

Reference Guidelines for Doctors/ Medical Institutions authorized to issue Compulsory Health Certificates (Yatra – 2022).

INTRODUCTORY

The Holy Cave of Shri Amarnathji is situated at an altitude of 13,500 feet above sea level atop South Kashmir Himalayas. The high altitude trek to the Holy Cave involves exposure to extreme cold, low humidity, increased ultraviolet radiations and reduced air pressure. The oxygen level in the air is very low due to which many Yatris face respiratory and other related medical problems. The pilgrims have to trek a distance of 32 km from Chandanwari (Pahalgam Route) and 14 km from Baltal to reach the Holy Shrine.

Keeping in view the hostile nature of the Yatra area, the Shri Amarnathji Shrine Board has been issuing Health Advisories. A copy of the Health Advisories and Do's and Don'ts to be followed by the Yatris, is placed at **Annexure A** and **Annexure B**, respectively.

In July 2012, the Supreme Court took note of certain Press Reports about the mortality of pilgrims visiting Shri Amarnathji Shrine and constituted a Special High Powered Committee (SHPC) to, inter alia, suggest measures for upgrading the healthcare infrastructure in the Yatra area. The SHPC identified the following reasons for mortality in the Yatra area:

- i) **Non-acclimatization:** Any person who undertakes a trek in the high altitude area is required to necessarily undergo acclimatization for several days. Those undertaking the Yatra are un-acclimatized and rush to complete their Yatra within a day, as a result some of whom fail to recover from High Altitude Sickness and lose their lives.
- ii) **Lack of proper clothing and footwear:** A large number of pilgrims do not carry adequate/ appropriate warm clothing and footwear and are susceptible to falling ill and those who already have

serious Medical Problems (like diabetes, chest/ lung/ cardiac problems) are more susceptible to Medical failures.

- iii) **Religious Practices/ Traditions:** Another reason contributing to serious Medical Problem is the insistence of devotees to take an ice cold water bath in the morning and then commence their trek with an empty stomach.
- iv) **Profile of Yatris:** Very old men and women, adolescents and people already suffering from ailments are at high risk and prone to losing life during the Yatra which involves climbing in a high Altitude difficult area and sudden changes in weather conditions.

The SHPC in its Report has made more than 20 recommendations dealing with different aspects of Medical Care facilities to be provided to the Yatris during Yatra 2013 and beyond, all of which are being implemented by the Union Government, J&K Government and the Shri Amarnathji Shrine Board. One of the recommendations of the SHPC was that all Yatris should continue to furnish Compulsory Health Certificates while seeking registration for the pilgrimage. The SHPC further recommended constitution of an Expert Medical Committee to review the format of Compulsory Health Certificate (CHC) and suggest suitable modifications. The SHPC also recommended that the Compulsory Health Certificate shall not be issued by an RMP (as was prescribed for Yatra-2012) but by the Doctors/ Medical Institutes who are specifically authorised by the State Governments to issue Compulsory Health Certificate.

The members of the Medical Expert Committee (three nominated by Union Health Secretary and one nominated by State Health Secretary) deliberated on various health related issues which the Yatris have to face during this arduous Yatra and prescribed a revised CHC [containing part (A) and part (B)], a copy of which is enclosed as an **Annexure- I** to these Guidelines.

Considering the advice of National Disaster Management Authority (NDMA), Shri Amarnathji Shrine Board in its meeting, held on 31st January, 2013 has decided that **no one below the age of 13 years or above the age of 70 years and no lady with 6 week's pregnancy should be allowed to undertake Yatra.**"

GUIDELINES FOR DOCTORS / INSTITUTIONS FOR ISSUING COMPULSORY HEALTH CERTIFICATE

1. Each applicant shall provide information to the Authorised Doctor/ Institution about his/her health status, past medical history and various ailments from he/she may be suffering or may have suffered as prescribed in part (A) of the Compulsory Health Certificate.
2. The Authorised Doctors/ Institutions shall issue the prescribed Compulsory Health Certificate [in part (B) of the format] after **detailed examination of the applicant and necessary investigation(s) / test(s), if needed, and having satisfied himself / herself as to the fitness of the applicant to undertake this arduous Yatra.**
3. **The Authorized Doctors/ Institutions shall not issue Compulsory Health Certificate to any applicant who is below the age of 13 years or above the age of 70 years and to pregnant lady with 6 weeks pregnancy.**
4. For Yatra 2022 the Authorized Doctors/ Institutions shall issue the Compulsory Health Certificates from 28th March, 2022. The CHCs issued before 28th March, 2022 would not be valid for the Registration purposes.
5. **All the doctors/ Health Institutions authorized by the State Governments/ UTs shall appropriately evaluate the health conditions of the applicant, [keeping in view the high altitude of the Yatra route (as high as 14,500 ft), temperature variation (the temperature goes as low as 5 degree Celsius in case of bad weather), level of oxygen in the Yatra area, difficult terrain, steep**

ascent in the Yatra route at high altitude] and after careful examination/investigation ensure that Compulsory Healthcertificate is issued to medically fit applicants only.

- a. The nominated Doctors shall ensure that the applicant who had undergone **bypass surgery** or even had **implanted stents** are **not** issued CHC facilitating them to get YPF in view of **the high altitude of the Yatra route level of oxygen in the Yatra area, difficult terrain, steep ascent in the Yatra route at high altitude.** The nominated Doctors shall further ensure foolproof and effective screening of intending pilgrims especially to the cardiac / diabetic patients before issuing of CHCs to them.
- b. The nominated Doctors shall indicate their 'MCI Registration Number' and "name" at the appropriate places indicated in Part (B) of the enclosed CHC at **Annexure-I** while issuing the Compulsory Health Certificates. The nominated Doctors shall not leave any place blank in Part (B) of the CHC while signing the CHC.
- c. The authorized doctors shall maintain proper record of the issuance of CHC so that the database so generated could be analyzed for bringing about further improvements in the health care facilities in the Yatra area and /or for making further changes in the format of CHC.

SHRI AMARNATHJI YATRA 2022

Health Advisory

- i. The Pilgrimage to Holy Cave of Shri Amarnathji involves trekking at altitudes as high as 14000 feet.
- ii. Yatris may develop High Altitude Sickness with following symptoms: loss of appetite, nausea, vomiting, fatigue, weakness, dizziness, lightheadedness and difficulty in sleeping, visual impairment, bladder dysfunction, bowel dysfunction, loss of coordination of movements, paralysis on one side of the body, gradual loss of consciousness and mental status changes, drowsiness, chest tightness, fullness, congestion, fast breathing and increased heart rate.
- siii If high altitude sickness is not treated timely, it may be lethal in a matter of hours.

Dos for prevention of High Altitude Sickness.

- 1. Do prepare for the Yatra by achieving Physical Fitness – it is advisable to start a preparatory Morning/ Evening walk, about 4-5 km per day, at least a month prior to the Yatra.
- 2. Start deep breathing exercise and Yoga, particularly pranayam for improving oxygen efficiency of the body.
- 3. Do check with your physician prior to travelling to higher elevations, if you have any existing / pre-existing medical conditions.
- 4. Do walk slowly while ascending and take time to acclimatize. Relax for a short while on steep inclines.
- 5. Do avoid exerting beyond your normal capacity.
- 6. Do take compulsory rest at various locations and ensure time logging and take ideal walking time mentioned on the display boards while moving towards next location.
- 7. Do check with your physician prior to taking any medications.

8. Do drink lots of water to combat dehydration and headaches – about 5 liters of fluid per day.
9. Do follow the prescribed food menu – available at Shrine Board's website, www.shriamarnathjishrine.com – when having food in the Yatra area.
10. Do consume plenty of carbohydrates to reduce fatigue and prevent low blood sugar levels.
11. Do bring portable oxygen with you as it is helpful in case you have difficulty in breathing.
12. Do descend immediately to a lower elevation, if you start having altitude illness symptoms.
13. In case there is any change in the status of your health after having obtained Compulsory Health Certificate some weeks earlier, do consult your doctor before embarking on the pilgrimage.
14. In case of any signs of high altitude sickness or any other discomfort, immediately contact the nearest medical facility located at every 2 kms.

Don'ts for prevention of High Altitude Illness.

1. Don't ignore the symptoms of high altitude illness.
2. Don't drink alcohol, caffeinated drink, or smoke.
3. Don't ascend any further if you have altitude illness. Instead, descend immediately to an elevation where you can acclimatize.
4. Don't accept everything a sick Yatri says since his/ her judgment is impaired.

**SHRI AMARNATHJI YATRA 2022
PUBLIC INTEREST MESSAGES**

Do's and Don'ts

Do's for the Yatris

1. Do carry sufficient woolen clothing as the temperature may sometimes abruptly fall to below 5 degree Celsius.
2. Do carry umbrella, wind cheater, raincoat, and waterproof shoes as the weather in the Yatra area is unpredictable.
3. Do keep your clothes and eatables in a suitable water proof bag to avoid your belongings getting wet.
4. Do keep in your pocket a note containing the name / address, mobile telephone number of any Yatri proceeding for Darshan on the same date as you are doing, for emergency purposes.
5. Do carry your identity card / driving license and Yatra permit with you.
6. Do travel in a group, with porters / horses / ponies carrying your luggage.
7. Do ensure that all those comprising the group remain in your sight, lest you are separated from your group.
8. On your Journey home, you must leave the Base Camps along with all other members of your group.
9. Do seek immediate assistance of the Police in case any member of your group is missing. Also have an announcement made on the Public Address System at the Yatra Camp.
10. Do help your fellow Yatris travelling with you and perform Yatra with a pious mind.
11. Do strictly follow the instructions issued by the Yatra Administration, from time to time.
12. For any assistance contact SASB Camp Directors / nearest Yatra Control room.

13. In case of any accident or emergent situation, immediately contact the nearest Camp Director / Mountain Rescue Teams (MRTs) deployed at various locations.
14. The Gates of Access Control at Domel and Chandanwari open at 05.00 am and close at 11.00 am. Reach the Gates on time. No Yatri shall be allowed to undertake pilgrimage after the closure of the Gate.
15. Free Food facility is available in the entire Yatra area at the Langars.
16. Do follow the prescribed Food menu available on the Board's website: www.shriamarnathiishrine.com while having food in the Yatra area.
17. Pre-paid SIM Cards from other States shall not work in J&K and Yatra area. Yatris can purchase pre-activated SIM Cards at the Base Camps of Baltal and Nunwan and at Bhagwati Nagar, Jammu and Lakhanpur.
18. Earth, water, air, fire and sky are integral parts of Lord Shiva. Therefore respect the environment and do nothing whatsoever to pollute the Yatra area.

Don'ts for the Yatris

1. For women Yatris: they must not wear Sarees during the Yatra. Salwar Kameez, pant-shirt or a track suit is advisable.
2. **Women are more than 6 week pregnant shall not be allowed to undertake the pilgrimage.**
3. **Children below 13 years in age and elderly persons above the age of 70 years shall not be permitted to undertake the pilgrimage .**
4. Don't stop at places which are marked by warning notices. Walk only on the tracks.
5. Don't walk barefoot or be without woolen clothing at any time as the temperature in the Yatra area remains low and changes abruptly.
6. Don't use slippers because there are steep rises and falls on the route to the Holy Cave. Only wear trekking shoes with laces.

7. Don't attempt any short cuts on the route as doing so is dangerous.
8. Don't commence journey on an empty stomach. If you do so, you may attract a serious medical problem.
9. Don't do anything during the entire Yatra which could cause pollution or disturb the environment of the area.
10. Do not bring with you any polythene material as its use is banned in J&K and is punishable under law.
11. Avoid throwing coins, currency notes, decorative chunnis, brass lotas or any other material towards the Shivlingam while having Darshans at the Holy Cave.
12. Do not stay at Holy Cave overnight in view of high altitude and harsh and unpredictable weather conditions.
13. Do not leave Panjtarni Camp towards Holy Cave after 3.00 PM as no darshan is allowed at Holy Cave after 6.00 PM.

Contact Us:

- i) In case of any query related to Yatra, please contact us at
Land Line Numbers- 0191-2503399 and 0191-2555662 Toll Free Number- 18001807198 (Jammu) Land Line Numbers- 0194-2313146 0194-2313147-49, Toll Free Number- 18001807199 (Srinagar) and website:
www.shriamarnathjiashrine.com.
- ii) Please visit the website of the Shri Amarnathji Shrine Board www.shriamarnathjiashrine.com and watch the informative Video documentary to get familiarized with the difficulties to be faced on the Yatra route.

Shri Amarnathji Yatra 2022
YATRA PERMIT APPLICATION FORM
(Please fill in block letters)

Applicant's
photograph
which should
be signed
across this
photograph

FULLNAME: _____

GENDER (Tick as applicable): Male Female; ; Blood Group: _____

_Age*: _____ Yrs. (No one below the age of 13 years, or above the age of 70 years will be registered for the Yatra).

NAME OF SPOUSE/ FATHER: _____

ADDRESS: _____

STATE: _____ PIN _____

E-Mail (if any): _____

CONTACT /PHONE NO

--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--

 MOBILE +91

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Telephone with STD Code / Mobile number of the person to be contacted in case of any emergency

To
The Chief Executive Officer,
Shri Amarnathji Shrine Board,
Jammu / Srinagar.



Sir,

1. I may please be issued a Permit for embarking on Shri Amarnathji Yatra. I shall start the Yatra from the _____ [Baltal / Chandanwari**] route on _____ / _____ 2022.
2. I certify that I have been declared physically fit by the Authorized Doctor / Medical Institute to undertake the journey to the Shri Amarnathji Holy Cave during June - August 2022. The prescribed Medical Certificate is attached.
3. I _____, son / daughter / wife of _____, nominate Shri / Smt. _____ ; age _____ ; relationship: _____ to be paid the Insurance proceeds*** upon payment of the Insurance claim in case of my death due to accident.
4. I solemnly undertake to abide by the Dos & Don'ts / other directions issued by the Shrine Board / District Administration.

Full Signature of Applicant

*** No one below the age of 13 years, or above the age of 70 years, and no lady with more than six weeks pregnancy will be registered for the Yatra.**

Please fill whichever is applicable.

*** A duly registered Yatri with a valid Yatra Permit issued by the Shri Amarnathji Shrine Board, duly endorsed by the issuing Institution, will be entitled to an Insurance cover of Five Lakh Rupees from the Insurance Company in the event of her/ his death due to any accident inside the State of J&K while undertaking the Shri Amarnathji Yatra. The sum assured will be paid through the Shrine Board after the nominee of the deceased Yatri completes the due formalities.

For Office Use

Business Unit _____ Branch

Bank Yatra Registration Slip No. _____ Date _____ Route _____ issued

Seal and Signature of
Registration Officer

Initials of Official



COMPULSORY HEALTH CERTIFICATE FOR SHRI AMARNATHJI YATRA 2022

Please paste
one recent
passport size
photograph
here

PART A: (TO BE FILLED BY APPLICANT)

1. Name _____ S/o;D/o; W/o, _____
Address _____
2. Date of Birth _____ Identification mark: _____ Blood Group: _____

3. DECLARATION: Have you suffered from or have history of any of the following:

- | | | | |
|------------------------------|---|---|--|
| a) Breathlessness | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | b) Diabetes | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| c) Respiratory/ lung ailment | <input type="checkbox"/> Yes <input type="checkbox"/> No | d) High Blood pressure | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| e) Blood disorder | <input type="checkbox"/> Yes <input type="checkbox"/> No | f) Asthma | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| g) Bleeding tendencies | <input type="checkbox"/> Yes <input type="checkbox"/> No | h) Epilepsy | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| i) Heart ailment | <input type="checkbox"/> Yes <input type="checkbox"/> No | j) Nervous breakdown | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| k) Joint Pains | <input type="checkbox"/> Yes <input type="checkbox"/> No | l) High altitude/mountain sickness | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| m) Discharge from ear | <input type="checkbox"/> Yes <input type="checkbox"/> No | n) History of stroke/ paralysis | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| o) Are you a smoker | <input type="checkbox"/> Yes <input type="checkbox"/> No | p) Are you pregnant:
(applicable to female Yatris) | <input type="checkbox"/> Yes <input type="checkbox"/> No |

- q) History of Heart Attack; if yes, please specify _____
- r) History of sudden death in family members; if yes, please specify _____
- s) Any major injury in the past; if yes, please specify _____
- t) Any other ailment; if yes, please specify _____
- u) History of surgery; if yes, please specify _____
- v) Are you under any medication; if yes, please specify _____
- w) Are you allergic to drugs, foods and chemicals; if yes, please specify _____

4. I hereby declare that the particulars given above are true to the best of my knowledge and belief, and nothing has been concealed.

Date _____

Signature/ thumb impression of the Applicant)

PART B: (TO BE FILLED BY AUTHORISED MEDICAL AUTHORITY)

On the basis of information furnished by the applicant, detailed examination and the necessary investigations, it is certified that Mr/Ms/Mrs _____ is fit to undertake the journey to the Shri Amarnathji Holy Cave Shrine.

Details of any specific test conducted before issuing the certificate: _____

Name of the Doctor _____

Designation: _____

Date of issue: _____

Signature and seal of Authorized Medical Authority
MCI/ State Medical Council Registration No: _____