290455, 9487272627**  
Cell: 8248394717 / 9443221025 Website : www.pplsss.com  
e.mail : secretarypplsss@gmail.com , drpmanivannan2015@gmail.com



**Dr. D. CHANDRASEKARAN**  
PPLSSS CHAIRMAN  
94433 89296  
drdcsekar@gmail.com



**Dr. K. THANGAMUTHU**  
PPLSSS LEGAL COMMITTEE CHAIRMAN  
CELL: 94431 51164  
thangamuthu43@yahoo.com



**Dr. P. MANIVANNAN**  
PPLSSS SECRETARY  
8248394717/9443221025  
drpmanivannan2015@gmail.com



**Dr. N. RAJESH**  
PPLSSS TREASURER  
94441 08711  
drnraj73@yahoo.com

Professional Protection Linked Social Security Scheme (PPLSSS) of IMA Tamil Nadu was inaugurated on April 26<sup>TH</sup> 1998 by Dr.A.S.Azeem, Dr.M.Balasubramanian, Dr.(Capt) G.Raghavelu and Dr.T.N.Ravisankar as a Trust, It was a bold step taken by them for the benefit of the members of IMA Tamil Nadu State Branch, now present PPLSSS is managed by Dr.K.Prakasam – Trust Board Chairman, Dr. Thiraviamohan – Trust Board Secretary , Dr. G. Raghavelu – Founder Trustee & Ex officio members, Office Bearers of PPLSSS and State IMA.

All Life Members of IMA Tamil Nadu State Branch could be the members of the scheme . This is by renewal basis.

In September 2001, Family Benefit Scheme and Hospital Protection Scheme were started. PPLSSS Office Bearers will run these two schemes also.

### Purpose of PPLSSS

From consultation chamber doctor may be dragged to the court, even for no fault of him. Commercialization has paved the way to consumerism. Insufficient communication has led to our own perils. Even experts have experienced trails.

If a Doctor receives a Lawyer notice, it will certainly wipe out all this self-respect and self-esteem and will result in discouragement, depression and despair. He will be eagerly looking for a support. To ask for help and to accept help is not demeaning. So asking for help is a right and

therefore produces no disgrace and is no affront to dignity. PPLSSS Scheme is for the Doctors, of the Doctors and by the Doctors. Early enrolment in PPLSSS rescues Doctors during crisis.

**Procedure:**

We request our members to note that when any one receives a notice from Lawyer / Consumer Council, please immediately reply that you deny all allegations and the detailed reply would be sent within 30 days. Then please send the copy of notice, case sheet and your points regarding your subject to the Legal Committee Chairman and send one copy to the PPLSSS Secretary.

It is mandatory that the member must send a typed copy of the case sheet to the Legal Committee Chairman enabling him to start preparing the reply for the notice. There is no outside settlement as per PPLSSS rules.

The members can engage the PPLSSS recognised Lawyers in that District or you can engage your Lawyer after informing the District Coordinator. The District Coordinator will consult the PPLSSS Legal Office and Secretary Office and then give consent to engage your lawyer to appear for the case in your District.

After the District Forum Judgement, if the case is lost and there is any amount to be deposited, the member will deposit the amount in the court as per the Judgement. The PPLSSS will pay the Lawyers fees. The case will be appealed in the State Forum. There are 2 PPLSSS lawyers for the State Forum. They will take up the case and proceed.

The deposit paid by the member in the District Court will be reimbursed by the PPLSSS after the case is over in the State Forum and the Judgement is received from the State Forum.

Depending on the State Forum Judgement, it will be decided whether to appeal to the National Forum or not by the PPLSSS.

When a complaint is given in a police station, the Sub Inspector / Inspector will call up for enquiry. In this situation we must inform the branch president and secretary and then go and explain to them and come. After returning from the police station, the branch President and Secretary must be informed. The District Coordinator may be informed before going to the police station.

All our members GPS/Non-Surgical Specialities / Surgical Specialities and Anaesthetists can utilize these facilities.

**PROFESSIONAL PROTECTION LINKED  
SOCIAL SECURITY SCHEME OF IMA TAMILNADU**

Helps you to counter C.P.A - Makes you to shed your defensive practice - Best defense in the offensive society - Coverage from the day of enrolment - Guidance & Safe guarding from day one of receiving notice - Compensation upto Rs.10 Lakhs /20 Lakhs during the period of 5 years.

<b>PPLSSS NEW MEMBERS SUBSCRIPTION (Block of Five Years) + 18% GST</b>						
<b>CATEGORY</b>	<b>COMPENSATION 10 LAKHS</b>			<b>COMPENSATION 20 LAKHS</b>		
	<b>Subscription Amount (Rs.)</b>	<b>GST 18% (Rs.)</b>	<b>Total (Rs.)</b>	<b>Subscription Amount (Rs.)</b>	<b>GST 18% (Rs.)</b>	<b>Total (Rs.)</b>
GENERAL PRACTITIONER	7000	1260	8260	13000	2340	15340
NON-SURGICAL	8000	1440	9440	15000	2700	17700
SURGICAL ANAESTHETIST	9000	1620	10620	27000	3060	20060
<b>NOTE : APPLICATION &amp; ONLY DEMAND DRAFT SHOULD BE TAKEN IN THE NAME OF "PPLSSS OF IMA TN "</b>						
<b>PAYABLE AT OMALUR or SALEM</b>						

### **IMPORTANT BYLAWS OF PPLSSSSSCHEME OF IMATAMILNADU**

1. The activities of the Trust shall be confined to the State of Tamilnadu only.
2. **"Block of 5 years"** shall mean and include any Registered Medical Practitioners who is a life member of Indian Medical Association, Tamilnadu State Branch and has also enrolled himself/ herself as a member of this Trust and has paid the subscription as per the byelaws and rules and regulations of the Trust.
3. "Compensation" means compensation payable to the member by the Trust.
4. "Cost of Litigation" shall mean and include the compensation awarded against any member by any competent authority and legal fees incurred in connection with the litigation thereto.
5. Only life member of the Indian Medical Association, Tamilnadu State Branch are eligible to become of this Scheme.
6. PPLSS Scheme will not enroll Dental Surgeons in the scheme.
7. The scheme will protect individual members whether in private practice or employee in the services of the Government of Private Institutions, or performs as consultant.
8. The scheme will not give protection to the institutions or the Management of the Hospital for its lapses even if a member of the scheme heads such management. Cases against the individual members for their alleged professional lapses along will taken up by the scheme
9. The membership fees once paid shall not be refunded.
10. A general Practitioner member who performs surgical procedures shall be classified as a surgical specialist.
11. The membership shall commence from the date & Hour of receipt of D.D / Cash or date of cheque realized at the principle office of the scheme.
12. To cover any incident that occur during Professional duty, the concerned member must be a member of PPLSS before the date of admission of the patient in the hospital /clinic/place of practice.
13. The scheme will fight out civil and criminal cases concerned with medical profession upto the level decided by the management committee. Litigations arising out of other actions of the members will not be dealt with by this scheme.
14. The concerned member shall inform the Hon. Secretary and the district Co-ordinators of

the scheme within 10 days of the occurrence of the incident.

15. All cases referred for action must be routed through the district coordinators and also copy sent directly to the principal office to avoid any delay.
16. The concerned member shall obey any instruction given by the management of the Scheme regarding the case.
17. In any case the Scheme should not be made a party in the case because the Scheme is not a Insurance Company.
18. A member of the Scheme, if called upon by the Police or by the court to give evidence, he/ she should have prior consultation with the Chairman, Hon. Secretary or the District representative.
19. The death compensation given from Social Security for the members shall henceforth be increased from Rs.20,000 to Rs.30,000/- for members Who are more than 3 years Rs.50,000/, and less than 3 years Rs.30,000/.

### **HOSPITAL PROTECTION SCHEME OF PPLSSS OF IMA TAMILNADU**

The scheme will take up notices / cases against the hospital enrolled and pay the compensation awarded against hospital but not against the individual doctors. The hospital are requested to ensure that all the consultants and duty doctors are enrolled as members of PPLSSS Scheme so that entire notice / case can be taken and fought collectively. The Hospital should be members of IMA Nursing Home Board.

<b>HPS NEW MEMBERS SUBSCRIPTION (Block of Three Years) + 18% GST</b>						
<b>CATEGORY</b>	<b>COMPENSATION 10 LAKHS</b>			<b>COMPENSATION 20 LAKHS</b>		
	<b>Subscription Amount (Rs.)</b>	<b>GST 18% (Rs.)</b>	<b>Total (Rs.)</b>	<b>Subscription Amount (Rs.)</b>	<b>GST 18% (Rs.)</b>	<b>Total (Rs.)</b>
PRIMARY LEVEL	5000	900	5900	9000	1620	10620
SECONDARY LEVEL Any One facilities (ICU / Theatre / Labour Room, X-Ray, Scan, Lab)						
Any one Facility	7000	1260	8260	14000	2520	16520
Any two Facility	10000	1800	11800	20000	3600	23600
Any three Facility and More	16000	2880	18880	32000	5760	37760
50 beds and more with all facilities – TERTIARY LEVEL				55000	9900	64900
<b>NOTE : APPLICATION &amp; ONLY DEMAND DRAFT SHOULD BE TAKEN IN THE NAME OF "HPS OF PPLSSS OF IMA TN " PAYABLE AT OMALUR or SALEM</b>						

### **IMPORTANT BY LAWS OF HOSPITAL PROTECTION SCHEME OF PPLSSS OF IMA TAMILNADU**

1. The activities of the Trust shall be confined to the State of Tamilnadu only.
2. Only members of the Nursing home Board of Indian Medical Association, Tamilnadu State Branch are eligible to become the members of this scheme.
3. Only an individual member can be admitted to this scheme and no Medical Practitioner can be member of this Trust.
4. This scheme will not enroll Dental Hospitals in the Scheme.

5. The Scheme will protect individual Hospital rendering services at the place mentioned in the application form. Hospitals having any branches else where have to enroll separately. In case of shifting of hospital the scheme has to informed prior or at the time of shifting.
6. The scheme will not give protection to the individual doctors of for their lapses even if a doctor heads such management.
7. The member hospitals are classified as under and the Annual subscription payable by each category is as noted against each: the subscription shall be annual and according to the facility.
8. The membership Fees may be revised at any time by the Management committee subject to approval of the members at a General Body Meeting.
9. The Membership fees once paid shall not be refunded.
10. Subscription shall be paid by Account Payee Demand Draft drawn on any National or Scheduled bank. Cash will be accepted only at the Principle office of the scheme.
11. The membership shall commence from the date & Hour of receipt of D.D/Cash or date of cheque realized at the Principle office of the scheme.
12. To cover any incident that occurs during Professional duty, the concerned member hospital must be member of Hospital Protection Scheme of PPLSSS of IMA TN before the date of admission of the patient in the hospital.
13. The renewal of membership of any member, who has been penalized by any competent authority, shall be at be the sole discretion of the Management Committee.
14. The concerned member hospital shall inform the Hon. Secretary and the District coordinators of the Scheme within 10 days of the occurrence of the incident.
15. The concerned member hospital shall obey any instruction given by the management of the Scheme regarding the case. In any case the Scheme should not be made a party in the case because the Scheme is not a Insurance Company.
16. Any member hospital who makes the Scheme a party in its case, shall cease to enjoy the benefits from this scheme.

### **FAMILY BENEFIT SCHEME OF PPLSSS OF IMA TAMILNADU**

Scheme shall reimburse Rs. 1,20,000/- for the Hospitalization expenses incurred in that year for the member, spouse or children below 21 years and not exceeding Rs.60000/- per Hospitalization for the members or their nominees. The member has to inform the scheme office about the hospital of his / her choice for elective surgery before admission. Members has to inform the scheme office within 24 hours of admission in emergency cases. Claim must be made within 30 days after the discharge. Eligible to claim reimbursement for treatment had within Tamilnadu. The interval between one claim to another is 6 months. **N.B.** Renewal of subscription without break is essential.

<b>FBS NEW MEMBERS SUBSCRIPTION (Block of One Years) + 18% GST</b>			
AGE	Subscription Amount (Rs.)	GST 18% (Rs.)	Total (Rs.)
UP TO 45 YEARS	3500	630	4130
46 – 50 YEARS	4500	810	5310
56 – 60 YEARS	5500	990	6490

### **IMPORTANT BY LAWS OF FAMILY BENEFIT SCHEME OF PPLSSS OF IMA TAMILNADU**

1. The activities of the Trust shall be confined to the State of Tamilnadu.
2. Only life members of the Indian Medical Association, Tamilnadu State Branch are eligible to become the members of this Scheme.
3. The Scheme Covers reimbursement of Hospitalization Expenses for illness/ diseases or injury sustained to the member, spouse or children below 21 years.
4. Scheme shall reimburse **Rs.1 .2Lakh** for the Hospitalization expenses incurred in that year for the member, spouse or children below 21 years and not exceeding Rs.60,000 per Hospitalization for the members or their nominees.  
(N.B.Renewal of Subscription without break is essential)
5. The Scheme shall not be liable to make any payment,
  - a) Any hospitalization expenses incurred in the first 180 days from the

date of joining.

b) Cost of spectacles and contact lenses, hearing aids.

c) Dental treatment or Surgery of any kind unless requiring hospitalization.

d) Charges incurred at Hospital or Nursing Home primarily for diagnostic, x-ray or laboratory examination.

6. No new entry into FBS – after the age of 60 years.

### **NOTICE OF CLAIM**

- ▶ Preliminary notice of claim with particulars should be given to the scheme within seven days from the date of hospitalization/ injury/ death.
- ▶ Final claim along with hospital receipts bills/cash memos, claim form and documents as listed in the claim form should be submitted to the trust within 30 days of discharge from the Hospital.
- ▶ The Window period between two claims in six months.

**PPLSSS – HPS – FBS duly filled in application with subscription to be forwarded by IMA Branch Secretary.**

***Payment Mode: DD only Accepted. DD should be sent to the following address:***

**Dr. P. MANIVANNAN, MBBS.,D.Ortho., Hony.Secretary, PPLSSS of IMA TN.**

Sri Sugam Hospital (First Floor), 149 E1, Bazaar Street,

Omalar (PO & TK), Salem District - 636 455.

**Office: 04290 290455, 94872 72627 Cell: 8248394717 / 94432 21025**

**e.mail : secretarypplsss@gmail.com, drpmanivannan2015@gmail.com**



**PROFESSIONAL PROTECTION LINKED  
SOCIAL SECURITY SCHEME  
OF IMA TAMILNADU  
NEW MEMBERSHIP APPLICATION FORM**



1. Name (in Capital Letters) : Dr. \_\_\_\_\_

2. Date of Birth : \_\_\_\_\_ Age: \_\_\_\_\_ Sex: Male/Female

3. Father's / Husband's Name : \_\_\_\_\_

4. Address : \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ Pin code: \_\_\_\_\_

5. Telephone No. : Resi: \_\_\_\_\_ Hosp : \_\_\_\_\_ STD Code: \_\_\_\_\_  
 Mobile No. \_\_\_\_\_ WhatsApp No. \_\_\_\_\_  
 E-Mail: \_\_\_\_\_

6. Qualification	Name of the University	Year of Passing
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. Registration No. : \_\_\_\_\_ Year of Registration \_\_\_\_\_  
 Name of the Medical Council : \_\_\_\_\_

8. Present Place of Practice : \_\_\_\_\_

9. IMA Life Membership No : \_\_\_\_\_

10. Name of the Local Branch : \_\_\_\_\_

11. Category Applied : GP / Non Surgical Specialist / Surgical & Anesthetist

12. Are you insured under indemnity Scheme : Yes / No  
 If Yes, Name of Insurance Company : \_\_\_\_\_  
 Place: \_\_\_\_\_ Policy No. \_\_\_\_\_ Date of Expiry: \_\_\_\_\_

13. Name of the Family Members	Age	Sex	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

14. Nominee Name	Age	Sex	Relationship
_____	_____	_____	_____

## 15. Payment Details :

DD No. \_\_\_\_\_ Bank \_\_\_\_\_ Branch \_\_\_\_\_

Amount \_\_\_\_\_ Date of Issue \_\_\_\_\_

## Payment options DD

DD should be taken in the name of "PPLSSS OF IMA TN" Payable at Omalur or Salem

Send the filled up application along with payment information to  
**Dr. P. Manivannan, M.B.B.S, D.ORTHO.,** Hony.Secretary, PPLSSS of IMA TNSB.  
 Sri Sugam Hospital (1st Floor), 149- E1,Bazaar Street, Omalur (PO), (TK), Salem - 636 455.  
 Mob:9487272627, Ph:04290-290455

Dispatch Details : Date \_\_\_\_\_ Courier/Registered Post/ in person

Date of commencement of membership will be from the date of receipt of DD at the principal office.

## DECLARATION

I, \_\_\_\_\_ a Life Member of \_\_\_\_\_ Branch  
 of IMA, do hereby, declare that the details furnished above are true and correct and that I will abide by  
 the Rules and Regulations of Professional Protection Linked Social Security Scheme of IMA Tamilnadu as  
 amended on 01.3.1998.

I hereby authorize PPLSSS office to send Membership alerts via SMS and e-mail.

Date:

Signature

## Not For Renewal Members

Forwarded: \_\_\_\_\_

Designation: \_\_\_\_\_

(To be forwarded by the local branch President/Secretary/PPLSSS District Co-ordinator)

Signature: \_\_\_\_\_

## (FOR OFFICE USE ONLY)

Date of Receipt :

Mode of Receipt : Courier/Reg.Post/in person (Time: a.m/p.m)

Application Form : Complete/ Incomplete Remarks:

D.D. Realised on :

Date of Commencement of Membership :

Date of Despatch of PPLSSS Receipt to the member :

Date of Despatch of PPLSSS Certificate to the member :

PPLSSS Membership No:



## HOSPITAL PROTECTION SCHEME OF PPLSSS OF IMA TAMILNADU



### NEW MEMBERSHIP APPLICATION FORM

1. Name of Hospital (in Capital Letters) : \_\_\_\_\_
2. Date of Establishment : \_\_\_\_\_
3. Address : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Pin code: \_\_\_\_\_
- Telephone Nos. : \_\_\_\_\_ STD Code: \_\_\_\_\_
- E-mail : \_\_\_\_\_ Fax No : \_\_\_\_\_
- Mobile No. \_\_\_\_\_ WhatsApp No. \_\_\_\_\_
4. IMA NHB No. : \_\_\_\_\_
5. Year of Enrolment : \_\_\_\_\_
6. Owner's / Managing Directors Name : \_\_\_\_\_
7. IMA Local Branch Name : \_\_\_\_\_
8. IMA Life Membership No : \_\_\_\_\_
9. IMA PPLSSS No. : \_\_\_\_\_  
Name of the Medical Council : \_\_\_\_\_
10. Category Applied : Primary Level / Secondary Level / Tertiary Level
11. Are you insured under indemnity Scheme : Yes / No  
If Yes, Name of the Insurance Company : \_\_\_\_\_  
Place: \_\_\_\_\_ Policy No: \_\_\_\_\_ Date of Expiry: \_\_\_\_\_

#### FACILITIES AVAILABLE

12. Total No. of Beds : \_\_\_\_\_ General Wards : \_\_\_\_\_ Rooms : \_\_\_\_\_
13. ICU : Yes / No ICCU : Yes / No IMCU : Yes / No
14. O.T. : Yes / No if Yes No. of O.T : \_\_\_\_\_
15. Labour Room : Yes / No Laboratory : Yes / No X-Ray : Yes / No
16. Ultra Sound : Yes / No Physiotherapy : Yes / No

#### STAFF PATTERN

17. No. of Consultants : \_\_\_\_\_
18. No. of Duty Doctors : \_\_\_\_\_
19. No. of Staff Nurses : \_\_\_\_\_ Qualified : \_\_\_\_\_ Trained : \_\_\_\_\_
20. No. of Technicians : \_\_\_\_\_ Qualified : \_\_\_\_\_ Trained : \_\_\_\_\_

## 21. Payment Details :

DD No. \_\_\_\_\_ Bank \_\_\_\_\_ Branch \_\_\_\_\_  
 Amount \_\_\_\_\_ Date of Issue \_\_\_\_\_

## Payment options DD

DD should be taken in the name of "HPS of PPLSSS of IMA TN" Payable at **Omalur or Salem**

Send the filled up application along with payment information to  
**Dr. P. Manivannan, M.B.B.S, D.ORTHO.**, Hony.Secretary, PPLSSS of IMA TNSB.  
 Sri Sugam Hospital (1st Floor), 149- E1,Bazaar Street, Omalur (PO), (TK), Salem - 636 455.  
 Mob:9487272627, Ph:04290-290455

Despatch Details : Date \_\_\_\_\_ Courier/Registered Post/ in person

Date of commencement of membership will be from the date of receipt of DD at the principal office.

**DECLARATION**

I, \_\_\_\_\_ a Life Member of \_\_\_\_\_ Branch  
 of IMA, do hereby, declare that the details furnished above are true and correct and that I will abide by  
 the Rules and Regulations of Professional Protection Linked Social Security Scheme of IMA Tamilnadu as  
 amended on 01.3.1998.

**I hereby authorize PPLSSS office to send Membership alerts via SMS and e-mail.**

Date:

Signature

**Not For Renewal Members**

Forwarded: \_\_\_\_\_

Designation: \_\_\_\_\_

(To be forwarded by the local branch President/Secretary/PPLSSS District Co-ordinator)

Signature: \_\_\_\_\_

**(FOR OFFICE USE ONLY)**

Date of Receipt :

Mode of Receipt : Courier/ Reg.Post /in person (Time: a.m/p.m)

Application Form : Complete/ Incomplete Remarks:

D.D. Realised on :

Date of Commencement of Membership :

Date of Despatch of Receipt to the Hospital/Nursing Home :

Date of Despatch of Certificate to the Hospital/Nursing Home :

HPS Membership No :

VRenewal Due on :

Letter of reminder sent on :

Renewal Fee received on :



## 15. Payment Details :

DD No. \_\_\_\_\_ Bank \_\_\_\_\_ Branch \_\_\_\_\_  
 Amount \_\_\_\_\_ Date of Issue \_\_\_\_\_

## Payment options DD

DD should be taken in the name of "FBS of PPLSSS of IMA TN" Payable at **Omalur or Salem**

Send the filled up application along with payment information to  
**Dr. P. Manivannan, M.B.B.S, D.ORTHO.,** Hony.Secretary, PPLSSS of IMA TNSB.  
 Sri Sugam Hospital (1st Floor), 149- E1,Bazaar Street, Omalur (PO), (TK), Salem - 636 455.  
 Mob:9487272627, Ph:04290-290455

Despatch Details : Date \_\_\_\_\_ Courier/Registered Post/ in person

Date of commencement of membership will be from the date of receipt of DD at the principal office.

**DECLARATION**

I, \_\_\_\_\_ a Life Member of \_\_\_\_\_ Branch  
 of IMA, do hereby, declare that the details furnished above are true and correct and that I will abide by  
 the Rules and Regulations of Professional Protection Linked Social Security Scheme of IMA Tamilnadu as  
 amended on 01.3.1998.

**I hereby authorize PPLSSS office to send Membership alerts via SMS and e-mail.**

Date: \_\_\_\_\_

Signature \_\_\_\_\_

**Not For Renewal Members**

Forwarded: \_\_\_\_\_

Designation: \_\_\_\_\_

(To be forwarded by the local branch President/Secretary/PPLSSS District Co-ordinator)

Signature: \_\_\_\_\_

**(FOR OFFICE USE ONLY)**

Date of Receipt :

Mode of Receipt : Courier/ Reg.Post /in person (Time: a.m/p.m)

Application Form : Complete/ Incomplete Remarks:

D.D. Realised on :

Date of Commencement of Membership :

Date of Despatch of Receipt to the member :

Date of Despatch of Certificate to the member :

FBS Membership No :

Renewal Due on :

Letter of reminder sent on :

Renewal Fee received on :



## FAMILY SECURITY SCHEME OF IMA TNSB



**Dr. B. VENKATESAN** M.S.(Ortho), D.Ortho  
*FSS CHAIRMAN*  
VENKATESH ORTHO & TRAUMA CARE CENTRE  
31-A, Narasimachari Road, Dharmapuri-636701.



**Dr. D. SOLOMON JEYA**  
*FSS SECRETARY*  
Cell: 94435 80315  
solomonjeya@gmail.com



**Dr. S.K. ANOOP**  
*FSS TREASURER*  
Cell: 98942 21205  
drskanoop@gmail.com

### INDIAN MEDICAL ASSOCIATION FAMILY SECURITY SCHEME OFFICE BEARERS

#### EX-OFFICIO MEMBERS:

1.	State President, IMA – TNSB	Dr. R. PALANISWAMY	98940 19000
2.	Imm Past State President, IMA - TNSB	Dr. P. RAMAKRISHNAN	98424 91919
3.	State President Elect 2022	Dr. T. SENTHAMIL PARI	94444 08237
4.	State President Elect 2023	Dr. K.M. ABULHASAN	98430 25300
5.	Hony State Secretary, IMA - TNSB	Dr. N.R.T.R. THIAGARAJAN	98944 47717
6.	Hony State Finance Secretary, IMA -TNSB	Dr. V.N. ALAGAVENKATESAN	97877 28505
7.	Imm.Past State Secretary	Dr. A.K. RAVIKUMAR	98422 22404
8.	Imm.Past.State Finance Secretary	Dr. N.R.T.R. THIAGARAJAN	98944 47717
9.	Imm. Past FSS Chairman	Dr. C. THANGAMUTHU	94430 22328
10.	Imm. Past FSS Secretary	Dr. V. MADHAVAN	98427 55802
11.	Imm. Past FSS Treasurer	Dr. K. SOUNDARARAJAN	97861 98333

#### BOARD OF TRUSTEES:

S.NO	Names	S.No	Names
1.	Dr.K. Vijaya Kumar	9.	Dr.N.Muthurajan
2.	Dr.P.Ramakrishnan	10.	Dr.K.Thangamuthu
3.	Dr.J.A.Jayalal	11.	Dr.R.Palaniswamy (R)
4.	Dr.T.Sadagopan	12.	Dr.N.R.T.R.Thiagarajan (R)
5.	Dr.S.Damodaran	13.	Dr. B.Venkatesan (R)
6.	Dr.K.Prakasam	14.	Dr.D.Solomonjeya(R)
7.	Dr.N.Mohandas	15.	Dr.V.Madhavan (R)
8.	Dr.R.Gunasekaran		

**FAMILY SECURITY SCHEME OFFICE BEARERS**

Dr.B.Venkatesan- Dharmapuri	CHAIRMAN	94432 61048
Dr.S.Ganesan-Tiruvannamalai	VICE - CHAIRMAN	9443332426
Dr.D.solomonjeya - Marthandam	Hony SECRETARY	94435 80315
Dr. SK.Anoop – Marthandam	Hony FINANCE SECRETARY	98942 21205
Dr.D.Balu– Attur	FSS JOINT SECRETARY	98652 51220
Dr.K.Kamalakannan - Tiruvallur	FSS JOINT SECRETARY	98400 64257
Dr.AbdulKhuddose - Krishnagiri	IAC Chairman	94435 13066
Dr.K.Chandran -Dindigul	IAC Member	94424 05599,
Dr.AR.Sambath -Thanjavur	IAC Member	94435 17591

**INDIAN MEDICAL ASSOCIATION TAMILNADU STATE  
FAMILY SECURITY SCHEME**

**ESTD 18<sup>th</sup> July 2004**

**OFFICE BEARERS OF FAMILY SECURITY SCHEME**

From 2004 - to – 2023

**2004 - 2010 April**

State President & Founder Chairman	<b>Dr.K.VIJAYAKUMAR</b>
Hon. State Secretary & Founder Secretary	<b>Dr.T.SADAGOPAN</b>
Hon. State Treasurer & Founder Treasurer	<b>Dr. S.DAMODARAN</b>

**2010 - 2013**

Chairman <b>Dr.N.MOHANDAS</b> Thanjavur	Hon. Secretary <b>Dr.S. DAMODARAN</b> Vellore	Hon.Fin.Secretary <b>Dr.C.S. PALANI</b> Vellore
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**2013 - 2015**

Chairman <b>Dr.K. PRAKASAM</b> SALEM	Hon. Secretary <b>Dr.T.N.RAVISANKAR</b> CH-TAMBARAM	Hon.Fin.Secretary <b>Dr.L.CHITTIBABU</b> CH-PERAMBUR
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**2015 - 2017**

Chairman <b>Dr.P. RAMAKRISHNAN</b> Trichy	Hon. Secretary <b>Dr.P.K.KESAVAN</b> Vellore	Hon.Fin.Secretary <b>Dr.RAVICHANDRAN</b> <b>SANKARAN</b> Vellore
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<b>2017 - 2019</b>		
Chairman <b>Dr.L.V.K. MOORTHY</b> Theni	Hon. Secretary <b>Dr.S. BALAGAN RAJA</b> Marthandam	Hon.Fin.Secretary <b>Dr.D. SOLOMON JEYA</b> Marthandam

<b>2019 - 2021</b>		
Chairman <b>Dr.C.THANGAMUTHU</b> Gobichettipalayam	Hon. Secretary <b>Dr.D.MADHAVAN</b> Erode	Hon.Fin.Secretary <b>Dr.K.SOUNDARARAJAN</b> Erode

<b>2021 - 2023</b>		
Chairman <b>Dr.B.VENKATESAN</b> Dharmapuri	Hon. Secretary <b>Dr.D.SOLOMON JEYA</b> Marthandam	Hon.Fin.Secretary <b>Dr.SK.ANOOP</b> Marthandam

**INDIAN MEDICAL ASSOCIATION  
- FAMILY SECURITY SCHEME -I & II**

**DISTRICT MANAGEMENT COMMITTEE MEMBERS 2021-2023**

<b>S.no</b>	<b>District</b>	<b>Doctor's Name</b>	<b>Phone No</b>
1.	Chennai District	Dr.C.Anbarasu	9381044766
2.	Chennai District	Dr.Gunasekaran	9445560320
3.	Coimbatore District	Dr.C.P.Shanmugasundaram	9842298973
4.	Coimbatore District	Dr. Dr.V.Rajesh Babu	9360030094
5.	Cuddalore District	Dr.J.StanleyChandran	94432 20757
6.	Dharmapuri District	Dr.K.V.Pugalendhi raja	9443410893
7.	Dindigul District	Dr.K.Santhanakumar	9443900236
8.	Erode District	Dr.P.Jayanthkumar	94426 46960
9.	Erode District	Dr.M.V.Madhankumar	94432 29321
10.	Karur District	Dr.R.Shanmuganathan	98428 37193
11.	Krishnagiri District	Dr.R.Dhanasekaran	9444338553
12.	Kanyakumari District	Dr.A.Dunston Ramesh	94426 35129
13.	Madurai District	Dr.Alagavenkatesan	97877 28505
14.	Madurai District	Dr.V.Jeyaraj	96007 20079
15.	Mayiladuthurai District	Dr.V.Muthu	98429 15060
16.	Namakkal District	Dr.V.Sugavanan	9443353483

17.	Pudukottai District	Dr.M.Raja	9443017199
18.	Ramanathapuram District	Dr.A.Kalilur Rahman	98424 22776
19.	Salem District	Dr.C.Nataraju	9443267071
20.	Salem District	Dr.R.Rabindranath	9842750556
21.	Salem District	Dr.S.Rajesh	9443321151
22.	Sivagangai District	Dr.M.Natesan	9443128245
23.	Tenkasi District	Dr.M.Abdul Azeez	9443226866
24.	Thanjavur District	Dr.P.Lenin	9443070902
25.	Tirupur District	Dr.R.Senthilnathan	9894119040
26.	Trichy District	Dr.T.Selvaraju	94431 66447
27.	Trichy District	Dr.S.Sethuraman	94431 47676
28.	Tripattur District	Dr.T.P.Mani	90035 13279
29.	Tirunelveli District	Dr.Mohammed Ibrahim	98841 72943
30.	Vellore District	Dr.D.Mageswaran	9443332767
31.	Perambalur District	Dr.S.Vallaban	8825869788
32.	Chengalpattu-District	Dr.K.Kaliaperumal	7010445599
33.	Ranipet -District	Dr.A.Parameswaran	99942 07526

### FAMILY SECURITY SCHEME-I

(Operational year :1<sup>st</sup> January to 31<sup>st</sup> December of each year)

- ▶ **FSS-I was started in 2004 to help our family members on their demise.**
- ▶ **Each should Contribute Rs.200/- for a death as a fraternity contribution.**
- ▶ **AFC For 2022=Rs.20000/-(100deathsx200)**

#### ENTRY FEES (NON-REFUNDABLE DEPOSITS)

##### Entry Fees According to Age

AGE	NRD AMOUNT	+AFC
Upto 30 years	RS. 3,000	+RS.20000
31-40 Years	RS.10,000	+RS.20000
41-45 Years	RS.30,000	+RS.20000
46-50 Years	RS.50,000	+RS.20000

**Note:** The upper age limit to join in FSS – I is **50 years** only.

**Note:** Claim Amount will be R.18,00,000/- for FSS-I.  
(Rs.200x Active Members)

**ACTIVE MEMBERS :9332 (AS ON 31-01-2022)**

**Maximum AFC Amount paid by a member From Inception (2004):Rs.1,94,700/-**

**Total number of Claim paid to deceased doctor's family by FSS-I =1001**

**Total Claim amount paid = Rs.158,34,84,210 /-**

## **FAMILY SECURITY SCHEME-II**

**(Operational year :1<sup>st</sup> July to30<sup>th</sup> June of next year)**

FSS-II was started in 2018 to help our family members on their demise.

To provide additional financial assistance to the deceased member's family.

This scheme is a new scheme which shall be beneficial for both old (Existing FSS I) and new members.

Each should Contribute Rs.300/- for a death as a fraternity contribution.

4<sup>TH</sup> AFC for 2021-2022 =RS.18000/- (300X60DEATHS)

5<sup>TH</sup>AFC for the next operational year shall be reduced.

### **ENTRY FEES (NON-REFUNDABLE DEPOSITS)**

#### **Entry Fees According to Age**

AGE	NRD AMOUNT	+AFC
Upto 30 years	RS. 3,000	+ RS.18000
31-40 Years	RS.10,000	+ RS.18000
41-45 Years	RS.30,000	+ RS.18000
46-50 Years	RS.50,000	+ RS.18000

**Note:** The upper age limit to join in FSS – II is **50 years** only.



**Note:-**Claim Amount will be R.8,00,000/- for FSS-II.

**ACTIVE MEMBERS :2989 (31-01-2022)**

**Maximum AFC Amount paid by a member  
From Inception (2018):Rs.54,000/-**

**Total number of Claim paid to  
deceased doctor's family paid by FSS-II =140**

**Total Claim amount paid =  
Rs.11,94,80,900 /-**

	<h2 style="margin: 0;">INDIAN MEDICAL ASSOCIATION</h2> <h3 style="margin: 0;">TAMILNADU STATE BRANCH</h3> <h1 style="margin: 0;">FAMILY SECURITY SCHEME I</h1> <p style="margin: 0;">www.imatnsbfss.com</p> <p style="margin: 0;">ONE FOR ALL &amp; ALL FOR ONE</p>		
REGISTRATION FORM - FOR FSS - I			
MEMBER	NOMINEE I	NOMINEE II	NOMINEE III
Photo	Photo	Photo	Photo
Affix Passport Size			
		AGE / SEX	SIGNATURE
MEMBER NAME		<input style="width: 40px; height: 30px;" type="text"/> <input style="width: 40px; height: 30px;" type="text"/>	<input style="width: 150px; height: 40px;" type="text"/>
NOMINEE - I		<input style="width: 40px; height: 30px;" type="text"/> <input style="width: 40px; height: 30px;" type="text"/>	<input style="width: 150px; height: 40px;" type="text"/>
RELATIONSHIP		<input style="width: 40px; height: 30px;" type="text"/> <input style="width: 40px; height: 30px;" type="text"/>	<input style="width: 150px; height: 40px;" type="text"/>
NOMINEE - II		<input style="width: 40px; height: 30px;" type="text"/> <input style="width: 40px; height: 30px;" type="text"/>	<input style="width: 150px; height: 40px;" type="text"/>
RELATIONSHIP		<input style="width: 40px; height: 30px;" type="text"/> <input style="width: 40px; height: 30px;" type="text"/>	<input style="width: 150px; height: 40px;" type="text"/>
NOMINEE - III		<input style="width: 40px; height: 30px;" type="text"/> <input style="width: 40px; height: 30px;" type="text"/>	<input style="width: 150px; height: 40px;" type="text"/>
RELATIONSHIP		<input style="width: 40px; height: 30px;" type="text"/> <input style="width: 40px; height: 30px;" type="text"/>	<input style="width: 150px; height: 40px;" type="text"/>
DECLARATION	I hereby declare that the information given above is true. I am aware of the rules and regulation of Family Security Scheme - I of IMA, TNSB and I will abide by it.		
	SIGNATURE OF THE APPLICANT		
BRANCH USE	Forwarded by Hon. Secretary Dr. ....		
	LOCAL BRANCH SECRETARY / DISTRICT COORDINATOR SEAL	SIGNATURE OF LOCAL BRANCH SECRETARY / DISTRICT COORDINATOR	
OFFICE USE	RECEIPT NO. : ..... NRD AMOUNT ..... ADVANCE AMOUNT .....		
	ABOVE DETAILS ARE VERIFIED AND APPLICATION "ACCEPTED / NOT ACCEPTED"		
	FSS I MEMBERSHIP NO. ....		
	WINDOW PERIOD FROM ..... TO .....		SIGNATURE OF THE FSS I SECRETARY



FSS I NO. ....

## INDIAN MEDICAL ASSOCIATION, TNSB FAMILY SECURITY SCHEME - I

**APPLICATION FORM**  
(TO BE FILLED IN BLOCK LETTERS)

NAME : .....

DATE OF BIRTH : ..... AGE ..... SEX .....

ADDRESS : .....

TELEPHONE NO. : ..... TAMILNADU MEDICAL COUNCIL NO.  
.....

MOBILE NO. : .....

EMAIL : .....

QUALIFICATION : .....

IMA BRANCH IN WHICH THE DOCTOR IS A LIFE MEMBER : .....

LIFE MEMBERSHIP NO. : .....

**Introduced By / Reference : Relative or Friend**

**NAME:** ..... **MOBILE NO:** .....

**The following Documents are mandatory along with the Application Form :**

1. Completed Application form, Photo of the Member and Nominees
2. IMA Life Membership Certificate - Xerox Copy
3. Age proof - Xerox Copy
4. Attestation of Local IMA Branch Secretary
5. DD according to the Age Group
6. Demand Draft drawn in favour of "IMA TNSB FSS ADVANCE" Payable at **MARTHANDAM**
7. Please Note : **Window period 1 Year**  
Advance Fraternity contribution to be paid every Year in the Month of **JANUARY** (or) on Demand.  
➤ Operational year of the Scheme shall be from January 1<sup>st</sup> to December 31<sup>st</sup>

**Membership Eligibility :**

Upper age limit to join in FSS - I is 50 Year

Please send your payment & Communication to the following address : **Dr.D.Solomon Jeya Hon. Secretary FSS - IMA TNSB William Childen Hospital, Main Road, Marthandam-629165**  
Off.No. 98405 37178, 93604 98113  
Mail: imatnsbfss@gmail.com

Upto 30 Years	Rs. 3,000/-	Rs. 20,000/-	Rs. 23,000/-
31 - 40 Years	Rs. 10,000/-	Rs. 20,000/-	Rs. 30,000/-
41 - 45 Years	Rs. 30,000/-	Rs. 20,000/-	Rs. 50,000/-
46 - 50 Years	Rs. 50,000/-	Rs. 20,000/-	Rs. 70,000/-

**MODE OF PAYMENT**

1. AMOUNT IN WORDS: .....

2. DD NO. .... NRD AMOUNT ..... ADVANCE AMOUNT .....

3. BANK: ..... BRANCH : ..... DATE : .....



**INDIAN MEDICAL ASSOCIATION  
TAMILNADU STATE BRANCH**

**FAMILY SECURITY SCHEME II**

www.imatnsbfss.com



**LOSSES OF FEW ARE SHARED BY MANY  
REGISTRATION FORM - FOR FSS - II**

<b>MEMBER</b>	<b>NOMINEE I</b>	<b>NOMINEE II</b>	<b>NOMINEE III</b>
Photo	Photo	Photo	Photo

Affix Passport Size

MEMBER NAME		AGE / SEX		SIGNATURE
NOMINEE - I				
RELATIONSHIP				
NOMINEE - II				
RELATIONSHIP				
NOMINEE - III				
RELATIONSHIP				

DECLARATION

I hereby declare that the information given above is true. I am aware of the rules and regulations of Family Security Scheme - II of IMA, TNSB and I will abide by it.

SIGNATURE OF THE APPLICANT

BRANCH USE

Forwarded by Hon. Secretary Dr. ....

LOCAL BRANCH SECRETARY / DISTRICT COORDINATOR SEAL

SIGNATURE OF LOCAL BRANCH SECRETARY / DISTRICT COORDINATOR

OFFICE USE


RECEIPT NO. : ..... NRD AMOUNT ..... ADVANCE AMOUNT .....

ABOVE DETAILS ARE VERIFIED AND APPLICATION "ACCEPTED / NOT ACCEPTED"

FSS II MEMBERSHIP NO. ....

WINDOW PERIOD FROM ..... TO .....

SIGNATURE OF THE SECRETARY FSS II

	FSS I NO. ....																				
<b>INDIAN MEDICAL ASSOCIATION, TNSB</b> <b>FAMILY SECURITY SCHEME - II</b> <b>APPLICATION FORM</b> (TO BE FILLED IN BLOCK LETTERS)																					
NAME :	.....																				
DATE OF BIRTH :	..... AGE ..... SEX .....																				
ADDRESS :	..... ..... .....																				
TELEPHONE NO. :	.....																				
MOBILE NO. :	.....																				
EMAIL :	.....																				
QUALIFICATION :	.....																				
IMA BRANCH IN WHICH THE DOCTOR IS A LIFE MEMBER :	.....																				
LIFE MEMBERSHIP NO. :	.....																				
<b>Introduced By / Reference : Relative or Friend</b>																					
NAME: .....	MOBILE NO: .....																				
<b>The following Documents are mandatory along with the Application Form</b> 1. Completed Application form , Photo of the Member and Nominees 2. IMA Life Membership Certificate - Xerox Copy 3. Age proof - Xerox Copy 4. Existing FSS Members should provide FSS I Certificate - Xerox Copy 5. Attestation of local IMA Branch Secretary. 6. DD according to the Age Group 7. Demand Draft drawn in favour of "IMA TNSB FSS II ADVANCE" Payable at Marthandam. 8. Please Note : <b>Window period for Existing FSS Members - 6 Months from the date of joining.</b> <b>Window period for New FSS II Members - 1 Year from the date of joining</b>	<b>Membership Eligibility :</b> Upper age limit to join in FSS - II is 50 Year  Please send your payment & Communication to the following address : <b>Dr.D.Solomon Jeya Hon. Secretary FSS - IMA TNSB William Childen Hospital, Main Road, Marthandam-629165 .</b>  Off.No. 98405 37178, 93604 98113 Mail: imatmsbssf@gmail.com																				
9. Advance Fraternity contribution to be paid every Year in the Month of <b>JULY</b> (or) on Demand. ➤ Operational year of the scheme shall be from 1 <sup>st</sup> July to 30 <sup>th</sup> June of the following year.																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> <tr> <td>Upto 30 Years</td> <td>Rs. 3,000/-</td> <td>Rs. 18,000/-</td> <td>Rs. 21,000/-</td> </tr> <tr> <td>31 - 40 Years</td> <td>Rs. 10,000/-</td> <td>Rs. 18,000/-</td> <td>Rs. 28,000/-</td> </tr> <tr> <td>41 - 45 Years</td> <td>Rs. 30,000/-</td> <td>Rs. 18,000/-</td> <td>Rs. 48,000/-</td> </tr> <tr> <td>46 - 50 Years</td> <td>Rs. 50,000/-</td> <td>Rs. 18,000/-</td> <td>Rs. 68,000/-</td> </tr> </table>					Upto 30 Years	Rs. 3,000/-	Rs. 18,000/-	Rs. 21,000/-	31 - 40 Years	Rs. 10,000/-	Rs. 18,000/-	Rs. 28,000/-	41 - 45 Years	Rs. 30,000/-	Rs. 18,000/-	Rs. 48,000/-	46 - 50 Years	Rs. 50,000/-	Rs. 18,000/-	Rs. 68,000/-	
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<b>MODE OF PAYMENT</b>																					
1. AMOUNT IN WORDS: .....	.....																				
2. DD NO. .... NRD AMOUNT .....	ADVANCE AMOUNT .....																				
3. BANK: .....	BRANCH : ..... DATE : .....																				

## Dr. BIDHAN CHANDRA ROY

Bidhan Chandra Roy, M.R.C.P., F.R.C.S. (Bengali : 1 July 1882–1 July 1962) was the second Chief Minister of West Bengal in India. He remained in his post for 14 years as a Indian National Congress candidate, from 1948 until his death in 1962. He was a highly respected physician and a renowned freedom fighter. Bidhan Roy is often considered as the great architect of West Bengal,



who had founded two eminent cities Kalyani and Bidhannagar. He was an alumnus of the Medical College Calcutta of the University of Calcutta. He is one of the few people who completed both F.R.C.S. and M.R.C.P. simultaneously within only two years and three months. In India, the *National Doctor's Day* is celebrated on the date of his birth (and death) July 1 every year. Dr. Bidhan Chandra Roy constituted a trust for his properties at Patna for social service and made eminent nationalist Ganga Sharan Singh (Sinha) the trustee. He won the Bharat Ratna in 4 February 1961, India's highest civilian honour. He was also a member of the Brahmo Samaj.

**EARLY LIFE** : Bidhan Chandra Roy was born on July 1, 1882, at B. M. Das road, Bankipore in Patna, Bihar. His father Prakash Chandra was an Excise Inspector. Bidhan was the youngest of five children and was greatly influenced by the simplicity, discipline and piety of his parents. His parents inculcated in him the idea of service by taking care of people other than relatives with affection and understanding. Bidhan's mother died when he was 14. His father played the role of both father and mother to his five children. He promised never to compel them to do anything but to just guide them on their

path. All five children were required to do the household chores themselves. This was very helpful for Bidhan in his college days. Bidhan did his I.A. from Presidency College, Calcutta and B.A. from Patna College with Honors in Mathematics. He applied for admission to the Bengal Engineering College, and the Calcutta Medical College. He

was accepted to both institutions but opted to go to medical school. Bidhan left for Calcutta in June 1901. While at medical school Bidhan came upon an inscription which read, "Whatever thy hands findeth to do, do it with thy might." Bidhan was deeply impressed by these words and they became a source of inspiration for him throughout his life.

Bidhan's term in medical school was fraught with hardships. His father retired as a Deputy Collector after the first year and could no longer send Bidhan any money. Bidhan fended for himself by getting a scholarship and living frugally, saving on books by borrowing notes and relying on books in the library.

The partition of Bengal was announced while Bidhan was in college. Opposition to the partition was being organized by nationalist leaders like Lala Lajpat Rai, Arvinda Ghosh, Tilak and Bipin Chandra Pal. Bidhan resisted the immense pull of the movement. He controlled his emotions and concentrated on his studies realizing that he could better serve his nation by qualifying in his profession first.

Immediately after graduation, B.C. Roy joined the Provincial Health Service. He exhibited

immense dedication and hard work. He was prepared to prescribe medicine to patients and even serve as a nurse when necessary. In his free time he practiced privately, charging a nominal fee of Rs. 2 only.

Bidhan sailed for England with only Rs. 1,200 in February 1909 intending to enroll himself at St Bartholomew's Hospital to further his education. The Dean, reluctant to accept a student from Asia, rejected Bidhan's application. Dr. Roy did not lose heart. Again and again he submitted his application until finally the Dean, after 30 admission requests, accepted Bidhan to the college. Within two years and three months, Bidhan completed his M.R.C.P. and F.R.C.S. and returned home from England in 1911. On his return he taught at the Calcutta Medical College, then the Campbell Medical School and finally at the Carmichael Medical College<sup>[citation needed]</sup>.

Dr. Roy believed that swaraj would remain a dream unless the people were healthy and strong in mind and body. He made contributions to the organization of medical education. He established the Jadavpur T.B. Hospital, Chittaranjan Seva Sadan, R.G. Kar Medical College, Kamala Nehru Hospital, Victoria Institution, and Chittaranjan Cancer Hospital. The Chittaranjan Seva Sadan for women and children was opened in 1926. The women were unwilling to come to the hospital initially but thanks to Dr. Roy and his teams hard work, the Seva Sadan was embraced by women of all classes and communities. He opened a center for training women in nursing and social work.

In 1942, Rangoon fell to Japanese bombing and caused an exodus from Calcutta fearing Japanese insurgency. Dr. Roy was serving as the Vice-Chancellor of the University of Calcutta. He acquired air-raid shelters for schools and college students to have their classes in, and provided relief for students, teachers and employees alike. In recognition for his efforts,

the Doctorate of Science was conferred upon him in 1944.

Dr. Roy believed that the youth of India would determine the future of the nation. He felt that the youth must not take part in strikes and fasts but should study and commit themselves to social work. At his Convocation Address on December 15, 1956 at the University of Lucknow, Dr. Roy said, "My young friends, you are soldiers in the battle of freedom-freedom from want, fear, ignorance, frustration and helplessness. By a dint of hard work for the country, rendered in a spirit of selfless service, may you march ahead with hope and courage."

Dr. Roy was both Gandhiji's friend and doctor. When Gandhiji was undergoing a fast in Parnakutivin, Poona in 1933 during the Quit India Movement, Dr. Roy attended to him. Gandhiji refused to take medicine on the grounds that it was not made in India. Gandhiji asked Dr. Roy, "Why should I take your treatment? Do you treat four hundred million of my countrymen free?" Dr. Roy replied, "No Gandhiji, I could not treat all patients free. But I came... not to treat Mohandas Karamchand Gandhi, but to treat "him" who to me represents the four hundred million people of my country." Gandhiji relented and took the medicine.

Dr. Roy entered politics in 1925. He ran for elections from the Barrackpore Constituency as an Independent candidate for the Bengal Legislative Council and defeated the "Grand Old Man of Bengal," Surendranath Banerjea. Even though an independent he voted with the Swaraj Party (the Parliamentary wing of the Congress). As early as 1925, Dr. Roy tabled a resolution recommending a study of the causes of pollution in Hoogly and suggested measures to prevent pollution in the future.

Dr. Roy was elected to the All India Congress Committee in 1928. He kept himself away from rivalry and conflicts and made a deep impression on the leaders. Dr. Roy efficiently

conducted the Civil Disobedience in Bengal in 1929 and prompted Pandit Motilal Nehru to nominate him Member of the Working Committee (CWC) in 1930. The CWC was declared an unlawful assembly and Dr. Roy along with other members of the committee were arrested on August 26, 1930 and detained at Central Alipore Jail.

During the Dandi March in 1931, many members of the Calcutta Corporation were imprisoned. Congress requested Dr. Roy to remain out of prison and discharge the duties of the Corporation. He served as the Alderman of the Corporation from 1930-31 and Mayor in 1933. Under him, the Corporation made leaps in the expansion of free education, free medical aid, better roads, improved lighting, and water supply. He was responsible for setting up a framework for dispensing grant-in-aid to hospitals and charitable dispensaries.

**POST INDEPENDENCE** : The Congress Party proposed Dr. Roy’s name for Chief Minister of Bengal. Dr. Roy wanted to devote himself to his profession. On Gandhiji’s advice, however, Dr. Roy accepted the position and took office on January 23, 1948. Bengal at the time that had been torn by communal violence, shortage of food, unemployment and a large flow of refugees in the wake of the creation of East Pakistan. Dr. Roy brought unity and discipline

amongst the party ranks. He then systematically and calmly began to work on the immense task in front of him. Within three years law and order was returned to Bengal without compromising the dignity and status of his administration. He told the people.

*We have the ability and if, with faith in our future, we exert ourselves with determination, nothing, I am sure, no obstacles, however formidable or insurmountable they may appear at present, can stop our progress... (if) all work unitedly, keeping our vision clear and with a firm grasp of our problems.*

The nation honored Dr. Roy with the Bharat Ratna on February 4, 1961. On July 1, 1962, after treating his morning patients and discharging affairs of the State, he took a copy of the “Brahmo Geet” and sang a piece from it. 11 hours later Dr. Roy died. He gifted his house for running a nursing home named after his mother, Aghorkamini Devi. The B.C. Roy National Award was instituted in 1976 for work in the area of medicine, politics, science, philosophy, literature and arts. The Dr. B.C. Roy Memorial Library and Reading Room for Children in the Children’s Book Trust, New Delhi, was opened in 1967.

[http://en.wikipedia.org/wiki/Bidhan\\_Chandra\\_Roy](http://en.wikipedia.org/wiki/Bidhan_Chandra_Roy)



“DOCTORS DAY” is celebrated on July 1st in commemoration of the Birth and Death anniversary of Dr. B.C. Roy the freedom fighter, the first President of the MCI and a noted Physician par excellence.

IMA TNSB conducts Annual Doctors Day celebration. During the celebration as per the decision of the President senior Doctors will be honored on the function organized by the State office in association with a local Branch. The awards are invited by the State Office officially in the TIMA and the Local branch shall nominate such deserving persons.

Local Branches are requested to celebrate Doctors Day in their branches. Doctors who need to be recognized for their services may be awarded and it is ideal to have a family meeting on the occasion. Doctors Day Celebration to be celebrated by the branches involving the public, NGO’s and others who will be reconginsing the sacrifices of the Medical Professionals.

**STATUTORY PROVISION FOR BRANCHES**

1. Apply for legal identity of Branch in Society.
2. Need By laws for the registry.
3. A simple, sample of Bye laws is in Leadership manual / Constitution book / Website.
4. Conduct Annual General Body once a year before September 30<sup>th</sup> .
5. Apply for Pancard, with the name IMA  
..... followed your branch name. Do not apply as Indian Medical Association.
6. Bank account to be operated by Secretary and Finance Secretary
7. Submit yearly Audited accounts to Income tax
8. Society Registration to be renewed yearly with resolution of General Body after September 30<sup>th</sup> but before December of the financial year.
9. Have a liaison officer for the branches with
  - i. Police Department
  - ii. Local authority corporation / Municipality / Panjayath Union
  - iii. Pollution Control Board
  - iv. District Collector
  - v. Joint / Deputy Director of health
  - vi. Fire Department
10. Communicate with state office and National office regularly
11. Any Trust in branch for building must follow the statutory provisions, the Branch President, Secretary and finance secretary as ex officio members.
12. Appoint a Auditor and Legal consultant during Annual General Body.

## UPDATES FOR MEMBERS - 2022

1. Register the clinic / hospital in Clinical Establishment act.
2. To Update them on Code of Medical Ethics & Etiquette Once a year.
3. To have a limited size name board in clinics.
4. To print the Medical Council registration number in the letter head.
5. Prescription to be legible and in Capital preferable. Print is preferable.
6. Note down the salient features of the patient complaint and diagnosis if possible in the prescription.
7. Advise on drug intake clearly and note on review / follow up in the prescription.
8. When referring do sent a reference letter with probable diagnosis and treatment administered.
9. Have an MOU for Bio Medical Clearance with the Common facilitator.
10. Do not issue false Leave certificates even for school or college purpose.
11. Issue Birth and Death certificate only if you have treated the patient.
12. All certificates must have two identity mark of the persons who need the certificate
13. Keep a copy of the certificates issued in your PC / Smart phone later in a pendrive as permanent record.
14. Get consent for all intervention even in your clinic for safe practice.
15. Issue Receipts for consultation if demanded.
16. Do not charge for Birth, Death and Disability Certificates.
17. Disability certificates must be issue only by that specialist.
18. Keep all records under lock and key.
19. Educate your clinic staff / on Biomedical Waste Management regularly.
20. Do not sell medicines without valid license.

# STATE, CENTRAL COUNCIL & C.W.C. MEETINGS

## COMPOSITION OF THE STATE COUNCIL

- State President for the year
- State President Elect of the State Branch
- Imm. Past State President of the State Branch
- Past State Presidents of the State Branch
- Hony. State Secretary
- Hony. Joint Secretary of the State Branch
- Hony. Finance Secretary
- Assistant Secretaries
- IMA CGP
  - a) Director of Studies
  - b) Faculty Secretary
  - c) Assistant Secretaries
- IMAAMS
  - a) Chairman
  - b) Hony. Secretary
- Three Representatives from PPLSSS (Chairman, Secretary and Finance Secretary)
- Three Representatives from Nursing Home Board (Chairman, Secretary & Convenor)
- Three Representatives from FSS (Chairman, Secretary and Finance Secretary)
- The NHB, PPLSSS and FSS members will elect their office bearers and three in each as stated above will represent the respective bodies in the State Council.
- Local Branch Representative of the State Council
- President and Hony. Secretaries of all Local Branches for the year
- Representatives from the Local Branches elected or as per By-laws and Rules.
- President, Secretary and one state council member for the first 100 members in the local branch. For every additional 50 members one state council member to be elected.

## **TERM OF OFFICE OF THE STATE COUNCIL**

The State Council is a continuous body. Additions and alterations if any in the list maintained at the State Office shall be effected each year on 31<sup>st</sup> of January. Term of Office is for One Year.

Alternate Member - In case if any State Council Member from the local branch unable to attend State Council Meeting, President or Secretary of Local Branch, may nominate an alternate member with letter before commencement of meeting.

## **CENTRAL COUNCIL**

### **REPRESENTATIVES TO CENTRAL COUNCIL**

- The total number of Members of Local Branches on whose behalf HFC has been received in full by 15th February shall form the basis of determining representation of Local Branches to the Central Council.
- Branch Representatives from the Local branches and from the Direct members shall be in the following scales:-

20-100 Members – One representative

After 100 members – One Additional Representative for every 100 members or part thereof.

The Central Council meeting will be held twice in a year by IMA Hqrs.

## **CENTRAL WORKING COMMITTEE MEETING**

The State Branch shall elect its representatives to the Central Working Committee from amongst its members who have been members of the Association continuously of whom three representatives shall be the State President and Hony. Secretary of the State Branch as Ex-Officio. The scale of Representation on the Central Working Committee including the Ex-Officio of the State shall be as follows:

- 1 - 1000 – One Representative

For every additional thousand or part thereof members, one more representative.

Central Working Committee is the equalent of the State Council Meeting of the State where all the discussions are held for the Association activities.

# IMA STATE & NATIONAL CONFERENCES

An Annual State Medical Conference will be organized every year at a suitable place and time as decided by the State Council. Such a conference will usually be held towards the Second Saturday & Sunday of December. The local branch of the elected president shall have the privilege of conducting the State Conference.

The expense of the State Conference shall be borne wholly by the branch inviting the Conference. The State Branch shall not be responsible for any part of the expenses.

- The conference is open to all members of IMA TNSB
- There shall be Reception Committee which may be formed by the Branch inviting the Conference for the purpose of conducting the Annual General Body and conference.
- The Branch inviting the conference shall appoint Office bearers and sub-committees for conducting the conference.
- They shall be the members of the Local Branch.
- The Hosting Branch shall decide the rate of fees to be levied on the Organizing Committee members his / her Guest and also the delegate fees to be collected from the members and his / her Guests attending the conference.
- The State President, State Secretary, Finance Secretary, the State President Elect and the Imm. Past State President shall not be charged any fee. They shall be provided free hospitality and accommodation.
- Any expenses incurred by the State Branch towards the conference shall be met by the branch holding the conference.
- The State branch shall not be liable for any loss incurred by the Hosting Branch.

- The Organising Committee shall submit a Statement of Accounts relating to the Annual Conference to the State Council with in a period of 90 days from the Conference Date.
- The State Council shall render every possible assistance to the Organising Committee of the Conference.
- The Hony. State Secretary shall render all possible assistance to the Branch holding the conference and he shall be in constant touch with the Organizing Local Branch.
- Medical internees and Final year Medical students may be permitted to the conference at a concessional delegate fee viz. not more than 50% of the Delegate fee fixed for the regular member.
- The Protocol mentioned in the Rules must be followed strictly.

## NATIONAL CONFERENCE

It will be held on December 27, 28<sup>th</sup> & 29<sup>th</sup> as per convention. Central Council Meeting the equalent of General Body will be held on December 27<sup>th</sup>. The National Awards will be distributed during the evening function by the sitting President.

On Dec. 28<sup>th</sup> the New Office bearers will be installed in a function attend by VIP's.

On December 29<sup>th</sup> an Ordinary Central Council Meeting will be held presided by the installed President.

Orations as given below will be held in a seprate hall on Dec. 27<sup>th</sup> and December 28<sup>th</sup> the Conference will be allotted to a Local Branch on submitting their willingness during the CWC & Central Working committee and Central Council Meeting. So far 96 Annual National Conference have been held conference since 1928.

## IMA GUEST HOUSE @ NEW DELHI

On sharing basis-Rs.1,000/- per day, per bed (AI\*)

& Rs 1,500/- per day, per bed (API\*\*)

For a family of upto 2 persons

(on dedicated room basis) : Rs. 2,500/- per room per night, however, for a family of 3 or more persons, the above sharing basis rates will be charged

+91-11-23370009, +91-9999116375,+91-9999116376, hsg@ima-india.org

\* AI - All taxes inclusive. Includes Accommodation & Breakfast

\*\* API - All Taxes inclusive.

Includes Accommodation, Breakfast, Lunch & Dinner

## IMA GUEST HOUSE @ KOLKATA

Renovated and fully Air-conditioned with all the modern amenities like LED TV with Cable connection, Telephone, Cold & Hot Water, Pantry, Car Hire facilities etc, available at IMA Guest House, Kolkata for IMA Members and their families.

Single Bed Deluxe AC Room (1 Room)	Rs. 800/- per day
Double Bedded AC Room (2 rooms)	Rs. 800/- per bed per day
Triple Bedded AC Room (3 rooms)	Rs. 800/- per bed per day
Four Bedded AC Room (2 Rooms)	Rs. 800/- per bed per day

(Including Bed Tea and Breakfast)

**For further details please contact**

Sir Nil Ratan Sircar IMA House, 53, Sir Nil Ratan Sircar Sarani (Creek Row), Kolkata – 700014. Phone : (033) 2225 7010. E-mail: imahq.kolkata@gmail.com

## IMA TN STATE HQRS GUEST HOUSE @ TAMBARAM

A/c Double Bed Room - Rs. 1,200/- per day and Suit Room Rs. 1,700/-

For booking contact office at 9087180123 or 89391 67204.

*Send one day room rent as advance.*

DD in favour of “**IMA TNSB Guest House**” payable at Chennai and sent to

Dr. G. Maragathamani, IMA TNSB Guest House Chairman (98410 73795)

Dr. M. Subramani,, IMA TNSB Guest House Secretary (89391 67204)

IMA Tamilnadu State Hqrs Building, Doctors Colony, Via - Bharathi Nagar First Main Road,  
Off. Mudichur Road, Tambaram West, Chennai - 600 045.

Cell : 9087180123 email : imatamilnadu@gmail.com

## PPLSSS GUEST HOUSE - CHETPET

**Address :** Sankaralaya, Sankara Heritage Apartment,  
Flat No.11 &12, No.64, Spur tank Road, Chetpet, Chennai-600 031.

**Contact :** 044 28361866, 88388 60224 / 9840214949

(Reservation only from 10 am to 6 pm)

**Email :** pplsssguesthouse@gmail.com/ secretarypplsss@gmail.com

A/C Double Bed Room Rs.1416/- per day, in addition 18% GST  
(Extra Persons Staying in double bed room Rs.250/- per person per day).

Rs.116/- Discount for PPLSSS Members.

**Note 1 :** Free allotment Car Parking Only Two

**Note 2:** Paid Building association car parking two each Rs.150/- (“Subject to availability”)

DD should be send in the name of “PPLSSS Guest House” Payable at Omalur

**Payment Mode :** NEFT / Google Pay also Accepted.

## JVL PLAZA GUEST HOUSE - TEYNAMPET

**Address :** JVL Plaza, No.626/501, Anna Salai, Teynampet, Chennai – 600 018.

**Contact :** 044 24348475, 88388 60224 / 9840214949

(Reservation only from 10 am to 6 pm).

**Email:** pplsssguesthouse@gmail.com/ secretarypplsss@gmail.com

A/C Double Bed Room Rs.1200/-

(Extra Persons Staying in double bed room Rs.200/- per person per day)

**Note 1:** Free allotment Car Parking Only Two.

**Note 2:** Paid Building association car parking each Rs.150/-

(7p.m-7a.m “Subject to availability”)

DD should be send in the name of

“JVL Plaza A/c of PPLSSS of IMA Tamilnadu” Payable at Omalur

**Payment Mode :** NEFT / Google Pay also Accepted.

**DD should be send to the following address:**

**Dr. P. MANIVANNAN,** Hony.Secretary, PPLSSS of IMA TN.

Sri Sugam Hospital (First Floor), 149, E1, Bazaar Street, Omalur (PO & TK)

Salem District - 636 455. Office : 04290 290455, 94872 72627

Cell : 82483 94717, 94432 21025 Website : www.pplsss.com

e.mail : secretarypplsss@gmail.com, drpmanivannan2015@gmail.com

## IMA GUEST HOUSE @ COIMBATORE

A/c Double Bedded Rooms - Rs. 1,000/- per day

Address: 92, Syrian Church Rd, Puthiyavan Nagar, Sukrawar Pettai, R S Puram West,  
Coimbatore, Tamil Nadu 641002

Phone: 0422 247 1824, 95663 65577, imacoimbatore@gmail.com

## IMA AWARDS FOR LOCAL BRANCHES

Local Branches are the live wires or lifeline of our Indian Medical Association An-active local branch can build up the image of IMA by orienting health camps / lectures and reduce tackle any crisis efficiently. Regular CME programmes can keep the members updated. Various schemes of State IMA can be percolated to the member and draw new memberships.

In order to encourage the local branches, awards are being distributed by our Tamil Nadu State branch and IMA Head Quarters in the State & National conference respectively. It will be a proud moment when the name of local branch is read out on that occasion and most joyous to receive the awards along with other active members of that branch. The local branches are divided into major, medium and minor groups as per the branch membership and marks are allotted for various activities like sending HFC enrolling new members, organizing CME programmes, conduction of health camps, observing various days like Doctors Day, conduction of blood camps, publishing news bulletin, organizing, meetings like State Council, Nursing Home Board and PPLSSS, enrolling members in various schemes, having own building etc.,

### THE VARIOUS STATE AWARDS ARE GIVEN BELOW CONCLUSION : RECEIVE IT ... YOU WILL RELISH IT

#### ORATIONS

The following orations are delivered by eminent speakers during the Annual State Conference on the nomination of their name by the Local Branches. The nomination will be call for two months prior to the conference in the TIMA News Letter.

- |   |   |
|---|---|
| 1. Dr. Ibrahim Bheylium Oration           | 9. Dr. S. Arul Rhaj Oration   |
| 2. Dr. Gunasundari Bose Oration           | 10. Dr. S. Thirugnanam Oration  |
| 3. Dr. S.G. Rajarethinam Oration          | 11. Dr. Navamani Chandra Bose Oration   |
| 4. Haji Janab Dr. B.A. Shukkoor Oration   | 12. Dr. V. Varadarajan - IMA NHB Oration  |
| 5. Dr. A.S. Azeem Memorial PPLSSS Oration | 13. Dr. Jayaseelan Mathias Oration<br>(for MS Post Graduate Student)            |
| 6. Dr. Padmanur Rama Rao Oration          | 14. Dr. A. Muruganathan Oration (for MD<br>Gen. Medicine Post Graduate Student) |
| 7. Dr. C.B. Baskaran Oration              |   |
| 8. Dr. M. Suryagandhi Memorial Oration    |   |

#### INDIVIDUAL AWARDS

1. Dr. Bhandary Award for a person who has completed 25 years of Medical Practice in Rural Areas
2. Dr. P.K. Kesavan Rolling Shield for Tamil Work in Medicine
3. Dr. T. Kumaraguru Award for Community Services by an individual member
4. Dr. A. Muruganathan Award for Community Activities by an individual from small branch including upto 100 members
5. Dr. (Mrs.) Bhanumathi Muruganathan Award for Tamil Excellence in Medical Publication / Articles / Oration etc
6. Dr. S. Damodaran Award for Medical Oriented Service by an individual

7. Dr. G. Viswanathan Award for Seniors in Service
8. Dr. A. Rajasekaran Eye Donation Award
9. Dr. Zameer Pasha Award for individual Contribution for Tamil Nadu IMA
10. Dr. Abdul Munaf Best Writer Award.

### **SPECIAL AWARDS**

1. Appreciation Award for Journal for a Major Branch
2. Appreciation Award for Journal for Medium Branch
3. Dr. R.M. Krishnan Award for Best Branch Journal
4. Dr. M. Balasubramanian Award for Best News Bulletin
5. Dr. V.N. Rajasekaran Rolling Trophy for the Best Branch outstanding performance in Extra Curricular Activities
6. Dr. V.T.D. Kumarasamy Award for Fine Arts
7. Dr. S. Arulhraj Award for Best CGP / CME Programme
8. Dr. S. Arulhraj Award for the Best AMS / CME Programme
9. Dr. K. Thangavelan Award for Best AMS Branch Chapter
10. Grandix Award for Best CME Programme in Semi Urban & Rural Branches.
11. Dr. T. Sadagopan Award for Best Branch – Overall performance
12. Tambaram Branch Award for the State Vice President who visited maximum number of branches
13. Dr. M. Mani Elango Award for conducting medical camps at rural areas
14. Dr. A. Selvarajan Award for organizing maximum number of Blood Donation Camp (with held)
15. Dr. B.R. Ramasubramanian Award for a Central Council Member who attended maximum number of Central Council Meeting
16. Dr. B.R. Ramasubramanian Award for a member who attended maximum number of State Council Meeting in the past 3 years
17. Dr. R. Gunasekaran Award for an Office Bearer who has done exceptional work in the association year
18. Dr. R. Gunasekaran Award for a Local Branch Treasurer who has maintained accounts and submitted in the association year.
19. Dr. K.M. AbulHasan Award for the best branch for conducting Cancer Awareness Programme.
20. Dr. M. Amanullah Individual Award for best Asst. Director of Studies in CGP.
21. Dr. K. Prakasam Award for Best Branch in Crisis Management Activities.
22. Dr. J.A. Jayalal Award for overall best branch office bearers.
23. Dr. K. Vijayakumar Award for best branch in Quackery Eradication Activities.
24. Past President Dr. N. Mohandas Award for Family Security Scheme.
25. Dr. C.N. Raja Award for Organ / Body Donation Activities.
26. Erode Dr. S.S. Sukumar Rolling Trophy to the Branch for Maximum Units of Blood Collected by a Branch

27. Erode Dr. S.S. Sukumar Rolling Trophy to the Branch for conducting Maximum No of camps by a branch
28. Erode Dr. S.S. Sukumar Rolling Trophy to the Branch for Maximum No. of IMA members donating blood in a branch.

### **ENROLLMENT AWARDS**

1. Dr. Jayaseelan Mathias Rolling Cup for a Local Branch – Highest New Enrollments
2. Dr. M.S. Ashraf Award for an Individual Branch - Highest New Enrollments in Group II & III
3. Dr. E. Sivakumar Vellore Award for an individual branch for enrolling more life members from a Group – VIII & Group IX
4. Dr. B.R. Ramasubramanian Award for Maximum point for enrollment of New Life & Annual Members (current year + previous 2 years enrollment - 2 points for NLM & 1 point for NAM)
5. Dr. R. Sivashanmugam Award for a Branch – Highest PPLSSS New Enrollments
6. Dr. B.R. Ramasubramanian Award for Branch who have enrolled maximum IMA FSS New Members
7. Dr. B.R. Ramasubramanian Award for Branch who have enrolled maximum IMA AMS New Members
8. Dr. B.R. Ramasubramanian Award for Individual Member for Maximum Enrollments in IMA FSS
9. Dr. B.R. Ramasubramanian Award for Individual Member for Maximum Enrollments in IMA AMS

### **BRANCH AWARDS**

#### **GROUP I – (Membership 1501 and above)**

- Dr. Jayaramachandran Roll Cup for Branch
- Dr. N.S. Chandrabose Award for Branch
- Dr. K. Janakiraman Award for President
- Dr. J. Ranganathan Award for Secretary
- Group I – Best Branch Runner
- Group I – Branch President Runner
- Group I – Branch Secretary Runner

#### **GROUP II – (Membership 701 – 1500)**

- Dr. S.S. Sukumar Rolling Cup for Best Branch
- Dr. S.S. Sukumar Rolling Shield for the President
- Dr. S.S. Sukumar Rolling Shield for the Secretary
- Group II – Best Branch Runner
- Group II – Branch President Runner
- Group II – Branch Secretary Runner

#### **GROUP III – (Membership 401 – 700)**

- Dr. C.N. Raja Rolling Cup for Best Branch
- Dr. C.N. Raja Award for Branch President
- Dr. C.N. Raja Award for Branch Secretary

Group III – Best Branch Runner  
Group III – Branch President Runner  
Group III – Branch Secretary Runner

**GROUP IV – (Membership 301 – 400)**

Dr. J. Sugavanam Rolling Cup for Branch  
Dr. K. Janakiraman Award for Branch  
Dr. S. Arul Rhaj Award for Branch President  
Dr. K. Vijayakumar Award for Branch Secretary  
Group IV – Best Branch Runner  
Group IV – Branch President Runner  
Group IV – Branch Secretary Runner

**GROUP V – (Membership 201 – 300)**

Dr. P.A. Sivakumar Rolling Cup for Branch  
Dr. M.S. Ashraf Award for Branch President  
Dr. S.S. Sukumar Award for Branch Secretary  
Group V – Best Branch Runner  
Group V – Branch President Runner  
Group V – Branch Secretary Runner

**GROUP VI – (Membership 101 – 200)**

Dr. V.N. Rajasekaran Rolling Shield for Branch  
Dr. S. Sampath Award for Branch President  
Dr. D. Mohanraj Award for Branch Secretary  
Group VI – Best Branch Runner  
Group VI – Branch President Runner  
Group VI – Branch Secretary Runner

**GROUP VII – (Membership 61 – 100)**

Dr. P.K. Kesavan Award for Branch  
Dr. S. Ramadas Award for Branch President  
Dr. P. MannarMannan Award for Branch Secretary  
Group VII – Best Branch Runner  
Group VII – Branch President Runner  
Group VII – Branch Secretary Runner

**GROUP VIII – (Membership 61 – 100)**

Dr. J.G. Shanmuganathan Award for Branch  
Dr. R. Gunasekaran Award for Branch President  
Dr. C. Ganesan Award for Branch Secretary  
Group VIII – Best Branch Runner  
Group VIII – Branch President Runner  
Group VIII – Branch Secretary Runner

# LEADERSHIP QUALITIES

## PRESIDENT

*“What you are today is gift of God  
But what you become is gift to God”*

*“President ship is an art try to master it”*

*“President ship demand certain qualities, priorities,  
capabilities and responsibility of course with authority”.*

### *A PRESIDENT SHOULD BE*

<b>P</b>	Polite, Persuasive, Punctual & Patient.
<b>R</b>	Regal, Respectable, Responsible & Responsive.
<b>E</b>	Efficient, Eminent, Experienced & Enterprise
<b>S</b>	Smart-Self-motivated, Sincere & Selfless
<b>I</b>	Influential, Ideal, Innovative & Impartial
<b>D</b>	Decisive , Dependable, Diplomatic & Democratic
<b>E</b>	Effective in Communication, Emotionally controlled
<b>N</b>	Non-stop, Non-controversial Nobel & Neat in Execution
<b>T</b>	Talented, Trained, Tractful & Transparent.

### *A PRESIDENT MUST*

<b>P</b>	Plan, Prioritise, Participate & Practice.
<b>R</b>	Represent, Reorganize, Regularize & Rejuvenate
<b>E</b>	Envisage, Educate, Enthuse & Encourage.
<b>S</b>	Serve, Solve, Shoulder & Strengthen
<b>I</b>	Initiate, Improve, Involve & Inspire
<b>D</b>	Delegate, Direct Disburse & Deadline
<b>E</b>	Evaluate , Elevate, Energize & Empathies
<b>N</b>	Notify, Normalize Nourish & Nestle
<b>T</b>	Tolerate, Tackle Trust & Thank.

## TIPS TO BE FOLLOWED FOR THE HEALTHY BRANCH

- Be familiar with the specific purpose of the meeting.
- Come to the meeting well prepared.
- Play an active role in the preparation of the agenda.
- Be thorough with the items of the agenda.
- Equip with relevant notes, covering the vital items of the agenda.
- Keep at hand Constitutions, District & Bye laws.
- Begin the meeting on time after ensuring the quorum.
- Call the meeting to order in time.
- Make the members adopt the agenda.
- Involve new, different members each time in reciting, prayer, objects, codes, introducing, vote of thanks etc.
- The welcome speech and opening remarks should be brief and crisp.
- Recognize and welcome all the guests.
- Strictly adhere to the agenda of the meeting.
- Follow the time tested, established customs.
- After the approval, sign the minutes.
- Time schedule on each item of the agenda should be followed.
- Allow participation but not monopoly, irrelevance and cross talking.
- Prevent irrelevant discussion, offensive statements and excessive criticism.
- Be democratic and diplomatic in giving or denying chances.
- Try to observe the correct parliamentary procedure.
- However too much technicalities should not be allowed to smoothen the procedure.
- Maintain always dignity, decorum & discipline.
- Guidance can be sought from seasonal seniors.
- But never seek general guidance. Give precise and clear cut rulings.
- After the ruling, don't allow any rediscussion.
- Conduct voice, hand or ballot voting, in case of doubt.
- See that all motions and amendments are correctly worded.
- Nothing should contradict the Constitution & Bye laws.
- Give correct and unbiased rulings on points of order and questions of procedures.
- Working knowledge on parliamentary procedure is desirable.
- Acknowledge and thank the contributions of all.
- When naming an individual, add his/her height current office.
- Preserve unity and harmony during the course of the meeting.
- Don't leave the stage during the progress of the meeting.
- If unavoidable, hand over the chair to the V.P. in order, before leaving.
- Adjourn In the middle, only under inevitable circumstances.
- Avoid as much as possible casting votes.
- Declare the meeting closed or adjourned at the scheduled time and announce the date of the next meeting, if known.

## PARLIAMENTARY POWERS OF THE PRESIDENT

- Power to issue the notice for ordinary or special meetings. (*can be issued through the secretary*)
- Power to preside the meetings by calling to order. (*should be at the venue sufficiently early*)
- Power to conduct the proceedings (*as per the agenda*) (*Along with the secretary, must play a role in the preparation of agendas.*)
- Power and privilege to address every one on the stage individually. (*Others should address the president and others in general*)
- Power to sign the minutes of the previous meeting. (*After they have been approved by the members*)
- Power to decide who should speak first when there are several, members who would like to express their views. (*Should be impartial and allow no one monopolies the time*)
- Power to prevent irrelevant discussion. (*When the speaker is deviating from the main subject*)
- Power to refuse offensive statements involving unparliamentary language. (*Can interfere, point out and compel to withdraw*)
- Power to prevent making personal, subjective remarks. (*The speaker should talk about the subject, not about the person*)
- Power to cut short excessive hacking. (*No one should interrupt a speaker by shooting out questions and pass rude remarks*)
- Power to close the debate or discussion without allowing the usual sufficient voicing of the majority of the members present. (*When the president finds that the subject of the meeting faces defeat by the deliberate delaying or obstructing methods adopted by a few members, he/she can refuse to entertain further discussion*)
- Power to give a ruling on a question of procedure or a point of order. (*A point of order must deal with the procedure or conduct of the meeting laid down for various items that normally comes up in a meeting such as motions, amendments, voting, adjournment etc. The Chairperson should use his discretionary powers and give a ruling. The ruling on any matter of procedure is final and should be accepted by the members without question.*)
- Discretionary powers to refuse badly worded or ambiguous amendments and motion and refuse certain procedural motions. (*Chairperson has the power to point out the irregularities and have them put right*)
- Power to preserve order by banning offending members. (*when members persistently interrupt the proceedings or are involved in personal clashes, the chairperson has the power to direct the offenders to resume their seat and If they fail to comply with the order, may be removed from the meeting*)
- Power to conduct a voice vote (voice or show of hands) and to demand that poll be taken in case of any doubt about the result of the vote. (*It is also his /her power to announce the results clearly*)
- Power to give an ordinary or deliberate vote on any motion. (*Casting vote is exercised when the valid votes are equal. When there is a tie in votes, and the chairperson does not exercise his/her casting vote, the result is that the proposal is rejected.*)
- Power to adjourn the meeting under the following circumstances.
  - 1) When the meeting gets completely out of hand and the chairperson is unable to control the meeting inspite of taking every effort.
  - 2) When the meeting carries a motion to the above effect.
  - 3) When the business of the meeting has been completed.
  - 4) When the quorum lapses (*In such a case the Chairperson has the power to adjourn the meeting until such time the quorum is established.*)

## ROLE OF BRANCH SECRETARY

- Secretary is the limbs of the branch
- The Liaison Officer of the branch
- The Officer of Correspondence
- The Spokes-person of the branch
- The manager of the branch.
- Normally bears 50% to 75% work load of the administration
- Acts under the direction & supervision of
  - 1) The President
  - 2) Executive Committee
- \* The right hand of the President. Meets the President or committees as often as possible, atleast before each meeting.
- \* The main key to the success of a branch.

## THE SECRETARY HAS TO SEND

- Meeting notices & Invitations Timely. (*With important items of the agenda*)
- Minutes – After each meeting. (*Prepare as early as possible – mail to each member*)
- Monthly report to the state office concerned. (*with the list of the current members*)
- Photographs – sooner the better.
- Annual branch Budget – (*Follow closely Don't exceed; if exceeded, ratification*)
- Annual programme planning (*Follow it.*)
- Statements of Account – Every month at the B.O.D. Meeting. (*Monthly – Quarterly*)
- Semi-Annual-Annual.*)
- State Directory Particulars.
- Reports to the press with action photographs –sooner (Typed)
- Letters to Guest Speakers & Guests of Honour.
- Confirming, Reminding and Thanking with Photographs
- Annual Activity Report
- Report on the achievements Special Awards.
- Application for State President's Excellence Award.

## THE SECRETARY HAS TO MOTIVATE

Members to attend in large numbers.  
(Meetings, Projects & Functions)

- President (& Members) to start the meetings on time.
- President to form 'working' branch committees.
- President to conduct Orientation for branch Committees.
- Treasurer to issue Subscription Bills / Invoices.
- P & T to honour all the bills in time.
- Finance Secretary to present Statements of Account as B.O.D. Meetings.
- To launch a 'profitable' Fund Raising programme.
- President to observe the calend are of events in letter and spirit.

- To implement all possible National, IMA Programmes.
- To read out the Medical Ethics at every meeting.
- To frame and adopt a club Constitution & Bye Laws.
- To follow our Constitution & Bye laws.
- Each members to sponser at least a service project a year.
- To increase membership
- To conduct New Members' Orientation meet.
- To release club Bulletins regularly.
- To arrange Inter Branch meetings & Picnics.
- To make branch meetings regular, interesting and purposeful.
- To adjourn meetings in / on time.
- To excut a prestigious Permonent project involving the public.
- To promote intimacy and family participation. ( Meetings at the residences- picnics-family Functions Personal, Birth & Wedding Day Greetings)
- Attend and motivate others to attend all state / National IMA events.

## THE SECRETARY HAS TO KEEP & MAINTAIN

- |   |                                |
|---|--------------------------------|
| 1. Attendance Register.                         | d. Branch Awards               |
| 2. Minutes Books.                               | e. Fund Raising file.          |
| 3. Club Committee Chairperson's File & Reports. | f. Branch Election file        |
| 4. Members Address List with Addressogram.      | g. Monthly Report file.        |
| 5. Permanent Record books of:                   | h. Birthday file.              |
| a. Service Activities.                          | i. Wedding Day file            |
| b. Permanent Projects                           | j. Circular file.              |
| c. Branch Properties                            | k. Invitations                 |
|   | l. Photo Album                 |
|   | m. Bio Data of Guest Speakers. |

## SECRETARY & VARIOUS COMMITTEES

1. Ex-officio member in all the committees.
2. Direct the chairman of various Committees to act in the proper direction
3. Elect one Office Bearer for each wing at the Branch level and supervise their function.

## FINANCE SECRETARY - RESPONSIBILITIES

In a nutshell)

(In eight letters - “ABCD” & “FAST)

### A - B - C - D

# A

Every branch must have a financial Target & Agenda

#### **A. Annual Budgeting**

Consults, Prepares, Presents and gets the approval

# B

To carry out the items of the Budget, money is needed

#### **B. Billing Members**

Send invoices, demanding members' subscription

# C

Billing alone won't fill up the coffers of the association.

#### **C. Collecting Subscription**

A Herculean Task, but must be collected from everyone

# D

Only petty cash for minor expenses can be kept in hand

#### **D. Depositing in banks.**

Deposits in the bank(s), Recommended by the Board

### F - A - S - T

# F

Provides the Two hands as per the direction of B.O.D.

#### **F. Funding & Fund Raising**

Raises Fund for service projects.

# A

Pays mainly through cheques, files receipt and vouchers

#### **A. Accounting Accurately**

Mainly Day Book and Journal Meticulously

# S

Members must know the financial condition of the Club

#### **S. Statement of Accounts**

Submits Monthly, Quarterly, Half Yearly and Annual Statements

# T

Treasurer's reputation depends on the Transparency

#### **T. Transparency**

The health of the Club also depends on the Transparency

## BRANCH RECORDS TO BE MAINTAINED BY THE FINANCE SECRETARY

**DAY BOOK** : An account book of not less than 100 pages. Double entry system is advised. Day to day account of each receipt and expenditure should be entered date wise. Receipts on the left and expenditure on the right. The second column at the right may be used for balance. The particulars about income and expenditure should be entered with date and the serial number of bill / receipt / voucher, cheque etc.

**LEDGER** : There should be atleast two sections – Administration and Activity. There should be separate pages for each item – Heading in the Annual Budget – both Administrative and activity. As in the Day book, there should be columns for receipts – particulars with date – Expenditure and Balance.

**MEMBER'S SUBSCRIPTION LEDGER** : This Ledger is for the recording of the payments and arrears of each member.

**BANK PASS BOOKS** : Each branch may have accounts as recommended. Only petty cash should be kept in hand and rest must be deposited in the banks. The pass books should be updated. A branch can have only one account in bank but at branch level.

**BILL BOOK** : Every branch has to send its Semi-Annual or Annual itemized bill to each member in March end.

**ITEMIZED RECEIPT BOOK** : Closely following the itemized format of the branch Bill with provisions for carbon copies.

## BRANCH STATEMENT OF ACCOUNTS

- Presenting statements of accounts is one of the most important responsibilities of every branch treasurer.
- Some of the statements of Accounts: Monthly, Quarterly, Semi-Annual and Audited Annual statements of Account. Monthly statements of account should be submitted at every board of Directors meetings.
- Only after the submission of monthly accounts the Board can understand the financial condition of the club.
- There should be two separate statements of accounts – for branch administration and activities.
- Copies of these statements should be distributed to the Board of Directors present.
- Copies should be mailed to the B.O.D. who are absent.
- The treasurer has to explain if doubts are raised.
- The board has to approve the statement every time.
- The monthly administrative statement should furnish the income on 'important headings.'
- The administrative expenses in the month should be furnished under 'important headings' as in the branch budget /Ledger.
- The total income and expenditure, the excess income, how much in the bank and how many rupees in hand should be explained.
- Similarly, the income, expenditure, balance etc. in the activity account should also be given under important headings.

## BRANCH BULLETIN / WEBSITE

- Bulletin is an asset to each branch
- It is line wine
- Enjoy maximum readership.
- Should be regularly published and well maintained.
- A good bulletin can always keep members in good humour
- e.mail bulletin can be started.

### Contents shall be

1. IMA information
2. Synopsis of meeting and projects
3. Forth coming events of IMA
4. Birth and marriage anniversaries of members etc.
5. Scientific articles etc

## SUGGESTED PERMANENT PROJECTS FOR THE BRANCHES

*(Select according to their needs) (At least one permanent Project per Branch)*

- IMA Branch Building
- IMA Blood Banks
- IMA Free Clinics & Vaccination
- Passengers Waiting shed at highways.
- Traffic Islands.
- Signal Boards
- Hoardings on Road Safety
- Tree Planting
- Public Libraries
- School Building Projects
- School Furniture Projects
- Public Toilets
- Low cost houses for the poor
- Form and Maintain Park
- Waste Disposal Boxes
- Water supply projects
- Road “Direction Boards
- Gymnasium
- Benches for Railway Station , Bus Stands, Govt. Hospital etc.
- Child Care Centers
- Old Age caring centers
- Adopting PHCs, School, Rural Villages etc.

## **ELECTION & PROTOCOL IN IMA**

As per Indian Medical Association Tamilnadu State Branch Constitution Rules and Bye-Laws revised during September 2019, all the branch elections are to be completed by 31 Jan of every year.

**The following are the norms to be adhered on conducting election.**

1. Conduct Election for the Office bearers including the representatives for Central and State Councils.
2. Only those branches which conduct elections regularly shall be considered for awards / allowed to vote in election.
3. Any team of office bearers desirous of continuing another term of office shall do so with an approval of their General Body for a maximum of three consecutive years only.

**VARIOUS POSTS** : Other than Regular posts kindly have representatives for various wings and schemes

### **1. STATE COUNCIL MEMBERS:**

For first 100 members 3 members are eligible, i.e.

- i. The President of the Local Branch
- ii. The Hony. Secretary of the Local Branch
- iii. One Representative of the Local Branch

For every 50 members or part thereof, one representative is allowed.

### **2. CENTRAL COUNCIL MEMBERS**

20 – 100 Members – One representative

After 100 members – one additional representative for every 100 members or part thereof.

### **3. PROTOCOL FOR CONDUCTING MEETINGS**

#### **A. Model Invitation Format**

Welcome by : Branch President

Presided by : State President if he is invited for the Function.

Chief Guest : Any VIP

Guests of Honor : State Vice President / Hony State Secretary

Felicitations : Others

Vote of Thanks : Branch Secretary Or Branch Finance Secretary

**B. DAIS ARRANGEMENT FOR THE MEETING**

State President - in Centre

On his left- Chief Guest, State Office Bearers, HQs. Office bearers & Hony Branch Secretary.

On his Right- Branch President, Guests of Honor, Vice President, Joint Secretary & Treasurer of the branch

**C. PROTOCOL TO BE FOLLOWED FOR LEADING TO DAIS AND SEATING**

Branch President → State President → Chief Guest → Guests of Honor → State Office Bearers → National Office Bearers. (Branch Office Bearers to escort the Guests)

**D. PROTOCOL OF THE ORDER OF THE PROGRAM**

Collaring the Presidents by Respective Secretaries.

Tamil Thai Vazhthu / Prayer Song

IMA Prayer -

Physicians Prayer

Welcome Address – Branch President

Secretaries Report – Branch Secretary

New Office Bearers Taking Over – Acceptance Speech by New President

Presidential Address – State President

Chief Guest Address -

Guests of Honor Address -

Felicitations -

Vote of Thanks -

National Anthem –

**E. Note:**

A) Order of addressing during speech.

The Presiding officer should be addressed first.

The Chief Guest / Guest of Honour/ Speakers should be addressed next to the presiding officer, followed by others with regard to official rank in IMA.

B) Front Row must contain seats in Odd Numbers.

C) Kindly invite the Corresponding Zonal Vice Presidents for all important meetings.

D) Kindly follow the attached IMA Prayer as per IMA HQRS instructions.

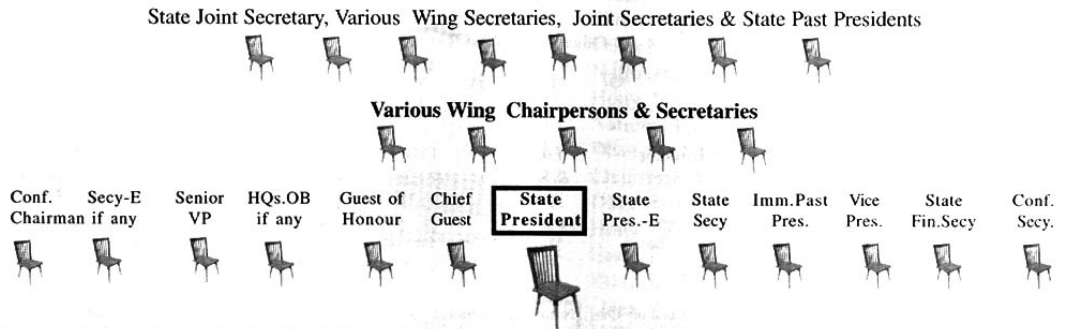
E) Branches shall not conduct any meetings on the day of State Meetings like State Council, State Conferences, etc., as per IMA TNSB Constitution.

# DIAS SEAT ARRANGEMENTS

## Installation Function & Other Functions IMA State Branch

**Right**

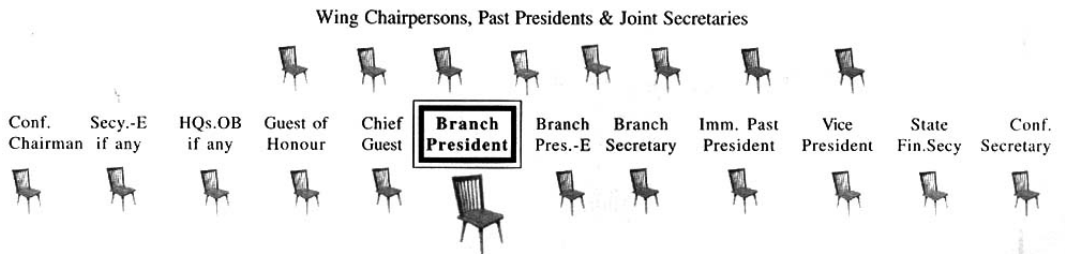
**Left**



<b>1<sup>st</sup> Row : Press / Media / Past IMA State Presidents</b>			
Audience	Audience	Audience	Audience
Audience	Audience	Audience	Audience

**NB:-** For Installation function, the Incoming President will sit on the left side of the present President and immediately after installation, they will exchange the Chairs

## Installation & Other Functions IMA Local Branch



Audience	Audience	Audience	Audience
Audience	Audience	Audience	Audience
Audience	Audience	Audience	Audience

**NB:-** For Installation function, the Incoming President will sit on the left side of the present President and immediately after installation, they will exchange the Chairs

**MODEL LETTER HEAD FOR LOCAL BRANCH**



**INDIAN MEDICAL ASSOCIATION  
BRANCH**

Address \_\_\_\_\_ Ph : \_\_\_\_\_ Fax \_\_\_\_\_  
e.mail \_\_\_\_\_ website \_\_\_\_\_

President Dr. _____ Address _____ Ph. Cell. e.mail _____	Hony. Secretary Dr. _____ Address _____ Ph. Cell. e.mail _____	Hony. Finance Secretary Dr. _____ Address _____ Ph. Cell. e.mail _____
---	---	---

Imm. Past President  
Dr. \_\_\_\_\_

President Elect  
Dr. \_\_\_\_\_

Vice President  
Dr. \_\_\_\_\_

Joint Secretary  
Dr. \_\_\_\_\_

Assistant Secretary  
Dr. \_\_\_\_\_

Central Council Members  
Dr. \_\_\_\_\_  
Dr. \_\_\_\_\_  
Dr. \_\_\_\_\_

State Council Members  
Dr. \_\_\_\_\_  
Dr. \_\_\_\_\_  
Dr. \_\_\_\_\_

Branch Executive Members

Chairman & Secretaries of  
various wings & Schemes

All communications intended for Branch Office  
should be addressed to the Hony. Branch Secretary



## MODEL INVITATION

Indian Medical Association  
\_\_\_\_\_ Branch

The President and the members of IMA \_\_\_\_\_ Branch solicit your august presence (with kith and kin) to \_\_\_\_\_ the function's name) at \_\_\_\_\_ (time) on \_\_\_\_\_ (date) at \_\_\_\_\_ (Venue).

Mr. / Dr. \_\_\_\_\_  
will be the Chief Guest

Mr. / Dr. \_\_\_\_\_  
will be the Guest of Honour

1. Mr. / Dr. \_\_\_\_\_

2. Mr. / Dr. \_\_\_\_\_  
will felicitate

\_\_\_\_\_  
President    Org. Secretary    Chairman, Organising Committee

N.B. : Protocols order should be followed in the invitation while printing the names of the Chief Guest / Guest of Honour / Felicitators etc. (Please refer protocol order)

## INVITATIONS IN SPECIAL SITUATIONS



Combined Functions of  
Headquarters / State / Local Branches

For the combined functions of National / State / Local branches, the names of the involved branches should be present on the top.

IMA State Branch & IMA Local Branch

The names of the President and Secretary of both the involved branches should be included at the bottom.

For IMA Wing / Scheme Meetings

For the Wing / Scheme Meetings / Functions of IMA Branches, the Name / Names of the involved branches as well as the name of the wings and emblems should be there on the top.

IMA State Branch & The Nursing Home Wing of IMA State Branch

In the bottom along with the President and Secretary the names of the Chairman, Secretary and Treasurer of the Wing should be included.

For Installation Functions

The names of the outgoing and incoming Presidents and Secretaries name should be printed at the bottom of the invitation.

## BRANCH REPORTING FORMAT

NAME OF THE BRANCH :	MONTH :
Membership	Important Medical Days
NHB	Public Program
Paramedical	State Project
AMS	National Project
CGP	State Level Meeting
PPLSSS	National Level Meeting
FSS	Standing Committee
CME	Bulletin / E - Magazines
Non Medical Topics	Website
Workshop	Attendance %
Women Dr's Wing	Innovative Programmes
Govt. Dr's Wing	SCM Attended
Cultural Sports	State IMA Officials / Govt. Officials involved
Family Meet & Tour / Picnics	TOTAL MARKS

### NOTES :

**MEMBERSHIP** : Percentage age increase of existing members additional mark if > 10 % females

**CME** : Practical Topics; Case Discussion

**NHB** : Membership; Administrative Topics Discussion ; CRISIS MANAGED - CRISIS TEAM; IMA PROTECTION FORCE; Workshop Meetings; Zonal/ District Meets

**PARAMEDICAL** : No.of Hospitals having Paramedical Courses; CMES/ Workshop for Paramedicals Nurses Day Celebration

**AMS** : Meeting with other Association; Workshop; Membership

**CGP** : NO.OF Members Doing IMA CGP Courses; Membership; Special Programs for General Practitioners

**PPLSSS** : Promotion; Medicolegal Case Discussion; Membership Increase

**FSS** : Promotion; Membership Drive

**WOMEN DR'S WING** : Activities on Women health to Public, Schools, Colleges; Activities on Social Aspects Related to Women implementing State WDW programs

**GOVERNMENT DR'S WING** : Membership; Discussion on Their Problems; Involving District Health Officials

**SPORTS & CULTURALS** : Activities; Branch Team; Competitions; Participation in Zonal State Level Activities

**PUBLIC MEETING** : Involving NGOS, LIONS, ROTARY, Other Service Associations; Awareness Programs

**STATE & NATIONAL LEVEL PROJECT** : Implementation of State And National Level IMA Projects

**STATE /NATIONAL MEETINGS** : Conducting state or national meetings

**BULLETINE/ E- MAGAZINE** : Publishing state /National Programs, Informations etc.

**WEB SITE** : Own web site/ periodical up dates.

**IMPORTANT MEDICAL DAYS** : PROGRAMS ON VARIOUS HEALTH DAYS.

**ATTENDENCE PERCENTAGE/ CREDIT HRS TNMC** : % age of members attending the programs. Total members attended/ total branch members \* 100

**TOTAL MARKS** : Monthly Review; Each program 2 marks.

- COPY -

Office of the Director General of Police  
Chennai - 4

Rc.No. 209008 / Con.IV(1)/2006

Dated : 07.10.2006

**MEMORANDUM**

Sub : Registration of cases against the fatal cases in Hospitals -  
filing of FIR u/s 304 (A) IPC - Instructions - Issued.

Ref : Chief Office Memo Re.No. 85234/L & O/Con./97, dated 27.05.1997.

1. Time and again instructions have been issued that whenever fatal complications are likely to occur in spite of best efforts taken by the Doctors in their Hospital and Nursing Homes, Police and fault with them and cases u/s 304 (A) IPC have been registered against them apart from sealing the hospital or nursing home. This kind of act brings down the reputation of the hospital as well as the moral of the doctor. Indian Medical Association, Tamil Nadu State has requested to issue suitable instructions in this regard.
2. The Supreme Court of India, New Delhi in their judgment has indicated that doctors should not be held criminally responsible unless there is a prima facie evidence before the court in the form of a credible opinion from another competent doctor preferably a Government doctor in the same filed of medicine supporting the charges of a rash and negligent act.
3. Based on the above judgment, it is once again reiterated that whenever a complaint of negligence on the part of Medical Practitioners / Doctors / Surgeons / Physicians is received no arrest filing of FIR u/s 304 (A) IPC should be resorted to before getting an opinion from a competent authority. Such cases will be duly investigated by the investigating officers and any action should be fully supported by documentary evidence, supervisory approval strengthened with the opinion of law officer.
4. The above instructions should be followed scrupulously in future.

Sd/-  
D. MUKHERJEE  
Director General of Police

To

All Superintendents of Police in Districts.  
All Commissioners of Police in Cities  
All Deputy Inspectors General of Police  
All Zonal Inspectors General of Police

Copy to : The Addl. Director of General of Police (L & O ) for Information

**/ True Copy / Forwarded by order /**

Sd/-  
Personal Assistant (Admn.)

**- COPY -**



**ABSTRACT**

Prosecution of doctors for offences of criminal rashness or criminal negligence in treatment modalities – Guidelines laid down by the Supreme Court of India – Aiding of – Instructions – Order issued.

Health and Family Welfare (Z1) Department

Thiruvalluvar Aandu 2039

Aani – 20

Dated : 4.7.2008

Read:

G.O. (Ms) No. 220

1. G.O.(Ms) No. 133, Health and Family Welfare Department, dated 9.7.2002
2. G.O.(D) No. 3, Health and Family Welfare Department, dated 2.1.2008
3. From the Hony. Secretary, Indian Medical Association, Madurai Branch letter dated 23.7.2007
4. From the State Secretary, Tamil Nadu Government Doctors' Association letter dated 18.12.2007
5. From the Registrar, Tamil Nadu Medical Council, letter No. TNMC/Government Comm. 2/2000 dated 30.1.2008

xxxxx

**Order :**

The issue of prosecution of doctors on the complaints of negligence of treatment modalities under section 304A of the Indian Penal Code has been engaging the attention of the Government for long and certain guidelines have been issued in the matter in the Government Orders first and second read above.

2. In the letter third read above, the Indian Medical Association, Madurai Branch has requested the Government to issue an order abiding the guidelines laid down by the Supreme Court of India on the arrest of doctors for treatment modalities. In the letter fourth read above, the Tamil Nadu Government Doctors' Association has requested the Government to bring a Government order against the arrest of doctors without establishing a prima-facie evidence for criminal case as laid down by the Supreme Court.

3. The Supreme Court of India in its judgement dated 5.8.2005 in Criminal Appeal Nos. 144-145 of 2004 (Jacob Mathew vs State of Punjab and Another) has laid down the following guidelines for the future which should govern the prosecution of doctors for offences of which criminal rashness or criminal negligence is an ingredient : -

A private complaint may not be entertained unless the complainant has produced prima facie evidence before the Court in the form of a credible opinion given by another

competent doctor to support the charge of rashness or negligence on the part of the accused doctor. The investigating officer should before proceeding against the doctor accused of rash or negligent act or omission, obtain an independent and competent medical opinion, preferably from a doctor in Government service qualified in that branch of medical practice who can normally be expected to give an impartial and unbiased opinion applying Bolam's test to the facts collected in the investigation. A doctor accused of rashness or negligence, may not be arrested in a routine manner (Simply because a charge has been leveled against him) unless his arrest is necessary for furthering the investigation or for collecting evidence or unless the investigation officer feels satisfied that the doctor proceeded against would not make himself available to face the prosecution unless arrested, the arrest may be withheld.

4. The Government have examined the request of the Indian Medical Association and the Tamil Nadu Government Doctors' Association for abiding the guidelines laid down by the Supreme Court of India in the matter taking account of the existing guidelines in the matter and issue the following orders

(a) In partial modification of the orders issued in the Government Order first read above, the investigating officers are directed to follow the guidelines laid down by the Supreme Court of India in its judgement dated 5.8.2005 in Criminal Appeal No. 144- 145 of 2004 (Jacob Mathew vs State of Punjab and Another) governing the prosecution of doctors for offences of criminal rashness or criminal negligence detailed in para 3 of his order.

(b) The orders issued in the Government Order second read above constituting a permanent enquiry committee to look into the complaints against doctors regarding negligence in treatment modalities are hereby cancelled.

(By Order of the Governor)

V.K. SUBBURAJ  
SECRETARY TO GOVERNMENT

To

The Director of Police, Chennai – 600 004.

The Hony. State Secretary, Indian Medical Association, Tamil Nadu State Branch.

The State Secretary, Tamil Nadu Government Doctors' Association.

Copy to

The Registrar, Tamil Nadu Medical Council, Chennai.

The Director of Medical Education, Chennai – 600 010.

The Director of Medical and Rural Health Services, Chennai – 600 006.

The Director of Public Health and Preventive Medicine, Chennai – 600 006.

All District Collectors.

The Home Department, Chennai – 600 009.

The Secretary to Chief Minister, Chennai – 600 009.

The Senior Personal Assistant to Minister (Health) Chennai – 600 009.

The Principal Secretary to Government, Home Department, Chennai 600 009.

The Health and Family Welfare (A/B/E/F) Department, Chennai – 600 009.

/ forwarded by order /

Sd/-  
SECTION OFFICER



GOVERNMENT OF TAMIL NADU  
2008

[Regd. No. TN/CCN/117/2006-08.  
[Price: Rs. 21.60 Paise.



# TAMIL NADU GOVERNMENT GAZETTE

**EXTRAORDINARY** PUBLISHED BY AUTHORITY

No. 364]

CHENNAI, TUESDAY, DECEMBER 2, 2008  
Karthigai 17, Thiruvalluvar Aandu-2039

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## TAMIL NADU GOVERNMENT GAZETTE EXTRAORDINARY

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The following Act of the Tamil Nadu Legislative Assembly received the assent of the Governor on the 28th November 2008 and is hereby published for general information:—

**ACT No. 48 OF 2008.*****An Act to prohibit violence against medicare service persons and damage or loss to property of medicare service institutions and for matters connected therewith and incidental thereto.***

WHEREAS, acts of violence causing injury or danger to life of medicare service persons and damage or loss to the property of medicare service institutions are on the increase in the State creating unrest among medicare service persons resulting in total hindrance of such services in the State;

AND WHEREAS, it has become necessary to punish the persons committing violence by making the offence as cognizable and non-bailable and to provide for compensation, for damage or loss caused to the property of medicare service institutions, to be determined by court;

BE it enacted by the Legislative Assembly of the State of Tamil Nadu in the Fifty-ninth Year of the Republic of India as follows:—

1. (1) This Act may be called the Tamil Nadu Medicare Service Persons and Medicare Service Institutions (Prevention of Violence and Damage or Loss to Property) Act, 2008.

Short title and commencement.

(2) It shall be deemed to have come into force on the 18th day of July 2008.

2. In this Act, unless the context otherwise requires,—

Definitions.

(1) "medicare service institution" means any institution providing medicare to people which is under the control of the State or the Central Government or local bodies including any private hospital having facilities for treatment of the sick and used for their reception or stay; any private maternity home where women are usually received and accommodated for the purpose of confinement and ante-natal and post-natal care in connection with child birth or anything connected therewith; and any private nursing home used or intended to be used for the reception and accommodation of persons suffering any sickness, injury or infirmity whether of body or mind, and providing of treatment for nursing or both of them and includes a maternity home or convalescent home;

(2) "medicare service person" in relation to a medicare service institution shall include,—

- (a) registered medical practitioners (including a person having provisional registration);
  - (b) registered nurses;
  - (c) medical students;
  - (d) nursing students;
  - (e) para medical workers;
- employed and working in such medicare service institutions;

(3) "property" means any property, movable or immovable or medical equipment or medical machinery owned by or in possession of, or under the control of, any medicare service person or medicare service institution;

(4) "violence" means activities of causing, any harm, injury or endangering the life or intimidation, obstruction or hindrance to any medicare service person while discharging his duty in the medicare service institution or causing damage or loss to the property.

3. Any person either by himself or as a member or as a leader of a group of persons or organization, commits or attempts to commit or abets or incites the commission of any act of violence shall be punished with imprisonment for a term which shall not be less than three years but which may extend to ten years and with fine.

Punishment for committing violence.

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## TAMIL NADU GOVERNMENT GAZETTE EXTRAORDINARY

Cognizance of offence.	4. Any offence committed under section 3, shall be cognizable and non bailable.	
Liability to pay compensation for the damage or loss caused to the property.	5. (1) In addition to the punishment specified in section 3, the person shall be liable to pay compensation for the damage or loss caused to the property, as determined by the court.  (2) If the person has not paid the compensation under sub-section (1), the said sum shall be recovered under the provisions of the Tamil Nadu Revenue Recovery Act, 1864 as if it were an arrear of land revenue.	Tamil Nadu Act II of 1864.
Bar of certain proceedings.	6. No claim for compensation for the damage or loss caused to the property shall be made by the medicare service person or medicare service institution, before any authority, under the Tamil Nadu Property (Prevention of Damage and Loss) Act, 1992.	Tamil Nadu Act 59 of 1992.
Operation of other laws not affected.	7. Save as otherwise provided in this Act, the provisions of this Act shall be in addition to and not in derogation of, any other law for the time being in force.	
Repeal and saving.	8. (1) The Tamil Nadu Medicare Service Persons and Medicare Service Institutions (Prevention of Violence and Damage or Loss to Property) Ordinance, 2008 is hereby repealed.  (2) Notwithstanding such repeal, anything done or any action taken under the said Ordinance shall be deemed to have been done or taken under this Act.	Tamil Nadu Ordinance 3 of 2008.

(By order of the Governor)

S. DHEENADHAYALAN,  
Secretary to Government,  
Law Department.

All Clinical Establishments should display this as per TNCEA



## முக்கிய அறிவிப்பு



**தமிழக அரசின் சட்டம் எண் 48 / 2008 தேதி 02-12-2008 சரத்தின்படி,** எந்த ஒரு நபரும் தனியாகவோ, கூட்டாகவோ மருத்துவமனை அல்லது மருத்துவச் சேவை புரிவோரைச் சேவை செய்ய விடாமல் தடுத்தாலோ அல்லது வன்முறையில் ஈடுபட்டாலோ அவர்களுக்குக் குறைந்தபட்சம் **3 ஆண்டுகள் முதல் அதிகபட்சம் 10 ஆண்டுகள் வரை கடுங்காவல் சிறைத் தண்டனையும், நஷ்ட ஈடாக அபராதத் தொகையும் விதிக்கப்படும்.**

இச்சட்டத்தின் கீழ் காணப்படும் குற்றச்செயல் எதுவும் ஜாமீனில் வெளிவர முடியாதவை. மருத்துவச் சேவையில் குறைபாடு இருப்பதாக எவரேனும் கருதினால் சட்ட ரீதியாக மட்டுமே தீர்வு காண முற்பட வேண்டும்.

- COPY -

2007 MLR 1

SUPREME COURT OF INDIA

Hon'ble Mr. R.C. Lahoti, chief Justice  
of India

Hon'ble Mr. G.P. Mathur, J.

Honm'ble Mr. P.K. Balasubramanyam J.  
Criminal Appeals Nos. 144-145 of 2004  
(From Judgement and Order dated 18-12-2002  
and 24.01.2003 of Punjab and Haryana High  
Court)

Decided on 05.08.2005

Dr. Jacob Mathew

vs.

State of Punjab & Anr.

**A. MEDICAL NEGLIGENCE – CONCEPT OF** – Difference in Civil and Criminal Law – Complaints under Consumer Protection Act - Actions for damages in Tort – Criminal complaints under section 304A or under section 336/337/338, Indian Penal Code alleging rashness or negligence on the part of doctors resulting in loss of life or injury of varying degrees to the patient – Essential components of negligence, as recognized, are 'duty', 'breach' and 'resulting damage' – If the claimant satisfies the court on the evidence that these three ingredients are made out, Doctor (professional) should be held liable in negligence – It is the amount of damages incurred which is determinative of the extent of liability in civil law – In criminal law it is amount and degree of negligence that is the determinative of liability – To fasten liability in Criminal Law, degree of negligence has to be higher than that required to fasten liability for damages in civil law – 'Simple lack of

care' such as will constitute civil liability is not enough. Paras 11,12,13,15.

**B. MEDICAL NEGLIGENCE – DEGREE OF SKILL AND CARE REQUIRED BY MEDICAL PRACTITIONER BOLAM'S CASE** – Test is the standard of the ordinary skilled man exercising and professing to have that special skill – A medical practitioner would be liable only where his conduct fell below that of the standards of a reasonably competent practitioner in the field – A mere deviation from normal professional practice is not necessarily evidence of negligence. Paras 20,22,25,26.

**C. MEDICAL NEGLIGENCE** – Res ipsa loquitur – Simply because a patient has not favourably responded to a treatment given by a physician for a surgery has failed, the doctor cannot be held liable per se by applying the doctrine of res ipsa loquitur (facts speak itself) – Inference as to negligence may be drawn from proved circumstances if cause of accident is unknown to the cause is coming forth from the professional – A care under section 304A, Indian Penal Code cannot be decided solely by applying the rule of res ipsa loquitur. Paras 27, 28,29.

**D. MEDICAL NEGLIGENCE CONCEPT OF** – Whether a different standard is applicable for recording a finding of negligence when a professionals, in particular, a doctor is to be held guilty of negligence – Held, Yes – Dealing with a case of medical negligence needs a deeper understanding of the practical side of medicine - Three considerations can be pointed out which any forum trying the issue of medical

negligence in any jurisdiction must keep in mind – Legal and disciplinary procedures should be properly founded on firm, moral and scientific grounds – Patients will be better served if the real causes of harm are properly identified and appropriately acted upon – Many incidents involve a contribution from more than one person. Paras 32,33

**E. MEDICAL NEGLIGENCE – JUDICIAL DECISIONS** – Review of Indian decisions – Conclusions summed up. Para 49

**F. MEDICAL NEGLIGENCE – CRIMINAL PROSECUTIONS** – Need for protecting doctors from frivolous or unjust prosecutions – A private complaint may not be entertained unless the complainant has produced prima facie evidence before the court in the form of credible opinion given by another competent doctor – A doctor accused of rashness or negligence, may not be arrested in a routine manner – Statutory Rules or Executive Instructions incorporating certain guidelines need to be framed by Governments in consultation with the Medical Council of India – Guidelines laid down by the Court. Paras 52, 53.

### **SUMMARY OF FACTS**

Complainant's father, suffering from cancer in an advanced stage, was admitted as a patient in a Private ward of a hospital, feeling difficulty in breathing. On his death, son of patient field an FIR with police station alleging that there was no doctor available for 20-25 minutes and oxygen cylinders required were not made available for the patient. It was alleged that the patient died because of the hospital having failed to keep available a gas

cylinder or because of the gas cylinder being found empty. The judicial Magistrate framed charges under section 304A, Indian Penal Code against the two doctors. The doctors field a petition for quashing of their criminal prosecution alleging that there was no specific allegation of any act of omission or commission against the accused persons. The High Court dismissed their petition.

The Supreme Court has held that the allegations in the complaint do not make out a case of criminal rashness or negligence on the part of the doctors.

### **HELD (SUPREME COURT OF INDIA)**

We sum up our conclusions as under:

1. Negligence is the breach of a duty caused by omission to do something which a reasonable man guided by those considerations which ordinarily regulate the conduct of human affairs would do, or doing something which a prudent and reasonable man would not do. The definition of negligence as given in law of Torts, Ratanlal & Dhirajlal ( edited by Justice G.P. Singh), referred to hereinabove, holds good. Negligence becomes actionable on account of injury resulting from the act or omission amounting to negligence attributable to the person sued. The essential components of negligence are three; 'duty', 'breach' and resulting damage'.

2. Negligence in the context of medical profession necessarily calls for a treatment with a difference. To infer rashness or negligence on the part of a professional, in particular a doctor, additional considerations apply. A case of occupational negligence is different from one of professional negligence.

A simple lack of care, an error of judgement or an accident, is not proof of negligence merely because a better alternative course or method of treatment was also available or simply because a more skilled doctor would not have chosen to follow or resort to that practice or procedure which the accused followed. When it comes to the failure of taking precautions what has to be seen is whether those precautions were taken which the ordinary experience of men has found to be sufficient; a failure to use special or extraordinary precautions which might have prevented the particular happening cannot be the standard for judging the alleged negligence. So, also, the standard of care, while assessing the practice as adopted, is judged in the light of knowledge available at the time of the incident, and not at the date of trial. Similarly, when the charge of negligence arises out of failure to use some particular equipment, the charge would fail if the equipment was not generally available at that particular time (that is the time of the incident) at which it is suggested it should have been used.

3. A professional may be held liable for negligence on one of the two findings: either he was not possessed of the requisite skill which he professed to have possessed, or, he did not exercise, with reasonable competence in the given case, the skill which he did possess. The standard to be applied for judging, whether the person charged has been negligent or not, would be that of an ordinary competent person exercising ordinary skill in that profession. It is not possible for every professional to possess the highest level of expertise or skills in that branch which he practices. A highly skilled

professional may be possessed of better qualities, but that cannot be made the basis or the yardstick for judging the performance of the professional proceeded against on indictment of negligence.

4. The test for determining medical negligence as laid down in Bolam's case, (1957) 1 WLR 582 (586) holds good in its applicability in India.

5. The jurisprudential concept of negligence differs in civil and criminal law. What may be negligence in civil law may not necessarily be negligence in criminal law. For negligence to amount to an offence, the element of *mens rea* must be shown to exist. For an act to amount to criminal negligence, the degree of negligence should be much higher i.e. gross or of a very high degree. Negligence which is neither gross nor of a higher degree may provide a ground for action in civil law but cannot form the basis for prosecution.

6. The word 'gross' has not been used in section 304-A of IPC, yet it is settled that in criminal law negligence or recklessness, to be so held, must be of such a high degree as to be 'gross'. The expression 'rash or negligent act' as occurring in section 304A of the IPC has to be read as qualified by the word 'grossly'.

7. To prosecute a medical professional for negligence under criminal law it must be shown that the accused did something or failed to do something which in the given facts and circumstances no medical professional in his ordinary sense and prudence would have done or failed to do. The hazard taken by the accused doctor should be of such a nature that the injury which resulted was most likely imminent.

8. *Res ipsa loquitur* is only a rule of evidence and operates in the domain of civil law specially in cases of torts and helps in determining the onus of proof in actions relating to negligence. It cannot be pressed in service fir determining per se the liability for negligence within the domain of criminal law. *Res ipsa loquitur* has, if at all, a limited application in trial on a charge of criminal negligence.

We may not be understood as holding that doctors can never be prosecuted for an offence of which rashness or negligence is an essential ingredient. All that we are doing is to emphasize, the need for care and caution in the interest of society; for the service which the medical profession renders to human beings if probably the noblest of all, and hence there is a need for protecting doctors from frivolous or unjust prosecutions. Many a complainant prefers recourse to criminal process as a tool for pressurizing the medical professional for extracting uncalled for or unjust compensation. Such malicious proceedings have to be guarded against.

So long as it is not done, we propose to lay down certain guidelines for the future which should govern the prosecution of doctors for offences of which criminal rashness or criminal negligence is an ingredient. A private complaint may not be entertained unless the complainant has produced prima facie evidence before the Court in the form of a credible opinion given by another competent doctor to support the charge of rashness or negligence on the part of the accused doctor. The investigating officer should, before proceeding against the doctor accused of rash or negligent act or omission, obtain an independent and competent medical opinion preferably from

a doctor in Government service qualified in that branch of medical practice who can normally be expected to give an impartial and unbiased opinion applying Bolam's test to the facts collected in the investigation. A doctor accused of rashness or negligence, may not be arrested in a routine manner (simply because a charge has been leveled against him. ) Unless his arrest is necessary for furthering the investigation or for collecting evidence or unless the investigation offer feels satisfied that the doctor proceeded against would not make himself available to face the prosecution unless arrested, the arrest may be withheld.

Reverting back to the facts of the case before us, we are satisfied that all the averments made in the complaint, even if held to be proved, do not make out a case of criminal rashness or negligence on the part of the accused-appellant. It is not the case of the complainant that the accused-appellant was not a doctor qualified to treat the patient whom he agreed to treat.

#### **CARE REFERRED**

1. Dr. Suresh Gupta v. Govt. of NCT of Delhi and Anr., IV (2004) SLT 940: III (2004) CCR 69 (SC): (2004) 6 SCC 422. Para.
2. R.v. Lawernce, (1981) 1 All ER 974 (HL) Para 13
3. R.v. Caldwell, 1981 (1) AII ER 961 (HL) Para 13
4. Andrews v. Director of Public Prosecutions, 1937 AC 576. Para 15
5. Syad Akbar v. State of Karnataka, (1980) 1 SCC 30, Paras 16,28
6. Reg v. Idu Beg, (1881) 3 AII 776. Para 17.

7. Bhalchandra Waman Pathe v. State of Maharashtra, 1968 Mh LJ 423. Para 17.
8. Michael Hyde and Associates v. J.D. Williams & Co. Ltd., 2001 PNLR 233 Para 19
9. Bolam v. Friern Hospital Management Committee, (1957) 1 WLR 582 (586) Para 20
10. Eckersley v. Binnie, (1988) 18 Con LR 1 (79) Para 21
11. Hucks v. Cole, (1968) 118 New LJ 469 Para 23
12. Maynard v. West Midlands Regional Health Authority (1985) 1 All ER 635 (HL) Para 24
13. Hunter v. Hanley, 1955 SLT 213 (217) Para 24
14. Krishnan and Anr. V. State of Kerala, IV (1996) CCR 58 (SC) (1996) 10 SCC 508. Para 28
15. John Oni Akerele v. The King, AIR 1943 PC 72. Para 38
16. Kurban Hussein –Mohamedalli Rangawalla v. State of Maharashtra (1965) 2 SCR 622. Para 39
17. Emperor v. Omkar Rampratap, 4 Bom LR 679 Para 39
18. Kishan Chand & Anr. V. The State of Haryana, (1970) 3 SCC 904. Para 40
19. Juggankhan v. The State of Madhya Pradesh, (1965) 1 SCR 14 Para 41
20. Dr. Laxman Balkrishna Joshi v. Dr. Trimbak Babu Godbole and Anr., (1969) 1 SCR 206. Para 42
21. Indian Medical Association v. V.P. Shantha and Ors. III (1995) CPJ 1 (SC); (1995) 6 SCC 651 Para 43
22. Poonam Verma v. Ashwin Patel and Ors., II (1996) CPJ 1 (SC); (1996) 4 SCC 332. Para 44.
23. Achutrao Haribhau Khodwa and Ors. V. State of Maharashtra and Ora., I (1996) CLT 523 (SC); (1996) CLT 523 (SC); (1996) 2 SCC 634. Para 45.
24. M/s. Spring Meadows Hospital and Anr. v. Harjol Ahluwalia through K.S. Ahluwalia and Anr., III (1998) SLT 684: I (1998) CPJ 1 (SC); (1998) 4 SCC 39. Para 46
25. Whitehouse & Jordan, (1981) 1 All ER 267. Para 46
26. State of Haryana and Ors. V. Smt. Santra, IV (2000) SLT 93; II (2000) CLT 152 (SC): I (2000) CPJ 53 (SC); (2000) 5 SCC 182. Para 47.

### IMPORTANT LAW POINTS

- The service which the medical profession renders to human beings is probably the noblest of all, and hence there is a need for protecting doctors from frivolous or unjust prosecutions.
- A private complaint may not be entertained unless the complainant has produced prima facie evidence before the court in the form of a credible opinion given by another competent doctor to support the charge of rashness or negligence on the part of the accused doctor.
- To hold in favour of existence of negligence, associated with the action or inaction of a medical professional, requires an in-depth understanding of the working of a professional as also the nature of the job and of errors committed by, chance, which do not necessarily involve the element of culpability.



2. The writ petition is filed by the Indian Medical Association through the Chairman of its Quackery Eradication Committee. The petition prays that action be taken against persons who pose themselves as doctors or persons who are qualified otherwise than doctors, prefixing the title 'Doctor (Dr.)' before their names in prescriptions and advertisements.

3. A similar matter had come up for consideration before this Court, being Writ Petition No. 22155 of 2009, wherein a direction was sought to take action against persons who are practicing medicine without any valid licence. That petition was disposed of by this Court by order dated 05.01.2010, directing the petitioner therein to furnish to the respondents therein, the names of persons who are allegedly practicing medicine without any valid licence; the respondents therein were directed to take action against such persons on receiving any such information.

4. Similarly, the petitioner herein may also furnish the names of such persons who, according to them, are prescribing allopathic medicine, administering allopathic treatment and using the prefix Doctor (Dr.) before their names in prescriptions and advertisements, to the Superintendent of Police as well as the District Medical Officer concerned. The learned Government Pleader as well as the learned Special Government Pleader assure that the authorities concerned will take necessary steps in accordance with law. The writ petition is thus disposed of. There shall be no order as to costs. Consequently, M.P. No. 1 of 2008 is closed.

Sd/-

Asst. Registrar

/ true copy /

Sd/-

Sub. Asst. Registrar

To

1. The Secretary to Government,  
Department of Health and Family Welfare,  
Government of Tamil Nadu,  
Fort St. George, Chennai – 9.
2. The Director General of Police,  
Chennai – 4.
3. The Director,  
Public Health and Preventive Medicine,  
DMS Complex, Teynampet, Chennai-18.

1 cc To M.s. K. Sridhar Associates, Advocate, SR. 11840

1 cc to the Government Pleader SR NO. 12206

WP 30259 / 08

HIGH COURT OF JUDICATURE	
MADRAS.	
S.R. No.	11840
Carbon Copy application	23/24/2008
Application Received	23/01/2008
Application Registered	23/01/2008
Copy made ready	04/02/2008
Copy Delivered	05/02/2008
Section Officer Census Section	

Writ Petition No. 30259 of 2008.

BVN (CO)

sra 03 / 03 2010



2. The petitioner is the former Chairman of the Legal Advisory Committee of the Indian Medical Association. The Association is keen eradicating the menace of quacks or unqualified medical practitioners, who despite not having the proper qualifications, are practicing medicine without any licence whatsoever. The writ petition is filed with a prayer to take action against such persons order to prevent innocent persons becoming victims at the hands of the quacks. In this regard, the Association has sent several representations to the respondents, the last one being dated 09.12.2008, and since the respondents have not responded thereto, the writ petition is filed seeking a direction thereon.

3. The learned Government Pleader points out a letter dated 02.10.2007 which is found in the typed set of papers filed along with the writ petition, issued by the Secretary to Government, Home Department and which is addressed to the Director General of Police, living directions to take action against such quacks.

4. It is well known that the menace of quacks is a continuing problem face throughout the state and this Court cannot issue a general direction to the respondents to take action against all such persons. The petitioner Association should furnish to the respondents, the name of such persons who are allegedly practicing medicine without any valid licence. We expect the respondents to take immediate action against such persons on receiving any such information from the petitioner Association,

5. The writ petition stands disposed of with the aforesaid observations and directions, but there shall be no order as to costs.

Sd/-  
Asst. Registrar

/ true copy /

Sd/-  
Sub. Asst. Registrar

To

1. The Secretary  
Home Department,  
Government of Tamil Nadu,  
Fort St. George, Chennai – 9.
  2. The Secretary  
Health and Family Welfare Department  
State of Tamil Nadu,  
Fort St. George, Chennai – 9.
  3. The Secretary to Government,  
Law Department,  
Fort St. George, Chennai – 9.
- 1 cc to Government Pleader, Sr. No. 676  
1 cc to Mr. S. Padmanaphan, Advocate, Sr.No. 226  
1 cc to the Government Pleader SR NO. 12206

WP. 22155 / 09

HIGH COURT OF JUDICATURE  
MADRAS.

S.R. No. 226

Carbon Copy Application

Application Received 05/10/10

Application Disposed 07/02/10

Copy Disposed 09/02/10

Section Officer  
Current Section

Writ Petition No. 22155 of 2009.

**- COPY -**

2007 Med LR 1157

SUPREME COURT OF INADIA

Hon'ble Mr. Justice Kuldeep Singh

Hon'ble Mr. Justice S. Saghir Ahmad

Civil Appeal No. 8856 of 1994

Decided on 10.05.1996

Poonam Verma

Vs.

Ashwin Patel &amp; Ors.

**(A) MEDICAL NEGLIGENCE – HOMEOPATHIC PRACTITIONER PRESCRIBING ALLOPATHIC**

**MEDICINES** – Actionable negligence – Practising Allopathic System of Medicine without being registered with the Medical Council of India or State Medical Council – Medical Council directed to initiate appropriate action – Indian Medical Council Act, 1956. (Paras 30 & 49)

**(B) MEDICAL NEGLIGENCE – BREACH OF DUTY** – Implied undertaking to use a fair, reasonable and competent degree of skill – Test is the standard of the ordinary skilled man exercising and professing to have that special skill. (Paras 14 to 16)

**(C) MEDICAL NEGLIGENCE – ALLOPATHIC SYSTEM OF MEDICINE** – Right to practice – Registration of persons possessing requisite qualifications – Consequences for breach of provisions of Indian Medical Council Act and State Medical Councils Act. (Para 31)

**(D) MEDICAL NEGLIGENCE – PATHOLOGICAL TESTS** – Doctors to advise in writing on a prescription setting out all the tests required to be done – Oral advice is contrary to the usual code of conduct of medical practitioners. (Para 42)

**SUMMARY OF FACTS:**

Husband of complainant, complaining of fever was examined by a doctor, registered Medical Practitioner in Homeopathy System of Medicine. The Doctor kept the patient on allopathic drugs for viral fever and thereafter for typhoid fever. When condition of the patient deteriorated, he was shifted to a Nursing Home as an indoor patient where the patient remained in an unconscious state and then died.

The complainant filed a complaint before the National Consumer Disputed Redressal Commission alleging that the Homeopathic Practitioner was negligent in administering strong antibiotics to the patient initially for the treatment of Viral Fever and subsequently for Typhoid Fever without confirming the diagnosis by pathological Tests and that the doctor was not qualified or even authorized to practice in Allopathic System of Medicine.

The National Commission dismissed the complaint while the Supreme Court held that the doctor practicing in Allopathy without being qualified in that system, was guilty of negligence per se. The Court awarded a sum of Rs.3,00,000/- as compensation for the death of the patient who was a Sales Manager.

**HELD (SUPREME COURT OF INDIA)**

It will be seen that Respondent No.1, had all along treated Pramod Verma under Allopathic System prescribing Allopathic Medicines, though he himself was registered as Medical Practitioner with the Gujarat Homoeopathic Medical Council as he had studied Homoeopathy for 4 years in the Medical College at Anand and had, thereafter, obtained a Diploma in Homoeopathic Medicine and Surgery. If, therefore, he had not studied Allopathy and had not pursued the prescribed course in Allopathy nor had he obtained any

degree or diploma in allopathy from any recognized Medical College, could he prescribe and administer allopathic medicines, is the question which is to be answered in this appeal with the connected question whether this will amount to actionable negligence. (Para 11)

Negligence as a tort is breach of a duty caused by omission to do something which a reasonable man would do, or doing something which a prudent and reasonable man would not do.

1. A legal duty to exercise due care;
2. Breach of the duty; and
3. Consequential damage. ( Para 14)

The breach of duty may be occasioned either by not doing something which a reasonable man, under a given set of circumstances would do, or, by doing some act which a reasonable prudent man would not do. (Para 15)

So far as persons engaged in Medical Profession are concerned, it may be stated that every person who enters into the profession, undertakes to bring to the exercise of it, a reasonable degree of care and skill. It is true that a Doctor or a Surgeon does not undertake that he will positively cure a patient nor does he undertake to use the highest possible degree of skill, as there may be persons more learned and skilled than himself, but he definitely undertakes to use a fair, reasonable and competent degree of skill. This implied undertaking constitutes the real test.

(Para 16)

A combined reading of the aforesaid Acts, namely, the Bombay Homoeopathic Practitioners Act, 1956 and the Maharashtra Medical Council Act, 1965 indicates that a person who is registered under the Bombay Homoeopathic Practitioners Act, 1959 can practice Homoeopathy only and that he cannot be registered under the Indian Medical Council

Act, 1956 or under the State Act, namely, the Maharashtra Medical Council Act, 1965 because of the restriction on registration of persons not possessing the requisite qualification. So also, a person possessing the qualification mentioned in the Schedule appended to the Indian Medical Council Act, 1965 or the Maharashtra Medical Council Act, 1965 cannot be registered as a Medical Practitioner under the Bombay Homoeopathic Practitioners Act, 1959, as he does not possess any qualification in Homoeopathic System of Medicine. The significance of mutual exclusion is relevant inasmuch as the right to practice in any particular system of medicine is dependent upon registration which is permissible only if qualification, and that too, recognized qualification, is possessed by a person in that System. (Para 34)

Since the law, under which Respondent No.1 was registered as a Medical Practitioner, required him to practice in Homoeopathy Only, he was under a statutory duty not to enter the field of any other system of Medicine as admittedly, he was not qualified in the other system, Allopathy, to be precise. He trespassed into a prohibited field and was liable to be prosecuted under Section 15(3) of the Indian Medical Council Act, 1956. His conduct amounted to an actionable negligence particularly as the duty of care indicated by this Court in Dr. Laxman Joshi's case (supra) was breached by him on all the three counts indicated therein.

(Para 39)

Where a person is guilty of Negligence per se, no further proof is needed. However, we may notice that Respondent No.1 started treatment of Pramod Verma for Viral Fever as it was "very much prevalent in the locality". Subsequently, he treated Pramod Verma for Typhoid Fever since it was "prevalent at that

time in the locality in question and neighboring locality in question and neighboring localities of Bombay". On both the occasion, treatment was given for fever which Respondent No.1 thought was prevalent in the locality and, therefore, Pramod Verma would also be suffering from that fever. He did not feel it necessary to confirm the diagnosis by pathological tests which would have positively established whether Pramod Verma was suffering from Typhoid Fever. Respondent No.1 has given out in his statement on oath, recorded by the Commission, that he had advised Blood test and Urine test but Pramod Verma did not get it done. All the prescriptions of Respondent No.1 have been filed by the appellant but on none of them any advice was written by Respondent No. 1 for Blood or Urine Test. We cannot ignore the usual practice of almost all the Doctors that when they want pathological tests to be done they advise in writing are required to be done. Admittedly, Respondent No.1 had not done it in writing. He says that he had advised it orally. This cannot be believed as this statement is contrary to the usual code of conduct of medical practitioners. (Para 42)

But we are of the positive opinion that Respondent No.1 having practiced in Allopathy, without being qualified in that system, was guilty of Negligence per se and, therefore, the appeal against him has to be allowed in consonance with the maxim *Sic utere tuo ut alienum non loedas* ( a person is held liable at law for the consequence of his negligence), leaving it to repeat to himself.

(Para 47)

RESULT : Complaint allowed.

CASES REFERRED:

1. Indian Medical Association v. V.P. Shantha, (1995) 6 SCC 651:1995 AIR SCM 4463 - (Para12)

2. Blyth v. Birmingham Waterworks Co., (1856) 11 Ex.781 - (Para 13)
3. Bridges v. Directors, etc. of N.L. Ry., (1873-74) 7 HL 213 - (Para 13)
4. Governor-General in Council v. Mt. Saliman, (1949) ILR 27 Pat. 207: AIR 1949 Pat.388 (Para 13)
5. Bolam v Friern Hospital Management Committee, (1957) 2 All. ER 118 - (Para 16)
6. Whitehouse v. Jordon, (1981) 1 All ER 267 (HL). - (Para 17)
7. Maynard v. West Midlands Regional Health Authority, (1985) 1 All ER 635 (HL) (Para 17)
8. Sidaway v. Bathlem Royal Hospital, (1985) 1 All ER 643 (HL). - (Para 17)
9. Chin Keow v Govt. of Malaysia, (1967) 1 WLR 813 (PC) - (Para 17)
10. Dr. Laxman Balakrishna Joshi v. Dr. Trimbak Babu Godbole, AIR 1969 SC 128 - (Para 19)
11. A.S. Mittal v. State of U.P., AIR 1989 SC 1570 - (Para 20)

#### IMPORTANT LAW POINTS

A Medical Practitioner registered to practice in Homeopathy only is under a statutory duty not to enter the field of any other system of Medicine and by prescribing allopathic drugs to a patient, his conduct amounted to an actionable negligence.

A usual practice of almost all the Doctors when they want pathological tests to be done, they advice in writing on a prescription setting out all the tests that are required to be done. A doctor advising the patient orally acts contrary to the usual code of conduct of medical practitioners.

- COPY -

IN THE HIGH COURT OF JUDICATURE AT MADRAS

DATED : 12.02.2010

C O R A M

THE HONOURABLE MR.JUSTICE K.K.SASIDHARAN

W.P. No.2907 / 2002

- |    |                          |     |             |
|----|--------------------------|-----|-------------|
| 1. | Dr. K. Abdul Muneer,     |     |             |
| 2. | Dr. Jalees Ahmed Siddiqi | ... | Petitioners |

Vs.

- |    |   |     |             |
|----|---|-----|-------------|
| 1. | The State of Tamil Nadu,<br>rep. By its Secretary to Government,<br>Health and Family Welfare Department,<br>Fort St.George, Chennai 600 009. |     |             |
| 2. | The Commissioner of Police,<br>Chennai City, Egmore, Chennai-8,   |     |             |
| 3. | Central Council of Indian Medicine<br>Institutional Area,<br>Janakpuri, New Delhi 110 058.  |     |             |
| 4. | Director of Medical Services,<br>Poonamalee High Road, Chennai  | ... | Respondents |

Writ Petition filed under Art.226 of the Constitution of India praying for a Writ of Mandamus forbearing the respondents 1 and 2 from in any manner preventing the petitioners from practicing allopathy medicine based on the training and teaching in the BUMS Degree course.

For petitioner : Mr. G. Rajagopalan, Senior Counsel  
for Mr. P. Tamilvel

For Respondent: Ms. B. Saraswathi, for R-3  
Mr. S. Gopinathan, A.G.P.,  
for respondents 1, 2 and 4.

O R D E R

The claim of Unani Medical Practitioners to practice in the Allopathic system of medicine without their name being registered under the Indian Medical Council Act, 1956 is the core issue to be decided in this writ petition.

**The facts :-**

2. The petitioners are qualified Unani medical practitioners. They have filed this writ petition for issuance of a Writ of Mandamus forbearing the respondents 1 and 2 from in any manner preventing them from practicing allopathic medicine based on the training and teaching in the BUMC degree course.

3. In the affidavit filed in support of the writ petition, the petitioners contended thus:-

(a) The petitioners have undergone Bachelor of Unani Medicine and Surgery Course and successfully completed the course and obtained a degree in BUMS. The BUMS Course was

for a period of 5 = years in which five years was for theory and six months for internship (house surgeon) which includes teaching and training in Allopathy medicines. The training was given in the Government hospitals.

(b) During the period of 5= years of training, the petitioners were taught with with allopathy medicines and the method of treatment. The BUMS syllabus includes handling of allopathy medicines and methods of treatment. The petitioners were given enough training in the Kilpauk Medical College Hospital to handle the emergency patients with allopathy medicines. In the first and second years, BUMS students attended common classes along with MBBS students on the subject of Anatomy, Physiology and Biochemistry.

(c) Unani medicines are given as treatment in petitioners clinic. Besides this, allopathy medicines are also given to the patients based on the emergency needs of the patients. In fact, the MBBS Doctors are also giving Indian Medicine treatment at times, when the patients requires such treatment. The Unani treatment method is a slow and steady one. Patients who approach the Doctors with disease at the early stage could be given treatment in Unani Method. However, when the patients comes at the later stage of disease, then allopathic method should be followed initially to bring the patient within the capability of withstanding the slow sided treatment of Unani medicines. Therefore, based on the stage of the disease, patients are treated with Unani and Allopathy medicines in the respective clinics of the petitioners and allopathy medicine is used only to the limited extent, in accordance with the teaching and training given to them while studying for the BUMS Degree course.

(a) The syllabus of the course of BUMS is not similar to that of MBBS Degree course. As per Section 15(2)(b) of the Indian Medical Council Act, 1956, “no person other than an medical practitioner enrolled on a State Medical Register shall practise medicine in any State”. The petitioners have not obtained any valid allopathic medical degree/diploma included in the Schedule to the Indian medical Council Act, 1956 and therefore, they do not have basic qualification to practice allopathic medicine. The petitioners have obtained BUMS Degree course and therefore, it is open to them to practice in the system of Unani Medicine and they are not entitled to practice Allopathy Medicine in any form. In case the patients requires allopathic treatment, those patients could be referred to registered allopathic medical practitioners. The syllabus of Unani medicine does not have the coverage of administering the allopathic medicines and the statement of the petitioners that they have the theoretical and practical knowledge in administering allopathic medicines is nothing but false.

15. The Supreme Court in *Dr. Mukhtiar Chand and others vs. State of Punjab and others*, 1998 (7) SCC 579, noticed the various systems of medicine in vogue in India. It reads thus :-

17. Before adverting to these questions, it would be useful to notice various systems of medicine in vogue in India and the statutes regulating them:

The systems of medicines generally prevalent in India are Ayurveda, Siddha, Unani, Allopathic and Homoeopathic. In the Ayurveda, Siddha and Unani systems, the treatment is based on the harmony of the four humours, whereas in the Allopathic system of medicine, treatment of disease is given by the use of a drug which produces a reaction that itself neutralizes the disease. In Homoeopathy, treatment is provided by the like.

18. Of the medical systems that are in vogue in India, Ayurveda had its origin in 5000 BC and is being practised throughout India but Siddha is practised in the Tamil-speaking areas of South India. These systems differ very little both in theory and practice. The Unani system dates back to 460-370 BC but that had come to be practised in India in the 10th century AD.

22. The claim of the petitioner is mainly on account of the training which they have undergone during their internship. According to them, they have undergone the course in Obstetrics, Gynecology, Medicine, Surgery, Pediatrics, E.N.T. and Ophthalmology in Kilpauk Medical College Hospital. On the basis of such experience, they claim that they are qualified for prescribing allopathy medicine in addition to the Unani system of medicine. However, on a perusal of the experience certificate, it is seen that the training itself was for a very brief period. For example, the petitioners were given training in surgery for a period of 14 days. Similarly, they have undergone training in Gynecology for a period of 7 days. In case the petitioners are of the view that they could treat patients with allopathic medicine on account of the brief training which they have undergone in KMC for the period indicated above, they would also claim that it is possible for them to undertake surgery and practice in gynecology on account of their training for 14 days and 7 days respectively.

24. In Poonam Verma vs. Ashwin Patel and others, 1996 (4) SCC 332, the question before the Supreme Court was regarding the allopathic treatment given by the first respondent, who was only a Homeo Practitioner and the ultimate death of the patient. The application filed by the widow of the deceased claiming compensation was dismissed by the National Consumer Disputes Redressal Commission against which, the appellant has filed an appeal before the Supreme Court. Supreme Court found that the first respondent in the civil appeal, was only a homeopathic practitioner. However, he administered allopathy and kept the patient on allopathic drugs initially for viral fever and thereafter for typhoid. When the condition of the patient deteriorated, he was shifted to a local hospital where he was treated as in-patient for two days and later, he was taken to Hinduja hospital in an unconscious state where after about 4= hours of admission, he died.

“37. It is true that in all the aforesaid systems of medicine, the patient is always a human being. It is also true that Anatomy and Physiology of every human being all over the world, irrespective of the country, the habitat and the region to which he may belong, is the same. He has the same faculties and same systems. The Central Nervous system, the Cardio-Vascular system, the Digestive and Reproductive systems etc. are similar all over the world. Similarly, emotions, namely, anger, sorrow, happiness, pain etc. are naturally possessed by every human being.

38. But merely because the Anatomy and Physiology are similar, it does not mean that a person having studied one system of medicine can claim to treat the patient by drugs of another system which he might not have studied at any stage. No doubt, study of Physiology and Anatomy is common in all systems of medicines and the students belonging to different systems of medicines may be taught Physiology and Anatomy together, but so far as the study of drugs is concerned, the Pharmacology of all systems is entirely different.

34. In the result, the writ petition is dismissed. No costs.



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