

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 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:-

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|--|--|
| (i) <u>Marked or total deafness in one ear, other ear being normal.</u> | Fit for non technical jobs if the deafness is up to 30 decibels in higher frequency. |
| (ii) <u>Perceptive deafness in both ears in which some improvement is possible by a hearing aid</u> | Fit in respect of both technical and non-technical jobs if deafness is up to 30 decibels in speech aid frequencies of 1000-4000 |
| (iii) <u>Perforation of tympanic membrane of central or marginal type</u> | (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. |
| (iv) <u>Ears with mastoid cavity, sub-normal hearing on one or both sides</u> | (ii) Marginal or attic perforation in both ears-unfit.
(iii) Central perforation both ears -temporarily unfit.
(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) <u>Persistently discharging ear-operated /non-operated.</u> | Temporarily unfit for both technical and non-technical jobs. |
| (vi) <u>Chronic inflammatory/allergic conditions of nose with or without bony deformities of nasal septum.</u> | (i) A decision will be taken as per circumstances of nose with individual cases.
(ii) If deviated nasal septum is present with symptoms - temporarily unfit. |
| (vii) <u>Chronic inflammatory conditions of tonsils</u> | (i) Chronic inflammatory conditions of tonsils 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.

(ix) Otosclerosis.

(x) Congenital defects of ear, nose, or throat.

(xi) Nasal polyp.

(i) Benign tumours- temporarily unfit

(ii) Malignant tumours- Unfit.

If the hearing is within 30 decibels after the operation or with the help of hearing aid-Fit.

(i) if not associated with functions-Fit.

(ii) Stuttering of severe degree-Unfit.

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.

(Ministry of Railway's letter No.63/H/5/3 dt. 06/07/1963, No. 64/H/5/23 dt. 07/12/1964 and No.67/H/5/2 dt.20/04/1967)

(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	
	6/6 — 6/12	J.I — J.II
Non technical	6/9 — 6/12	

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) **Colour vision :** The testing of colour 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 colour 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 colour 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	5seconds

(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.1 for near vision with or without glasses, provided error in any meridian is not more than 4.D for distant vision., and normal colour 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)11/9/14 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 Managers 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, as given in para 510 (1) below.

- (2) 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.

(3)

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

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|---|---|
| A. Vision tests required in the interest of public safety | A-1. Foot plate staff, Rail car drivers and Navigating staff (For foot plate staff see para 520). |
| | A-2. Other running staff, Other shunting staff, Point lockers, Station masters, and other staff in operative control of signals. |
| | A-3 Loco, Signal and Transportation Inspectors, staff authorised to work trolleys, Yard supervisory staff, Road Motor Drivers and Gate keepers on level crossings. |
| B. Vision tests required in the interest of the employee himself or his fellow workers or both. | B-1 Such station and yard non supervisory, 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. |
| | 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 |
| C. Vision tests required in the interest of administration only. | 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 |
| | C-2. Staff in clerical occupations not included in A,B and C1. |

- (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:-
- the condition of heart and lungs;
 - the condition of teeth and gums (well filled teeth will be considered as sound);
 - whether there is any evidence of abdominal disease;
 - whether there is any hernia or tendency to hernia;
 - whether there is any degree of hydrocoele, varicose veins or piles;
 - whether there is free movement of the joints;
 - whether there is any inveterate skin disease;
 - whether hearing in each ear is good and whether there is any disease of the ear;
 - whether there is any speech defect;
 - whether there is any contagious disease of the eyes or any other condition likely to lead to impairment of vision;
 - whether there is any acute or chronic disease pointing to an impaired constitution; and
 - 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, the ears will be separately tested 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:

Candidates: 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 physical 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 :-

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 non functional 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 90 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)

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-I 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 of 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.

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.

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

(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, 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. 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) **colour perception:-**

Candidates and Railway employees: in classes A-1, A-2, A-3 and B-1 on being medically examined shall be tested for colour 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 colour 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 colours 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 colour 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 colour 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 colour 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 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.
(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.Es. 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)

(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 such sta ff 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.
- h) **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 thereafter 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 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.
- (c) 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.

(Rly Bd.'s letter No. 79/H/5/30 dt. 03/06/80)

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.
- (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.
 - (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 loose 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 thereof.

- (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.

iii) 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 willful 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. General Managers are empowered to review and consider cases on merit beyond the stipulated period of 5 days.

(Bd.'s No.85/H/5/10 dated 12/14-08-86 and 99/H/5/10 dt 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 employee's 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.96/E(GR)II/9/14 dt. 22/07/1996)

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:-

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.

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.

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

- (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
Colour 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.

(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. 0 9/11/1992and 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 colour 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 colour 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

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.

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.

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.

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.

The colour vision should be normal with EGL lamp. No Ishihara test.

B-2 As above
Colour vision not required for Bee -two and below

C-1 6/18, Nil or combined 6/18 with or without glasses.

C-2 6/24, Nil or 6/24 combined with or without glasses.

Near vision

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.

As above

As above

As above

As above

Sn. 0.6 with or without glasses where reading or close work is required.

As above

The difference of power of glasses between two eyes should not be more than + 4D

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 recruit is below 35 years. They may be examined as per the standards laid down for new recruits.

(Bd.'s No.94/H/5/9 dt. 29/12/1994)

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.

(7) 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 em-

ployee 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/
Sr. 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:-
- | | |
|-----------------------------------|---|
| (a) Asst.Divl. Medical Officer | Nil. |
| (b) Divl. Medical Officer | Up to two months. |
| (c) S.A.G./J.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-para 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:- 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.

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)

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 and
- (iii) Recommendation for allotment of a Railway bungalow/quarter for better accommodation

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.

(Bd.'s No 98/H/5/14 dt. 06/04/99)

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 employee's 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)

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 disfigurement 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 neighbourhood 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) The Railway employee shall be informed that :-

- (a) 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
- (b) If he prefers a request for examination by a Medical Review Board, he shall be liable to pay the fees prescribed under para 580(15)

(14) 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 invalidation of the Railway employee shall, 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).

(15) 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 invalidated 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 Workmen'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 over-due 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. Have you suffered from any form of nervousness due to over-work or any other cause ?
5. Furnish the following particulars concerning your family -

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

.....

Signature of Chairman of the Board

.....
Candidate's Signature

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 Fair Poor

Nutrition: Thin Average Obese

Height (without shoes) Weight Best Weight

Any recent change in weight When

Temperature

2. Girth of Chest -

(1) (After full inspiration)

(2) (After full expiration)

1. Skin: Any obvious disease

2. Eyes (1) Any disease

(2) Night blindness

(3) Defect in colour vision

(4) Field of vision

(5) Visual acuity

Acuity of vision	Naked eye	With glasses	Strength of glasses		
			Sph.	Cyl.	Axis
Distant vision -					
R.E.					
L.E.					
Near vision					
R.E.					
L.E.					

5. Ears: Inspection Hearing : Right ear Left ear

6. Glands Thyroid

7. Condition of teeth

8. Respiratory System : Does physical examination reveal anything abnormal in the respiratory organs ?

If yes, explain fully

9. Circulatory System -
 (a) Heart : Any organic lesions ?
 Rate : Standing
 After hopping 25 times
 2 minutes after hopping
 (b) Blood Pressure: Systolic Diastolic
10. Abdomen : Girth Tenderness Hernia
 (a) Palpable : Liver Spleen
 Kidneys Tumors
 (b) Haemorrhoids Fistula
11. Nervous System : Indications of nervous or mental disabilities
12. Loco - Motor System : Any abnormality
13. Genito-Urinary System: Any abnormality
 Urine Analysis -
 (a) Physical appearance (b) Sp. Gr. (c) Albumin
 (d) Sugar (e) Casts (f) Cells
14. Report of X-ray examination of Chest
15. Is there anything in the health of the candidate likely to render him unfit
 for efficient discharge of his duties in the service for which he is a candidate ?
16. For which services has the candidates been examined and found in all respects
 qualified for the efficient and continuous dis-charge of 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

(Para 509,512)

DETAILED GUIDELINES EXPLAINING PROCEDURES OF MEDICAL EXAMINATION & SPECIFIC DISEASES AFFECTING FITNESS OF STAFF.

1. Medical Officers authorised to conduct examinations:
 - 1.1 On Appointment & re-examination
 - 1.1.1 Category A1: Medical officer of the rank of Divisional Medical Officer or above, specifically nominated by the C.M.D. An Ophthalmologic examination including fundoscopy should also be done.
 - 1.1.2 Category A2 and below: Selected and Authorised Medical Officers.
 2. Examination Centres: With the exception of very small Health Units, all other Health Units should be equipped and Medical Officers trained and authorised to conduct examination at least for lower categories. For this, much additional construction may not be necessary.
 - 2.1 Medical Examination Rooms:
 - 2.1.1 Doctor's Room, with attached office.
 - 2.1.2 Physical Examination Room: This room should be not less than 6.5 metres long and 2.5 metres wide. The wall should be distempered with green or grey distemper to give dull matt surface. The illuminated Landolt's test board will be fitted at one end. At the opposite end, a shaded bracket lamp with 15 or 25 watt bulb, should be provided at a height of about 2 to 3 metres from the ground for general illumination of the room. The room should be capable of being rendered almost completely dark and all the switches should preferably be near the testing board so that the examiner can control it. The distance from the board should be marked on the floor in metres. There should be an exhaust fan with a hood to provide ventilation when the doors and the windows are closed.
 3. List of equipment for the Examination Room:-
 - 3.1 One Standard series of Landolt's split rings mounted.
 - 3.2 Norman or Edridge Green Lantern for testing colour vision.
 - 3.3 Cards of Snellens' Test type in different languages for testing near vision.
 - 3.4 Trial case with frame for lenses occluding disc, etc., (for Divisional Headquarters).
 - 3.5 A book containing not less than 24 numbers of Ishihara plates with instructions.
 - 3.6 Spectacle frame without any glasses.
 - 3.7 A pair of spectacles with one standard red and one standard green glass on a frame which is reversible, to test binocular vision.
 - 3.8 Worth's four dot test apparatus.
 - 3.9 Dastoor malingering test apparatus (This should be Provided at Divisional Headquarters).
 - 3.10 Synaptophore at Railway Head quarters.
 - 3.11 Electric torch.
 - 3.12 Ruler painted white or with luminous paint.
 - 3.13 Table, chair and revolving adjustable stool.
 - 3.14 Record forms.
 - 3.15 Lensometer for verifying correct power of glasses (at divisional hospital)
 - 3.16 Ophthalmoscope (at divisional hospital)
 - 3.17 Retinoscope (at divisional hospital)
 - 3.18 Appliances for measuring central and peripheral fields. (at divisional hospital)
- Note:** (1) At Divisional Headquarters, the Landolt's slit ring board should have a shaded 60 watt lamp fitted on the top of the Landolt's test board with Rheostat for dimming the light for testing night blindness when considered necessary.
(2) Ishihara charts should be kept locked under the personal custody of the Medical Officer.
4. General
 - 4.1 The majority of Railway workers are responsible directly or indirectly, for safety of travelling public and it is, therefore essential that they should have a very high standard of physical and mental fitness. The examination for candidates has to be very thorough and strict to ensure that they are fit in every respect for the particular job when they are selected, so candidates recruited and trained will continue to be fit to work till the age of superannuating without having to be unfitted at a stage when their mature experience will be the most useful to the Railways. It should be remembered that premature decategorisation creates serious difficulties for the administration in finding alternative employment to the decategorised staff with out much loss of emoluments. In the event of Premature invalidation or death, the administration will have to pay pension for a very prolonged period and the efforts and expense on training would be wasted.

- 4.2 The degree of physical fitness required for different jobs varies considerably. For example, a very high standard of fitness is required of staff who are connected with train working compared to those working in offices. It is, therefore necessary for the medical officer to be familiar with the duties performed by various categories of staff so that he can make proper assessment of the fitness of men whom he examines. It is often necessary to contact the departmental officers or supervisors to ascertain the exact requirements of the job. Employees in service are examined periodically to ensure that they continue to be fit and also to detect any deterioration in health with a view to correcting them early.
 - 4.3 In order that medical examinations are conducted methodically according to rules laid down and to see that there are no lacunae in the procedure some hints are given below for the guidance of examiners. These are based on experience on the different Railway systems and are by no means complete. Local circumstances and new situations may arise from time to time calling for ingenuity, higher alertness and necessary action including reference to higher quarters, if required.
 - 4.4 Strict adherence to rules and procedures laid down for these examinations, honesty of purpose and correct and polite attitude to examinees are 'MUSTS' which cannot be compromised. Relevant chapters of Establishment Manual, Medical Manual, correction slips and instructions issued from time to time must be read and followed. It is a good practice to refresh the memory periodically.
 - 4.5 Equipment in the vision testing room should be reliable. They should be checked periodically to ensure that they are working properly. Landolt's split ring discs require cleaning periodically. colour vision lantern may also require cleaning though less frequently.
 - 4.6 The examiner should be alive to the possibilities of collusion between the assistants and the examinees. Therefore assistants, Class III and Class IV should be honest and dependable. It is better to rely on honest but not too smart persons, than on sleek customers. Human assistance should be reduced to the minimum. Clerical assistance should be taken only for routine duties. The certificates should not be filled up and signed in the midst of another work or when in hurry. The practice of entering the findings on the back of the requisition and pasting the requisition to the back of the counter-foil of the medical certificate is a useful way of keeping the information for future reference.
 - 4.7 Delegation of technical work to unauthorised persons (even doctors) has landed many Medical Officers into difficulties. All findings must be personally seen and recorded and decisions given unfettered. If adequate time is not available, examination should be postponed to the next day. Opinions called for or unsolicited are only guides. Decisions given must be capable of being defended later, if necessary.
 - 4.8 At Present there is no yardstick for assessment of the time taken in medical examination or of the workload that devolves on a doctor as medical examination work usually is in addition to the other work that a doctor has to do. Taking into account all details including the procedures of examination recommended, it is felt that on an average about 20 minutes is required for examination of each case in categories A1 A2 and A3.
 - 4.9 Impersonation by candidates and employees must be prevented by checks on identification marks which must be well defined. If identification marks are not furnished or if there is any doubt, the marks as seen should be recorded and the personnel officer or the immediate superior who sent the examinee be asked to verify them. Tally of signature or thumb impression might help.
 - 4.10 Since definite standards have been laid down in respect of candidates for vision, hearing and physical fitness it is easy to decide whether he is fit or unfit for a particular job. In the case of employees the decision is easy when the vision, colour vision or hearing is defective but the decision can be difficult when some physical disability is noticed. If the examiner considers that the employee is not fit for his original occupation, he has to decide what alternative job he is fit for. In coming to a decision the examiner must take all factors into consideration and exercise his discretion.
 - 4.11 Doubts regarding age should be brought to the notice of competent authority.
5. Detection of Malingerers.-
- 5.1 It is necessary for the examiner to be alert to detect any malingerer. It may help very much if one goes into the details and ascertains carefully the reasons why an examination other than periodical examination is being conducted, e.g., when an employee appears after an accident, he may refuse to see colours correctly or come up to the visual standards even though he can see, for obvious reasons of escaping punishment. It has often been found that Rakshaks who on previous examination were correctly found to have good colour perception and normal

vision, after a few years' Service, want to get decategorised on medical grounds by either feigning to have lower standard visual acuity or more often feigning to become colour blind with a view to getting absorbed in more comfortable jobs. The examiner, therefore, has to guard against

- 5.1.1 refusal to come up to correct visual standard which he really possesses;
- 5.1.2 refusal to see colours even though colour perception is normal
- 5.1.3 feigning other illnesses.

5.2 The methods suggested to detect feigning in distant vision examination are putting plane lens, concave lens and then neutralise it with convex lens etc. It is with a view to make his previous training or knowledge imparted by unscrupulous opticians or doctor valueless. Similarly for colour perception putting on the red and green glasses in darkness and showing colours from either the lantern, four-dot test or Dastoor's test apparatus with combinations and variations will help to suspect a malingerer. Dastoor's test apparatus is also useful for detection of malingering in distant vision. For ailments the usual investigations may have to be done and the person kept under observation. It will be seen that it is a question of pitting of wits of the examiner against that of examinee and his associates. Having suspected such a case, detailed findings should be recorded for personal reference and for reference by those to whom the case will be put, up for confirmation.

5.3 In these cases, it is a good practice to refer the case to a senior colleague, giving him all details, for his independent examination and advice. Where malingering is proved, the case should be referred to the Divisional Medical Officer for further disposal. The Divisional Medical Officer will bring it confidentially to the notice of the personnel branch and the departmental officers concerned with a view to further corroborating the reasons for which he might be deliberately malingering. If there is still any doubt left, the Chief Medical Director should be requested to order a Medical Board. Where such malingering is suspected the administration should ensure that the person concerned does not get any attractive alternate employment but only an unattractive post like Office clerk. If malingering is established, he is psychologically not fit to remain in service and may be declared unfit for all classes.

6. To ensure that examination is complete in all respects and to do it quickly it is necessary to conduct the various procedures systematically in a definite order. For this, the following sequence is suggested:-

- 6.1 Registration of candidates and employees by the Clerk – in – charge who will check up whether requisitions for examination are complete in all respects including signature of the official who issues the requisitions. They should be returned if requisitions are incomplete.
- 6.2 The Clerk will then write name, age, designation, medical classification, etc., of the candidate/employee in the relevant Medical certificate proforma.
- 6.3 The Medical Officer then personally verifies the identification marks given on requisition and initials it. If they are vague or incomplete, he will write down the correct identification marks and ask the official issuing the requisition to verify it. Signature or thumb impressions are then taken.
- 6.4 The examinees are then lined up and eyes are examined in good light for any abnormality. Eye movements, field of vision, pupillary reactions, are tested and absence of squint tested by the cover test.
- 6.5 Visual acuity, colour vision and near vision are tested. Since candidates are sent for examination for a particular class, physical examination need not be proceeded with, if vision or colour vision is defective and the candidate would be declared unfit.
- 6.6 Physical examination is then conducted systematically starting with the head and finishing with the feet. In the case of candidates, marks or successful vaccination should be looked for.
- 6.7 Special examination like blood pressure, urine, etc., are then conducted.
- 6.8 In the case of candidates if they are fit in all respects, they are sent for miniature X-ray of the chest.
- 6.9 The examinee should not be fatigued. He should not be examined after his having come straight from work, long exposure to glare or while fasting. He should come either in the morning after breakfast or after lunch. He should have had sufficient rest and good night's sleep. He should be kept in the dark room for some time before the actual examination commences.
- 6.10 If a Railway employee, who has not had a period of rest immediately prior to his re-examination fails to pass the tests, he may be re-examined by the same examiner after allowing the examinee after a period of rest.
- 6.11 If any defect is found, which is likely to interfere with the efficient performance of the Railway employee's duties, but is remediable by treatment or operation, the Railway employee should be advised to undergo such treatment or operation.
- 6.12 These regulations in no way restrict the freedom of a competent authority, before whom a Railway employee appears for a Medical certificate or for examination with a view to being declared fit to return to duty, to express the opinion that the Railway employee is permanently in-capacitated for service or for the duties of a particular class or nature.

6.13 All vision tests should be conducted with the examinee's vision corrected, where necessary.

7. Tests for visual acuity :-

7.1 Distant vision: This will be carried out in a dark room on an illuminated board with Landolt's split rings where the board will be fixed at a distance of 6 metres from the examinee. The test rings will be made of plastic material, black matt on non-shining absolute white background. In the absence of dark room facility, this examination could also be done in an open verandah with diffused uniform light. If such an arrangement is used the examination should be done only when there is adequate natural light.

7.1.1 The Standard Test Objects:

- (a) The Standard Test objects consist of a series of matt black rings printed on matt card (plastic to be preferred). The rings are of 8 sizes and each is broken by a radial, parallel-sided gap, the width of which, taken tangentially to the ring, is in all cases equal to the radial breadth of the ring. The gap or "split" in the ring is accordingly a square. The overall diameter of the ring, from outer margin to outer margin, is five times the width of the gap.
- (b) The measurement of the 8 rings required, and the equivalence of the various members of the series with Snellen's Test Type for Distance, are as thus:-

No. of Snellen equivalent	Width of Gap in millimeters	Outer Radius of ring in millimetres	Inner Radius of ring in millimeters
1. 6/60	17.45	43.62	26.17
2. 6/36	10.47	26.17	15.69
3. 6/24	6.98	17.45	10.47
4. 6/18	5.23	13.09	7.85
5. 6/12	3.49	8.72	5.23
6. 6/9	2.61	6.54	3.92
7. 6/6	1.74	4.36	2.61
8. 6/5	1.45	3.63	2.18

- (c) It is of definite importance that the surface of the white background and the printed surface of the ring should be matt and free from shine; the typography, good; the ink, jet black; the paper or card, standard white; and the measurement accurate to the nearest first decimal place. Each disc should have a loosely fitting cover so that only the one exposed will be seen at a time.

7.1.2 Mounting of the Test Objects:-

The test objects are mounted on a plane and sand papered but unpolished and unpainted teak board about 60 cms. long and 22 cms. wide and 1.5 cms. thick. This board with its long axis vertical is fixed to the wall of examination room or on a stand in such a manner that there is a gap of approximately 15 cms. between the Board and the wall so that the examiner's hand can freely go behind the board to manipulate the rotating studs. The height of the board from the floor should be such that the smaller rings are more or less on level with the examiner's eyes. The board is perforated by round opening through which the shanks of a series of studs terminating the smooth flat disc-shaped and pieces snugly. The disc-shaped ends are designed to carry the series of test objects of different sizes. To the rear of the Board, the studs terminate in similar end pieces of convenient size for rotating the studs. The Card or preferably the plastic test objects are mounted on the disc shaped ends by adhesive in such a fashion that the centre of the ring accurately overlies that of the stud to which it is attached. Suitable covers preferably of plastic should be provided to occlude the test objects which are not being exhibited.

7.1.3 Illumination of a board in the Dark Room:-

The test objects should be illuminated in such a way that it provides illumination of not less than 5 feet candles uniformly on all the test objects. The source of light should be shaded in such a manner that it is not visible either to the examinee or to the examiner. Normally 20 Watts day light fluorescent lamp on either side of the Board with suitable shades provides adequate illumination.

7.1.4 Method of conducting the test : The examinee should be seated six metres away from the board. The

test should consist of the examinee being required to indicate, either verbally or by pointing the position of the gaps in the rings as the successive members of the series are rotated, each eye being tested separately. The following points are to be observed.

- (a) When testing vision, the rings should be manipulated by the examiner himself and not left to the assistant. Split ring should be occluded momentarily during rotation with the hand or a suitable card and only stationary position shown. In the average case the larger rings may be shown in one or two positions but the number should be increased as one moves up the series.
- (b) No definite order should be followed in showing the different positions and the last two rings should be shown eight times each and the examinee must indicate the correct position at least six times on the last one. It is a good practice to show the ring occasionally in the same position consecutively to detect whether the examinee is just guessing. Trick movements of the head to look past the occluder in shaded eye should be guarded against.
- (c) Each ring is to be presented in more than one position.
- (d) No regular order should be followed in the successive positions presented with each test object; but the objects themselves are to be used in regular sequence of size commencing with 6/60
- (e) Failure to indicate accurately the position of the gap should lead to the intermission of the test for some moments during which examinee may, if he so desires, close the eyes.
- (f) If on -resuming, the examinee makes more than two mistakes out of eight positions, the vision must be recorded as the next highest number i.e., if he reads 6/12 accurately and makes two mistakes out of 6 in 6/9 the vision is 6/12

7.1.5 Night vision.-Night blindness may be tested by recording of visual acuity with reduced illumination.

The Night Vision should be examined in diminished light with 2 bulbs of 30 watts each fixed either sides of the examination board (6 inches from 'C' ring) one above and one below. The bulb should be of day light pattern and be attached to a rheostat to reduce the light up-to a minimum of 100 lux (5 watts). The minimum intensity of light required on the Landolts Board should never be less than 100 lux (i.e. 5 watts). Even during the testing the optimal light of 1000 lux (50 watts) is required for Night Vision test. To get this intensity of light it is recommended that 2 Fluorescent tubes (2 ft. size) one on each side should be placed 6-10 inches from the Landolts' split 'C' rings lateral and anteriorally so that light falls on the 'C' rings from the front with an angle. These Fluorescent tubes should be covered so that they are not visible to the examinee. The following chart will give the amount of light falling from the source at different distances.

Distance of source and Surface illuminated.	for 1000 lux (50 watts) illumination the wattage of lamp.
6 inches	12.5 watts.
9 inches	23.00 watts.
12 inches	50 watts.

7.1.6. Fogging Test For manifest hypermetropia For candidates in Class A-1

This should be carried out in the case of candidates for Class A1 whose naked eye vision comes up to the required standard 6/6, 6/6. After testing visual acuity, trial frame is put on and one eye is occluded. In front of the eye being tested combination of plane, convex and concave lenses are inserted and vision tested. He should not be able to read 6/9 with + 2D. The combination should be varied so that previous experience or knowledge about the test obtained from others should be of no value. The eye should now be occluded and the test repeated and the findings recorded.

7.2 Near vision : Near vision shall be tested with Snellen's test types as follows

- 7.2.1 The examinee is seated with his back to a source of good diffuse light and holds the test type card at a distance of approximately 30 Cms squarely in front of the face. The eye must be held fully open. Trial frame and occluding disc are put on and examinee asked to read the smallest test type legible to him. This is recorded as his near vision. Each eye is tested separately.

- 7.3 Field of vision : Field of vision shall be generally tested by the confrontation method. In case where, collateral evidence points to the probability of field defect, the examinee should be examined by one or other of the more precise methods (perimeter or campimeter) even though the manual method is negative.
- 7.3.1 Confrontation method-Examiner and examinee sit facing each other about 90 Cm. apart, eyes on level, chairs symmetrically disposed to the window or any other source of light. Assuming that it is intended to begin with the examinees left eyes he is instructed to close, the right eye with the right hand to fix the examiner's right eye with his left eye. The examiner closes his left eye and extends his right hand to occupy a position in the plane midway between himself and the examinee. He now moves his hand in all meridians successively in this plane from the centre towards the periphery and the examinee is instructed to inform, him when in each meridian the hand is no longer seen; great care is exercised to ensure that the left eye of the examinee remains fixed and the right eye covered. If it is suspected that the latter is not the case, the examination is stopped and only resumed when the right eye has been occluded. The procedure is repeated for the examinees right eye, the examiner's eye being closed, etc. Any meridian in which the hand is observed to disappear for the examinee while remaining visible to the examiner is noted and regarded as a meridian of defect.
- 7.4 "Squint": The eyes should be examined in good light for absence of squint to ensure that the movements of eye-balls are normal and to see whether he has been operated for cataract. It is not uncommon for employees in classes A1, A2, A3, B1 & B2 to take privilege leave and get operated for cataract without advising the Medical Authorities and the defect is likely to be missed at Periodical Medical examination. Most cases of squint will be detected if the examinee is asked to look straight ahead and the eyes are examined in good light. Testing movements of the eye-balls, asking the examinee to look at the examiner's finger and moving it vertically, horizontally and obliquely will be helpful. For categories other than C1 and C2 examination by cover test should be done.
- 7.5 Binocular vision is not likely to be present if there is a congenital squint or one acquired early in infancy where corrective surgery has not been done before 6 to 7 years of age. It is so even though the vision in each eye may be 6/6. This is so because binocular vision was absent at the crucial period of development of the brain and the person learns to suppress image of one eye at any particular time to prevent confusion due to the defect right from birth or early in life.
- 7.5.1 Binocular vision has advantages over the monocular vision. With stereoscopic vision one gets a sense of depth in the field which helps in judging distance of an object. It also helps to judge the speed of a moving object. The greatest disadvantage in absence of binocular vision to a driver may be when he approaches a big yard where there are large number of signals on one scaffolding and he may fail to distinguish the one which is meant for him.
- 7.5.2 Cover test, one-dot test, 4 dot test and even Dastoor's malingering tests are but crude tests for binocular vision. If in spite, of obvious squint an individual passes these tests and diplopia is not discovered, he should be examined for presence of binocular vision on Synaptophore. This obviously will be possible only in the Headquarter Hospital at the present stage.
- 7.5.3 Where squint is present from birth or develops early in infancy and is corrected later in life, it is very improbable that the man would get binocular vision. Such cases should be examined carefully and not passed as having binocular vision unless examined on Synaptophore. Individuals getting squint acquired later in life however, develop binocular vision with corrective surgery.
- 7.6 The details of the various tests are enumerated below
- 7.6.1 Candidates and Railway servants in class A-1, A 2, A3, B 1 and B-2 will be tested for the presence or absence of binocular vision i.e peripheral fusion, according to the following methods. The absence of binocular vision will disqualify a candidate for admission to service in these classes, and in the case of a Railway servant his retention in the service in classes other than C-1, and C-2
- 7.6.2 All candidates and employees in Class A-1, A-2, A3, B-1 and B2 shall be examined for absence of squint by cover test. Doubtful cases may be examined by Worth's four dot test or Dastoor's apparatus. In the case of candidates and employees in class A1, A-2, A-3, B-1 & B-2 doubtful cases shall be referred to the divisional head quarters for examination by ophthalmologist
- 7.6.3 The Cover Test:
- 7.6.3.1 Examination to detect the presence of deviation of the visual axes for fixation of a near object: Hold a spot light or some other small fixation object about half a metre in front of the patient's eyes and ask him to keep looking at it. Then watching his right eye, quickly occlude his left eye; if as soon as his left eye is covered, his right eye exhibits movements in order to take up fixation of the object, it follows that it must have been deviating before the left eye was occluded. The direction of such movement of the right eye will have evidence of the direction of squint, for example, if the right eye turns outwards to take up fixation, it must have been in a convergent position before the left eye was occluded; there-

fore, there is a right convergent strabismus. If on the other hand, the right eye moves inwards to take up fixation, he must have a divergent strabismus. If the right eye remains fixed on the spot-light and exhibits no movement, there is no manifest strabismus of the right eye. This test should be repeated at least twice more, so as to ensure correct observation. In some cases, it may be found that fixation is alternating, in others it may be observed that fixation is variable, sometimes mono-ocular and sometimes binocular. There may also be a combination of horizontal and vertical deviation. Repeat the examination for the left eye, keeping the right eye of candidate and left eye of examiner occluded.

7.6.3.2 Examination to determine the presence of deviation of the visual axes for fixation of a distant object:- The testing then repeated using a fixation spotlight situated at a distance of 6 metres, because sometimes a squint may exist when the gaze is directed to a near object, but not when directed to a distant object or vice versa.

7.6.3.3 As a result of the cover test, it will be clear whether the patient is fixing binocularly or mono-ocularly i) when fixing a near object and (ii) when fixing a distant object. If mono-ocular fixation exists the test will have demonstrated the type of deviation present.

7.6.3.4 The possibility of pseudo-strabismus must also be kept in mind. Apparent strabismus or pseudo-strabismus, may be due to broad epicanthic folds which give the eyes a closely set appearance when the gaze is directed forwards and make the adducting eye appear to turn in excessively when the gaze is directed laterally to one side or the other.

7.6.4 Four dot test:-

7.6.4.1 Apparatus :Worth's Four Dot Test is one of the most useful tests for binocular vision, its value being in its extreme simplicity. The apparatus consists of a light tight box 10"/25 cm. x 10"/25 cm x 7 1/2"/19 cm, having a light bulb of 25 watts at the rear which illuminates four round white and coloured aperture 1 3/4"/4.5 cm apart. The colored glasses of the apertures are backed by frosted glass. A pair of red and green goggles or spectacles is used in the test, the red and green glasses being complimentary to those fixed to the apertures. The apertures with the green light cannot be seen through the red glass of goggles and the aperture with red light cannot be seen through the green glass of the goggles. The aperture with the white light is seen with both the eyes. The red and green glasses in spectacles or goggles should be inter changeable so that the red or green glass can be placed over the right or left eye, as required. The test is not applicable to the colour blind.

7.6.4.2 Method.. The test is conducted in the dark. The goggles or spectacles are placed in front of the examinees eyes before the light is turned on. Care should be taken that he does not observe the number of the lighted apertures in the box, without the goggles or spectacles since this information may make him qualify his answers. The examinee who is placed at 6 metres distance and facing apparatus with the red glass over the right eye and the green glass over the left eye, is asked how many lights he sees and what colour the lights are. If he sees four illuminated apertures one red, two green and one non-descript pinkish green, then fusion is present and he possesses binocular vision. If he sees three green illuminated apertures only, he is using the left eye only, and similarly if he sees only two red illuminated apertures, he is only using the right eye. If he sees five illuminated apertures three green and two red, with the red glass in the right eye, uses both eyes but diplopia is present. These findings can be verified by reversing the spectacles or goggles. The colours in the apertures should be capable of being interchanged.

8. Colour vision:-

8.1 Colour defective individuals usually acquire increased accessory powers of observation which enables them to distinguish colours not by recognising the actual colour but by noticing the slight difference in luminosity and saturation of colours, e.g., they are able to distinguish red from green if the lights are bright, but fail to do so if they are dim, unsaturated or of a small size. Hence the importance of examining with and without modifiers and with large and small aperture. Light-red is more luminous than dark-red and may, therefore, be confused as green. While testing colour vision with the lantern the method of examination should be remembered and followed. In all cases, test first with large aperture. Grossly defective individuals will be weeded out early. When examining with E.G. Lantern the ground glass modifier should be in position. This is not necessary with Norman Lantern as a ground glass modifier is built into it. Record mistakes made e.g., call Y (Yellow) and L.G. (Light green), as R (Red) when shown after S.G. (Dark green) with large aperture etc. This will be necessary for interpreting results afterwards.

8.2 Instances are not uncommon where colour blind examinees are tutored by unscrupulous persons to read Ishihara plates. The commonest method used is to train them to memorize the order in which numerals appear.

Examinees are also told to twist their neck and view the plates obliquely to get a better sense of contrast. Colour blind persons read plates 2 to 9 wrongly, e.g., on plate 2 figure '8' is read as '3'. So he is tutored "if you see 3 say it is 8". Similarly for other numbers. The Ishihara book should be kept in the personal custody of the medical officer and the instructions issued with each book studied and memory refreshed periodically. The plates should not be shown in definite order but at random. Good illumination by diffused daylight is ideal. If electric light has to be used, it should be approximate day light as far as possible.

8.3 Description of Edridge Green-Lantern: The Edridge Green Lantern consists of a chamber behind which contains a parabolic reflector with a 40 Watts frosted tungsten filament lamp and a body in front, which contains five disks. All these discs are controlled by levers. The first disk has 6 different sized apertures and these apertures are so graded that colored lights seen through them at 4.9 Mtrs represent signal lights at different distances. Aperture size 1 is 1.3 mm in diameter and aperture size 6 is 13 mm in diameter. Disks 2, 3, and 4 have various coloured glasses. The colours are

- (1) Red A (dark red)
- (2) Red B (Light red)
- (3) Yellow
- (4) Light green(signal green)
- (5) Modifying glasses
- (6) Blue
- (7) Purple.

Disk no. 5 contains modifying glasses which represent white lights from clear lights to those modified by mist, rain or fog. The idea of having three disks containing colored glasses is to be able to produce a third colour. The modifying glasses are to vary the intensity of coloured lights which occurs under different working conditions, such as rain, mist, fog etc.

8.4 Method of Examination with Edridge Green Lantern.

Distance 4.9 Metres.

- 8.4.1 Keep the largest (No.6) aperture and ground glass modifier in position. Show all the colours in serial order as well as in disturbed order. Repeat the test with the same aperture but with neutral 1 and then the neutral: 3 modifiers.
- 8.4.2 Show all the colours without modifiers with the largest aperture. Yellow should be shown repeatedly after red -B, and signal green and yellow and light green after white.
- 8.4.3 For classes A1, A2 & A3 -put the smallest aperture (No.1) in position and show all the colours with ground glass modifier in position.
- 8.4.4 Repeat with the same aperture but with neutral 1 in position.
- 8.4.5 Note mistakes, if any, and show the same colour again to see if mistakes are repeated.

8.5 Description of Norman's Lantern.- The Norman Lantern consists of a lamp housing at the back containing a 25 watt frosted tubular lamp. Light from the lamp passes through the filter or aperture of the disc and illuminates the screen of ground glass in front of the instrument. This is seen by the examinee. Just inside the ground glass, there is a piece of plane glass which throws a little of the light upwards to fall upon a small ground glass screen in the top of the instrument. This is seen by the Examiner. It has only two apertures, 1.3 mm. and 13mm diameter corresponding to aperture 1 and 6 respectively of the E.G.Lantern. The 1.3 mm aperture seen at distance of 4.9 metres is roughly equivalent to seeing a standard railway signal at a distance of 700 metres. At the back of the instrument, there is a circular knob by rotating which, the different colours can be brought between the ground glass in front and the source of light. The colours are the same as those in E.G. Lantern except that blue and purple which are not normally use on Railways are omitted. They are arranged in groups of 2 or 3 and in one complete turn, the examinee will see them in all the sequences, necessary to detect colour blindness dangerous for railway working. The knob can be turned clockwise or anti-clockwise. There is also a small aperture just above the ground glass which may be operated by a lever to show a small pilot light to give the examinee indication of the direction in which he has to look to see the colours. At the back of the instrument, there is a lever by moving which either neutral glass No.1 or neutral glass No.3 can be interposed between light the coloured discs. There is another lever at the bottom of the instrument at the back, which enables the examiner to shut off the light from the ground glass screen in front. By operating this lever the same colour can be repeated several times without the examinee being aware of it. It also enables examiner to change from one colour to another without exhibiting intervening colours.

8.6.1 Large Aperture (13mm). No modifier. Start with any colour, show several coloured lights at random and then make a complete revolution, clockwise or anti-clockwise, concluding with further coloured lights

at random. As a matter of precaution, when making the complete revolution some of the colours should be shown more than 3 times by reversing the movements and then continuing the movement in the original direction. When the white line on the turning handle is opposite the pointer, the white light is in position and shows the circuit to have been completed, if the movement was started from this position. Opposite the white line on the turning handle is a small knob which serves as an indicator in the dark.

8.6.2 Large aperture (13 mm) with neutral one and then neutral 3. Repeat the procedure.

8.6.3 For classes A1, A2 & A3 small aperture (1.3 mm) without modifiers. Repeat the procedure.

8.7 Candidates and employees in Class A1, A2 & A3 shall be tested with lantern and Ishihara plates and they should pass both the tests. For interpreting results of Ishihara tests, the instructions issued along with book should be followed. Employees and candidates for the above categories will be tested on the lantern with both the large (13 mm) and small (1.3 mm) apertures. Candidates in Class B1 will be examined only on lantern with large aperture.

8.8 Employees in category B1 will be tested only with the large apertures (13mm) of the lantern.

Note: 1) When testing for colour vision, the employee should wear glasses as required for distant vision.

2) There will be no colour perception test for categories B2, C1 and C2.

8.9 Examination of colour vision using Plane Wall Mirror. Although colour vision can be tested satisfactorily with the lantern situated 4.9 metres away from the examinee, it would be preferable to use the mirror arrangement with the candidate seated on a low stool 2.5 metres away from the wall mirror and the lantern placed on a tall stool or a wall bracket so that the lamp is above the examinee's head and a little to the back. With this arrangement, the examiner can see the colours exactly as the examinee sees it, particularly with the E.G. Lantern where there is no arrangement for seeing the colours except from the front. The mirror should be a perfect plane mirror, free from distortions and approximately 45 cms. long and 30 cms wide. While fixing it on the wall, it may be tilted slightly if necessary. (It is the similar arrangement as seen in many Ophthalmologists' consultation rooms.)

9. Interpretation of results:-

9.1 Red: With or without neutrals:- If either light red or dark red is called green, white, yellow, black or no colour, entrants or employee from all four categories must be failed. If red is called purple, dark adaptation has probably not been sufficient, but if after sufficient time has been allowed and he still makes this mistake he must be failed for all four categories particularly if his Ishihara test has not been satisfactory.

9.2 Green:

9.2.1 Light green with or without neutrals: If light green is called red, or persistently white, entrants and employees must be failed for categories A1, A2, A3 and B1. Light green is often named white or yellow when shown after signal green but correctly when shown by itself. This is a mistake of no consequence and, when taken in conjunction with the good Ishihara test, may be disregarded. Light green may be called blue. Tetrachromics who for practical purposes are normal may make this mistake, and it should be disregarded.

9.2.2 Signal green with or without neutrals: If signal green is called red, white yellow, black or no colour, entrants and employees are unfit for categories A1, A2, A3 and B1. Signal green is really a blue green and strictly speaking it should be named as blue. In India, most railway employees with normal colour vision call it green, because it is officially known as such. Actually, if signal green is called blue though it should not be treated as an incorrect answer, his light test should be very carefully carried out again.

9.3 Yellow: If yellow with or without neutral is called green, entrants and employees for categories A1, A2, A3 and B1 must be failed. Employees with long service in category B1 should have their cases specially gone into particularly with regard to conditions of service and whether they make any mistakes with red or green lights. If yellow with or without neutral is called white, reddish, flame coloured or orange, the candidate may be passed, especially if he has done Ishihara test correctly.

9.4 White: If, without any neutral, white is repeatedly called red or green, entrants and employees must be failed for categories A1, A2, A3 and B1. An occasional mistake of this sort does not matter, if immediately corrected and the candidate has done a good Ishihara test and makes no mistakes whatever with the rest of the colours shown to him. If white, with a neutral is called yellow, orange or flame coloured or reddish, especially with neutral 3, an entrant or employee may be passed if he makes no mistakes with the other colours and has

done a good Ishihara test. If with Neutral 3 it is called green, he must be failed. If Neutral 1 is called green and then immediately corrected and he makes no mistakes with the rest of the tests, he may be passed if he does a good Ishihara test. If white is called black, with or without a neutral, entrants or employees must be failed for classes A1, A2, A3 and B1.

10. Ishihara Plates:-

10.1 (Isochromatic Charts): These consist of coloured Lithographic plates in which bold numerals or zig-zag lines are represented in dots of various sizes and tints set amidst dots of the same size but of tints which are most readily confused with those of the figures by colour blind people.

10.2 Method of examination: The plates are designed to be appreciated correctly in a room which is lit adequately by day light. If electric light has to be used, it should as far as possible, resemble natural day light. Examination should not be conducted in direct sunlight. The plates should be held 75 cm (2.5 ft.) from the subject and tilted so that the plane of the plate is at right angles to the line of vision. As subjects are often coached about the order in which numbers appear, they should not also be shown in serial order but at random. Illiterate staff can be tested by asking them to trace the figures with camel hair brush or a cotton swab. The printed instructions issued with the plates should be perused for correct conduct of the test and for interpretation of results.

11. Physical Examination:

11.1 Physical examination should be conducted in good light and the person to be examined should be stripped except for drawers or langot. They should be asked to sit on their haunches and then stand with arms raised to see if free movement of joints is present. A definite order of examination should be followed starting with head and neck, followed by chest, upper limbs, lower limbs, abdomen and genital region in that order.; Both front and back should be seen. While examining R.P.F. candidates, special regulations laid down should be kept in mind.

11.2 Ordering glasses, operations, etc., should be done in writing and recorded as such in the office case-paper. Examinee must give regular attendance subsequently, so that they are not lost sight.

12. The following guidelines are given to assist the examiner in arriving at a decision not only at the time of periodical examination but also when issuing fit certificates after illness or accident.

12.1 Vertigo and Labyrinthine conditions: Where there are sudden attacks of vertigo as in Meniere's Syndrome he should not be declared fit for A1, A2 and A3. There are cases of Labyrinthitis, cervical spondylosis etc., where the employee may be declared temporarily unfit for a few weeks.

12.2 Ischaemic Heart Diseases: Persons in categories A1 and A2 with history of myocardial infarction, coronary insufficiency or angina should not be passed fit for train working as there is risk of further attacks. They may be passed fit for other categories including shunting duties in yard if cardiac reserve is good.

12.3 Arrhythmias: Paroxysmal tachycardia is a most unusual cause of syncopal attacks. Therefore, it is not a cause for rejection. Auricular fibrillation would make a person unfit for all except sedentary jobs.

12.4 Aortic valvular disease: Syncope is one of the symptoms of aortic stenosis. It is provoked by exertion or emotional upset. Therefore, it will be a disqualification for train working and for certain categories like Pointsman, Yard Porters, etc.

12.5 Heart Block: Persons with partial or complete heart block would be unfit for train working and train passing duties in view of the possibility of syncopal attacks. They would be fit only for sedentary jobs not involving heavy physical work.

12.6 Hypertension: Each case must be judged individually taking all relevant factors into account, but as a general guide, a hypertensive employee free from other signs can be declared fit for any jobs if B.P. is not more than 190/100. In the case of candidates B.P. of over 140 systolic and 90 diastolic would be a cause for rejection. In arriving at a decision, age, obesity, family history, cardiac conditions, glycosuria, albuminuria, evidence of atherosclerosis etc. should be taken into consideration. Evidence of atherosclerosis is more important than actual levels of blood pressure in assessing risk. Those with a blood pressure persistently above 200 systolic or 110 diastolic and those on ganglion blocking drugs should not be passed for train working or train passing duties. A station master who is supervisory and not doing train passing duties may be passed under such circumstances, but not one on train passing duties.

12.7 Diabetes:

12.7.1 Diabetes controlled by diet alone: These have no risk of hypoglycaemia and may, therefore, be passed fit for all categories.

- 12.7.2 Diabetics controlled by diet and oral hypoglycaemic drugs: They have a small risk of prolonged hypoglycaemia. Therefore, it would be a disqualification for duties on foot plate except those on shunting engine.
- 12.7.3 Diabetics controlled by diet and insulin: There is definite risk of hypoglycaemia and would be a disqualification for train working and train passing duties.
- 12.8 Myxoedema: There is an obvious slowing or reaction time and therefore, would be a disqualification of train running and passing duties.
- 12.9 Epilepsy: Epileptics should not be employed in or near running lines or moving machinery and never on train running and passing duties.
- 12.10 Psychosis: Psychosis should not be employed on train working and train passing duties or duties which bring them in contact with the public.
- 12.11 Employees on antihistamines and tranquillisers should not be on foot-plate job or drive motor vehicles or work as guards.
- 12.12 Respiratory insufficiency: In the case of employees with asthma, emphysema, chronic bronchitis, pulmonary tuberculosis etc. lung function should be carefully assessed taking into account of nature of their duties before they are passed fit. Bouts of coughing can result in syncope (laryngeal vertigo). Therefore, those with history of such episodes would be unfit at least for a time for train working.
- 12.13 Ear:
- 12.13.1 Hearing : Each ear is to be tested separately. If hearing of an employee is found to be defective, opinion of the ENT specialist should be obtained. The categories for which hearing aid is not permissible should be borne in mind.
- 12.13.2 Other diseases of ear: Purulent discharge, perforation etc., will be cause for rejection in the case of candidates.
- 12.14 Speech: Persons with impediments like stammering are not suitable for jobs involving contact with the public.
- 12.15 Skin: Inveterate skin disease will be a disqualification for jobs involving contact with the public.
- 12.16 Physical disabilities: Minor degrees of knock-knee, bow-legs, flat foot, etc. do not prevent persons from performing their duties efficiently except in Railway Protection Force where a higher standard should be insisted on. Congenital flatfoot is painless and should not be a disqualification by itself. In the case of employees with physical disabilities like stiffness of joints, loss of fingers, paralysis of muscles, etc., the consideration should be (a) can he do the job efficiently? (b) will he endanger others? (c) will he endanger himself? The decision will depend on answers to these questions. Where the exact nature of the job is not clear, it is better to watch an employee of that category at work or at least consult the departmental officer.
- 12.17 Leprosy: Infective cases of leprosy should not be passed fit for duties involving contact with public or close contact with co-workers. In all cases, the criteria mentioned under physical disabilities should be borne in mind.
- 12.18 Bleeding diathesis: Those with bleeding diathesis should not be passed fit for duties on moving trains.

Annexure - IV

(para 510)

Class A-I

(1) Foot - plate staff

1. Engine Drivers
2. Diesel loco operator
3. Train engine driver
4. Assistant driver *Driver*
5. Electric train driver or motorman
6. Rail car driver
7. Motor trolley driver
8. Rail motor wagon driver
9. Fireman augwala
10. Trainee firemen
11. Shunters
12. Trail inspectors in workshop.
13. Staff instructor
14. Driver instructor
15. Cleaners or khalasis *Engine*
16. Rail motor wagon mates

(2) Apprentice firemen

1. Apprentice assistant driver
2. Apprentice motormen

(3) Navigating staff

1. Captain
2. Chief officer
3. Deck serang.

4. Deck tindal
5. Seacunny
6. Berthing master
7. Lookout man
8. Dredging master
9. Serangs of launch
10. Dredger
11. Tug masters
12. Tug serangs
13. Master
14. Navigating serang.
15. Serangs S.D "Viz.ag"
16. Steamer commander
17. Navigating master
18. Steamer serang.
19. Barge serang
20. Flat serang
21. Apprentice serang
22. Manjhees
23. Steamer tindal
24. Flotilla clerk
25. Motor boat driver
26. Tug serang master

(1) Transportation traffic running staff

1. Guards
2. Brakemen
3. Pilot and gunner guards
4. General assistant
5. Clerks passed in train passing

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

1. Shunting mukaddams
2. Shunting jamadar
3. Yard porters
4. Shunting tindals
5. Hook men
6. Couplers
7. Shunting porters
8. Gunners
9. Relieving gunner
10. Hook porters
11. Head gunner
12. Assistant Gunners
13. Shunt men.
14. Shunting master
15. Pointsmen
16. Jamadar
17. Pilot jamadar
18. Engine pilot men
19. Lever men
20. Shunters
21. Yard shunters
22. Assistant yard shunters
23. Shed pointsmen
24. Shunting engineer, Drivers, Firemen, Master, Pointer

(3) Cabin staff in Operative control of signals

1. Cabin men and Cabin supervisor
2. Cabin assistant station master
3. Block cabin lever men
4. Cabin signalmen
5. Block signalmen
6. Assisting block signalmen,
7. Lever men
8. Switchmen
9. Relieving switchmen

10. Cabin master

11. Cabin jamadar

(4) Station staff in operative control of signals

1. Station master
2. Relieving station master
3. Relieving assistant station master
4. Assistant station master
5. Station superintendent, both supervisory and non-supervisory
6. Traffic signalers
7. Traffic apprentices
8. Points jamadar
9. Line and engine jamadar
10. Shunting jamadar
11. Shunting porter
12. Jamadar
13. Line Jamadar
14. points Locking jamadar
15. Pointsmen
16. Assistant pointsmen
17. Points Lockers
18. Gate signalman
19. Token porters, sweepers, van goods Porter and control porter.

(5) Navigating staff

1. Tindal (Deep sea)
2. Sering (quay)
3. Tindals (in-charge of survey boards and dump craft.)
4. Signal Boson
5. Senior signalmen
6. Junior signalmen
7. Leadsman
8. Traffic jamadars
9. Shipwright foremen
10. Assistant shipwright foreman
11. Head light keeper
12. Assistant head light keeper
13. Khalasi Goods/ passenger jetty/ barge/ diesel/tug/float/ shore gang and steamer

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

1. Loco inspectoral staff
2. Staff inspector
3. Carriage & Wagon Inspector.
4. Train Inspector.
5. Loco foreman.
6. Carriage Foreman
7. M.T. driver mechanics
8. Assistant Loco Foreman
9. Foreman (stores)
10. Chief Loco Inspector

(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 and interlocking inspectoral staff

1. Section Engineer (signal)
2. Junior Engineer Gr-I(signal).
3. Junior Engineer Gr-II(signal)
4. Senior Engineer (signal).
5. Head interlocking mistry
6. Test room Assistant
7. Block inspectors
8. Assistant Block 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

(5) All staff authorised to work trolleys

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. Junior EngineerGr.I(works)
15. Junior Enguineer Gr.II(works)
16. Senior Engineer(works)
17. 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. Gunners (Engineering)
11. Ballast Train flagmen
12. Ballast train jamadar / sweepers
13. Jamadars
14. Trains clerk in-charge
15. Relieving trains clerk
16. Trains inspector
17. Trains inspector
18. Running shed supervisors
19. 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
6. Supervisor(P.Way)

(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. Serangs
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. Travelling gate man
3. Electric Gate man
4. Sweeper gateman

Class B-I

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

1. Tranship van loader
2. Launch pass checker
3. Badge runners
4. Bar line time recorder attendants
5. Points cleaner
6. Empty wagon checkers
7. Van goods clerks
8. Car khalasis
9. Crane gunners
10. Porters (Locking, fog, seal and Van)
11. Box porters
12. Seal men
13. Box Carriers
14. 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. Stencillers
5. Cleaners (yard)
6. Junctions Verifiers
7. Store verifiers
8. Seal porter
9. Goods shed porter
10. Bar line attendants
11. Bar line care taker
12. Interchange inspector
13. Neutral inspectors

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

(Supervisory)

1. Charge man fitters
2. Charge man Boiler Makers
3. Engine examiners
4. Assistant engine examiner
5. Apprentice mechanic grade I
6. Journeymen fitters
7. Mistry fitter
8. Mistry turner
9. Boiler, regional lubricant, district mechanical re-pack-
ing inspector
10. Traction power controller

(Non-supervisory)

11. Fitters, including diesel fitters (mechanical) and
electrical fitters in the diesel shed.
12. Mechanical supervisory
13. Engine examiners
14. Boiler makers

15. Turners
16. Machinist
17. Trade apprentice
18. Vacuum testing plant drivers
19. Basic tradesman
20. Stationary plant attendant
21. Coal issuers
22. Khalasis
23. Welders
24. Tool checkers
25. Mechanics, including diesel mechanics Grade I and
Grade II
26. Relief Train lifters
27. Improvers
28. Inspecting Fitter
29. Section Boiler makers
30. Out door fitters
31. Shed apprentices
32. Weigh bridge inspectors
33. Outdoor fitters
34. Cleaner muccadam
35. Box boys
36. Transportation inspector (stock)
37. Out door coolies
38. Tindals
39. Boiler maker khalasis
40. Key men
41. Special messenger
42. Box porters
43. Chowkidars
44. Blacksmiths
45. Brick arch builders
46. Moulders
47. Tin smiths
48. Chowkidars
49. Boiler makers khalasis
50. Key men
51. Store men
52. T.T. khalasis
53. Call men
54. Pump fitter khalasis
55. Pump jamadar
56. M.S. Khalasis
57. Serving drivers
58. R.T. Care taker
59. Carriage cleaners
60. Carriage khalasis
61. Hammer men
62. Lifters
63. Repackers
64. Refitters
65. Wheel gaugers

66. Stencilers
67. Inspector weighing machines
68. Fitters khalasis
69. Engine lighter
70. S.P. Cleaner
71. B.L. Attendant
72. Mechanic and his khalasis
73. Engine time checker
74. Lamp man
75. Head fitters
76. Pointers
77. Trimmers
78. Masons
79. Oiler
80. High power lamp fitter
81. Cleaning jamadar
82. Pump Fitter
83. High Bridge fitter
84. Pump Khalasi
85. weigh bridge khalasis
86. F.O. (W.B.)
87. Sweeper cleaner
88. Bhisties
89. Apprentice fitters
90. Cleaner tindal
91. Shed assistant
92. Boiler washer
93. St. C.C. driver
94. Gunner
95. Copper smith
96. Motor mechanic
97. Fuel issuer
98. Steam man
99. Mochi
100. Callman tindal
101. B.W. mate

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

1. Carpenter
2. Blacksmith
3. Hammer man
4. Painter
5. Fitter
6. Khalasi
7. Mason
8. Charge man
9. Mistry
10. Valve operator
11. Pipe line fitter
12. Mates : section, bridge, trucking gang.

13. Permanent way mates
14. Keyman
15. gang men and their helpers
16. Permanent way khalasis
17. Patrolman
18. Mashal man
19. Signalman
20. Tunnel jamadar
21. Water column man
22. Lookout man
23. Lineman (Khalasi)
24. Work mistries
25. 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. Maintainer, mechanical/ electrical
6. Basic maintainer
7. Striker
8. Bellow Boy
9. Pointer
10. Electrical fixer
11. Wire man
12. Point Cleaner
13. Telegraph inspector
14. Telegraph overseer
15. Electric overseer
16. Blacksmith
17. Hammer man
18. Carpenter
19. Painter
20. Tinsmith
21. Mason
22. Helper
23. Line man
24. Token adjuster
25. khalasis
26. Interlocking mistries
27. Interlocking cleaners
28. Signal fitter Khalasis
29. Block fitter
30. Block fitter Khalasis
31. Mast fitters

(6) Bridge Non-supervisory staff

1. Fitters
2. Carpenters
3. Welders
4. Black smith
5. Rivetters

6. Painters
7. Mason Mistry, Rivet cutter, Tester, Artisan Khalasi, Hammerman, Bellow man, Tindals, dollyman, rivet heater mason

(7) Electrical traction maintenance artisan staff

1. Electrical fitters
2. Electrical coolies
3. Electricians
4. Electrical inspectors
5. Senior Engineer
6. Junior Engineer I
7. Junior Engineer II
8. Journeymen
9. Electrical khalasis
10. Electrical mistries
11. Wire man
12. Mason
13. Painter
14. Carpenters
15. Blacksmiths
16. Crane drivers
17. Lift attendants
18. S.P. attendant
19. V.E. drivers
20. B.T. wire man
21. Call and battery fitters
22. Head light fitters
23. Oil engine fitters
24. B.T. head light fitters
25. Oil Engine Mistry
26. Oil Engine Drivers
27. B T oil engine fitters
28. B T oil engine drivers
29. Junior Engineer II
30. Refrigerating mechanic

(8) Chemist and metallurgical supervisory and other staff

1. Chemist
2. Assistant chemist
3. Laboratory attendant (other than in Rly schools)
4. Laboratory Assistant (Other than in Railway schools)
5. Senior chemist

(9) Train examining staff supervisory and others

1. Head Train Examiner
2. Train Examiner
3. Fitters
4. B T M khalasis
5. Coach attendant (Air-conditioned) Passenger
6. Driving inspector
7. Foreman Carriage(rehabilitation)
8. Assistant carriage cleaning inspector
9. Assistant Train Examiner.

(10) Para-Medical staff

1. Laboratory suptds. of all grades
2. Radiographers of all grades
3. Laboratory assistant
4. Laboratory attendant

(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
2. Sub -inspectors
3. Assistant sub Inspectors
4. Head rakshak
5. Senior rakshak
6. Rakshak (excluding the followers)
7. Fire inspector
8. Fire sub-inspector
9. Leading firemen
10. Watermen
11. Fire extinguisher
12. Fitter
13. Fire Brigade sainik

(12) Motor transport inspectoral staff and Mechanics

1. Foreman
2. Charge man
3. Mistries
4. Mechanics
5. Paint-mixers
6. Motor Mechanics
7. Road motor Ambulance, staff car and dispatch Motor lorry drivers

(13) Apprentices, mechanics, electrical overhead tractors

(14) Navigating staff

1. Manganese overseer
2. Quay overseer
3. P.W. Mistry and mate
4. Key man
5. Boatman
6. Drivers and operators of floating crafts (not Navigating staff)
7. Gunner or dredger
8. Marine engineer
9. Marine engineer II

(15) Commercial Department

1. Hamal [70-85 (AS)]

(16) Engineering Department

1. Reja (female Khalasi)

(17) Electrical department

1. All Train lighting class IV staff
2. Air conditioning class III and class IV staff

Class B-2

(1) Steam crane driver, mechanics and other crane working staff

1. Steam crane driver
2. Steam crane fireman
3. Mobile crane driver
4. Crane driver
5. Steam man
6. Capstan driver
7. Steam plant attendant
8. Block smith
9. Hand crane operator
10. Mucaddam
11. Crane Fireman
12. Crane khalasis
13. Crane mates
14. Slingers
15. Crane man
16. Crane porter
17. Boiler washer
18. Gunner
19. Shedman
20. Gunner Crane

(2) Mechanical power saw operators : band saw, circular saw

1. Punch and sheer operator
2. Saw sharpener
3. Crane saw operator
4. Machine man
5. Band saw Operator
6. Saw doctor
7. Metal sawyer

(3) Traverse operators and electrical crane operators

1. Electric Crane Drivers
2. Electric traverse operators
3. Traverse khalasis
4. Captain operators
5. Electric traverse operator ground

(4) Men employed on vertical spindle wood moulding machine

1. Machinist
2. Pattern Maker (Operating vertical spindle wood moulding machine)
3. Wood machinist skilled
4. Wood Machinist semi-killed
5. Machine man skilled

6. Machine man semi-skilled

7. Driller
8. Tool grinder
9. Grinders
10. Oilers
11. Welders
12. Turners
13. Belt men

(5) Diesel engine and compressor drivers

1. Pumper and peter engine driver
2. Fitter
3. Operator
4. Valve operator controller
5. Diesel mechanics (excluding those in locomotive running sheds and carriage wagon depots.
6. Stationary plant operator (Attendant)
7. Stationary plant operator (Mechanic)
8. Operator filtration plant
9. Oil engine driver
10. Mechanic filtration plant
11. Power house driver
12. Steam road roller driver
13. Diesel road roller driver
14. Air compressor operator
15. Air compressor driver
16. Beltman
17. Diesel engine driver
18. Electric compressor driver
19. Vacuum exhaustor driver
20. Pump engine driver

(6) Inspectoral supervisory and non-supervisory staff employed on blasting and explosive operations

(7) Staff employed on creosoting plant and processes

1. Pump room operator
2. Shunting porter

(8) Electric power house inspectoral supervisory and artisan staff and class IV staff

1. Foreman
2. Charge man
3. Journeyman
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) Station supervisory and artisan staff

1. Travelling Ticket Examiners
2. Ticket collectors
3. Special ticket examiners
4. Head ticket collectors
5. Chief inspectors ticket
6. Chief inspectors ticket checking
7. Travelling ticket inspectors
8. Station Ticket inspectors
9. Conductors

(10) Mechanical and electrical pump house staff

1. Pump drivers
2. Machine attend ants

3. Khalasi
4. Stationary plant attendant
5. Steam man
6. Hydraulic pump driver

(11) Printing press operative staff

1. Inker
2. Compositor
3. Pressman
4. Ticket Counter
5. Printer
6. Proof checker
7. Binder

(12) Civil engineering Department stores and engineering watchmen under PWIs/IOWs/BR

(13) Auto Truck drivers

1. Battery truck driver
2. Lister truck drivers

(14) Aerated water factory staff

1. Machine attendant
2. Syrup boiler attendant

(15) Navigating staff

1. Switch board attendant
2. Sub-station supervisor
3. Boat overseer
4. Sawers
5. Electric and steam crane drivers
6. Diesel truck drivers

Class C-1

(1) Train Controllers

1. Chief controllers
2. Deputy controllers
3. Section controllers
4. Wagon chasers
5. Power controllers

(2) All office supervisory and non-supervisory class III and class IV staff not indicated elsewhere

1. Traffic office assistant
2. Station Clerks
3. Stenographers
4. Typists
5. Draughts man
6. Tele operator
7. Control Tele-operator
8. Controller's clerks
9. Bridge clerks
10. Weigh clerk
11. Treasure guards
12. Supervisor Chart-room
13. Chief draughts man
14. Assistant chief draughts man
15. Tracer
16. Photographer
17. Assistant Photographer
18. Record keeper
19. Dark room attendants
20. vardri press operator
21. Ferro typer
22. In-charge- template and ferro
23. Assistant in-charge Template and ferro
24. Estimator
25. Assistant estimator
26. Special messenger
27. Store issuers
28. Gate pass collector
29. Operator or printer gestetner
30. Hostel warden
31. Assistant lecturer
32. Assistant chowkidar
33. Cycle chowkidar
34. Meter reader
35. Time recorder and store keeper (MTRA)
37. Technical Assistant
38. Office Assistant
39. Care taker
40. Fly boy

41. Sweeper
42. Cycle peon
43. Accountant
44. Time keeper
45. Dak runner
46. Store khalasi
47. Pankha puller
48. Book binders
49. Clock winder
50. Fitter
51. Cleaner motor
52. School teachers
53. Sports organisers
54. Ticket issuers
55. Ferro man
56. Lithographer
57. Letter painter
58. Pressman
59. Compometer operator
60. Carpenter
61. Store chowkidar
62. Claims tracer
63. Dispatcher
64. Head cash witness
65. Passenger supervisor
66. Secretary station committee
67. Land rent inspector
68. Poddars
69. Assistant cash Receivers
70. Compositor
71. Packers
72. Counters
73. Printers
74. Binders
75. Head time checkers
76. Muster roll Keepers (ATK)
77. Writer (Time Office)
78. Machine operator
79. Assistant jamadar
80. Cash guards
81. Sub-cashiers
82. Painters
83. Cash porter
84. G.C. Note Keeper
85. Bank Coolie
86. Armed supervisor
87. Assistant GC
88. Punchers
89. Machine Operators (Tabulating)

90. Record searchers
91. Publicity inspector
92. Comptist
93. Fitter (Block signal)
94. Time Keeper
95. Roneo operator
96. Water-man
97. Cyclist
98. Passenger guides
99. Reservation Clerk
100. Enquiry clerk
101. Workshop Clerk
102. Works clerk
103. Shed clerk
104. C. and W. clerk
105. Licensed porter inspector
106. Licensed Porter Assist. Inspector
107. Labour Supervisors Gr. I and II

(3) Luggage and Booking Supervisory staff

1. Booking clerks
2. parcel clerks
3. Free service clerk
4. Luggage clerks
5. Chief goods clerks
6. Supervisor (Esplanade mansion booking office)
7. Assistant Supervisor
8. Head Goods clerk
9. Assistant goods clerk
10. Goods clerk
11. Head coaching clerk
12. Coaching clerk
13. Head parcel clerk
14. Relieving clerk

(4) Commercial inspectoral supervisory staff

1. Assistant court case inspector
2. Assistant commercial inspector
3. Rates inspector
4. Assistant Rates inspector
5. Road transport inspector
6. Commercial inspector
7. District claims inspector
8. Demurrage inspector
9. Supervisor goods and transshipment shed
10. Goods shed cashier
11. Weighment inspector
12. Shed clerk (Commercial clerk)
13. Head weigh Bridge clerk
14. Weigh clerks
15. Invoice typist
16. Return checkers

17. Senior road transport inspectors

(5) Telegraph and telephone supervisory staff clerical and others

1. Telephone operator
2. Telephone supervisor
3. Telecommunication inspector looking after exchanges and control office only.
4. Telegraph Inspector
5. Telegraph Master
6. Telegraph supervisor
7. Head signalers
8. Signalers
9. Telegraph boy peon
10. Tele. overseer auto

(6) Transportation and commercial workshop staff

1. Store khalasi
2. Tinsmith
3. Assistant tinsmith
4. Carpenter
5. Mashal (old. and HP)
6. Fitter (HPL)

(7) Transportation and commercial class IV station staff

1. Station Peon
2. Sweeper
3. Jamadars
4. Bhisty
5. Waterman
6. Carriage sweeper
7. Farash
8. Mali
9. Goods shed khalasi
10. Goods shed peon
11. Lamp man
12. Weigh bridge peon
13. Marker
14. Assistant porter
15. Indent Peon
16. Chowkidar
17. Bridge clearance peon
18. Station cleaners
19. Seal man
20. Sweepers
21. Goods Markers
22. Conservancy jamadar
23. Khalasis
24. Luggage porters jamadars
25. Van porters jamadars
26. Luggage porters
27. Sweepers jamadars

28. Part time sweepers
29. Mark men
30. Platform jamadar
31. Lamp jamadars
32. Parcel tindals
33. Parcel porters
34. Free service porters
35. T.P.T. Porters
36. Wireless coolies

(8) Running room, watering room , retiring room, refreshment room and rest house staff

1. Running room bearer
2. Running room cook
3. Waterman
4. Running room sweeper
5. Waiting room Ayah
6. Waiting room bearer
7. Watchman
8. Rest house chowkidar
9. Rest house butler
10. Kitchen supervisor
11. Supervisor railway Hostels
12. Supervisor aerated water factory
13. Supervisor Restaurants
14. Supervisor Refreshment Rooms
15. Assistant Supervisor, Hostels
16. Restaurant car manager
17. Managers tea rooms
18. Managers depots
19. Instructor cook
20. Cooks
21. Head Cook
22. Cooks (Karighara)
23. Cook and khits
24. Staff keepers
25. Borrow man
26. Khansamas
27. Khitmatghars.
28. Room bearers
29. Barman
30. Billiard markers
31. Mates
32. Hawkers
33. Servants
34. Servers
35. Retiring room coolies
36. Care taker
37. Relieving manager
40. Running room Khalasis

(9) Workshop staff other than specified in classes A and B

1. Senior section Engineer (W.S)
2. Section Engineer (W.S)

3. Junior Engineer Gr.II(works)
4. Rate fixer
5. Journeyman
6. Chief material inspector
7. Material Inspector
8. Senior progress inspector
9. Progress inspector
10. Assistant progress inspector
11. Saloon caretaker
12. Molder
13. Fitter engine
14. Furnace man
15. Core maker
16. Sign writer
17. Whitemetaller
18. Machine man
19. Machinist
20. Material examiner
21. Coach builder
22. Painter
23. Riggers special forge smith
24. Blacksmith
25. Spring smith
26. Spring maker
27. Drop stamper
28. Turner
29. Fitter
30. Welder electric
31. Welder gas
32. Marker off
33. Gauge fitter
34. Gauge turner
35. Grinder precision
36. Die sinker
37. Grinder tool
38. Carpenter
39. Mason
40. Erector
41. Coppersmith
42. Heat treatment man
43. Angle smith
44. Boiler maker
45. Tinsmith
46. Riveter
47. Tube repairer
48. Pattern checker
49. Pattern Maker
50. Mistries
51. Cabinet maker
52. Carriage finishers
53. Designer

54. Liner
55. Polisher
56. Trimmer
57. Driller
58. Schedule men
59. Machine man
60. Turner wheel
61. Grinder rough
62. Furnaceman ordinary
63. B.T. M. moulder
64. B.T.M. Core maker
65. Slinger
66. Sand blaster
67. B.T.M. whitametaller
68. Material dispatcher
69. Hammer man
70. Store man
71. BTM Welder
72. Gas welder
73. Rigger
74. Dresser MRE wheel
75. Belt man
76. Oiler
77. Tool issuer
78. BTM fitter
79. BTM mason
80. Painter brush hand
81. BTMHT man
82. BTM
83. De-scaler
84. BTM boiler maker
85. BTM tube repairer
86. BTM Turner metal
88. BTM saw doctor
89. BTM cabinet maker
90. BTM carriage finisher
91. BTM Carriage finisher
92. Rechet man
93. Lifter
94. BTM Tinsmith
95. Paint issuer
96. Caner
97. Mochie
98. Repacker
99. Straighter bull nose machine
100. Rolling machine operator
101. Plate roller
102. Operator Hydraulic press
103. Grinder floor
104. Metal carrier

105. Spring machine operator
106. Machine attendant
107. Scaler
108. B T M turner wheel
109. B T M machine man
110. Punching machine operator
111. Khalasis female
112. Khalasis male
113. Cleaner
114. Rivet boy
115. Mucaddam male
116. Mucaddam female
117. Progress inspector
118. Scheduled supervisor
119. Assistant workshop inspector
120. Assistant master
121. Train examiners inspector
122. Mistry instructor
123. Spring setter
124. Riveter
125. Riveter , wagon
126. Timber markers
127. Bench fitter
128. Strikers
129. Spanner man
130. Tailor
131. Scrapers
132. Molten metal carrier
133. Tyre removers
134. Key men
135. Steam hammer boy
136. Drop stamper
137. Material collector
138. Assistant material collector
139. Washerman
140. Tool checker
141. Coal issuer
142. Number taker
143. Felter
144. Motor driver khalasi
145. Timber machine man
146. Saw soctor mechanic
147. Wood turners
148. Pattern makers
149. Platers
150. Telephone exchange man
151. Progress men
152. Assistant Planner and Rate fixer.
153. Pattern store issuers
154. Tyre smith

155. Cupola men
156. Lead Burners
157. Faggoting drivers

(10) Loco shed and carriage and wagon depot and stores depot staff other than specified in classes A and B

1. Ward keeper
2. Assistant ward keeper (issuer)
3. Ledger Keeper.
4. Material checkers
5. Store Issuers
6. Ticket Issuers
7. Jamadars
8. Mates
9. Khalasis
10. Time keeper
11. Form counter
12. Form issuers
13. Attacher
14. Government printer
15. Ink man
16. Sweeper
17. Store line distributor
18. Line khalasis
19. Coppersmith
20. Tinsmiths
21. Carpenters
22. Sigh writers
23. Polishers
24. Trimmers
25. Masons
26. Saloon caretaker
27. Special messengers
28. Call boys
29. Basic tradesman
30. Tool room attendants
31. Depot store keeper
32. Assistant store keeper
33. Gate keeper
34. Caners
35. Cyclist
36. Store van clerks
37. Store delivery clerks
38. Store khalasi
39. Supervisor, ticket printing
40. Assistant press Managers
41. Compositor
42. Mechanic
43. Packer
44. Orderlies
45. Counters

} Male and female

46. Hammer man
47. Boiler maker mistry
48. Turners
49. Welders
50. Moulders
51. Boiler attendant
52. Washout attendant
53. Steam raiser
54. Fire dropper
55. Store issuer
56. Tool issuer
57. Assistant Boiler maker charge man

(11) Engineering workshop supervisory and artisan staff

1. Senior Section Engineer(W.S)
2. Switch board attendant
3. Section Engineer (W.S)
4. Machinery maintenance inspector
5. Head fitter (District)
6. Material inspector
7. Supervisor points and crossings
8. Junior Engineer Gr.I(W.S)
9. Junior Engineer Gr.II(work shop)
10. Electrician
11. Machinist
12. Mistry
13. Turner
14. Fitter
15. Operator
16. Driller
17. Blacksmith
18. Plumbing mistry
19. Fitter belt man
20. Carpenter
21. Fireman
22. Head fireman
23. Screw cutter
24. Moulder
25. Water works mistry
26. Stationary engine driver
27. Tinsmith
28. Sweeper mason
29. Pattern makers
30. Chick maker
31. Rigger
32. Oiler
33. Welder
34. Supervising mistry
35. Pumper
36. Belt man

37. Rough grinders
38. Cobbler
39. Polisher
40. store man
41. Care man
42. Khalasis
43. Workshop. Khalasis
44. Liner
45. Motor mechanic
46. Inspector of works
47. Asst. inspector of works
48. watchman
49. Bellow man
50. Carpenter coolie
51. Carpenter coolie
52. Mechanic
53. Stokers
54. Mate
55. Brands man
56. Welders
57. Machine operators
58. Riveters
59. Rivet heaters
60. Cutters
61. Chippers
62. Store munshis
63. Store issuer
64. Dollymen
65. Jamadars
66. Pipe fitters
67. Boatman
68. Boring mistry
69. Meter mistry
70. Tube boring store munshi
71. Chalandar

(12) Signal and tele-communication workshop staff

1. Section Engineer (Signal), mechanical /electrical
2. Head signal fitter , mechanical/ electrical.
3. Junior Engineer (signal) , mechanical/ electrical
4. Electrical signal fitter and cleaner (sini model room)
5. Signal fitter , mechanical / electrical.
6. Carpenter
7. Carpenter wire man
8. Wire man
9. Welder
10. Tinsmith
11. Khalasis
12. Driller
13. Painter
14. Mason

15. Turner
16. Instrument mechanic
17. Motor mechanic
18. Charge hand
19. Block signal fitter

(13) Wireless staff

1. Chief wireless inspector
2. Deputy chief wireless inspector
3. Wireless inspector
4. Wireless operator
5. Wireless mechanic
6. Teleprint Operator

(14) Electrical workshop artisan staff and helpers

1. Sr. Section Engineer (W.S)
2. Section Engineer (W.S)
3. Journeyman
4. Supervisor (electrical)
5. Apprentices. grade I
6. Fitters
7. Carpenters
8. Blacksmith
9. Mason
10. Painter
11. Fitter wire man
12. Carpenter wire man
13. Tuners
14. Machine man
15. Winders
16. Instrument mechanics
17. Electro-plater
18. Electro -plater Mate
19. Lead burner
20. Sign writer
21. Cable jointer
22. Linesman
23. Boiler maker
24. Hammer man
25. Scaler
26. Rigger
27. Refrigerator mechanic
28. Lecturer
29. Call man
30. Basic tradesman
31. Khalasi
32. Meter repairer
33. Oiler
34. Ramoshies
35. H.S. fitters
36. Molder
37. Shop messenger

38. Armature winder
39. Dynamo fitters
40. Meter repairer
41. Sweeper
42. Meter repairer
43. Khalasis
44. Jamadar
45. Tester
46. Battery fitter
47. Electric fitter
48. Greaser
49. Batt welder
50. Progress chaser
51. coal plant attendant
52. Tindal
53. Key man
54. Switch board attendant

(15) Press supervisory staff

1. Supervisor
2. Supervisor, loco press

(16) Stores depot and yard supervisory and Artisan staff

1. Depot store keeper
2. Assistant store keeper
3. Clothing inspector
4. Signal stores inspector
5. Shipping inspector
6. Assistant shipping inspector
7. Head time keeper
8. Charge hand
9. Head fitter
10. Fitter
11. Carpenter
12. Painter
13. Blacksmith
14. Tinsmith
15. Machine man
16. Basic tradesman
17. Acetylene cutter
18. Instrument cleaner
19. Packer
20. Tent repairer
21. Teacher
22. Hammer man
23. Motor lorry cleaner and oiler
24. Lister truck cleaner and oiler
25. Bandage roller

(17) All accounts inspectoral and supervisory staff

1. Finger print inspector

2. Inspector of station accounts
3. Inspector of stores accounts
4. Assistant inspector of stores (stock verifier)
5. Accounts inspector (test audit inspectory)
6. Inspector of pay clerks

(18) Personnel inspectors (Welfare, hours of employment and amenity)

1. Labour welfare adviser
2. Labour welfare inspector
3. Personnel inspector
4. Law inspector
5. Welfare inspector
6. Assistant welfare inspector
7. Chief adjudication inspector
8. Adjudication inspector
9. Assistant adjudication inspector

(19) All grainshop staff

(20) All medical, nursing, sanitary, anti-malarial class III and IV staff other than specified in class B

1. Blacksmith (RPHO)
2. Charge hand
3. Boiler attendant
4. Hammer man
5. Sanitary inspectors
6. Malaria inspectors: , AHO
7. Assistant Malaria inspectors
8. Sanitary superintendent
9. Sub-Assistant malaria inspector
10. Cooks
11. Assistant cooks
12. Bearers
13. Khalasis
14. Chowkidar
15. Cleaners
16. Dhobis
17. Sweepers
18. Farash
19. Malis
20. Hamals
21. Lamp man
22. Oilmen
23. Night soil (motor Lorry) Collector
24. Watchman
25. R. P. H. O. Jamadar
26. Malaria Educated Mate
27. Tailors
28. Mates (RPHO)
29. Masalchi
30. Conservancy supervisor

31. Waterman
32. Matron
33. Nursing sisters
34. Vaccinators
35. House keepers
36. Dressers
37. Ayahs
38. Cart drivers and cart men (conservancy)
39. Orderlies
40. Punkha pullers
41. Barbers
42. Maternity nurse
43. Pantry boy
44. Malaria jamadars
45. Transport attendant bullock
46. Transport supervisor, bullock carts
47. ferrier
48. Khalasis
49. Night chowkidar
50. Ploughman
51. Dog catchers
52. Rat catchers
53. Fodder cutters
54. Pig catchers
55. Lorry cleaners
56. Fire hydrafit attendant
57. Meal attendant
58. Assistant garden superintendent
59. Cattle delivery man
60. Cattle peon
61. Bullock attendant
62. Dog License Collector
63. Moccadam
64. Drain khalasi
65. Hedge cutters
66. Caretakers
67. Physiotherapists

(21) Railway Protection force

1. Head Rakshak (Fitter /skilled / tailor/ painter)
2. Senior rakshak (Painter/House Repairer/ fire extinguisher service)
3. Rakshak (Motor cleaner)
4. Inspector/sub/assist/sub-inspector(prosecution)

(22) Dining car staff

1. Carpenters
2. Head khalasi
3. khalasis
4. Head malis
5. Malis

(23) All other staff not specified in classes A & B

1. Land leasing inspector
2. License fee collector
3. Motor car cleaner
4. Ticket craftman
5. Designer craftsman
6. Dhobi
7. Water man
8. Brickfield mistry
9. Brick counter
10. Quarry mistry
11. Pipe caulkar
12. Plumber
13. House inspector
14. Housing sub-inspector
15. Market superintendent
16. Bazaar inspector

(24) Engineering works supervisory and artisan staff not authorised to work trolley and not required to come in contact with signals in actual operation of their duty.

1. Senior section Engineer(works)
2. Junior Engineer Gr.I and Gr.II(works)
3. Mason, mistry and their staff

(25) Vigilance organisation

1. Vigilance inspector
2. Watchers

(26) Railway Protection Force

1. Bands man
2. Followers of RPF

(27) Traction Organisation

1. Traction loco controller
2. Assistant traction loco controller

(28) Aerated water factory staff

1. Charge man
2. Head mechanic

(1) Commercial:-

1. Commercial /superintendent
2. Chief cash witness
3. Cash witness
4. Clock inspector
5. Clock winders
6. Chief telegraph Instructor
7. Warden of training school
8. Instructor of training school
9. Lady inspector , refreshment rooms
10. Superintendent, lost property office
11. Inspector of dispatch's
12. Office clerks
13. Inquiry clerks
14. Packers
15. Polishers
16. Sorters
17. Syrup makers
18. Fillers
19. Checkers
20. Sales attendants
21. Water men
22. Chief catering inspectors
23. Catering inspectors
24. Sweepers
25. Weighment inspectors
26. Masalchis
27. Retiring room bearers
28. Salesmen
29. Sail Makers (otherwise known as tarpaulin repairers)

(2) Engineering

1. Office clerks
2. Jamadar peons
3. Lifters
4. Book binders
5. Daftaries
6. Sweepers
7. Bhishtis
8. Farashes
9. Malis
10. Punkha coolies
11. Water man
12. Office chowkidars
13. Material checkers (signal Workshops)

14. Assistant watch and ward inspectors
15. Workshop clerks (Electrical)
16. Workshop time-keepers (Electrical)
17. Office Draftsmen
18. Assistant Jamadar Peons
19. Coolies other than shop coolies
20. Rest House caretaker

(3) Medical

1. Dental assistant
2. Nurses
3. Pharmacists
4. Clerks
5. Hospital and dispensary servants
6. Officer, inferior staff
7. X-ray technician
8. X-ray attendants
9. Dressers

(4) Operating

1. Loco instructors
2. Signalers (except those shown in class A2)
3. Office clerks
4. All other office staff not mentioned elsewhere
5. Water man
6. Running room staff
7. Box porters
8. Call men
9. Messengers
10. Chowkidars
11. Bhishtis not engaged in watering stock passenger or goods
12. Bar setters
13. Telephone attendants
14. Traveling porter
15. Luggage porters
16. I.C. Van porter
17. Waiting room staff
18. Dhobies
19. Sweepers
20. Saloon attendants
21. Punkha coolies
22. Washout jamadars
23. Phone clerks
24. Telegraph peons

(5) Personnel

1. All staff
2. School teachers
3. Translators
4. Laboratory attendants (in railway schools)
5. Laboratory assistants (in railway schools)
6. Statistical staff working in the statistical department

(6) Stores

1. Ward keepers
2. Depot storekeepers
3. Time-keepers
4. Gate sergeants
5. Messenger boys
6. Water men
7. Bhistis
8. Farrashes
9. Khalasis
10. Sweepers
11. Daftries
12. Challandars
13. Material checkers
14. Supervisor, clothing factory
15. Head clerks and Accountants
16. Office clerks
17. Line delivery clerks
18. Jamadar peons
19. Cleaner Coolies

20. Lifters

21. Stores clerk

22. Operative or painter gestetner

(7) Mechanical

1. Cobblers

(8) Accounts

1. Pay clerks
2. Cash receivers
3. Assistant cashiers
4. Assistant Inspectors (grains)

(9) All departments

1. Record sorters

(10) Electrical staff

1. Lift operator/ Lift man

(11) Office staff

1. Daftry
2. Record sorter
3. Asstt. Record keeper
4. Peon
5. Jamadar
6. Khalasis
7. Farash
8. Bhisty
9. Mali

(12) Railway Protection Force

1. Rakshak (Cobler/cook / cookmate)
2. Rakshak (Barber/dhobi /Matts)
3. Rakshak (Bhisty/safaiwala/Khalasis)

- Note :*
1. Apprentices of all departments will be examined in the medical category for the posts in which they are intended to be permanently employed.
 2. Loco Instructors (Under 4. Operating) must, however, be not lower than A 3, if they have occasion to travel the foot-plate on the open line or the yards.
 3. Those peons who were appointed prior to issue of Ministry of Railway's letter No. dated 70/ H/3/2/10th March 1970 may be exempted from a fresh medical examination on confirmation in the same post.

Annexure - V

(Para 515 & 516)

RAILWAY

MEDICAL DEPARTMENT

Photograph of the
Candidate duly
Attested

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

Date

Place

* delete whichever is not applicable

Photograph of the
Candidate duly
Attested

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

Department Office/Section

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

Designation

Signature / L.T.I. of the candidate

Date:

Place

* delete if not applicable

Annexure - VI

RAILWAY (Para 515 & 516)

MEDICAL DEPARTMENT

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 Candidate

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/Section

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

Designation

Signature / L.T.I. of the candidate

Date:

Place

* Delete whichever is inapplicable.

Annexure - VII

(Para 520)

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

PART-I

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 employee in A-1 Category

Signed in my presence

Signature of Railway Medical Examiner

Date :

Place :

Designation.....

Note: * wherever applicable

.....RAILWAY

Annexure - IX

(Para 516 & 521)

MEDICAL DEPARTMENT

FITNESS/UNFITNESS CERTIFICATE FOR APPOINTMENT AS A NON-GAZETTED RAILWAY EMPLOYEE.

Hospital.....
Health unit.....
(Counterfoil)

No.....

(Name)..... (age).....

candidate for appointment as (designation).....

class in the Branch /Department

Fit for appointment

Unfit

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 candidate

Date.....

Place.....

Initials of the medical officer

Designation.....

.....

.....RAILWAY

MEDICAL DEPARTMENT

FITNESS/UNFITNESS CERTIFICATE FOR APPOINTMENT AS A NON - GAZETTED RAILWAY EMPLOYEE

Hospital.....
Health unit.....
No.....

I do hereby certify that I have examined (name).....

(age)..... a candidate for appointment as (designation).....

(Medical category)..... in the Branch/Department
whose * signature/

left hand thumb impression has been appended below in my presence.

I consider him fit /unit for such appointment.

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

Signature/L. T.I. of the candidate

Signature of Railway Medical Examiner.

Designation

Date

Place

* Delete whichever is inapplicable.

Annexure - X

(Para 516 & 521)

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) Branch/Department

(Medical category) in 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 the 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	* distant
_____ for _____	_____
without glasses	near * vision
	distant and near vision

Signature/L.T.I. of the candidate

Signature of Railway Medical Examiner.

Designation

Date

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..... No.....
Health unit.....
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.....

.....
Issuing doctor's initials
with designation

Date.....
Place :

Annexure - XI

(See Paras 538 and 541)

.....RAILWAY

MEDICAL DEPARTMENT

"FIT" CERTIFICATE

Hospital..... No.....
Health unit.....
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
medical recommendation from (date).....to
(date).....is now fit to attend to his duties.

.....
Signature of
Railway medical officer
Designation :

Date.....
Place.....

.....RAILWAY

MEDICAL DEPARTMENT

"SICK" CERTIFICATE

Signature of applicant.....

Hospital..... No.....
Health unit.....
I hereby certify that I have examined (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

* Delete whichever is inapplicable

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

Date :
Place :

.....
Signature of railway doctor
Designation :

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

Date :
Place :

.....
Signature of railway doctor
Designation :

..... 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 :

Date :

Place :

Railway Medical Officer

Annexure - XIII

(See para 540)

RAILWAY

MEDICAL DEPARTMENT

RECOMMENDATION FOR LEAVE FOR CHANGE OF
AIR OR RECUPERATION

Hospital.....
Health unit.....

No.....

I recommend that -

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 of air or recuperation.

Date :

Place :

Railway Medical Officer

* 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

.....
Signature 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:**

By appearance

Date of birth:

Age:

By statement

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

MEDICAL DEPARTMENT

..... RAILWAY

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. Arrangements should be made to relieve him of his duties as early as possible/immediately.

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)

.....RAILWAY

MEDICAL DEPARTMENT

CERTIFICATE OF SICKNESS FOR GRANT OF LEAVE TO GAZETTED EMPLOYEES

Signature of the applicant

I after 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 :

Place :

.....
Medical Officer

..... 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 of do hereby that I have carefully examined
Shri of 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/were produced before me.

Date

.....
Signature of Medical Officer.

Place

.....Division

Annexure - XIX

(Para 561)

.....RAILWAY

MEDICAL DEPARTMENT

CERTIFICATE OF RECOMMENDATION FOR LIGHT DUTY .

Hospital

No.....

Health unit

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:.....

.....
Medical Officer

.....Division

Annexure - XX

RAILWAY

MEDICAL DEPARMTENT

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 :

Place :

.....
Medical Officer.

.....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 sweating 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. Ask him to count from 100 backwards.
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. Ask him to walk on a straight line.
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

Signature and Designation

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, sunstroke | .... | .... | ..... |
| 24. Any intent to deceive | .... | .... | ..... |
| 25. Blood examination, leucocytosis, etc. | .... | .... | ..... |
| 26. Whether feigning 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 ADMO/DMO/SRDMO(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.	....	....	....	.....
6. E.S.R.	....	....	....	.....
7. Blood sugar: (a) fasting	.....	.....	.....	.....
8. Serum Cholesterol.	....	....	....	.....
9. Blood urea.	....	....	....	.....
10. M.M.R.Chest.	....	....	....	.....
11. E.C.G.	....	....	....	.....
12. Height:	....	....	....	.....
13. Weight.	....	....	....	.....
14. Any other significant point	.....	.....	.....	.....
History.	....	....	....	.....
Past History:	....	....	....	.....
Family History:	....	....	....	.....

Standard weight).....

Physical Examination:	.....	.....	.....	.....
General:				
Alimentary system: .....	.....	.....	.....	.....
Respiratory system:	.....	.....	.....	.....
Cardio-vascular system:	.....	.....	.....	.....
Pulse rate.....p.m.				Ryth, Regular/irregular, condition of arteries.....
Heart.....				
Nervous system.....	.....	.....	.....	.....
Dental:	.....	.....	.....	.....
Ophthalmic:	.....	.....	.....	.....
Gynaecological(for ladies only)	...	...	...	.....
Additional remarks:	.....	.....	.....	.....
Impression:	.....	.....	.....	.....
Advice:	.....	.....	.....	.....
Due dates for next check up.	...	...	...	.....