

**ESSENTIAL CERTIFICATE
CERTIFICATE – B**

(To be completed in the case of patients who are ADMITTED to hospital for treatment)

Certificate granted to _____

Self/Wife/Husband/Son/Daughter/Father/Mother of _____
employed in the **ICMR-National Centre for Disease Informatics and Research, Bengaluru**

PART - A

(To be signed by the Medical Officer in-Charge of the _____

_____ case of the Hospital)

I, Dr. _____

(Registration No. _____) hereby certify :-

01. that the patient was admitted to hospital on the advice of _____
_____ (name of the Medical Officer / on my advice.

02. that the patient has been under treatment at _____
_____ and

that the undermentioned medicines prescribed by me in in this connection were essential for the recovery/prevention of serious determination in the condition of the patient. The medicines are not stocked in the _____

(Name of the Hospital) for supply to private patients and do not include proprietary preparations for which cheaper substances of equal therapeutic value are available nor preparations which are primarily foods, toilets or disinfectants.

03. Charged and received Rs. _____ (Rupees _____
_____) for administering _____

intra-venous / intra-muscular / subcutaneous injection on _____
_____ (date to be given) at my consulting room outside hospital hours.

04. that the injections administered were not/were for immunising or prophylactic purposes.

05. that the patient has been under my treatment at _____
_____ hospital/my consulting room and that the undermentioned medicines prescribed by me in this connection were essential for the recovery / prevention of serious deterioration in the condition of the patient. The Medicines are not stocked in the _____ (name of the hospital) for supply to private patients and do not include proprietary preparations for which cheaper substances of equal therapeutic value are available nor preparations which are primary foods, toilets or disinfectants.

