

THE MEDICAL TERMINATION OF PREGNANCY REGULATIONS, 1975

G.S.R. 2544, dated 10th October, 1975. - In exercise of the powers conferred by Sec.7 of the Medical Termination of Pregnancy Act, 1971 (34 of 1971), the Central Government hereby makes the following Regulations, namely:

1. **Short title, extent and commencement.**-These regulations may be called the Medical Termination of Pregnancy Regulations, 1975.

(2) They extend to all the Union Territories.

(3) They shall come into force on the date of their publication in the Official Gazette.

2. **Definitions.** - In these regulations, unless the context otherwise requires, -

(a)"Act" means the Medical Termination of Pregnancy Act, 1971 (34 of 1971)

(b)"Admission Register" means the register maintained under regulation 5 ;

(c)"Approved place" means a place approved under rule 4 of the Medical Termination of pregnancy Rules, 1975;

(d) "Chief Medical Officer of the State' means the Chief Medical Officer of the State, by whatever name called;

(e)"Form" means a form appended to these regulations;

(f)"Hospital" means a hospital established or maintained by the Central Government or the Government of the Union Territory;

(g) "Section" means a section of the Act.

3. **Form of certifying opinion or opinions.**- (1)Where one registered medical practitioner forms or not less than two registered medical practitioners form such opinion as is referred to in sub-section (2) of Sec.3 or Sec.5, he or they shall certify such opinion in Form 1.

(2) Every registered medical practitioner who terminates any pregnancy shall, within three hours from the termination of the pregnancy certify such termination in Form 1.

4. **Custody of forms.** -

(1) The consent given by a pregnant woman for termination of her pregnancy, together with the certified opinion recorded under Sec. 3 or Sec.5, as the case may be and the intimation of termination of pregnancy shall

be placed in an envelope which shall be sealed by the registered medical practitioner or practitioners by whom such termination of pregnancy was performed and until that envelope is sent to the head of the hospital or owner of the approved place or the Chief Medical Officer of the State, it shall be kept in the safe custody of the concerned registered medical practitioner or practitioners, as the case may be.

(2) On every envelope referred to in sub-regulation (1), pertaining to the termination of the pregnancy under Sec. 3, there shall be noted the serial number assigned to the pregnant women in the Admission Register the name of the registered medical practitioner or practitioners by whom the pregnancy was terminated and such envelope shall be marked 'secret'.

(3) Every envelope referred to in sub-regulation (2) shall be sent immediately after the termination of the pregnancy to the head of the hospital or owner of the approved place where the pregnancy was terminated.

(4) On receipt of the envelope referred to in sub-regulation (3), the head of the hospital or owner of the approved place shall arrange to keep the same in safe custody.

5) Every head of the hospital or owner of the approved place shall send to the Chief Medical Officer of the State, a weekly statement of cases where medical termination of pregnancy has been done in Form II.

(6) On every envelope referred to in sub-regulation (1), pertaining to a termination of pregnancy under Sec. 5, shall be noted the name and address of the registered medical practitioner by whom the pregnancy was terminated and the date on which the pregnancy was terminated and such envelope shall be marked "secret".

Explanation. -The columns pertaining to the hospital or approved place and the serial number assigned to the pregnant woman in the Admission Register shall be left blank in Form 1 in the case of termination performed under Sec. 5.

(7) Where the pregnancy is not terminated in an approved place or hospital, every envelope referred to in sub-regulation (6) shall be sent by registered post to the Chief medical Officer of the State on the same day on which the pregnancy was terminated or on the working day next following the day on which the pregnancy was terminated:

Provided that where the pregnancy is terminated in an approved place or hospital, the procedure provided in sub-regulations (1) to (6) shall be followed.

5. Maintenance of Admission Register. -

(1) Every head of the hospital or owner of the approved place shall maintain a register in Form III for recording therein the admissions of women for the termination of their pregnancies.

(2) The entries in the Admission Register shall be made serially and a fresh serial shall be started at the commencement of each calendar year and the serial number of the particular year shall be distinguished from the serial number of other years by mentioning the year against the serial number, for example, serial number 5 of 1972 and serial number of 1973 shall be mentioned as 5/1972 and 5/1973.

(3) The Admission Register shall be a secret document and the information contained therein as to the name and other particulars of the pregnant woman shall not be disclosed to any person.

6. Admission Register not to be open to inspection.-The Admission Register shall be kept in the safe custody of the head of the hospital or owner of the approved place or by any person authorised by such head or owner and save as otherwise provided in sub regulation (5) of regulation 4 shall not be open to inspection by any person except under the authority of :

(i) in the case of a departmental or other enquiry, the Chief Secretary to the Government of a Union Territory;

(ii) in the case of an investigation into an offence, a Magistrate of the first class within the local limits of whose jurisdiction the hospital or approved place is situated;

(iii) in the case of suit or other action for damages, the District Judge within the local limits of whose jurisdiction the hospital or approved place is situated.

Provided that the registered medical practitioner shall, on the application of an employed woman whose pregnancy has been terminated, grant a certificate for the purpose of enabling her to obtain leave from her employer:

Provided further that any such employer shall not disclose this information to any other person.

7. Entries in registers maintained in hospital or approved place. -No entry shall be made in any care-sheet, operation theatre register, follow-up card or any other document or register (except the Admission Register) maintained at any hospital or approved place indicating therein the name of the pregnant woman and reference of the pregnant woman shall be made therein by the serial number assigned to such woman in the Admission Register.

8. Destruction of Admission Register and other Papers.- Save as otherwise directed by the Chief Secretary to the Union Territory Administration or for in relation to any proceeding pending before him, as directed by a District Judge or Magistrate of the first class, every Admission Register shall be destroyed on the expiry of a period of five years from the date of the last entry in that Register and other papers on the expiry of a period of three years from the date of the termination of the pregnancy concerned.

FORM I
(See Regulation 3)

.....
.....

(Name and qualification on the Registered Medical

.....
.....

Practitioner in block letters)

.....
.....

(Full address of the Registered Medical Practitioner)

I.....
.....

Name and qualification of the Registered Medical Practitioner in block letters)

.....
.....

.....
(Full address of the Registered Medical Practitioner) hereby certify that *I/We/am/are of opinion, formed in good faith, that it is necessary to terminate the pregnancy of

.....
(Full name of pregnant woman in block letters)
resident of

.....
.....

(Full name of pregnant woman in block letters)
for the reason given below**,

*I/ We hereby give intimation that *I/we terminated the pregnancy of the woman referred to above who bears the serial No..... in the Admission Register of the Hospital/ approved place.

Medical Practitioner.

Signature of Registered

Medical Practitioner.

Signature of Registered

Place:

Date:

* Strike out whichever is not applicable the one which is appropriate.

** Of the reasons specified items (i) to (v) write.

(i) In order to save the life of the pregnant woman.

(ii) In order to prevent grave injury to the physical or mental health of pregnant woman.

(iii) In view of the substantial risk that if the child was born it would suffer from such physical or mental abnormalities as to be seriously handicapped

(iv) As the pregnancy is alleged by pregnant woman to have been caused by rape.

(v) As the pregnancy has occurred as a result of failure of any contraceptive device or method used by the married woman

or her husband for the purpose of limiting the number of children.

NOTE.- Account may be taken of the pregnant women's actual or reasonably foreseeable environment in determining whether the continuance of a pregnancy would involved a grave injury to her physical or mental health.

Medical Practitioner

Signature of the Registered

Registered Medical Practitioner

Signature of the

Place:

Date:

FORM II

[See Regulation 4(5)]

1. Name of the State.
2. Name of Hospital/ approved place.
3. Duration of pregnancy (give total number only);
 - (a) upto 12 weeks.
 - (b) Between 12-20 weeks.
4. Religion of woman:
 - (a) Hindu
 - (b) Muslim
 - (c) Christian
 - (d) Others
 - (e) Total
5. Termination with acceptance of contraception:
 - (a) Sterilization
 - (b) I.U.D.
- (6) Reasons of termination: (give total number under each sub-head);
 - (a) Danger to life of the pregnant woman.
 - (b) Grave injury to the mental health of the pregnant woman.
 - (c) Grave injury to the physical health of the pregnant woman.
 - (d) Pregnancy caused by rape.
 - (e) Substantial risk that if the child was born it would suffer from such physical or mental abnormalities was to be seriously handicapped.
 - (f) Failure of any contraceptive device or method.

*Signature of the Officer
in-charge with date.*

FROM III
(See Regulation 5)
Admission Register

(To be destroyed on the expiry of five years from the date of the last entry in the Register)

S.No.	Date of Admission	Name of Patient	Wife/Daughter	Age	Religion
1	2	3	4	5	6
Address	Duration of Pregnancy	Reasons of which pregnancy is terminated	Date of Termination of pregnancy	Date of discharge of patient	Result and remarks
7	8	9	10	11	12
Name of Registered Medical Practitioner (s) by whom the opinion is formed			Name of Registered Medical Practitioner by whom Pregnancy is terminated		