## UNDERTAKING

I/We, .....the Owner/ Managing Director of ......Institution do hereby give following.

- I/We state that our hospital shall abide the directors given by the Honble Supreme Court in the writ potation No. 209/2003 regarding the sterilization operation. We shall also able the State Governments Directions in this connection in Government Resolution Public Health Department No Kasha 2005/CR.130/Fw, dated 29<sup>th</sup> April 2005. And any further directions in this regard in future.
- 2. I/We state that our Hospital/Institutions accept the liability to pay compensation to the victms or their heirs, for the death. Incapacitation and complications arises after the sterilization operations prescribed by the Honrable Supreme Court of State Government, if state level quality assurance committee found that inadequate facilities / improper management or Doctors / Para Medical being staff / Employees being appointed by us are responsible for the said event.
- For such cases if State Government pays a part or full amount of the compensation to the victims or heirs of the deceased then we accept to reimburse the same to the Government.

## SIGNATURE

Name of the person and his designation Name of the Hospital / Nursing home initiating along with official seal.