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Part 3

Government of Nepal

Notice released by the Ministry of Health and Population

Public Health Service Regulation 2020

Exercising the authorized as stipulated in Section 63 of Public Health Service Act, 2018, the Government of Nepal has formulated the following rules.

Chapter 1

Preliminary

1. Title and Commencement: (1) Name of the regulations is "Public Health Service Regulations, 2020".
(2) The regulations will come into effect immediately.
2. Definition: If the subject or context does not otherwise imply, in this regulation,
 - (a) "Hospital" should be understood as health institution where doctors provide health services upon admitting patients.
 - (b) "Basic Health Service Center" should be understood as government institution that provides basic health services.
 - (c) "Act" should be understood as Public Health Service Act 2018.

Chapter 2

Health Services

3. Basic health services: For every citizen, basic health service as stipulated in the title under Schedule-1 consistent with Sub Section (4) of Section 3, will be provided free of cost from all the basic health service centers and the health institutions designated by the Government of Nepal, provincial government and the local level.
4. Emergency health service: (1) Emergency health service will be as mentioned in Schedule-2.
(2) Basic health service center and basic hospital need to provide general emergency basic health service.

(3) General hospital, specialized hospital, specialist hospital, teaching hospitals under health science academy and other teaching hospitals will need to provide emergency health service as mentioned in Schedule-2.

(4) Ayurveda service center, specialist Ayurveda hospital and homeopathy hospital need to provide emergency health service consistent with the concerned medical practice.

(5) Health institutions will need to provide 24-hours emergency health service mentioned in this rule 24 hours round the clock.

(6) Emergency health service should be prioritized in accordance with the seriousness of the patient's illness.

(7) If all the required emergency health services are not available in a health institution for patient seeking emergency health service, upon immediately providing all available emergency health services, the health institution should refer the case to the most appropriate health institution that can provide the required health service as and when outlining the reason for additional treatment.

(8) Each health institution should right away provide emergency health service to patients seeking such health service and if need be, the patient should be admitted in the hospital.

(9) Irrespective of what is written elsewhere in this rule, in case the patient is unable to right way pay the treatment fee incurred in emergency health service, even such patients should be provided with emergency health service.

(10) Expenses incurred while providing emergency health service as per this rule should be paid off as per Section 4 of the Act.

5. Special and specialist service: (1) Specialist service will be in accordance with what is mentioned in Schedule-3.

(2) As per Sub rule (1) it will be provided by the doctor who has completed masters level degree or equivalent on health service science and is registered with the concerned council as a specialist.

(3) Specialist service will be as mentioned in Schedule-4.

(4) As per Sub rule (3) it will be provided by the doctor who has completed education higher than master's degree and is registered with the concerned council as a specialist and has undertaken high level specialization as per the prevalent law.

(5) Ministry or provincial government can provide specialist services through telemedicine.

(6) Government of Nepal, provincial government or local level can provide specialist service through mobile camps.

(7) Health institution willing to provide specialist service through mobile camps can run such activities upon acquiring license from the ministry overseeing provincial level health related issues and coordinating with the concerned local level.

(8) Each medical college should provide specialist services along with surgical facilities in district level hospital in at least one district hospital as stipulated by the ministry.

6. Referral services: (1) As per Sub Section (1) of Section 6, if patient coming to the health institution cannot be provided with all required treatment, upon immediately providing all possible health service available at one's health institution, such cases should be immediately referred to health institution that can provide additional treatment along with the referral slip.

(2) As per Sub Section (1), referral should be made to the most proximate or reasonable health institution.

(3) Irrespective of what is written in Sub rule (1) and (2), health institution can refer the patient to the chosen health institution, keeping with the written consent of the patient or patient's guardian or the person bringing along the patient for treatment.

(4) Any patient or the patient's guardian or the person bring along the patient for treatment at the health institution does not wish to be referred to another health institution, should be to the extent possible briefed on the reason for referral to another health institution. For the refusal to be referred to another health institution, upon acquiring written consent, arrangement should be made to all possible treatment available at one's health institution.

(5) While referring cases based on the rule, the concerned health institution should mention the treatment procedure undertaken by the health institution in the referral slip.

(6) As per the rule, treatment of the patient referred to the health institution should be provided should be prioritized based on the seriousness of the illness.

(7) After the treatment of the patient referred as per Sub rule (1), the health institution making the reference should be informed also outlining the treatment procedure undertaken in the reference slip.

(8) Health institution making the reference should maintain an updated record of the patients referred.

7. Services that require informed consent: (1) Health institution while providing health services as per Sub rule (1) should obtain written consent of the service recipient.
(2) Health institution obtaining informed consent as per Sub rule (1) should inform on the treatment planned for the patient and procedure therein.
8. Discharge summary: Health institution while discharging patient treated, after being admitted in the health institution, should provide discharge summary as per Schedule-6.

Chapter 3

Hierarchical structure of health institution, types of services and standard

9. Hierarchical structure of health institution: (1) Hierarchical structure of health service center, hospital, teaching hospital, laboratory and other health institutions will be in accordance with Schedule-7.
(2) Physical capacity and services, human resources, laboratory, blood transfusion and other standard of the health institution as per Schedule-7 will be in accordance with the notice published by the ministry in Nepal gazette.
10. Health services to be provided by health institution: Health institution as per Schedule-7 should provide health services mentioned in the very Schedule.
11. Standard for operation of health institution: Each health institution as regards to issues mentioned in Schedule-8 should operate health institution fulfilling the standard put up by the ministry.

Chapter 4

License certificates and renewal of health institutions

12. Obtaining license: (1) No one should operate private, non-governmental, cooperatives or not-for-profit community health institution or provide health services from such institution without obtaining license.
- (2) For health institution as per Schedule-9 license should be obtained from the entity consistent with the Schedule.
- (3) Private, non-governmental, cooperatives or not-for-profit community health institution in operation without license prior to the initiation of the regulation should apply for the license within three months of the initiation of the regulation.
- (4) Health institution willing to obtain license as per Sub rule (2) or (3) consistent with the framework of Schedule-10 should apply before the entity as per Sub rule (2).
- (5) In case of application received as per Sub rule (4), the license awarding authority upon inspecting or having inspected whether the applicant health institution has fulfilled standards mentioned in Schedule-8, and in cases where the standard is fulfilled, can issue license in accordance with framework mentioned in Schedule-11.
- (6) While issuing license as per Sub rule (5), the concerned authority can stipulate certain condition on health institution and service operation and it will be the duty of the health institution to comply with such condition.
- (7) Irrespective of what is written elsewhere in Sub rule (1), health institution in operation upon acquiring license from any authority, if so demands time to fulfill standards as per rule 9 or operational standard as per rule 11, the license awarding institution going by the relevance can award up to six month additional time for such health institution. License of health institutions which fail to obtain license within the stipulated time frame will be cancelled automatically. After the cancellation, assets and liabilities of such health institutions will be as per the prevalent law.
- (8) If health institution that has obtained license wishes to obtain license for higher up health institution upon fulfilling the standard and, should obtain the license for that level of health institution.

13. Renewal of license certificate: (1) License issued as per rule 12 should be renewed every five year from the license issuing authority.
- (2) Health institution to renew license as per rule 12 keeping with the framework of Schedule-12 should apply for renewal including details and documents at least three months prior to the expiry of the license.
- (3) In regard to the application filed as per sub rule (2), the license issuing authority upon conducting or having conducted necessary inspection, and if health institution is found to be operating as per standard mentioned in Schedule-8, license should be renewed prior to the expiry date.

Chapter 5

Monitoring and regulation of health institutions

14. Monitoring and regulation of health institution: (1) As regards to whether or not health institution has been in operation, or whether or not has provided services in accordance with the standard stipulated in the Act and rule 11, Government of Nepal, provincial government or local level, depending on which amongst issued the license should conduct monitoring and evaluation from that level.
- (2) To conduct monitoring and regulation of health institution, the concerned level of authority can depute public health inspector.
- (3) While deputing public health inspector in health-related sector as per Sub rule (2), deputation should be undertaken from among the individuals with qualification or experience as stipulated by the ministry.
- (4) Irrespective of what is written in Sub rule (1), public health inspector deputed by the Government of Nepal can monitor health institution that has obtained license from provincial or local level and public health inspector deputed by the provincial government can as well monitor health institution that has obtained license from the local level.

15. Need to submit self-assessment report: Each health institution within a month of the end of the fiscal year need to submit self-assessment report before the license issuing authority along with the details as stipulated by the ministry.
16. To administer as per the standard: Public health inspector in course of the inspection or based on the self-evaluation form as per Rule 15, whereupon if the health institution is found not operating the health institution or not providing health services keeping with the stipulated standard can direct the concerned health institution to act as per the standard.
17. To write calling for action: If any health institution is found not operating as per Rule 14 or found not fulfilling standard stipulated in the regulation or not providing services as per the standard stipulated, the public inspector to ensure quality and standard or initiate will need to write to the concerned authority therein.

Chapter 6

Provisions related to funds

18. Establishment and operation of health fund: (1) A fund as stipulated in the Section 28 of the Act will be established.
 - (2) Ministry will operate fund established as per Sub rule (1).
 - (3) Cash from the fund will be spent on approved public health related programs such as basic health service, procurement of medicine and equipment, treatment program for the poor and helpless and health insurance.
 - (4) Other provision related to the operation of health fund will be as stipulated by the ministry.
19. Establishment and operation of emergency health treatment fund: (1) Government of Nepal and each province will establish separate emergency health treatment fund as per Section 33 of the Act.
 - (2) Cash will be deposited in the fund as per Sub rule (1) in the following manner:
 - (a) Cash received from Government of Nepal,
 - (b) Cash provided by the concerned provincial government,

- (c) Cash received from any government, non-governmental and private organization,
- (d) Received from foreign institution, government or international institution.
- (3) Prior to receiving cash as per Chapter (d) of Sub rule (2), permission should be sought from Government of Nepal, Ministry of Finance.
- (4) Operation of fund established by Government of Nepal and operation of fund established by provincial government as per Sub rule (1) will be respectively undertaken by the ministry and entity designated by the concerned provincial government.

Chapter 7

Blood transfusion service, autopsy, ambulance and Hearse

20. Need to obtain license to operate blood transfusion services: (1) Institution willing to run blood transfusion service will need to apply before the ministry for license including all details and documents as stipulated by the ministry.
- (2) Blood transfusion centers in operation during the initiation of the regulation will need to apply for license as per Sub rule (1) within three months of the initiation of the regulation.
- (3) If the institution applying for license as per Sub rule (1) or (2) seems to have fulfilled operation standard as per rule 9 and rule 11, ministry can issue license to run blood transfusion center.
- (4) Validity of the license issued as per Sub rule (3) will stand for three years.
- (5) Institution that has obtained license as per the rule will need to apply with the ministry for renewal of license at least three months prior to expiry date.
- (6) Ministry after receiving application as per Sub rule (5), inspecting whether operation is consistent with the standard, license of institution operating such blood transfusion center can be renewed.
- (7) Institution receiving license as per Sub rule (3) can establish blood transfusion units in hospitals to provide blood transfusion services.
- (8) Institution operating blood transfusion center should only collect safe blood samples.

(9) Ministry will inspect and monitor to ascertain whether institution operating blood transfusion service has adhered to the Act and whether blood transfusion service in operation has remained consistent with the standard.

(10) If inspection and monitoring as per Sub rule (9) discovers that blood transfusion institution has not adhered to the Act and service operated have not been consistent with the standard stipulated in the regulation, the ministry can stipulate specific time frame to allow the institution to abide by the standard or can cancel the license of the institution.

However, prior to cancelling license in this manner, institution will be provided opportunity to offer clarification.

21. Autopsy: The physicianr examining dead body should do so as per the framework outlined in Schedule-15 of Civil Criminal Working Procedure, 2074.

22. Use of unattended dead body: (1) If any research institution wish to study or research unattended dead body as per Section 36 of the Act, it should submit an application at the ministry.

(2) If the ministry deems necessary can hand over unattended dead body to research institution established as per Sub rule (1).

(3) Research institution established as per Sub rule (1) should submit a report at the ministry as regards to the achievement in the field of medicine from the use of unattended dead body.

However, if the issue of intellectual property rights comes about as regards result gotten from research initiative, the ministry needs to make necessary arrangement free from any interference.

23. Ambulance and service: (1) Only the health institution designated by the ministry can operate ambulance and mortuary vehicle service.

(2) Health institution as per Sub rule (1) needs to fulfill standard in accordance with Rule 11 designated for ambulance and mortuary vehicle service.

24. Identification of cause for human death: (1) In case of death of patient being treated at health institution, the health institution needs to identify the cause for death.
- (2) To identify the cause of death as per Sub rule (1), health institution can seek expert advice, consultation and report.
- (3) Concerned institution should also maintain written record of the report concerning the cause of death identified also as per Sub rule (2).

Chapter 8

Protection and promotion of public health and emergency health service and prevention of infection

25. Drinking water, sanitation and solid waste management: Each health institution need to fulfill standard designated for drinking water, sanitation and solid waste management as per rule 11.
26. Special social security for target groups and other programs: (1) Health service, facility and procedure provided to target group as per Sub rule (1) of Section 47 of the Act will be as stipulated by the Government of Nepal.
- (2) Health service and facility designated for target group as per Sub rule (1) will be made available through provincial government and local level.
- (3) For the purpose of Sub rule (2), the Government of Nepal will provide necessary support for provincial government and local level.
27. Management of emergency health service: (1) In case of emergency situation as per Sub Section (1) of Section 48 of the Act, for immediate management of health services, the ministry will mobilize rapid response team and emergency medical team.
- (2) As per Sub rule (1), work, duty, authority and procedure of rapid response team and emergency medical team will be as designated by the ministry.

(3) Government, non-government, private, cooperatives, not-for-profit community, educational health service and other health institutions making adequate infrastructure and facility arrangement in their institution should make arrangement to provide emergency health service.

(4) If crisis is created out of emergency or unexpected reasons owing to infectious disease pandemic, vector, , micro-organism c, the Government of Nepal, concerned provincial government and local level can declare public health crisis by issuing necessary directive as per Sub Section (4) of Section 48.

(5) If public health crisis situation is declared as per Sub rule (4), the Government of Nepal, provincial government or local government, at any given situation, to issue necessary directive, mobilize non-governmental, private, cooperatives, not-for-profit community teaching hospitals or other health institution, and to provide such health service from such health institution, can mobilize health workers working in health institution or can mobilize by taking control of such institutions.

(6) If any health institution is taken under control as per Sub rule (5), operation of such health institution will be as stipulated by concerned government or level that declare public health crisis as per Sub rule (4).

(7) To manage emergency health service or in public health crisis situation, concerned government or level as required can depute health workers working in health institution to health institution or sector.

(8) In case of lack of health workers in provincial or local level at a time when public health crisis is declared by any provincial government or local level as per Sub rule (4), local level can demand additional health workers from provincial and Government of Nepal and provincial government from Government of Nepal, and when such demand is put forth Government of Nepal and provincial government will depute health workers working under them to public health crisis areas.

(9) Irrespective of what is written in the Rule, provided situation does not correspond with Sub rule (4), Government of Nepal, provincial government or local level issuing necessary directive can take back declaration of public health crisis at any given time.

28. Infectious disease management: (1) If patient of infectious disease is identified, the concerned individual should right away inform the concerned local level, provincial government or the ministry.

(2) For the information received as per Sub rule (1), provided prevention of infectious disease is not possible at the hands of concerned provincial government or local level, the ministry should right away mobilize rapid response to control the disease.

(3) Concerned government can do the following for the control of infectious disease:

- (a) To mobilize health institution and health worker,
- (b) To designate a separate dedicated hospital for the treatment of infectious disease,
- (c) To utilize public building and site,
- (d) To investigate individual infected with infectious disease or suspected of infection with infectious disease,
- (e) To collect or destroy sample from source of infection,
- (f) To vaccinate and provide other treatment for infected individual,
- (g) To hold individual susceptible to infection in quarantine,
- (h) To hold in isolation for specific time duration, for treatment.

(4) For situation consistent to clauses (d), (e), (f), (g) and (h) of Sub rule (3), informed consent from the concerned individual as per Rule 7 will not be necessary.

(5) Ministry, concerned provincial government and local level will need to provide necessary information, releasing public information from time to time as regards to the nature, symptom, prevention and other necessary information related to infectious disease.

(6) To prevent, control and manage infectious disease, ministry, concerned provincial government or local level can release public information and issue directive as required, and it will be the duty of all concerned to follow such directive.

(7) To prevent health worker and staff from being infected in course of the treatment or not allow infection by any other means, the chief of concerned institution in case of government health institution and manager in case of other institution can undertake the following measures:

- (a) To prevent infection, provide necessary vaccine for health worker coming in contact with patients,
- (b) Individual working on collection and testing of biological sample of infectious disease need to undertake compulsory measures for prevention and control of infection,
- (c) Provide equipment and structure to ward off radiation for employee working with equipment exposed to radiation,
- (d) Not engage pregnant health worker in works exposed to radiation and any other work exposed to risks and specific infection,
- (e) If arrangement for personal safety equipment and any specific measure to safeguard staff from specific infection or risk is deemed essential, make arrangement accordingly.

Chapter 9

Miscellaneous

29. File complain: (1) If complication arises in course of treatment of any patient or doubt arises in relation to the treatment procedure as per Section 18 of the Act, outlining the details the patient or guardian or person accompanying the patient for treatment, can file complaint in written to the following officials:

- (a) To the chief of health institution if treatment was undertaken by other health workers other than the chief of health institution,

(b) To the chief of higher up health institution if treatment was undertaken by chief of health institution.

(2) If complaint is filed under Sub rule (1), concerned official should right away consult with the concerned health worker or health chief and conduct an investigation.

(3) If details mentioned in the complaint is found to be true while investigating as per Sub rule (2), official as per Sub rule (1) can refer patient's treatment to another health institution or health worker or another health worker of the same health institution.

(4) If investigation as per Sub rule (2) establishes that work undertaken contradicts the Act or regulation, official as per Sub rule (1) will need to write to concerned authority calling for action on such health worker or health chief.

(30) Right to take decision: For the purpose of Sub Section (2) of Section 14 of the Act, the authority to decide on issues that seriously impact or not impact public health will rest with concerned chief of health institution.

(31) Determining compensation amount: The basis of determining compensation to pay for the party suffering from the guilty, and other arrangement as per Sub Section (2), Section 57 of the Act, will stand consistent with the prevalent law on paying compensation money to victim of the offence.

32. Storage and sale of medicine: (1) Medicine seller will need to store medicines as per the prevalent law.

(2) While storing medicines as per Sub rule (1), arrangement for quality maintenance of such medicines should be ensured.

33. Maintaining archive: Health institution should maintain separate records pertaining to personal details, health condition, remedy and treatment related details of client receiving services from the health institution.

34. Modification and alternation from Schedule: The government by publishing notice in Nepal gazette can make necessary modification or alteration in the Schedule.

Schedule-1
(Related with Rule 3)
Basic health services

(1) Immunization services:

Vaccination service for children	BCG, polio vaccine (injectable and oral), Pneumococcal, DPT, Hib, Hepatitis B, Measles-Rubella, Japanese encephalitis, Rotavirus vaccine
Vaccine for pregnant women and women of reproductive age	<ul style="list-style-type: none"> • Tetanus and diphtheria/Td vaccine • Human Papillomavirus (HPV) vaccines

(2). Integrated management of newborn and childhood illness, nutrition service, pregnancy, labour and delivery service, family planning, abortion services and reproductive health services such as maternal, newborn and child health service:

(a) Management of newborn and childhood illness:

Management of newborn and childhood illness	<u>Care and treatment of infants up to two months of age</u> Basic care should be provided for newborn with the following condition, keeping with standard treatment protocol <ul style="list-style-type: none"> • Neonatal sepsis • Birth asphyxia • Hypothermia • Jaundice
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	<ul style="list-style-type: none"> • Low birth weight • Premature birth • Feeding problem • Problem related to umbilical chord • Blood glucose deficiency • Birth defect
	<p><u>Care and treatment of children from two months to five years</u></p> <p>Basic care should be provided in the following condition, keeping with prevailing standard treatment protocol</p> <ul style="list-style-type: none"> • Rapid respiratory infection • Pneumonia • Malaria • Diarrhea • Small pox • Malnutrition • Ear infection.

Nutrition services:

	<p>Nutrition counseling and malnutrition management</p> <p><u>Nutrition counseling</u></p> <p>Nutrition counseling for pregnant women, breastfeeding mother including nutrition counseling for children.</p>
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Nutrition related services	Dietary diversification counseling service and demonstration
	Diagnosis and management of rapid malnutrition as per prevalent treatment system.
	Diagnosis and referral service for severe acute malnutrition as per prevalent treatment protocol
	Micronutrient supplementation: <ul style="list-style-type: none"> • For children below five years of age: Vitamin A capsule. • For pregnant women: Iron tablet. • For postnatal mother: Iron tablet.
	Deworming medicine for children from twelve to fifty-nine months and school going children (through the school): Deworming tablets: for pregnant women.
	For children below two years of age: Growth monitoring and counseling.
	Body mass index measurement and counseling

Pregnancy, labor and maternity service:

Antenatal service	<ul style="list-style-type: none"> • Examination of normal pregnancy, counseling, management and referral as per prevalent treatment protocol
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Delivery service	<p>Normal delivery services, counseling, diagnosis, management and referral of complicated delivery</p> <ul style="list-style-type: none"> • Management, family planning services and counseling after delivery as per as per prevailing treatment protocol Immediate and essential newborn care as per prevailing treatment protocol

(d) Family planning, abortion services, reproductive health services and women’s cancer related services:

Family planning	Family planning counseling and services: male condom, OCP, contraceptive injection,
Abortion related service	Safe abortion service, counseling and referral from enlisted health institution,
	Post-abortion and necessary counseling services including family planning service
Reproductive health morbidity	Utero-vaginal prolapse: Early screening and counseling
	Obstetric fistula: early screening and counseling and referral
Women related cancer	Cervical cancer: general check-up, counseling and referral
	Breast cancer: initial screening, provisional diagnosis, counseling and referral
Adolescent friendly service	Adolescent-friendly information, counseling, health services

(3) Communicable disease related services:

HIV/AIDS	Counseling
	Opportunistic infection management
Tuberculosis	Diagnosis and treatment (first -line drugs)
Malaria	Diagnosis and treatment (only in affected area)
Animal bite	Risk assessment, symptomatic treatment, counseling and referral
Leprosy	Diagnosis, treatment and referral
Kala-azar	Counseling and referral
Dengue	Counseling and referral
Filariasis	Counseling and referral
Gastrointestinal infections	Acute diarrhea: Assessment and treatment of dehydration
	Dysentery: Provisional diagnosis, treatment and referral
	Provisional diagnosis, symptomatic treatment and referral for typhoid
	Worm and other parasitic infestation: Provisional diagnosis, treatment
Respiratory tract infections	Seasonal influenza: Provisional diagnosis, symptomatic treatment and referral
	Sinusitis, pharyngitis, tonsillitis, bronchitis, pneumonia: Provisional diagnosis, symptomatic treatment and referral
Eruptive disease	Measles: Provisional diagnosis, symptomatic treatment and referral
	Chickenpox: Provisional diagnosis symptomatic treatment and referral
	Rubella: Provisional diagnosis, symptomatic treatment and referral

Mumps	Provisional diagnosis, symptomatic treatment and referral
Skin and soft tissue infection	Scabies: Diagnosis and treatment
	Pediculosis: Diagnosis and treatment
	Cellulitis, abscess, boil, furunculosis: Diagnosis and treatment and referral
	Ringworm and other bacterial and fungal disease: Diagnosis and treatment and referral
Eye infections	Eye Infection: Provisional diagnosis, symptomatic treatment and referral, Ophthalmia Neonatorum: Provisional diagnosis, symptomatic treatment and referral
Nose and ear infections	Ear infection: Provisional diagnosis, symptomatic treatment and referral, Nose infection: Provisional diagnosis, symptomatic treatment and referral
Oral infections	Oral infection: Provisional diagnosis, symptomatic treatment and referral,
	Ulcer in the mouth: Provisional diagnosis, symptomatic treatment and referral
Reproductive and sexually transmitted disease	Lower abdominal pain syndrome: Provisional diagnosis, symptomatic treatment and referral
	Urethral discharge syndrome: Provisional diagnosis, symptomatic treatment and referral,
	Vaginal discharge syndrome: Provisional diagnosis, symptomatic treatment and referral
	Genital ulcer syndrome: Provisional diagnosis, symptomatic treatment, counseling and referral
	Scrotal swelling syndrome: Provisional diagnosis, symptomatic treatment, counseling

	and referral
	Inguinal bubo syndrome: Provisional diagnosis, symptomatic treatment, counseling and referral
	Urinary tract infection: Provisional diagnosis, symptomatic treatment, counseling and referral

4. Non-communicable disease and physical disability related services:

Hypertension:	<ul style="list-style-type: none"> • Initial screening and risk assessment, emergency treatment, counseling services and referral • Continuity of treatment
Diabetes mellitus	<ul style="list-style-type: none"> • Initial screening and risk assessment, counseling and referral • Continuity of treatment
Chronic obstructive pulmonary disease (COPD) and asthma	<ul style="list-style-type: none"> • Provisional diagnosis, symptomatic treatment, counseling and referral • Emergency treatment
Musculoskeletal pain	Provisional diagnosis, symptomatic treatment, counseling and referral
Acid peptic disease	Provisional diagnosis, symptomatic treatment, counseling and referral
Eye problems	Provisional diagnosis, symptomatic treatment, counseling and referral
Ear problems	Provisional diagnosis, symptomatic treatment, counseling and referral
Oral health problems	Provisional diagnosis, symptomatic treatment, counseling and referral
Disability	Provisional diagnosis, counseling referral

(5) Mental illness related services:

Common mental health problems	Provisional diagnosis, symptomatic treatment, counseling and referral
Alcohol and substance abuse	Drug abuse: Provisional diagnosis, symptomatic treatment, counseling and referral
	Screening of alcoholism/dependency, initial management, motivational interviewing, referral and counseling

(6) Geriatric health related service:

Geriatric health problems	<ul style="list-style-type: none">• Provisional diagnosis, symptomatic treatment, counseling and referral• Health promotion service• Physiotherapy and rehabilitation• Nutrition
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(7) General emergency services:

Wounds and ulcer boils	Dressing of injuries and wounds, necessary referral and counseling
	Stitching in cuts, necessary referral and counseling
	Treatment of abscess and boil, necessary referral and counseling
Management of common emergency condition	Shock: Management and referral as required
	Assessment of unconsciousness: Primary

	management, necessary treatment and referral
	Convulsion: Management and referral service as required
	Case of serious injury from accident: Stabilization, necessary management and referral service
	Fracture or joint subluxation, dislocation: Stabilization, diagnosis, pain management and referral counseling
	Burn and scald: Provisional diagnosis, symptomatic treatment, counseling and referral
	Poisoning: Gastric lavage including provisional management, use of available antidote and referral service as required
	Drowning: Provisional management and referral service as required
Eye and ENT related common emergencies	Foreign body in throat: Primary treatment counseling and referral
	Foreign body in the eye: Primary treatment counseling and referral
	Foreign body in the ear: Primary treatment counseling and referral
	Epistaxis: Provisional treatment counseling and referral
Snake bite	Primary treatment consultation and referral

(8) Health promotion services:

Health promotion services	Information, Education and Communication material/s for public awareness / behavior
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	change, communication services
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(9) Ayurveda and other traditional health services:

Ayurveda	<i>Purba pancha</i> karma services
	Yoga service
	Asparagus (for breast feeding mother)
Homeopathic	Diagnosis and treatment of wart
	Diagnosis and treatment of skin allergy
	Diagnosis and treatment of tonsillitis
	Diagnosis and treatment of acidity
	Diagnosis and treatment of vitiligo
	Arthritis

*Standard treatment protocol to be followed for treatment

Schedule-2
Related to Sub rule (1), (2) and (3) of Rule (4)
Emergency health services

S. N.	Emergency health services	Health problems
1.	Respiratory problems	Acute Exacerbation Decompression Chronic obstructive Syndrome Pulmonary Disease Foreign Body in Acute Mountain respiratory tract Sickness High Altitude Acute Pulmonary Pulmonary Embolism Oedema (HAPE) Acute Pulmonary Respiratory

		<p>Oedema</p> <p>Acute Respiratory Failure</p> <p>Acute Respiratory Distress Syndrome (ARDS)</p> <p>Aspiration Pneumonia</p> <p>Asthma</p>	<p>Acidosis</p> <p>Respiratory Alkalosis</p> <p>Ruptured diaphragm</p> <p>Status Asthmaticus</p> <p>Severe Pneumonia</p> <p>Tension Pneumothorax</p> <p>Others</p>
2.	Cardiology	<p>Cardiac Arrhythmias (e.g. ventricular Tachycardia, ventricular arrhythmias)</p> <p>Cardiac Tamponade</p> <p>Cardiogenic Shock</p> <p>Congestive Cardiac Failure (CCF)</p> <p>Heart Block</p> <p>Atrial Fibrillation</p>	<p>Infective Endocarditis</p> <p>Ischaemic Heart Diseases (e.g. Angina Pectoris, Myocardial Infarction)</p> <p>Myocarditis</p> <p>Pericardial Effusion</p> <p>Pericarditis</p> <p>Others</p>
3.	Brain and Neurology	<p>Cerebrovascular Accident (CVA)</p> <p>Coma of any cause</p> <p>Encephalitis</p> <p>Encephalopathy (Hypoxic/Hepatic/ure</p>	<p>Epilepsy</p> <p>Guillain Barre Syndrome</p> <p>High Altitude Cerebral Oedema (HACE)</p>

		mic)	Meningitis Status Epilepticus Others
4.	Gastrointestinal	Acute Appendicitis Acute Cholecystitis Acute Pancreatitis Duodena Perforation Erosive gastritis Foreign body in esophagus Fulminant hepatitis Gastric perforation Gastrointestinal Bleeding (upper & lower	Intestinal Obstruction Intestinal Perforation Intussusception Peritonitis Ruptured Esophagus Splenic rupture Strangulated and obstructed hernia Trauma to abdominal viscera Variceal Bleeding Others
5.	Urology	Acute retention urine Hematuria Acute Pyelonephritis Pyonephrosis Acute renal failure	Metabolic acidosis and alkalosis Testicular Torsion Paraphimosis Ruptured bladder Others
6.	Reproductive health	Antepartum Hemorrhage Eclampsia	Pregnancy Induced Hypertension

		Ectopic Rupture Obstructed Labor Post-partum Hemorrhage Preeclampsia	Puerperal Sepsis Retention of Placenta Rupture Uterus Others
7.	Orthopedic	Fractures- e.g. Femur fracture, spine fracture Compartment syndrome Lacerations	Bleeding Amputations Gangrene Others
8.	Metabolic and endocrinological	Adrenal Insufficiency Hypo/hyperkaliemia Hypo/hyponatremia	Ketoacidosis Metabolic Alkalosis Metabolic Acidosis Others
9.	Ophthalmology	Chemical burn Corneal ulcer Double vision	Foreign Body in eye Sudden vision loss Traumatic injury to eye Others
10.	ENT	Epistaxis Foreign body in Nose Choking	Acute epiglottitis Others
11.	Burn	Thermal burns Chemical burns	Electrical injuries Lightening Injuries

			Others
12.	Mental health	Acute Psychosis Alcohol intoxication Alcohol withdrawal syndrome Catatonic stupor Conversion disorder Drug toxicity Lithium toxicity Delirium Tremens	Narcoleptic Malignant Syndrome Panic Attack Schizophrenia Suicidal attempt Transient Situational Disturbances Violent and aggressive behavior or over excitement Others
13.	Poisoning and overdose of drugs	Organophosphorus poisoning Mushroom poisoning Wild honey poisoning Dhatura poisoning	Paracetamol poisoning Zinc phosphide poisoning Aluminum phosphide poisoning Drug overdose Others
14.	Snake bite/insect bite/animal bite	Snake bite Insect bite	Animal bite
15.	Pediatric	Acute abdomen Central cyanosis Coma (or seriously reduced level of	Obstructed or absent breathing Severe respiratory distress

		consciousness) Diarrhea with signs of dehydration Neonatal emergencies (e.g. trachaeo- esophagus fistula, Imperforated anus, pin hole meatus, neonatal sepsis)	Shock (cold extremities with capillary refill time > 3 second and weak and fast pulse) Seizures Rashes (Viral exanthems) Others
16.	Related to common emergency health service		
	Injuries and Wounds	Dressing for injuries and wounds and referral and counseling as required	
		Stitch in open wounds and referral and counseling as required	
		Treatment for boil and cyst wounds and referral and counseling as required	
	Common emergency conditions	Shock: Management and referral as required	
		Assessment of unconsciousness: Provisional management and treatment and referral as required	
		Convulsion: Management and referral as required	
		Seriously injured in accident: Stabilize, management and referral as required	
		Fracture or joint subluxation, dislocation: Stabilize, diagnosis, management, referral of pain and counseling	
		Burn and scald: Provisional diagnosis, symptomatic treatment, referral and counseling	
		Poisoning: Provisional management including gastric lavage, use of available antidote and referral as required	

		Drowning: Provisional management and referral as required
	Snake bite	Primary treatment referral and counseling

Schedule-3

(Related to Sub rule (1) of Rule 5)

Specialized services

1. General Physician (Internal medicine)
2. General surgery
3. Gynecology & Obstetrics
4. Pediatrics
5. Anesthesiology
6. Orthopedics
7. Dentistry
8. Ear, nose and throat
9. Dermatology & Venereology
10. Psychiatrics
11. Radiation Oncology
12. Radiology & Imaging
13. Radiotherapy
14. Ophthalmology
15. Pathology
 - Bio-chemistry
 - Microbiology
 - Hematology
16. Pharmacy
17. Clinical pharmacology
18. Forensic medicine
19. General practice
20. Physiotherapy
21. Ayurveda
22. Other services designated by the ministry

Schedule-4
(Related to Sub rule (3) of Rule 5)
Specialist services

1. Plastic surgery
2. Surgical oncology
3. Pulmonology
4. Urology
5. Nephrology
6. Tropical medicine and infectious diseases
7. Cardiothoracic and vascular surgery
8. Transplant surgery
9. Emergency medicine
10. Endocrinology
11. Rheumatology
12. Geriatric medicine
13. Hepatobilliary surgery
14. Neurology
15. Neurosurgery
16. Artho spine surgery
17. Vascular surgery
18. Thoracic surgery
19. Nuclear medicine
20. Oral medicine & radiology
21. Transfusion medicine & cell therapy
22. Physical medicine & rehabilitation
23. Neonatology
24. Pediatric surgery
25. Cardiology
26. Hepatology

27. Medical oncology
28. Gastroenterology
29. Gastroentero surgery
30. Critical care medicine and anesthesiology
31. Pulmonary critical care and sleep medicine
32. Interventional radiology & imaging
33. Molecular biochemistry
34. Immunopathology
35. Molecular pathology
36. Haemato pathology
37. Virology
38. Oral and maxillofacial surgery
39. In-vitro fertilization
40. Molecular microbiology
41. Specialist Ayurveda services
42. Occupational medicine
43. Genetic medicine
44. Other services designate by the ministry.

Schedule-5
Related to Sub rule (1) of Rule 7
Service requiring informed consent

1. All kinds of surgery
2. Anesthesia
3. CT Scan/MRI
4. Interventional radiology
5. Maternity and abortion service
6. Endoscopy or diagnostic procedure utilizing similar equipment
7. Radiotherapy
8. Chemotherapy
9. Bone marrow aspiration
10. Biopsy service.

Schedule-6

(Related to Rule 8)

Format for discharge summary

Patient's name:

Age:

Sex:

Address: Rural/Municipality:

Ward:

Tole:

Landline phone number:

Mobile number:

Alternate number:

Hospital ward:

Unit:

IP No/Hospital registration no:

Attending consultant's name:

Date of admission with time:

Date of discharge with time:

Provisional diagnosis at the time of admission:	
Final diagnosis at the time of discharge:	
ICD-10 Code(s) for final diagnosis:	
Summary of presenting illness:	
Significant past medical and surgical history:	
Significant clinical findings:	
Summary of key investigations with major results:	
Summary of treatment:	
Specialty consultations if any:	
Blood transfusion, if any:	
Adverse reaction of medicines and transfusion:	

Condition/outcome at discharge: Cured/improved/referred out/discharge on request/absconded/left against medical advice/died	
Further treatment and advice:	
Follow up:	

Discharge summary prepared by:

Doctor's name:

Consultant's name:

Signature:

Signature:

NMC no:

NMC no:

Schedule-7

(Related to Sub rule (1), (2) of Rule 9 and Rule (10))

Hierarchical structure of health institution and health service to be provided

Hierarchy of health institution	Minimum service to be provided
Basic health service center	(a) Basic health service as per Schedule-1 (b) Other services designated by the ministry from time to time
Basic hospital (5 to 15 beds)	(a) Health service as per Schedule-1 (b) Following medical service (outpatient and internal): (1) General medicine: (2) General surgery: (3) Gynecology and delivery (4) Pediatrics (5) Dentistry. (c) Following emergency service:

	<ul style="list-style-type: none"> (1) Emergency service (2) Basic emergency surgery (including BEONC) (3) Emergency laboratory and blood transfusion service (4) Diagnostic service (d) Laboratory service: (e) Radio imaging service (f) Pharmacy service (g) Medico legal service (h) Other services designated by ministry from time to time.
General hospital (from 25 to 5 beds)	<ul style="list-style-type: none"> (a) Basic health service as per Schedule-1 (b) Following medical service (outpatient and internal) <ul style="list-style-type: none"> (1) General physician service (2) General surgery service (3) Gynecology and delivery service (4) Pediatrics service (5) Dentistry service (6) Orthopedic service (7) General eye treatment service (8) Physiotherapy service (9) Anesthesiology service (c) Following diagnostic and other services: <ul style="list-style-type: none"> (1) Radio imaging service (2) Laboratory service (besides histo

	<p>pathology)</p> <p>(d) Following service available all round 24 hours:</p> <ol style="list-style-type: none"> (1) Emergency service including surgery (2) Emergency laboratory (3) Radio imaging service (4) Blood transfusion service (5) Pharmacy service. <p>(e) Following intensive care service:</p> <ol style="list-style-type: none"> (1) High dependency unit (HDU) (2) Intensive care unit (ICU) (3) SNCU service <p>(f) Pharmacy service</p> <p>(g) Other services as following:</p> <ol style="list-style-type: none"> (1) Social service unit/one door crisis management center (2) Medico legal and forensic service (3) Hemodialysis service <p>(h) Other services designated by the ministry from time to time</p>
<p>General hospital (100 to 300 beds)</p>	<p>(a) Basic health service as per Schedule-1</p> <p>(b) Following treatment service</p> <ol style="list-style-type: none"> (1) General physician service (2) General surgery service (3) Gynecology and delivery service (4) Pediatrics service

	<p>(5) Dentistry service</p> <p>(6) Orthopedic service</p> <p>(7) Ear Nose Throat service</p> <p>(8) Mental disease service</p> <p>(9) Skin and sexually transmitted disease</p> <p>(10) Ophthalmology service</p> <p>(11) Physiotherapy service</p> <p>(12) Anesthesiology service</p> <p>(c) Following diagnostic and other services:</p> <p>(1) Radio imaging service</p> <p>(2) Laboratory</p> <p>(d) Service open all round 24 hours</p> <p>(1) Emergency service along with surgery</p> <p>(2) Emergency laboratory</p> <p>(3) Radio imaging service</p> <p>(4) Blood transfusion service</p> <p>(5) Pharmacy service.</p> <p>(e) The following intensive treatment:</p> <p>(1) High dependency unit (HDU)</p> <p>(2) Intensive treatment unit (ICU, NICU, PICU).</p> <p>(f) Pharmacy service</p> <p>(g) Other service as following:</p> <p>(1) Social service unit, one door crisis management, dietetics and nutrition rehabilitation center</p> <p>(2) Hemodialysis service</p>
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	<p>(3) Medico-legal and forensic service.</p> <p>(h) Other service as designated by the ministry from time to time.</p>
<p>Specialist hospital (at least 100 beds) (if required, additional beds should be added in the multiple of 100)</p>	<p>(a) Basic health service as per Schedule-1</p> <p>(b) Special service as per Schedule-3</p> <p>(c) Following treatment available 24 hours round the clock:</p> <p>(1) Emergency service with general surgery</p> <p>(2) Emergency laboratory</p> <p>(3) Blood transfusion service</p> <p>(4) Emergency radio imaging service</p> <p>(d) Following diagnostic service:</p> <p>(1) Laboratory service</p> <p>(2) Radio imaging service</p> <p>(e) Pharmacy service</p> <p>(f) Following intensive care service:</p> <p>(1) High dependency unit (HDU)</p> <p>(2) Intensive care unit (ICU, SICU, MICU, CCU)</p> <p>(3) Neonatal intensive care unit (NICU, PICU)</p> <p>(4) Cardiac catheterization service.</p> <p>(g) Other following service:</p> <p>(1) Social service unit, one door crisis management center</p> <p>(2) Medico-legal and forensic service</p>

	<p>(3) Dietetics and nutrition service</p> <p>(4) Hemodialysis service.</p> <p>(h) Other service designated by the ministry from time to time.</p> <p>Note: Special hospital with more than 300 beds need to at least provide one specialized service.</p>
Specialized hospital (at least 50 beds)	<p>(a) Specialist treatment of specific disease and organ referred by basic hospital, general hospital, specialist hospital</p> <p>(b) One or more service mentioned in Schedule-4</p> <p>(c) Other service designated by the ministry from time to time.</p>
Teaching hospital under health science academy and other teaching hospitals (at least 300 beds) (if needed, additional beds should be multiplied by 100)	<p>(a) Basic health service as per Schedule-1</p> <p>(b) Specialist service as per Schedule-3</p> <p>(c) At least one service mentioned in Schedule-4</p> <p>(d) Other service designated by the ministry from time to time.</p>
Child hospital	Concerned specialist service and specialized service
Basic Ayurveda service center	<p>(a) Basic Ayurveda health service</p> <p>(b) General treatment service</p>
Ayurveda health center (general Ayurveda hospital) (25 to 50 beds)	<p>(a) Basic Ayurveda health service</p> <p>(b) Treatment service (outpatient)</p> <p>(c) Diagnostic treatment</p> <p>(d) Physiotherapy</p> <p>(e) Yoga service</p>

	<ul style="list-style-type: none"> (f) Healthy lifestyle counseling and management (g) <i>Nasal treatment</i> (h) Anal treatment (i) <i>Pancha karma</i> (j) <i>Kaya (body) treatment e</i> (k) Physiotherapy (l) Rehabilitation (m) <i>Kshara-sutra</i> (n) Gynecology and pediatric services (o) Pharmacy service (p) Diagnostic service (q) Acupuncture.
<p>Specialist Ayurveda hospital (at least 100 beds)</p> <p>(if needed, additional beds should be multiplied by 50)</p>	<ul style="list-style-type: none"> (a) <i>Kaya treatment</i> (b) Surgery treatment (c) <i>Salakya tretament</i> (d) Gynecology and delivery service (e) Healthy lifestyle counseling and management (f) Yoga service (g) Paediatric service (h) Chemical treatment (i) <i>Pancha karma</i> service (j) <i>Kshara- sutra</i> service (k) Physiotherapy (l) Rehabilitation (m) Diagnostic service (n) Pharmacy (o) Acupuncture.
<p>Homeopathy hospital (50 beds)</p>	<ul style="list-style-type: none"> (a) Treatment service (outpatient and internal)

	<p>(b) Pharmacy service</p> <p>(c) Diagnostic service.</p>
Other health institution	
Hierarchy of health institution	Minimum service provided
1. Laboratory	
"E" group laboratory	<p>"E" group laboratory provide following services:</p> <p>(a) Hematology: TC, DC, hemoglobin, ESR, blood grouping for non-transfusion purpose, BT, CT</p> <p>(b) Biochemistry: Sugar, Urea, creatinine, Bilirubin, T & D, S. Uric acid, total protein, serum, albumin.</p> <p>(c) Microbiology: Sputum AFB stain (Z-N stain)</p> <p>(d) Test by RDT: with simple interpretation.</p> <p>(e) Miscellaneous: Routine urine analysis, routine stool analysis, urine pregnancy test, stool for reducing substances.</p>
"D" group laboratory	<p>Following services in addition to services provided by "E" group laboratory:</p> <p>(a) Hematology: RBC count, PT, APTT, platelet count, hematocrit, red cell indices</p> <p>(b) Biochemistry: SGOT, SGPT, ALP, lipid profile, creatinine, sodium, potassium</p> <p>(c) Microbiology: Gram stain and KOH mount for fungi</p> <p>(d) Serological tests: RPR, widal test, ASO</p>

	<p>Titre, RA factor, CRP</p> <p>(e) Tests by RDT: All</p> <p>(f) Miscellaneous: Stool for occult blood, urine ketone bodies, urobilinogen, bile salt, bile pigment, Bence Jones protein.</p>
<p>"C" group laboratory</p>	<p>Following services in addition to services provided by "D" group laboratory:</p> <p>(a) Hematology: Absolute counts, blood grouping for transfusion purpose, cross matching and reticulocyte count, peripheral blood smear examination</p> <p>(b) Biochemistry: Cardiac enzymes, other enzymes, Thyroid function test (T3, T4, TSH)</p> <p>(c) Microbiology: All routine bacteriology culture, ELISA for infectious disease, e.g. HIV, HBsAg, HCV, etc.</p> <p>(d) Histopathology/Cytopathology, bone marrow aspiration and biopsy service</p> <p>(e) Miscellaneous: CSF and bloody fluid analysis, semen analysis.</p>
<p>"B" group laboratory</p>	<p>Following services in addition to services provided by "C" group laboratory:</p> <p>(a) Special coagulation profile</p> <p>(b) Hormone analysis</p> <p>(c) Immuno-Histo Chemistry (IHC)</p> <p>(d) Tumor markers</p> <p>(e) Advance C/S (anaerobic culture, fungus culture)</p>

	<p>(f) Hemolytic profile tests performed by ELISA/CLIA technique as per requirement</p> <p>(g) At least three types of services among histo cytology, hematology and bio chemistry and bio chemistry, if laboratory is based on general hospital then microbiology of laboratory.</p>
"A" group laboratory	<p>Following services in addition to services provided by "B" group laboratory:</p> <p>(a) Molecular test</p> <p>(b) Super-specialized tests.</p>
2. Health clinic	Health service under basic health service
3. Specialist clinic	Service amongst specialist service under Schedule-3
4. Polyclinic	Health service along with basic health service, general surgery, laboratory service, USG and radio diagnosis service
5. Dental clinic	Tooth extraction, RCT, filling, denture, scaling, emergency oral trauma management including Provisional dental service
6. Geriatric consultation center	Health promotional activities
7. Geriatric care center (up to at least 25 beds) (if needed, additional beds should be multiplied by 25)	<p>Following services available to senior citizens:</p> <p>(a) General treatment service</p> <p>(b) Physiotherapy</p> <p>(c) Fall and its prevention</p> <p>(d) Nursing care of bed bound patient</p> <p>(e) Dementia care etc.</p> <p>(f) Basic lab service</p> <p>(g) Screening referral service</p>

	(h) Health promotional activities
8. Eye treatment center	Services provided by eye specialist along with Provisional eye treatment: <ul style="list-style-type: none"> a. Visual activity b. Refraction c. Minor treatment
9. Physiotherapy center	<ul style="list-style-type: none"> a. Rehabilitation b. Pain management c. Post-operative care
10. Dialysis center	Dialysis service
11. Rehabilitation center (psychosocial) (at least 10 beds) (if needed, additional beds should be multiplied by 10)	<ul style="list-style-type: none"> a. Health examination and general treatment service for patients in rehabilitation center b. Yoga and meditation c. Consultation service and health education d. OST e. Harm reduction f. Health security.
12. Rehabilitation center (physical) (at least 25 beds) (if needed, additional beds should be multiplied by 10)	<ul style="list-style-type: none"> a. Corrective surgery b. 24 hours emergency service c. Laboratory service d. Radio imaging service e. Physiotherapy f. Prosthesis g. Screening and referral service h. Self-care service
13. Ayurveda clinic	<ul style="list-style-type: none"> a. Basic Ayurveda service b. Consultation service c. Treatment service

14. Natural treatment center	<ul style="list-style-type: none"> a. Provisional natural treatment services b. Consultation center
15. Acupuncture, acupressure center	<ul style="list-style-type: none"> a. Outpatient acupuncture service b. Consultation service
16. Amchi clinic	<ul style="list-style-type: none"> a. General treatment center b. Consultation service
17. Traditional service clinic	<ul style="list-style-type: none"> a. Treatment service with the use of local herbs b. Traditional service
18. Homeopathy clinic	<ul style="list-style-type: none"> a. Consultation service b. Provisional homeopathy treatment service
19. Unani treatment center	<ul style="list-style-type: none"> a. Provisional unani treatment service b. Consultation service
20. Yoga, meditation and physical exercise center	<ul style="list-style-type: none"> a. Health promotion yoga practice b. Meditation c. Pranayam d. Other exercises.
21. Blood transfusion center	<ul style="list-style-type: none"> a. Blood collection b. Separation of component c. Safe storage of blood d. Safe distribution of blood e. Safe disposal of expired and unused blood.
22. Radio imaging center	
a. Rank	Pet scan, CT scan, MRI, Ultra sound service available
b. Rank	At least one service amongst X-ray, ultrasound, CT scan Emergency treatment service should be managed during the service period and

	standard for emergency treatment should be stipulated (basic hospital on par with MSS)
23. Hospice center (at least 25 beds)	<ul style="list-style-type: none"> a. Nursing center b. Emergency service c. Pain management d. Symptomatic management e. Palliative care f. Holistic counseling service g. Consultative service h. Spiritual service
24. Test tube baby (IVF) center	<ul style="list-style-type: none"> a. Gynecology, outpatient service b. Laboratory: Along with sperm test c. USG service d. Operation theatre e. Embryology lab f. Agreement with at least any one hospital equivalent to Provisional specialist hospital for emergency service.

Schedule-8

(Related to Sub rule (5) of Rule 11 and Rule 13)

Health institution operation standard

1. Related to management
2. Related to building and infrastructure
3. Related to environment
4. Related to outpatient department, internal department, emergency department, surgery department and intensive care unit
5. Related to human resource management
6. Related to special and specialized service
7. Related to laboratory
8. Related to radio imaging service
9. Related to infection prevention and control
10. Related to public service (related to nutrition, vaccine, safe motherhood, child health, family planning)
11. Related to health centered and other solid waste management
12. Related to drinking water, sanitation, power supply, garden, vehicle parking and maintenance
13. Related to oxygen, tools
14. Related to pharmacy service
15. Related to blood transfusion
16. Related to crisis and pandemic management
17. Related to ambulance service
18. Related to dead body inspection and management
19. Related to referral
20. Related to canteen and nutrition service
21. Related to central service department
22. Related to laundry
23. Related to social service unit and health insurance management
24. Related to complaint management

25. Related to monitoring and evaluation

26. Related to security management.

Schedule-9

(Related to Sub rule (2) of Rule 12)

Entity awarding license to health institutions

(1) Health institution that needs to acquire and renew license from ministry or entity designated by the ministry:

- (a) General hospital above 200 beds
- (b) Specialist hospital
- (c) Specialized hospital
- (d) Child hospital
- (e) Ayurveda hospital above 50 beds/specialized Ayurveda hospital
- (f) Teaching hospital operated by private, non-governmental, cooperatives or not-for-profit community teaching college
- (g) Homeopathy college
- (h) Geriatric care center
- (i) "A class" radio imaging center
- (j) Blood transfusion center
- (k) "A" and "B" grade laboratory
- (l) Test tube baby center (IVF)
- (m) Dialysis center (above 25 beds)
- (n) Rehabilitation center (above 25 beds)
- (o) Health institution not enlisted in any other grade of list and with no clear status.

(2) Health institutions that needs to acquire and renew license from provincial government or entity designated by provincial government:

- (a) General and specialist hospital from 25 to 200 beds.
- (b) Ayurveda hospital from 25 to 50 beds.
- (c) Dental clinic, specialist hospital, polyclinic
- (d) Eye treatment center

- (e) "C" grade laboratory
- (f) "B" grade radio imaging center
- (g) Dialysis center (up to 25 beds)
- (h) Rehabilitation center (up to 25 beds)
- (i) Hospice center

(3) Health institutions that acquire and renew license from local level or entity of corresponding level designated by local level:

- (a) Health clinic, Ayurveda clinic, amchi clinic, homeopathy clinic and other clinics of similar kind
- (b) Physiotherapy center, rehabilitation center (psychosocial), naturopathy treatment center, acupuncture, acupressure center, unani treatment center, yoga meditation and physical exercise center, traditional service clinic and other clinics and service centers of similar kind
- (c) Geriatric service center
- (d) Hospital up to 15 beds.

Foreign:

7. Source of immovable property:
8. Number of beds:
9. Details of services to be provided by health institution based on classification, clarify details of services to be provided.

S. N.	Treatment centric service	Diagnostic service	Reactionary service	Other service

10. Details and source of main equipment used in institution

S. N.	Name of equipment s	Financial source	Remarks

11. Details of health human resource serving institution:

S. N.	Name of staff	Designation	Education qualification	Registration number of concerned council	Working in government service yes/no	Full time/part time

12. Documents to be included along in the application

- (1) Photo copy of company registration/institution registration
- (2) Photo copy of institution/company statute/article of association, regulation
- (3) Photo copy of permanent account number certification
- (4) Recommendation from concerned authority of the local level and province stating that the proposed location requires a hospital
- (5) Photocopy of citizenship certificate of founding members
- (6) Photocopy of approval letter on Initial Environmental Evaluation (IEE) or Environmental Impact Assessment (EIA)
- (7) Proposal along with detailed survey of health institution
- (8) Details of service charge levied by health institution
- (9) Approved design of the building
- (10) Tax paid certificate (only where applicable).

Schedule-11
(Related to Sub rule (5) of Rule 12)
Format for license

.....

.....

Operation license

License

M/S

.....

To operate health institution, processing application for license received on date..... as the decision on to allow the institution to operate was reached, keeping within the following stipulation of Public Health Service Act, 2075, Public Health Service Regulation, 2077, to operate (hospital/ health institution) in metropolis/sub-metropolis/municipality/rural municipality ward no..... with bed capacity, this license is awarded as per Sub rule (5) of Rule 12 of Public Health Service Regulation, 2077.

1. Health institution and services to be provided by such institution:
2. Validity of license:

License issuing authority—

Signature:

Name:

Designation:

Date:

(To be written on the back page of the license)

Conditions to be followed by health institution awarded with the license

- (a) Need to upgrade quality upon conducting self-evaluation by respecting the designated minimum standard while operating the health institution.
- (b) Need to implement government program approved by the Government of Nepal.
- (c) Need to implement policy and program released by the provincial government if operated under provincial government, and if operated in local level from concerned provincial government and local level.
- (d) Need to abide by other conditions stipulated by the ministry from time to time.

License renewal

Renewing authority

Name and address of health institution	Renewal date	Expiry date	Name and designation of renewing officer	Signature	Office seal

Schedule-12
(Related to Sub rule (2) of Rule 13)

Format of application for renewal

M/S office
.....

Re: Related to license renewal.

As validity of the license issued by this office/entity on date..... will expire on date, to renew the license, I have filed this application as per Sub rule (2) of Rule 13 of Public Health Service Regulation, 2077.

Details of documents enclosed:

- (1) License of the institute and tax paid certificate of the last fiscal year,
- (2) Proof of self-evaluation report presented regularly as per Rule 15,
- (3) Along with the validation on maintenance of standard as regards to institutional operation on health institution and operation of service
- (4) Proof of cash deposited in emergency health treatment fund as per Rule 19.

Seal of the health institution,

Individual filing the application on behalf of the health institution –

Signature:

Name, surname:

Designation:

Date: