# **PROFESSIONAL PROTECTION SCHEME**

Only members of Indian Medical Association of Kerala State Branch are eligible to become the members of the scheme.

### • Jurisdiction

Any claim arising within the jurisdiction of Kerala State alone will be entertained by the Scheme.

## • How to join the Scheme?

Membership application forms are available with State Office bearers of IMA and the President/Secretary of IMA Branches. The Application form has to be promoted by the President/Secretary of the IMA Branch and sent to the Hon. Secretary of P P Scheme. The membership in the Scheme will be finalised only after verification of IMA membership and clearance from IMA State Headquarters. A member can join for one or more units of the scheme to get additional benefits in multiples and the membership fee for each unit is as follows:

#### Membership Fee :-

First Year	Rs. 2000/- (if no claim)		
Second Year	Rs. 1900/-		
Third Year	Rs. 1800/-(")		
Fourth Year	Rs. 1700/-(")		
Fifth Year	Rs. 1600/-(")		
Sixth Year and thereafter	Rs. 1500/-(")		

#### Multiple units:-

An IMA member can have more than one unit of PPS membership at the rates shown above.

#### Enhanced protection unit:-

An IMA member, who is also holding at least one unit of PP Scheme can join as a member of Enhanced Protection Unit by paying a membership fee of Rs 10000/-. Continuous membership can be obtained every year by the prior renewal on payment of the same amount if no compensation was given by the scheme during the period or immediately after the scheme pays a compensation, irrespective of the amount of compensation given.

#### • Renewal of Membership

Renewal intimation letter is sent from the Office before one month of due date. The renewal form should be forwarded by the branch president / secretary. Copy of the

forwarding letter obtained from the branch president / secretary can be used for renewal of all the schemes during the IMA year. One month grace period from the due date is allowed by the Managing Committee.

Remember the Joining date, Membership Number and Renewal the Membership in IMA and PPS before the due date.

# • Benefits

Litigations will be fought up to the Supreme Court of India, to uphold the dignity of Modern Medical Fraternity, subject to the decision of the Managing Committee of the Scheme. Scheme will cover social media related litigations also.

# • Dropping Out from the Scheme

Members who are not renewing their membership on the due date, a second intimation letter will be sent after 15 days, under certificate of posting, with a copy each to the District Representative of PP Scheme and to the Branch President and Secretary. If the member still does not renew his membership, a registered letter is sent.

Even after 15 days from the date of sending the registered letter if the member is not renewing the Membership, the member will be dropped from the Scheme. The dropped member can join the scheme as a new member by remitting the required membership.

# • What to do in case any legal action is initiated against Doctors?

- Never panic.
- To inform the District Representative of PP Scheme immediately, if any professional problem arises.
- Send the following details to the Secretary within one week of the receipt of notice/ plaint/ petition/ complaint, with a copy to your District Representative:
  - The Membership No. in PP Scheme and details of IMA Membership.
  - Copy of the notice/ plaint/ petition/ complaint and copy of summons/notice in case of Court cases.
  - Copy of the case-sheet/case records.
  - A detailed treatment summary with investigation results and giving explanations as needed. Extracts from standard text books or journals in support of the treatment may also be furnished giving name of book, author, edition, volume, page no. etc.
  - A reply in one's own words regarding the allegations contained in the notice or complaint, given paragraph wise.
  - Full contact address including phone numbers, fax no., e-mail, mobile no, etc. should be given without fail.
  - Please do not send any reply by the member or through any advocate without the permission of PP Scheme Secretary otherwise the member will lose the coverage under PP Scheme.
- If the case does not fall within the Scheme, a DD for
  - Rs.2000/- for drafting reply for advocate Notice (In favour of PP Scheme of IMA, Kerala State payable at 'ERNAKULAM'),

- Rs.3500/- for drafting a detailed reply to complaint in court (for IMA doctors who are non-members of PP Scheme),
- Rs. 4000/- for doctors who are non-IMA and non-PP Scheme members,
- Rs. 4000/- for institutions and out of State cases.

#### Address for communications:

Dr. SAJEEV KUMAR P., Hon.Secretary, PPS of IMA KSB, IMA Periyar House, 3rd Floor, Door No:15/168 B-7, Cubicle No: 5, East Desom, Aluva, Ernakulam - 683102. Mob: 9287274922, 9287274896, E-mail: drsajeevani@gmail.com



# PROFESSIONAL PROTECTION SCHEME OF IMA KERALA STATE

# **Application Form**

Name							
Permanent Address							
						-	
District					Pin:		
Email ID							
Mobile Number							
Correspondence Address							
District					Pin:		
Email ID							
Mobile Number							
Aadhaar No.							
Gender.							
Father Name							
Name of Spouse							
Age	Date of Birth:						
Medical Council Regs. No							
Year Of Registration							
Name Of Medical Council							
Date Of Joining IMA							
IMA Life Membership No							
IMA Local Branch							
Current Designation							
Qualification	Name of Institution	on	Year o	of Passing	Authority		
Professional Details	Hospital Name	Desig	nation	Address			Contact

		DECLARATION				
I	a member of	branch of IMA, do hereby declar	e that the			
	details furnished above are true and correct and that I will abide by the Rules and Regulations of the Professional					
		ed on 27-06-93, 12-11-94, 10-11-96, 22-11-97, 14-11-98, 27	-11-99 ana			
09-11	2013.					
	CERTIFICATE FR	OM BRANCH PRESIDENT/SECRETARY				
I DrPresident/Secretary of						
	Branch of IMA. do hereby certify that Dri					
Membe	er of	Branch.				
Signatı	ure of Branch President/Secretary:	В	ranch Seal			
L		INSTRUCTIONS				
4. DD m 5. Mem 6. If not (ii)A deta 7. Reply 8. A me	ay be payable at ERNAKULAM bership fee once paid will not be refunded. ice is received by a member, forward the follow ailed note on the incidents (iii) A photocopy of 7 to the notice will be made only after getting in mber can avail the benefit of one or more units					
9. Mem	bership fee per unit :	D= 2000 /	_			
	First year Second year	Rs. 2000/- Rs. 1900/- (if no legal assistance)	_			
	Third year	Rs. 1800/- (if no legal assistance)				
	Fourth year	Rs. 1700/- (if no legal assistance)				
	Fifth year	Rs. 1600/- (if no legal assistance)				
	Sixth year and onwards	Rs. 1500/- (if no legal assistance)				
	nbership for Enhanced Protection unit is Rs. 10 lication form duly filled with the Cheque/DD/C					
	Dr. Sajeev Kumar P	Email id: ppsimaksb@gmail.com				
	IMA Periyar House					
	3 <sup>rd</sup> Floor, Door No: 15/168 B7	Phone: 0494 - 2444 777				
	Cubicle No: 5	Mob: 9287274922 9287274896				
	East Desom, Aluva					
	Ernakulam – 683 102	Secretary: 8111 916 263				
	ïce use only					
Merr	nb. No. allotted:	Application form: Complete/Incomplete				
Date	of Receipt:	Remarks:				
Date	e of Commencement of the membership					
	Hon. S	Signature of ecretary of P.P. Scheme				