

OFFICE OF THE NODAL OFFICER
DELHI AROGYA KOSH
LAL BAHADUR SHASTRI HOSPITAL, KHICHRIPUR
GOVT. OF NCT OF DELHI

F.15 (296)/Estt./DAK/LBSH/2017/ 9328

Dated: 5/12/17

CIRCULAR

As per O.M. no. F.No.E.4125/10184-10193 dated 15.11.2017 from Director General of Health Services the following amendments have been done for referral of free investigations and free surgeries through Delhi Arogya Kosh.

1. Inclusion of bonafide resident of Delhi admitted in the **indoor ward or emergency ward** of hospital. (For this concerned Doctor will send the requisition on continuation sheet and radiology investigation form with code number duly filled all the details of the patient along with the copy of **RESIDENCE PROOF OF DELHI**. { Aadhar Card, Voter ID, Driving Licence, Passport, Birth Certificate (till 05 years of age)}. Name (IN **CAPITAL LETTERS**), Signature and Stamp of Treating Doctor is must.

2. Amended referral mechanism for OPD patients and in patients :-

A. Eligible patient undergoing outdoor treatment:

Test advised by Specialist/ Medical Officer/Senior Resident on OPD slip with code number of test and refer the patient to the office of Nodal Officer, Delhi Arogya Kosh, Room no. 48 for his/her Authorization Form.

NO COUNTERSIGNING BY HOD IS REQUIRED

B. Eligible patient admitted in indoor ward / emergency:

I) TEST ADVISED BY SPECIALIST/MEDICAL OFFICER/SENIOR-RESIDENT DURING WORKING HOURS

Requisite test is advised by Specialist/ Medical Officer/ Senior Resident during working hours on the case sheet and will fill the investigation form with code number. The Doctor/ Unit concerned shall ensure that the requisition form duly signed, Name and Stamp on it with the **resident proof of patient** is sent to the Nodal Officer, DAK within working hours.

Thereafter, the Nodal officer, DAK shall issue the Authorization form.

II) TEST ADVISED FOR ADMITTED ELIGIBLE PATIENTS AFTER WORKING HOURS AND HOLIDAYS

Requisite test is advised by Specialist/ Medical Officer/ Senior Resident after working hours on the case sheet and will fill the investigation form with code number.

The Doctor/ Unit concerned shall ensure that the requisition form duly signed, Name and Stamp on it with the **resident proof of patient** is sent to the Casualty Medical Officer on duty (who shall act as link Nodal Officer after working hours and on holidays) for issuing the Authorization Form and **PHOTOS OF AUTHORIZATION FORM AND RESIDENCE PROOF BY MOBILE IS TO BE TAKEN BY CMO ON DUTY AND EMAIL TO NODAL OFFICER DAK ON EMAIL-EWSLBS@GMAIL.COM**