

INDIAN MEDICAL ASSOCIATION COUNTRY REPORT FOR CMAAO

Indian Medical Association was established in 1928 and since then it has traversed a long path. While contributing substantially during the freedom struggle, it has carried on the legacy with patient centric approach while ensuring the doctors and patients relationship is maintained as well as medical professional carry out the profession in ethical way, honestly and sincerely. This legacy is being carried forward under the very able guidance of Dr. Ketan Desai, chief Patron of IMA and past WMA President by National President IMA 2025, Dr. Dilip Bhanushali and Hony. Secretary General, Dr. Sarbari Dutta.

IMA is the largest represented organization of doctors of modern system of medicine in India. It has a membership of 4 lakh doctors spread over in 28 State Branches, 5 Union territories and 1800 local branches in almost all the districts of India.

Vision: IMA is a democratic forum working to maintain dignity, honour and social security of the medical fraternity in the country. It strives to provide quality healthcare to each and every citizen of India. IMA is committed to preserve the autonomy of the profession.

Objectives:

- To promote and advance medical and allied sciences in all their different branches and to promote the improvement of public health and medical education in India;
- To maintain the honour and dignity and to uphold the interest of the medical profession and to promote co-operation amongst the members thereof;
- To work for the abolition of compartmentalism in medical education, medical services and registration in the country and this to achieve equality among all members of the profession.

History and Legacy:

- Prior to the formation of the Association, four All India Medical Conferences were held, the first at Calcutta in 1917 under the Presidentship of Lt. Col. Raghavendra Rao, the Second at Delhi in 1918 with Sir Nil Ratan Sircar as the President, the third in 1919 with Dr. M.N. Odedar as its President and the fourth at Nagpur in 1920 under the Presidentship of Rai Bahadur Dr. Maharaj Krishan Kapur. It was at the 5th conference held at Calcutta on 28th December, 1928 under the Presidentship of Dr. G.V. Deshmukh of Bombay, that a resolution was adopted forming an All India Medical Association with the objective of promotion and advancement of medical and allied sciences in their different branches, the improvement of public health and medical education in India and the maintenance of honour and dignity of the medical profession. In the year 1930, the All India Medical Association and the body was duly registered under the Societies Registration Act, XXI of 1860.
- The Association had come in to being at a time when there was political unrest and the country was passing through big turmoil. Yet, it was a matter of great satisfaction that the stalwarts of the medical profession in those days like Dr. K.S. Ray, Sir Nil Ratan Sircar, Dr. B.C. Roy, Dr. M.A. Ansari, Col. Bhola Nath, Major M.G. Naidu, Dr. B.N. Vyas, Dr. D. Silva, Dr. N.A. Ghosh, Dr. D.A. Chakravarthi, Dr. Viswanathan

and Capt. B.V. Mukherjee actively participated in the promotion of the Association. Some of these stalwarts were also active in the Indian National Congress and had their terms in the jail for participating in the struggle for participating in the struggle for Independence of the country.

- Though the Association was formed with only 222 members, yet even with this numerical strength, it could achieve its position of strength and command respect from the British rulers. It could prevent the appointment of British IMS Officer as a Commissioner of Medical Education in 1929 and it could achieve to organize an all India Medical Register and include the licentiates in it. The Medical Council of India Act was got amended to have an elected President in place of a nominated one and it was a matter of a pride that Dr. B.C. Roy, one of the most illustrious Past President of IMA, became the first elected President of Medical Council of India followed by many other illustrious Presidents of IMA gracing the exalted chair including Dr. A.K.N. Sinha and Dr Ketan Desai.
- The Headquarters Office of the IMA was originally located in Calcutta. At the suggestion of Dr. S.C. Sen supported by Dr. B.V. Mulay, Dr. Chamanlal C. Mehta and Maj. General Amirchand, the IMA Headquarters was shifted to Delhi in January 1949, after the attainment of Independence. The Journal of IMA continued to be published from Calcutta. Dr. S.C. Sen also obtained a plot of land in Indraprastha Estate, New Delhi from the Government and the project of construction of IMA Building thereon was undertaken, supported by Dr. B.V. Mulay, Dr. Chanlal Mehta, Dr. C.S. Thakar, Dr. A.P. Mitra, Dr. Ved Prakash, Dr. R.C. Goulatia, Dr. P.C. Bhatla and Dr. D.S. Mehra. The foundation stone of IMA House was laid by the First President of India, Dr. Rajendra Prasad on September, 19, 1958 and the construction was supervised by Dr. P.C. Bhatla. With his untiring efforts, the building was completed and opened on September 6, 1964 by the then President of India, Dr. S. Radhakrishnan.
- During the British Rule, some selected members of the profession were members of the British Medical Association which had branches in India. The stalwarts of IMA ultimately succeeded in reaching an agreement with British Medical Association that they would have no branches in India and got mutually affiliated, which relationship continues even today.
- In the year 1946, IMA participated in the organization of the world body viz., the World Medical Association and thus became its founder member through DR A K N Sinha. Dr Ketan Desai also became the President of WMA. IMA has continued to play an important role in the affairs of the Commonwealth Medical Association, CMAAO, WONCA and SAARC Medical Associations.

Affairs of the Association :

The affairs of the Association are managed by the elected members of the Central Council and the Working Committee which lay down the policies. It has a number of Standing Committees which look after the specified subject entrusted to them under the various terms of references. Each state and local branch holds regularly Scientific and Medical Meetings and elects its Office Bearers once a year. The State Branches organize their respective State Conference

every year during which, besides organizational matters, they have scientific sessions for the benefit of their members in the various specialties in medicine.

IMA College of General Practitioners has been conducting regular examinations twice a year and the successful candidates became eligible for the award of Fellowship.

When it comes to updating the knowledge of its members and keeping them abreast of the latest technologies in health care, IMA has academic wings for General Practitioners (called IMA College of General Practitioners), for specialists (IMA Academy of Medical Specialties) and IMA AKN Sinha Institute for conducting online courses. IMA Hospital Board of India provides services related to Hospitals & Nursing Homes especially on patient care and safety. The IMA AMS also awards Fellowships every year to selected highly distinguished specialists. IMA Hospital Board of India provides services related to Hospitals & Nursing Homes especially on patient care and safety.

Publications:

IMA regularly publishing Journals, News and other publications for general public in Hindi and English.

- Journal of Indian Medical Association, a monthly scientific Journal indexed in the Index Medicus, Index Copernicus, Pubmed and Scopus.
- Apka Swasthya, a monthly publication for the general public in Hindi, the national language of India
- Your Health, a monthly publication for the general public in English

Wings: The academic activities of IMA are propagated through following Wings of IMA:

- IMA College of General Practitioners
- IMA Academy of Medical Specialities
- IMA AKN Sinha Institute
- IMA Hospital Board of India

Schemes: Promotional and Welfare activities are carried out through following Schemes:

- IMA National Social Security Scheme
- IMA National Family Welfare Scheme
- IMA National Professional Protection Scheme
- IMA National Health Scheme

IMA Junior Doctors and Medical Students Network:

IMA Junior Doctors and Medical Student Network carry out nation-wide activities through:

- IMA Junior Doctors Network
- IMA Medical Students Network

Current Activities :

Keeping its vision an objective in high spirit, IMA has been striving hard to get the following demands for its members and medical professionals:

1. Clinical Establishment Act:

The Clinical Establishments Act, 2010, though intended to standardize healthcare services, continues to pose operational and compliance challenges, particularly for small and medium healthcare facilities. The IMA has consistently raised concerns regarding the Act's stringent regulatory demands, which lack adequate infrastructural support and disproportionately burden <25-bed hospitals that form the backbone of India's healthcare system.

This Act imposes burdensome regulations without adequate infrastructure support potentially stifling private healthcare. We request to exempt small and medium hospitals up to 50 beds and clinics from The Clinical Establishments (Registration and Regulation) Act 2010.

IMA remains committed to balancing quality assurance with the viability and survival of small hospitals.

2. Violence Against Doctors – Advocacy for Protective Legislation:

Rising incidents of violence against healthcare professionals—ranging from physical assault to cyber-bullying—have underscored the urgent need for robust legal protections.

IMA remains firm in its stance that safety of healthcare workers is non-negotiable for the effective functioning of any health system.

This is to inform you that 23 State Hospital protection laws have not brought solace to doctors against violence. IMA appealed for a comprehensive Central Law to address the escalating violence against doctors and healthcare establishments. This step is essential to ensure the safety and dignity of the medical community and uphold the fundamental right to life. IMA demands enactment of a strong Central Act against violence on doctors and hospitals and declaration of Hospitals and Health Care institutions as safe zones.

3. Consumer Protection Act:

Consumer Protection Act, 2019 (CPA 2019) and its implications for the healthcare sector is another matter of concern. As outlined in the Consumer Protection Act Bill, 2018, there is a clear legislative intent to exclude healthcare services from the purview of CPA 2019. In light of this, IMA has requested to the concerned authorities to notify an executive order detailing this legislative intent, ensuring clarity and legal certainty for both healthcare providers and consumers.

There is no criminal intent in any treatment procedure. Criminal prosecution of doctors is self-defeating. Defensive medicine affects patient care and the cost.

Furthermore, we humbly suggested that a dedicated Medical Malpractice Act be enacted, incorporating a provision for capping of compensation. This measure would not only protect healthcare professionals from disproportionate litigation but would also ensure that consumers receive fair and timely redress in cases of genuine malpractice. Exempt the medical profession from criminal prosecution.

4. PCPNDT Act:

Under the PCPNDT Act, IMA puts up to the Government for a change in the policy of Save the Girl Child Initiative. The current PCPNDT Act after 3 decades of implementation has failed to reverse the sex ratio. It has inflicted harassment on the doctor- community in legitimate practice of the profession. It is in fitness of things to detect the sex of the child and provide protection and oversight until the girl child is delivered. There cannot be a medical solution to a social evil. The culprits who commit female foeticide or infanticide should be punished.

5. Bond Policy:

The bond system for medical graduates in India is a contract between the student and the state government or college authority to fulfil certain conditions, such as serving in rural areas or providing medical expertise in the state of their education. If the conditions are not met, the student must pay a hefty penalty to the state or institute.

IMA demands abolition of the Bond system for medical students and graduates.

6. Mixopathy – a great concern for medical fraternity and public at large

IMA strongly condemns attempts to unscientifically mix different systems of medicine. While IMA respects all systems of medicine, it believes in the need to preserve the purity of its system.

IMA is against the unscientific mixing of systems of medicine.

7. “Aao Gaon Chalen” – Rural Health Outreach :

Envisioned by IMA’s Chief Patron, Dr. Ketan Desai, this flagship initiative aims to strengthen healthcare accessibility in underserved rural areas. IMA has encouraged every local branch to adopt at least one village, reaffirming its commitment to community service, patient trust, and professional dignity.

8. IMA Standing Committee for Elderly:

This Committee recommended consolidating elderly-care activities nationwide under the unified banner *Care of Elderly*. It has planned regular virtual discussions on topics such as elderly vaccination, financial planning, couple care, dietary guidelines, and more. The Committee places particular emphasis on coordinated visibility and outreach by integrating existing state and local elderly-care programs.

9. IMA Standing Committee for Antimicrobial Resistance (AMR):

Under the guidance of this Committee, several significant activities were completed. The AMR Smart Hospital Accreditation Programme was successfully expanded, and

the Committee played a leadership role in drafting and promoting the historic London Resolution on AMR. It also fostered academic partnerships and facilitated extensive medical education programs for practitioners and students, while continuing strong advocacy to embed stewardship principles across the healthcare continuum. The Committee remains committed to preserving the effectiveness of antimicrobial agents for future generations.

10. Organ Donation Awareness:

With the national organ donation rate at only 0.65 per million population, IMA has intensified its campaign to promote both deceased and living organ donation. Members are encouraged to counsel the public actively and stress the lifesaving potential of organ donation, where a single donor can save up to eight lives.

11. Cancer Prevention and Tobacco Control Committee:

This Committee coordinated extensive nationwide activities aligned with key cancer awareness days. Its major initiatives included organizing camps, lectures, and awareness drives across branches; publishing an article on India's cancer burden in the *World Medical Journal* (March 2025); and producing three expert podcasts on tobacco control and emerging nicotine products. The Committee also launched a national training partnership with FOGSI to train 50,000 members in the HPV Vaccination Program, advocated for lifestyle modifications that can prevent 30–50% of cancers, supported UICC's landmark illumination campaign, and encouraged multi-channel awareness efforts across the country.

12. IMA End TB Initiative:

This major undertaking supports India's National TB Elimination Program (NTEP). Key activities included community education and stigma reduction initiatives, such as awareness sessions conducted with Brahmakumaris at the Hastal Centre in New Delhi, which also facilitated multiple timely TB diagnoses. A national webinar was held on World Lung Day (25 September 2025), supported by IMA HQ and IMA JDN, attracting over 1,600 participants for discussions on TB policy, diagnosis, and global best practices. The initiative further strengthened international collaboration through engagement with the Stop TB Partnership, CMA, and CMAAO for knowledge exchange and strategic alignment. Overall, this program has enhanced both community outreach and professional education in support of TB elimination.

13. Disaster Management – Preparedness and Response:

Under the guidance of this Committee, significant progress was made in advancing disaster preparedness within IMA. Key steps included forming state-level Standing Committees and creating a national WhatsApp coordination group. A structured three-phase Disaster Management Action Plan was developed with clear goals: training at least 2% of IMA members in disaster risk management, establishing Disaster Management Cells across states and major branches, and ensuring preparedness of members, families, and hospitals for emergencies. Advisories were issued during national geo-political developments, including Operation Sindoor, and a national committee meeting was convened to finalize strategic response mechanisms.

Following days were Observed by IMA

30-01-2025	Covid Martyrs Day
04-02-2025	World Cancer Day
10-03-2025 - 16-03-2025	World Glaucoma Week
07-04-2025 to 14-04-2025	WHO Day
17-05-2025 to 16-06-2025	World Hypertension Day
31-05-2025	World No Tobacco Day
5-6-2025	World Environment Day
13-07-25	Doctors Day
27-07-2025	World Head & Neck Cancer Day
7-11-2025	National Cancer Awareness Day

Statement of Press Releases issued by IMA

Date	Topic
10-01-2025	IMA and FOGSI join forces to eliminate cervical cancer from India through HPV vaccination
28-01-2025	Indian Medical Association Congratulates Padma Awardees in the Field of Medicine (2025)
25-03-2025	World Tuberculosis (TB) Day 2025: "Yes! We can end TB! Commit, Invest, Deliver"
07-05-2025	IMA Extends Congratulations to Indian Armed Forces for Operation Sindoor
26-05-2025	Indian Medical Association Launches First-of-Its-Kind "IMA AMR Smart Hospital" Accreditation Initiative
30-05-2025	Mixopathy IMA Policy Statement
09-06-2025	IMA expresses its deep concern and disappointment over the recent incidents in Goa and Jharkhand
23-06-2025	Bhumi Pujan of IMA Headquarters New Building – A Historic Moment
04-07-2025	IMA disapproves claims linking COVID-19 Vaccines to sudden deaths in Young Adults
25-08-2025	Indian Medical Association Thanks GST Council for Reducing GST on Essential Drugs; Requests Further Consideration on Key Healthcare Issues
26-08-2025	MIXOPATHY
05-09-2025	Indian Medical Association welcomes the decisions of the GST Council in response to the representations made by IMA.
17-09-2025	IMA, JDN & MSN Express its strong opposition to the maharashtr Govt. recent move to re-issue a notification permitting registration of CCMP
06-10-2025	Legal Illiteracy and Injustice
08-10-2025	Letter to Hon'ble Union Minister of Health and Family Welfare :- Urgent Concern Regarding the Arrest of a distinguished Paediatrician in the Madhya Pradesh Cough Syrup Tragedy and the Imperative Need for Systemic Drug Quality Reform.

27-10-2025	IMA Condemns the Tragic Suicidal Death of Dr. Sampada Mundhe; Demands Justice and Systemic Reforms
11-11-2025	IMA Expresses Shock and Solidarity Following the Tragic Attack at Lal Qila, Delhi
11-11-2025	The Indian Medical Association (IMA) expresses its deepest sorrow and concern over the tragic blast that occurred in Delhi on 10.11.2025


Conclusion:

The Indian Medical Association continues to honor its heritage as an ethical, service-driven, and scientifically rooted institution. Inspired by the vision of its pioneers and committed to enhancing public health, the IMA stands firmly with the government when its initiatives support societal well-being, and speaks out with equal conviction when they do not.

Through active advocacy, community outreach, scientific collaboration, and steadfast backing of its members, the IMA consistently demonstrates its resolve to improve healthcare systems and safeguard the health of people across India.



Dr. Dilip Bhanushali
National President, IMA



Dr. Sarbari Dutta
Hony. Secretary General, IMA