REVISED ESI POLICY ON AYUSH - 2023

AYUSH DIVISION
ESIC Headquarters, New Delhi

REVISED ESI POLICY ON AYUSH - 2023

1. Introduction: The Employees' State Insurance (ESI) healthcare system recognizes the significant role of the AYUSH systems of medicine - Ayurveda, Yoga, Unani, Siddha and Homoeopathy—in delivering holistic, preventive, promotive, curative, and palliative healthcare. The integration of AYUSH with modern (allopathic) medicine can play a pivotal role in addressing the rising burden of non-communicable diseases (NCDs), lifestyle disorders, and in improving overall wellness of Insured Persons (IPs) and beneficiaries.

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2. Objectives:

- To strengthen preventive and promotive healthcare within the ESI framework to enhance physical and mental health of Insured Persons (IPs) and beneficiaries.
- To utilize AYUSH systems for diet & lifestyle modification in healthcare management.
- To provide holistic, integrated, multidisciplinary care for chronic and lifestyle related illnesses.
- To ensure effective collaboration between AYUSH and allopathic systems.
- To enhance awareness of AYUSH services among ESI stakeholders through outreach programmes.

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3. Preventive & Promotive Healthcare:

3.1 **Service Provision:**

- All AYUSH units within ESI facilities shall deliver preventive and promotive health services to IPs and beneficiaries.

3.2 **Lifestyle & Dietary Interventions:**

- AYUSH doctors will offer personalized guidance on diet and lifestyle modifications, which are central to managing NCDs and lifestyle diseases.

3.3 **Cross-Departmental Integration:**

- Departments of allopathic medicine will be sensitized to collaborate with in-house AYUSH units for:
    - Yoga sessions
    - Lifestyle counselling
    - Dietary consultations
    - Conditions suited for management by AYUSH systems

3.4 **Awareness & Outreach:**

- Information, Education, and Communication (IEC) materials on AYUSH services shall be displayed prominently in healthcare facilities to ensure visibility and awareness.
- Ayush units should observe their respective national & international days as per guidelines issued by Ministry of Ayush from time to time.
- Ayush doctors should participate in health talks and health awareness camps.

3.5 **Maternal and Child Health:**

- AYUSH practitioners will support maternal and child health through preventive care and nutritional advice.

3.6 **Yoga Integration:**

- Yoga therapists/instructors may be engaged for conducting regular outreach and awareness sessions aimed at preventing lifestyle disorders and promoting physical and mental well-being among healthcare workers, IPs, and beneficiaries.

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4. Curative /Palliative / Rehabilitative Care:

- The AYUSH systems of medicine can be used in curative, palliative & rehabilitative therapy in various conditions which are amenable to management by these systems.
- Presentations of case reports & success stories should be done on regular basis.

5. Implementation Strategies:

- Sensitization and training programs for allopathic and AYUSH practitioners to ensure effective collaboration.
- Institutional mechanisms for joint case management.
- Periodic monitoring and review of AYUSH service utilization and outcomes.
- Inclusion of AYUSH professionals in policy discussions and healthcare planning at ESI facilities.

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7. Conclusion:

The integration of AYUSH with modern medicine within the ESI healthcare ecosystem will foster a comprehensive, patient-centric, and sustainable model of care. This policy aims to optimize health outcomes through a balanced approach that leverages the strengths of both systems, ensuring holistic healthcare for all ESI beneficiaries.

BRIEF OVERVIEW OF REVISED ESI POLICY ON AYUSH - 2023

The ESI Corporation is providing medical care services both through Modern medicine and AYUSH systems of medicine. In order to provide high quality Ayush health services to ESI beneficiaries through ESI institutions all over India, ESIC has periodically undertaken a number of initiatives to improve the delivery of services.

The latest initiative of ESIC in this regard was the formulation of ESI policy on Ayush – 2023 which was approved in the 193rd meeting of ESI Corporation on 10.02.2024. The policy is regarding expansion of Ayush services in ESI hospitals, dispensaries, and DCBOs with the establishment of Ayush units (OPD services), Ayush Hospitals, Yoga therapy units, Panchakarma units and Kshara-Sutra units. As there were some difficulties in implementation of this policy, this revised ESI Policy on Ayush-2023 has been formulated for a speedy, seamless and meaningful implementation of the policy in the best interests of ESI Beneficiaries. This new policy would go a long way in enhancing the reach and quality of the AYUSH services being provided by the ESI Corporation.

Firstly, the policy provides Norms for establishment of AYUSH OPD services in ESIS/ESIC. As per this Ayush policy, there is provision was for running Ayush OPD services through retired doctors & staff till they are replaced by regular staff in due course of time. This would manifestly increase the level of commitment of the staff and the quality of care.

As per this policy, there is provision of Indoor Ayurveda treatment by housing 50 bed AYUSH Hospitals within 500 bed Allopathic Hospitals. Here in addition to OPD services, patients with ailments required hospitalization will get quality treatment under five specialties that is Kaya Chikitsa (General Medicine), Panchakarma (Biopurificatory medicine), Shalya (Surgery), Shalakya (Ophthalmology and ENT) and Prasuti and Stri Roga (Obstetrics and Gynaecology) under the supervision of Ayurveda physicians with required Post Graduate qualifications. This would immensely enhance the quality of care being provided to the ESI Beneficiaries.

Panchakarma is essentially a regimen intended to eliminate the toxic elements of the body by enhancing its immunity and decreasing the chances of recurrence of diseases. Kshara-Sutra therapy is time tested, sure, safe and cost effective method in the management for certain Anorectal disorders.

Norms for establishing units for both Panchkarma and Kshara-Sutra units for these therapies are laid down in this Ayush policy to enable strengthening of these services for ESI Beneficiaries.

Earlier, Yoga units in ESI institutions were being run by Yoga instructors. As per the new policy, in large hospitals Yoga units will be run by Yoga therapists having higher levels of qualifications and experience. This would enable our IPs and dependents to get the benefits of quality Yoga Therapy services in ESI institutions.

The Revised ESI Policy on Ayush-2023 has five chapters:

Chapter - 1: Norms for establishment of Ayush Unit

Chapter - 2: Norms for establishment of 50 bedded ESIC AYUSH Hospitals

Chapter - 3: Norms for Establishment of Yoga Unit

Chapter - 4: Norms for Establishment of Panchakarma Unit

Chapter - 5: Establishment of Kshara-Sutra unit

Chapter - 1: Norms for establishment of Ayush Unit

(i) Criteria: Establishment of Ayush unit in ESIC/ESIS Hospitals to be considered based on the following:

a) Ayush Units may be established on co – location basis in those ESIC/ESIS Hospitals and Dispensaries and Dispensary Cum Branch Offices (DCBO) where the daily average Allopathic OPD registration is more than 150 patients during the preceding 12 months;
b) The Ayush Unit may be started in any of the discipline **preferably Ayurveda** at first instance, however, the nature of discipline may vary from region to region (as per the local preference).
c) The proposal for opening of first Ayush unit and subsequent one in ESIC/ESIS Hospitals and Dispensaries and Dispensary Cum Branch Offices (DCBO) on co-location basis will require the **approval of ESIC Headquarters.**
d) The proposal for establishing Ayush unit in ESIC/ESIS Hospitals and Dispensaries and Dispensary Cum Branch Offices (DCBO) should be submitted by Deans/Medical Superintendent/DMD/DMN/DIMS/RD as per the **Annexure-1.**

(ii) HR requirements*:* For a new/existing Ayush unit, the following regular posts will have to be created:

a) Medical Officer of concerned Ayush system - one post
b) Pharmacist of concerned Ayush system - one post

(iii) Posting of staff in a new/existing Ayush unit: The following may be considered for posting of staff in a new /existing Ayush unit:

a) Posting of a regular ESI employee of the concerned Cadre; can be done after meeting the conditions laid down in Chapter 1, Clause (vii) of this policy pertaining to justification for continuation of a newly opened Ayush unit.
b) Inclusion of these newly created posts in the forthcoming recruitment calendars is to be done after meeting the conditions laid down in Chapter 1, Clause (vii) of this policy pertaining to justification for continuation of a newly opened Ayush unit.
c) In case (a) above is not feasible, till such time a regular incumbent is made available, hiring of Medical Officer of concerned Ayush System and/or Pharmacist of concerned Ayush System on contract basis from amongst retired officials of Central/State Governments including their PSUs.

d) The part time contractual Ayush staff in existing Ayush units may be continued till the recruitment of Regular Ayush staff or hiring of retired Ayush staff for these units in order to provide uninterrupted services to the IPs and their dependent family members. This arrangement would be on a purely interim basis.

(iv) Establishment of Second Ayush unit:

a) Establishment of Second AYUSH unit in another system of Ayush than the existing one is eligible where the daily average Allopathic OPD registration is more than 250 patients during the preceding 12 months;

b) The proposal for opening of second Ayush unit in ESIC/ESIS Hospitals and Dispensaries and Dispensary Cum Branch Offices (DCBO) will require the **approval of ESIC Headquarters**.

c) The proposal for establishing second Ayush unit in ESIC/ESIS Hospitals and Dispensaries and Dispensary Cum Branch Offices (DCBO) should be submitted by Deans/Medical Superintendent/DMD/DMN/DIMS/RD as per the **Annexure-2**.

(v) Establishment of Third/Fourth Ayush unit:

a) Establishment of of Third / Fourth AYUSH units in additional systems of Ayush other than the existing ones is eligible where the daily average Allopathic OPD registration is more than 750/1250 patients respectively, during the preceding 12 months. The establishment of Third/Fourth Ayush Units would be subject to local preference, after meeting above criteria.

b) The proposal for opening of Third/Fourth Ayush units in ESIC/ESIS Hospitals and Dispensaries and Dispensary Cum Branch Offices (DCBO) will require the **approval of ESIC Headquarters.**

c) The proposal for establishing Third/Fourth Ayush units in ESIC/ESIS Hospitals and Dispensaries and Dispensary Cum Branch Offices (DCBO) should be submitted by Deans/Medical Superintendent/DMD/DMN/DIMS/RD as per the **Annexure-2**.

(vi) Additional staff for Ayush unit (OPD level) in case of increased workload:

a) If the daily average OPD attendance in a particular Ayush unit crosses 80 patients over the preceding 12 months period, one additional post of concerned Ayush Medical Officer and Ayush Pharmacist will be justified.

b) Once the justification as per the above norms is achieved, a proposal for creation of the additional post will be submitted to the Headquarters for consideration as per **Annexure-3.**

(vii) Justification for continuation of a newly opened Ayush unit:

Every new Ayush unit would be opened on ad-hoc basis **initially** for a period of 15 months. Its further continuation may be considered on the basis of its performance appraisal at the end of 12 months as under:

During the preceding 12 months:

(a) If the average attendance in the newly opened Ayush unit is more than 40 patients per day, it may be considered to post regular staff in the unit.

(b) If the daily average attendance is between 20 and 40 patients, the in-charge of the Unit and his immediate superior authority to be sensitized for improving the functioning of the Unit.

(c) If the daily average attendance is less than 20 patients, the Unit to be relocated at a place fulfilling the norms of establishing Ayush Units.

Chapter - 2: Norms for establishment of 50 bedded ESIC AYUSH Hospitals

1. Criteria: The following norms may be considered for adoption for opening of 50 bedded ESIC AYUSH Hospital:

a) New Ayush Hospitals to be necessarily co-located with an existing ESI Allopathic hospital; and

b) Ayush Hospital to be set up in ESI Allopathic hospital having 500 beds or more out of which 50 beds may be earmarked for Ayush Hospital.

c) The existing norms of ESI for setting-up of a 500 bedded hospital (allopathic) is a minimum 4,00,000 (four lakh) IP population.

d) Justification of co-location: The Corporation will save on the overhead expenditure on account of establishment, supporting staff, building and other infrastructures by adopting the policy of co-locating 50 bedded AYUSH hospitals with 500 bedded ESI hospitals.

e) The proposal for opening of 50 bedded Ayush Hospital in ESIC/ESIS Hospitals will require the **approval of ESIC Headquarters.**

f) The proposal for establishing 50 bedded Ayush Hospital in ESIC/ESIS Hospitals should be submitted by Deans/Medical Superintendent/DIMS as per the **Annexure-4.**

2. Administration & management of 50 bedded ESIC Ayush Hospital.

a) The overall management and administration of such composite hospitals would remain under the charge of the Medical Superintendent of the 500 bedded or above ESI Hospital. However, clinical functions relating to Ayush will be under the charge of senior most Ayurvedic doctor.

b) The AYUSH ESI Hospital would utilize Engineering and Allied services, Hospital Administration, M.R.D, Laboratory, Logistics, Radio Imaging Services, sterilization & disinfection, Nursing Services, Operation Theatres etc. of the Allopathic ESI Hospital.

3. In-patient department of Ayush:

Treatment is proposed to be made available in the 50 bedded ESI AYUSH hospitals in the following five Ayurveda specializations:

Sl.No.	Department
1	Kayachikitsa (General Medicine)
2	Panchakarma (Bio-purificatory medicine)
3	Shalya (Surgery)
4	Shalakya (ENT and Ophthalmology)
5	Prasuti and Stri Roga (Obstetrics and Gynaecology)

~~4.~~ HR requirements for 50 bedded ESIC Ayush Hospitals

The details of Staffing Norms and bed allocation is as follows:

S. N	Name of Department	Beds	GDMOs with concerned PG Qualification	GDMOs/ Residents	Pharmacist (Ayurvedic)
I	Medical Unit: 1.Kayachikitsa (General Medicine) 2. Panchakarma (Bio-purificatory medicine)	30 (Medical Unit)	2	Upto 3	3 for all departments
II	Surgical Unit: 1. Shalya (Surgery)	10 (Surgical Unit)	1	2	
	2. Shalakya (ENT & Ophthalmology)	5 (Surgical Unit)	1	1	
	3. Prasuti and Stri Roga (Obstetrics &Gynaecology)	5 (Surgical Unit)	1*	1*	

*As per need assessment.

a) The allocation of beds will be directly related to number of OPD registration in the hospital;
b) Unoccupied beds will be allocated by MS to those Allopathic specialities that have more in-patient load;
c) Senior most Ayurvedic Medical Officer to be designated as the in-charge of the concerned department.
d) Allocation of beds may be done as per the functional requirements/system of medicine if more than one, then beds distribution may be done as per the need but limited to 50;
e) Meanwhile, interim arrangement can be made by hiring contractual Medical Officer having concerned PG qualification from recognized university as per NCISM Act, from outsource agency through GeM, till the appointment of Regular Medical officers with PG Qualification as per the RRs/Terms & Conditions provided by the All India Institute of Ayurveda/Ministry of Ayush.

f) Panchakarma paramedical staff: As per norms given in Chapter- 4, point (iii) b, c & d

5. Referral policy in respect of admission to Ayurveda Hospital*:*

The OPD units (including ESI Ayurveda dispensaries) will perform the function of gate-keeping for admission to in-patient Ayurveda hospitals. In other words, admissions to the hospitals will be based on referrals made by Medical Officers in OPD units as well as other Ayush units of ESIC.

6. Clinical protocol for treatment*:*

ESIC should proactively develop and codify clinical protocols for in-patient treatment in Ayurveda hospitals in consultation with Ministry of AYUSH.

7. Continuous review of bed allocation:

I. As Hospital beds are a crucial resource of Medical Systems, allocation of beds for Ayurveda to be continuously reviewed jointly by the Medical Superintendent of ESI Hospital and In-charge of the co-located Ayush Hospital.

II. In case the allocated beds are not occupied in Ayush Unit, the MS of the Hospital may allot such unoccupied beds to the other departments wherever required.

Chapter – 3: Norms for Establishment of Yoga Unit

(i) **Establishment of Yoga therapy units** in ESIC/ESIS Hospitals to be considered based on the following:

(a) In hospitals having 100 or more beds; and

(b) Having daily average Allopathic OPD registration of more than 250 patients during the preceding 12 months.

(c) Notwithstanding the above norms, establishing Yoga therapy units in all ESIC hospitals having 500 beds or more may be considered.

(d) The proposal for opening of yoga therapy unit in ESIC/ESIS Hospitals will require the **approval of ESIC Headquarters.**

(e) The proposal for establishing yoga therapy unit in ESIC/ESIS Hospitals should be submitted by Deans/Medical Superintendent/DIMS as per the **Annexure-5**.

f) In Hospitals not fulfilling the criteria for establishment of yoga therapy unit, Yoga Services may be established/continued by hiring Yoga Instructors.

ii) **Establishment/Continuation of of Yoga Instruction Units** in ESIC/ESIS Hospitals to be considered In Hospitals **not fulfilling the criteria** for establishment of yoga therapy unit. In these hospitals Yoga Services may be established/continued by hiring **Yoga Instructors**.

Yoga Instruction units to be established/continued in such **hospitals not meeting criteria of establishing yoga therapy units** as follows**:**

a) In existing yoga instruction units, where daily average attendance is 25 or more to hire full time **Yoga instructor**

b) In existing yoga instruction units, where daily average attendance is less than 25 to hire part time **Yoga instructor**. Such a Part Time Yoga Instruction unit would be functional for 3 hours on each working day.

c) New Yoga Instruction units to be established by hiring **part time Yoga instructor initially.** Unit may be upgraded & **full time Yoga instructor to be hired instead of part time** once its daily average attendance crosses 25 for period of preceding 12 months.

d) The proposal for opening of new yoga instruction unit in ESIC/ESIS Hospitals to be submitted by Deans/Medical Superintendent/DIMS to **ESIC Headquarters for Approval,** as per the **Annexure-5.**

(iii) **Justification for continuation of newly opened Yoga therapy unit:**

All Yoga therapy units may be opened initially for a **period of one year**. Subsequently, justification for their continuation may be examined subject to fulfilment of following norms:

During the preceding 12 months–

(a) The average attendance should be more than 25 patients per day for the Yoga therapy units to be continued.

(b) If the daily average attendance is between 10 to 25 patients, the in-charge of the Unit and his immediate superior authority to be sensitized for improving the functioning of the Unit.

(c) If the daily average attendance is less than 10 patients, continuation of such Unit is not justified on the basis of norms.

(iv) HR requirements for yoga units:

(a) After obtaining approval of the Headquarters for establishing a new Yoga unit, one qualified Yoga therapist/Yoga Instructor may be hired on contract basis from outsourcing agency through GeM following the usual GeM procedure, for a period not exceeding one year.

(b) Thereafter, if the Unit continues to be justified on the basis of the norms, the process of contractual hiring of Yoga therapist/ Yoga Instructor through GeM may be repeated.

(c) The qualification/remuneration for the engagement of Yoga Therapist /Yoga Instructor would be as per RRs/Terms & Conditions of Morarji Desai National Institute of Yoga, obtained by ESIC HQ office from time to time.

(d) Support staff, if any, required by Yoga Therapy Unit may be provided by the Hospital Administration.

(e) In locations eligible for establishment of Yoga therapy units, the existing contractual part time/ full time Yoga Instructors services may be continued till the hiring of Yoga therapists. This would provide uninterrupted Yoga services to our beneficiaries in those locations.

Chapter – 4: Norms for Establishment of Panchakarma Unit

(i) Criteria: Establishment of Panchakarma units in ESIC/ESIS Hospitals to be considered based on the following:

(a) In hospitals having 100 or more beds; and

(b) Having daily average Ayurveda OPD registration of more than 40 patients during the preceding 12 months.

(c) Notwithstanding the above norms, establishing Panchakarma units in all ESIC hospitals having 500 beds or more may be considered.

(d) The proposal for opening of Panchakarma unit in ESIC/ESIS Hospitals will require the **approval of ESIC Headquarters**.

(e) The proposal for establishing Panchakarma unit in ESIC/ESIS Hospitals should be submitted by Deans/Medical Superintendent/DIMS as per the **Annexure-6.**

(ii) Justification for continuation of newly opened Panchakarma unit:

All Panchakarma units may be opened initially for a period of one year. Subsequently, justification for their continuation may be examined subject to fulfilment of following norms:

During the preceding 12 months –

(a) The average procedures should be more than 20 per day for the Panchakarma units to be regularized.

(b) If the daily average procedures are between 10 to 20 per day, the Headquarters to sensitize the in-charge of the Unit and his immediate superior authority for improving the functioning of the Unit.

(c) If the daily average procedures are less than 10 per day, continuation of such unit is not justified on the basis of norms.

(iii) HR requirements for Panchakarma Unit:

(a) A Panchakarma Unit is to function under the supervision of a Regular Medical Officer (Ayurveda) with MD in Panchakarma from the recognised University as per the NCISM act. Till such a doctor is available, as an interim arrangement, contractual Medical Officer having MD in Panchakarma from recognized university as per NCISM Act may be hired from outsourcing agency through GeM as per the RRs/Terms & Conditions provided by the All India Institute of Ayurveda/Ministry of Ayush.

(b) After obtaining approval of the Headquarters for establishing a new Panchakarma unit, initially one male and one female qualified Panchakarma Technician/Therapist and Panchakarma Attendant/Assistant may be hired from outsourcing agency on contract basis through GeM following the usual GeM procedure, but for a period not exceeding one year.

(c) Thereafter, if the Unit continues to be justified on the basis of the norms, the process of contractual hiring of additional Panchakarma Technician/Therapist and Panchakarma Attendant/Assistant from outsourcing agency through GeM may be repeated depending on workload. Similarly, an additional post of Medical Officer with MD in Panchakarma will be justified in such cases.

(d) The qualification/remuneration for the engagement of Panchakarma Technician/Therapist and Panchakarma Attendant/Assistant would be as per RRs/Terms & Conditions of the ministry of Ayush / All India Institute of Ayurveda obtained by ESIC HQ office from time to time.

(e) Support staff, if any, required by Panchakarma Unit may be provided by the Hospital Administration.

(iv) Panchakarma referrals and space allocations:

(i) Panchakarma procedure to be done only on the basis of referral from different ESIC/ESIS Hospitals and dispensaries.

(ii) Optimum requirement of space for setting up a Panchakarma Unit may be obtained from Ministry of AYUSH by Ayush Division and circulated to all concerned.

Chapter - 5: Establishment of Kshara-Sutra unit

(i) Criteria: Kshara-Sutra unit may be established based on the following:

a) In ESIC **Medical college** hospitals;
b) Having daily average Ayurveda OPD registration of more than **60 patients** for preceding 12 months may be considered.

(ii) HR requirements for Kshara-Sutra unit:

a) One **Contractual** Medical Officer having MS/MD in Shalya from recognized university as per NCISM Act, may be hired on **full time basis** from outsourcing agency through GeM as per the RRs/Terms & Conditions provided by the All India Institute of Ayurveda/Ministry of Ayush.
b) Supporting staff, if any, required by Kshara sutra Unit may be provided by the Hospital Administration.
c) The proposal for opening of Kshara Sutra Unit in ESIC/ESIS Hospitals will require the approval of ESIC Headquarters.
d) The proposal for establishing Kshara Sutra Unit in ESIC/ESIS Hospitals should be submitted by Deans/Medical Superintendent /DIMS as per **Annexure-8.**

Annexure-1

Proforma for opening of first Ayush (Ayurveda/Homoeopathy /Unani/Siddha) Unit:

1**.** Name of the ESIC/ESIS Hospital/Dispensary_____
2.Address_____
3. No. of beds sanctioned/commissioned_____
4. Allopathy OPD attendance for the last preceding 12 months

S.N	Month & Year	OPD attendance	No. of working days	Average OPD attendance per day	Remarks
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

5. Name of the Ayush units to be sanctioned: Ayurveda/Homoeopathy /Unani/Siddha

6. Availability of space for the establishment of Ayush unit: Yes/No

7. Reason for selection of specific Ayush unit:

Place:
Date:

Name and Signature of Dean/Medical Superintendent/DMD/DMN/DIMS (with stamp)

Annexure-2

Proforma for opening of Second/Third/Fourth Ayush (Ayurveda/Homoeopathy/Unani/ Siddha) Unit:

1. Name of the ESIC/ESIS Hospital/Dispensary_____
2. Address _____
3. No. of beds sanctioned/commissioned_____
4. Name of the existing Ayush unit: _____
5. Allopathy OPD attendance for the last preceding 12 months

S.N	Month & Year	OPD attendance	No. of working days	Average OPD attendance per day	Remarks
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

6. Name of the **Second/Third/Fourth** Ayush unit to be sanctioned: Ayurveda/Homoeopathy /Unani/Siddha

7. Availability of space for the **Second/Third/Fourth** second Ayush unit: Yes/No

Place:
Date:

Name and Signature of Dean/Medical Superintendent/DMD/DMN/DIMS
(with stamp)

Annexure-3

Proforma for sanction of Additional staff for Ayush Unit:

1. Name of the ESIC/ESIS Hospital/Dispensary_____
2. Address _____
3. No. of beds sanctioned/commissioned_____
4. Name of the existing Ayush unit: _____
5. OPD attendance of existing Ayush unit for the preceding 12 months

S.N	Month & Year	OPD attendance	No. of working days	Average OPD attendance per day	Remarks
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

6. Eligibility of additional staff: Yes/No

Place:
Date:

Name and Signature of Dean/Medical Superintendent/DMD/DMN/DIMS (with stamp)

Annexure – 4

Performa for sanction of 50 bedded Ayush Hospital co-located with ESIC/ESIS Hospitals:

1. Name of the ESIC/ESIS Hospital_____
2.Address_____
3. No. of beds sanctioned/commissioned_____
4. No. of IPs attached to this ESIC/ESIS Hospital
5. Availability of space for allocation of beds for Ayush IPD: Yes/No

Place:
Date:

Name and Signature and Name of Dean/Medical Superintendent/DMD/DMN/DIMS (with stamp)

Annexure-5

Proforma for sanction of Yoga Unit:

1. Name of the ESIC/ESIS Hospital_____
2. Address_____
3. No. of beds sanctioned/commissioned_____
4. Allopathy OPD attendance for the preceding 12 months

S.N	Month & Year	OPD attendance	No. of working days	Average OPD attendance per day	Remarks
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

5. Availability of space for the establishment of Yoga unit: Yes/No
6. Proposal is for requirement of Yoga Therapy Unit/Yoga Instruction Unit Full Time/ Yoga Instruction Unit Part Time:

Place:
Date:

Name & Signature of Dean/Medical Superintendent/DMD/DMN/DIMS
(with stamp)

Annexure- 6

Proforma for sanction of Panchakarma Unit:

1. Name of the ESIC/ESIS Hospital_____
2. Address _____
3. No. of beds sanctioned/commissioned_____
4. OPD attendance of **Ayurveda unit** for the preceding 12 months

S.N	Month & Year	OPD attendance	No. of working days	Average OPD attendance per day	Remarks
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

5. Requirement of staff:
6. Availability of space for Panchakarma Unit:

Place:
Date:

Name and Signature of Dean/Medical Superintendent/DMD/DMN/DIMS
(with stamp)

Annexure-7

Proforma for sanction Additional staff for Panchakarma Unit:

1. Name of the ESIC/ESIS Hospital_____
2. Address _____
3. No. of beds sanctioned/commissioned_____
4. Procedures done in Panchakarma unit for the preceding 12 months

S.N	Month & Year	No. of procedures done	No. of working days	Average procedures per day	Remarks
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

5. Requirement of staff:

Place:
Date:

Name and Signature of Dean/Medical Superintendent/DMD/DMN/DIMS
(with stamp)

Annexure-8

Proforma for sanction of Kshara Sutra Unit:

1. Name of the ESIC/ESIS Medical College Hospital_____
2. Address _____
3. No. of beds sanctioned/commissioned_____
4. OPD attendance in Ayurveda unit for the preceding 12 months_____

S.N	Month & Year	OPD attendance in Ayurveda unit	No. of working days	Daily Average OPD attendance in Ayurveda unit	Remarks
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

5. Requirement of staff:
6. Availability of space:
7. Availability of OT/Mini-OT:
8. Availability of equipment:

Place:
Date:

Name and Signature of Dean/Medical Superintendent/DMD/DMN/DIMS
(with stamp)