

SCHEDULE FOR REIMBURSEMENT OF HOSPITALISATION EXPENSES

1. Hospitalisation expenses will be reimbursed to Award Staff in the bank to the extent of 100 percent in case of self and 75 percent in case of dependent members of family subject to the procedures for reimbursement of hospitalisation expenses as enumerated hereunder:

(a) Hospitalisation Charges to the extent stated above will be reimbursed in case of all ailments and major accidents which require hospitalisation.

(b) A workman or his dependent family member(s) will be considered to have been hospitalised only if they are admitted as indoor patient(s) in the hospital in respect of diseases/accidents as mentioned above in sub-Para (a). However, cases where the patient is admitted as an out-patient and discharged on the same day after surgical procedures involving advanced techniques may also be considered for reimbursement of hospitalisation expenses.

(c) Medical expenses incurred for the hospitalisation will be reimbursed on the strength of bills/vouchers to the extent of 100% in case of self and 75% in case of family members subject to limits prescribed here under.

2. Definition of family:

For the purpose of medical facilities: The expression 'family of an employee shall mean the employee's spouse, wholly dependent children including dependent step children and legally adopted children and parents wholly dependent on the employee and ordinarily residing with the employee.

Notes:-

(i) The term 'wholly dependent child/parent' shall mean such relative having a monthly income not exceeding Rs. 2,550/- p.m. If the income of one of the parents exceeds Rs. 2,550/- p.m. or the aggregate income of both the parents exceeds Rs. 2,550/- p.m., both the parents shall not be considered as wholly dependent on the employee.

(ii) A married female employee may include her natural parents or parents-in-law under the definition of family - but not both - provided that the parents/ parent's in-law are ordinarily residing with and wholly dependent on her and satisfy the income criteria as stated above.

3. The reimbursement of hospitalisation expenses will be restricted to the following charges:

Sr.No.	Details	Extent of reimbursement
3.1(a)	Hospital Registration Fees	100% for self and 75% for dependent family members of the amount actually incurred or Rs. 200/- whichever is lower.
3.1(b)	(b) Surcharge/tax on hospital bills	Proportionate to the extent of the bill passed by the bank
3.2	Charges for bed per day	100% for self and 75% for (excluding boarding charges) dependent family members of the amount actually incurred or Rs. 400/- whichever is lower.
3.3	ICU/CCU/Neo-natal Nursery	100% for self and 75% for dependent family members of the amount actually incurred or Rs. 500/- per day, whichever is lower. This is in addition to bed charges.
3.4	Diagnostic charges, Pathological tests, ECGs, etc.	As per Annexure-I hereto
3.5	Medicines, drugs, injections (including disposable syringes, bandage and dressing materials, etc. except tonics/vitamins. (However, tonics/vitamins which are prescribed by the attending doctor and certified as essential for the period of hospitalisation, may be considered for reimbursement.)	100% or 75% of actual expenses as the case may be.
3.6	Operation charges, etc.	As per Annexure-II hereto

3.7 Physician's and Consultant's fees per visit: 100% for self and 75% for dependent family members of the amount actually incurred or the amount as mentioned below against each item, whichever is lower

	MAJOR CLASS 'A CITIES	OTHER PLACES
VISIT AT THE CHAMBER First Consultation	200	120
Subsequent Consultations	75 Rs. Per Visit	60 Rs. Per Visit
VISIT AT RESIDENCE In case of emergency Leading to Hospitalisation	300	190
Second Consultation	225	150
Subsequent Consultations	150	100
VISIT MADE BY SPECIALISTS AT THE HOSPITAL SPECIAL VISIT During the day time	125	85
During the night time	300	150
Routine visits	125	85

MAJOR A CLASS CITIES: Delhi, Kolkata, Ahmedabad, Bangalore & Hyderabad

4. The workmen or members of their families (as the case may be) are expected to secure admission in a Government/Municipal Hospital or any 'private' hospital (i.e. hospitals under the management of a trust, Charitable Institution or a religious mission). The reimbursement will be restricted to the percentage applicable to the workman/dependent family member, i.e. 100% or 75% of the charges applicable to the lowest paying bed in such hospitals according to hospital rules or the maximum amounts mentioned above, whichever is lower.
5. Normally, the workman and members of his family should avail of services of hospital as mentioned in paragraph 4 above. However, if he feels, that it is unavoidable to seek services of a private nursing home/hospital, he can do so in one of the hospitals/nursing homes, approved by the bank. Reimbursement in such cases will, however, be restricted to the extent of the amount which would have been reimbursable in case of admission to a public or private hospital as mentioned in paragraph 4 above.
6. Medical expenses incurred within 30 days of 'pre' and post hospitalisation period on medical advice, on account of the ailment/disease for which the person was hospitalised, will be considered as hospitalisation expenses for reimbursement purpose. However, in cases of hospitalisation involving special or major operations, medical expenses incurred for a period not exceeding 45 days of post hospitalisation will be considered for reimbursement, subject to medical advice.
7. Charges for engaging a nurse/attendant will not be reimbursed. However, nursing charges, if any charged by hospital authorities in respect of days spent in ICU/ CCU/neonatal nursery may be considered for reimbursement on the basis of certificate issued by the hospital authorities and in consultation with bank's Medical Officer. Reimbursement in such cases shall be 100% for workmen and 75% for family members of the actual charges.
8. Maternity: Hospitalisation charges in connection with maternity will not be reimbursable. However, the expenditure incurred by an employee in cases involving operative interference because of complicated labour and caesarean operation and subsequent hospitalisation thereto will be reimbursed under the hospitalisation scheme to the extent of expenditure incurred in excess of normal maternity charges and consequent hospitalisation thereto subject to the condition that such reimbursement shall be 70% of the amount actually incurred or the limits as per Annexure II hereto, whichever is less.
9. The purchase of drugs/medicines will be restricted to approved chemists and arrangements will be made by banks wherever possible to make direct payments to the chemists.
10. Banks will have discretion to refuse payment of bills in cases where they are not satisfied about the genuineness of the bills.
11. Ambulance charges for removing the workman or his dependent family members from residence to the hospital/nursing home or from hospital/nursing home to residence on discharge or from one hospital/nursing home to another hospital/nursing home within the urban agglomeration or municipal limits may be reimbursed in full. Actual expenses

incurred on conveyance by mode other than ambulance shall be reimbursed subject to the maximum as under:-

- (i) By public taxi - Actual subject to maximum of Rs. 150/- per trip.
- (ii) By auto rickshaw - Actual subject to maximum of Rs. 75/- per trip.

In case the patient is to be moved to a hospital/nursing home outside the urban agglomeration/municipal limits, then the expenses incurred on conveyance may be reimbursed at the rate of Rs. 5.00 per kilometer, with a maximum of Rs. 1000/- per trip or the amount actually incurred, whichever is the least. Normally, services of an ambulance should be availed of. Where ambulance is not available or the facility of ambulance is not established, public mode of transport i.e. taxi/auto rickshaw could be used. The bank shall consider such claims on merits and facts. Abuse of the facility will be dealt with treating such claims as acts of gross misconduct.

12. Medical Expenses incurred in respect of the following diseases which need domiciliary treatment as may be certified by the recognised hospital authorities and bank's medical officer shall be deemed as hospitalisation expenses and reimbursed to the extent of 100% in case of a workman and 75% in the case of his family.

Cancer, Leukemia, Thalassaemia, Tuberculosis, Paralysis, Cardiac Ailment, Pleurisy, Leprosy, Kidney Ailment, Epilepsy, Parkinson's Disease, Psychiatric disorder and Diabetes. Hepatitis-B, Hepatitis-C, Hemophilia, Myaestheniagravis, Wilson's disease, Ulcerative Colitis, Epidermolysis bullosa, Venous Thrombosis (not caused by smoking), Aplastic Anemia, Psoriasis and Third Degree Burns.

Note:-

(i) The cost of medicines etc. in respect of domiciliary treatment shall be reimbursed for the period stated in the Specialist's prescription. If no period is stated, the prescription for the purpose of reimbursement shall be valid for a period not exceeding 90 days.

(ii) Expenses incurred on radiotherapy and chemotherapy in the treatment of cancer and leukemia shall be considered for reimbursement under domiciliary treatment to the extent of 100% in case of a workman and 75% in the case of his family.

13. The medical aid and reimbursement of expenses under the hospitalisation scheme under this Settlement will also be available for medical treatment under the recognised systems of medicines, viz. Ayurvedic, Unani, Homeopathy and Naturopathy if such treatment is taken in a clinic/hospital recognised by the Central/State Government. Further, reimbursement shall be limited to such expenses within the prescribed ceilings as would have been reimbursable in case the treatment was taken in a Government/Municipal Hospital, subject to the overall limits under the scheme, i.e. 100% of approved expenses for self and 75% in case of family.

14. Some hospitals are charging on the basis of 'package' for specialised treatment for diseases pertaining to Heart, Kidney, Coronary, etc. These package charges generally include

all charges pertaining to a particular treatment/procedure including admission charges, accommodation charges, ICU/ICCU charges, monitoring charges, operation charges, anesthesia charges, monitoring charges, procedural charges/Surgeon's fee, cost of disposables, cost of consumables like catheters, guide wires, etc., surgical charges and cost of medicine used during hospitalisation, related routine investigations, physiotherapy charges etc. In the following cases, package charges will be reimbursed to the extent of 100% in the case of self and 75% in the case of dependent members of family, subject to the limits specified here below:

- (a) Coronary Bypass Surgery Rs.1,40,000/- (b) Coronary Angiography Rs. 15,000/
(c) Angioplasty/Stentoplasty Rs. 70,000/- (d) Kidney Transplant Rs.1,60,000/-
(e) Liver Transplant Rs.2,00,000/-

Note:

(i) For the above ailments, workmen employees can claim either as per schedule of expenses prescribed or package charges whenever the treatment is taken under package charges scheme.

(ii) In the case of stentoplasty, cost of medicated stunts(s), wires/balloon, implanted during surgery may be reimbursed at the rate of 75% for family members and 100% for workman himself at rates not exceeding the rates applicable to lowest paying bed of AIIMS, New Delhi, in addition to the package charges indicated above.

(iii) Liver transplant charges are not reimbursable in cases where damage to the liver has been caused by alcoholism.

15. Treatment Abroad: The procedure to be followed in respect of reimbursement of expenses incurred by workmen and their families on treatment abroad shall be as laid down in Annexure - III hereto.

HOSPITALISATION CHARGES**ANNEXURE I - SCHEDULE FOR REIMBURSEMENT OF PATHOLOGICAL INVESTIGATION CHARGES**

100% for self and 75% for dependent family members of the amount actually incurred or the amount as mentioned below against each item, whichever is lower.

CLINICAL PATHOLOGY**URINE-EXAMINATION**

Rs.

Urine Routine / Urine for Albumin / Urine Bile Pigment and Salt / Urine Urobilinogen / Urine Occult Blood	40
Urine for 17 Ketosteroids	360
Urine Culture / Urine for Column Count Test Sensitivity Test	115
Urine for Acid Fast Bacilli (T B Culture)	150
Urine Total Proteins / Urine Sodium / Urine Chloride	105
Bence Jones Protein	80
STOOL EXAMINATION	50
Stool Routine / Stool Occult Blood	40

HAEMATOLOGY**EXAMINATION OF BLOOD**

Blood Count with Indices (Hb, TLC, DLC) / RBC and Hb with Indices / Platelet Count / R.B.C. Fragility Test	70
Blood Count without Indices (Hb, TLC, DLC) / Bleeding and Coagulation time (BT CT) / Clot Retraction Time /	65
RBC and Hb without Indices / Total WBC and Differential Count (TC/DC) /	55
Blood Smears for parasites / Absolute Eosinophil Count / Packed Cell Volume (PCV)	40
Peripheral smear examination / Reticulocyte Count	45
Blood for Microfilaria	100
Prothrombin Time	75
Erythrocytes Sedimentation Rate (Westergren's method) / Sedimentation Rate (Both Methods) ESR	30
Hb, TLC, DLC, ESR, Haemogram	85
Blood Culture/ Clot	160
Culture	
Glucose Phosphate Dehydrogenase (G & PD)	150
L.E. Cell	95
Bone Marrow Smear Examination	205
Partial Thromboplastin	135

BLOOD BANK

Coomb's Test direct (for coating antibodies)	150
Coomb's Test (for complete and incomplete indirect antibodies)	200

Blood Grouping and Rh Factor only (not for matching) for Non-maternity cases	65
Blood Transfusion per Bottle and Donor's fees (including Pathologist's attendance and cross-matching)	360
Packed Cell Preparation	255

BIOCHEMISTRY

Blood Urea / Calcium / Phosphorus / Phosphatase / Sodium / Potassium each / Blood Urea Nitrogen / Serum Proteins or Plasma Proteins / Blood Chlorides (S Cl)	100
Urea Clearance Test / Creatinine Clearance Test / Glucose 6 Phosphate Dehydrogenase	170
Serum Proteins Electrophoresis	200
Blood for Fibrinogen	110
Blood for Creatinine / Serum Alkaline Phosphatase / Serum Glutamic Pyruvic Transaminase (SG PT) / Cholesterol / Serum Glutamic Oxalic Transaminase (SG OT)	75
Blood Uric Acid	100
Blood Sugar Curve (Glucose Tolerance Test) GTC or GTT	280
CO ₂ Combining Power of Plasma / Serum Iron (S Fe) / Serum Lipase	130
Blood Protein Bound Iodine (PBI)	300

Serum Sodium (S Na) / Serum Potassium (S K) / Serum Calcium (S Ca) / Serum Phosphorous (S.P.)	85
Serum Acid Phosphatase	135
Serum Iron Studies	220
Serum Anylase	195
C P K	315

Serum Lactic Dehydrogenase (LDH)	145
Serum Lactic Dehydrogenase with Isoenzyme	375
SMA 12-2 (14 Blood Chemistry)	625

HISTOPATHOLOGY

Smear Analysis / Body Fluids-C.S.F./Plural/Ascitic, etc.	60
Chemistry, Sugar, Protein, etc.	170
Malignant Cells	135

BACTERIOLOGY & SEROLOGY

Cold Agglutination Test for Virus Pneumonia / Vibro Cholera Culture / Brucella Agglutination Test*	130
C Reactive Proteins**	135
Paul Bunnel Test / Culture & Sensitivity (other specimens)	150
V.D.R.L./ Widal Test	75
Smear Gram-Strain Examination / Sputum Smear A.F.C. Stain	50
R.A. Test	100
Conjunctival Swab for Microscopic and Culture Examination / Fluids or Exudates for Malignant Cells	140
Smear Examination for Micro Organism	95

* For hospitalised patients only. ** For Rheumatic disease to be reimbursed for hospitalised patient

X-RAY

Fluroscopy Chest	120
Abdomen AP Erect (One Film) / Abdomen Lateral View (One Film) / Abdomen for Pregnancy / Chest PA View (One Film) / Chest Oblique or Lateral (One Film) / Mastoids / Extremities, Bones and Joints (One Film) / Pelvis (One Film) / Paranasal Sinuses (One Film) / T.M. Joins (One Film)	135
Abdomen & Pelvis for K.U.B. / Skull A.P. & Lateral / Spine AP & Lateral	225
Barium Swallow	525
Sinography/Sialography	600
Cystography/Urethrography / Pneumo Encephalography	900
Arthography	675
Retrograde Pyelography / Oral or I.V. Cholecystography	750
Barium Enema / Barium Meal Upper or Lower	975
Bronchography / I.V.	1050
Urography	
Myelography / Barium Meal Complete	1200
Cerebral/Femoral Angiography	1425
C T SCAN / MRI	
CT Scan	2500
CT Scan (with contrast)	4000
MRI	5000
MRI (with contrast)	6500

ULTRA SONOGRAPHY AND ECHOCARDIOGRAPHY

Electro Cardiogram (ECG)	120
Indual Test	140
U C G (Phono-cardiography, Telemetry C, Cardiac Ex Test, Stress Test)	690
Echo Cardiography	790
Cardio Version	510
Ultra Sonography	395
US Guided Biopsy	530

SKIN

Tuberculin Test (Mantoux) TT or MT / Skin Clipping & Smear for Leprosy	105
Scraping for Fungus	55
Nasal smear for Leprosy	85

LIVER FUNCTION TESTS

Thymol Turbidity Test / Cephalin Cholesterol Flocculation Test	90
Vanden Berghn Reaction and Icterus Index (Quantitative Bilirubin)	150
Takata Ara Reaction	100

Bromsulphalein Excretion Test (Excluding injection charges) 220

PLEURAL AND PERICARDIAL AND ASCITIC FLUIDS

Pleural Fluid for Routine Examination / Pleural Fluid for Cultural Pericardial and Ascitic 140

SPUTUM EXAMINATION

Sputum Routine / Sputum for Acid Fast Bacilli only (Sputum AF B) 90

Sputum for Culture (Culture for TB) 140

CSF for Diptheria 125

Culture for Diptheria 105

GASTRIC ANALYSIS

Gastric Contents for Routine Analysis (Gastic Analysis or Fractional Test Meal) 215

Sternal Marrow Routine Cytology (Bone Marrow) 285

Basal Metabolic Rate (BMR) / Lung Function Test 250

PSYCHIATRY TEST

ECT / Psychology 140

Testing CO2 80

RIA

T3 300

T4 30

TSH, LH, FSH, Prolactin (for each test) 125

Testosterone / Parathyroid / Estrogen (Total) / ACTH 430

HBsAg by RIA or EIA 500

FOR SURGICAL INVESTIGATION & TREATMENT OF CANCER

Scopies and Biopsies 500

Chemotherapy

Single Drug Therapy per day 1000

Multiple Drug Therapy per day 2000

Infusional Chemotherapy 3000

OXYGEN CHARGES

Oxygen charges shall be reimbursed at the rate of Rs. 30/- per hour subject to a maximum of Rs. 300/- per day.

ANNEXURE II - OPERATION CHARGES

100% for self and 75% for dependent family members of the amount actually incurred for the amount as mentioned below against each item, whichever is lower.

PARTICULARS	Special Operation	Major Operation	Minor Operation
a) Operation Theatre Charges	Rs. 3,000	Rs. 2,000	Rs. 650
b) Anesthetist's Charges	Rs. 3,000	Rs. 2,000	Rs. 650
c) Surgeon's Fees (including Fees for Assistants)	Rs.10,000	Rs. 6,500	Rs.2,100

- d) Expenses for dialysis, blood transfusion, Heart valve replacement, angiography, implanted items during surgery wherever they do not form part of package charges and pace-maker may be reimbursed at the rate of 75% for family members and 100% for workman himself at rates not exceeding the rates applicable to lowest paying bed of AIIMS, New Delhi.

Indicative list of Special, Major and Minor operations is appended below:

SPECIAL OPERATIONS: (Time taken is more than 3 hours)

Cardiac including By-Pass Surgery, Brain, Lung and Cancer Operations, Kidney/ Liver Transplantation Operation, Bone Marrow Transplant and Multiple Fractures.

MAJOR OPERATIONS: (Time taken approximately 1 to 3 hours)

Kidney Stone (including lithotripsy), Prostate, Thyroid, Caesarean Delivery, Gastrectomy, Hysterectomy, Fractures, Amputations, S.P. Nailing, Discoideotomy, Retina Detachment, Liver & Gall Bladder, Plastic Surgery (not for beautification), Cataract (with IOL), Hernia subject to Bank's discretion.

MINOR OPERATIONS: (Time taken approximately 60 minutes or less)

D & C, Fissure, Circumcision, Small Hydrocele, Dilatation, Vasectomy, Abscess, Bilat, Hydrocele, Appendix, Tubectomy, Piles, Fistula, Minor Operations of the Eye, Nose and Ear.

Note:- Operative interference done using state-of-the-art medical techniques taking less than the time indicated as above will not alter the nature of the operations.

ANNEXURE III - TREATMENT ABROAD

1. As a rule, reimbursement of expenses incurred by workmen and their family members on treatment abroad will not be allowed.
2. In exceptional cases necessitating treatment of a kind yet to be widely established in the country, where workmen on medical advice obtained in the manner indicated below, choose to go on their own for treatment abroad, permission for treatment abroad may be granted by the board of directors of the bank subject to conditions laid down hereinafter and limited to the expenditure that would have been incurred had such treatment been received in India in a government hospital or a nursing home specially recognised by the Director General of Health Services of the Government of India.
3. The reimbursement of expenses incurred on air passage for travel abroad in connection with such treatment will not be reimbursed.
4. Foreign exchange may be released to the workmen for the purpose of treatment abroad to the same extent as is permissible to private citizens.
5. Hospitals and clinics indicated in paragraph 9 below have facility for specialist's treatment for which requests are generally received for treatment abroad and in respect of which treatment facility in ordinary hospitals are still inadequate. The services provided by these hospitals may be availed of by the eligible workmen. In such cases, reimbursement may be allowed subject to the authority sanctioning reimbursement being satisfied about reasonableness of the claim.
6. The following ailments have been identified as ailments for which treatment in India is not

yet widely established:

- (i) Cadaver Kidney Transplant;
- (ii) Old operated by-pass surgery cases (in which the initial operation was done abroad needing revascularization);
- (iii) Bone marrow transplant;
- (iv) Operative correction for high myopia cases; and
- v) Complex Cyanotic - Heart-Lesion and newly born infants suffering from heart diseases.

7. Reserve Bank of India (RBI) will constitute Medical Boards at Mumbai, Delhi, Kolkata and Chennai and at such other centers as may be considered necessary for the purpose of recommending whether an employee would be covered under the Scheme. The annual cost incurred on meeting of the Board by way of sitting fees, etc., shall be shared on an annual basis by such of the banks which avail of the services of the Medical Boards of examining cases of their workmen needing treatment abroad, in a manner as may be decided by the Reserve Bank of India. The Medical Board should make a specific recommendation and also give reasons for recommending treatment abroad. The Medical Board will submit its report to RBI, which in turn, could pass it on to the concerned bank.

8. For the purposes of reimbursement, as envisaged in the scheme, the schedule of charges as applicable for private ward treatment at the All India Institute of Medical Sciences, New Delhi, enforced from time-to-time, should be adopted.

9. The following institutions have been identified as having facilities for specialised treatment:

(a) Bypass Coronary Surgery:

(i) Southern Railways Headquarters Hospital, Perambur, Chennai. (ii) Christian Medical College and Hospital, Vellore. (iii) K.E.M. Hospital, Mumbai. (iv) Jaslok Hospital, Mumbai. (v) Bombay Hospital, Mumbai. (vi) Kasturba Hospital, Bhopal. (vii) Sree Chitra Tirunal Institute of Medical Sciences and Technology, Trivandrum.

(b) Kidney Transplant:

(i) Christian Medical College and Hospital Vellore. (ii) All India Institute of Medical Sciences, New Delhi. (iii) Post Graduate Institute, Chandigarh. (iv) Jaslok Hospital, Mumbai.

(c) Blood Cancer:

(i) Tata Memorial Hospital, Mumbai. (ii) Cancer Institute, Adyar, Chennai.

(d) Complicated Heart Surgery Cases:

(i) Southern Railway Headquarters Hospital, Perambur, Chennai. (ii) Christian Medical

College and Hospital, Vellore. (iii) K.E.M. Hospital, Mumbai. (iv) All India Institute of Medical Sciences, New Delhi. (v) Bombay Hospital, Mumbai. (vi) G.B. Pant Hospital, Delhi. (vii) Sree Chitra Tirunal Institute of Medical Sciences and Technology, Trivandrum. (viii) Post Graduate Institute, Chandigarh. (ix) S.S.K.M. Hospital, Kolkata. (x) Samaritan Hospital, Alwaye (Kerala). (xi) Kasturba Hospital, Bhopal (BHEL). (xii) N.M. Wadia Institute of Cardiology, Pune.

(Schedule V of BPS dated 02.06.2005)

NOTE ON CERTAIN DECEASES UNDER DOMICILE TREATMENT

Wilson's disease causes the body to retain copper. The liver of a person who has Wilson's disease does not release copper into bile, as it should. Bile is a liquid produced by the liver that helps with digestion. As the intestines absorb copper from food, the copper builds up in the liver and injures liver tissue. Eventually, the damage causes the liver to release the copper directly into the bloodstream, which carries the copper throughout the body. The copper buildup leads to damage in the kidneys, brain and eyes. If not treated, Wilson's disease can cause severe brain damage, liver failure, and death. Wilson's disease is hereditary. Symptoms usually appear between the ages of 6 and 20 years, but can begin as late as age 40. The most characteristic sign is the Kayser-Fleischer ring-a rusty brown ring around the cornea of the eye that can be seen only through an eye exam. Ulcerative colitis is a relatively uncommon, chronic, recurrent inflammatory disease of the colon or rectal mucosa. Often a lifelong illness, the condition has profound emotional and social impact on the affected individual. Ulcerative colitis is defined as continuous idiopathic inflammation of the colonic or rectal mucosa. The rectum is involved in more than 95% of cases. Some authorities believe that the rectum is always involved in an untreated patient. Partial healing may occur in a patient treated with topical therapy, creating diagnostic confusion. In the US, the annual incidence of ulcerative colitis is 10, 4-12 cases per 100,000 people. The prevalence rate is 35-100 cases per 100,000 people. Epidermolysis bullosa (EB) is a rare group of inherited disorders that manifests itself as blistering or erosion of the skin, and in some cases, the epithelial lining or other organs in response to little or no apparent trauma. Venous thromboembolic (VTE) disease the syndrome in which blood clots form in the deep veins and often break loose to travel to the lungs, is one of the most difficult and serious problems in modern medicine. Early recognition and appropriate treatment of deep venous thrombosis (DVT) and pulmonary thromboembolism (PTE) can save many lives. Aplastic anaemia: The bone marrow is the soft fatty tissue found in the cavities of our bones. Basically it is the "factory" where most of our blood cells - red cells, platelets and white cells - are made. Aplastic anaemia (or bone marrow failure) is a serious rare disease that develops when the bone marrow fails to produce these blood cells. The symptoms of aplastic anaemia are Patients may have symptoms of anaemia such as paleness, fatigue, shortness of breath on exertion and rapid heart rate (caused by low red cells); excessive bleeding and a tendency to bruise easily (low platelets) and a high susceptibility to infection (lack of white cells).