APPENDIX-III

Regulations for the Medical Examination of Candidates for admission to the Jammu and Kashmir Police (Gazetted) Service.

These regulations are intended merely for guidance of Medical Examiners and are not meant to restrict their direction in any manner.

- 1. To be passed as medically fir for admission to the J&K Police (Gazetted) Service a candidate must be in good mental and bodily health and free from any physical defect likely to interfere with the efficient performance of the duties of his appointment.
- 2. The candidate's height will be measured as follows:-

He will remove his shoes and be placed against the standard with his feet together, and the weight thrown on the heels and not of the toes of outer sides of the feet. He will stand erect without rigidity and with the heel claves, buttocks and shoulders touching the standard; the chin will be depressed to bring the vertex of the heel level under the horizontal bar, and the height will be recorded in inches and parts of an inch to quarters.

3. The candidate's chest will be measured as follows:-

He will be made to stand erect with his feet together and to raise his arms over his head. The tape will be so adjusted round the chest thus its upper edge touches the interior angles of the shoulders blades behind and its lower edge the upper part of the nipple in front. The arms will then be lowered to hand loosely by the side, and care be taken that shoulders are not thrown upwards or backwards so as to displace the tape. The candidate will then be directed to take a deep inspiration several times, and the maximum expansion of the chest will be carefully noted. The range of expansion should not be less than 2". The minimum and maximum will then be recorded in inches-- 33-35, 34-36 etc.

In recording the measurement, fractions of less than 1/2 inch should not be noted. In this connection the following table is given for the guidance of Medical Officer.

Age last birthday	Height without shoes in inches	<u>C H E S</u> Girth when fully	T Range of expansion not less than
18	62 and under 65	34	2 inch
	65 and under 68	34/1/2	-do-
	68 and under 72	35	-do-
	72 and upwards	35/1/2	-do-
19	62/1/2 and under 65	34/1/4	-do-
	65 and under 68	34/1/4	-do-
	68 and under 70	35	-do-
	70 and under 72	35/1/2	-do-
	72 and upwards	36	-do-
20	62/1/2 and under 65 65 and under 68 68 and under 70 70 and under 72 72 and upwards	34 34 35/1/2 36	-do- -do- -do- -do- -do-

21 and upwards

ards	62/1/2 and under 65	34/1/2	-do-
	65 and under 68	35	-do-
	68 and under 70	35/1/2	-do-
	70 and under 72	36	-do-
	72 and upwards	36/1/2	-do-

- 4. The candidate will also be weighed, and his weight recorded in pounds. Fractions of pound should not be noted.
- The following conditions should be observed in connection with the test for acuteness of vision:-Vision of candidates.
 - (a) No candidate will accepted whose vision is less than:

Better eye.	Worse eye.
V-5/6 Reads 6	V-6/12 Reads 1.
Coostoslas will be	allowed for either ave up to plue

Spectacles will be allowed for either eye up to plus 5.0 or minus 5.0 D; provided that there are no morbid changes in the fundus.

- (b) In myopia if there is a posteion staphyloma the spectacles must not exceed 2.5 D in either eye.
- (c) In case of astignmatism the combined lenses must not exceed 5 Diopters and there should be no fundus changes.
- (d) Squint or any other morbid condition of the eyes of the lids of either eye liable to the risk of aggrevation or recurrence will cause the rejection of the candidate.
- (e) Each eye must have a full field of vision as tested by hand movements.
- (f) Any defect in colour vision will be noted, but will not cause rejection of the candidate.
- (g) In case of doubt or of serious abnormality the opinion of the Opthalmic Specialist will be obtained.
- (h) No candidate will be accepted whose standard of vision does not come up to the specified requirements without the use of the contact glasses.
- 6. The Urine (passes in presence of the Examiner) should be examined and the result recorded.
- 7. The following additional points should be obtained:-
 - (a) that the candidate's hearing in each ear is good and that there is no sign of disease of the ear;
 - (b) that his speech is without impediment;
 - (c) that his teeth are in good order and that he is provided with dentures where necessary for effective mastrication (well filled teeth will be considered as sound).
 - (d) That his chest is well formed and his chest expansion sufficient, and that his heart and lungs are sound;
 - (e) That there is no evidence of abdominal disease;
 - (f) That he is not raptured;
 - (g) That he does not suffer from hydrocelea severe degree of varicocele, varico seveins or piles.
 - (h) That his limbs, hands and feet are well formed and developed and that there is free and perfect motion of all his joints;
 - (i) That he does not suffer from any inveterate etc. skin disease;
 - (j) That there is no congential malformation or defect;
 - (k) That he does not bear traces of acute or chronic disease pointing to an impaired constitutional;

(I) That he bears marks of efficient vaccination and evidence of revaccination within the last 12 months.

When any defect is found it must be noted in the certificate and the medical examiner should state his opinion whether or not it is likely to interfere with the efficient performance of the duties which will be required of the candidate. If the condition is remediable by operation it should be stated.

The following intimation is made for the guidance of the Medical Examiner:-

- 1. In the medical examination of candidates Medical Officers are specially required to use tact and judgement and to take proper precaution to secure privacy with the object of removing any objection which may be made by individuals to stripping.
- Should a candidate object to the Exposure of his person for the detection of haemorrhoide venereal disease hernis and disease of the testicles scrotum and rectum the candidate must if this examination in his case is in the opinion of the Board necessary, be rejected.
- 3. The opinion of the Board accepting or rejecting a candidate is final and cannot be questioned on this ground. The Board is debarred from disclosing to any candidate, permanently unfit, the reasons for this rejection. In these cases their opinion and report is to be treated as strictly confidential and for the information of Government only. Where, however, the Board detects a temporary defect amendable to treatment that candidate may be so informed in order that he may have the defect remedied and present himself for re-examination.
- 4. No person will be deemed qualified for admission to the service who shall not satisfy the Government that he has no disease, constitutional affection or bodily infirmity unfitting him or likely to unfit him, for that service.
- 5. It should be understood that the question of fitness involves the future as well as the present, and the main object of medical examination is to secure continuous effective service and in the case of candidates for permanent appointment to prevent early pension or payment in case of premature death. It is at the same time to be noted that the question is one of the likelihood of continuous effective service and that the rejection of the candidate need not be advised on account of the presence of a defect which is only a small proportion of cases is found to interfere with continuous effectively service.

The candidate must make the statement required below prior to his medical examination and must sign the declaration appended thereto. His attention is specially directed to the warning contained in the note below:-

- 1. State your name in full.
- 2. State your age and birth place.
- (a) have you ever had smallpox intermittent or any other fever, enlargement of suppuration of glands, spitting of blood, asthma, inflammation of lungs, heart disease, fainting attacks, rheumatism or appendetic.
 - (b) any other disease or accident requiring confinement to bed and medical or surgical treatment.

OR

- (c) have you ever been rejected by a Medical Board or a duly constituted Medical Authority?
- 4. When were you last vaccinated?
- 5. Have you or any of your nearer relations been affected with consumption, scrofula, asthama, fits, epilepsy or insanity?
- 6. Have you suffered from any form of nervousness due to overwork any other cause?
- 7. Furnish the following particulars concerning your family:-

I	II	III	IV
Father Share if living and state state of health.	Father's age at death and cause of death	Number of brothers living, their ages and state of health.	Number of brothers dead, their ages and cause of death.
V	VI	VII	VIII
Mother's age if living and state of health.	Mother's age at death and cause of death	Number of sisters living their ages and state of health.	Number of sisters dead, their ages and cause of death.

I declare all the above answers to be to the best of my belief, true and correct and accept the finding of the Board as final.

Candidate's signature

Furnish the following particulars concerning your fa

MEDICAL EXAMINER'S REPORT

<u>S.No.</u>	Questions	Answers	<u>Remarks</u>
1.	Has the declaration of the preceding page been signed by the candidate?		
2.	Are there any evidence of malformatio congential or acquire?	n	
3.	Is he free from scars and has he the fu use of all limbs?	ull	
4.	Are there any indications of a decided cashetic or diathetic state of constitution	on?	
5.	Are there any signs of disease of the nervous system?		
6.	Is the hearing good? Is there any sign of disease of the ears?		
7.	Has the candidate been vaccinated within the last 12 months?		
8.	What is the candidate's vision? R.E.V. with glass reads L.E.V with glasses. Spectacles, if any, R.E.L.E.		
9.	Is the candidate free from stammer or other serious defect of speech?		
10.	Are there any signs of disease of the bones, joints or parts connected therewith?		
11.	Is there any important affection of the skin?		
12.	(a) Are the heart and arteries healthy(b) Blood pressure- Systolic/Diastolic?		
13.	Has the candidate's haemonhoids, vericoele or other affection of veins?		
14.	Is there any sign of disease of the digestive organs?		
15.	Are there any signs of disease of the respiratory organs?		
16.	Is the candidate free from rapture?		
17.	Is there any indication of disease of the genial organs?		

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Is the urine otherwise normal?

- 19. Is there anything in the health of the candidate likely to render him unfit for the efficient discharge of his duties in the service for which he is a candidate?
- 20. Do you consider the candidate in all respects qualified for the efficient and continuous discharge of his duties in the service for which he is a candidate?

Height without shoes, Girth of chest (full inspiration).

Weight President

Dated

Member

Member

NOTE 1:- The candidate will be held responsible for the accuracy of the above statement. By willfully suppressing any information he will incur the risk of losing the appointment and if appointed of forefeiting all claims to superannuation allowance or gratuity.

NOTE 2:- A candidate for direct recruitment should attach with the prescribed application a treasury receipt for an amount of Rs.16 on account of Examination fee which shall not be refundable in the event of the candidates failing to be selected by the Medical Board.

APPENDIX-IV

REGULATIONS RELATING TO THE PHYSICAL EXAMINATION OF CANDIDATES

These regulations are notified for the convenience of candidates and in order to enable them to ascertain the probability of their coming up to the required physical standard. But it must be clearly understood that the Government reverses to themselves an absolute discretion to reject as unfit any candidate whom they may consider on the report of the Medical Board to be physically disqualified and that their discretion, is in no respect limited by these regulations. These regulations are intended merely for the guidance of Medical Examiners and are not meant to restrict their discretion in any way.

- 1. To be passed as fit for appointment a candidate must be in good mental and bodily health and free from any physical defect likely to interfere with the efficient performance of the duties of his appointment.
- 2. In the matter of correlation of age, height and chest girth of candidate it is left to the Medical Board to use whatever correlation figures are considered most suitable as a guide in the examination of the candidates. If there be any disproportion with regard to height, weight and chest girth, the candidate should be hospitalized for investigation and X-Ray of the chest taken before the candidate is declared fir or not fit by the Board.
- 3. The candidates will be weighed and his weight recorded in kilograms; fractions of a half a kilogram should not be noted:-
- 4. The candidate's eye-sight will be tested in accordance with the following rules. The result of each test will be recorded:-
 - (i) General:- The candidate's eye will be submitted to a general examination directed to the detection of any disease or abnormality. The candidate will be rejected if he suffers from any squint or morbid conditions of eyes, eye lids or contiguous structures of such a sort as to render or likely at a future date to render him unfit for service.
 - (ii) Visual Activity:- The examination for determining the acuteness of vision includes two tests, one for distant, the other for near vision. Each eye will be examined separately.

There shall be no limit for minimum naked eye vision but the naked eye vision of the candidates shall, however, be recorded by the Medical Board or medical authority in every case, as it will furnish the basic information in regard to the condition of the eye.

The standards for distant and near vision or without glasses shall be as follows:-

Distant Vision		Near Vision		
Better eye 6/9		worse eye 6/9	Better eye Sn 0 6	worse eye Sn 0
6/8	or	6/12		

Note:- (1) Total amount of Myopia (including the cylinder) shall not exceed 8.00 D in each eye. Total Hypermetropia shall not exceed +6.00 D in each eye.

- (2) Fundus Examination: Whenever possible fundus examination will be carried out at the discretion of the Medical Board and results recorded.
- (3) Colour vision: Colour perception should be graded into higher and lower grade depending upon the size of the aperture in the lantern s described in the table below:-

Grade	Higher grade of Colour perception	Lower grade of colour perception
1. Distance between the lamb candidate.	4.9. meters	4.9 meters
2. Size of aperture	1.3 mm	1.3 mm
3. Time of exposure	5 Sec.	5 Sec.

(iii) Satisfactory colour vision constitute recognition with ease and without hesitation of signal red, signal green and white colours. The use of Ishihara's Plated, shown in good light and suitable lantern like Edrige green's shall be considered quite dependable for testing colour vision. In doubtful cases where a candidate fails to qualify when tested by only one of the two tests, both the tests should be employed.

4. Field of vision:- The field of vision shall be tested in respect of all services by the confrontation method. Where such test gives unsatisfactory or doubtful results the field of vision should be determined on the parimeter.

5. Night Blindness:- Night blindness need not be tested as a routine but only in special cases. No standard test for the testing of night blindness or dark adaption is prescribed. The Medical Board should be given the discretion to improvise such rough tests e.g. recording the visual acuity with reduced illumination or by making the candidate recognise various objects in a darkened room after he/she has been therefor 20 to 30 minutes. Candidates own statements should not always be relied upon but they should be given due consideration.

- 6. Ocular conditions other than visual activity:-
 - (a) Any organic disease or a progressive refractive error which is likely to result in lowering the visual activity should be considered as a disqualification.
 - (b) Trachoma: Trachoma unless complicated shall not ordinarily be a cause for disqualification.
 - (c) One-eyed persons: The employment of one-eyed individuals is not recommended.

7. Blood pressure: The Board will use its discretion regarding Blood Pressure. A rough method of calculating normal maximum systolic pressure is as follows:-

- (i) With young subjects 15-25 years of age the average is about 100 plus the age.
- (ii) With subjects over 25 years of age the general rule of 110 plus half the age seems quite satisfactory.

N.B.:- As a rule any systolic pressure over 140mm and diastolic over 90mm should be regarded as suspicious and the candidate should be hospitalised by the Board before giving their final opinion regarding the candidate's fitness or otherwise. The hospitalization report should indicate whether the rise in Blood Pressure is of a transient nature due to excitement etc. or whether it is due to any organic disease. In all such cases X-Ray and electrocardigraphic examinations of heart and blood urea clearance test should also be done as a routine. The final decision as to the fitness or otherwise of a candidate will, however, rest with the Medical Board only.

Method of taking Blood Pressure:

The mercury manometer type of instrument should be used as a rule. The measurement should not be taken within fifteen minutes of any exercise of excitement. Provided the patient, and particularly his arm is relaxed, he may be either lying or sitting. The arm is supported comfortably at the patient's side in a more or less horizontal position. The arm should be free from the clothes to the shoulder. The cuff completely deflated should be applied with the middle of the rubber over the inner side of the arm, and its lower edge an inch or two above the bend of the elbow. The following turns of cloth bandage should spread evenly over the bag to avoid bulging during inflation.

The brachial artery is located by palpitation at the bend of the elbow and the stethoscope is then applied lightly and centrally over it below, but not in contact with the cuff. The cuff is inflated to above 200mm. Hg. and then slowly deflated. The level at which the column stands when soft successive sounds are heard represents the Sytolic Pressure. When more air is allowed to escape the sound will be heard to increase in intensity. The level at which the well heard clear sound change to soft muffled fading sounds represents the diastolic pressure. The measurements should be taken in a fairly brief period of time as prolonged pressure of the cuff is irritating to the patient and will vitiate the readings. Re-checking, if necessary, should be done only a few minutes after complete deflation of the cuff. Sometime as the cuff is deflated sounds are heard at a certain level; they may disappear as a pressure falls and re-appear at a still lower level. This "Silent gap" may cause error in reading.

8. The urine (passed in presence of the examiner) should be examined and the results recorded. Where a Medical Board finds sugar present in a candidates urine by the usual chemical tests the Board will proceed with the examination with all its other aspects and will also specially note any sings or symptoms suggestive of diabetes. If except for the glycosuria the Board finds the candidate conforms to the standard of medical fitness required they may pass the candidate "fit subject to the glycosuria being non-diabetic " and the Board will refer the case to a specified specialist in Medicine who has hospital and laboratory facilities at his disposal. The Medical Specialist will carry out whatever examinations clinical and laboratory he considers necessary including a standard blood sugar tolerance test and will submit his opinion to the Medical Board upon which the Medical Board will base its final opinion "fit" or "unfit". The candidate will not be required to appear in person before the Board on the second occasion. To exclude the effects of medication it may be necessary to retain, a candidate for several days in hospital under strict supervision.

- 9. The following additional points be observed:-
 - (a) that the candidate's hearing in each ear is good and that there is no sign of disease of the ear. In case it is defective the candidate should be examined by the ear specialist. Provided that if the defect in hearing is remediable y operation or by use of a hearing aid a candidate cannot be declared unfit on that account provided he/she has no progressive disease in the ear;
 - (b) That his/her speech is without impediment;

- (c) That his/her teeth are in good order and that he/she is provided with denture where necessary for effective mastication (well filled teeth will be considered as sound);
- (d) That the chest is well formed and his chest expansion sufficient and that his heart and lungs are sound;
- (e) That there is no evidence of any abdominal disease;
- (f) That he is not raptured;
- (g) That he does not suffer from hydrocele, a severe degree of varicocele, varicose vents or piles;
- (h) That his limbs, hands and feet are well formed and developed and that there is free and perfect motion of all his joints;
- (i) That he does not suffer from any inveterate skin disease;
- (j) That there is no congenital malformation or defect;
- (k) That he does not bear traces of acute or chronic disease pointing to an impaired constitution;
- (I) That he bears marks of efficient vaccination; and
- (m) that he is free from communicable disease.

10. Radiography examination of the chest should be done as a routine in all cases for detecting any abnormality of the heart and lungs, which may not be apparent by ordinary physical examination.

11. When any defect is found it must be noted in the certificate and the medical examiner should state his opinion whether or not it is likely to interfere with the efficient performance of the duties which will be required of the candidate.

Note:- Candidates are warned that there is no right of appeal from a Medical Board, special or standing, appointed to determine their fitness for the above service. If, however, Government are satisfied on the evidence produced before them of the possibility of an error of judgement in the decision of the First Board, it is open to Government to allow an appeal to a second Board. Such evidence should be submitted within one month of the date of the communication in which the decision of the first Medical Board is communicated to the candidate, otherwise no request for an appeal to a second Medical Board, will be considered.

If any medical certificate is produced by a candidate as a piece of evidence about the possibility of an error of judgement in the decision of the First Board, the certificate will not be taken into consideration unless it contains a note by the medical practitioner concerned to the effect that it has been given in full knowledge of the fact that the candidate has already been rejected as unfit for service by the Medical Board.

MEDICAL BOARD'S REPORT

The following intimation is made for the guidance of the Medical Examiner:-

1. The standard of physical fitness to be adopted should make on due allowance for the age and length of service, if any, of the candidate concerned.

No person will be deemed qualified for admission to the Public Service who shall not satisfy the appointing authority, as the case may be that he has no disease, constitutional affection or bodily infirmity unfitting him, or likely to unfit him for that service.

It should be understood that the question of fitness involves the future as well as the present and that one of the main objects of medical examination is to secure continuous effective service, and in the case of candidates for permanent appointment to prevent early pension or payments in case of premature death. It is at the same time to be noted that the question is one of the likelihood of continuous effective service, and that rejection of a candidate need not be advised on account of the presence of a defect which is only a small proportion of cases is found to interfere with continuous effective service.

A lady doctor will co-opted as a member of the Medical Board whenever a women candidate is to be examined.

The report of the Medical Board should be treated as confidential.

In case where a candidate is declared unfit for appointment in the Government Service the ground for rejection may be communicated to the candidate in broad terms without giving minute details regarding the defect pointed out by the Medical Board.

In case where a Medical Board considers that a minor disability disqualifying a candidate for Government Service can be cured by treatment (medical or surgical) a statement to that effect should be recorded by the Medical Board. There is no objection to a candidate being informed of the Board's Opinion to this effect by the appointing authority and when a cure has been effected it will be open to the authority concerned to ask for another Medical Board.

In the case of candidates who are to be declared "Temporary Unfit" the period specified for re-examination should not ordinarily exceed six months at the maximum. On re-examination after the specified period these candidates should not be declared temporary unfit for a further period but a final decision in regard to their fitness for appointment or otherwise should be given.

(a) Candidate's statement and declaration:-

The candidate must take the statement required below prior to his Medical Examination and must sign the declaration appended thereto. His attention is specially directed to the warning contained in the Note below:-

- 2. State your age and birth place: _____

3.	intermitten enlargeme glands, spi heart disea attacks, rh (b) any other of requiring of	ever had smallpox, at or any other fever, nt or suppuration of tting of blood, asthma, ase, lung disease, faintin eumatism, appendicitis? disease or accident confinement to bed cal or surgical treatment				
4.	When were you	u last vaccinated ?				
5. Have you or any of your near relations been afflicted with consumption, scrofula, gout, asthma, fits, epilepsy or intensity ?						
6.	6. Have you suffered from any form of nervousness due to over work or any other cause ?					
7.	Furnish the foll concerning you	owing particulars Ir family:-				
	's age if & state of	Father's age at death and cause of death.	No. of brothers living, their age and stage of health.	No. of brothers dead their age at and cause of death.		
	's age if & state of	Mother's age at death and cause of death.	No. of sisters living, their age and stage of health.	No. of sisters dead their age at and cause of death.		
8.	Have you been Medical Board	examined by a				
9.	If answer to the above id yes please state what service/services you were examined for ?					
10.	Who was the e	xamining authority?				
11.	When and whe Board held ?	re was the Medical				

12. Result of the Medical Board's Examination, if communicated to you or if known ?

I declare all the above answers to be, to the best of my belief, true and correct.

Candidate's signature ______ signed in my presence.

Signature of the Chairman of the Board

Note:- The candidate will be held responsible for the accuracy of the above statement. By willfully suppressing any information he will incur the risk of losing the appointment and, if appointed, of forfeiting all claims to Superannuation Allowance or Gratuity.

(b) Report of Medical Board on (name of candidate) physical examination.

1.	Genera	l Development:	Good	Fa	ir
	Poor				
	Nutritio	n: Thin	_ Average		Obese
	Height	(without shoes)		Weight _	
	Best we	eight v	vhen		any recent change
	In weig	ht	Temperate	ure	
	Girth of	test:			
	(1)	(After full inspection)			
	(2)	(After full expiration)			
2.	Skin:	Any obvious disease			
3.	Eyes:				
		Any disease Night blindness Defect in colour vision Field of vision Visual acuity			
		Nacked eye	-	Sph. C	yl. Axix
	Vision	RE LE			
Near V	ision	RE LE			

	Ryper	matropia (Manifest) RE/LE					
4.	Ears i	nspection	Hearing right ear				
	Left e	ar					
5.	Gland	s Thy	/roid				
6.	Condi	ion of teeth					
7.		atory system: Does physica respiratory organs? If yes, exp					
8.	Circula	atory System:					
	(a)	Heart: Any organic lesions?			Rate		
		After hoping 25 times					
		2 minutes after hopping					
	(b)	Blood Pressure: Systolic	Diastolic _				
9.	Abdor	nen: Girth	Tenderness				
	Hernia	Hernia					
	(a) Pa	alpable: Liver	Spleen		_		
	Ki	dneys	Tumours		_		
	(b) H	emorrhoids	Fistula		-		
10.	Nervo	us System: Indication of nervo	ous or mental disabilities				
11.	Loco-I	Motor System: Any abnormalit	У				
12.	Genito	Urinary System: Any evidence	e of Hydrocele, Varicoce	le etc.			
	Urine	Analysis:					
	(a)	Physical appearance.					
	(b)	Sp. Gr					
	(c)	Albumen					
	(d)	Sugar					
	(e)	Castes					
	(f)	Cells					

13.	Report of X-Ray	Examination	of Chest.
13.	Report of X-Ray	Examination	of Chest.

14. Is there anything in the health of the candidate likely to render him unfit for the efficient discharge of his duties in the service for which he is a candidate.

Note: The Board should record their findings under one of the following three categories:-

1. Fit.

2. Unfit on account of _____

3.	Temporary	unfit on account of	

Place	Chairman
-------	----------

Member _____

Dated _____

Member