



Indian Medical Association

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Making Your Clinic & Hospital PCPN DT Act Compliant .

**The Pre-conception and Pre-natal biagnostic Techniques
(Prohibition of Sex Selection) Act, 1994 is both
prohibitory and regulatory in nature.**

- **Prohibits pre-conception sex selection and regulates fetal sex determination**
- **Regulates use of pre-natal diagnostic techniques like ultrasound**
 - **Restricts sale of ultrasound machines**
 - **Advertisement for sex selection is punishable.**

**“VIOLATION of the Provisions of the
PCPN DT Act is a Punishable Offence”**

Key steps for complying with the PCPN DT Act .

- Register the facility (including the machine) and display the registration certificate. Every clinic/facility where a mobile machine is used has to be registered.
- Inform the Appropriate Authority of any change in the machine, facility, and staff.
- Maintain transparent and complete records
- Preserve records for upto two years. They have to be made available at the time of inspection.

Under what circumstances can pre -natal diagnostics techniques be offered to pregnant women?

- Age > 35 years: Since it is known that after the age of 35 years the incidence of congenital foetal malformations increases.
- Previous two or more spontaneous abortions / foetal loss,
- Exposure to potential teratogenic agents such as radiation, drugs, infection, chemicals.

- Family history of mental retardation or physical deformities such as, spasticity or any other genetic disease.

The Indian Council for Medical Research (ICMR) has given a list of 23 indications for which ultrasonography can be offered to pregnant women. These conditions are listed in the PCPNDT Act.

What should ultrasound & imaging Clinics do to be Act compliant?

- **DISPLAY OF INFORMATION AT THE CLINIC**

Registration certificate, copy of the Act and a display board in English and a local language saying -----

“DISCLOSURE OF THE SEX OF THE FOETUS IS PROHIBITED UNDER LAW - Rule 17(1)”.

- **Maintain Records as Prescribed by Law. (This is the most time consuming job for doctors ,for which the authorities can provide some relaxation of rules.)**

Mandatory Records

Register showing in serial order

- Name & Addresses of men or women given genetic counselling and / or subjected to prenatal diagnostic procedure or test.
- Names of their spouses or fathers;
- date on which they first reported for such counselling

For Every Case

- The referrals of the doctor recommending the scan
- A declaration by the doctor that he/she has neither detected nor disclosed the sex of the foetus to anybody in any manner
- A declaration from the pregnant woman regarding her non-interest in knowing the sex of the foetus.

Maintain Forms as Prescribed by Rules of the Act:

- Maintain the Forms -D (Records for Genetic Counselling Centre), E (Records for Genetic Laboratory) and F (Record for the pregnant woman by ultrasound clinics, etc)
- Multiple copies of Forms can be photocopied from the PCPNDT Handbook on Act and Rules
- Send complete report based on above Forms statutorily by 5th. of the succeeding month (for the previous month) to the Appropriate Authority or any officer so authorized.

Other Medical Records

Other records that are kept by the clinic include:

- Case Records
- Forms of consent for invasive procedures (Form G)
- Laboratory results, microscopic pictures & sonographic plates or slides
- Recommendations & letters from referring doctor.

How can you help?

Be alert to families who already have daughters:

studies show that chances of sex selection and elimination of daughters are higher when the families already have one or more daughters.

- Track births in your institution/clinic to monitor worsening or improvement in sex ratio at birth .
- Provide information about erring doctors to the Appropriate Authority .
- Form informal groups — “champions on the issue”
- Motivate colleagues to hold discussions on sex selection
- Help to form groups of like-minded doctors to stimulate action on the issue such as the “doctors against sex selection” group , who can provide information and engage in awareness activities of NGOs .
 - Undertake family counselling wherever possible
- Create community level awareness through NGOs and clients
 - Build awareness among ‘doctors of tomorrow’
- Medical students
- Interns, house officers .

for every act to be implemented ,both parties –doctors & authorities should sit and discuss the modalities of the implementation . otherwise the compliance of the act is not successful.

To maintain different forms, records every doctor has to employ one clerical grade employee, for which he/ she has to pay 5000/-as salary. And the stationary costs about 1000/-. This results in hiked charge for scanning test.

As the payment capacity of our rural people is meager ,they can’t cope with the raised fees of the scanning. Inview of this scenario, tone down some regulations regarding record keeping .