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ಶ್ರೀಮಂತ್ರ ಮಾತಾ  ಭೂತ ವಾಯಣಗಳಾದ ಶ್ರೀಮಂತ್ರ ಪ್ರವೃತ್ತಿಗಳಾದ ಪ್ರವೃತ್ತಿಗಳು

ಶ್ರೀಮಂತ್ರ ಮಾತಾ ಪ್ರವೃತ್ತಿಯ ಸಂಬಂಧಿಸಿದ ಪ್ರವೃತ್ತಿಗಳು, 2007ರಲ್ಲಿ ಸ್ಥಳೀಯ ಆರೋಗ್ಯಾನುಸಾರ ಪ್ರಕಟಿಸಿದ ಪ್ರವೃತ್ತಿಗಳಾಗಿದ್ದಾರೆ.

ಅನುಷ್ಠಾನಗಳು ಪ್ರವೃತ್ತಿಯ ಸಂಬಂಧಿಸಿದ ಶ್ರೀಮಂತ್ರ ಮಾತಾ ಪ್ರವೃತ್ತಿಗಳು ಸಂಬಂಧಿಯಾಗಿದ್ದಾರೆ, 2007ರಲ್ಲಿ ಶ್ರೀಲಂಕಾ ಪ್ರವರ್ತಿಗಳು 21) ಪ್ರವೃತ್ತಿಯ ಸಂಬಂಧಿಯಾಗಿದ್ದಾರೆ, ಪ್ರಕಟಿಸಿದ ಪ್ರವೃತ್ತಿಗಳಾಗಿದ್ದಾರೆ.

ಇವು ಅನುಷ್ಟಾನಗಳು ಪ್ರವೃತ್ತಿಗಳು ಪ್ರವರ್ತಿಗಳು ಶ್ರೀಮಂತ್ರ ಮಾತಾಯಂತರ ಪ್ರವೃತ್ತಿಗಳು ಅಥವಾ ಪ್ರವರ್ತಿಗಳು ಪ್ರಕಟಿಸಲ್ಪಟ್ಟಿದ್ದಾರೆ.

1. ಎಂಜಿನಿಯರ್ ಬಾಣದ ಭೂಮಿಯ ವಿವರಣೆ:- (1) ಅನುಷ್ಠಾನಗಳು, ಶ್ರೀಮಂತ್ರ ಮಾತಾ ಪ್ರವೃತ್ತಿಯ ಸಂಬಂಧಿಯಾಗಿದ್ದ ಪ್ರವೃತ್ತಿಗಳು, 2017 ರಲ್ಲಿ ಪ್ರಕಟಿಸಿದ್ದಾರೆ.

(2) ಈ ವಿವರಣೆಯಲ್ಲಿ ಪ್ರವರ್ತಿಗಳು.

2. ಎಂಜಿನಿಯರ್ ಬಾಣದ ವಿವರಣೆ:- ಶ್ರೀಮಂತ್ರ ಮಾತಾ ಪ್ರವೃತ್ತಿಯ ಸಂಬಂಧಿಯಾಗಿದ್ದ ಪ್ರವೃತ್ತಿಗಳು, 2007ರಲ್ಲಿ ಶ್ರೀಲಂಕಾ ಪ್ರವರ್ತಿಗಳು 21) ಅನುಷ್ಟಾನಗಳು ಎಂಜಿನಿಯರ್ ಬಾಣದ ಸಂಬಂಧಿಯಾಗಿದ್ದಾರೆ, ಎಂಜಿನಿಯರ್ ಬಾಣದಲ್ಲಿ ಎಂಜಿನಿಯರ್ ಬಾಣದವು ಪ್ರವರ್ತಿಗಳು.

(i) (a) ಅನುಷ್ಟಾನಗಳು ಎಂಜಿನಿಯರ್ ಬಾಣದ ಅಂಕಣಗಳು, ಎಂಜಿನಿಯರ್ ಬಾಣದ :-

"(a-1) "ಪ್ರವರ್ತಿಗಳಾದ ಸಂಬಂಧಿಸಿದ ಪ್ರವೃತ್ತಿಗಳು ಪ್ರವರ್ತಿಗಳು" ಎಂಜಿನಿಯರ್ ಬಾಣದ ಅಂಕಣಗಳು "ಪ್ರವರ್ತಿಗಳಾದ ಪ್ರವೃತ್ತಿಗಳು ಸಂಬಂಧಿಸಿದ ಪ್ರವರ್ತಿಗಳು" ;

(ii) (b) ಅನುಷ್ಠಾನಗಳು ಎಂಜಿನಿಯರ್ ಬಾಣದ ಅಂಕಣಗಳು, ಎಂಜಿನಿಯರ್ ಬಾಣದ :-

"(b) "ಪ್ರವರ್ತಿಗಳಾದ ಪ್ರವೃತ್ತಿಗಳು" ಎಂಜಿನಿಯರ್ ಬಾಣದ ಅಂಕಣಗಳು "ಪ್ರವರ್ತಿಗಳಾದ ಪ್ರವೃತ್ತಿಗಳು" ;

(iii) (c) ಅನುಷ್ಟಾನಗಳು "ಪ್ರವರ್ತಿಗಳಾದ ಪ್ರವೃತ್ತಿಗಳು" ಎಂಜಿನಿಯರ್ ಬಾಣದ ಅಂಕಣಗಳು "ಪ್ರವರ್ತಿಗಳಾದ ಪ್ರವೃತ್ತಿಗಳು" ಎಂಜಿನಿಯರ್ ಬಾಣದ ಅಂಕಣಗಳು "ಪ್ರವರ್ತಿಗಳಾದ ಪ್ರವೃತ್ತಿಗಳು" ಎಂಜಿನಿಯರ್ ಬಾಣದ.
(iv) (/Index) ಮತ್ತು ಎರಡು ಆಕರ್ಷಣೆಗೆ ಬರುವ ವರ್ಗವೇ ಇರುತ್ತದೆ ಎನ್ನುತ್ತಿರುತ್ತವೆ. ೨೦೨೩-

“(೧೦–೧) "ಭಾಗವತ್ ವಿವಿಧ ರೂಪಗಳ ಅನುಭವವು ಉಜುಳುವ ಸಂದರ್ಭ楂" ಎಂದರೆ, ನಡುವಿನ ಪಟ್ಟಿಯಲ್ಲಿ ಜಾನ್ಮಂದಿರ ನಂತರ ಅದರ ಸಾಮಾನ್ಯವಾಗಿ ಉಜುಳುವ ಪ್ರಕಾರ ಆಗ್ರಹವಾಗಿತೇವೆ." 

(v) (Index) ಎಂಬುರು,-

(ಇ) "ಯಾವುದೇ", ಎರಡು ನೂರು ಅನುಭವವು ಅನುಭವವು ಬಳಸವುತ್ತದೆ "ಸಂಕೋಚಿತ ಅಥವಾ ಅಕ್ಷರ ಸಂಕೋಚಿತ" ಎಂದರೆ ಅನ್ನರು ಅಸ್ವಾಸದವನ್ನು ಸಂಖ್ಯೆಗಾಗಿಗೆ ಬಳಸಬಹುದು

(ಇ) "ಸಂಕೋಚಿತ ಅಥವಾ ಅಕ್ಷರ ಸಂಕೋಚಿತ" ಎಂದರೆ ಅಕ್ಷರ ಸಂಖ್ಯೆ, "ಇ", ಕಾಲ, ಸಾಮಾನ್ಯವಾಗಿ, ಅರ್ಥವಹಿಸುವ ಅಕ್ಷರ, ಅಕ್ಷರವನ್ನು ಬಳಸುವರು." ಎಂದರೆ ಅಕ್ಷರವನ್ನು ಅಸ್ವಾಸದವನ್ನು ಹೊಂದಬಹುದು,

(vi) (Index) ಮತ್ತು ಎರಡು ಆಕರ್ಷಣೆಗೆ ಬರುವ ವರ್ಗವೇ ಇರುತ್ತದೆ ೨೦೨೩-

“(೧೧) "ಅಂತರ್ ಎಂದರೆ, ಆಯಾಮದ ಪ್ರತಿಯೇ ಅಂತರ್ ಅಂತರ್." 

3. ೨೮ ಪುಟಗಳ ಮೇಲೆ.- ಮತ್ತೊಂದು ಪ್ರತಿ ರಾತ್ರಿಯಲ್ಲಿಯೂ ಸುಮಾರು "ಸಂಕೋಚಿತ, ಅಂತರ್ ಅಂತರ್" ಎಂದರೆ ಅತ್ತು "ಆರಂಭದಾದರೂ ಅಂತರ್ ಅಂತರ್" ಎಂದರೆ ಅತ್ತು "ಅಂತರ್ ಅಂತರ್".

4. ೨೬ ಪುಟಗಳ ಮೇಲೆ.- ಮತ್ತೊಂದು ಪ್ರತಿ ರಾತ್ರಿಯಲ್ಲಿಯೂ ಸುಮಾರು "ಸಂಕೋಚಿತ, ಅಂತರ್ ಅಂತರ್" ಎಂದರೆ ಅತ್ತು "ಅಂತರ್ ಅಂತರ್".

"4. ಕಟ್ಟು ಮೇಲೆ.- ಕಟ್ಟು ಮೇಲೆ ವೃತ್ತಿಸಿದರೆ ಕೆಲವೊಂದು ಪ್ರತಿಯೇ ಸುಮಾರು "ವಿಭಜನೆ" ಎಂಬ ಅಂತರ್ ಅಂತರ್." ೨೦೨೩-

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5. ೨೬ ಪುಟಗಳ ಮೇಲೆ.- ಮತ್ತೊಂದು ಪ್ರತಿ ರಾತ್ರಿಯಲ್ಲಿ "ಸಂಕೋಚಿತ, ಅಂತರ್ ಅಂತರ್" ಎಂಬ ಅತ್ತು "ಅಂತರ್ ಅಂತರ್" ಎಂಬ ಅತ್ತು "ಅಂತರ್ ಅಂತರ್".
6. या विषयात आवश्यक – म्हणजेच ऑलिम्पिक बायकृती (iv)च्या अवघड्यावर करार करून तिच्या विषयात जाहीर करायच्या, मोकऱे,

“(iv-क) कोणतेही प्रवेशातील विषयांना आवश्यक 200 मन्दिरांमध्ये देणारे म्हणूनच,”

7. या विषयात आवश्यक – म्हणजेच ऑलिम्पिक बायकृती (v)च्या अवघड्यावर करार करून,

(i) या विषयात जाहीर करायला शोध-प्रश्नातील बाबते करायला म्हणून, आपल्या विषयातील विषयांतून हक्कांवर म्हणून, जो नवीनलिप्यांमध्ये ओळखा दिला जावा येणाऱ्या कार्यांरोख्यात घटकांमध्ये शोधावयोगी समजावून घडविल्यास, त्यात कार्यालयांच्या कार्यालापणाच्या विषयातील ध्यानांत्युन विषयांवर जास्त भावना आहे. मोकऱे, या विषयातील विषयांना आवश्यक 500 मन्दिरांमध्ये देणारे म्हणून, बायकृतीमध्ये आपल्या विषयांच्या अभावाने नियमांच्या पुढील भागांमध्ये नियमात्मक नसलेल्या प्रश्नातील विषयांच्या अभावाशी पुढील भागात प्रश्नातील विषयांच्या अभावाने, कार्यालापणाच्या विषयांच्या अभावाने नियमात्मक नसलेल्या प्रश्नातील विषयांच्या अभावाने, कार्यालापणाच्या विषयांच्या अभावाने, कार्यालापणाच्या विषयांच्या अभावाने.

(ii) (vii) या विषयात जाहीर करायला शोध-प्रश्नातील बाबते करायला म्हणून, आपल्या विषयातील विषयांना आवश्यक 200 मन्दिरांमध्ये देणारे म्हणून,”

8. या विषयात आवश्यक – म्हणजेच ऑलिम्पिक बायकृती (v) या विषयातील विषयांना आवश्यक 200 मन्दिरांमध्ये देणारे म्हणून, कार्यालापणाच्या

8. म्हणजे आयोगांच्या कार्यालापणाच्या समस्यांची कार्याबाट.

(1) कार्यालापणाच्या कार्यालापणाच्या समस्यांची कार्याबाट, म्हणजेच, आयोगांच्या कार्याविषयातील समस्या कार्यालापणाच्या समस्यांची कार्याविषयातील समस्या, आयोगांच्या कार्याविषयातील समस्या कार्यालापणाच्या समस्यांची कार्याविषयातील समस्या, आयोगांच्या कार्याविषयातील समस्या कार्यालापणाच्या समस्यांची कार्याविषयातील समस्या.

(2) कार्यालापणाच्या कार्यालापणाच्या समस्यां योग्य कार्याविषयातील आयोगांच्या कार्याविषयातील समस्या कार्यालापणाच्या कार्याविषयातील समस्या कार्यालापणाच्या कार्याविषयातील समस्या कार्यालापणाच्या कार्याविषयातील समस्या.

(3) कार्यालापणाच्या कार्यालापणाच्या समस्यां योग्य कार्याविषयातील आयोगांच्या कार्याविषयातील समस्या कार्यालापणाच्या कार्याविषयातील समस्या कार्यालापणाच्या कार्याविषयातील समस्या कार्यालापणाच्या कार्याविषयातील समस्या.
(4) The importance of the information in the document is not clear.

(i) The conclusion of the study indicates the necessity of more research on this topic.
(ii) The results of the study show a significant improvement in the performance of the students.
(iii) The author suggests that further studies should be conducted in this area.
(iv) The study highlights the importance of education in the development of a nation.
(v) The discussion on the implications of the findings is not presented.

9. The conclusion of the study is as follows:-

(i) The study concludes that "education is essential for all," and that "education should be free for all." The study suggests that free education should be available to all.

(ii) The study concludes that education is essential for all, and that "education should be free for all." The study suggests that free education should be available to all.

10. The conclusion of the study is as follows:-

(i) The study concludes that "education is essential for all," and that "education should be free for all." The study suggests that free education should be available to all.

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(3) මාර්ගයේ ඉතිහාසිකයින් - (2) අතර මෙමෙක් අනුව, අධිකාරීත්ව නම් කොටස සහ ප්‍රකට ඉතිහාසිකයින් ආදායම්මෙයි.

(5) අධිකාරීත්ව නම්ත් ප්‍රකටයේ ප්‍රකට ඉතිහාසිකයින් ආදායම් කළු මෙමෙක් අතර මෙමෙක් අනුව, අධිකාරීත්ව නම්ත් ප්‍රකටයේ ඉතිහාසිකයින් ආදායම්මෙයි.

(6) මෙමෙක් අතර මෙමෙක් ආදායම් කළු මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව.

(8) මෙමෙක් අතර මෙමෙක් ආදායම් කළු මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව.

11. බැල්ලතුම් ඔබහෙය. - මේවා මෙමෙක් 18ක් මෙමෙක් අතර මෙමෙක් අනුව,

(1) (1)් මෙමෙක් අතර මෙමෙක් අනුව,

(3) "මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව,

(2) "මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අනුව,

(11) 18ක් මෙමෙක් කීන් වියහෙය. - මේවා මෙමෙක් 18ක් මෙමෙක් අතර මෙමෙක් අනුව,

(1) (1)් මෙමෙක් අතර මෙමෙක් "මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අතර, මෙමෙක් අතර මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අතර මෙමෙක් අනුව, මෙමෙක් අතර මෙමෙක් අතර, මෙමෙක් අතර මෙමෙක් අතර, මෙමෙක් අතර මෙමෙක් අතර
10. (iv) ගැනීමේ සැකසුම් කටයුතු කළමනාකරණය කරමින් කරන්නේන්.” මෙම විශේෂය අනුව ලෙස පියෝ.

(v) ගැනීමේ සැකසුම් කටයුතු කළමනාකරණය කරමින් කරන්නේන් විශේෂය ලබා ගැනීමේ සැකසුම් කටයුතු කළමනාකරණය කරමින් විශේෂය ලබා දෙයි. මෙම පදනමේ අදහස් පහසුකමයෙන් පසුව අනුව ලෙස පියෝ.

(vi) ගැනීමේ සැකසුම් කටයුතු කළමනාකරණය කරමින් කරන්නේන් විශේෂය ලබා ගැනීමේ සැකසුම් කටයුතු කළමනාකරණය කරමින් විශේෂය ලබා දෙයි. මෙම පදනමේ අදහස් පහසුකමයෙන් පසුව අනුව ලෙස පියෝ.

13. (ii) මෙම අදහස් මෙහෙයි.– මෙම ස්වරාංකය මෙහෙයි මෙහෙයි කළමනාකරණය කරමුවන් විශේෂය ලබා දෙයි.
(ii) (3)  "මොටකූල් කාම ආරක්ෂාවයි, ආරත්වයක් ලියා ගැනවී ඇත;

(4) කාමත් ප්‍රහාරය
(ථනාරාමා, උරිකුමා බහුල උත්සහිත, උරිකුමා, වැනි
මෙහෙයි (මැටිකාබලිකයි))

(5) විධියේ ප්‍රථාමය, විධියේ සමාන

17. අමෙහෙයි (රුපවත්):  මෙහෙයි කාමත් ප්‍රහාරය "රුපවත් දැනට යොමුක්කේ මෙහෙයි කාමත් ප්‍රහාරය" යොමු කරන්න මේ අතර කාමත් ප්‍රහාරය මෙහෙයි කාමත් ප්‍රහාරය.

18. අමෙහෙයි (රුපවත්):  මෙහෙයි කාමත් ප්‍රහාරය 19ක් කාමත් ප්‍රහාරය;

(1) (3) විධියේ ප්‍රථාමය කාම විධියේ ප්‍රථාමය "කාම විධිය" කාම විධියේ ප්‍රථාමය;

(2) (4) කාම විධියේ ප්‍රථාමය;

(2) "මොටකූල් කාම විධියේ ප්‍රථාමය කාම විධියේ ප්‍රථාමය කාම විධියේ ප්‍රථාමය කාම විධියේ ප්‍රථාමය" කාම විධියේ ප්‍රථාමය;

19. අනුකාලයන් ලිපිවලිය:  මෙහෙයි කාමත් ප්‍රහාරය 2නම් අනුකාලය ලිපිවලියේ ප්‍රථාමය කාමත් ප්‍රහාරය ලිපිවලියේ ප්‍රථාමය;
I. ಸಾಂವತ್ತು ಮತ್ತು (ಸಂಪೂರ್ವ ಕೃತಿ)

(1) ಸಂಪೂರ್ವ ಕೃತಿ : ಸೂಚನಾ ಮತ್ತು, ಸಾಂವತ್ತು ಮೇಲೆ ಹೇಗೆ ಇರುವಂತೆ ಎಲ್ಲಾ ನೃತ್ಯೋತ್ಸವಗಳ ಮೇಲೆ, ಸಾಂವತ್ತು ಸಮರ್ಪಿಸಿದ್ದ ನೃತ್ಯವು ಕಂಚಿಳಿಯಲ್ಲಿ ಆದಾಯವಾಗಿ ಸಾಂವತ್ತು ಮತ್ತು ಇಲಾಣೆ ಮೇಲೆ ಇರುವಂತೆ ಎಲ್ಲಾ ನೃತ್ಯೋತ್ಸವಗಳ ಮೇಲೆ, ಸಾಂವತ್ತು ಸಮರ್ಪಿಸಿದ್ದ ನೃತ್ಯವು ಕಂಚಿಳಿಯಲ್ಲಿ ಆದಾಯವಾಗಿ ಸಾಂವತ್ತು ಮತ್ತು (ಸಂಪೂರ್ವ ಕೃತಿ).

(2) ಪ್ರವೃತ್ತಿಯ ನಡೆದು ವಿಜ್ಞಾನ ಪ್ರವೃತ್ತಿ : ಸಾಂವತ್ತು ಮತ್ತು ಸಾಂವತ್ತು ಮೇಲೆ ಹೇಗೆ ಇರುವಂತೆ ಎಲ್ಲಾ ನೃತ್ಯೋತ್ಸವಗಳ ಮೇಲೆ, ಸಾಂವತ್ತು ಸಮರ್ಪಿಸಿದ್ದ ನೃತ್ಯವು ಕಂಚಿಳಿಯಲ್ಲಿ ಆದಾಯವಾಗಿ ಸಾಂವತ್ತು ಸಮರ್ಪಿಸಿದ್ದ ನೃತ್ಯವು ಕಂಚಿಳಿಯಲ್ಲಿ ಆದಾಯವಾಗಿ ಸಾಂವತ್ತು ಮತ್ತು (ಸಂಪೂರ್ವ ಕೃತಿ).

(3) ಕಾರ್ಯಾಲಯ : ಸೂಚನಾ ಮತ್ತು, ಸಾಂವತ್ತು ಮೇಲೆ ಹೇಗೆ ಇರುವಂತೆ ಎಲ್ಲಾ ನೃತ್ಯೋತ್ಸವಗಳ ಮೇಲೆ, ಸಾಂವತ್ತು ಸಮರ್ಪಿಸಿದ್ದ ನೃತ್ಯವು ಕಂಚಿಳಿಯಲ್ಲಿ ಆದಾಯವಾಗಿ ಸಾಂವತ್ತು ಮತ್ತು (ಸಂಪೂರ್ವ ಕೃತಿ).
(ii) உயரான சிலர் தற்போதைய அறிவியல் காரணிகளைக் கூறுவதன் வரையறை;
(iii) உயர் மற்றும் சிறிய அறிவியல் காரணிகளைக் கூறவும்;
(iv) முன்னேற்ற மற்றும் முற்போக்கு காரணிகளை அறிவியல் காரணிகளைக் கூறவும்;
(v) தொடர்புடைய மற்றும் தொடர்பில்லாத காரணிகளை அறிவியல் காரணிகளை கூறவும்.

(3) ஏனைய காரணிகள் சொன்னு– உயர்ந்து நிறுவியுள்ள நூற்றுக்கண்ட காரணிகளை அறிவியல் காரணிகளை கூறவும்;

(4) சொத்துங்கள் மற்றும் சுருக்கங்கள்– உயர்ந்து நிறுவியுள்ள;

(i) காரணிகளை கூறவும் சொத்துங்களை நிறுவி முற்போக்கு காரணிகளை அறிவியல் காரணிகளை கூறவும்;

(ii) அறிவியல் காரணிகளை விளக்கவும் மற்றும் தொடர்பில்லாத காரணிகளை விளக்கவும்;

(iii) தொடர்புடைய காரணிகளை விளக்கவும்;

(iv) என்றாலும் முற்போக்கு காரணிகளை விளக்கவும்;

(5) தொடர்– உயர்ந்து நிறுவியுள்ள;

(i) ஒரே காரணிகளை விளக்கவும்;

(ii) ஒரே காரணிகளை விளக்கவும்;

(iii) விளக்கக் காரணிகளை விளக்கவும்;

(iv) விளக்கக் காரணிகளை விளக்கவும்.
III គេហទំព័រទី ៣ សំដៅរបស់ សំខាន់៖

(1) គូរាការទី ០៧ មុខទី ៩ ដោយប្រការជូន៖

(1) គេហទំព័រទី ៣ សំដៅរបស់ សំខាន់៖

(2) គូរាការទី ២ មុខទី ២ ដោយប្រការជូន៖

(2) គូរាការទី ២ មុខទី ២ ដោយប្រការជូន៖

(3) គូរាការទី ០៧ មុខទី ៤ ដោយប្រការជូន៖

(3) គូរាការទី ០៧ មុខទី ៤ ដោយប្រការជូន៖

(4) គូរាការទី ០៧ មុខទី ៥ ដោយប្រការជូន៖

(4) គូរាការទី ០៧ មុខទី ៥ ដោយប្រការជូន៖
උපකරණය සහ මුණින් ගුණය


(i) මෙම කාලයට සමාන ක්‍රියානෝගේ මැදකොට සමාන සමාන ක්‍රියානෝගැන් කරන බවයි.

(ii) මෙම කාලයට සමාන ක්‍රියානෝගේ මැදකොට සමාන සමාන සමාන ක්‍රියානෝගැන් කරන බවයි.

(iii) මෙම කාලයට සමාන ක්‍රියානෝගේ මැදකොට සමාන සමාන සමාන ක්‍රියානෝගැන් කරන බවයි.

(iv) මෙම කාලයට සමාන ක්‍රියානෝගේ මැදකොට සමාන සමාන ක්‍රියානෝගැන් කරන බවයි.

(v) මෙම කාලයට සමාන ක්‍රියානෝගේ මැදකොට සමාන සමාන ක්‍රියානෝගැන් කරන බවයි.

(vi) මෙම කාලයට සමාන ක්‍රියානෝගේ මැදකොට සමාන සමාන ක්‍රියානෝගැන් කරන බවයි.

(vii) මෙම කාලයට සමාන ක්‍රියානෝගේ මැදකොට සමාන සමාන ක්‍රියානෝගැන් කරන බවයි.

(viii) මෙම කාලයට සමාන ක්‍රියානෝගේ මැදකොට සමාන සමාන ක්‍රියානෝගැන් කරන බවයි.

(පැමිණී 2007 වසරේ ඇති පැමිණී)
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 процедур ರೂಪೋಜ್ಜಾ

ಪ್ರಕ್ರಿಯೆಯ ನಡುಬರುವ ಭೀಮು ಒಂದು ಚಿಹ್ನೆ ಸ್ಥಾಪಿಸುವ ಪ್ರಮಾಣ.
পৃষ্ঠার শেষের পৃষ্ঠায় অন্তর্ভুক্ত হয়নি।
15


d"xv xz xz xz

2. "xv xz xz xz

(2) "xv xz xz xz

(3) "xv xz xz xz

(4) "xv xz xz xz

(5) "xv xz xz xz

(6) "xv xz xz xz

(7) "xv xz xz xz
(1) "డిలానిడా ఉపయోగం" అనగా అనేక ప్రత్యేకమైన నిర్ణయాల పోడిలేది.

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3. మాత్రము ప్రచురణ సంస్థల నిర్ణయం... దీనిని ఎంట్రెలను అధికంగా పెంచచుకుని మాట లేదు. అందుకే అసాధారణ ప్రచురణ నిర్ణయం సమాధానం పొందడాని కోసం ఏకైక నిర్ణయంతో సాధారణ పరిస్థితిలా, ఆధిక్యం ప్రాతిష్ఠించారు. అందుకి దీనిని ప్రచురణ పనుల తిరుమలాయం చేసారు. కృతజాతి సాధనాలు ప్రచురణలో ఉపయోగం చేసారు.

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మాత్రము ఎంటరెల అధికంగా పెంచపోయిన మాట ప్రచురణ సంస్థల నిర్ణయం పొందడాని సాధారణ విషయం ఉపగ్రహం నిర్ణయం (ఆధిక్యం) అధ్యక్షతలో, 20XX వరకు మిగిలిన మాంగంలో నిర్ణయం పొందడానికి తప్పించారు. దీని ద్వారా లోకాధిక్యాలు మలి మంచు వహించడానికి తప్పించారు, శాస్త్రానవిని వహించడానికి మేలు నిర్ణయాలు పొందారు.

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4. నిర్ణయం సంస్థలు... అధికారిక కారణం ప్రస్తుతం అనే నిర్ణయం ప్రచురణలేని ఆదాయాలు, ఆధిక్యం, తొఠి నిర్ణయం, అనే కారణం ఉపయోగం చేసారు.

<table>
<thead>
<tr>
<th>నామం</th>
<th>వివరణం</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>ప్రస్తుతం నిర్ణయం</td>
</tr>
<tr>
<td>(2)</td>
<td>ప్రచురణ అదికారి కారణం ప్రచురణ మాట</td>
</tr>
<tr>
<td>(3)</td>
<td>ప్రస్తుతం నిర్ణయం ప్రచురణ పొందడానికి తప్పించారు</td>
</tr>
<tr>
<td>(4)</td>
<td>ప్రస్తుతం నిర్ణయం పొందడానికి తప్పించారు</td>
</tr>
</tbody>
</table>

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5. నిర్ణయాలపై ఉపాధ్యాయం... (1) అనే ప్రచురణ సంస్థల కోసం ప్రచురణ, కృతజాతి, భారత సమాధానాల పోషణ నిపుణుల కోసం, కృతదాతలకు ఆధిక్యాన్ని పొందడానికి మనం సాధారణ పరిస్థితిలా, దీనిని ప్రచురణ పనుల తిరుమలాయం చేసారు. అందుకే దీనిని ప్రచురణ పనుల తిరుమలాయం చేసారు.
6. ಮತ್ತು ಎಲ್ಲೆರೆಂದರೂ ಒಂದೂ ಇಂದೊಂದು ನಿಂಬ ಮತ್ತು ಪರಿಣಾಮ– ಹಾಗೇ ಇತ್ತುದರು ಸಮಯದ ನಿರ್ದೇಶನಗಳು ಮತ್ತು ಪರಿಣಾಮಕ್ಕೆ ವ್ಯತಃಂದರು ಗುರುತಿಸಿದರು. ಹಾಗೇ ಇತ್ತುದರು ಸಮಯದ ನಿರ್ದೇಶನಗಳು ಮತ್ತು ಪರಿಣಾಮಕ್ಕೆ ವ್ಯತಃಂದರು ಗುರುತಿಸಿದರು.

(iv) ಮತ್ತು ಎಲ್ಲೆರೆಂದರೂ ೯ನೇ ಹಿಂದಾಗೂ ಪ್ರತಿಪಾದಿಸಿದ ವಿದ್ಯಾರ್ಥಿಗಳಲ್ಲಿ ನಿಂಬ ಪರಿಣಾಮಗಳನ್ನು ಪ್ರತಿಪಾದಿಸಿದರು:

7. ಸಂಪುಟ ಮತ್ತು– (1) ೫ನೇ ಹಿಂದಾಗೂ ಇತ್ತುದರು ಯಶೋವಾದ ಪರಿಣಾಮದ ನಿಂಬ ಇತ್ತುದರು ನಿರ್ದೇಶಗಳು, ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟ ಮತ್ತು ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟ ಹಾಗೇ ಇತ್ತುದರು ಪರಿಣಾಮಕ್ಕೆ ವ್ಯತಃಂದರು ಗುರುತಿಸಿದ ಹಾಗೇ ಇತ್ತುದರು ಪರಿಣಾಮಕ್ಕೆ ವ್ಯತಃಂದರು ಗುರುತಿಸಿದ ಹಾಗೇ ಇತ್ತುದರು ಪರಿಣಾಮಕ್ಕೆ ವ್ಯತಃಂದರು ಗುರುತಿಸಿದ ಹಾಗೇ ಇತ್ತುದರು ಪರಿಣಾಮಕ್ಕೆ ವ್ಯತಃಂದರು ಗುರುತಿಸಿದ.

(3) (1)ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟ ಮತ್ತು ಪರಿಣಾಮದ ನಿಂಬ ಇತ್ತುದರು ನಿರ್ದೇಶಗಳು ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟ ಹಾಗೇ ಇತ್ತುದರು ಪರಿಣಾಮಕ್ಕೆ ವ್ಯತಃಂದರು ಗುರುತಿಸಿದ ಹಾಗೇ ಇತ್ತುದರು ಪರಿಣಾಮಕ್ಕೆ ವ್ಯತಃಂದರು ಗುರುತಿಸಿದ ಹಾಗೇ ಇತ್ತುದರು ಪರಿಣಾಮಕ್ಕೆ ವ್ಯತಃಂದರು ಗುರುತಿಸಿದ ಹಾಗೇ ಇತ್ತುದರು ಪರಿಣಾಮಕ್ಕೆ ವ್ಯತಃಂದರು ಗುರುತಿಸಿದ.

8. ಪರಿಣಾಮದ ಸಂಪುಟವು– (1) ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟವು ಇತ್ತುದರು ಸಂಪುಟವು, ಅದರ ಪ್ರತಿಗೂಡ (2)ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟವು, ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟವು ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟವು ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟವು, ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟವು. (3)ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟವು ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟವು ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟವು, ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟವು. (4)ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟವು ಹಾಗೇ ಇತ್ತುದರು ಸಂಪುಟವು.
12. ಕೇಳಿದಾರರು ಸೂಚಿಪಡಿಸಿರಬೇಕು.

15. ಇಂದಾದರೂ ಅವುಗಳ ಅನುಕ್ರಮವಾಗಿ ರೇಖೆಯೇ ಕ್ರಮವೊಂದಿಗೆ ಸೂಚಿಪಡಿಸಲಾಗುತ್ತದೆ. (1) ಇನ್ನೊಂದು ಕೃತಿಯೊಂದು, ಹೊರಗೆ ಅಪಾರ ಬಳಗೆ ಬಣ್ಣದಲ್ಲಿ ಕೃತಿಯೊಂದಿಗೆ ಅನುಕ್ರಮವಾಗಿ ಅವುಗಳ ಅನುಕ್ರಮವನ್ನು ಸೂಚಿಪಡಿಸಲಾಗುತ್ತದೆ. ಇದರಲ್ಲಿ ಕೃತಿಯೊಂದಿಗೆ ಅನುಕ್ರಮವೊಂದಿಗೆ ಸೂಚಿಪಡಿಸಲಾಗುತ್ತದೆ, ಹೊರಗೆ ಅಪಾರ ಬಣ್ಣದಲ್ಲಿ ಸೂಚಿಪಡಿಸಲು ಅವುಗಳ ಅನುಕ್ರಮವನ್ನು ಸೂಚಿಪಡಿಸಲಾಗುತ್ತದೆ.

16. ಇದೇ ಮೂಲಕ ಅದನ್ನು ಕೃತಿಯೊಂದಿಗೆ ಸೂಚಿಪಡಿಸಲಾಗುತ್ತದೆ, ಸೂಚಿ.

<table>
<thead>
<tr>
<th>(a)</th>
<th>ಸ್ಥಾನದ ಸೂಚಿಕೆ</th>
<th>ಸಹಾಯ ತೊಂದರೆಯ ಸಂಪೂರ್ಣ ಸೂಚಿ</th>
<th>ಹೊರಗೆ</th>
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<tr>
<td>(b)</td>
<td>ಸ್ಥಾನದ ಸೂಚಿಕೆ</td>
<td>ಸಹಾಯ ತೊಂದರೆಯ ಸಂಪೂರ್ಣ ಸೂಚಿ</td>
<td>ಹೊರಗೆ</td>
</tr>
<tr>
<td>(c)</td>
<td>ಇದರ ಸೂಚನೆಗೆ ಸೂಚಿ ಸಂಗ್ರಹಕರಿಗೆ</td>
<td>ಸಂಗ್ರಹಕರು</td>
<td>ಸೂಚಿಕೆ</td>
</tr>
</tbody>
</table>
(4) მეორედ რე არ, მთხოვნობის ნიშნებზე ჰქონდა 12 ათწლი 13წლი გრძელი შარობების განხორციელება, ლათუმ რუკას დაკავა, რთულ მეორედ ჩამოკითხვა. ლათური სასწავლებლო კლასში დაიკავა (2) გამო რიცხვით ფიქრი მასში. მთხოვნობის ბოლოს ჩამოკითხვა, რუკალი იქნა, ლათური ნაშრომი ჩაკართვე, რთულ მთხოვნობის მიერ შერჩევის შემთხვევაში, მთხოვნობის შერჩევული ჩამოკითხვა. მაშინ მთხოვნობის გარკვეულ ადგილებში მთხოვნობის შერჩევის შემთხვევაში, მთხოვნობის შერჩევის შეფასებიდან მაშინ მთხოვნობის გარკვეულ ადგილებში მთხოვნობის შერჩევის შემთხვევაში, მთხოვნობის შერჩევის შეფასებიდან მაშინ მთხოვნობის გარკვეულ ადგილებში მთხოვნობის შერჩევის შემთხვევაში.

(5) მას შერჩევით, რის მიუხედავად არ გამოთქვა, მათგანი ჩამოკითხვა გამო მართვის წყლად. მაგრამ შერჩევისთვის მარა, რთულ მთხოვნობის მიერ შერჩევის შემთხვევაში, მთხოვნობის შერჩევის შეფასებიდან მაშინ მთხოვნობის გარკვეულ ადგილებში მთხოვნობის შერჩევის შემთხვევაში.
(ಸಂಖ್ಯೆ 8)

(1) ವಿಶೇಷಗೊಳ್ಳು, ಸಂಸ್ಕೃತಿಸಾರು ಪ್ರಸ್ಥಾರಣೆಗಳು ಕೆಲವು ಪ್ರಕಟಿಸುವುದು;

(2) (1)ದಲ್ಲೇ ಸಾಧ್ಯವಾಗುತ್ತದೆ ಅಥವಾ ರೋಚಕವಾಗಿ, ಸಂದರ್ಭದಿಯ ಅವಳಿಕೆಗೆ ಮಾಹಿತಿಯನ್ನು ಬೇರೆ ಸೂಚಿಸುವುದು; ನಂತರೆ, ಇದು ಕೆಲವು ಸಿದ್ಧಿಯಾದುದ್ದು ಮತ್ತು ಕುರಿತ ಮಾಹಿತಿಯನ್ನು ವ್ಯಾಖ್ಯಾನಿಸುವುದು, ಸಾಧಾರಣವಾಗಿ ಮತ್ತು ಮುಂತಾದ ಮಾಹಿತಿಯನ್ನು ಕಾರ್ಯಾಲಯಗಳು ಪ್ರಕಟಿಸುವುದು,

ಮತ್ತು, ಅಧಿಕಾರಿಯರ ತಂತ್ರಣೆಗಳು ಹಾಗೆಯೇ ಸಮರೂಪ ಸಂಪರ್ಕವಾಗುವರೆಗೆ ರೋತ್ತರ 243ರ ಸಂಖ್ಯೆಯ ಥಾನ್ಯದ ಆಯುಕ್ತ ತಂತ್ರಣೆ ಆವರಣವಾಗಿ ಪ್ರವೃತ್ತಿ ಪಡೆಬೇಕು.

ಅನ್ನು ಮತ್ತು, ಅಧಿಕಾರಿಯರ ತಂತ್ರಣೆಗಳು ಹಾಗೆಯೇ ಸಮರೂಪ ಸಂಪರ್ಕವಾಗುವರೆಗೆ ರೋತ್ತರ 243ರ ಸಂಖ್ಯೆಯ ಥಾನ್ಯದ ಆಯುಕ್ತ ತಂತ್ರಣೆ ಆವರಣವಾಗಿ ಪ್ರವೃತ್ತಿ ಪಡೆಬೇಕು.
(3) The response to the question (3) is: "Yes, it is possible. Would you like to proceed with the task?" and the respondent responds: "Yes, I would like to proceed with the task."
(5) (19)ಸ್ಥಾನಕ, ನಿವಾಶ ಪ್ರತಿಯೊಂದು ಹುದ್ದೆಯನ್ನು.

"ಇ. ಪ್ರವಾಸ ಸಂಬಂಧವನ್ನು (ಸಂಪೂರ್ಣ)" ಸಂಪೂರ್ಣವಾಗಿರುವುದು.

(2) (i) ಅವಬಹ್ನಿಯುತ್ತದು, (ii) ಪ್ರಾರುಣ ಪ್ರತಿಯೊಂದು ನಿವಾಸಕಟ್ಟೆಯ ಮೂಲಕ ಸಂಬಂಧಿಸಿರುವುದು,

"(ii) ಸಂಬಂಧಿಸಿರುವುದರ ಪ್ರತಿಯೊಂದು ಮೂಲಕ ಸಂಬಂಧಿಸಿರುವುದು ಸಂಶೋಧನೆಯಲ್ಲಿ ಅಂತಾರಾಯಾಗಿ.

(3) (5) ಅವಬಹ್ನಿಯುತ್ತದು (i) ಪ್ರತಿ ಪ್ರತಿಯೊಂದು ನಿವಾಸಕಟ್ಟೆಯ ಮೂಲಕ ಸಂಬಂಧಿಸಿರುವುದು,

"(i) ಸಂಬಂಧಿಸಿರುವುದರ ಪ್ರತಿಯೊಂದು ನಿವಾಸಕಟ್ಟೆಯ ಮೂಲಕ ಸಂಬಂಧಿಸಿರುವುದು ಸಂಶೋಧನೆಯಲ್ಲಿ ಅಂತಾರಾಯಾಗಿ.

ಅಂ. ಮಂಗಳ

ಪ್ರಧಾನ (ಸುಪ್ರೀಂ)
A Bill further to amend the Karnataka Private Medical Establishments Act, 2007.

Whereas it is expedient further to amend the Karnataka Private Medical Establishments Act, 2007 (Karnataka Act 21 of 2007) for the purposes hereinafter appearing;

Be it enacted by the Karnataka State Legislature in the sixty-eighth year of the Republic of India, as follows:-

1. Short title and commencement.- (1) This Act may be called the Karnataka Private Medical Establishments (Amendment) Act, 2017.

(2) It shall come into force at once.

2. Amendment of section 2.- In section 2 of the Karnataka Private Medical Establishments Act, 2007 (Karnataka Act 21 of 2007) (hereinafter referred to as the Principal Act) —

(i) after clause (c) the following shall be inserted, namely:-

"(e-1) "District or Metropolitan Grievance Redressal Committee" means the District or Metropolitan Grievance Redressal Committee constituted under section 8;";

(ii) for clause (h) the following shall be substituted,—

"(h) "Inspection Committee" means the Inspection Committee constituted under section 7;";

(iii) in clause (l) after the words "Acupressure treatments" the words "and any other manner of treatment as may be notified by the State Government from time to time" shall be inserted;

(iv) after clause (m) the following shall be inserted, namely:-

"(m-1) "Patient’s Charter and Private Medical Establishment’s Charter" means the rights and responsibilities of the patient and the Private Medical Establishments specified in the schedule;"

(v) in clause (n),—

(a) after the words "polyclinic" the words "Dental Clinic or Dental Polyclinic" shall be inserted; and

(b) after the words "voluntary or private medical establishments" the words "as may be notified by the State Government by notification" shall be inserted.
(vi) after clause (r) the following shall be inserted, namely:-

"(s) 'schedule' means schedule appended to this Act."

3. **Amendment of section 3.** In section 3 of the Principal Act, in the proviso after the words ‘till the disposal of the application’ the words ‘and shall comply with the provisions’ shall be inserted.

4. **Substitution of section 4.** For section 4 of the Principal Act, the following shall be substituted, namely:-

'Registration Authority.' There shall be a Registration Authority in each district consisting of the following members, namely:-

<table>
<thead>
<tr>
<th></th>
<th>Chairman</th>
<th>Member Secretary</th>
<th>Member</th>
<th>Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>The Deputy Commissioner of the District</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>District Health and Family Welfare Officer</td>
<td>Member Secretary</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>District AYUSH Officer</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Two members from recognized Association representing modern medicine and other systems of medicine nominated by the Chairman</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5. **Amendment of section 5.** In section 5 of the Principal Act, after the words ‘shall make an application’ the words ‘through on-line’ shall be inserted.

6. **Amendment of section 6.** In section 6 of the Principal Act, after clause (iv) the following shall be inserted, namely:-

"(iv-a) that Private Medical Diagnostic Laboratory is located outside 200 meters radius of Government Hospital;"

7. **Amendment of section 7.** In section 7 of the Principal Act,-(i) for sub-section (1) the following shall be substituted, namely:-

'(1) On receipt of an application through on-line under section 5 the Registration Authority may having regard to the provisions of section 6 and after such enquiry as may be necessary, by the Inspection Committee, either grant registration subject to that conditions as may be prescribed or reject the application within thirty days from the date of receipt of the complete application in all respects; in case of any delay beyond thirty days the registration shall be deemed to have been granted. The Registration Authority may constitute the Inspection Committee consisting of such members as may be prescribed.’; and

(ii) in sub-section (3) for the words ‘five years’ occurring in two places the words "three years" shall be substituted.

8. **Substitution of section 8.** For section 8 the Principal Act, the following shall be substituted, namely:-
"8. District or Metropolitan Grievance Redressal Committee.-

(1) The District or Metropolitan Grievance Redressal Committee shall be headed by the Chief Executive Officer of the Zilla Panchayat of the District and consists of Superintendent of Police of the District, one representative among Private Medical Establishments in the District, District Surgeon, Public Prosecutor and Woman representatives to be nominated by the State Government.

(2) The District or Metropolitan Grievance Redressal Committee, either with prior intimation or on receiving a complaint, may at reasonable time, inspect, a Private Medical Establishment to satisfy itself that the provisions of this Act and the rules made thereunder and the conditions of registration are being duly observed.

(3) If any defects or deficiencies are observed by the District or Metropolitan Grievance Redressal Committee shall direct the Registration Authority or the Manager of the Private Medical Establishment and the Karnataka Medical Council or AYUSH Council, as the case may be, to remedy the same as the case may be, within such reasonable time, as may be specified in the order. There upon the Manager shall comply with every such direction and report the compliance to the Registration Authority within the time so specified.

(4) The District or Metropolitan Grievance Redressal Committee shall while investigating or enquiring any matter under this section have all the powers of civil court trying a suit under the code of civil procedure 1908, and in particular in respect of the following matters, namely:-

i) summoning and enforcing the attendance of any person from any part of the State and examining him on oath;

ii) discovery and production of any documents and witness;

iii) receiving any evidence on affidavits;

iv) requisitioning for any public record or copy there of from any court or office; and

v) any other matter which may be prescribed.

9. Amendment of section 9. - In section 9 of the Principal Act,-

(i) in sub-section (1) after the words "standards", the words "staffing, infrastructure, etc.", shall be inserted; and

(ii) after sub-section (2) the following proviso shall be inserted, namely:

"Provided that the number of non-official members and stake holder shall not exceed one third of the total members".
10. Insertion of new section 9A.- After section 9 of the Principal Act, the following shall be inserted namely:-

'9A. Functions of the Experts Committees and other Committees.- (1) The Expert Committee constituted under section 9 shall discharge the following functions, namely:-

(a) study and recommend classification of Private Medical Establishments on scientific basis for the purpose of this Act;

(b) laying down minimum standards of infrastructure, staffing, prescription audit, etc.;

(c) make recommendation to the State Government regarding fixation of cost of each health service or treatment and different rates may be proposed for different class of private medical establishments; and

(d) any other functions as may be prescribed by the State Government.

(2) The State Government on the recommendation of the Expert Committee fix the rates of each class of treatment and different rates may be fixed for different class of private medical establishment.

(3) Other ad-hoc Committees.- (a) The State Government may also constitute such number of ad-hoc committees with such number of members as may be prescribed;

(b) The ad-hoc committee shall perform such work as may be prescribed and shall submit its report to the State Government for its consideration;

(c) The Expert Committee constituted under section 9 or the ad-hoc committee constituted under sub-section (1) shall follow such procedure as may be prescribed in discharge of its functions; and

(d) The non-official Members of the Committee shall be eligible for Travelling Allowance and Daily Allowance or any other allowances as may be prescribed by the State Government.'

11. Amendment of section 10.- In section 10 of the Principal Act,-

(i) in sub-section (1),-

(a) after the words "schedule of charges" occurring in two places the words "or the rates fixed by the State Government" shall be inserted; and

(b) after the words "on the notice board" the words "in a prominent place or reception" shall be inserted.

(ii) in sub-section (2) after the word "charges" the words "fixed by the State Government" shall be inserted.

(iii) after sub-section (2) the following shall be inserted, namely:-

"(3) Every Private Medical Establishment shall follow the rates as fixed by the Government and including the package rates for investigation, bed charges, operation theatre procedure, intensive care, ventilation, implants,
consultation and similar tests and procedures and any additional treatments or procedure shall not attract additional charges over and above such rates fixed by the State Government including the package rates unless explained to and consented to by the patient.

(4) Every Private Medical Establishment shall provide proper estimates for treatments not covered in fixed rates and charges to the patient or attendant of the patient during initiation or due course of treatment and final bill shall not exceed estimates.'

12. Amendment of section 11.- In section 11 of the Principal Act,-

(i). in clause (i) after the words, "it at the establishment" the words "in the event of such emergencies, the Private Medical Establishment shall provide necessary healthcare to save the life of the patient without insisting on advance payment" shall be inserted; and

(ii). after clause (iv) the following shall be inserted, namely:-

"(v). Every Private Medical Establishment shall display the Patient’s Charter and Private Medical Establishment’s Charter in such place easily visible to the public; and

(vi) Every Private Medical Establishment shall handover in the event of the death, the body of the deceased immediately, without insisting on the payment of the dues. The same may be recovered from representatives of the deceased in due course."

13. Insertion of new section 11A.- After section 11 of the Principal Act, the following shall be inserted, namely:-

"11A. Patients’ Charter and Private Medical Establishment’s Charter.- Every patient or authorised family member and Private Medical Establishment shall have the rights and duties specified in the Patient’s and Private Medical Establishment’s Charter. Any violations of the Patient’s and Private Medical Establishment’s Charter shall be referred to the Grievance Redressal Committee constituted under section 8.

11B. Power of State Government to amend the schedule.- (1) The State Government may by notification add, amend or omit any of the entries in the schedule.

(2) Every notification issued by the State Government under this section shall be laid before both houses of the State Legislature."

14. Amendment of section 12.- In section 12 of the Principal Act, after sub-section (2), the following shall be inserted, namely:-
"Provided that no such information shall be disclosed to other person."

15. Amendment of section 15.- In section 15 of the Principal Act, in sub-section (1) in the proviso after the words "Private Medical Establishment" the words "and also arrangements are made within reasonable time ensuring uninterrupted health care to the inpatients" shall be inserted.

16. Amendment of section 16.- In section 16 of the Principal Act, (i) for the words "There shall be an Appellate Authority" the words "There shall be an Appellate Authority over Registration Authority" shall be substituted; and
(ii) for clause (c) the following shall be substituted, namely:-
(c) The Director of AYUSH
(Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy)
Member
(d) The Drug Controller, Government of Karnataka.
Member.

17. Amendment of section 18.- In section 18 of the Principal Act, the words "whether on payment basis or not" shall be omitted.

18. Amendment of section 19.- In section 19 of the Principal Act,-
(i) in sub-section (1) for the words "ten thousand" the words "five lakhs" shall be substituted;
(ii) in sub-section (4),
(a) for the words "six months and with a fine which may extended to two thousand rupees" the words "three years and with a fine which may extend to one lakh rupees" shall be substituted; and
(b) for the words "one year and with a fine which may extended to five thousand rupees" the words "five years and with a fine which may extend to five lakhs rupees" shall be substituted.
(iii) after sub-section (4) the following shall be inserted, namely:-
"(4-A) where a person contravenes the provisions of section 10 shall on conviction be punished with imprisonment for a term which shall not be less than six months but which may extend upto three years and for a fine which shall be not less than twenty five thousand rupees but which may extend upto five lakhs rupees. He shall also be liable for suspension or cancellation of registration and action under sub-section (2) and (3);"; and
(iv) in sub-section (5) for the words "five thousand rupees" the words "one lakh rupees" shall be substituted.

19. Insertion of schedule.- After section 28 of the Principal Act the following schedule shall be inserted, namely:-
"SCHEDULE

(see clause (a) of section 2 and section 11B)

Patient’s Charter and Establishment Charter

I. PATIENT’S CHARTER (Rights):

(1) **Care.** Every Patient shall have,-

(i) a right to receive treatment irrespective of their type of primary and associated illnesses, socio-economic status, age, gender, sexual orientation, religion, caste, cultural preferences, linguistic and geographical origins or political affiliations;

(ii) right to be heard to his satisfaction without the doctor interrupting before completion of narrating their entire problem and concerns;

(iii) expectation from the doctor to write the prescription legibly and explain to the patient on the details on dosage, dos & don’ts & generic options for the medicines; and

(iv) to be provided with information and access on whom to contact in case of an emergency.

(2) **Confidentiality and Dignity.** Every Patient shall have,-

(i) right to personal dignity and to receive care without any form of stigma and discrimination;

(ii) privacy during examination and treatment;

(iii) protection from physical abuse and neglect;

(iv) accommodating and respecting his special needs such as spiritual and cultural preferences; and

(v) right to confidentiality about their medical condition.

(3) **Information.** Every Patient or his authorised family member shall have right to,-

(i) information to be provided to him which are meant to be and in a language of the patient’s preference and in a manner that is effortless to understand;

(ii) receive complete information on the medical problem, prescription, treatment and procedure details;

(iii) a documented procedure for his informed consent exists to enable them to make an informed decision about their care to be practiced with utmost diligence and transparency;

(iv) be educated on risks, benefits, expected treatment outcomes and possible complications to enable them to make informed decisions and involve them in the care planning and delivery process;

(v) request information on the names, dosages and adverse effects of the medication that they are treated with;

(vi) request access and receive a copy of their clinical records;

(vii) complete information on the expected cost of treatment presented as an itemised structure of the various expenses and charges;

(viii) information on hospital rules and regulations; and

(ix) information on organ donation.
(4) Preferences.- Every Patient shall have right to,-
   (i). seek a second opinion on his medical condition; and
   (ii). get the his treatment options, so that the patient can select what works best for him.

(5) Right to redress.- Every Patient shall have right to,-
   (i). justice by lodging a complaint through an authority dedicated for this purpose by the healthcare provider organisation or with Government health authorities;
   (ii). a fair and prompt hearing of his concern; and
   (iii). appeal to a higher authority in the private medical establishment and insist in writing on the outcome of the complaint.

II. PATIENTS’ RESPONSIBILITIES.- Every Patient shall,-

(1) Honesty in Disclosure.- Be honest with the treating Doctor in disclosing family or medical history

(2) Treatment Compliance.- Evert patient shall,-
   (i). be punctual for appointments;
   (ii). do the best to comply with the doctor’s treatment plan;
   (iii). have realistic expectations from the doctor and his treatment;
   (iv). inform and bring to the doctor’s notice if it has been difficult to understand any part of the treatment or of the existences of challenges in complying with the treatment; and
   (v). display intent to participate intelligently in medical care by actively involving in the prescribed do-at-home activities.

(3) Intent for Health Promotion.- Every patient shall do everything in capacity to maintain healthy habits and routines that contribute to good health and take responsibility for health.

(4) Transparency and Honesty.- Every patient shall.-
   (i). make a sincere effort to understand therapies which include the medicines prescribed and their associated adverse effects and other compliances for effective treatment outcomes;
   (ii). not ask for surreptitious bills and false certificates, and/or advocate forcefully by unlawful means to provide with one;
   (iii). in the event of not being happy, will inform and discuss with doctor; and
   (iv). report fraud and wrong-doing.

(5) Conduct.- Every patient shall,-
   (i). respect the doctors and medical staff caring and treating;
   (ii). abide by the Hospital or facility rules;
   (iii). bear the agreed expenses of the treatment that is explained to in advance and pay bills on time; and
   (iv). not involve in abusing, assaulting or causing harm to the Doctor or staff of Hospital. (any contravention may attract penalty under the Karnataka Prohibition of Violence Against Medicare Service Personnel and Damage to Property in Medicare Service Institutions Act, 2009 (Karnataka Act 01 of 2009))
III. PRIVATE MEDICAL ESTABLISHMENT’S CHARTER

(1) **Transparency and Honesty.** - Every Private Medical Establishment shall,
   (i) provide a printed schedule of fee for office visits, procedures, testing and surgery and provide itemized bills; and
   (ii) inform patient’s qualifications to perform the proposed diagnostic measures or treatments.

(2) **Patient Friendly.** - Every Private Medical Establishment shall,
   (i). schedule appointments in such a manner that it may allow patient the necessary time to interact and examine him with minimal waiting times and listen to his problems and concerns without interruptions or distractions; and
   (ii). encourage patient to bring a friend or relative into the examining room with him.

(3) **Effective Communication for Patient Education.** - Every Doctor shall,
   (i). explain the patient prognosis, further diagnostic activity and treatment in simple terms such that it facilitates easy understanding to him;
   (ii). prescribe an Information, Therapy and discuss with the patient diagnostic treatment and medication options, to enable him to make well-informed of decisions; and
   (iii). not proceed until the patient is satisfied and convinced that he understand the benefits and risks of each alternative and he have his agreement on a particular course of action.

(4) **Implement the patient charter.** - Every Private Medical Establishment shall,
   (i). publish the patient charter in Kannada, English and Hindi;
   (ii). display the patient charter prominently and at multiple locations in the healthcare provider setting; and
   (iii). implement the patient charter in its true spirit in everyday medical practice.
STATEMENT OF OBJECTS AND REASONS

It is considered necessary to amend the Karnataka Private Medical Establishments Act, 2007 (Karnataka Act 21 of 2007) to—

(i) constitute the District or Metropolitan Grievance Redressal Committee for redressal of Grievance of patients;

(ii) empower to the State Government to fix the rates or charges for each class of treatment to be collected by the Private Medical Establishments and to notify different rates for different class of Private Medical Establishments on the recommendation of the Expert Committee;

(iii) if the Private Medical Establishments collect more charges than that fixed by the State Government, to impose penalty of not less than Rs.25,000/- which may extend to Rs.5.00 lakhs and imprisonment not less than six months which may extend upto three years;

(iv) reconstitute the Registration Authority;

(v) specify the Patient’s Charter and Private Medical Establishment’s Charter in the Private Medical Establishments in the schedule to the Act;

(vi) not to demand for advance payment from patient or representative of patient in case of emergency treatment;

(vii) not to demand any due amount at the time of handing over of the dead body to the concerned person but to collect dues later;

(viii) enhance certain penalties leviable under section 19; and

(ix) certain other amendments incidental or consequential are also made.

Hence the Bill.
FINANCIAL MEMORANDUM

There is no extra expenditure involved in the proposed Legislative measure.
MEMORANDUM REGARDING DELEGATED LEGISLATION

| Clause 7 | Sub-section (1) of section 7 sought to be substituted under this clause empowers the State Government,
|          | (a) to make rules regarding the manner of granting registration or rejecting the application within 30 days to the Private Medical Establishments; and
|          | (b) to make rules regarding the manner of constituting of the Inspection Committee by the Registration Authority. |
| Clause 8 | Item (v) of Sub-section (4) of section 8 sought to be substituted, empowers the State Government to make rules regarding any other matter for investigating by the District or Metropolitan Grievance Redressal Committee. |
| Clause 10 | Clause 9A sought to be inserted,
|           | (i) clause (d) of sub-section (1) empowers the State Government to make rules regarding other functions of the Expert Committees and other Committees;
|           | (ii) sub-clause (3),
|           | (a) clause (a) empowers the State Government to make rules regarding the manner of constitution of ad-hoc committees and specify their number of members;
|           | (b) clause (b) empowers the State Government to make rules regarding performance of the work of ad-hoc committee and manner of submitting its report to the State Government;
|           | (c) clause (c) empowers the State Government to make rules regarding the procedure for discharging of functions of the Expert’s Committee and ad-hoc Committee; and
|           | (d) clause (d) empowers the State Government to make rules regarding eligibility of Travelling Allowance and Daily Allowances or other Allowances for non-official members of the Committees. |

The proposed delegation of Legislative power is normal in character

K.R. RAMESH KUMAR  
Minister for Health and Family Welfare

S. Murthy  
Secretary (I/c)  
Karnataka Legislative Assembly
ANNEXURE

Extract from the Karnataka Private Medical Establishments Act, 2007
(Karnataka Act 21 of 2007)

2. Definitions.- in this Act, unless the context otherwise requires:-

(c) "Department" means the Department of Health and Family Welfare or the Department of Indian Systems of Medicine and Homeopathy, Government of Karnataka, as the case may be;

(l) "Local Inspection Committee" means Local Inspection Committee constituted under section 8;

(m) "Medical treatment" means systematic diagnosis and treatment for prevention or cure of any disease, or to improve the condition of health of any person through allopathic or any other recognised systems of medicine such as Ayurveda, Unani, Homeopathy, Yoga, [Integrative medicine], Naturopathy and Siddha; and includes Acupuncture and Acupressure treatments;

(n) "Nursing Home" means an establishment where persons suffering from illness, injury or infirmity (whether of body or mind), are usually received or accommodated or both for the purpose of treatment of diseases or infirmity or for improvement of health or for the purposes of relaxation or for any other purpose whatsoever, whether or not analogous to the purposes mentioned in clause (l) of this section;

(n) "Private Medical Establishment" means a hospital or dispensary with beds or without beds, Clinical Laboratory, Diagnostic Centre, Maternity Home, Blood Bank, Radiological Centre, Scanning Centre, Physiotherapy Centre, Clinic, Polyclinic, Consultation Centre and such other establishments by whatever name called where investigation, diagnosis and preventive or curative or rehabilitative medical treatment facilities are provided to the public and includes Voluntary or Private Establishments but does not include Medical Establishments run or maintained or sponsored by;

(o) "Registration Authority" means the Registration Authority referred to in section 4.

3. Registration of Private Medical Establishments.- On and after the appointed day, no Private Medical Establishment shall be established, run or maintained in the State except under and in accordance with the terms and conditions of registration granted under this Act:

Provided that a Private Medical Establishment in existence immediately prior to the appointed day shall apply for such registration within six months from the date of commencement of the Karnataka Private Medical Establishments (Amendment) Act, 2012, and pending orders thereon may continue to run or maintain till the disposal of the application.
4. **Registration Authority.** There shall be a Registration Authority in each district, consisting of the following members, namely:

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<td>a</td>
<td>The Deputy Commissioner of the district</td>
<td>Chairman</td>
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<td>b</td>
<td>District Health and Family Welfare Officer</td>
<td>Member Secretary</td>
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<td>c</td>
<td>President or Secretary, Indian Medical Association of the concerned district</td>
<td>Member</td>
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<tr>
<td>d</td>
<td>District AYUSH officer</td>
<td>Member</td>
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<td>e</td>
<td>President or Secretary, the AYUSH Federation of India of the concerned district</td>
<td>Member</td>
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5. **Application for Registration.** (1) Every person desiring to establish, run, maintain or continue to run and maintain a Private Medical Establishment shall make an application to the concerned Registration Authority in such form, in such manner and along with such fees as may be prescribed and different amount of fees may be prescribed, for different class or classes of Private Medical Establishments.

6. **Pre-requisites for Registration of Private Medical Establishments.**

   The Registration Authority shall before granting the registration consider whether the following prerequisites for registration of a Private Medical Establishment are satisfied, namely:

   *(vi) that the Private Medical Establishment conforms to the standards referred to in section 9;*

7. **Disposal of applications.** (1) On receipt of an application under section 5, the Registration Authority may, having regard to the provisions of section 6 and after such enquiry as may be necessary, by Local Inspection Committee, either grant registration subject to such conditions as may be prescribed or reject the application: Provided that the Registration Authority shall not reject the application without giving an opportunity of being heard to the applicant and without recording the reasons for such rejection.

   *(3) Every registration granted under sub-section (1) shall be valid for a period of five years and may be renewed once in five years on an application made in such form, in such manner and on payment of such fees, as may be prescribed.*

8. **Local Inspection Committee.** (1) The Registration Authority of each district may constitute one or more Local Inspection Committee for each district consisting of such persons as it may specify for the purposes specified in sub-sections (1) of section 7 and sub-section (2) of this section.

   *(2) The Local Inspection Committee, either with prior intimation or on receiving a complaint, may at reasonable time, inspect, a Private Medical Establishment to satisfy itself that the provisions of this Act and the rules made thereunder and the conditions of registration are being duly observed.*
(3) If any defects or deficiencies are noticed during inspection, the Local Inspection Committee shall report to the Registration Authority which may direct the Manager of the Private Medical Establishment to remedy the same within such reasonable time as may be specified in the order. Thereupon the Manager shall comply with every such direction and report the compliance to the Registration Authority within the time so specified. (4) The Manager of the Private Medical Establishment shall provide all reasonable facilities for such inspection.

9. Standards.- (1) Every Private Medical Establishment shall conform to the standards laid down in this Act or the rules made thereunder or any other law for the time being in force concerning the staff and their qualifications, operation theatre, buildings, space requirements, equipment, facilities to be provided to the patients and their attendants, maintenance and other matters.

(2) Different standards may be set for different class or classes of Private Medical Establishments, in respect of different areas, as determined by the State Government. Expert Committees may be constituted by the State Government for suggesting the standards for different class or classes of Private Medical Establishment for different areas from time to time. The composition, powers and responsibilities, of the Expert Committees and the terms and conditions of service of members of the Expert Committee shall be as may be prescribed.

10. Schedule of charges to be notified.- (1) Every Private Medical Establishment shall for the information of the patients and general public make available the schedule of charges payable for different medical treatment and other services, in the form of brochures or booklets and shall also display such schedule of charges on the notice board of the private Medical Establishment. A copy of such brochure or booklet shall be sent to the Registration Authority.

(2) No Private Medical Establishment shall collect from the patient or his relatives or attendants any amount in excess of the charges printed in the brochure or booklet, and without issuing proper receipt for the amount charged and collected.

11. Obligations of Private Medical Establishments.- Every Private Medical Establishment shall:

(i) administer necessary first aid and take other life saving or stabilising emergency measures in all medico-legal or potentially medico-legal cases such as victims of road accidents, accidental or induced burns or poisoning or 10 criminal assaults and the like which present themselves or are brought before it at the establishment.

(ii) furnish to the Registration Authority such particulars in respect of such non-communicable diseases as may be notified by the State Government from time to time

12. Maintenance of clinical records.-

(2) Every clinical record shall be open to inspection, in due discharge of his duties, by the District Surgeon or any other officer specifically empowered in this behalf by the State Government.
15. Suspension or cancellation of registration.- [1] The Registration Authority, on the basis of a complaint or otherwise if a prima facie case exists about the contravention of any provisions of this Act or the rules made there under or conditions of registration may, by order in writing and for the reason to be recited in writing suspend or cancel the registration of a Private Medical Establishment:

Provided that no such order shall be made except after giving a reasonable opportunity of being heard, to the Private Medical Establishment.

16. Appellate Authority.- There shall be an Appellate Authority consisting of the following members, namely:-

(a) the Commissioner for Health and Family Welfare, Karnataka - Chairman
(b) the Director of Health Services, Karnataka - Member
(c) the Director, Indian System of Medicine and Homeopathy - Member

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18. Private Medical Establishments to report the names of government doctors on their establishments.- Every Private Medical Establishment shall report to the State Government and the Registration Authority, the names of government doctors and para medical staff, whose services are utilized in the Private Medical Establishment for consultations or any other basis whether on payment basis or not.

19. Penalties.-

(1) Where any person establishes, runs or maintains a Private Medical Establishment without registration granted under section 7 he shall, on conviction, be punished with imprisonment for a term which may extend to three years and with fine which may extend upto ten thousand rupees.

(4) Where any person runs or maintains a Private Medical Establishment in contravention of the conditions of registration or contravenes the provisions of section 12 or 13, or fails to comply with the direction issued under sub-section (2), he shall, on conviction, be punished with imprisonment for a term which may extend to six months and with a fine which may extend to two thousand rupees and in the case of a second or subsequent offence with imprisonment for a term which may extend to one year and with a fine which may extend to five thousand rupees.

(5) Where a person contravenes any other provision of this Act or the rules made there under he shall, on conviction, be punishable with a fine which may extend to five thousand rupees.

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28. Repeal and Savings:-

(1) The Karnataka Private Nursing Homes (Regulation) Act, 1976 (Karnataka Act 75 of 1976) is hereby repealed.

(2) Notwithstanding such repeal,-

(a) anything done or any action taken under the repealed Act shall be deemed to have been done or taken under the corresponding provisions of this Act;

(b) all applications made under the repealed Act for registration or renewal prior to the commencement of this Act and pending consideration on the date of commencement of this Act shall abate 17 and the fee paid, if any, in respect of such application shall be refunded to the applicant and such applicants may apply afresh for Registration under the provisions of this Act.
I hereby give notice of my intention to move the following amendments to the Karnataka Private Medical Establishments (Amendment) Bill, 2017 (L.A. Bill No. 24 of 2017), namely:

(1) in clause 8, in section 8 sought to be substituted,-

(a) for sub-section (1) the following shall be substituted, namely:-

"(1) the District or Metropolitan Grievance Redressal Committee shall be headed by the Chief Executive Officer of the Zila Panchayat of the District and consists of superintendent of Police of the District, one representative among Private Medical Establishments in the District, District Surgeon and one Woman representative to be nominated by the State Government:

Provided that the Metropolitan Grievance Redressal Committee shall be constituted in the Metropolitan Area declared as such by the Governor under clause (c) of Article 243P of the constitution.
Provided further that in respect of Metropolitan Area, the Additional Commissioner/Joint Commissioner of the City Corporation appointed by the State Government by notification shall be the head of the Grievance Redressal Committee"; and

(b) in sub-section (3) sought to be inserted, for the words, "shall direct the Registration Authority or" the words "shall inform the Registration Authority and direct" shall be substituted.

Clause 11

(2) in clause 11, in section 10 in sub-section (1) sought to be inserted by sub-clause (i), in item (a) for the word "or" the word "and" shall be substituted.

Clause 12

(3) in clause 12, in sub-clause (ii), after clause (vi) sought to be inserted in section 11 of the Principal Act, the following shall be inserted, namely:-

"(vii) Provide Grievance redressal mechanism at Private Medical Establishment level in such manner as may be prescribed."

Clause 18

(4) in clause 18, for sub-clause (iii) (iii) and (iv) and the entries relating thereto the following shall be substituted, namely:-

"(ii) in sub-section (4),-

(a) for the word and figures "section 12" the word and figures "section 10, 12" shall be substituted:
(b) for the words “with a fine which may extend to two thousand rupees” the words “with a fine which may extend to one lakh rupees” shall be substituted;

(c) for the words “with a fine which may extend to five thousand rupees” the words “with a fine which may extend to five lakh rupees” shall be substituted; and

(iii) in sub-section (5) for the words “five thousand rupees” the words “one lakh rupees” shall be substituted.

Clause 19

(5) in clause (19) in schedule sought to be inserted, under the heading “1. PATIENT’S CHARTER (Rights)”;

(a) in item (1), for sub-item (ii) the following shall be substituted, namely:

“(ii). right to be heard to his problems and concerns to his satisfaction”;

(b) in item (5) for sub-item (i) the following shall be substituted, namely:

“(i) justice through an authority dedicated for this purpose by the healthcare provider organization or with Government health authorities;”

S.MURTHY
Secretary (I/C)