

CHAPTER V
MEDICAL EXAMINATION

**Section A:
Medical Examination of Candidates for appointment to the
Gazetted Railway Service.**

501. Introduction:-(1) The standards of physical fitness to be adopted should make due allowance for the age and length of service, if any, of the candidate concerned.

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

(3) It should be understood that the question of fitness involves the future as well as the present and that one of the main objectives of medical examination is to secure continuous effective service, and in the case of candidates for permanent appointment, to prevent early pension or payment in case of premature death. It is at the same time to be noted that the question is one of likelihood of continuous effective service, and that rejection of candidate need not be advised on account of the presence of a defect which, in only a small proportion of cases is found to interfere with continuous effective service.

(4) Medical examination of candidates for appointment to Gazetted Railway service includes :-

(i) general physical examination

(ii) vision tests

(5) Details of these examinations are given below

502. General Physical examination:- (1) To be passed as fit for appointment, a candidate must be in good mental and bodily health and free from any physical defect likely to interfere with the efficient performance of his duties of appointment.

(2) In the matter of the co-relation of age, height and chest girth of candidate it is left to the medical board to use whatever co-relation figures are considered most suitable as a guide in the examination of the candidate. If there be any disproportion with regard to height, weight and chest girth, the candidate should be hospitalised for investigation and X-ray of the chest taken before the candidate is declared fit, or not fit, by the board.

(3) However, for certain services, the minimum standard for height and chest girth of male and female candidates should be as follows:-

		Height (cm)	Chest girth fully expanded (cm)	Expansion (cm)
Candidates:- Railway Engineering Services (Civil, Electrical, Signal and Mechanical), Transportation (Operating and Commercial)Departments, Railway Protection Force, the posts in the Marine Establishment and Special Class Railway Apprentices.	Male	152	84	5
	Female	150	79	5

Note:- (i) The minimum height prescribed can be relaxed in case of candidates belonging to races such as Gorkhas, Garhwalis, Assamese, Nagaland tribal, whose average height is distinctly lower.

(ii) The candidate's height will be measured as follows:-

He will remove his shoes and be placed against the standard with his feet together and his weight thrown on the heels and not on the toes or the sides of the feet. He will stand erect without rigidity and with heels, calves, buttocks and shoulders touching the standard, the chin will be depressed to bring the vertex of the head level under the horizontal bar, and the height will be recorded in centimetres and part of centimetres rounded to the nearest half.

(iii) The candidate's chest will be measured as follows:-

He will be made to stand erect with his feet together and to raise his arms over his head. The tape will be so adjusted round the chest that its upper edge touches the inferior angle of the shoulder blades behind and lies in the same horizontal plane when the tape is taken round the chest. The arms will then be lowered to hang loosely by the sides and care will be taken that the shoulders are not thrown upwards or backwards so as to displace the tape. The candidate will then be directed to take a deep inspiration several times and the maximum expansion of the chest will be carefully noted and the minimum and the maximum will then be recorded in centimetres rounded off to the nearest half centimetres.

(4) In recording the height and chest measurements, fractions of less than half a centimetres should not be noted.

(5) The candidate will be weighed and his/her weight recorded in kilograms; fraction of less than half a kilogram should not be noted.

(6) The following additional points should be observed:-

(a) that the candidate's hearing in each ear is good and that there is no sign of disease of the ear. In case it is defective, the candidate should be got examined by an E.N.T specialist provided that the defect in hearing is remediable by operation or by use of hearing aid, a candidate cannot be declared unfit on that account provided he has no progressive disease in the ear (for further guidelines see sub para (7) below)

(b) that the speech is without impediment

(c) that his/her teeth are in good order and he/she is provided with dentures, where necessary, for effective mastication (well filled teeth will be considered as sound);

(d) that the chest is well formed and chest expansion sufficient; and that his/her heart and lungs are sound;

(e) that there is no evidence of any abdominal disease;

(f) that he/she is not having a hernia;

(g) that the candidate does not suffer from hydrocoele, varicose veins or piles;

(h) that his/her limbs, hands and feet are well formed and developed and that there is free and perfect motion of all joints;

(i) that he/she does not suffer from inveterate skin disease;

(j) that there is no congenital malformation or defect;

(k) that he/she does not bear traces of acute or chronic disease pointing to an impaired constitution;

(l) that he/she is free from communicable diseases.

Note:- Undescended testes, intra abdominal in position, and un-associated with hernia, should not be cause for rejection. Ectopic testes, located in the inguinal canal, abdominal wall or thigh being more liable for trauma/torsion, should be passed fit only after the examinee has undergone surgical treatment.

(7) The following are the guidelines for the medical examining authority in respect of hearing and diseases of ear, nose and throat:-

(i) Marked or total deafness in one ear, other

Fit for non technical jobs if the deafness is up to 30

ear being normal.	decibels in higher frequency.
(ii) Perceptive deafness in both ears in which some improvement is possible by a hearing aid	Fit in respect of both technical and non-technical jobs if deafness is up to 30 decibels in speech frequencies of 1000-4000
(iii) Perforation of tympanic membrane of central or marginal type	(i) one ear normal; other ear perforation of tympanic membrane present- temporarily unfit. Under improved conditions of ear surgery a candidate with marginal or other perforation in both ears should be given a chance by declaring him temporarily unfit and then he may be considered under item(iv)(ii) below. (ii) Marginal or attic perforation in both ears-unfit. (iii) Central perforation both ears -temporarily unfit.
(iv) Ears with mastoid cavity sub-normal hearing on one or both sides	(i) Either ear normal hearing, other ear with mastoid cavity -fit for both technical and non-technical jobs. (ii) Mastoid cavity both sides- unfit for technical jobs. -Fit for non-technical jobs if hearing improves to 30 decibels in either ear with or without hearing aid.
(v) Persistently discharging ear-operated /non-operated.	Temporarily unfit for both technical and non-technical jobs.
(vi) Chronic inflammatory/allergic conditions of nose with or without bony deformities of nasal septum.	(i) A decision will be taken as per circumstances of individual cases. (ii) If deviated nasal septum is present with symptoms - temporarily unfit.
(vii) Chronic inflammatory conditions of tonsils	(i) Chronic inflammatory conditions of tonsils and/or and /or larynx. -Fit. (ii) Hoarseness of voice of severe degree if present- - temporarily unfit.
(viii) Benign or locally malignant tumours of the ear, nose, or throat.	(i) benign tumours- temporarily unfit (ii) Malignant tumours- Unfit.
(ix) Otosclerosis.	If the hearing is within 30 decibels after the operation or with the help of hearing aid-Fit.
(x) Congenital defects of ear, nose, or throat.	(i)if not associated with functions-Fit. (ii) Stuttering of severe degree-Unfit.
(xi) Nasal polyp.	Temporarily unfit.

(Ministry of Railway's letter No. 72/H/5/23 dt. 2/3/1973)

(8) An X-ray of the chest should be done as a routine in all cases for detecting any abnormality of the heart and lungs which may not be apparent by ordinary physical examination. **Extra charges are to be realized from candidates for special investigations like Echo-cardiogram,U.S.G etc.,at the rates prescribed for outsiders**

(Ministry of Railway's letter No63/H/5/3 dt. 06/07/1963, No. 64/H/5/23 dt. 07/12/1964, No.67/H/5/2 dt.20/04/1967 and NO.[2000/H/22/8 dt 29.12.2000](#))

(9) When any defect is found it must be noted in the certificate and the medical examiner should state his/her opinion whether or not it is likely to interfere with the efficient performance of the duties which will be required of the candidate.

503. Vision tests:-(a) Classification of staff:- for the purposes of visual acuity standards, the various gazetted services on Railways should be divided in to two categories as follows:-

- (1) Technical services:-
- (i) Railway Engineering Services (Civil, Electrical, Signal, and Mechanical)
 - (ii) Indian Railway Traffic Service.
 - (iii) Special Class Railway Apprentices.
 - (iv) Posts in the Marine Establishments.
 - (v) Indian Railway Medical Service

Note: Even though Indian Railway Medical Service has been declared as 'Technical', the standard of medical examination applicable for candidates for recruitment to this service shall not be the same as applicable to the technical service on Railways. The candidates will be medically examined in accordance with the standards prescribed for technical services of Central Govt.(i.e other than the technical services under the Ministry of Railways) as laid down in the 'Hand book on Medical Examination' issued by the Ministry of Health And Family Welfare as amended from time to time.

(Bd.'s No 82/H/5/9 dt. 21/08/1982 and dt. 15/06/1984)

- (2) Non technical services:-
- (i) Indian Railway Accounts Service.
 - (ii) Indian Railway Stores Service.
 - (iii) Railway Protection Force.
 - (iv) Railway Board Secretariat Services, class I and class II.
 - (v) Chemists and Metallurgists.
 - (vi) All other class I and class II services on the Railways which are not connected with the train working or use of trolleys.

(b) Acuity of vision:- The standards of visual acuity for the above categories will be as follows:-

Categories	Distant vision (with or without glasses)		Near vision (with or without glasses)	
	better eye	Worse eye	Better eye	Worse eye
Technical	6/9	6/9	J.I	J.II
	or	6/12		
Non technical	6/9	6/12	J.I	J.II

Note:-(i) In respect of technical services, the total amount of myopia(including cylinder) should not exceed -4 Diopters and the total amount of Hypermetropia should not exceed +4 Diopter.

(ii) In case a candidate in respect of Indian Railway Medical Services is found unfit on grounds of high Myopia, the matter shall be referred to a special Board of three ophthalmologists to declare whether this Myopia is pathological or not. In case it is not pathological, the candidate shall be declared fit, provided he fulfils the visual requirements otherwise. The examination by the special Board should be done on the same day as that of the examination by the medical Board. At places where it is not possible to convene the special board of three ophthalmologists on the day of the medical examination, the special Board may be convened at an earliest possible subsequent date.

(Extract of para 6(d) of appendix 1 of 'Hand book on Medical Examination')

(iii) During Medical examination of candidate, the use of contact lenses is not to be allowed.

(iv) The illumination of the type letters for the distant vision should be of 15 candles.

(v) It is not necessary to lay down any limit for minimum naked eye vision but it is desirable that the naked eye vision of the candidates should be recorded by the medical board or any other medical authority in every case as it will furnish basic information in regard to the condition of the eye.

(c) **Fundus examination** : In every case of myopia, Fundus examination should be carried out and the results recorded. In the event of pathological condition being present, which is likely to be progressive and affect the efficiency of the candidate, he shall be declared unfit.

(d) **Color vision**:- The testing of color vision is compulsory and the results should be normal in respect of all technical services, all posts in the Medical Department, all posts in the Railway Protection Force and Chemists and Metallurgists. Satisfactory color vision constitutes recognition with ease and without hesitation, of signal red, signal green and white colours. Both the Ishihara's Plates and Edridge's Green Lantern shall be used for testing color vision.

Note:- Colour perception, wherever tested, should be graded into a higher and lower grade depending upon the size of aperture in the lantern as described below:-

Grade	Higher grade of colour perception	Lower grade of colour perception
1. Distance between the lamp and the candidate	4.9 Meter	4.9 Meter
2. Size of aperture	1.3 mm	13 mm
3. Time of exposure	5 seconds	5 seconds

(e) **Field of vision**:- The field of vision shall be tested in respect of all services by the confrontation method. Where such a test gives unsatisfactory or doubtful results, the field of vision should be determined on the perimeter.

(f) **Night vision**:- Night blindness need not be tested in each case as a routine, but only in special cases. The medical board has the discretion to improvise such rough tests, e.g., recording of visual acuity with reduced illumination or by making the candidate recognise various objects in darkened room after he has been there for twenty to thirty minutes, as may be considered necessary. Candidate's own statements should not always be relied upon but should be given due consideration.

(g) **Ocular conditions other than visual acuity**:- Ocular conditions and diseases which should be considered as a disqualification are as follows:

(i) **Organic disease**:- Any organic disease or a progressive refractive error which is likely to result in lowering the visual acuity should be considered a disqualification.

(ii) **Squint** :-For technical services where the presence of binocular vision is essential, and for the Railway Protection Force and posts in Medical department, squint even if the visual acuity is of prescribed standard, should be considered a disqualification. For other services the presence of squint should not be considered as a disqualification if the visual acuity is of prescribed standard.

Note:-In case all the tests carried out correctly indicate the presence of binocular vision, the mere existence of squint should not disqualify a candidate.

(iii) **One eyed person**:- For all technical services, all posts in the medical department, all posts in Railway protection force, and Chemists and Metallurgists, one eyed persons should be considered unfit. These will include cases where there may be normal vision in one eye but the other eye is amblyopic or has subnormal vision resulting in lack of stereoscopic vision. However for employment in other categories the medical board may recommend such one eyed persons provided that it is satisfied that he/she can perform all the functions of the particular job for which he/she is a candidate, provided further that the visual acuity in the functioning eye is 6/6 for distant vision, and J.I for near vision with or without glasses, provided error in any meridian is not more than 4.D for distant vision., and normal color vision where ever required.

504.Relaxation of condition:- It shall be open to Government to relax any of the conditions in favour of any candidate for special reasons.

505.Examiners:- (1) The authority competent to examine a candidate for appointment to the gazetted Railway service is a medical board.

(2) At the time of referring the candidate for medical examination, the medical board should be informed whether the candidate is for one of the technical services or one of the non-technical services.

(3) Prior to his medical examination by the board, a candidate should make the statement in the prescribed form as given in Annexure I to this chapter and sign the declaration appended thereto. His attention should be specially directed to the warning contained in the Note below this form.

(4) The prescribed form for the board to record their report is given in [Annexure II](#) to this Chapter.

506. Provision for re-consideration of adverse reports:-(1) Candidates are warned that there is no right of appeal from a medical board, special or standing, appointed to determine their fitness for the above services. If, however, Government are satisfied on the evidence produced before them of the possibility of an error of judgement in the decision of the first board, then it is open to Government to allow an appeal to a second board. Such evidence should be submitted within one month of the date of communication in which the decision of the first medical board is communicated to the candidate, otherwise no request for an appeal to a second medical board will be considered.

(2) If any medical certificate is produced by a candidate as a piece of evidence about the possibility of an error of judgement in the decision of the first board, this certificate will not be taken into consideration unless it contains note by the medical practitioner concerned to the effect that it has been given in full knowledge of the fact that the candidate has already been rejected as 'unfit' for service by a medical board.

507. Temporary unfitness of candidate:- In the case of candidates who are to be declared 'temporary unfit', the period specified for re-examination should not ordinarily exceed six months at the maximum. On re-examination after the specified period, these candidates should not be declared unfit for a further period but a final decision in regard to their fitness for appointment or otherwise would be given.

508. (a) Women candidates who are pregnant:- A female candidate who, as a result of tests, is found to be pregnant need not be declared temporary unfit unless the nature of the job requires strenuous physical exercise or elaborate training, or posts carrying hazardous nature of duty eg., police organisation etc.,.

Note: Lady doctors empanelled as contract medical practitioners, if found to be pregnant will be considered for appointment, three months after the date of their delivery when they would be expected to be fit for full duties.

(Section A of Chapter X of Indian Railway Establishment Manual and M.O.R's letters No. 68/H/3/15 dt. 25/10/1968 and 27/11/1968 and No.68/H/3/5 dt.17/01/1969, No.70/H/3/20 dt. 7/7/1971 and dt. 22/11/1971 and No.72/H/5/14 dt. 25/10/1972, dt. 18/1/1973 and 17/3/1973 and Rly Bd.'s letter No.85/H/5/28 dt. 18/03/86 and Rly Bd.'s No.96 E(GR)II/9/14 dt. 22/07/1996)

(b) Special Provisions regarding Medical Officers:

(i) In the case of Medical officers with 10 years of service or more, who are operated for cataract in one eye or both eyes, and where corrected vision comes up to 6/18 and are able to read Ishihara plates and Lanterns correctly, they may be allowed to work in their category. Such Medical officers should be provided with a perimeter, if they are entrusted with medical examination.

(ii) Medical officers in service with defective colour perception may be permitted to continue in service subject to the condition that they shall not be permitted to conduct medical examination.

Section B-Medical Examination of Candidates for appointment to Non-Gazetted Railway services and of serving Non-Gazetted Railway employees.

509. Introduction:-(1) Medical examination of candidates for appointment to non-gazetted Railway service and for periodical medical re-examination of serving Railway employees includes-

- (i) general physical examination, and
- (ii) vision tests

(2) The details of these examinations are given below. **Detailed guidelines explaining procedures of medical examination and specific diseases affecting fitness of staff are given in [Annexure III](#) to this Chapter. All medical officers conducting medical examination should get themselves familiarised with these guidelines.**

Note:-(1) The General Manager may relax the provision in the case of candidates for temporary appointment to the posts in the non-gazetted service including class IV and labourers' grades, other than posts falling in Group A (**medical classification**), as given in para 510 (1) below.

(2) **General Managers shall have the authority to consider request from candidates (both technical and non technical), who fail in prescribed medical examination after empanellment by RRB, for their appointment in alternate category, subject to fulfilment of the prescribed medical standard, educational**

requirement and other eligibility criteria for the same grade post in alternate category. If a candidate for a technical category fails in the medical examination prescribed for that category, he/she may be considered for an alternate technical category if found fit medically for that category, provided he/she possesses the requisite qualification and there is a shortage in that category.

(Rly Bd's NO. 99/E(RRB)/25/12 dt 20.08.99(RBE 211/99))

510. Classification of staff:-(1) for the purpose of visual acuity and general physical examination of candidates and of serving Railway employees, the non-Gazetted Railway services are divided into the following broad groups and classes. **The detailed categories of Railway posts under each of the classes/groups mentioned below are given in Annexure IV to this chapter:-**

Groups	Classes
A. Vision tests required in the interest of public safety	<p>A-1. Foot plate staff, Rail car drivers and Navigating staff (For foot plate staff see para 520).</p> <p>A-2. Other running staff, Other shunting staff, Point lockers Station masters, and other staff in operative control of signals.</p> <p>A-3 Loco, signal and transportation Inspectors, staff authorised to work trolleys, Yard supervisory staff, Road motor drivers and gate keepers on level crossings.</p>
B. Vision tests required in the interest of the employee himself or his fellow workers or both.	<p>B-1 Such station and yard non supervisory, shed and other staff , excluding shed man, as are engaged on duties where failing eye sight may endanger themselves or other employees from moving vehicles, road motor drivers, permanent way mistries, gang mates, keymen, and staff of the Railway Protection Force.</p> <p>B-2 Certain staff in workshops and engine rooms engaged on duties when failing eye sight may endanger themselves or other employees from moving parts of the machinery and crane drivers on open line.</p>
C. Vision tests required in the interest of administration only.	<p>C-1. Other workshop and engine room staff, shed stockers and other staff in whom a higher standard of vision than is required in clerical and kindred occupation is necessary for reasons of efficiency and others not coming in group A or B</p> <p>C-2 Staff in clerical occupations not included in A,B and C-1</p>

(2) As the foot-plate staff have to pay sustained attention, it is necessary to have separate standards for these staff. These are enumerated in para 520 below.

511. General physical examination:-(1) A Candidate as well as a serving Railway employee must be in good mental and bodily health and free from any defect likely to interfere with the effective performance of the duties of his appointment.

(2) Examiners will use their own discretion as to the scope of the general physical examination in each case and will judge cases on their merits, taking into consideration the prospective duties of the examinee as also the age of the examinee and need for continued fitness for the remaining years of service.

(3) Measurement of height, weight and chest girth will be recorded if specifically required. The skin, the connective tissues, the circulatory, respiratory, digestive, nervous, genitourinary, skeletal and muscular system will be subjected to such examination as is deemed necessary. The principal points attended to are connected with ascertaining:-

(a) the condition of heart and lungs;

- (b) the condition of teeth and gums (well filled teeth will be considered as sound);
- (c) whether there is any evidence of abdominal disease;
- (d) whether there is any hernia or tendency to hernia;
- (e) whether there is any degree of hydrocoele, varicose veins or piles;
- (f) whether there is free movement of the joints;
- (g) whether there is any inveterate skin disease;
- (h) whether hearing in each ear is good and whether there is any disease of the ear;
- (i) whether there is any speech defect;
- (j) whether there is any contagious disease of the eyes or any other condition likely to lead to impairment of vision;
- (k) whether there is any acute or chronic disease pointing to an impaired constitution; and
- (l) whether there is any communicable disease.

Note:- No candidate whose chest measurement is less than 81.3 cms unexpanded and 86.4 cms expanded and whose height is less than 167.6 cms [except hill-man and other exempted class in whose case it should not be less than 160 cms] shall be enlisted for recruitment in Railway Protection Force. Recruits for appointment as Sainiks who are between 18 and 20 years and who show signs of growing and filling out may, however, be enlisted if they are 165.1 cms in height and 76.2 cms un-expanded and 81.3 cms expanded in chest measurement provided that the medical officer concerned certifies that the recruit is under 20 years of age and that he is likely to attain standard measurement.

(4) **Hearing:** In the examination of hearing of the candidate/serving employee, the speaking voice test will be employed. The examiner will speak in any ordinary conversational voice; the examinee will be at a distance shown in the note below and with his/her back to the examiner, will be separately tested for each ear by the occlusion of the other ear or the use of Barrany's whistle, if this is available.

Candidates: (i) on appointment, the testing distance will be 6 meters for each ear for all categories.

(ii) The use of hearing aid should not be permitted for candidates in categories 'A' and 'B'.

Employees: (i) on re-examination, the testing distance will be 3 meters for all categories of staff.

(ii) The use of hearing aid should not be permitted for Railway employees in categories 'A' and 'B'. However, it may be permitted at the discretion of the Chief Medical Director in Categories, B-1 and B-2. Relaxation of standards of hearing in certain categories like Boiler maker etc., may be given by the Chief Medical Director

(5) Speech:

Candidate: Stammering is not to be considered a serious defect disqualifying a candidate in clerical duties, especially such of them as do not have to come in direct contact with the public.

Employees: for serving Railway employee, stammering is not to be considered a serious defect in clerical duties, especially such of them as do not have to come in direct contact with the public. However, in cases where slight speech defects have been detected during the course of periodical medical examination of Railway employee who has put in a number of years of service, the Chief Medical Director may consider relaxation in all types of cases, in consultation with the department concerned.

(6) Head injuries:-

Candidates and serving employees in categories A-1, A-2 and A-3, when they come up for medical examination or re-examination, should give a declaration if they had a head injury earlier and if so, a history of the case, even though fully cured at the time of declaration. In the case of persons with past history of loss of memory, a full neurological examination and a fitness certificate from a neurologist would be required. As instances are known where temporary loss of memory and some other mental disturbances have occurred in such cases, it is desirable that a close watch is kept on all such cases of head injury in the foot-plate staff, specially drivers, and followed up, to ensure that there is no recurrence of loss of memory in such persons.

(7) Physically handicapped: (i) At the time of medical examination of the physically handicapped, namely the blind, the deaf/deaf mute and the orthopedically handicapped, (for each of the categories 1% of the posts in C and D groups have been reserved), the medical officer should find out the individual's suitability for the appointment against the post nominated for the handicapped persons with the instructions given and ensure that the proposed appointment is without much detriment to the efficiency and the physically handicap is not likely to hamper the work or enhance the occupational risks to the worker himself or to the others, especially if the post happens to be in the sheds and work shops or in station yards, along railway tracks and on bridges etc. Although the intention is to help such physically handicapped persons duly waiving the physical standards which ordinarily stand in the way of their being passed fit, it is clarified that no relaxation are to be made in visual standards while considering cases of physically handicapped persons for appointment under the deaf and orthopedically handicapped quota, excepting in the categories of clerks to the extent that they may be examined as per standards of C-2 though they belong to C-1. Certain posts should be earmarked for being filled up by only disabled persons eg., Lift man, Daftry, Office Clerks, Care-takers etc.

(Rly Bd.'s No 79/H/5/10 dt. 28/06/1979)

(ii) The categorisation of physically handicapped person for the purpose of reservation in employment is as below:-

a) The blind: The blind are those who suffer from either of the following conditions:

- 1.Total absence of sight.
- 2.Visual acuity not exceeding 6/60 or 20/200 (Snellen) in the better eye with correcting lenses.
- 3.Limitation of the field of vision subtending an angle of 20 degrees or worse.

b) The deaf: The deaf are those in whom the sense of hearing is nonfunctional for ordinary purposes of life. They do not hear, understand sounds at all events with amplified speech. The cases included in this category will be those having hearing loss more than 60 decibels in the better ear (profound impairment) or total loss of hearing in both ears.

c) The orthopedically handicapped: The orthopedically handicapped are those who have a physical defect or deformity which causes an interference with the normal functioning of the bones, muscles and joints.

(Bd.'s No.E(NG)III-77RC1/54 dt. 08/01/78 and No. 2003/H/23/4 dt 12-3-3)

iii) Candidates:- As and when handicapped persons are recommended by the Employment exchange for employment against *Group C and Group D* posts, they should be examined by CMS/MS in charge of the division and decision taken in consultation with the department concerned.

iv) Employees: The cases should be decided by the CMS/MS in charge of the division in consultation with the departmental officers taking into account the nature of disability and duties of the post.

Note: Such of the serving Railway employees who lose one of their hands while in service may not be put against train working duties, particularly those involving operation of any equipment.

(8) Urine:

Candidates & Employees: In A-1 Urine examination is compulsory.

Other categories: Urine will be examined if the examinee is over 30 yrs of age. If there is any reason to suspect renal disease or diabetes in any examinee under 30 yrs age, his urine will be examined.

(9) Infective conditions and other disorders :

Candidates: Candidates exhibiting the under noted conditions will be rejected irrespective of the employment sought:-

(a) Contagious and infective disorders: provided that the condition of the candidate having ceased to be contagious or infectious, the sequelae arising from such disorder will not be regarded as disqualifying, unless they are in themselves likely to interfere immediately or later with the efficient performance of the duties of their appointment. The following conditions fall *inter-alia* under the above category:-

- (i) Pulmonary tuberculosis.
- (ii) Venereal infection.

- (iii) Trachoma and other infectious ocular diseases.
- (iv) Leprosy.

(b) Conditions commonly predisposing to invalidity or seriously enhancing the candidate's liability to occupational risks, eg:-

(i) Hernia, and well marked hydrocoele, varicose veins or piles: provided that such conditions having been satisfactorily treated by operation, the evidence of their previous existence shall not disqualify;

(ii) Un-descended testes, intra-abdominal in position, and un-associated with an inguinal hernia, should not be a cause for rejection. Ectopic testes, located in the inguinal canal, abdominal wall or thigh, being more liable for trauma/torsion, should be passed fit only after the examinee has undergone surgical treatment:

- (iii) Flat foot, or knock knees, except in sedentary occupations;
- (iv) Epilepsy;
- (v) Asthma;
- (vi) Otorrhea.

(c) Conditions rendering the association of the candidates with others objectionable, e.g:-

- (i) Repulsive inveterate skin diseases.
- (ii) Ozoena
- (iii) Foetor associated or otherwise with pyorrhoea alveolaris.

(d) Constitutional disorders commonly deemed progressive and chronic disorders liable of recurrent exacerbation of a disabling kind.

Employees: In the case of serving employees, if there is reason to believe that any such defect can be remedied early by treatment or operation, the Railway employee should be advised to undergo necessary treatment or operation, prior to final decision.

512. Vision tests:-

(1) *Acuity of vision:-* The following are the tables of standards of visual acuity requirements.:-

(A) *Standards at examination on appointment:*

Class	Distant vision	Near vision
A-1	6/6, 6/6 without glasses with fogging test (must not accept +2 D)	Sn.0.6, 0.6 without glasses
A-2	6/9, 6/9 without glasses (no fogging test)	...Do...
A-3	6/9, 6/9 with or without glasses. Power of lenses not to exceed 2D.	Sn.0.6, 0.6 with or without glasses.
B-1	6/9, 6/12 with or without glasses. Power of lenses not to exceed 4D.	Sn. 0.6, 0.6 with or without glasses when reading or close work is required
B-2	same as above	...Do...
C-1	6/12, 6/18 with or without glasses.	...Do...
C-2	6/12, nil with or without glasses	Sn. 0.6 combined with or without glasses where reading or close work is required

Note: a) No glasses are to be permitted at the time of initial recruitment of Railway Protection Force staff where their medical category is B-one

b) Candidates in C-1 and C-2 medical categories having power of glasses of more than 4 D should be examined by an eye specialist and may be declared fit if there is no evidence of any progressive eye disease.

(Bd.'s No 83/H/5/16 dt. 17/04/1984)

c) One eyed person: There is no bar to the admission into non-gazetted clerical service of a candidate who is blind in one eye. The guiding consideration in such cases should be whether the candidate's vision is adequate for the performance of the duties attached to the service or the post to which he/ she is proposed to be appointed, and whether undue risk attaches in his being accepted. The medical officer while examining such cases should take into account the cause of blindness in relation to its possible effects on the sound eye in course of time.

d) *Candidates with Pseudophakia* : Posterior Chamber IOL implant in one or both eyes for correction of vision of candidates in Cey one and Cey two categories may not be a bar for their appointment as such.

(Bd's No 99/H/5/3/ dt 2-12-2003)

(B) *Standards at re-examination during service:-* The standards at re-examination would apply only for employees with not less than six years service. This could be permanent or temporary, including continuous service as casual labour, if in the same medical category.

Class	Distant vision	Near vision
A-1	6/9, 6/9 or 6/6, 6/12 with or without glasses .Naked eye vision not below 6/60, 6/60 Power of lenses not to exceed 4D.	The combined vision with or without glasses should be the ability to read ordinary print. Where reading or close work is required. Where reading or close work is required, the combined near vision should be Sn 0.6
A-2	BELOW 40 YEARS	
	6/9, 6/12 or 6/6, 6/18 with or without glasses Power of lenses not to exceed 4 D. Naked eye vision not below 6/60.	As above
	40 YEARS AND ABOVE	
	6/12, 6/12 or 6/9, 6/18 with or without glasses. Power of lenses not to exceed 6 D. Naked eye vision not below 6/60.	As above
A-3	6/12, 6/18 with or without glasses. Power of lenses not to exceed 8 D.	As above
B-1	6/12, 6/24 with or without glasses. Power of lenses not to exceed 8 D.	As above
B-2	As above	As above
C-1	6/18, nil or combined 6/18 with or without glasses.	Sn. 0.6 with or without glasses where reading or close work is required.
C-2	6/24, nil or 6/24 combined with or without glasses.	As above

(2) (i) Color perception:-

Candidates and Railway employees: in classes A-1, A-2, A-3 and B-1 on being medically examined shall be tested for color perception with the prescribed apparatus and recommended methods of examination. Failure to pass the tests laid down for the class in which it is proposed to employ the candidate or Railway servant shall be the cause for rejection. The following are the standards for color perception:-

Candidates and serving Railway employees

Class	Lantern Aperture	Ishihara
A-1	1.3 mm	Yes
A-2	1.3 mm	Yes
A-3	1.3 mm	Yes
B-1	13 mm	No

Note:-(i) The highest standards of physiological competence to discriminate the colors of signals under all conditions is required in candidates and Railway employees in categories A-1, A-2, and A-3. Distinctive importance is attached to rapidity of recognition and to the absence of abnormal simultaneous contrast effects.

(ii) Malingering:

It may sometime happen that an employee belonging to an un-attractive category like trains clerk may deliberately fail in the color perception test during medical re-examination in expectation of being absorbed in a more attractive alternate employment like goods clerk/booking clerk etc. It must be remembered that an individual, having a normal color perception retains such normalcy throughout the life unless he develops some pathological conditions of the optic nerve. In case, therefore a person is found to be color blind subsequently without having developed one of these pathological conditions, and where there is also no doubt as to the findings of earlier examination, the person concerned should be declared as a malingerer. Where such malingering is suspected, the Administration should ensure that the person does not get any attractive alternate employment but only an unattractive post like office clerk. Obviously a decision in such cases has to be taken very judiciously. If malingering is established, he is psychologically not fit to remain in service and may be declared unfit for all classes. The medical unfitness papers should carry an endorsement that " he has been declared unfit under para 512(2) sub note(ii) of I.R.M.M."

(Rly Bd.'s Letter No.87/H/5/8 dt. 11/05/1987)

(3) Night vision:-

Candidates of classes A-1, A-2, A-3 and B-1 will be examined with regard to their vision in diminished light as per instructions given in the Annexure III to this chapter and if found to suffer from night blindness, will be rejected.

Railway employees in Class A-1, A-2, A-3 and B-1 will be similarly examined and if in the opinion of the examiner any defect of vision found in dim light appears to be of permanent order likely to interfere with the efficient discharge of Railway employee's duties, he will be disqualified for retention in the particular job.

(4) Field of vision:-

Candidates and Railway employees in class A-1 will be examined to ascertain that the fields of vision are not seriously restricted. The existence of any material abnormality in this respect will disqualify the candidate for admission to the service and will in the case of serving Railway employee, either disqualify or not, according as, in the opinion of the examiner it is or is not associated with disease liable to render the Railway employee unfit to continue to discharge his duties efficiently.

(5) Binocular Vision:

Candidates: Candidates in Classes A-1, A-2, A-3, B-1 and B-2 will be tested for the presence of binocular vision, i.e., peripheral fusion, depth perception and stereoscopic vision. The absence of binocular vision will disqualify a candidate for admission to service in these classes.

Employees: (i) An employee suffering from Defective Binocular vision cannot be passed for any post in categories A-1, A-2 or A-3.

(ii) An employee suffering from defective Binocular vision can be passed in categories B-1 & B-2 at the discretion of the Chief Medical Director any time during service during re-examination irrespective of the date of appointment.

Note:- (i) In case all tests carried out correctly indicate the presence of binocular vision, the mere presence of squint should not disqualify an examinee.

(6) Mesopic vision

Candidates and Employees from A1 to B-1 categories may be examined in glaring light by providing a 200 Watts Bulb 90 cm. above and over the Landolt's Board in front of the examinee's eye. Response to glare and recovery time should be noted by examining the candidates and employees with the help of light point to be installed in the existing dark room. Delayed recovery may be early symptom of cataract. A report in this respect should be sent to Chief Medical Director biannually.

(Bd.'s No [89/H/5/15 dt. 8/11-12-89](#))

(7) Fundus / Full Ophthalmology Examination:

Candidates: Compulsory in the following circumstances,

- a) for all candidates in A-1
- b) for categories C-1 and C-2 when the power of lenses exceeds 4 D., the candidate should be examined by an Ophthalmologist to exclude progressive eye disease.

(Bd's [No83/H/5/16 dt. 17/04/84](#))

Employees :

- a) A-1 For all employees -Compulsory
- b) A-2, wherever naked eye vision is less than 6/12, 6/24, full ophthalmologic examination of the fundus etc., will be made by an eye specialist to find out the possibility of any progressive disease in the eyes, in the interest of the employees themselves and in the interest of the travelling public. If it is found that there is progressive disease, the employee will have to be periodically examined every year or even at earlier intervals at the discretion of the medical examiner. A record must be kept of the naked eye vision of the employees examined.
- c) A-2 and A-3, in case the power of lenses is more than 4.D, full ophthalmologic examination would be necessary.
- c) In all cases of relaxation of residual vision, a thorough ophthalmologic examination should be done before relaxation is given

(8) Naked Eye vision (Residual vision):

Relaxation of Residual vision

(a) For Categories A-1 and A-2 there shall be no relaxation of residual vision below 6/60 in each eye. However it may be relaxed even beyond 6/60, 6/60 but the power of lenses not to exceed 4 D., at the discretion of Chief Medical Director. The discretionary powers of C.M.D may however be re-delegated to medical officers not below the rank of D.M.O. A record must be kept of the naked eye vision of the employees examined.

([S.E.Railway's No.HME/36/1281 dt 28-02-79](#))

(b) In the case of employees of the ex-Company Railways falling under medical category A, relaxation may be made in their residual vision and the power of lens to the extent the employees were eligible for it under the ex-Company rules. These powers may be exercised by the Divl. Medical Officers.

Note: Employees who have had the benefit of relaxation of residual visions shall be examined at least once a year thereafter, unless examination at shorter intervals is considered to be necessary by the medical officer.

(9) Radial Keratotomy:

Candidates: having undergone Radial Keratotomy may not be considered for recruitment to A-1, A-2, A-3 and B-1 categories. However candidates with such operation may be considered for recruitment in B-2 categories and below, if other wise medically fit.

Employees : working in categories A-1, A-2, A-3, and B-1, who have undergone Radial keratotomy should not be allowed to work on Rajdhani and Shatabdi Express. However for eligibility to work on other trains, the periodical medical examination of such employees should be conducted at half the prescribed intervals

of the P.M.E.s. Such employees in categories B-2 and below may however be medically passed with this operation.

(Bd.'s No 89/H/5/14 dt. 30/11/89)

(10) Cataract:

Employees with aphakia : Employees operated for cataract by conventional surgery resulting in aphakia, irrespective of acuity of vision with glasses will not be permitted to continue in categories other than C-1 and C-2.

Employees with Pseudoaphakia : Employees having undergone intra ocular lens implant surgery (Posterior chamber I.O.L) will be allowed to continue in service in categories A-3 and below; provided that all employees undergoing Posterior I.O.L surgery will be subjected to complete ophthalmic assessment by an ophthalmologist at monthly intervals post operatively till the findings become stable or for a maximum period of six months to see if they can attain the visual standards required for the A-3 category. In case of failure of the employee to reach the standards of A-3 in six months following surgery he/she will be declared fit in the category in which his/her visual standards allow him/her. Subsequent P.M.E.s of such employees only with reference to ophthalmologic check up will be done at six monthly intervals by an ophthalmologist, keeping in view, the possibility of upgrading the medical category on improvement of the visual abilities of the employee (which in some cases is possible). Their cases can be reviewed once every six months.

Employees in B-1 having undergone I.O.L implant surgery will be allowed to continue in their original category with subsequent medical examination done every year instead of the usual schedule.

(Bd.'s letter No. 88/H/5/3 dt. 07/02/96)

Note:

Posterior chamber Intra Ocular Lens implantation(PCIOL) in one or both Eyes shall not be a bar for the in-service Aye two (A2) category staff to continue in the respective category after cataract surgery of one eye/eyes provided his /her visual acuity comes up to the prescribed standard. The periodicity of Periodical Medical Examination (PME) for A2 in IOL cases would be as under

1st PME 6 weeks after surgery

2nd PME 6 months after the first PME after the PCIOL

Subsequent PMEs after the completion of one year from the previous PME

All PMEs will have to be conducted by Ophthalmologists only in such cases

(Bd's No 2002/H/5/1 dt 5-2-2004)

The relaxation given vide Bd's letter NO above will also be extended to in-service employees in Aye two category who have undergone IOL (PC) inplant I one or both eyes prior to 5-2-04. However all such cases will be examined by a Medical Bd including one seye specailist./ Based on the recommendations of the medicla Board and it being accepted by CMD of the zone the in service employee can be permitted to continue in Aye-two category

(Bd's No 2002/H/5/1 dt 2-7-2004)

(11) Spectacles and Contact lenses:

a) Spectacles: *Candidates* : No glasses are to be permitted for categories A-1 and A-2 and for Railway Protection Force staff where their medical category is B-1.

Employees: i) Category A : When a Railway employee coming in the Category A (A-1,A-2 & A-3) is permitted to use spectacles for the purpose of passing the required eyesight examination, he must provide himself with two pairs of appropriate spectacles from an optician. The frame should be of a standard quality and fitting properly. The glasses should be colourless (or of shades Crookes A and A2 only) and of optical quality. They should have requisite power with uniform refractive index. Centring of the lens should be according to the inter-pupillary distance. The employee must give a written undertaking that he/she will carry both pairs while on duty, and should he/she break or lose one pair, must at once report the occurrence to his controlling supervisor who will arrange for him/her to be sent to the Medical examiner, who will re-test with the remaining pair of glasses, and issue such instructions as will ensure that the employee will possess two pairs of suitable spectacles. A foot-plate staff who uses glasses both for near and distant vision and prefers to use bifocal glasses may be allowed to keep only two pairs of bifocal glasses one of which should be in use and the other kept as a standby. Intention is that the employee must have two pairs of glasses of the kind that he/she uses.

(ii) *Category B and C:* Employees in Categories B-1, B-2, C-1 and C-2 will carry one pair of spectacles only

b) Contact lenses : For both Candidates and employees contact lenses shall not be permitted in category A and B. Contact lenses of all powers are permitted in candidates and employees of categories C-1 and C-2 provided there is no progressive eye disease as certified by an eye specialist.

(Bd.'s No. 83/H/5/16 dt. 17/04/84)

513. Time when candidates are to be sent for Medical Examination:-(1) The medical examination of the candidates selected for appointment against posts for which initial training has been prescribed should be conducted immediately prior to their being deputed for training.

(2) In the case of candidates to be appointed against posts for which no initial training is necessary, the medical examination should be conducted at the time of their appointment.

514. Periodical Re-examination of serving Railway employees:-(1) In order to ensure the continuous ability of Railway employees in class A-1, A-2, A-3, B-1 and B-2 to discharge their duties with safety, they will be required to appear for re-examination at the following stated intervals throughout their service.

(A) Category A-1, A-2 and A-3:-

(i) At the termination of every period of four years, calculated from the date of appointment, until they attain the age of 45 years, and then every two years until the age of 55 years and then there after annually, until the conclusion of their service.

(ii) If an employee in Medical category A has been periodically medically examined at any time within two years prior to his attaining the age of 45, his next medical examination should be held two years from the date of the last medical examination and subsequent medical examinations every two years until 55 years and then annually thereafter until retirement. If however such an employee has been medically examined at any time earlier than two years prior to his attaining the age of 45 years, his next medical examination should be held on the date he attains the age of 45 and subsequent medical examinations every two years thereafter.

(Rly Bd.'s letter No. 88/H/5/12 dt. 29/01/93)

(B) Category B-1 and B-2:- On attaining the age of 45 years, and thereafter at the termination of every period of 5 years.

Note:- (i) The employees in Railway Protection Force will be re-examined for physical fitness at the termination of every period of three years, calculated from the date of appointment until the conclusion of their service. However, Inspectors, Sub-Inspectors, and Assistant Inspectors of the Railway Protection Force are to be re-examined for physical fitness and visual acuity on attaining the age of 45 years and thereafter at the termination of every period of five years.

(C) Category C-1 and C-2:- Will not be required to undergo any re-examination during the course of their service, unless specifically directed.

(D) Any Railway employee in service may be required to undergo tests for vision and general physical examination in the event of his failure to comply with signals.

(E) Work shop staff and artisan staff in Loco shed and C&W depots would be exempt from P.M.E s except when such staff are promoted to depots requiring higher medical examination from safety angle.

(F) Special Medical Examination : The staff in the categories A-1, A-2, A-3 should be sent for special medical examination in the interest of safety under the following circumstances unless they have been under the treatment of a Railway Medical Officer:-

(a) Having undergone any treatment or operation for eye irrespective of the duration of sickness.

(b) Absence from duty for a period in excess of 90 days. In case of A-1, A-2 and A-3 an employee may be asked to give an undertaking to his supervisor when reporting back to duty after leave or absence, irrespective of the period, that he has not suffered from any eye disease or undergone an eye operation

515. Authority from responsible departmental superior required prior to examination:-

(1) Examiners will grant certificates under these regulations only to such candidates or Railway employees as hold authority from their departmental superior to present themselves for examination. The forms to be used are given in annexure V and VI of this chapter.

(2) Authority to present himself for the medical examination should not be granted to any candidate who has at any time been pronounced unfit for Government employment by any duly constituted medical authority. Candidates should be warned to disclose any previous rejection from Government employment on medical ground.

(3) The onus of sending the candidate or a Railway employee for medical examination is that of the employing department.

(4) The employing branch or the department will in every case be responsible for the punctual appearance of the Railway employee, particularly the operating staff concerned with train passing duties, before the appropriate authorised medical examiner. For this purpose, the staff should be relieved on or before the due date for medical examination. It will not be exactly the date when the re-examination falls due, but it will be the month in which this falls due, so that he can appear for P.M.E any day during the month. This does not, however, mean that staff should be relieved and kept idling for an indefinite period but it should be ensured, in co-ordination with the medical department, that staff are medically examined invariably on or near about the due dates.

516. Identification of the examinees:- In order to ensure the identity of the examinee, the recruiting or employing branch or department will, furnish a list of examinee's permanent physical marks of identification in the forms as given in annexure V and VI referred to in para 515 above. The examinee's signature or thumb impression is also to be obtained on the forms as given in annexure IX and Annexure X to this chapter and this will be verified afterwards by the branch or department concerned. The recruiting or employing branch or department will, in the following cases, however, provide that the examinee is accompanied by a responsible member of the branch or department, to whom he is known, to act as a guarantor.

(i) When the candidate/employee is having no distinguishable marks of identification,

(ii) When the candidate/employee is having a number of moles/scars on the body that it would be very difficult for the examiner to identify the moles/scars even if they were to be represented to the best of their ability by the employing branch/personnel department.

517. Re-examination before promotion to a higher medical category:- A Railway employee must not be engaged to work, whether temporarily or permanently, in a class higher than that for which he/she has been certified fit, unless he/she has obtained a certificate of competence in respect of the medical category of the new employment.

518. Re-examination on revision of medical classification:- (1) The staff belonging to any medical category, when brought on to the categories of A-1, A-2, and A-3 on revision, should be examined immediately on revision.

(2) The staff belonging to any medical category, when brought on to the categories of B-1 or B-2 on revision, should, subject to the provisions of sub-para (4) below, be examined at the time of next scheduled examination prescribed for these categories.

(3) The staff belonging to any category when brought on to categories C-1 and C-2 on revision, may not be required to undergo any medical examination.

(4) Where, on revision, the medical category is raised upwards, there should be an immediate examination on revision and in other cases where the revision is downwards, the medical examination should be at the time of next scheduled examination.

(5) The provision of this paragraph need not apply to the staff who have already been given relaxation by the Railways as personal concession to them.

519. Medical examination of employees on promotion to higher classes:- Employees with six years, or more of continuous service on Railways sent for medical examination on promotion to higher class, should be examined according to the standards of examination during service of the higher class. Employees

with less than six years of service should be examined according to the standards of examination applicable on appointment to the higher class.

520. Standards for Foot-plate staff in A-1:-

- (a) Medical Examiner: D.M.O or above specifically nominated by C.M.D. A special training of 7 days may be imparted to all the doctors undertaking the medical examination of drivers to familiarise them with relevant rules
- (b) Periodicity: Every four years from the date of appointment till the date of attainment of 45 Yrs, every 2 yrs up to 55 Yrs, and thereafter annually till retirement

(1) At the time of entrance in A-1::

(i) At the time of appointment, a thorough and stringent medical examination including M.M.R /X-ray(chest), ECG, Urine examination, Blood sugar estimation, Fundus examination or any other investigation/observation as deemed fit by the medical examiner is to be done keeping in mind Hypertension, Diabetes, Ischemic Heart Disease, Hearing, Mental condition/Reaction of the candidate.

(ii) Vision: As detailed in Para 512 for A-1 candidates,

(2) During Periodical examination of employees in A-1 :

(i) Thorough physical examination, detailed eye examination, M.M.R/X-Ray chest, Fundoscopy, Urine analysis, Fasting Blood sugar, and any other examination/investigation as deemed fit by the examiner, keeping in mind , inter-alia the following conditions:

a) Blood Pressure: The peripheral blood pressure with medication should not be above 140/90 up to the age of 50, 150/90 up to 55 Yrs and 150/95 up to superannuating age Ganglion blocking drugs are not permitted for control of hypertension.

b) Diabetes : If controlled by diet alone- to be considered fit for all categories. If controlled by drugs, not fit as a driver except for shunting duty in the yard.

c) Ischemic Heart Disease: Candidates and employees suffering from Ischemic Heart Disease will not be passed fit. Relevant investigation in this context should be done where necessary.

d) Ear examination: Hearing should be normal. Hearing aids are not allowed. There should be no chronic ear discharge.

(ii) Vision: As detailed in Para 512 for A-1 employees.

(iii) The examiner should specifically mention in the report that

- a) Contact lenses are not being used,
- b) No Intra Ocular Lens implant is present and
- c) No Radial Keratotomy has been done.

(iv) Drivers should be mentally agile with normal reactions

(3) All the drivers and motormen should carry the health cards, provided to them and should present this to the doctor during P.M.E for making necessary entries on results of P.M.E including X-ray chest and special instructions, if any. Whenever the Drivers/Motormen report to the hospital for sickness, the same should be recorded in the Health card in the appropriate column. Whenever any P.M.C is to be endorsed by the doctor, the particulars of incidence of such sickness should also be recorded in the Health Card.

(4) At the time of entrance into service and at the time of each P.M.E. declaration as given in Annexure VII & VIII to this Chapter has to be obtained from all drivers.

(Rly Bd.'s letter No.88/H/5/12 dt.. 29/10/1993 and No.ENG/1/82/RE/3/4 dt. 31/12/1982)

521. Record of examinations and form of certificates:- The results of examination will be recorded and certificate issued in the forms given in Annexure IX and X. Issue of fit and Unfit certificates should be prompt and done personally .In order to prevent any possible misuse, the medical examiner should see that the medical category of the candidates/employees is entered in the certificates in words, viz., Aye-one, Aye-

two, Aye-three, Bee-one, Bee-two, Cey-one and Cey-two for A-1, A-2, A-3, B-1, B-2, C-1, and C-2 respectively.

522. Provision for reconsideration of adverse reports:- The following provisions shall apply in regard to the reconsideration of adverse reports of Medical Examination.:-

(1) Candidates:-

(i) Ordinarily, there is no right of appeal against the findings of an examining medical authority, but if the Government is satisfied, based on the evidence produced before it by the candidate concerned, of the possibility of error of judgement in the decision of the examining medical authority, it will be open to it, to allow re-examination. Such evidence, should be submitted within one month of the date of communication in which the decision of the first medical authority is communicated to the candidate. The appellate authority may entertain the appeal within a reasonable time after the expiry of said period, if it is satisfied that the appellant had sufficient cause for not proffering an appeal in time. Consultation and investigation charges will be recovered for appeal.

(Ministry of Railway's letters No.91/H/5/1 dt.. 23/08/1991 and No.87/H/5/18 dt.. 26/10/1988)

(ii) If any medical certificate is produced by a candidate as evidence about the possibility of an error of judgement in the decision of the first medical authority, the certificate will not be taken into consideration unless it contains a note by the medical practitioner concerned, to the effect that it has been given in full knowledge of the fact that the candidate has already been rejected as unfit for service by the medical authority appointed by the Government in this behalf.

(2) Railway Employees:-

(i) The Railway employee may himself, on receiving the notice of failure to pass the examination, lodge an appeal within seven days from the date of adverse report, for reconsideration by the Chief Medical Director. This appeal will be directed through the Divisional Officer /District Officer of the employing Branch or the department concerned and CMS/MS in charge of the Division, who will respectively attach a report of the examination.

(ii) A principal Divisional or District Officer of the branch or department concerned may submit a requisition for reconsideration by the Chief Medical Director of the case of a Railway employee concerning whom an adverse certificate has been issued by an examiner authorised to do so. The requisition will include a statement of any special circumstances that appear worthy of consideration, and will be sent through the CMS/MS of the division who while forwarding it to the Chief Medical Director will attach a report of the examination.

(iii) On receipt of an appeal under para (i) above, or a requisition under para (ii) above, the Chief Medical Director will after perusal of the papers, either issue summary orders or arrange at his discretion of such further special examination of the Railway employee as the circumstances of the case may require. The decision of the C.M.D will be final.

(iv) A Railway employee who, having been examined by a competent medical authority, has been certified by the authority to be unfit to continue to discharge the duties formerly assigned to him, shall not be permitted to discharge such duties or the duties of any other class, competence for which has not been certified by the examiner; and the adverse certificate shall hold irrespective of the submission of an appeal under sub-para(i) above, or the submission of a requisition under sub-para (ii) above, until such time as under the instructions of the Chief Medical Director, the adverse certificate has been formally withdrawn or replaced.

523. Relaxation of standards:- (i) Relaxation at re-examination:

(a)The standards at re-examination would apply only for employees with not less than six years service. This could be permanent or temporary, including continuous service as casual labour, if in the same medical category.

(b) For Categories A-1 and A-2 there shall be no relaxation of residual vision below 6/60 in each eye. However it may be relaxed even beyond 6/60, 6/60 but the power of lenses not to exceed 4 D., at the discretion of Chief Medical Director. The discretionary powers of C.M.D may however be re-delegated to medical officers not below the rank of D.M.O. A record must be kept of the naked eye vision of the employees examined.

(c) In all cases of relaxation of residual vision, a thorough ophthalmologic examination should be done before relaxation is given

(d) The relaxation allowed at present as per Ministry of Railway's letter NoE55ME5/133/Medical dated 07th June 1956 for employees with squint who are in service in category B should continue. However, all future entrants in category B should have Binocular Vision. C.M.D is empowered to relax at his discretion and permit any employee to continue to work in category 'B' even if he has no Binocular vision.

(e) Hearing aid may be permitted at the discretion of the Chief Medical Director in Categories, B-1 and B-2. Relaxation of standards of hearing in certain categories like Boiler maker etc., may be given by the Chief Medical Director

(f) Employees who have had the benefit of relaxation of residual visions shall be examined at least once a year thereafter, unless examination at shorter intervals is considered to be necessary by the medical officer.

ii) Relaxation on decategorisation:

(a) A decategorised driver, if he possesses the vision of category A-2 on re-examination, will be allowed to work as shunter although the standards laid down for A-1 will apply for new entrants or on promotion as shunter.

(b) Employees with not less than 10 years of service, who lose the vision in one eye may be permitted to be employed in or continue in categories B-1 and B-2 by the Chief Medical Director, if the remaining eye is not aphakic and the vision in that eye, corrected or uncorrected is at least 6/12. Those who are operated for cataract in one eye may also be similarly permitted, provided the vision in the other eye, not operated for cataract, corrected or uncorrected, is at least 6/12, and provided further that the operated eye is not corrected with glasses to avoid diplopia by the non-operated eye. Those who do not come up to the standards for being declared fit in B-1 categories, should not be forced to remain off duty (unless they themselves ask for leave) but can be considered for being declared fit against C Categories, if they come up to the required standards therefor.

(c) In-service Junior Engineer (Tele-communication), Assistant Tele-communication Inspectors and Mechanics not coming up to the standards of A-3 and B-1 may, with restriction of duties, be put to work on non-electrified sections where they do not have to use trolleys or in sedentary jobs. The Chief Medical Director should decide such cases in consultation with the department.

iv) Relaxation for Physically handicapped men: see para 511(7)

524. Treatment of the period of absence of Railway employees sent for periodical medical re-examination:-

The period for which an employee is absent from duty for periodical medical re-examination may be treated as below:-

(i) Time spent in journey to and from the actual medical examination may be treated as duty.

(ii) Time taken by the examining medical authority to come to a decision in the matter may be treated as duty. In case where the examining authority is not quite sure of the decision to be taken, he makes a reference to the Chief Medical Director and the first decision in this case is given after reference to the C.M.D. In such cases, the period up to the announcement of the decision may be treated as duty.

Note: Periodical Examination of an employee should invariably be completed in 3 days. If a Railway doctor is not able to come to a conclusion within a period of 3 days, the entire period required for the doctor to come to a conclusion of the P.M.E should be treated as duty. However it will not include the time taken by the employee to procure spectacles or any wilful delay by the employee.

(Bd.'s No.86/H/5/11 dated 07/12/90)

(iii) Time taken by the employee to equip himself with spectacles, trusses, etc., or with any other equipment without which he/she is not considered fit for duty should be debited to the leave account of the employee concerned. This period will be from the time the examining authority recommends that artificial aids are necessary till the time the employee obtains such aids and is certified fit for duty by the competent authority. In respect of spectacles, the time up to five days spent by employee to equip himself with

spectacles for the first time or to change his existing spectacles should be treated as duty. Any case requiring relaxation beyond the period of 5 days may be reviewed at General Manager's level.

(Bd.'s No.85/H/5/10 dated 12/14-08-86 and No.99/H/5/10 dated 12/08/1999)

(iv) In the event of his/her being declared unfit an employee may appeal to the Chief Medical Director against the examining authority's decision within a period of seven days from the date of adverse report by the examining authority. If the Chief Medical Director, on appeal, confirms the decision of the first examining authority, the period of waiting from the moment of being declared unfit till the verdict of the C.M.D. would be debited to the employees leave account. If, on the other hand, the Chief Medical Director over-rules the decision of the first examining authority, such period of waiting should be treated as duty, provided the employee concerned has preferred an appeal within a week from the time the result of the original medical examination is communicated to him. It is also necessary that the appellate authority should decide the appeal within three weeks from the time the appeal is preferred.

(v) In cases where the immediate supervisor or an officer is not available to allow an employee with a fit certificate to join his/her duty on return from periodical medical examination the time taken by such administrative delay may be treated as duty.

525. Temporary unfitness of individuals appointed straight away:-

In case where due to exceptional nature of urgency an individual is appointed straight away and in the medical examination, which is carried out subsequent to his/her appointment, the competent medical authority declares him/her as physically temporarily unfit for appointment to the specified post, there is no objection to his/her being retained in service for the period specified by the competent medical authority provide that :-

(i) the period after which a second medical examination is to be conducted is specified by the competent medical authority.

(ii) the condition leading to temporary unfitness is declared as being curable within a reasonable period.

(iii) the disease is not of such nature as to be source of risk to the others, with whom the Railway employee may have to come into contact in the course of his duties, and

(iv) the approval of the Ministry of Railways shall be obtained in cases where the period of such retention is likely to exceed six months.

526. Women candidates who are pregnant:- A female candidate who, as result of tests, is found to be pregnant need not be declared temporary unfit, unless the nature of her job involves elaborate training or the post carries hazardous nature of duties like in police organisations etc.,

(Rly. Bd.'s letter No.85/H/5/28 dt. 18/03/86)

527. Foot plate staff who had suffered Head Injuries:- See Para 511 Sub-para(6)

528. Grant of leave to Railway employee who is unlikely to be fit to return to duty:-(1) When a medical authority has reported that there is no reasonable prospect that a particular Railway employee will ever be fit to return to duty, leave should not necessarily be refused to such a Railway employee. It may be granted, if due, by a competent authority on the following conditions:-

Section C:- Medical examination of Railway employees on promotion from non-Gazetted to Gazetted posts

529. Introduction:-(1) If an employee at the time of promotion to a Gazetted post falling under category (b) of para 530 below is on sick leave, both general physical examination and vision tests will be required. If, however, the employee, at the time of promotion, is not on sick leave and is on duty, only vision tests will be required.

(2) Those employees who are being promoted from non-gazetted to gazetted posts falling under category(a) of para 530 below will be subjected to medical examination for evidence of any chronic/acute illness which can interfere with the efficient performance of their duties after promotion, irrespective of the fact whether they were on duty or on sick list prior to their promotion.

(3) The details of these examinations are given below:

530. Classification of gazetted posts for the purpose:- For the purpose of examination of visual acuity of Railway employees promoted from non-gazetted to gazetted posts, the gazetted posts should be divided into two categories as follows:-

(a) All posts in Mechanical, Electrical, Civil and S&T Engg. and Traffic (Transportation and commercial) Department.

(b) All posts in other departments which are not connected with train working or use of trolley on open line.

531. General physical examination:- The standards of general physical examination, when done, will be the same as prescribed for the candidates for appointment to gazetted Railway service.

532. Vision tests:-(1) For category (a) mentioned in para 530 above, the following visual acuity standards should apply:-

Distant vision	...	... 6/12, 6/18 with or without glasses
Near vision	...	... Sn.0.6, 0.6 with or without glasses
Night vision	...	... should be normal
Color perception	...	... Both Ishihara and E.G.L should be normal
Field of vision	...	... Should be normal
Binocular vision	...	... Should be normal

Note :- (i) The difference between the power of lenses in each eye shall not exceed 4.00 D

(ii) The power of lenses shall not exceed 6.00 Diopters.

(iii) Color perception will be tested with E.G.L at a distance of 4.9 Meters with an aperture diameter of 1.3 mm and time of exposure will be 5 seconds. Ishihara also will be tested.

(iv) Defective Binocular Vision will be considered a disqualification.

(v) Posterior chamber I.O.L (Intra ocular lens) is permitted subject to following conditions:

a) In case of freshly operated IOL of less than 6 weeks duration, employee may be declared fit for Gazetted technical post provided his visual acuity is stable for 2 consecutive check-ups at an interval of 2 weeks.

b) All cases declared fit with IOL, in gazetted technical posts should report to the ophthalmologists for periodical check-up up to one year, at intervals of 6 months, from the date of fitness or at any time whenever they notice diminution of vision or any other problem in the operated eye.

c) Old cases (cases prior to 28/05/99) shall not be reopened.

(Railway Bd.'s letters No. 92/H/5/4 dt. 11/08/1992, No. 88/H/5/3 dt. 15/10/1992 , No. 92/H/5/4 dt. 09/11/1992 and No.99/H/II/5/3 dt. 21-05-1999)

(2) For category (b) mentioned above in para 530, the following standards will be applicable:-

Distant vision	...	... 6/18 in one eye regardless of vision in the other eye, with or without glasses
Near vision	...	... Sn 0.6 in one eye, regardless of vision in the other eye, with or without glasses

Note :- (i) Total amount of Myopia shall not exceed 8.00 Diopters in the corrected eye.

(ii) Officers of the Railway Protection Force and the Medical department should, in addition, have normal color perception and night vision.

(iii) Any organic disease which is likely to result in lowering of the visual acuity should be considered as a disqualification.

(3) All employees promoted to gazetted cadre from non-gazetted cadre will be examined for visual acuity and color vision as per standards mentioned above irrespective of their medical category in the non-gazetted cadre.

[\(Bd.'s No 92/H/5/4 dt. 21/08/1996\)](#)

533. Examiners :- The competent authority to conduct the medical examination of non-gazetted employees for promotion to gazetted posts is the CMS/MS in-charge of the division.

(M.O.R's letter No.E57/MB1/17 /Medical dt. 26/06/1957 and No.72/H/5/22 dt. 27/10/1972)

534. MEDICAL EXAMINATION OF EX-SERVICEMEN WHO HAVE BEEN RE-APPOINTED IN RAILWAYS AFTER RENDERING SERVICE IN ARMED FORCES

- (i) General Physical Examination: On the same standards as applicable to new recruits.
(ii) Vision tests: Acuity of vision as per the following table:

class	Distant vision	Near vision
A-1	6/9, 6/9 or 6/6, 6/12 with or without glasses. Naked eye vision not below 6/60 and power of lens not to exceed 4 D.	The combined near vision with or without glasses should be the ability to read ordinary print. Where reading or close work is required, combined near vision with or without glasses should be Sn. 0.6.
A-2	6/12, 6/12 or 6/9, 6/18 with or without glasses. Naked eye vision not less than 6/60. Power of lens not to exceed 6 D.	As above
A-3	6/12, 6/18 with or without glasses. Naked eye vision not below 6/60 and power of lens not to exceed 8.D.	As above
The candidate should not be colour blind when tested with EGL lamp(1.3mm aperture) and Ishihara plate for A-1, A-2 and A-3 categories.		
B-1	6/12, 6/24 with or without glasses. Power of lens not to exceed 8 D.	As above
The color vision should be normal with EGL lamp. No Ishihara test.		
B-2	As above Color vision not required for Bee –two and below	As above
C-1	6/18, Nil or combined. 6/18 with or without glasses.	Sn. 0.6 with or without glasses where reading or close work is required.
C-2	6/24, Nil or 6/24 combined with or without glasses. The difference of power of glasses between two eyes should not be more than + 4D	As above

GAZETTED POSTS: Standards should be the same as prescribed for serving Railway employees promoted to Group 'B' Gazetted posts.

Note: -(1) All other parameters as applicable to serving employees in different categories regarding the use of I.O.L, Keratotomy, squint, binocular vision, aphakia, etc. will be applicable as per their categories.

(2) There will be no relaxation of visual acuity for categories A-1, A-2 & A-3 if the age of the recruitee is below 35 years. They may be examined as per the standards laid down for new recruits.

535. MEDICAL EXAMINATION OF MEMBERS OF RAILWAY CLAIMS TRIBUNALS

For members of Railway Claims Tribunals who may be appointed at a very late age, medical examination will have to be conducted primarily with a view that the officer being examined is not suffering from any acute or chronic ailment which is likely to interfere with his efficient performance of duties. He should be examined with proper investigations, if required, to rule out cardiac ailments, ECG being compulsory.

Hypertension may be ruled out.

Diabetes mellitus - Fasting blood sugar and P.P. Blood sugar required to be done.

Renal pathology may be ruled out.

Hearing should be normal.

Controlled hypertension and diabetes mellitus with oral drugs or insulin may not be cause of disqualification, but officers suffering from complications/sequelae of the above diseases or any other diseases for which they may be required to be put on prolonged treatment, should be disqualified.

For visual acuity, these officers may be examined as per visual standards laid down for serving Railway employees getting promoted to Group 'B' posts not connected with use of trolley in open line.

A proper record of such certificates issued may be preserved for five years.

(Bd.'s No.94/H/5/8 dt. 01/12/1994 and dt. 23/12/1994)

Section D -Medical Certification

Sub-section I- Non-gazetted employees

536. Definition:-(1) The 'competent authority' means the authority empowered to grant the leave applied for by the Railway employee.

(2) The 'authorised medical officer' means the Railway medical officer within whose jurisdiction the Railway employee is head quartered, or one who is specially nominated for the purpose.

(3) The 'Competent Railway doctor ' means a Railway doctor empowered under para 544 to issue sick, fit, duty certificate and certificate for recommendation for leave for change of air or recuperation.

537. The different types of certificates that are issued by the Railway doctors in the event of sickness of a Railway employee are as under:-

- (1) Sick certificate.
- (2) Continuation sick certificate.
- (3) Certificate of recommendation for change of air or recuperation.
- (4) Fit certificate.
- (5) Duty fit certificate.
- (6) Invalidation certificate.

538. Sick certificate:-(1) When a railway employee, who is residing within the jurisdiction of a Railway doctor, is unable to attend duty by reason of sickness, he must produce, within 48 hours, a sick certificate from the competent Railway doctor in the prescribed form as given in annexure XI to this chapter.

(2) Should a Railway employee, residing within the jurisdiction of the Railway doctor, desire to be attended by a non-Railway doctor of his own choice, it is not incumbent on him to place himself under the treatment of the Railway doctor. It is however essential that if leave of absence is required on medical certificate, a request for such leave should be supported by a sick certificate from the Railway doctor.

(3) Sick certificate may be issued by the Railway doctor of the section in which the Railway employee resides for the time being.

(4) When a Railway employee residing outside the jurisdiction of a Railway doctor requires leave on medical certificate, he should submit, within 48 hours, a sick certificate from a registered medical practitioner. Such certificate should be, as nearly as possible, in the prescribed form as given in the annexure XI and should state the nature of the illness and the period for which the Railway employee is likely to be unable to perform his duties. The competent authority may, at its discretion accept the certificate or, in cases where it has reasons to doubt the *bonafides*, refer the case to the Authorised Medical Officer for advice or investigation. The medical certificates from the Registered private practitioners produced by the employee in support of their applications for leave may be rejected by the competent authority only after a Railway medical officer has conducted the necessary verifications and on the basis of the advice tendered by him after such verifications. However, where the Railway medical officer could not be deputed for such verifications, the certificate from the registered private medical practitioner may be accepted straightaway.

Note :- (i) Ordinarily, the jurisdiction of a Railway doctor will be taken to cover Railway employees residing within a radius of 2.5 K.M of railway hospital or health unit to which the doctor is attached, and within a radius of one kilometer of a Railway station of the doctor's line jurisdiction.

(ii) To prevent misuse of private medical certificates, the Divisional Railway Managers may withdraw the privilege as given in the concluding portion of the above sub-paragraph by special notification to the staff for special periods. In respect of workshop employees, the power to withdraw the privilege of acceptance of certificates from registered private practitioners shall be exercised by the administrative officers in J.A.G and S.A Grades.

(5) When issuing the certificates, Railway doctors will exercise care and judgement in recommending the period of absence for which the Railway employee is unable to attend duty which should be commensurate with the nature and severity of illness.

(6) The submission of sick certificate as prescribed in sub-para(1) to (5) above shall be tantamount to only an application for leave on medical certificate, and shall not be held to carry with it permission to quit the station, unless such permission is expressly given by the competent Railway doctor.

Note:- (1) A Railway employee who is placed on sick list by a Railway doctor should continue to report to him when fit to travel, or send intimation about his condition if he is bed-ridden, at such intervals as directed by the Railway doctor. If a Railway employee fails to do so, he is liable to be discharged from sick list for non-attendance.

(2) Special provisions for members of Railway Protection Force reporting Sick:

No member of the Force shall be taken on sick list by any Railway Medical Officer unless such member comes with written reference known as 'Sick Memo' from his controlling officer and also gives declaration in triplicate as per the proforma given at the end of this para.

The Controlling Officer shall issue 'Sick Memo' to the member of the Force on demand, whether such member is on duty or on leave at the Headquarters. While issuing such a memo, the controlling officer shall mention on it whether the member is required/detailed for special duty, under transfer order, facing DAR action and avoiding to attend departmental enquiry or is habitual of reporting sick, etc. In case such a member is taken on sick list by a Railway Medical Officer, the member shall intimate within 48 hours his controlling officer about being taken on sick list and submit the Railway Medical Certificate to the controlling officer.

The Railway Medical Officer taking the staff on sick list shall send one copy of the declaration as indicated in this rule to the controlling officer of the member, the second copy of the declaration will be kept by him for his record and the third copy will be handed over to the member of the Force along with Railway Medical Certificate and the member of the Force will submit the same to his controlling officer along with Railway Medical Certificate.

Provided that the member who, due to emergency, is not able to take 'Sick Memo' from his controlling officer, may directly report to Railway Medical Officer for treatment. The member will have to inform the Railway Medical Officer immediately, if he wants to report sick and give the declaration as given at the end of this paragraph in triplicate. In case the member is taken on sick list as outdoor patient, it shall be obligatory for the member to get a 'Sick Memo' from his controlling officer and submit the same to the Railway Medical Officer. If the member is taken on sick list as indoor patient, the Railway Medical Officer shall intimate the controlling officer by sending him a copy of the declaration and the controlling officer will issue 'Sick Memo' on receipt of the declaration from the Railway Medical Officer. The sick certificate, in any case, will be issued on receipt of sick memo from the controlling officer or any other equivalent or higher official.

Provided further that if a member is on leave or on duty away from his Headquarters, he may take 'Sick Memo' from the in-charge of the nearest Railway Protection Force post/out post or from Station Master/Assistant Station Master, if no Railway Protection Force post/out-post is located nearby. The in-charge of Railway Protection Force post/out-post or Station Master/Assistant Station Master issuing a 'Sick Memo' as mentioned above shall intimate the controlling officer of the member immediately. In case the member is taken on sick list as outdoor patient, he will immediately intimate his controlling officer about this fact. The attending Railway Medical Officer shall examine the member with a view to find out if the member is fit to travel up to his Headquarters, if so, he will issue fit to travel certificate.

If a member is found to be habitually reporting sick usually on occasion of his deployment to special duty or on refusal of leave he may be sent for special medical examination by competent authority to ascertain as to the genuineness of the illness.

Wherever there are more than one doctor in the hospital/Health Unit/OPD (Outdoor Patient Department), the issuance of Railway Medical Certificate for the RPF shall be dealt with only by one authorised doctor to be nominated by the in-charge of the Hospital/Divisional In-charge.

Ordinarily no Railway Medical Certificate shall be issued for more than 7 days at a time unless a member is admitted in the hospital as an indoor patient. Similarly, after discharge from the hospital, a member shall not be kept on sick list for more than 14 days at a time.

Provided that in certain circumstances if the Medical Officer concerned is of the opinion that the patient will have to be kept as an OPD (Outdoor Patient Department) case for domiciliary treatment for a longer period, the same may be done but a detailed report will have to be sent about such patient to the Chief Medical Superintendent/Medical Superintendent in-charge of the division endorsing a copy of the same to the controlling officer of the patient:-

A member who has been issued Railway Medical Certificate shall be examined regularly during the period of sickness by the Railway Medical Officers.

A member of the Force on sick list shall not leave his place of treatment without the written approval of the leave sanctioning authority except for such exercise as may be prescribed and notified in the order by the Railway Medical Officer.

To matters not covered under foregoing rules, extant provisions of Railway Rule/Indian Railway Medical Manual shall apply.

DECLARATION TO BE GIVEN BY THE MEMBERS OF THE FORCE AT THE TIME OF REPORTING SICK

I am not feeling well. I may please be issued a Medical Certificate w.e.f I shall bring the sick memo/I have brought the sick memo from my authorised Departmental Officer/Supervisor i.e.(mention designation, Head quarter/ Station of the departmental Officer/supervisor where intimation of sickness is required to be sent)

I declare that (strike out whichever is not applicable)

- 1) *I am/am not under order of transfer, temporary/Emergency duty or under D&A action.*
- 2) *That I am on sanctioned casual leave/Leave on Average Pay w.e.f..... to*
- 3) *I was not on sick list/declared fit by any railway/Private doctor immediately prior to this date*

Or

I was on sick list with and have been given fit/Transfer certificate on

Signature /L.T.I of the Employee

Name.....

Rank & Number.....

Place of Posting.....

(Rly Bd.'s No. 87-Sec(Spl) 6/2 dt. 18/21-03-97)

539. Continuation sick certificate:- (1) When a Railway doctor who has issued a sick certificate for a prescribed period in the first instance finds that the illness of the employee is likely to result in the absence of the employee from duty beyond the period prescribed in the original sick certificate, he will issue immediately a continuation sick certificate in the prescribed form as given in the annexure XII to this chapter. The certificates should be serially numbered.

(2) When a Railway employee who is residing outside the jurisdiction of the authorised medical officer and is under the treatment of a non-Railway registered medical practitioner requires further extension of leave, he should submit a continuation certificate from the non-Railway medical practitioner to the competent authority who may at his discretion accept the certificate or refer the case to the Railway medical officer for advice or investigation and then deal with it as circumstances may require.

540. Certificate of recommendation for leave for change of air or recuperation:-(1) A change of air or recuperation certificate should be issued by a Railway doctor only when in his opinion a Railway employee who has recovered from a serious illness and is convalescing, requires a further period of leave for change of air or recuperation, or in the case of Railway employee who is suffering from a disease the nature of which requires a change of air. In all other cases, where a Railway employee requires further treatment for the disease which he/she is suffering from, the Railway doctor should issue a continuation sick certificate only.

(2) Medical officers of the rank of D.M.O and above are authorised to issue a certificate for change of air or recuperation.

(3) When an Assistant Divisional Medical Officer desires to recommend an employee for change of air or recuperation, he must refer the case to the medical officer in-charge of the division, or inform him in writing giving brief history of the case and the necessary recommendation. The CMS/MS of the division, will either on examination of the employee or on the strength of the recommendation, issue necessary certificate in the prescribed form as given in annexure XIII to this chapter. The certificates should be serially numbered.

541. Fit certificates:-(1) A Railway employee who has been on leave on medical certificate shall not be permitted to resume duty till he/she has produced a fit certificate or a duty certificate in the prescribed form from the competent Railway doctor.

(2) When a Railway employee, who has been under the treatment of the authorised medical officer and in whose favour a sick or a change of air or recuperation certificate has been issued is after examination found fit for duty, the competent Railway doctor will issue the necessary fit certificate in the prescribed form as given in annexure XI.

(3) Where a Railway employee remained on leave on medical grounds, up to and including three days duration and reported back for duty with a fitness certificate from a private medical practitioner, he may be allowed to join duties without obtaining fitness certificate from the Railway Medical Officer, subject to the condition that the employee furnishes a declaration that he/she has not suffered from any eye disease during this period. In cases where the duration of sickness is more than three days, the Railway employee should be put back for duty within 24 hours on his/her producing fit certificate from a private medical practitioner, provided he/she is found fit by the Railway medical Officer. However, in case there is any delay beyond 24 hours in obtaining a fitness certificate from the competent Railway medical officer, the employee concerned will be deemed to have been put back to duty within 24 hours of his producing the medical certificate from the private medical officer.

(Ministry of Railway's letter No. E(G)78 LE1-17 dt. 18/01/1979)

(4) When a Railway employee reports sick away from his/her head quarters, the local Railway doctor will, if he considers that the Railway employee is sick and unfit to work, issue a sick certificate, but as soon as the employee is fit to travel, issue a transfer memo and transfer him/her to his/her head quarter station and forward the case papers to the Railway doctor at the headquarters station for further action. In the case of relieving staff whose sickness is likely to be of less than ten days duration, the local railway doctor may return the employee to duty issuing fit certificate in his favour.

Note:- Both sick and fit certificates should have the same counter-foil and should bear the same number. Serial numbers should be printed.

542. Duty certificate:- When a Railway employee who is residing either within or outside the jurisdiction of the Railway doctor and who has been under the treatment of a non-Railway registered

medical practitioner, presents himself with a certificate from the non-Railway registered medical practitioner, has not complied with the rules on the subject, or if there is any doubt regarding the genuineness of the case, for instance, if the submission of the medical certificate is inconsistent with any known facts, or it cannot be ascertained whether the medical attendant is registered medical practitioner or not, the authorised medical officer, after careful examination, will issue a duty certificate in the prescribed form as given in the annexure XIV. The certificates should be serially numbered.

543. Invalidation Certificate:-(1) For the invalidation of a non-gazetted railway employee, a medical board is necessary. This medical board should be headed by the CMS/MS of the division. The recommendations of the medical board will be forwarded to the Chief Medical Director who is the competent authority for acceptance.

(2) When a Railway employee appears before a competent Railway doctor to obtain a certificate under this section or presents a certificate from a non-Railway registered medical practitioner and in the opinion of the Railway Medical Officer, there is no reasonable prospects that the Railway employee will be fit to resume the duties of his post, the case should be referred to the CMS/MS in-charge of the division, who will decide about the examination of the case by a Medical Board.

544. Authority for issue of different types of certificates under these rules:-

(1) Sick certificate/Fit certificate:-

Designation	Maximum period for which the certificate can be issued.
(a) Asst.Divl.Medical Officer	Up to four months
(b) Divl.Medical Officer	Up to nine months
(c) Admn.Grade Medical Officer in charge of Hospital / division	Up to eighteen months

(d) Where the total period of the certificate exceeds 18 months approval of the Chief Medical Director has to be taken.

(2) Certificate of recommendation for leave for change of air or recuperation:-

Designation	Maximum period for which the certificate can be issued.
(a) Asst.Divl.Medical Officer	Nil.
(b) Divl. Medical Officer	Up to two months.
(c) S.A.G. Medical Officer	Beyond two months and Up to Nine months
(d) C.M.D (PHOD)	Beyond 9 months.

(Railway Bd.'s letter No. [90/H/5/14 dt. 18/06/1991](#), No. 90/H/5/14 dt. 15/10/92)

545. General Instructions:-(1) When A Railway employee who is under the treatment of a Railway medical officer leaves the station where he had reported sick without the consent of the authorised medical officer or subsequently absents himself or fails to intimate the medical officer that he/she is bed-ridden and unable to attend the health unit, the medical officer shall discharge him/her from the sick list and endorse on the fit certificate -"Discharged for non attendance".

(2) A Railway doctor may be required by his superior authority to visit a Railway employee who has reported sick for the purpose of examining him/her and issuing a sick certificate. In exercising this authority, the Railway doctor should see that he complies with the directives in respect of the medical ethics by giving the employee an opportunity to have his own medical attendant present at the time of examination.

(3) During medical examination of an employee or candidate where the medical officer finds that the person is not fully fit for duty, he may be given an opportunity to come again after a lapse of some time. A written memo should be given to the person concerned advising him the reason for asking him to come again for the examination. A copy of this memo should be retained by the Medical Officer.

(4) The signature or the L.T.I. of the employee reporting sick should, as far as possible, be taken at the time of reporting sick ; failing which in any case at the time of issuing the fit certificate.

In addition, the Identity card No. of the employee may also be got entered in the sick/Fit certificates and also on the counter-foils.

Sub-Section 2- Gazetted Employees.

546. Definition:-(1) The "authorised medical officer" means the CMS/MS in-charge of the division within whose jurisdiction the gazetted officer is headquartered.

(2) The "competent railway doctor" means the CMS/MS in-charge of the division authorised to issue the medical certificates.

Note :- ADMOs/DMOs/Sr.DMOs in independent charge will however, continue to be authorised medical officers for the gazetted Railway employees stationed at places other than the Divisional head quarters.

547. Sick certificate or recommendation for leave or extension of leave on medical grounds:-(1) When a gazetted Railway employee reports that he/she is unable to attend duty by reason of sickness, the authorised medical officer, after careful examination of the gazetted Railway employee, will issue a medical certificate in triplicate in the prescribed form as given in annexure XVI, one copy of which will be retained by the gazetted Railway employee. The form prescribed should be adhered to as closely as possible and should be filled in after the signature of the applicant has been taken. The certifying officer is not at liberty to certify that the applicant requires a change from or to a particular locality or that he/ she is not fit to proceed to particular locality.

(2) when a gazetted Railway employee, head quartered at a station where there is no C.M.S/M.S I/C, reports that he is unable to attend to duty by reason of sickness, the A.D.M.O/D.M.O/Sr.D.M.Os of the station where the gazetted Railway employee has reported sick, can issue the necessary certificate and will immediately intimate the CMS/MS in-charge of the division.

(3) There is no provision of Private Medical Certificate in case of Gazetted Railway employees. If an Officer has been forwarded to the Authorised Medical Officer with a Private Medical Certificate a generally worded fit certificate on a plain paper should be issued. The fit certificate meant for Gazetted employees reporting sick with Railway doctor should not be used in these cases. A gazetted Railway employee reporting sick with the Railway doctor outside his headquarter, should be transferred to his head quarter with a 'fit to travel certificate' to report to his authorised medical officer.

(Railway Bd.'s Letter [No. 90/H/5/14 dt. 30/12/1994](#))

(4) The authorised medical Officer should intimate by telephone, letter or wire, the Divisional Railway Manager, or the head of the department, as the case may be, regarding the sickness of the gazetted Railway employee, so that necessary arrangements may be made for relief. In the cases where the sickness is likely to exceed ten days, report should be sent to Chief Medical Director. Ministry of Railways desires that as and when a high ranking Gazetted officer i.e Addl. G..M. and above is taken on sick list, information to this effect should invariably be sent to the D.G.(RHS)

(Bd.'s No. 91/H/5/1 dt. 25/04/1991)

Note :- (1) The leave sanctioning authority may waive the requirement of a medical certificate in case of application of leave on grounds of sickness for periods not exceeding three days at a time.

(2) No recommendation contained in a sick certificate shall be evidence of a claim to any leave not admissible to Railway employee under the terms of his contract or the rules to which he is subject.

(3) The information contained in the sick certificate as regards to the nature of the disease shall be treated as confidential.

(4) The certificates should be serially numbered.

548. Continuation sick certificates:-(1) When a gazetted railway employee, in whose favour a medical certificate prescribed in Sub-paras 547(1) and (2) above has been issued, requires by reason of his ill-health further leave, the competent Railway doctor will issue a medical certificate in triplicate in the form prescribed in annexure XVI adding the word "further" after "a" in line 3 of the certificate.

(2) In doubtful cases, where an authorised medical officer is unable to decide, at the time of examination, whether to grant or refuse the certificate, the gazetted Railway employee should be kept under professional observation for a period not exceeding fourteen days. In such cases, a certificate should be issued in the prescribed form as given in annexure XVII to this chapter, in triplicate.

Note:-(i) No recommendation contained in a continuation certificate shall be evidence of a claim to any leave not admissible to the Railway employee under the terms of his contract or the rules to which he is subject.

(ii) The information contained in a continuation certificate in respect of the nature of the disease should be treated as confidential.

(iii) The certificates at annexure XVI and XVII should be serially numbered.

549. Medical certificates of fitness for return to duty:- (1) A gazetted Railway employee who has been issued a medical certificate (vide para 547 and 548), before he is declared fit to return to duty, should be issued a certificate of fitness in the prescribed form as given in annexure XVIII to this chapter, in triplicate.

(2) At the time of issuing this certificate, the competent Railway doctor should peruse the original medical certificate issued in favour of the gazetted railway employee.

Note:- These certificates should be serially numbered.

550. Certificates of invalidation from service:-(1) A Railway employee shall not be invalidated out of service on account of ill health except on the certificate of a medical board. Such a certificate will be issued in the prescribed form as given in annexure XV to this chapter, in triplicate. The certificates should be serially numbered.

(2) If the medical board is unable to say with certainty that the Railway employee will ever again be fit for service, the medical board will recommend leave not exceeding one year in the first instance. Such leave should not be extended without further reference to Medical Board.

(3) The employee will be considered invalidated with effect from the date of recommendation of the Medical Board in case the same is accepted by the Chief Medical Director.

(Rly. Bd's Letter No.No 2000/H/23/1 dt 25/05/2000&No.2000/H/23/1dt 10-05-2001)

551. Grant of leave:- The grant of a certificate under the provisions of the above section does not in itself confer upon the Railway employee any right to leave. The certificate should be forwarded to the authority competent to grant leave and the orders of that authority should be awaited.

Sub-Section 3 -General

552. Issue of certificate on the strength of medical evidence/opinion:-(1) The doctor should issue a sick certificate to cover only the period during which the patient has been actually under his observation/treatment. The doctor may issue a certificate to cover the period of sickness of an earlier date only if he is requested by the administration for such a certificate and if he is satisfied about the genuineness of the case on the strength of medical evidence available with him, which should be recorded in detail.

(2) In case where the patient staying at some distance from the hospital/health unit needs rest for a few days for recuperation/convalescence after a period of illness, the doctor may issue him a fit certificate on discharge from the O.P.D/ indoor hospital, at the same time recommending him to resume duty from a specified date later on- not beyond 4 days from the date of discharge. An endorsement to the effect that "----"days leave has been recommended for convalescence should be made on the counter-foil.

(Section IV of the I.R.E.M and Rules 2229 to 2234-RII and Ministry of railway's letter No.60/M&H/7/29 dt. 29/11/1960, No. 62/H/1/21 dt. 27/04/1962, No.64/H/7/49 dt.06/04/1964, NO.64/H/1/50 dt. 22/09/1964, No. 65/H/7/162 dt. 09/12/1965, No.68/H/1/12/dt. 22/05/1970, 26/06/1970 and 24/11/1970, No.62/M/6-1/27 dt. 11/01/1973, No.68/H/1/12 dt. 26/07/1973, nO. 73/H/6-1/26 dt. 21/11/1973 No.79/H/5/37 dt. 04/12/1979 and No.FE III/74/PNI/14 dt. 13/07/1976)

Section E - Medical Boards

553. Classification of Medical Boards:-(1) Medical Boards may be classified into two categories, namely:-

(a) Obligatory, and

(b) Optional.

(2) A medical board is **obligatory** in the following cases:-

(a) **Gazetted Railway employees:-**

(i) for the examination of candidates for appointment into Group A and Group B services on the Railways and elsewhere, under instructions from the Railway Ministry;

(ii) for invalidation from service on account of ill-health;

(iii) for commutation of pension if the employee's application for commutation of pension has not been received by the Head of office within one year of retirement of the employee.

(b) **Non-Gazetted Railway employees:-**

(i) for invalidation from service on account of ill-health; and,

(ii) for commutation of pension if the employee's application for commutation of pension has not been received by the head of Office within one year of retirement of employee.

(3) The holding of medical board is **optional** and is left to the discretion of Chief Medical Director to convene under the following circumstances.:-

(i) Prior to issue of certificates in cases involving decisions on matters of clinical difficulty and alleged fraud or malingering.

(ii) Prior to issue of certificates and reports in cases of non scheduled injuries or disablement likely to be subject of dispute under the Workman's Compensation Act.

(iii) Prior to issue of certificates of fitness or unfitness for further service to non gazetted employee where the decision rests on the interpretation of points of special clinical difficulty and involves the safety of public or urgent departmental requirements.

(iv) Where the Chief Medical Director considers examination by a board desirable for any special reasons.

554. Constitution of medical boards:-(1) A medical board should normally consist of three medical officers. The senior most among the three will be the chairman of the board.

(2) As far as possible one of the members of the board should be a physician, another a surgeon, and the third a specialist in the required field, like eye specialist in case of medical examination for recruitment to Gazetted services Class I and Class II or for invalidation of employee for reasons of visual defects etc..

Note:- The inclusion of an ophthalmologist is not necessary in the case of second medical board, when a candidate is declared unfit for reasons other than visual defects.

(3) For medical examination of female candidates for their appointment to gazetted posts, a senior lady doctor should be co-opted on the medical board, if the board does not already have a lady member. In case this is not feasible the physical fitness of the candidate may be examined by a non-member Railway lady doctor and her findings made available to the medical board.

(4) The reports of all medical boards should be treated as confidential.

(5) In case where a medical board, constituted to examine a candidate for appointment to a gazetted post, considers that a minor disability disqualifying a candidate for government service can be cured by treatment (medical or surgical), a statement to that effect should be recorded by the medical board. In such cases, there is no objection to a candidate being informed of the board's opinion to this effect by the appointing authority and when a cure has been effected it will be open to the authority concerned to ask for another medical board.

(6) The medical officers constituting a second medical board, when constituted to examine an appeal preferred by a candidate for gazetted services against the judgement of the first medical board, should be different from those of the first medical board who examined the candidate, but in no case should include any of the medical practitioners from whom the candidate has produced the certificate of fitness.

555. Constitution of a special medical board:- A special medical board, when constituted to deal with an appeal preferred by a candidate for a gazetted services who is declared unfit on account of visual acuity, should normally include two ophthalmologists. However, in cases, where the Railways find it difficult to get two ophthalmologists of the equivalent rank of D.M.Os to serve simultaneously as members of such a special medical board, only one ophthalmologist may be included. Whenever it is necessary to co-opt a non-Railway medical officer on the Railway medical board, the Railways should limit their choice to medical officers in the service of the Government or honorary medical officers working in Government hospitals.

556. Procedure for holding medical boards:- (1) All medical boards will be convened under the orders of the Chief Medical Director except for the examination of candidates for appointment to class I and class II services, which are convened under the instructions from the Ministry of Railways.

(2) The CMS/MS in-charge of the division desiring to refer a case to the Chief Medical Director for examination by a medical board, should submit in duplicate a complete history of the case including investigation reports giving the following details of the Railway employee.

- (i) Name
- (ii) Designation
- (iii) Date of appointment
- (iv) Permanent or temporary
- (v) Category to which she/he belongs
- (vi) Sickness particulars during the last two years
- (vii) Reasons for holding the medical board
- (viii) Two identification marks.

(3) The Chief Medical Director, on receipt of the report, will nominate the constitution of the Medical Board giving the date, time and place where it is to be held, unless the Railways have constituted a standing medical board for this purpose.

(4) Normally, such medical boards will be convened at the head quarters of the CMS/MS of the division referring the case, unless the nature of the case is such that the Railway servant is unable to undertake the journey to the place at which the medical board is to be held in which case it will be held at the nearest Railway hospital or health unit where the patient resides.

(5) The findings of the medical board, duly signed by the chairman and members, should be submitted to the Chief Medical Director by the president in quadruplicate. They will be in the form of a recommendation and will be free from ambiguity.

(6) The CMS/MS of the division referring the case will keep a copy of the results of the various examinations conducted, as well as the copy of the findings of the medical board, for record in his office. The president of the medical board will also keep a copy of the findings for records in his office.

557. Realization of fees and sharing thereof:- A fee of Rs 30/- should be collected from each candidate asked to appear before a medical board. Out of this amount Rs 9/- should be credited to the Railway revenue and the rest of the amount to be equally shared among the three medical officers including the non-Railway medical officer, if any, for the services rendered. When, however, it is not possible to get the services of a non-Railway medical officer for the fees prescribed, the Ministry of Railways may be approached for relaxation. This fee is charged for Group 'A' and group 'B' candidates for appointment and commutation of pension of retired Railway employee, if the retired employee is not a member of the Retired Employees' Liberalised Health Schemes.

(Bd.'s No 90/H/5/3 dt. 24/08/92 and dt 19/10/1992)

558. Payment of travelling allowance to non-Railway members:- The state medical officers, who are asked to serve on the Railway medical Boards, may be allowed travelling allowance by the Railway

authorities in addition to the normal share of the fee that they get from the candidates. In such cases, however, passes should be issued and the travelling allowance regulated under the state government rules as applicable to them.

(Rules 2228 and 2230-R II , Railway Ministry's letters No. E54ME5/27/3 dt. 14/10/1955, No. E58ME5/52 Medical dt. 7-9/04/1960, 30/07/1960 and 21/09/1961 and No.64/H/1/62 dt. 31/12/1964, no.64/H/1/2 dt. 12/02/1965, No. 65/H/1/21 dt. 28/06/1967, No.67/H/3/12 dt. 10/08/1967 and No.FE III/PNI/14 dt. 13/07/1976)

Section -F - Medical Recommendations

559. Types of Medical recommendations:- The medical recommendations that are issued to the Railway employees by the Railway doctors comprise of the following:-

- (i) Recommendation for light duty/change of occupation,
- (ii) Recommendation for transfer, postponement or cancellation of transfer on medical grounds,
- (iii) Recommendation for allotment of a Railway bungalow/quarter for better accommodation, and

560. Authority competent to make recommendations:- Medical recommendations of the types referred to in item (i) to (iii) above will be made to the competent authority directly by the Divl. Medical Officer in the case of non-gazetted staff. In the case of gazetted staff up to J.A grade, the recommendations may be made by in charge S.A.G medical officer of the division but should be forwarded to the Chief Medical Director if the period exceeds six months. For recommendations for officers of the rank of S.A.G. and above, CMD/PHOD will be the competent authority.

(Bd.'s No 90/H/5/14 dt. 18/06/91 and dt. 15/10/92)

561. (A) Recommendation for light duty -(1) Such recommendations are to be made by a Railway doctor in favour of an employee when, in his opinion, the Railway employee who had been under treatment for serious illness or injury is fit to resume duty in his original post but not fit to perform all the duties connected with that post.

(2) The medical officer (of the rank of D.M.O or above), before making the recommendation, should first ascertain from the competent authority, eg., the departmental superior of the employee concerned, whether it will be possible to provide the employee with such duty of light nature in his original post which will be compatible with Railway working.

(3) On hearing from the competent authority that such a request can be complied with, the Railway doctor will make necessary recommendation in the prescribed form as given in annexure XIX to this chapter, specifying the nature of light work or occupation and the specified period for which it is recommended. Such a recommendation should not exceed a period of three months in the first instance after which the case should be reviewed and under no circumstances should it exceed a period of six months.

(4) If the competent authority indicates its inability to provide temporary light duty or change of occupation, the employee should be kept on sick list till he is fit for duty or is de-categorised. The period of waiting should not exceed six months.

(B) Certificate of Decategorisation or Change of occupation : (1) If after the expiry of the period of six months granted under the certificate of recommendation of light duty, the employee is considered by the Railway doctor medically unfit for the duties of his original post, but not unfit for service on the other posts, the competent Medical Officer will issue the necessary certificate in the prescribed form as given in the annexure XX to this chapter, for a suitable permanent alternate appointment either in the same medical category or in a lower category.

Note :- (i) Recommendations should be of a general nature, no specific job being mentioned.

(ii) All employees being considered for decategorisation/permanent alternate appointment should be examined by a Medical Officer not below the rank of J.A Grade.

(iii) All such recommendations of permanent nature should be made only after the employee has been examined by a specialist in the field of the disease which the employee was suffering from. In the case of non availability of a specialist, the opinion of the Honorary consultant will be obtained and recorded.

(iv) The recommendation of the examining medical officer will be forwarded to the CMS/MS in charge of the division, who will be the accepting authority.

562. Recommendation for transfer, postponement or cancellation of transfer on medical grounds:- The Railway doctor should not take initiative in making such recommendations. Application for such requests will be made by the employee through his competent authority, who will forward the same to the Railway doctor. Before making such recommendations, the Railway doctor should consider carefully all the aspects of the case specially of the fact whether such a recommendation is in the interest of the employees health or the health of the family members and that it is compatible with the Railway working. When recommending postponement of transfer, the Railway doctor should state a definite period for which such a recommendation is made and keep the period to the minimum and in no case should it exceed six months.

Note:- When making such recommendations for transfer, the Railway doctor may express an opinion which should be of general nature, for example suitability or otherwise of dry climate, cold climate, sea side, touring duties or of working in connection with vehicles, etc. Recommendations regarding postings to a particular station or job must not be made.

563. Recommendations for allotment of a Railway quarter for better accommodation:- A Railway doctor may make recommendations for allotment of a Railway bungalow/quarter or a change for a better accommodation to a Railway employee:-

(i) Where he considers that either the railway employee himself or a member of his family is suffering from a disease which warrants bigger or healthier accommodation which the Railway employee cannot provide himself otherwise, or

(ii) Where the patient is subject to a disease which calls for immediate medical attention and the residence of the employee is desired to be near a hospital or health unit.

564. Disposal of recommendations:- All recommendations will be dealt with by the competent authority at his discretion and will not in any way give the right to the employee to demand the same nor will it be obligatory on the Railway administration to comply with the same.

Section G- Medical Examination and Certification for drunkenness on duty.

565. Definition of "drunk":- A person is 'drunk' when he is so much under the influence of an intoxicating drink or drug as to lose control of his faculties to such an extent as to render him unable to execute safely the occupation at which he is engaged at the material time.

(Ministry of Railway's letter No.69/H/3/26 dt. 03/01/1970)

Note: POLICY GUIDELINES FOR DRUNKENNESS ON DUTY

Railway Medical Officers are to be conversant with the policy, techniques and procedures about the collection of blood samples for the presence of alcohol to detect drunkenness on duty.

Item No 1. Safe limits of Blood Alcohol Content (BAC)

No. alcohol is admissible in the blood of staff working on the trains and zero blood alcohol levels are admissible . The above direction are in conformity with Railway Board's Directorate's letter No. 2001/Safety-a/23/4 dated 27th Nov. 2001. It is possible that there could be a significant time gap between the consumption of alcohol by an individual and the time at which blood samples are collected and analysis, which may result in some time related depletion of alcohol content.

Item No. 2 Authorization of Railway Medical Officers, for collection of blood.

Railway Medical Officers, are authorized to collect blood Samples and send them for analysis . Instrucons already exist regarding collection of blood samples for estimation of alcohol content form staff that is involved in railway accidents. If any person refuses to give his/her blood sample , when administration order it, then a departmental action can be initiated against him/her for insubordination. All cases of refusal should be recorded and got witnessed by a third person.

Item No. 3 Procedure and modalities of blood collection and testing.

Instruction already exist regarding collection of blood samples from loco engine crew and guards of trains involved in accidents. Serum or plasma is by far, ideal specimens for estimation of alcohol.. It is possible that the procedure i.e collection of blood and subsequent analysis in a lab may take some time and cause depletion in the levels. The samples are be collected preferably in two separate glass receptacles.

- 1) One containing anti-coagulant crystals/solution and
- 2) A plain dry clean bottle.

The following anti-coagulant/preservatives can be used for preservation of blood samples:-

- 1) Sodium fluoride in concentration of 20 mg per each ml of blood , or
- 2) A mixture of Sodium citrate and mercuric chloride @ 0.5 mg sodium citrate and 0.1 mg of mercuric chloride per each ml of blood.

Certain points to be observed for collection of blood specimens are :-

- I) For collection of blood, 5 no of vaccuainers or glass bottles of 5 ml size with a stopper are to be kept in ARME Scale I/II, Pomka/emergency medicines almira of the hospital/Health Unit.
- II) A total of 10 ml. of blood is to be collected @ 5 ml each in two glass receptacles one plain & dry and another with an anticoagulant preservative and stopper
- III) The sample should be properly sealed and labeled before sending it to the laboratory for analysis.
- IV) Signature of the employee whose blood sample has been collected should be taken on label applied to glass receptacle and on the memo sent to the lab along with the blood sample.
- V) The blood sample collected in the plain glass receptacle should be sent for analysis immediately and the sample collected in the glass receptacle with preservative should be kept in safe custody for analysis, at a later date if needed.
- VI) Skin to be disinfected with a non-alcoholic product to avoid contamination of the sample , e.g Benzalkonium chloride, Aqueous mertheolate, Thiomersal, Povidone iodine, etc. Adequate amount of above mentioned antiseptic should be kept handy along with vaccuainers/glass bottles.
- VII) The sample should be sent to a well- equipped laboratory immediately and if stored is should be kept in a refrigerator at a temperature between 2 and 8 degrees.Celsius
- VII) The samples can be got tested at any Govt. or private lab at the earliest.

(Bd's No 99/H/7/C.Rly dt 15-12-2003)

566. All drunkenness cases to be examined carefully:-(1) Every case of drunkenness is a potential medico-legal case and the railway doctor called upon to certify such a case should make a careful examination and should note down every important particular.

(2) Railway doctor may also have to issue drunkenness certificates to persons presented by police at places where there is no civil hospitals or dispensaries and only a Railway hospital or health unit exists.

(3) In places where prohibition is in force, it is an offence even if one has imbibed alcohol, let alone getting drunk. When such a case is brought, the Railway doctor should carefully examine the case and certify as to whether (a) the person has imbibed alcohol but not drunk or (b) the person is actually drunk. i.e. under the influence of alcohol.

(4) The proforma for recording of particulars of a suspected case of drunkenness is given in annexure XXI to this chapter. This form should always be kept handy as the Railway doctor may be called upon to certify drunkenness at any moment and sometimes away from his head quarters.

(5) It is desirable that a Railway doctor, when certifying cases of drunkenness, should base his opinion on the following considerations:-

- (i) Whether the person concerned has recently consumed alcohol.
- (ii) whether the person concerned is so much under the influence of alcohol as to have lost control of his faculties to such an extent as to render him unable to execute safely the occupation in which he was engaged at the material time.
- (iii) Whether his state is due, wholly or partially, to a pathological condition which has caused symptoms similar to those of alcoholic intoxication, irrespective of the amount of alcohol consumed.

(6) He should not certify the case as drunk just because the patient is smelling of alcohol. The quantity taken is also no guide, but the fact of impairment of his capacity to perform his duties has to be taken into account.

567. Instructions regarding issue of certificate of drunkenness:-(1) When a railway doctor is called upon to certify a case of drunkenness in a Railway employee, he should after careful examination, immediately report by a telegram or urgent letter his opinion to the immediate superior or Divisional Officer of the employee concerned intimating whether the employee has to be put off duty or not.

(2) When a Railway doctor is asked to certify the crew of a running locomotive and if on examination he finds a member of the same under the influence of alcohol, he should immediately issue a memo to the authority concerned to put the person off his duty.

(3) As far as possible, a senior doctor should undertake to examine such cases of drunkenness rather than depute the juniors, and in case of doubt, should refer the case to the C.M.S./M.S in-charge of the division.

Section H- Medical Examination and Certification for Mental Instability

568. All mental instability cases to be examined carefully:-(1) Every case of mental instability is a potential medico-legal case and the Railway doctor who is called upon to examine and certify such a case, should go over it carefully and elicit all the relevant points. The proforma for recording the examination points is given in annexure XXII to this chapter.

(2) He should particularly be careful to see whether the case is genuine or feigned insanity.

569. Term " Mental Instability" to be used:-(1) While certifying a case of mental diseases under treatment the Railway doctor should certify the case as "mental instability" and should not use the term 'insane' or 'mentally deranged'.

(2) Further the doctor should be well conversant with terms like "delusion"," hallucination," "illusion," "impulses", " obsession" and "lucid intervals", etc., as these are often used in giving evidence in a court of law. The medical officer should also make every effort to differentiate between Psychosis and Psycho-neurosis.

570. Procedure to be adopted by the Railway doctor when a Mental case reports sick:-(1) If a person is placed on sick list for mental disability, an intimation should be sent to the CMS/MS in-charge of the division concerned without delay. If the person is non-violent, he should be admitted for observation in In-door. If the person is violent, the CMS/MS in-charge of the division should be advised and he will arrange to visit the patient at the head quarters of the patient, as soon as possible, after receiving the information.

(2) If a person has reported sick on a private medical certificate, it is for the department to accept or refuse the same. If the opinion of the medical department is sought by the employing department, the procedure outlined in the preceding para should be followed.

571. Declaring mental cases fit for duty:-(1) In medical board on mental cases, Railway's own Psychiatrist or a Government mental specialist should be a member. If this is not possible, the CMS/MS in-charge of the division may declare a mental case fit, if a certificate from a mental specialist is produced and he agrees with the recommendations contained therein.

(2) When a person appears with a fit certificate from a private medical practitioner, with a view to taking up duty, the case should be referred to CMS/MS in-charge of the division, who will examine him and may insist, if necessary, on the production of fit certificate from a mental specialist.

572. Procedure for admission of a case to a mental hospital:-(1) A nearest relative, who has attained the age of majority, should apply to the Magistrate by a signed petition, supported by two medical certificates, one of which should be from a Government Civil surgeon and the other from a medical practitioner with a minimum qualification of a M.B.,B.S. degree. These certificates should be independent of each other. The application should reach the Magistrate within seven days of the issue of the medical certificates. On the strength of these, the Magistrate will issue reception order for admission of the person to a mental hospital, provided there is room for admission, the superintendent of the hospital is willing to take the patient, and the petitioner is willing to pay the staying charges of the hospital.

(2) Railway employees themselves are governed by the rules contained in section D of Chapter VIII of this Manual.

573. Discharge of a patient from a mental hospital:-(1) The patient when cured will be discharged from a mental hospital on being certified by the Superintendent.

(2) Even if the patient is not fully cured, he may be discharged from the mental hospital on the written application of the relative to the superintendent that he will look after the patient, provided of course, that the patient should not be dangerous to himself or others.

574. List of posts in which staff having recovered from mental diseases should not be employed.:-

(a) Any duty which will entail the charge of a locomotive or a moving vehicle, for example Driver, shunter, Guard etc.,

(b) Any duties connected with locomotives or moving vehicles where interference by the employee in charge may result in disaster.

(c) Any duties connected with signaling.

(d) Any duties in connection with running trains which would subject the individual to great mental strain for example, " control duty".

(e) Any technical duties involving more than ordinary strain and self control.

(f) Any duties connected with the travelling public which demand a firm control over temperament for example, Platform inspector, assistant station master, Booking clerk, Ticket collector, etc.,.

(g) Any duties which involve a higher financial responsibility than ordinary clerical duties, for example Pay clerk, Cash witness, etc..

(h) Any duties in which loss of control or a relapse of the disorder may result in loss of life and damage to the property.

(i) Any other employment in the Railways, which although not specified above, is considered by the head of the department or the Divisional Railway Manager to be unsuitable for the Railway employee who has been subject to mental instability and is quite possibly liable to recurrence.

Section I- Medical Examination and Certification of Assault cases and Other Medico-legal Cases

575. Instructions for dealing with assault cases and medico-legal cases:-(1) All assault cases are potential medico-legal cases and as such should be referred to civil medical officer or to civil hospital or civil dispensary.

(2) In places, however, where there are no civil hospitals or dispensaries and only a Railway hospital or health unit exists, the cases may be brought to the Railway doctor. In such cases, the Railway doctor should give first-aid treatment and then direct the patient to the nearest civil hospital/dispensary. In such cases, the Railway doctor may give an injury/wound certificate on request from the police. Injury/wound certificates may be issued only on the written request of a police officer. A true copy of the same should be retained by the doctor.

(3) Assault cases occurring in the Railway premises or amongst the Railway employees may be brought to the Railway health unit or the hospital by the police, or these cases may come directly. In such cases, the Railway doctor should attend to the injured and keep their complete record, which he might be called upon to produce in the court later.

(4) Medico-legal examinations in circumstances where no medical aid is required should be undertaken only at those stations where the administration has specifically agreed to undertake this type of work.

(5) While examining assault cases, a doctor should go over the cases methodically, thoroughly and carefully, as there is always a likelihood of the examining doctor being called to give evidence in a court of law. While giving evidence, he will have to produce the relevant records connected with the case. He should especially note the following points:-

- (a) Time of admission, or the time of seeing the patient.
- (b) The persons by whom brought. If it is a police constable, his number should be recorded.
- (c) The name, occupation and full address of the person assaulted.
- (d) Two identification marks.
- (e) History of how, where, when and by whom the person was assaulted.
- (f) Details of injuries on the person. their nature- simple, grievous. If any open wounds their length, breadth, depth and situation of the same.
- (g) The duration of the injury: hours or days.
- (h) The type of weapon used, whether dangerous or other wise.
- (i) If fracture is suspected, an X-ray is to be taken. In cases this facility is not available at the station, it should be taken as soon as the person assaulted is in a condition to be removed to such other station where such facility exists.

Note:- A dangerous weapon means any instrument used for shooting, stabbing, cutting or any instrument used as a weapon of offence which is likely to cause death.

576. Classification of Injuries :-(1) Injuries are classified into "grievous" and "simple" . The following types of injuries are classified as "grievous".

- (a) Emasculation.
- (b) Permanent privation of the sight of either eye.
- (c) Permanent privation of the hearing of either ear.
- (d) Privation of any member or joint.
- (e) Destruction or permanent impairing of the powers of any member or joint.
- (f) Permanent disfiguration of the head or face.
- (g) Fracture or dislocation of a bone or tooth.
- (h) Any hurt which endangers life, or which causes the sufferer to be, during the space of twenty days, in severe bodily pain or unable to follow his ordinary pursuits.

(2) Injuries other than those described above are "simple" injuries.

577. Dying declaration:-(1) If the condition of the patient becomes serious and if the doctor should think that the injured person would not survive, he should report the same to the police officer by phone or in writing, as the case may be, and should note the time of message given.

(2) The police officer in turn would inform the Deputy Magistrate, Tehsildar, or the Honorary Magistrate, as the case may be, to have the dying declaration taken. If the case is not by the police but is directly admitted, the Railway doctor may inform the Magistrate directly. In the absence of these the doctor should take the dying declaration himself in the presence of a police officer and two other witnesses.

(3) The Railway doctor should take verbatim what the patient says and should not put any leading questions. It should be read over to him and the patient should sign the same if he is able to do so. If he is illiterate his left hand thumb impression should be affixed. The signature or left hand thumb impression should be attested by the writer and by the two witnesses who are present. Under no circumstances should the police officer take the dying declaration.

578. Death Certificate:-(1) All deaths which are violent or unnatural, sudden and unexpected due to unknown causes, have to be reported to the coroner or to the police authorities. Once the coroner or the police authorities are informed of the death, the entire responsibility for certification rests with them. In such cases, all that the Railway doctor called on to examine the deceased may say is that "life is extinct" without giving any formal death certificate.

(2) Similarly if death takes place in case of assault, the Railway doctor should not issue a death certificate, but should send the case to the civil medical authorities for post mortem examination. When the

police report is received, then a death certificate may be issued with the endorsement ;" Issued after receipt of post mortem report".

(3) In a death certificate, the doctor should give the name of the deceased, his approximate age, his occupation and full address, if available and two marks of identification. He should state the actual cause of death, time, date and place.

Note:- In case of sudden or unexpected death, unless the doctor himself was present and he could conscientiously certify the true cause of death, he should not issue a death certificate.

Section J- Post Mortem Examination

579. Object:-(1) The object of post mortem examination of a body is to establish its identity when not known, and to ascertain the probable time since death and the probable cause of death; and in case of the body of the newly born infant, the object is also to determine the question of live birth and viability.

(2) Undertaking of post mortem work:- The Railway doctor should perform post mortem examination where the Railway administration has especially agreed to undertake this work.

(3) The Railway doctor concerned should then see that the facilities for post mortem examination exist at the hospital/health unit.

(4) Further, a medico-legal post mortem should never be undertaken unless there is a written order from the superintendent of police or the District Magistrate.

(5) Instructions for dealing with post mortem work:- Before commencing the examination the medical officer should carefully read the police report on the appearance and the situation of the body and the cause of death as far as could have been ascertained. This precaution is necessary especially in the case of decomposed bodies, so as to enable him to examine particularly the organ or the part of the body most suspected for the evidence of death.

(6) Identification of the body should be done by the officer who presents the written request for the post-mortem examination or by his deputy in the presence of the doctor.

(7) The examination should be conducted in day light, and not in artificial light. It should also be as thorough and complete as circumstances permit. Methodical examination should be made from head to foot and all the details to be noted under abrasions, bruises, nail marks, burns, wounds, gunshot wounds, fractures and dislocations, and their situation.

(8) The three great cavities, Cranial, Thoracic and abdominal and the organs contained in them should all be carefully examined even though the apparent cause of death has been found in one of them to avoid unnecessary and sometimes unpleasant cross question in court, in as much as evidence of factors contributory to the cause of death may be found in more than one organ. In suspected cases of poisoning, the viscera should be preserved and sent to the Chemist for analysis. In women vagina, uterus and ovaries should be examined.

(9) Ordinarily the body is sent to the morgue but in exceptional cases, the Medical officer may be taken to the place where the body is lying. In that case he should note the place and the nature of the soil where he found the body and also its position especially as regards the hands and feet, and the state of the clothes, if any. He should also note, in case of death from violence, the position of the body in reference to the surrounding objects, such as sharp stones and the likely contact which, it might be alleged, had produced the injury, and also whether any blood stains were visible on such objects or anywhere near corpse, and whether any weapons were lying near it. The ground in the vicinity should be carefully searched for the presence of foot prints and any evidence of struggle. In the case of suspected death from poisoning, he should note whether any appearances of vomited matter etc. were present in the neighborhood of the body.

(10) All the details observed by the medical officer should be carefully entered on the spot by himself in the post mortem report or in a notebook, which can be used as evidence in a legal inquiry. He should not mind the report getting soiled, in fact this will enhance the value, in as much as it goes to prove that it was written at the time when the facts were still fresh in mind. If there is an assistant, the best plan is to dictate to him as the examination proceeds step by step, and then read, verify and attest the report. It is not safe to trust memory and to write the report later on after completing the examination. the notes and the report to be sent to court must tally with each other. There should be no discrepancy. Nothing should be erased and all alterations should be initialed.

(11) The medical officer holding the post mortem examination should note the time of the arrival of the body at the morgue, the date and hour of the post mortem examination and the name of the place where it was held. There should be no unnecessary delay in holding of the post mortem examination. It should be made as soon as the papers are brought and the exact time of delivery of these papers should be noted.

Section K- Other General Instructions regarding Medical examination

580. Examination of serving Railway employees suffering from contagious diseases. etc.:-(1) Where the competent authority has reason to believe that a Railway employee is suffering from :

(a) either a contagious disease, or

(b) Physical or mental disability which, in the opinion of the authority, interferes with the efficient discharge of the Railway employee's duties, that authority shall relieve the Railway employee from duty and arrange for medical examination of the Railway employee forthwith and the Railway employee will be considered to be on leave.

(2) If the examining authority subsequently expresses the opinion that it was unnecessary for the Railway employee to have been relieved from duty, he will be put back to duty and such leave shall not be debited to the leave account of the employee. The period of absence from the date of relief from duty in terms of the above provisions to the date he is put back to duty shall be regarded as duty.

(3) On the basis of the opinion expressed by the examining medical authority and subject to the provision contained hereinafter, the competent authority may require the Railway employee either to continue on leave or to retire from service.

(4) For the purpose of the rules contained in paras 580(1) to 580(7), the competent authority in relation to a Railway employee shall be the authority as specified below:-

Gazetted Railway employee, Group 'A'	.. ..	Railway Board
Gazetted Railway employee, Group 'B'	.. ..	General Manager
Non-Gazetted Railway employee	.. ..	Divisional or Senior scale Officer

(5) If the employee has to be incapacitated from service, then the rules regarding invalidation from service should be followed.

(6) The authority directing the Railway employee to undergo medical examination shall communicate to the examining medical authority all such details concerning the medical history of the case as available in official records of the case, and shall include a directive that the standard of the physical fitness to be adopted should make due allowance for the age and the length of service of the Railway employee concerned.

(7) The authority directing the Railway employee to proceed on leave pending medical examination shall also intimate the fact to the examining medical authority and require it to express an opinion on the necessity for the Railway employee to have been required to proceed on leave.

(8) If the examining medical authority finds the Railway employee to be in bad state of health and considers that a period of absence from duty is necessary in his case for the recovery of his health, it may recommend the grant of leave to him for that period.

(9) If the authority considers that there is no reasonable prospect of the Railway employee recovering his health and becoming fit to resume his duties, it shall record the opinion that the Railway employee is permanently incapacitated for service, and shall also give reasons for that opinion.

(10) In either case, the examining medical authority shall communicate its findings to the authority which directed the Railway employee to undergo the medical examination .

(11) A Railway employee in whose case the grant of leave is recommended by the examining medical authority shall be required to continue on leave by the authority competent to grant him leave as soon as the findings of the medical authority becomes available.

(12) The leave granted shall be of such nature, and for such period, as would be admissible to the Railway employee under the rules applicable to him if he had applied for the leave on medical certificate provided that the period of leave shall not extend beyond the date of expiry of the period recommended by the medical authority.

(13) A Railway employee declared by the examining medical authority to be permanently incapacitated for further service shall be retired from service, but before the Railway employee is actually retired from service, the authority which directed him to undergo medical examination shall inform him in writing of the action proposed to be taken in regard to him indicating briefly the grounds on which such action is proposed to be taken.

(14) The Railway employee shall be informed that :-

(a) Subject to the provisions of para 528, and orders regarding grant of leave to persons suffering from specified diseases like tuberculosis, his retirement will have effect on the expiry of the period of one month from the date of communication unless he desires to retire from an earlier date.

(b) He may submit, if he so desires within a period of one month, a request to be examined by a Medical Review Board supported by prima facie evidence that grounds exist for doing so; and

(c) If he prefers a request for examination by a Medical Review Board, he shall be liable to pay the fees prescribed under para 580(17)

(15) For the period from the date of communication up to the date of retirement under para 580(16), the Railway employee shall be granted leave under the rules applicable to his post or service as if he has applied for leave on medical certificate.

(16) On receipt of the application for review, the competent authority shall take steps to constitute a Review Board in consultation with the Chief Medical Director of the Railway. If the review Board confirms the opinion of the examining medical authority, the retirement of the Railway employee shall, subject to the provisions of Para 528, be effective from the date on which the decision is communicated to the Railway employee. If on the other hand the Review Board recommends grant of leave to the Railway employee, action shall be taken as provided in Para 580(11) and 580(12).

(17) The entire expenditure involved in assembling the Review Board shall be borne by the Railways, provided that the Railway employee shall be required to pay a fee of Rs 30/- which shall be refunded if the Railway employee is not retired as recommended by the first medical board.

581. Medical Examination, Preferably near the Home Stations:- Medical examination of a candidate should be arranged only at such places where arrangement for such examination exists, but preferably nearest to the place of residence of the candidate. In case he happens to reside at a station nearer or on a non-employing Railway, the employing Railway should issue necessary memo to the other Railway for arranging medical examination at a centre nearest to the home station of the candidate.

582. Issue of passes to Staff sent up for Medical examinations:- All staff sent up for medical examination should be provided with passes for their to and fro journeys by their concerned departments.

583. Issue of age certificates to juvenile offenders:-(1) Railway Magistrate, when trying juvenile offenders for ticket-less travel, may require medical certificates assessing the age of the offender.

(2) Since the work concerned is connected with the day-to-day Railway work, such age certificates should be issued by Railway Medical Officers when the offenders are referred to them for the purpose.

(Ministry of Railway's letter No. E 56 ME 1/23/Med. dated 30/07/1956)

584. Medical examination at the time of confirmation:- A Railway employee already examined in the category appropriate to the post in which he is being confirmed need not be sent for re-examination unless he is being confirmed in a post for which higher category of medical examination is required.

585. Medical examination of drivers and shunting staff of the privately owned Railway sidings:- The drivers and shunting staff of such of the privately owned sidings where they are required to perform shunting from the Railway station to the sidings and vice-versa and where privately owned locomotives are required to work in Railway traffic yards for placements, withdrawals etc., should be subjected to medical examination at least for the fitness of their vision by a Railway doctor, and competency certificate issued. A fee of Rs. 40/- should be charged per candidate, which should be shared in the ratio of 1:3 between the Railway administration and the Railway doctor.

(Ministry of Railway's letter No. 90/H/5/8 dt. 09/02/1993)

586. Medical examination of L.I.C cases:- Prior permission of the Government will be necessary for medical examination cases sponsored by the Life Insurance Corporation.

587. Periodical health check of all beneficiaries:- All Railway beneficiaries above the age of 40 should be encouraged to come up for the periodical health check-up. To encourage them to do so, it may be necessary to continue to insert the following notification in the Railway Gazette: ' For health check-up, ringat.....(telephone) to obtain an appointment. ' for this purpose, a Health card as given in annexure XXIII to this chapter may be used.

(Ministry of Railway's letter No.75/H/5/15 dt. 24/09/1975)

588 Medical Examination prior to re-employment after retirement:- When a Railway employee, whether Gazetted or non-Gazetted, is re-employed after his retirement, he will have to undergo a fresh medical examination prior to his re-employment if his duties concern public safety. If his duties affect only his and /or his fellow worker's safety and/or if he is covered by the Workman's Compensation Act, then the medical examination may be done if there is an interval of one year or more between the retirement and re-employment and /or if his periodical examination has already become overdue had he continued in service. In all other cases medical examination may be done if there is an interval of one year or more between retirement and re-employment.

(Ministry of Railway's letter No.76/H/5/6 dt. 26/04/1976)

589. Medical examination fee in the case of candidates and vendors:-(1) In case of pre-recruitment medical examination of candidates for non-gazetted Group C and D posts, candidates called for pre-recruitment medical examination for apprenticeship training on the Railways under the Apprentices act, 1961 and Apprentices (Amendment) Act 1973, vendors/commission agents of private catering units and casual labour who are appointed only for a short duration without a reasonable prospect of his/her getting a continuously extended employment or becoming a temporary employee, fees as shown below against each category may be charged :-

(a) Group 'C'	..	..	Rs 24/- per head
(b) Group 'D'	..	..	Rs 16/- per head
(c) Vendors/commission agents	..	..	Rs 20/- per head
(d) Apprentices	..	..	Rs 16/- per head
(e) Casual labour	..	..	Rs 6/- per head

(2) The fees may be charged and receipt issued by the same authority who has issued medical examination memos. The receipts should invariably be pinned with the medical examination slips. Without receipt, the doctors should not conduct medical examination. The fees collected in these cases should be credited, in full, to the Railway revenues.(Abstract Z)

(3) In the case of vendors/commission agents, fees should be charged only for the first medical examination.

(Ministry of Railway's letters No.76/H/5/20 dt. 16/11/1976. No.E(Trg)-77/8 dt. 25/04/1977, No.76/H/5/20 dt. 27/04/1977, No. 77/H/5/31 dt. 20/12/1977 and No.90/H/5/3 dt. 24/08/1992)

ANNEXURE I
(See Para 505)

STATEMENT AND DECLARATION TO BE GIVEN
BY A CANDIDATE FOR APPOINTMENT TO THE
GAZETTED RAILWAY SERVICE.

1. State your name in full (in block letters)
2. (a) State your age and birth place
(b) Do you belong to races such as Gorkhas, Garhwalis Assamese, Nagaland Tribals, etc., whose average height is distinctly lower ? Answer ' Yes' or 'No'. and if the answer is 'Yes', state the name of the race.
3. (a) Have you ever had Smallpox, intermittent or any other fever, enlargement or suppuration of glands, spitting of blood, asthma, heart disease, lung disease, fainting attacks, rheumatism, appendicitis ?
OR
(b) Any other disease or accident requiring confinement to bed and medical or surgical treatment ?
4. When were you last vaccinated ?
5. Have you suffered from any form or nervousness due to over-work or any other cause ?
6. Furnish the following particulars concerning your family -

Father's age, if living, No. of brothers living, and state of health their ages and state of health	Father's age at death No. of brothers and cause of death their ages at, and cause of, death	
Mother's age, if living, No. of sisters living and state of health their ages and state of health	Mother's age at death No. of sisters and cause of death their ages at, and cause of, death	

7. Have you been examined by a Medical Board before ?

8. If answer to the above is yes, please state what Service/
Services you were examined for ?
9. Who was the examining authority ?
10. When and where was the Medical Board held ?
11. Result of the Medical Board's examination, if communicated to you or if known.

I declare all the above answers to be, to the best of my belief, true and correct.

Signed in my presence
.....
.....
Candidate's Signature
Signature of Chairman of the Board

Note:- The candidate will be held responsible for the accuracy of the above statement, By willfully suppressing any information, he will incur the risk of losing the appointment and, if appointed, of forfeiting all claims to superannuation or gratuity.

ANNEXURE – II

(See Para 505)

(REPORT OF THE MEDICAL BOARD ON
.....(Name of
Candidate)

1. Physical examination –

General examination	:	Good
Poor	Fair	.....
Nutrition: Thin	.....	Average
.....	Obese	.....
Height (without shoes)	.....	Weight
.....	Best	Weight
.....
- Any recent change in weight
.....
.....
Temperature
2. Girth of Chest -

(1)	(	After full	inspiration)	
.....
(2)	(	After full	expiration)	
.....
1. Skin: Any obvious disease
.....
.....

his duties and for which of them is he considered unfit ?

17. Is the candidate fit for Field Service ?

.....
Chairman.....

Place :
Member

Date
Member

Note - The Board should record their findings under one of the following three categories :-

(i) Fit
.....

(ii) Unfit on account of
.....

(iii) Temporarily unfit on account of
.....

ANNEXURE III

(Deleted)

**ANNEXURE IV
(para 510)**

Class A-1

(1) Foot - plate staff

1. Driver/Assistant Driver
2. Electric train driver/motorman/Motor trolley driver
3. Fireman /Augwala /Trainee firemen
4. Shunter.
5. Staff instructor
6. Driver instructor
7. Engine Cleaner

(2) Apprentices

1. Apprentice motorman/ Asstt. Apprentice Driver

Class A-2

(1) Transportation traffic running staff

1. Guards/Asstt.Guard/Pilot guard

(2) Shunting staff of transportation, Mechanical, electrical and stores departments

- 1.Shunting jamadar
- 2.Hook man
- 3.Shunting porters
- 4.Shunt man.
- 5.Shunting master
- 6.Pointsman
- 7.Pilot jamadar
- 8.Engine pilot men
- 9.Lever men
- 10.Shunters
- 11.Shed pointsmen

(3) Cabin staff in Operative control of signals

1. Cabin men and Cabin supervisor
2. Cabin assistant station master
- 3 Lever man
4. Switchman/Relieving switchman
5. Cabin master/Cabin jamadar

(4) station staff in operative control of signals

1. Station master/Relieving station masters/ ASM/Relieving ASM
2. [Station superintendent, both supervisory and non-supervisory](#)
- 3.Traffic apprentices
4. Points jamadar
- 5.Shunting jamadar
- 6.Shunting porter
- 7.Jamadar
- 8.Line Jamadar
- 9.Pointsman
- 10.Gate signalman
11. Token porters,/safaiwala/safaiwali
12. Van Goods Porter and control porter.

Class A-3

(1) Loco inspectoral and loco shed supervisory and non-supervisory staff-Running shed

1. Loco inspectoral staff
2. Staff inspector
3. Section Engineer(C&W)
4. Junior Engineer (C&W) of all grades
5. Section Engineer (Loco)
6. Section Engineer(Carriage)
7. M.T. driver mechanics
8. Junior Engineer(loco)
9. Section Engineer stores
10. Sr.Section engineer(loco)

(2) Transportation inspectoral staff

1. Chief transportation inspector
2. Senior transportation inspector
3. Junior transport inspector
4. Traffic inspector
5. Clerk in-charge
6. Skid supervisor
7. Skid men.
8. Skid porters

(3)Signal,Telecom and interlocking inspectoral staff

- 1.Signal Inspector
2. Assistant Block Inspector
3. Sub Signal Inspector(Mech./Elect)
4. Apprentice Signal Inspector
5. Assistant Block inspectors
9. [All Telecommunications Inspectors](#)

(4) Navigating staff

1. Ferry superintendent
2. Ghat inspector
3. Machinery engineer
4. Assistant Marine Engineer
5. Marine engineer IV
6. Ghat serang
7. Shore gang serang
8. Floating dock serang
9. Passenger jett serang

(4) All staff authorised to work trolleys on open line.

1. Head trolley men
2. Trolley men
3. Motor trolley men
4. Head motor trolley men
5. Motor trolley fitter
6. Chief block inspector
7. Tele -communication inspector(line)
8. Sub-block inspector
9. Head signal inspector (Mechanical/ Electrical)
- 10.Head signal fitter (Mechanical / Electrical.)
- 11.Head signal Maintainer (Mechanical/ Electrical)
12. Motor Trolley Mechanics
13. Section Engineer(works)

14. Overseer/Sub-Overseer.
15. Superintendent, creosoting plant

(6) Station Yard Supervisory and non-supervisory staff

1. Yard Masters
2. Yard supervisor
3. Assistant yard master
4. Deputy yard master
5. Assistant Yard supervisor
6. Assistant Yard Foreman
7. Head Trains clerk
8. Trains clerk
9. Yard Foreman
10. Jamadar
11. Trains clerk in-charge
15. Relieving trains clerk
16. Running shed supervisors
17. Loco supervisors

(7) Permanent way inspectoral supervisory staff

1. Senior Section Engineer (P way)
2. Section Engineer (all grades) P.way
3. Junior engineer(all grades)P.way
4. Supervisor plate-laying
5. Plate-laying inspector

(8) Bridge supervisory and open line artisan staff

1. Bridge operators
2. Senior Section Engineer
3. Section Engineer (all grades)
4. Junior engineer (all grades)
5. Overseer bridges
6. Master supervisor
7. Sub-overseer Bridges
8. Bridge Mistry
9. supervisor (bridge)
10. Key man , bridge chowkidar

(9) Electrical traction inspectoral supervisory staff

1. Junior Engineer (TRS)
2. EMU Motormen,
3. EMU Instructor
4. EMU Driving inspectors
5. Loco Inspectors (EMU Safety)

(10) Gatekeeper of level crossing

1. Gate man
2. Electric Gate man
3. Sweeper gateman

Class B-1

(1) Station supervisory staff and others not in operational control of signals

1. Van goods clerks

2. Porters (Locking, fog. seal and Van)
3. Box porters
4. Seal men
- 5.Box Carriers
6. V.G. and S.Q. T. porters

(2) Yard inspectoral supervisory and other staff not in operational of points and signals

1. Number takers
2. Chowkidar
3. Tallymen
4. Stencilers
5. Cleaners (yard)
6. Junctions Verifiers
7. Store verifiers
8. Seal porter
9. Goods shed porter
10. Interchange inspector
11. Neutral inspectors

(3) Locomotive Running Shed and carriage and wagon repairing staff(Supervisory)

1. Junior Engineer Gr-I & II
2. Charge man Boiler Makers
3. Master Craftsman
4. Boiler, regional lubricant, district mechanical re-packing inspector
5. Traction power controller

(Non-supervisory)

6. Fitters, including diesel fitters (mechanical) and electrical fitters in the diesel shed.
7. Engine examiners
8. Boiler makers
9. Turners
10. Machinist
11. Coal issuers
12. Vacuum testing plant drivers
13. Stationary plant attendant
14. Khalasis
15. Welders
- 16.
17. Mechanics, including diesel mechanics Grade i and grade ii
18. Out door fitters
19. Weigh bridge inspectors
20. Section Boiler Maker
21. Boiler maker khalasis
22. Key men
23. Special messenger
24. Box porters
25. Chowkidars
26. Blacksmiths
27. Moulders
28. Tin smiths
29. Call men
30. Pump fitter khalasis
31. Carriage cleaners
32. Carriage khalasis
33. Boiler Maker Khalasi
34. Repackers
35. Stencilers
36. Inspector weighing machines
37. Fitters khalasis
38. Trimmers
39. Masons

40. Boiler washer
41. Gunner
42. Copper smith
43. Motor mechanic
44. Fuel issuer

(4) Engineering works supervisory staff and permanent way artisans staff etc.,

1. Carpenter
2. Hammer man
3. Painter fitter/Mason/mistry
4. Khalasi
5. Valve operator
6. Pipe line fitter
7. Mates : section, bridge, trucking gang.
8. Permanent way mates
9. **Keyman**
10. Gang men / Trackman and helper/
Permanent way khalasis
11. Patrolman
12. Mashal man
13. Signalman
14. Tunnel jamadar
15. Water column man
16. Work mistries
17. Work supervisor

(5) Signal maintenance artisan open line staff and others

1. Charge men
2. Signal maintainer
3. Signal head fitter
4. Signal fitter
5. Basic maintainer/Maintainer(Mech/Elect.)
6. Striker
7. Bellow Boy
8. Pointer
9. Electrical fixer
10. Wire man
11. Point Cleaner
12. Electric overseer
13. Blacksmith/Tinsmith /Carpenter
14. Hammer man
15. Painter
16. Mason
17. Helper
18. Line man
19. Token adjuster
20. khalasis
21. Interlocking mistries
22. Interlocking cleaners
23. Signal fitter Khalasis
24. Block fitter
25. Block fitter Khalasis
26. Mast fitters

(6) (6) Bridge Non-Supervisory Staff :-

1. Fitter
2. Carpenter/
3. Welder
4. Black Smith
5. Mason
6. Rivetter

7. Painter
8. Artisan Khalasi
9. Hammenerman
10. Bellow Man
11. Tindal
12. Dollyman
13. Rivet heater

(7) All Electrical traction maintenance/artisan staff unless specified in other categories

(8) Chemist and Metallurgical supervisory and other staff :-

1. Assistant Chemist/ Chemist/Senior chemist
2. Laboratory Assistants/ Laboratory Attendant

(9) Train examining staff (supervisory and others) :-

1. Train Examiner/ Head Train Examiner/Jr. Engg(Gr-I & Gr-II)
2. Technician Gr-I, II & III
3. Section Engg./ Sr. Section Engg.
4. Coach Attendant (Air-conditioned)
Passenger

(10) Para-Medical Staff :-

1. Laboratory Suptds.(all grades)
2. Radiographers (all grades)
3. X-Ray Technicians/ X-Ray attendant
4. Laboratory Assistants/ Laboratory Attendant
5. Dialysis Technicians
6. Cath Lab Technicians
7. TMT Technicians
8. Ophthalmic Technicians
9. Electronic Technicians
10. Clinical Psychologists
11. O.T. Technicians
12. Ambulance Driver

(11) All inspectoral supervisory and other staff of security forces including fire fighting staff (but excluding band man of the Railway Protection Force):-

1. Inspectors/ Sub-inspectors / Asstt. Sub inspectors
2. Head constable/ constable (excluding the following)
3. Head Constable (Fitter)
4. Watermen

(12) Motor transport inspectors staff and Mechanics :-

- (1) Foreman
- (2) Charge man
- (3) Mistries
- (4) Mechanics
- (5) Motor Mechanics
- (6) Road Motor Ambulance/Staff Car/Dispatch Motor Lorry Drivers.

(13) Commercial Department

1. Hamal

(14) Engineering Department :-

1. Reja (female Khalasi)
- (15) Electrical department :-
 1. All Train-lighting Group D staff
 2. All Air Conditioning group C group D Staff

CATEGORY B –2

(1) Steam crane drivers/ Mechanics/ and other Crane working staff :-

1. Steam crane Driver
2. Steam Crane fireman
3. Crane Driver/Mobile Crane Driver
4. Stationary Plant Attendant
5. Black smith
6. Crane Khalasi/Crane Mate/Crane Porter/Crane man
7. Shed man
8. Hand Crane Operator
9. Muccadam
10. Foilman
11. Slingers
12. Boiler Washer
13. Gunner/Crane Gunner

(2) Mechanical Power saw operators (bend saw, circular saw):-

1. Punch and Shear operator
2. Saw sharpener
3. Crane saw operator
4. Machine man
5. Bend Saw Operator
6. Saw Doctor
7. Metal Sawyer

(3) Traverse Operating staff including Electrical Crane Operating including Group ‘C’ and Group ‘D’

(4) Man employed on Vertical Spindle Wood-moulding machine

1. Machinist
2. Pattern Maker (Operating vertical spindle wood moulding machine)
3. Wood Machinist (Semi-skilled/skilled)
4. Machine man (semi-skilled)
5. Driller
6. Tool grinder/Grinder/Welder/Tumer

(5) Diesel Engines other than loco and Compressor drivers :-

1. Fitter
2. Operator
3. Diesel mechanic(excl. Locomotive Running shed and C &W Depots).
4. Stationary plant Operator Mechanic/Attendant)
5. Operator Filtration plant
6. Power house driver
7. Steam/Diesel Road roller Driver
8. Air Compressor Operator/Driver

9. Electric/Diesel Engine Driver .Compressor Driver

(6) All Inspectoral supervisory and non—supervisory staff employed in blasting and explosive operations :

1. Pump Room Operator
2. Shunting Porter

(7) Electrical Power House inspectoral/Supervisory/artisan and other group ‘D’ staff :-

1. Foreman
2. Charge Man
3. Journey Man
4. Switch Board Attendant
5. Power-House Steam Engine Driver
6. Boiler Room Attendant
7. Leading –hand
8. Oiler
9. Cleaner
10. Charge hand
11. Mistry
12. Wire man
13. Fitter
14. Line man
15. Letter Painter
16. Carpenter
17. Crane Driver
18. Mason
19. Black smith
20. Machinist
21. Fireman
22. Engine Room Driver
23. Coal Man

(9) All Station Supervisory and Ticket Checking Staff :-

1. Traveling Ticket Examiner/Inspector
2. Ticket Collector / Head Ticket Collector
3. Chief Ticket Inspector
4. Chief Inspector Ticket checking
5. Travelling Ticket inspector
6. Station Ticket Inspector
7. Train Conductor

(10) Mechanical and Electrical Pump House Staff :-

1. Pump driver/Hydraulic Pump driver
2. Machine Attendant/Stationary Plant Attendant
3. Khalasi
4. Steam-Man

(11) Printing Press operative staff :-

1. Compositor
2. Ticket Counter
3. Printer
4. Proof Reader
5. Binder

(12) All Civil Engineering/Department/Stores and Engineering Watchmen under P.Way depots/Engg. Works depots. :-

(13) Auto Truck Driver :-

1. Battery Truck Driver/Lister Truck Driver

CATEGORY C-1

(1) Train Controller :-

1. Chief Controller/Deputy Controller/Section Controller/Power Controller
2. Wagon Chaser

(2) All office supervisory and non-supervisory Group 'C' And group 'D' staff not indicated elsewhere (staff listed below to various departments)

1. Traffic Office Assistant
2. Station Clerk
3. Stenographer Clerk-Cum-Typist
4. Chief Draughtsman/ Asst.Chief Draughtsman/Draughtsman
5. Tele Operator
6. Control Tel-operator
7. Control 's Clerk
8. Bridge Clerk
9. Store issuer
10. Stores Khalasi
11. Supervisor Chart room
12. Tracer
13. Photographer/Asstt Photographer
14. Record/Keeper
15. Dark Room Attendant
16. Special Messenger/Dak Courier
17. Hostel Warden
18. Assistant Lecturer
19. Meter Reader
20. Time Recorder and store keeper (MTRA)
21. Technical Assistant
22. Office Assistant
23. Caretaker
24. Accountant
25. Time Keeper
26. Khalasi
27. Book binder
28. Fitter
29. Motor Lorry Cleaner
30. School Teacher
31. Ticket issuer
32. Machine-man
33. Operator
34. Store Chowkidar
35. Dispatcher
36. Machine Operator
- 37.
38. Cash Porter
39. Resevation/Clerk/Enquiry-cum Reservation Clerk

(3) Luggage and Booking Supervisory staff :-

1. Booking Clerk, Luggage Clerk
2. Head parcel Clerk/Parcel Clerk
3. Free Service Clerk/Relieving Clerk

4. Chief Goods clerk/Hd. Goods Clerk /Goods Clerk/Asstt. Goods Clerk
5. Supervisor/Assistant Supervisor in booking offices
6. Head Coaching Clerk/Coaching clerk

(4) Commercial Inspectoral/Supervisory Staff

1. Assistant court case inspector
2. Assistant Commercial inspector
3. Rates inspector/Assistant Rates inspector
4. Road transport inspector
5. Commercial inspector
6. District claims inspector
7. Demurrage inspector
8. Supervisor at goods and transshipment sheds
9. Goods Shed cashier
10. Weighment inspector
11. Shed Clerk (Commercial Clerk)
12. Head weigh Bridge Clerk/Weigh Bridge Clerk
13. Invoice Typist
14. Returns checker

(5) Telegraph and Telephone Supervisory staff clerical and other

1. Telephone Operator
2. Telephone Supervisor
3. Tele communication inspector looking after exchanges and control office only
4. Telegraph inspector
5. Telegraph Master
6. Telegraph Supervisor
7. Signaller/Head Signaller
8. Telegraph Boy Peon
9. Tel Overseer auto

(6) Transportation and Commercial workshop staff

- (1) Stores Khalasi
- (2) Tinsmith / Assistant Tinsmith
- (3) Carpenter
- (4) Mashal (old.and HP)

(7) Transportation and commercial group D station staff

1. Station peon , Farash
2. Sweeper, Bhisty Waterman
3. Jamadar, Mali
4. Goods shed Khalasi, Goods Shed Peon, Weight bridge peon bridge clearance Peon, indent peon
5. Lamp man/Lamp Jamadar
6. Marker
7. Assistant porter
8. Station Cleaner
9. Seal man
10. Goods Marker
11. Gonsevancy Jamadar/Sweeper Jamadar
12. Khalasi
13. Luggage porter/Jamadar
14. Valporter /Jamadar

15. Markar Man
16. Platform Jamadar
17. Parcel Porter/Tindal
18. Free Service porter
19. T.P.T. Porters
20. Wireless Khalasi

(8) Running room waiting room, retiring room, refreshment room and rest house staff :-

1. All Cooks, bearers servers barmen etc. including instructors
2. Waterman
3. Safaiwala/Wali
4. Waterman/Attendant Ayah
5. Watchman/Rest house chowkidar
6. Rest house butler
7. Kitchen supervisor
8. Supervisor/ railway hostels
9. Supervisor aerated water factory/Supervisor of Restaurants and refreshment rooms
10. Assistant Supervisor (Hostels
11. Depots / tea room/ Manager.
12. Managers of Restaurant cars/depots / tea room etc.
13. Store keeper
14. Borrow man
15. Mate
16. Hawker
17. Care taker
18. Running room Khalasi

(9) Work shop staff other than those specified in catalogers A and B

1. Section Engr. (WS)/Sr. Section Engr. (WS)
2. Foreman/Assistant Foreman
3. Charge Man
4. Rate fiver
5. Saloon caretaker
6. Moulder
7. Fitter engine
8. Furnace man
9. Core Maker
10. Machinist
11. Painter
12. Riggers special Forge Smith
13. Blacksmith
14. Spring Smith/Spring maker
15. Turner/Fitter?Welder
16. Gauge Fitter/Gauge turner
17. Precision grinder/Die Sinker/tool grinder
18. Carpenter
19. Mason
20. Coppersmith
21. Heat treatment man
22. Boiler Maker
23. Riveter
24. Pattern maker
25. Mistri
26. Rimmer
27. Furaceman ordinary
28. B.T.M Moulder/core maker
29. B.T.M. Dispatcher
30. Slinger

31. Sand blaster
32. B.T.M. White Metaller
33. Material Dispatcher
34. Hammer man
35. Store Man
36. BTM Welder
37. Rigger/Oiler
38. Belt Man
39. Tool issuer
40. BTM Mason/BTM Fitter
41. BTM Heat treatment man
42. Cleaner
43. Progress inspector
44. Assistant Workshop inspector
45. Assistant Master
46. Train Examiners inspector
47. Mistri Instructor
48. Spring Setter
49. Tallor
50. Washer-man
51. Motor Driver Khalasi
52. Wood Turner
53. Pattern make
54. Progress man
55. Assistant Planner and Rate Fixer
56. Cupola man

(10) Loco shed and C&W Depot and stores Depot staff other than specified in categoried A & B :-

1. Depot Material Supdt.GR-I,II & III
2. Depot Store keeper I & II
3. Material Checker
4. Mate } Male and female
5. Khalasi } Male and female
6. Time Keeper
7. Safaiwala
8. Store Line Clerk
9. Tinsmith
10. Carpenter
11. Mason
12. Saloon Caretaker
13. Special messenger
14. Call boy
15. Basic tradesman
16. Tool room attendant
17. Gate keeper
18. Caner
19. Store delivery van clerk
20. Store delivery clerk
21. Assistant Manager (Ptg. & Stationery)
22. Compositor
23. Mechanic
24. Packer
25. Hammer-Man
26. Boiler maker mistri
27. Turners/Welder/Moulder
28. Boiler Attendant
29. Washout Attendant
30. Steam Raiser
31. Fire Dropper
32. Store Issuer
33. Tool issuer
34. Assistant Boiler-Maker/Chargemen

(11) Engineering Workshop supervisory and artisan staff :-

1. Workshop foreman
2. Switch board attendant
3. Assistant foreman (Workshop)
4. Machinist points and inspector
5. Head Fitter (District)
6. Material Inspector
7. Supervisor Points and crossing
8. Charge hand
9. Charge man
10. Electrician
11. Machinist
12. Mistry
13. Turner/Fitter
14. Operator
15. Driller
16. Blacksmith/Carpenter
17. Fitter skilled Gr-I, II & III
18. Master Craftsman
19. Fireman/Head Fireman
20. Screw cutter
21. Water works mistri
22. Stationary engine driver
23. Tinsmith
24. Sweeper mason
25. Patern maker
26. Chock maker
27. Rigger
28. Oiler
29. Welder
30. Supervising mistri
31. Pumper
32. Belt man
33. Rough grinder
34. Cobbler
35. Polisher
36. Store man
37. Care man
38. Khalasi
39. Workshop Khalasi
40. Liner
41. Motor mechanic
42. Sr.Section Engr./Sectio Engr./Jr.Engr.(Work) Gr-I. & II
43. Watchman
44. Carpenter Khalasi
45. Stoker
46. Mate
47. Brands man
48. Welder/Riveter
49. Machine operator
50. Rivet heater
51. Cutter
52. Chipper
53. Store munshi
54. Store issuer
55. Jamadar

(12) Signal and Tele-communication workshop staff

1. Section Engineer/ Jr. Engineer (Signal) Mechanical/Electrical)

2. Head Signal Fitter/Signal Fitter(Mechanical/Electrical)
3. Electrical Signal Fitter and Cleaner(Sini Model Room)
4. Carpenter
5. Carpenter/Wire man
6. Wire man/Welder
7. Tinsmith
8. Khalasi
9. Driller
10. Painter
11. Mason
12. Turner
13. Instrument Mechanic
14. Motor Mechanic
15. Charge Hand
16. Block Signal Fitter

(13) Wireless Staff

- Chief Wireless inspector /Dy.Chief Wirless inspector/Wireless inspector.
1. Wireless Operator
 2. Wireless Mechanic
 3. Teleprinter Operator (* These are Superanuary Posts)

(14) Electrical Workshop/artisan staff and helpers

1. Sr. Section Engineer/Section Engineer(WS)
2. Journeyman
3. Mistri
4. Apprentices(Grade-I)
5. Fitter
6. Carpenter
7. Blacksmith
8. Mason
9. Painter
10. Fitter Wire-man
11. Carpenter Wire-man
12. Turner
13. Machine-man
14. Instrument Mechanic
15. Electro Plater
16. Electro Plater
17. Electro Plater Mate
18. Head Burner
19. Sig. Writer
20. Cable Jointer
21. Line-man
22. Boiler Maker
23. Hammer-man
24. Scaler
25. Rigger
26. Refrigerator Mechanic
27. Call-man
28. Basic Tradesman
29. Khalasi
30. Meter Repairer
31. Oiler
32. Ramoshies
33. H.S. Fitters
34. Moulder
35. Shop Messenger
36. Amature winder

37. Dynamo fitter
 38. Meter repairer
 39. Sweeper
 40. Jamadar
 41. Tester
 42. Battery fitter
 43. Electirc fitter
 44. Greaser
 45. Batt Welder
 46. Progress chaser
 47. Coal plant attendant
 48. Tindal
 49. Key man
 50. Switch board attendant
- (15) Press supervisory staff**
- (16) Stores depot and yard supervisory and artisan staff**
1. Depot store Material Supdt.(Gr-I,II & III)
 2. Senior Sec. Engineer(Signal)
 3. Head time keeper
 4. Head Fitter/Fitter
 5. Carpenter
 6. Painter
 7. Blacksmith
 8. Tinsmith
 9. Machine-man
- (17) All accounts inspector and supervisory staff**
1. Finger print inspector
 2. Inspector of Station Account/Store Account
 3. Assistant Inspector of stores (Stock verifier)
 4. Accounts inspector (test audit inspectory)
 5. Inspector of Pay Clerks
- (18) Personnel inspectors (Welfare , hours of employment and amenity)**
1. Labour Welfare Adviser
 2. H.O.E.R. Inspector
 3. Personnel Inspector
 4. Welfare inspector(GR.I II & III)/ Chief Welfare inspector
 5. Chef Office Supdt. /Office Supdt.(Gr-I,II & III)
 6. Head Clerk ./Senior Clerk/Junior Clerk.
- (19) All Medical , Nursing, Sanitary, Anti malarial**
(Class III and IV) Staff Other than specified in class B-1 :-
1. Physiotherapist/ Occupational- Therapist
 2. Health & Malaria Inspector/AHO
 3. Cook/Assistant Cook/Bearer/Masalachi
 4. Khalasi Hamal/Safaiwala/Safaiwali
 5. Mali
 6. Malaria Khalasi/Malaria Mate
 7. Tailor
 8. Conservancy jamadar/Mocqdam/Mate
 9. Waterman/Peon
 10. Matron/Nursing sister/Staff/Nurse
 11. Dresser/Hospital attendant/ayas

12. ECG Technician
 13. House keeper
- (20) Railway protection force :**
1. inspector/Sub-Inspector (Prosecution)
 2. head Constable(Tailor)
 3. Constable(Motor Cleaner)
- (21) All other staff not specified in categories A & B**
1. Land Leasing Inspector
 2. License-fee Collector
 3. Motor Car Cleaner
 4. Ticket Craftman
 5. Designer Craftsman
 6. Dhobi/Water man
 7. Quarry Mistri
 8. Brickfield mistri /Brick Counter
 9. Pipe Caulkar
 10. Plumber
 11. House Inspector/Housing Sub-Inspector
 12. Market Superintendent
 13. Bazar inspector
- (22) Engineering works supervisory and Artisan Staff not authorised to work trolley and not required to come in contact with signals in actual operation of the duty.**
1. Overseer/Sub-overseer
 2. Mason/Mistri and their staff
- (23) Vigilance Organisation :**
- 1. Vigilance inspector**
 2. Watcher
- (24) Aerated Water factory staff :-**
1. Charge Man
 2. Head Mechanic
- CATEGORY C-2**
- (1) Commercial :-**
1. Commercial Superintendent
 2. Chief Cash Witness/Cash Witness
 3. Clock Inspector/Winder
 4. Warden and instructor of Training Schools
 5. Lady Inspector (Refreshment Rooms)
 6. Superintendent(Lost Property office)
 7. Inspector of Dispatches
 8. Office clerk/ enquiry clerk
 9. Packer/Sorter
 10. Polisher
 11. Syrup Maker
 12. Filler
 13. Checker
 14. Sales Man/Sales attendant
 15. Water –men/Sweeper
 16. Chief Catering inspector/Catering inspector
 17. Weighment inspector

18. Masalchi/Bearer
19. Sail Maker(Otherwise known as Tarpaulin-repairer)
- (2) Engineering :-**
1. Office Clerk
 2. Jamadar peon /Daftary/peon/Farash
 3. File Lifter/Book Binder
 4. Sweeper/Bhistry
 5. Office chowkidar/Office Waterman/waterwoman
 6. Material Checker(Signal Workshops)
 7. Assistant Watch and Ward Inspector
 8. Workshop Clerk
 9. Workshop Time Keeper
 10. Office Draftsmen
 11. Khalasi other than Shop Khalasi
 12. Rest House caretaker
- (3) Medical :-**
1. Dental Assistant
 2. Pharmacists of all grades
 3. Ministerial staff
 4. Dietician
- (4) Operating :-**
1. Loco instructor
 2. Signaler(except {those shown in class A-2)
 3. Office clerk
 4. All other Office staff not mentioned elsewhere
 5. Water man
 6. Running Room Staff
 7. Box-Porter/Call Man/Messenger/Chowkidar
 8. Bhishty (not engaged in watering stock passenger or goods)
 9. Bar setter/Telephone Attendant
 10. Traveling Porter/Luggage porter
 11. I .C. Van Porter
 12. Waiting Room Staff
 13. Safaiwala/Safaiwali/Dhoby
 14. Saloon Attendant
 15. Punkha Khalasi
 16. Washout Jamadar
 17. Phone Clerk
 18. Telegraph Peon
- (5) Personnel :-**
1. All staff including those working in Statistical Branch
 2. School teacher
 3. Translator
 4. Laboratory Asst. /Lab attendant (in Railway Schools)
- (6) Stores :**
1. Depot Material Supdt.I,II & III
 2. Messenger
 3. Water man/Khalasi/Safaiwala/Safaiwali
 4. Daftry/Jamadar Peon
 5. Material Checker
 6. Clerks/Store clerk
 7. Senior S.S.D.C

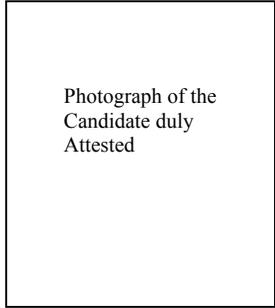
8. Machine Operator
- (7) Mechanical :-**
- (8) Accounts :-**
1. Asstt.Cashier/Cash Receiver/Pay Clerk
 2. Assistant Inspector (Crains)
- (9) All departments :-**
1. Record sorters
- (10) Electrical Staff :-**
1. Lift Operator/Lift-man in buildings who have not been notcategorized elsewhere
- (11) Office Staff :-**
1. Daftry / Peon
 2. Jamadar/Khalasi/Farash
- (12) Railway Protection force :-**
1. Constable (Cobler/Cook/Cook-mate barber/Dhobi /Kahaar/Safaiwala

NOTE :

1. This list is not exhaustive enough and wherever there is any doubt, the Medical Officer may ascertain the nature of duties of the person (employee/candidate) and assess his/her suitability accordingly.
2. Apprentices of all department will be examined in the medical category for the post in which they are intended to be permanently employed.
3. Loco instructors(Under Class C-2(4 Operating) must however be not lower than A-3 if they have occasion to travel on the foot-plate on the open line or the years.

(Bd's No.99/H/7//1NR dt 30-5-2003)

RAILWAY
MEDICAL DEPARTMENT



FORM AUTHORIZING A CANDIDATE TO PRESENT HIMSELF FOR MEDICAL EXAMINATION FOR FITNESS FOR APPOINTMENT AS A NON – GAZETTED RAILWAY EMPLOYEE

(Counterfoil)

Department Office/Section

..... No.

(Name) (age)

a candidate for appointment as (designation) in Medical category

..... is authorised to present himself for medical examination.

* He was earlier found medically fit / unfit for Government/ Railway employment in Medical category

..... Vide Certificate No. dated

Permanent physical marks of identification –

- 1.
- 2.

..... Initials
Signature / L.T.I. of Candidate Designation

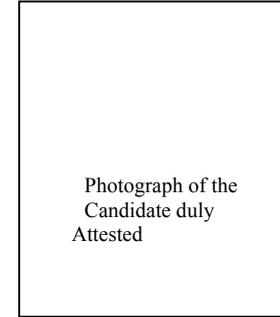
Date

* delete whichever is not applicable

Place

Annexure V
(Para 515 & 516)

RAILWAY
MEDICAL DEPARTMENT



FORM AUTHORIZING A CANDIDATE TO PRESENT HIMSELF FOR MEDICAL EXAMINATION FOR FITNESS FOR APPOINTMENT AS A NON – GAZETTED RAILWAY EMPLOYEE

Department Office/Section

To, No.
.....

The bearer (name)(age)

a candidate for appointment as (designation) in Medical category is authorized to present himself for medical examination.

* He was earlier found medically fit/unit for Government/Railway employment in Medical category vide Certificate No. dated

The following is a list of his permanent physical marks of identification:-

- 1.
- 2.

..... Signature
Signature / L.T.I. of the candidate Designation

Date:

Place * delete if not applicable

RAILWAY
MEDICAL DEPARTMENT

Annexure VI
(Para 515 & 516)

FORM AUTHORIZING A NON – GAZETTED RAILWAY EMPLOYEE TO PRESENT HIMSELF FOR MEDICAL RE – EXAMINATION DURING SERVICE.

(Counterfoil)

Department Office

No.

(Name) (age)

a Railway employee serving as (designation) in Medical category

..... is authorised to present himself for :-

- periodically re-examination
- re-examination prior to promotion to Medical category as (designation)
- Special re-examination.
- re-examination for reconsideration of previous adverse report.

Last examined on (date) at

by (designation of previous medical examiner)

for Medical category when he was passed fit for Medical category

..... Length of service Years months

Permanent physical marks of identification :-

1.

2.

..... Initials

Signature / L.T.I. of the employee. Designation

Date:

Place

* Delete whichever is inapplicable.

RAILWAY
MEDICAL DEPARTMENT

FORM AUTHORIZING A NON – GAZETTED RAILWAY EMPLOYEE TO PRESENT HIMSELF FOR MEDICAL RE – EXAMINATION DURING SERVICE.

Department Office

No.

To,

The bearer (name) (age) a Railway

employee serving as (designation) in Medical category at (place where employed)

..... is authorised to present himself for

- periodical re-examination.
- re – examination prior to promotion to Medical category as (designation)
- special re-examination.
- re-examination for reconsideration of previous adverse report.

He was last examined on (date) at by (designation of previous

medical examiner) for Medical category When he was passed fit for medical category.

His length of service is Years months

The following is a list of his permanent physical marks of identification :-

1.

2.

..... Signature

Signature / L.T.I. of the employee. Designation

Date:

Place

* Delete whichever is inapplicable.

ANNEXURE VII

(Para 520)
Candidate's Statement and Declaration
(for appointment to non-Gazetted services)

PART-1

1. (a) Have you ever had intermittent or any other prolonged fever, enlargement or suppuration of glands, spitting of blood, asthma, heart disease, lung disease, fainting attacks, rheumatism, appendicitis,?.....
or
(b) Any other disease or accident requiring confinement to bed and prolonged medical or surgical treatment/hospitalisation?.....
2. Have you or any of your near relation been afflicted with Consumption, Scrofula, gout, asthma, fits, epilepsy or insanity?.....
3. Have you suffered from any form of nervousness due to overwork or any other cause?.....
4. Have you been examined and declared unfit for Government service by a Medical Officer/Medical Board within the last three years?.....

I declare all the above answers to be, to the best of my knowledge and belief, true and correct.

I also solemnly affirm that I have not received disability certificate/pension on account of any disease or condition.

Signature/L.T.I. of the candidate

Part-2

(To be taken from Candidates for A-1 in addition to part –1 above)

1. Did you ever sustain head Injury ? If yes , give detailed history.
2. Do you have fits or epilepsy, attacks of giddiness, vertigo or mental abnormality?
3. Are you in the habit of taking any drugs/alcohol?
4. Do you have Intra Ocular Lens/Contact Lens/ history of surgery for correction of eye sight?
5. Are you taking any drug/ treatment for M.I/ Hypertension/ Diabetes Mellitus or any other disease?

Signature of the candidate for A-1 Category

Signed in my presence

Signature of Railway Medical Examiner

Date

Place

Designation.....

Note: (1) The candidate will be held responsible for the accuracy of the above statement.

(2) By willfully suppressing any information, he will incur the risk of losing the appointment and, if appointed, of forfeiting all claims to superannuation allowances or gratuity.

**Annexure VIII
(Para 520)
Employee's Statement and Declaration
(for those serving in A-1)**

1. Did you ever sustain head Injury ? If yes , give detailed history.
2. Do you have fits or epilepsy, attacks of giddiness, vertigo or mental abnormality?
3. Are you in the habit of taking any drugs/alcohol?
4. Do you have Intra Ocular Lens/Contact Lens/ history of surgery for correction of eye sight?
5. Are you taking any drug/ treatment for M.I/ Hypertension/ Diabetes Mellitus or any other disease?
- 6.* I hereby declare that I will carry both pairs of spectacles while on duty.

Signature of the candidate for A-1 Category

Signed in my presence

Signature of Railway Medical Examiner

Date

Place

Designation.....

Note: * wherever applicable

(1) The candidate will be held responsible for the accuracy of the above statement.

(2) By wilfully suppressing any information, he will incur the risk of losing the appointment and, if appointed, of forfeiting all claims to superannuation allowances or gratuity.

RAILWAY
MEDICAL DEPARTMENT
FITNESS CERTIFICATE FOR A NON – GAZETTED RAILWAY EMPLOYEE RE –
EXAMINED DURING SERVICE
(Counterfoil)

Hospital No.
Health unit

(Name) (age)

a Railway employee serving as (designation)

(Medical category) inBranch/Department
appeared for

- Periodical re – examination
- re- examination prior to promotion to medical category
as (designation)
- Special re-examination
- re-examination for reconsideration of previous adverse report.....

Fit for medical category **

Acuity of vision -

	Distant		Near		Power of glasses		
	Un - Corrected	Corrected	Un - corrected	corrected	S	C	A
	R.E.						
L.E.							

Colour perception

Night vision

Field of vision.

Urine

Hearing

General physical examination

.....
Signature/L.T.I. of
the employee

.....
Initials of Railway Medical
Examiner.

RAILWAY
FITNESS CERTIFICATE FOR A NON – GAZETTED RAILWAY EMPLOYEE RE – EXAMINED DURING SERVICE

Hospital No.
Health unit

I do hereby certify that I have examined (name)

(age) a Railway employee serving as (designation)

(Medical category) in the Branch/Department, at (place where
employed) who presented himself before me for

- periodical re-examination.
- re-examination prior to promotion to medical category as (designation)
- Special re-examination
- re-examination for reconsideration of previous adverse report and whose signature / left hand thumb impression has been appended below in my present.

I consider him fit for service in Medical category **.

* With glasses for * distant
without glasses near * vision
distant and near vision

.....
Signature/L.T.I. of
the candidate

.....
Signature of
Railway Medical Examiner.

Date

Designation

Place

* Delete whichever is inapplicable.

** If unfit for service in the medical category for which examined, state next lower medical category for which he is fit.

.....RAILWAY
MEDICAL DEPARTMENT
SICK AND FIT CERTIFICATE

(Counterfoil)

Hospital
Health unit No.
Name :
Designation:.....
Branch or Department
Station where employed.....
Grade
Date of "Sick" certificate:
Recommendation for sick leave for change of air
No.....date.....for period of
No.Date.....for
a further period of.....
Disease.....
Period for which employee is likely to be off duty.....
Date of "fit" certificate
Sick certificate
Fit certificate
.....
Issuing doctor's initials
with designation
Date
Place :

ANNEXURE – XI
(See Paras 538 and 541)

.....RAILWAY
MEDICAL DEPARTMENT

" FIT" CERTIFICATE

Hospital
Health unit No.
I hereby certify that I have examined (Name)
(Designation)
(Branch or Department).....
(Station where employed).....
who was sick and under treatment from (date)
to (date) * and on leave on
medial recommendation from (date) to
(date)is now fit to attend to his duties.
.....
Signature of
Railway medical officer
Designation :
Date
Place

* Delete whichever is inapplicable

.....RAILWAY
MEDICAL DEPARTMENT
" SICK " CERTIFICATE

Signature of applicant
.....
Hospital
Health unit No.
I hereby certify that (Name)
(Designation)
(Branch or Department)
(Station where employed).....
is sick and unfit for duty.
• He is likely to be unfit to perform his duties
for.....days with effect from (date)
.....
.....
Signature of
Railway medical officer
Designation
Date
Place

* Delete whichever is inapplicable

.....RAILWAY
MEDICAL DEPARTMENT
INTERIM SICK CERTIFICATE
(Counterfoil)

Hospital
Health unit No.....

I hereby certify that –

Name :
Designation :
Branch or Department:
Station where employed :
Sick certificate No. : Dated:
(in form) was issued, is likely to be unfit to
perform his duties for a further period from
to

.....
Signature of railway doctor
Designation :

Date :
Place :

ANNEXURE XII
(See Para 539)

RAILWAY
MEDICAL DEPARTMENT
INTERIM SICK CERTIFICATE

Hospital
Health unit No.

I hereby certify that -

Name :
Designation : Branch or Department
Station where employed in whose favour
Sick certificate No. Dated
(in form) was issued, is likely to be unfit to perform his duties
for a further period from to

.....
Signature of Railway doctor

Designation

Date
Place

.....RAILWAY
 MEDICAL DEPARTMENT
 RECOMMENDATION FOR LEAVE FOR CHANGE OF
 AIR OR RECUPERATION
 (Counterfoil)

Hospital Health unit No.
 Name:
 Designation :
 Branch or Department :
 Station where employed :
 Sick certificate No. Dated
 Period of leave recommended
 Disease :

.....
 Divisional Medical Officer

Date :
 Place :

ANNEXURE XIII
 (See para 540)

RAILWAY
 MEDICAL DEPARTMENT
 RECOMMENDATION FOR LEAVE FOR CHANGE OF
 AIR OR RECUPERATION

Hospital Health unit No.
 Name :
 Designation :
 Branch or Department :
 Station where employed :
 in whose favour sick certificate No. dated
 was issued be granted a * period/further period of months
 days..... Leave for change or air or recuperation.

.....
 Divisional Medical Officer.

Date : Date
 Place Place.....

* Delete whichever is inapplicable

Note : No recommendation contained in this certificate shall be evidence of a claim to any Leave not admissible to the Railway employee under the rules.

RAILWAY
MEDICAL DEPARTMENT
DUTY CERTIFICATE

Hospital
Health unit No.
Name :
Designation :
Branch or Department:
Station where employed :
Remarks :
.....

.....
Signature/L.T.I. of
the applicant

.....
Initials of Railway doctor

Designation :

Date:

Place:

ANNEXURE XIV
(See Para 542)

RAILWAY
MEDICAL DEPARTMENT
DUTY CERTIFICATE

Hospital
Health unit No.
I hereby certify that I have examined -
Name :
Designation :
Branch or Department :
Station where employed :
and consider him fit to resume duty.

.....
Signature/L.T.I. of
the applicant

.....
Signature of Railway doctor

Designation

Date

Place :

ANNEXURE XV
(Para 543 & 550)
.....RAILWAY

MEDICAL DEPARTMENT

UNFIT CERTIFICATE FOR RAILWAY SERVICE.
(Counterfoil)

Confidential Hospital/Health Unit

Name:
Designation:
Station:
Class:
Branch or Department:

Service: **Date of appointment:**

Age:

By appearance
By statement

Date of birth:

Disease rendering unfit for further service:-

Abstract of Physical state: (With special reference to the main date for opinion from physical examination and clinical records if available) _____

There is no reasonable prospect that the Railway employee concerned will ever be fit to resume his duties.

Date: _____
Place: _____
Initial/Initials of Issuing Officer/
Members of Medical Board

.....RAILWAY

MEDICAL DEPARTMENT

UNFIT CERTIFICATE FOR RAILWAY SERVICE.

Confidential Hospital/Health Unit

Name:
Designation:
Station:
Class:
Branch or Department:

Marks of identification: (I)
(ii)

His age is _____ years by his own statement and by appearance.
About _____

I/We consider on grounds recorded on the counterfoil that he is completely and permanently incapacitated for further service (or in the department to which he belongs) in consequence of his illness from. Arrangements should be made to relieve him of his duties as early as possible/immediately with a view to his retirement from the Railway service.

There is no reasonable prospect that the Railway employee concerned will ever be fit to resume his duties.

Date: _____
Place: _____
Signature /Signatures of issuing
Officer/Members of Medical Board.

ANNEXURE - XVI
(Para 547 & 548)

.....RAIWLAY

MEDICAL DEPARTMENT

CERTIFICATE OF SICKNESS FOR GRANT OF LEAVE TO GAZETTED EMPLOYEES

Signature of the applicant

Iafter careful personal examination of the case, hereby certify that the health of whose signature is given above, is to be such as to render absence from duty for a period of with effect from is absolute necessary for the restoration of his health.

Diagnosis to be mentioned in the office copy only.

Date

.....

Medical Officer

Place

..... Division

ANNEXURE – XVII
(Para 548)

.....RAILWAY

MEDICAL DEPARTMENT

CERTIFICATE OF DETENTION OF GAZETTED EMPLOYEES FOR MEDICAL OBSERVATION.

Shri having applied to us for a medical certificate recommending him grant of leave, we consider it expedient, before granting or refusing such a certificate, to detain under Professional observation for days.

Signature (1) Designation

Do (2) do

Do (3) do

Date

Place

ANNEXURE XVIII
(Para 549)
MEDICAL DEPARTMENT

CERTIFICATE OF FITNESS TO RETURN TO DUTY FOR GAZETTED EMPLOYEES.

No.

I Medical Officer in charge ofDivision, do hereby that I have carefully examined Shriof the Branch or Department and find that he has recovered from his illness and is now fit to resume duties in railway service.

I also certify that the original medical certificate (s) on which leave was granted or extended was/there produced before me.

Date

Place
Division

.....
Signature of Medical Officer.
.....

ANNEXURE XIX
(Para 561)

.....RAILWAY

MEDICAL DEPARTMENT

CERTIFICATE OF RECOMMENDATION FOR LIGHT DUTY .

Hospital
Health unit

No. _____

This is to certify that :-

Name.....Designation.....Department.....

Station..... who was sick and under treatment for

from(date).....to (date).....is recommended light duty/change of occupation before he is declared fit for duty of his original post.

Date: _____

Place: _____

.....
Divisional Medical Officer
.....Division

RAILWAY

MEDICAL DEPARTMENT

CERTIFICATE OF RECOMMENDATION FOR ALTERNATIVE EMPLOYMENT

This is to certify that:-

Name _____

Designation _____

Department _____

Station _____

who was recommended light duty/change of occupation vide certificate No. _____ Dated _____
is permanently medically unfit for the duties of his original post. I recommend that on medical grounds arrangements should be
made to provide him with suitable alternative employment permanently.

Date: _____

Divl. Medical Officer.

Place: _____

_____ Division

ANNEXURE XXI

(See Para 566)

MEDICAL DEPARTMENT

CASTE SHEET FOR EXAMINATION OF DRUNKENNESS

1. Name and address/designation of suspect ...
.....
2. Date and Time of examination. ...
.....
3. What is the appearance of suspect? ...
.....
Is he drowsy? ...
.....
Are his upper eye lids and features relaxed? ...
.....
Are his eyes and face congested? ...
.....
Is he seating and slobbering? ...
.....
4. How does he behave
Is he noisy?
Boisterous?
Silly?
Excited?
Garrulous?
Restless?
Heavy?
5. Is his conception of time and space Normal?
(If it is, say, 'Yes' ; if it is not, repeat statement
indicating the contrary)
6. Test his Memory. Ask him, for example, to remember a couple of
Addresses, or to describe the accident which led to his arrest, or
Ask him to describe some event indicated by a picture in an
Illustrated paper.
7. Note his speech, Is it thick, nasal, lisping, stammering, or
Stumbling?
Make him repeat difficult words or read aloud a small newspaper
Notice.
8. Notice his gait. Is it swaying and ataxic ? Perform Romberg's test.
9. Are the movements of his hands steady? Test his handwriting by
Making him write his name, age, occupation and address.
10. Examine his pupils. Note whether they are dilated, contracted or
irregular and their reaction to light. Test his sense of pain.
11. Does he smell of alcohol ?

12. Are there signs of other disease such as epilepsy or apoplexy ?

13. Add any other observations bearing on this matter -

(a) Has the examination revealed symptoms indicating this condition is not normal ?

(b) Is it proved that the symptoms found are due to alcohol ?

(c) Is the condition one of drunkenness ?

Date

.....

Place

Doctor

.....

Signature and Designation Examining

ANNEXURE XXII

(See Para 568)

.....RAILWAY

MEDICAL DEPARTMENT

CASE SHEET FOR EXAMINATION FOR MENTAL INSTABILITY

1. Name
2. Sex
3. Age
4. Married or Single
5. Occupation
6. Religion
7. Residence
8. Relation
9. Heredity
10. Temperament
11. Habits
12. Behavior generally
13. Any delusion, illusion, or hallucination
14. Morbidly suspicious, suicidal or homicidal
15. Mode of onset and general course
16. Mental faculties, memory, power of recognition, reasoning power
Judgement, self control, volition, depression, stupor and excitement
altered feelings towards relatives
17. Expression and articulation, nutrition of body, and presence of defor-
mities in hand or body.
18. Writing
19. Pulse and temperature and bodily functions
20. Sleep and character of dreams
21. Motor and sensory functions of brain and cord
22. Headaches, neuralgic pains
23. Syphilis, drunkenness, drugging, D.T., sunstroke
24. Any intent to deceive
25. Blood examination, leucocytosis, etc.
26. Whether feigned or genuine

Date:

Place

.....
Signature and Designation of Examining
Doctor

ANNEXURE –XXIII

(See para 587)

.....HOSPITAL

.....RAILWAY

HEALTH CLINIC (PERIODICAL CHECK UP)

(Consultation by appointment through Dr..... between.....andhours.

Telephone No.....

Name:..... Designation:.....
 Address:..... Telephone No.....
 Pay Rs..... Date of birth:.....

Instructions: Date.....

1. Please attend Dr..... between.....andhours on working days. He will arrange for all the tests given below, to be done in the laboratory X-Ray room, etc.
2. Please attend fasting with empty stomach.
3. Please bring your morning specimen of urine and stool with you.
4. After all the above laboratory reports, X-Ray chest, examination by dental surgeon and AMO(Gynaecology) (for ladies only) and any other examination as advised, has been completed, kindly report to Dr.....
 Room No.....between.....and.....hours on.....days for ECG and complete physical check up.
5. The complete record in the form of a health file will be maintained by Dr.....and Your index No.(Regd. No.) will be given to you along with the advice regarding the next date for check up. The Health File will be handed over to you for taking it with you to the doctor in charge of the hospital if you are transferred from this hospital.

INVESTIGATION

REPORT

1. Urine	....	....	....	.....
2. Stools.	....	....	....	.....
3. Hb:	....	....	....	.....
4. T.L.C.	....	....	....	.....
5. D.L.C.	....	....	....P.....	L.....E.....
6. E.S.R.	....	....	....	.....
7. Blood sugar: (a) fasting.....	.....	.....	.....	(b)Post.Prandial.....
8. Serum Cholesterol. ....	....	....	....	.....
9. Blood urea.	....	....	....	.....
10. M.M.R.Chest.	....	....	....	.....
11. E.C.G.	....	....	....	.....
12. Height:	....	....	....	.....
13. Weight.	....	....	....	Standard weight).....
14. Any other significant point	.....	.....	.....	.....
History.	....	....	....	.....
Past History:	....	....	....	.....
Family History:	....	....	....	.....

Physical Examination:

GENERAL

Alimentary system

Respiratory system:

Cardio-vascular system:

Pulse rate.....p.m. Ryth. Regular/irregular condition of arteries.....

Hearth.....

Nervous system.

Dental:

Ophthalmic:

Gynaecological(for ladies only)

Additional remarks:

Impression:

Advice:

Due dates for next check up.