

DOCTORS' MAHAPANCHAYAT

INDIRA GANDHI STADIUM, NEW DELHI, 25.03.2018

RESOLUTIONS OF IMA – DOCTORS' MAHAPANCHAYAT

1. National Medical Commission Bill 2017& recommendations of Parliamentary Standing Committee of Health & Family Welfare thereon :

It is resolved that this “Mahapanchayat” on 25th March, 2018 at Indira Gandhi Indoor Stadium, New Delhi in ‘One voice’ out rightly rejects the proposed National Medical Commission Bill 2017 and the recommendations of the Parliamentary Standing Committee on Health & Family Welfare thereon in their entirety as the said Bill along with the recommendations of the Parliamentary Committee are out and out anti-poor, anti-people, pro-rich, undemocratic, sponsors crosspathy through the Bridge Course, undermines the sanctity of University examinations through the licentiate examination patronizes, privatization, promotes corruption through discretionary provisions, harbors anti-federalism vide marginalization of the state and the State Medical Councils, and State Governments by annihilating its representation autocratic in nature vide centralization of the total authority in the hands of the Central Govt. reducing down the entire composition of the NMC to a subservient and subordinate puppetry to the Govt. of India, subverts quality centricity of medical education, compromises with the affectivity of the healthcare delivery system, marginalizes the health profession as a whole to nullity and is grossly draconian in character.

2. Rural Healthcare:

It is resolved that this “Mahapanchayat” on 25th March, 2018 at Indira Gandhi Indoor Stadium, New Delhi in ‘One voice’ resolves that in order to provide for effective meaningful, equitable, accessible, handy and affordable healthcare to rural populace, Govt. of India shall ensure that the appropriation for health spending to the extent of 6% of the Gross Domestic Produce (GDP), additional rural hospital are created, care and cure facilities at the existing rural hospitals are up-dated and augmented, much desired governance is rationalized and heavily needed motivating robust policy of incentives is put into place

3. Violence Against Doctors:

It is resolved that this “Mahapanchayat” on 25th March, 2018 at Indira Gandhi Indoor Stadium, New Delhi in ‘One voice’ resolves that the Govt. of India must propose a strong Central Act prohibiting violence against doctors in all forms, hues, shades, matching with the enabling existing provisions in the Indian Penal Code, so as to evoke uniformity across the States in respect of its implementation and thereby extend much needed and desired immunity to the doctors while on duty from all forms of violence from any and all sources as they be and declare clinical establishments as safe zones in a real sense.

4. Clinical Establishment Act:

It is resolved that this “Mahapanchayat” on 25th March, 2018 at Indira Gandhi Indoor Stadium, New Delhi in ‘One voice’ resolves that the Govt. of India must incorporate through appropriate amendments in the Clinical Establishment Act so as to provide for to the effect whereby the stabilization clause is modified to first-aid, single doctors establishment is out of the ambit, purview, and jurisdiction, a single window registration, standard treatment guidelines are designated as advisory in nature, composition of CEA Committee to exclude police personnel and chargeability to be made in accordance with the market forces but in a transparent and accountable manner and to remove police personnel from CEA Committee.

5. Capping on Compensation:

It is resolved that this “Mahapanchayat” on 25th March, 2018 at Indira Gandhi Indoor Stadium, New Delhi in ‘One voice’ resolves that in the context of the material fact that there is a capping of compensation for any national calamity, railway accident, plane accident, sterilization death in the public sector, on the similar lines a capping of compensation is a must claimable from a doctor not based on the income of the patient as the chargeable fee by the doctor is not based on the patient’s income for it is not open for him to discriminate the patient on the basis of the income hence the computation of capping on compensation claimable from a doctor ought to be on the basis of the compensation package as is depicted in the Drug & Cosmetic Rule regarding the death or injury during the drug trial.

6. PCPNDT Act:

It is resolved that this “Mahapanchayat” on 25th March, 2018 at Indira Gandhi Indoor Stadium, New Delhi in ‘One voice’ resolves that the Govt. of India through prompt, urgent and immediate amendments in the PCPNDT Act must evoke the concept and operation of graded punishment, no penal provision for clerical errors the stipulated six month’s training and certification thereto for doctors with MBBS qualification to be prospective in operation and effect and exemption to non pelvic ultrasonologists from other procedural formalities except registration of the machine.

7. Criminal Prosecution of Medical Profession:

It is resolved that this “Mahapanchayat” on 25th March, 2018 at Indira Gandhi Indoor Stadium, New Delhi in ‘One voice’ resolves that the Govt. of India explicitly makes it loud and clear that there shall not be criminal prosecution of medical professionals in absence of the evidence based substantiation of the cardinal principle of mensrea and the prosecution shall be strictly in accordance with the guidelines laid down by the Hon’ble Supreme Court in its Pronouncement in the Jacob Mathew Vs. Union of India Case, and by incorporating the desired and appropriate amendments in the code of criminal procedure and Indian Evidence Act in accordance with the recommendations made by the Medical Council of India under the initiative of Indian Medical Association.

RESOLUTIONS OF IMA - FEDERATION OF MEDICAL ASSOCIATIONS (FOMA)

- 1 All the speciality organizations of India stand with Indian Medical Association under the banner of FOMA in fighting NMC in its current form. We appeal to the Government to address our concerns and demands.
- 2 All the treatment guidelines and protocols under Clinical Establishment Act should be through FOMA

RESOLUTIONS OF SERVICE DOCTORS

1. An All India Medical cadre, “Indian Medical Services” will be the answer to the unequal health status of Indian states. This empowerment of medical profession will go a long way in taking Public Health Services closer to people. We demand establishment of Indian Medical Services.

2. Uniform pay scales throughout the country is the legitimate right of the medical profession. We demand implementation of uniform pay scales for service doctors across the country.
3. We condemn adhoc contractual appointment of doctors in Government Service for a meagre salary. We demand abolition of contractual appointments.

RESOLUTIONS OF IMA - MEDICAL STUDENTS' NETWORK

1 No Bridge Course

At present MBBS is the basic qualification to practice modern medicine. This highly scientific degree is acquired after rigorous training for 5 and a half years in 14 subjects. Training of AYUSH doctors through bridge course of much shorter duration to allow them to practice modern medicine will be highly unscientific and usually detrimental to public health. It is also a big injustice to MBBS students who are undergoing a rigorous training module. Hence the medical students of this country reject bridge course in any form to safeguard scientific standards and Public Health. We unanimously urge to withdraw bridge course in modern medicine in any form.

2 Exit Exam

Medical students during the MBBS course have exams in 14 subjects comprising of more than 47 exams including theory ,clinics and viva. More than 50 internal exams are also conducted as part of MBBS course which is regulated by Medical Council of India and approved by the Government of India. All the exams which are conducted in very highly standardized format and they are held by universities which are both competent and approved. Admission to all medical colleges are regulated by common entrance exam conducted by government hence we fail to understand how is single new exam could be standard enough to surpass all the existing ones. The students in Chhatra Sansad urged strongly to withdraw licensing exam in any form .Uniformity could be made in current exams of MBBS if required. Students decided to fight with all means if exit exam is unilaterally imposed.

3 Federal structure of NMC

Federal structure of India ensure that all States get representation and hence opportunity to address the peculiar needs of each region. Lack of adequate representation will deprive them of this

opportunity. Hence ChhatraSansad has resolved to ask the government to make sure that all States get due representation in any medical regulatory authority.

4 The cost of Medical Education

The cost of Medical Education is the most disturbing factor in NMC. There is complete commercialization of Medical Education which is taking away the chances of lower socioeconomic class who are excellent in academics. The bill has failed to control the cost of Medical Education in the country. Government should regulate fee structure so that poor students could get access to medical education irrespective of socio economic status and region of dwelling.

5 Strike

It is decided by the ChhatraSansad to declare indefinite complete medical shutdown from April 2nd if national medical commission is not withdrawn. All medical colleges will be closed and medical students will boycott classes and exams on the call given by Dr Ravi Wankhedkar, National President of Indian Medical Association.

RESOLUTIONS OF CHHATRA SANSAD **INDIRA GANDHI INDOOR STADIUM, NEW DELHI- 24.03.2018**

Preamble

BRIDGE COURSE

How a person with 6 months of bridge course could be equated with a MD doctor who has studied for 8 long years..!! Who will be responsible for his mistakes..?Being an unskilled person will he be under the ambit of negligence?There is no exit test for bridge course..!!Unfortunately these bridge course half baked unskilled persons are being brought in the name of rural people. Our question is why second class healthcare for rural poor people? What is assurance that these unskilled people will really serve rural areas only?

EXIT EXAM

We have to pass on 14 subjects and 42 examinations in theory, clinicals and viva to become MBBS doctors. All our exams are University exams. By creating an additional exit exam what does the government want to prove?

FEDERAL STRUCTURE OF NMC

State Representation is being marginalised in NMC. Right to vote and Right to Contest is being sabotaged by NMC. An entire body and Chairman should only be elected. At least 51% members should be elected.

RESOLUTIONS

- 1 No bridge course in any form to AYUSH and non doctors is acceptable.
- 2 No EXIT exam in any form
- 3 Withdraw NMC Bill.

Dr. Ravi Wankhedkar
National President, IMA

Dr R N Tandon
Hony. Secretary General, IMA

Dr. A.Marthanda Pillai
Chairman, Action Committee, IMA