



# Why IMA is opposing NMC Bill 2019



# Legalizes Quackery

**Section 32** provides for licensing persons connected with modern scientific medical profession to practise medicine independently in primary and preventive healthcare.

Paradoxically he may prescribe medicine in secondary and tertiary care hospitals under a person of **same** qualification and category .



# Legalizes Quackery

This means that “such” a person who is “connected” to modern medicine can:

- (I) Practise as a General Practitioner anywhere in India both urban and rural. He will be independent.
- (II) He can be employed in emergencies, critical care, neonatal ICVs, Labour rooms operation theatres, ICUs inpatient wards and OPDs under similarly qualified persons providing cheap labour for the corporate hospitals.
- (III) Thus quackery is not only legalized but also legitimized.



## Promotes a crosspathy:

- **Section 50** provides for joint sitting of NMC with Central Council of Homeopathy and Central Council of Indian Medicine to approve specific educational modules or programmes that will be introduced in the undergraduate course and the postgraduate course across medical systems promoting medical pluralism.
- Ultimately the idea is to produce in thousands '**Hybrid doctors**' for the future generations of India. The quality of care available in India today will be lost for generations of Indians.



# Outsourcing Bridge Courses to the states

- **Section 51** enables the State Governments to accord recognition to **Bridge Courses** to alternative system practitioners to practise Modern Medicine.
- Reading section 32 with section 50 and 51 enables one to understand the dimension of the catastrophe awaiting the nation putting health of poor and needy into total peril.



## National EXIT Exam

**Section 15** The major concern of the medical students remains the National EXIT Test. Final MBBS, Licentiate exam and NEET PG are being rolled into one. National EXIT Test will consist of Theory and Clinicals which will award the degree and also the license for practice. The Theory will be of MCQ pattern and will be conducted by an All India Authority. It is not clear how a degree could be awarded by an university on an examination conducted by another authority. This contravenes the provisions of **Universities Act, 1904** and the **Indian Degrees Act, 1916**.



# Regulation of fees in Private Medical Colleges:

**Section 10.1.i.** NMC will only frame only 'guidelines' for 50% of seats in private medical colleges. Union Health Minister has explained that the rest of the 50% will be through signing of MoUs by State Governments with individual private medical colleges. There exists an ambiguity on the issue of fees allowing potential areas for corruption. What would be the fate of the statutory fee fixing committees in the states is also not clear.



# Quality of Medical Education

**Section 29.3** Medical colleges may be approved **without** hospitals being attached to them during approval.

**Section 28.7** says that inspection of the medical colleges **may be** conducted by the board. This discretionary power provides for the ambit of profound corruption.

The Bill purportedly brought to improve medical education does not provide for mandatory availability of infrastructure or its inspection. This would lead to massive downfall of the quality of medical education only. Medical colleges will go the way the engineering colleges have gone begging.



# Autonomy of States

**Section 46** makes it mandatory for the State Governments to abide by the directive of Central Government.

**Section 10d and f** provide for mandatory compliance of State Medical Councils

As such States and State Councils stands marginalized and a death nail is fixed on federalism as a constitutional mandate.



# Non Medical person as Secretary

- **Section 8.2** provides for a non medical person to hold this sensitive post to be appointed by the Govt. of India and not the National Medical Commission. Historically MCI exclusively had a modern medicine doctor as its Secretary for obvious reasons.
- How a non medical person will understand the nuances of art and science of medicine is a matter of serious concern.
- As a calculated design the age of superannuation has been raised to 70 years to as to accommodate a retired bureaucrat for the post.