MEDICAL
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Medical Reimbursement Rules

- In case of referral from Rly. Hospital to Non Rly. Hospital by Rly. Medical Officer – Full reimbursement.
- In emergent circumstances, without referral GM/AGM can sanction reimbursement of medical expenses, as per following limit –
  
  a) For treatment taken in private hospital – up to Rs. 5,00,000/-, including pacemaker.
  b) For treatment taken in recognized/trust hospital – up to Rs. 5,00,000/-, including pacemaker.
  c) For treatment taken in Govt. hospital – Full reimbursement, including pacemaker.

DRMs are delegated powers to sanction the claim up to Rs.25,000/- per case & with ceiling limit of Rs. 2,00,000/- per year only, with concurrence of associate finance for reimbursement of medical expenses in case of treatment taken in emergency at Govt. or recognized hospital. Emergency has to be later confirmed by authorized railway medical officer, post-facto.

- The reimbursement powers shall be exercised by GM/AGM personally duly scrutinized by CMD and concurred in by FA&CAO, while in case of Production units, the case may be scrutinized by CMS and later by concerned Zonal Railway CMD if case is referred to Railway Board.
- Reimbursement claim above these limits have to be referred to Railway Board.
- The claim has to be preferred within 6 months from the date of completion of treatment.
- The Rly emp. Should prefer his claim in the prescribed form along with necessary documents like essentiality certificate of the Rly. Med. Officer, counter signed bills etc.
- Reimbursement in case of special investigations like lab tests, USG, endoscopy etc. done even in private hospital but on referral.
  
  a) claims up to Rs. 5000/- for each test w.e.f. 30.4.07 can be sanctioned by MD/CMS/MS.
  b) claims above Rs, 5000/- & up to Rs.10,000/- to be sanctioned by CMD in consultation with FA&CAO.

For CT Scan/MRI done at Govt./Recognized/Pvt. hosp. – MD/CMS/MS empowered to reimburse up to Rs.10,000/- in consultation with two senior doctors (Physician & Surgeon).

- For IOL surgery done in Govt. hospital,
(when facility not available in Rly. Hospital) - Full reimbursement,

- **For IOL surgery** done in non-railway/ non-recognized hospital (when facility not available in Rly. Hosp.) - Actual cost or Rs.12,000/- whichever is less, will be reimbursed. Stringent scrutiny to be made by Ophthalmologist and only complicated high risk cases to be referred to non railway hospitals with adequate justification in each case.

- Amendment to para 666 (i) – Reimbursement of cost of VVI Pace Maker.

   If a beneficiary on production of valid documents and on the recommendations of Authorized Medical Officers (AMOs) in case the implementation has been done at Govt./Private hospital, in emergent circumstances the reimbursement is up to Rs. 60,000/-.  

_Sanction of Advance Payments up to the reimbursement part of anticipated cost of treatment up to Rs. 5,00,000/- (including pacemaker cost of Rs. 60,000/- per case) whichever is less by GM is case of referred to Govt. Hospital and in case of referred to Recognized hospital with recommendation from CMD and concurrence by FA&CAO. In certain cases, power may be re-delegated to DRM of Division and associate finance._

   _Powers of GM are enhanced to release advance payment up to Rs. 4 lakhs per case directly to Pvt. non-recognized hospitals provided the patients has been referred on recommendation of Medical Board. AGM can exercise power upto Rs. 2 lakhs in each case._

_Hearing aids_- Amendment to Para 667-Powers delegated to CMDs for sanctioning the cost raised from Rs.5,500/- to Rs.20,000/-. Cost exceeding Rs.20,000/- to be referred to Railway Board by CMDs duly concurred by FA&CAO.

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Medical Examination

Scope

Medical Examination of candidates for appointment to the gazetted railway service
Medical Examination of candidates for appointment to Non-Gazetted Railway services
Medical Examination of serving Non-Gazetted Employee.

Physically handicapped:- Blind, The deaf, The orthopedically handicapped
Periodical Re-Examination of serving employees (PME)
Re- Examination before promotion to higher medical category.
Re- Examination on revision of Medical Classification.

Medical Examination of employee on promotion to higher classes
Medical Examination of railway employee on promotion from Non Gazetted to gazetted posts
Medical Examination of Ex-Service men who has been re-appointed in Railways
Medical Examination of members of Railway Claims Tribunals.
Special Medical Examination

Objectives

To secure continuous effective service and without interfering with his duties
To prevent early pension of payment in case of premature death

No person will be deemed qualified for admission to public service who shall not qualify
the government, or the appointing authority, as the case may be, that he has no
disease, constitutional affliction, bodily infirmity unfitting him or likely to unfit him for that
service

Gazetted Railway Services
Technical Services:-
1) Railway Engineering Services (Civil), Electrical, Signal and Mechanical
2) Indian Railway Traffic Services.
3) Special Class Railway Apprentices
4) Posts in Marine Establishments
5) Indian Railway Medical Services
**Gazetted Railway Services**

**Non Technical:-**
1) Indian Railway Accounts Service  
2) Indian Railway Stores Service  
3) Railway Protection Force  
4) Railway Board Secretariat Services - Class I and Class II  
5) Chemists and Metallurgists  
6) Indian Railway Personnel Services & all other Class I & Class II Services on Railways which are not connected with the train working or use of trolleys.

**Physical Examination**

Height:  
Chest:  
Free from congenital deformities, infectious, contagious and chronic diseases.  
Males: 152cms  
Females: 150cms  
Males: 79 cms-84 cms  
Females:74-79

**Visual Standards**

**Non Gazetted Railway Employee**

Authorized Medical Examiner:- D.M.O., and above  
Physical Examination:- Should be physically fit. Free from congenital deformities, chronic diseases, contagious and infectious diseases.

**Classification on the basis of Visual Standards for Non-Gazetted:**

**Classification Group A** (Vision tests required in the interest of public safety)

- A-1: Footplate staff Rail Car Drivers.  
- A-2: Other running staff, Points man, Cabin man, Station Maters & Other Staff in operative control of Signals.  
- A-3: Loco, Signal and Transportation Inspectors, Staff authorized to work trolleys, Yard Supervisory staff, Road Motor Drivers and Gate Keepers.

**Classification Group B:** (Vision tests required in the interest of the employee himself or his fellow workers or both.)

- B-1: Such Station and yard non supervisory staff, Permanent Way Masteries, Gang Mates, Key men, Railway protection staff.  
- B-2: Steam crane drivers, mechanics, Electrical power house staff etc.

**Classification Group C:** (Vision tests required in the interest of administration only)
- C-1: Ministerial Staff, School Teachers, and other staff.
- C-2: Safaiwalas, Peons, Malis, Watchmen etc.

**Visual Standards**

**ME - Candidates**
Before training, if there is training before appointment.
Before appointment, if there is no training

**PME (Periodical Medical Examination)**

- A1, A2, A3—Every four years till 45 yrs. and then every two years till 55 yrs. and there after annually till retirement.
- B1 & B2---On attaining the age of 45 yrs. and there after every 5 yrs.
- RPF—Every three years until retirement SI, ASI: At 45 yrs. and there after every 5 yrs.
- C1 & C2: No PME

**Special Medical Examination**

- After a long absence, and produces a PMC for more than 90 days.
- After an accident the running staff is subjected to special PME.
- If the employee’s behavior is consistently odd, then again special PME can be requested for.

*The requisition for special PME should be given by not less than Class II officer.*

**CONCLUSIONS**

- **MEDICAL EXAMINATION** ENSURES SELECTION OF PHYSICALLY FIT PERSONNEL, WHO DO NOT BECOME A LIABILITY TO THE GOVERNMENT.
- **PERIODICAL MEDICAL EXAMINATION** ENSURES CONTINOUS PHYSICAL FITNESS OF SERVING EMPLOYEES.
Medical Boards

Comprises of 03 (Three) Medical Officers. Senior most person among the three will be chairman and one of the members should be Physician and another Surgeon. Also an Ophthalmologist and Lady Medical Officer can be part of board as optional.

Classification of Medical Board:

Obligatory:-

A) Gazetted Railway Employees

i) At the time of appointment
ii) For invalidation from service on account of ill-health
iii) For commutation of pension, if the application of employee for commutation of pension does not reach Head Qtr. Office within one year of retirement.

B) Non-Gazetted Employees:

i) For invalidation from service on account of ill-health.
ii) For commutation of pension

Optional:-

- Prior to issue of certificate of alleged fraud or malingering or clinical difficulty
- Prior to issue of certificate of injury under WCA
- Prior to issue of certificate of Unfitness or AEMG
- Where CMD desires a Board is desirable for special reasons.

Note:-

Inclusion of Ophthalmologist is not necessary in the case of second medical board, when a candidate is declared unfit for reasons other than visual defects.
DECATEGORISATION (AEMG)

When an employee is considered medically unfit for the original job (even after light job for six months) but fit for the other job than suitable permanent alternative employment in the same category or a lower category is given.

A certificate to this effect in the prescribed format to be issued.

Decategorisation (AEMG) can be on basic of:

- Visual Acuity Defect
- Physical Disability or certain disease conditions

GENERAL GUIDELINES

- Decategorisation (AEMG) is done normally after a period of six months.
- Recommendation for light duty for a period of three months followed by another period of three months. These are given not below the rank of DMO or above.
- The employee has to report sick to his Authorized Medical Officer.

ON VISUAL GROUND

- If employee in aye one category operated for cateract.
- Visual acuity not reaching upto prescribed STD.
- No Relaxation upto 6 years of service in a1 & A2
- Defective color vision
- Decategorised driver having vision of A2 will be allowed to work as shunter.

- Should be given after expiry of the period of six months.
- Recommendation should be general and not specific.
- Should be examined by the Medical Officer not below JAG.
- CMS/MS Incharge is the Accepting Authority.
- RPF staff – Approval of CMD required
- Specialist opinion in case of decategorisation after six months of light duty in case of epilepsy.
Medical Certification
(An abstract from medical manual)

A. For Non Gazetted Employees

- Authorized Medical Officer - medical officer within whose jurisdiction the employee is head quartered or specially nominated.
- Competent Railway Doctor – empowered to issue sick, fit, duty & change of air certificate.

1. Different Certificates Issued By Railway Doctor
   1. Sick Certificate: issued to employee when reporting sick.
   2. CSC / Interim Certificate: issued when sick period is extended
   3. Fit Certificate: when employee becomes fit to resume
   4. Transfer Cert. For transfer to HQ of the employee
   5. Certification for recommendation for change of air –when change of air becomes must for fast recovery
   7. Invalidation Certificate—unfit for railway service
   8. IOD- Certificate – injured on duty

   Attendance during sickness- as per instructions of railway doctor.

   Three days certificate from RMP (Private)- do not require Duty Certificate from railway doctors.

Discharge from sick list

- when absent & not attending railway hospital (under sick list)
- In cases of AEMG
- In cases of death
- In cases of medical invalidation

2. Authority to issue different certificates; for particular period

   1. Sick & Fit Certificate
      - ADMO - Up to Four months
      - DMO/ Sr. DMO - Up to Nine months
      - MS/CMS, I/c of Hosp/Div. - Up to Eighteen months
      - CMD - More than 18 months

   2. Certificate for recommendation for change of air or recuperation.
      - ADMO - Nil, may recommend to DMO/MS
      - DMO/Sr.DMO - Up to two months
- CMS - Up to Nine months
- CMD - More than nine months

3. Invalidation Certificate
- Medical board is essential
- Recommendation to CMD for acceptance

B. For Gazetted Employees

1. Authorized Med. Officer - CMS I/c at Div .HQ, ADMO/DMO/Sr.DMO/MS I/c at places other than Div. HQ (M.O. in charge of the unit).
2. Sick/CSC/Fit Cert. in triplicate, countersigned by I/c.
3. No provision of Private Medical certification.
4. Intimation to concerned DRM/ HOD / Branch Officer.
5. Intimation /report to CMD (if more than10days).
6. Invalidation Certificate - by medical board after acceptance of CMD.
7. Grant of leave on basis of medical cert. by competent authority.

C. Rules for Certification in favour of RPF Staff

- Sick memo from controlling officer (RPF).
- No sick certificate without sick memo.
- Declaration in triplicate as per proforma.
- In the OPD sick certificate up to 7 days.
- If more than 7 days, detailed report to MS/CMS with copy to RPF officer.
- In case of indoor treatment, sick certificate up to 14 days at a time after discharge.
- One medical officer nominated for RPF sickness cases.
- In emergency, first treat the staff, take declaration & then ask for sick memo.
- In case of RPF staff on leave / away from HQ sick memo from I/C RPF post/ SM who will intimate the concerned RPF officer.
- Same rule for transfer certificate
- Intimation to RPF officer by sending one copy of declaration taken in triplicate.

Declaration by RPF Staff
I am not feeling well. I may please be issued a medical certificate w.e.f. ----. I shall bring/I have brought sick memo from my officer/supervisor i.e.----
I declare that -
1. I am/am not under order of transfer, temp/emergency duty or under D&A action.
2. I am on sanctioned leave w.e.f --- to ----.
3. I was not on sick list/ declared fit by any Rly. /Pvt. Doctor prior to this date.
Or
I was on sick list with --- & have been given fit /transfer certificate on ---.

Signature
Medical Treatment & Attendance Rules  
(An abstract from medical manual)

- Railway Beneficiaries – Employees with family members & dependant relatives (as defined in the pass rules).
- Retired Employees (Registered under RELHS).
- Officers and Staff of CRS-Free
- Audit staff – Free if opted for Railway facility
- Railway employees on Deputation to RITES, IRCON etc. payment on the basis of per capita expenditure.
- Railway employees on deputation with Trade Unions – Free
- Trade Union officials who are ex Railway employee and at All India / Zonal Level – Free up to retirement age.
- Employees of Quasi Railway Organizations. e.g. Co-operative society, Railway Institute, Officer’s Club
- Free OPD treatment to self and family
- Indoor treatment free to self but on payment for family.
- GRP Personnel- Med. Facilities if agreement of State Govt. with Railway
- Private servants – Free OPD treatment for grievously while carrying passenger’s luggage routine illness, 40% charges for indoor treatment.
- Railway Contractors& their labour- No free treatment.
- Licensed Porters – Free OPD treatment to self & family, free indoor treatment to self if injured.
- Outsiders – No free treatment except family planning operation and immunization.
  Consultation charges Rs.40/- valid for 15days and separate charges for investigations, indoor treatment, Surgery etc.
- Railway passengers falling ill on train – Consultation fee Rs.20/- & separate charges for medicines supplied.
- Freedom Fighters Travelling on a valid 1st class pass – Free Railway Medical Facilities.
- Passenger amenities committee- free med. Facilities to its members.
- Medical attendance at residence – Free for Railway employees, visit fee for family members.
- Special provision for female & Child beneficiaries – They may directly obtain treatment from private hospital where no railway / govt. hospital & get reimbursement.
- Widow mother in law of the widow on her compassionate ground appointment (if income of widow mother-in-law within prescribed limit).
• Medical treatment of Railway Passengers involved in accidents/untoward incidents-sending them to nearby Govt/Railway/private Hospital( If others are not available)- Emergency and Essential treatment only

• Trespassers-Providing emergency medical treatment and also sending to nearby Govt. hospital. This aid does not bestow any right to the injured person to claim compensation cover under section 147 and 156 of IRA 1989.

• Minister of Rlys, MOSR, Dy. Minister Rlys, considered under RELHS-97 after they demit office.

NOTE:

Benefits under the RELHS –97 Scheme –

They are eligible for-

a) Ambulance services
b) Medical passes
c) Home visits
d) Medical attendance for first two pregnancies of married daughters at concessional rates.
e) Treatment of private servants as applicable to serving railway employees.

Special identification cards are issued duly affixing photographs of married daughters with clear instructions on the card.

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