



Regulations of Medical Examination of Expatriates Coming to GCC States for Work or Residence



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Resolution to approve the Rules & Regulations of Medical Examination of Expatriates Coming to GCC States for Work or Residence

Based on resolution No. (4) of the eighty-fourth meeting of the Health Ministers of the Gulf Cooperation Council countries - in its forty-sixth session (Manama) 21/10/2021, which grant the approval on the rules and regulations and its updated annexes for the medical examination of expatriates to the Gulf Cooperation Council countries for the purpose of work or residence, sixth version 1443 AH corresponding to 2021.



Chapter (1)

Definitions

Article (1):

The following terms and phrases, wherever mentioned herein, shall have the meanings ascribed thereto unless context otherwise requires:

GCC: The Cooperation Council for the Arab States of the Gulf (also referred to as the Gulf Cooperation Council).

Council of Health Ministers: The governing council composed of the GCC Health Ministers.

GCC States: GCC Member States.

Executive Board: The Executive Board of the Gulf Health Council.

The Council: Gulf Health Council for GCC states.

General Manager: The General Manager of Gulf Health Council.

Expatriates: Those who travel to the GCC States seeking work or residence.

Central Committee: The Gulf Central Committee for the Expatriates' Health Check-up Program.

Technical Committees: The Gulf technical committees concerned with conducting field visits to inspect and evaluate the Expatriates' Health Check-up centers.





Evaluators: The members nominated by the GCC health ministries to conduct an online evaluation of medical centers applying for accreditation.

Accredited Centers: Medical examination centers accredited by The Council to conduct health Check-up for expatriates in their home countries.

Expatriates Check-up Program: The Council's Expatriates Check-up Program.

Finance Department: The Council's Finance Department.

E-System: The Expatriates Check-up Program online electronic system that links The Council, Member States, and the accredited health centers.

Fees: Amounts or fees imposed by The Council on the registration in the e-system, submission of applications, membership, membership renewal, evaluation, re-evaluation, grievances, penalties, violations, or other works, services and procedures related to expatriates' Check-up.



Chapter (2): The Gulf Health Council Mission and Objectives in Connection with the Expatriates' Health Check-up

Article (2):

The Council was established in 1396 AH (1976 AD), and its mission is to strengthen common relations, deepen ties between the GCC States, promote cooperation frameworks, and consolidate efforts in order to achieve the highest levels of quality and excellence in the areas of preventive, curative and rehabilitative health services for the citizens of the GCC States by developing the system and mechanisms of the joint GCC health action.

Article (3):

The Council shall promote integration and joint action in health fields among the GCC States by achieving the following objectives:

1. Cooperate with regional, Arab and international organizations in health fields.
2. Unite positions in international forums and learn from global experiences.
3. Raise health awareness.
4. Promote health systems consolidation.
5. The control and protection of Epidemic Diseases.
6. Formulate a unified pharmaceutical policy, promote self-sufficiency in the pharmaceutical industries, and strengthen the control over imported medicines.





7. Achieve integration in health needs area, and obtain safe and effective medicines with high quality and at affordable prices through joint programs such as the Joint Procurement Program of pharmaceuticals, devices and medical supplies; The central registration of medicines, devices and medical supplies; the registration of pharmaceutical companies and their products to achieve all other health needs.
8. Other objectives that The Council has made significant strides and has taken confident steps towards their achievement.

Article (4):

Guided by the directives of their Majesties and Highnesses, the Rulers of the GCC States in maintaining health security across the GCC societies, The Council of Health Ministers issued, in its 38th conference dated Sha'ban 1415 AH (January 1995 AD), its resolution to establish a Health Check-up program for the GCC expatriates. The resolution also entails formation of committees concerned with setting health requirements and conditions for expatriates, determining clinical examinations, laboratory and radiological tests in order to ensure that they are physically and psychologically fit, and free from diseases, especially infectious diseases, that may cause potential threat to the safety and security of the GCC states community.

Since its establishment, The Council has worked with the Member States to expand the umbrella of the Expatriates' Check-up Program to include most of the labor-exporting countries.





Article (5):

The expatriate health Check-up aims to take the appropriate health measures to ensure that expatriates are free from diseases that pose a threat to their contacts, thus endangering the safety and security of the community of the GCC States, as well as to ensure that they are healthy and fit.

These rules and regulations, regulate the provisions related to the duties and measures carried out by The Council and its bodies and the relevant authorities to examine expatriates coming for work, visit, residence or any other purposes specified by The Council.



Chapter (3):

Gulf Health Council

Article (6):

The Council shall, upon the central committee's proposal, determine health conditions to be met by expatriates coming for work or residence in the GCC States.

Article (7):

The Council shall:

1. Accredit the Expatriates' Health Check-up Centers in their home countries, and to add/or revoke Centers, in accordance with the provisions hereof and upon the recommendation of the Central Committee or the resolutions issued by The Council.
2. Implement the rules, regulations and conditions of the Expatriates' Health Check-up herein set out, and propose the amendment thereof.
3. Form the Central Committee based on the nomination of the GCC Health Ministries;
4. Form the Technical Committees based on the nomination of the GCC Health Ministries;
5. Provide the necessary information and guidance for technical field visits;
6. Notify the medical centers of the accreditation decision and issue them the membership certificate after paying the prescribed fees;
7. Notify the embassies and consulates of the GCC States of the accredited centers' list through the official channels;
8. Follow up the technical and administrative work of the accredited centers related to the examination of expatriates;
9. Provide, analyze and submit statistical information and data to the Central Committee for appropriate recommendations thereon;
10. Collect all prescribed fees;



11. Apply penalties against the violating accredited centers according to the Penalties List;
12. De-activate any center's account on the e-system of the Expatriates' Check-up Program;
13. Support and develop the Expatriates' Check-up Program;
14. Prepare the schedule of inspection visits according to the Central Committee's recommendation;
15. Notify Member States and the Central Committee members when implementing the recommendations of the Technical Committees;
16. Periodically report the violations of unfit cases;
17. Continuously update and develop the e-system; and
18. Perform any actions or functions, or implement any procedures or decisions that The Council of Health Ministers deems necessary.

Article (8):

The Council or whoever it authorizes, shall have the right to organize unannounced inspection visits to the accredited centers through a technical committee whose members shall be selected directly from the GCC Health Ministries.

Article (9):

The Council of Health Ministers shall be responsible for issuing decisions to determine any fees or amounts related to the Expatriates' Check-up Program, and the mechanism for distributing such fees. Fees shall be reviewed and adjusted regularly in accordance with the decisions of The Council of Health Ministers.





Chapter (4)

Executive Board

Article (10):

The Executive Board shall:

1. Consider the recommendations of The Council and the Central Committee concerning the procedures related to the Expatriates' Check-up Program, and adopt them as so authorized by The Council of Health Ministers; and
2. Promulgate and approve resolutions and procedures, and consider proposals related to the technical aspects of examining expatriates and approve working accordingly.





Chapter (5)

Embassies and Consulates of GCC States

Article (11):

The Council shall coordinate and deal with the concerned authorities, and bodies of the GCC States' embassies and consulates, so that these authorities, embassies and consulates shall:

1. Ensure the health fitness of the expatriates through The Council's Expatriates Check-up e-system Furthermore, they shall not deal with health centers that are not accredited by The Council, pursuant to the provisions of the Resolutions of the GCC Supreme Council at its 37th session of 2016, on the Expatriates' Health Check-up;
2. Report, through official channels, violations or irregularities committed by the accredited centers;
3. Assist wherever possible, in facilitating the work of The Council and Technical Committees; and
4. Verify the authenticity of documents submitted to The Council by health centers, and ratify the same.



Chapter (6)

Health Ministries

Article (12):

The GCC health ministries shall be responsible for:

1. Conduct the expatriate health Check-up within no more than (2) two months as of date of his/her arrival at any of the GCC States, or according to the period determined by The Council.
2. Report expatriates who were found to be medically unfit through the e-system immediately after diagnosing their health conditions; and
3. Nominate members of the Central Committee and the Technical Committees, taking into consideration that the nominee of Technical Committees shall be a doctor or a health practitioner (laboratory - radiologist).



Chapter (7)

Central Committee

Article (13):

The Central Committee shall:

1. Determine and update the clinical examinations, laboratory and radiological tests to be conducted for expatriates to ensure that they are physically and psychologically fit;
2. Follow up the reports and information provided by The Council on the Expatriates' Check-up Program;
3. Set and update the criteria and conditions for the accreditation and evaluation of the Expatriates' Health Check-up Centers;
4. Set and update health fitness standards for employment and residency;
5. Set and update the necessary preventive measures that would protect the societies of the GCC States;
6. Consider the requests of the Member States or The Council to extend and expand the Program's umbrella in countries where health centers are accredited, or in new countries; and
7. Any other tasks assigned thereto by The Council.





Article (14):

The Central Committee shall convene regular meetings, when necessary, upon the invitation of The Council. The quorum of the Committee shall be valid in the presence of at least two-thirds of its members. The Committee shall pass its recommendations by an absolute majority of votes. Further, the General Manager of The Council shall approve the recommendations of the Central Committee, issue executive decisions related thereto, and submit reports on the Central Committee's work to the Executive Board.



Chapter (8)

Technical Committees

Article (15):

The Technical Committees shall:

1. Evaluate the accredited centers using the forms prepared by The Council.
2. Follow up and check work progress related to the health Check-up of expatriates in the accredited centers.
3. Prepare reports on field visits and submit them to The Council.
4. Evaluate and inspect new centers.
5. Familiarize the embassies with the Program and convey their observations to The Council.
6. Check the veracity of the procedures of violations and complaints related to accredited centers, and recommend the application of appropriate penalties and fines in accordance with the provisions hereof.
7. Adhere to the schedule of visits prepared by The Council, and may amend it if necessary; and
8. Other functions assigned thereto by The Council.

Article (16):

The Technical Committees shall not visit or evaluate any center that is not included in the visit file prepared by The Council.



Chapter (9)

Accredited Health Centers

Article (17):

Duties and tasks of accredited centers shall be as follows:

1. Use the e-system to record the expatriate's personal details before conducting the medical examination.
2. Implement all of the conditions herein contained and directives of The Council.
3. Conduct the required examinations in accordance with the conditions, specifications, medical examination forms, and medical examination manuals specified by The Council.
4. Regularly maintain and update devices and equipment related to the examination of expatriates.
5. Assume full responsibility for any failure, negligence, or error in the Expatriates' Health Check-up.
6. Comply with the standards, procedures, guidelines, and conditions set by The Council regarding Expatriates' Health Check-up Centers.
7. Notify The Council of any changes made to the center.
8. Implement the penalties decided by The Council.
9. Adhere to the directives of the Technical Committees.
10. Communicate with The Council regarding complaints and suggestions.
11. Keep strictly confidential the results of the Expatriates' Health Check-up.
12. Determine expatriates' medical fitness and unfitness status according to the conditions set by The Council.
13. Issue the medical fitness certificate within a maximum period of (3) three days as of the medical examination date.





14. Comply with The Council guidelines and technical instructions regarding vaccinations of expatriates; and
15. Comply with The Council guidelines and technical instructions for infection control and safe disposal of medical waste.

Article (18):

The accredited centers shall pay the fees determined by The Council.

Article (19):

The center shall be revoked if it fails to provide the health Check-up service for expatriates for a period of more than one month, due to any reason.

Article (20):

The communication between accredited centers and Technical Committees before or during the visit shall be made through the technical committee chairman.



Chapter (10)

Accreditation and Evaluation of New Health Centers

Article (21):

New centers and health institutions shall be added, accredited in various countries according to the directions of the Member States or The Council, or based on the actual need therefor. Thus, the centers' number in the countries commensurate with the number of expatriates expected to undergo a medical examination.

Article (22):

Centers' applications shall be submitted to The Council by filling out the application form via the e-system one month prior to the date of the Technical Committees' visit. The center shall be licensed by the local authorities, and The Council shall consider the application and take necessary actions.

Article (23):

Applications for accreditation of centers shall be accepted only from their owner(s) by virtue of official written documents in their countries. Applications shall also be accepted based on an official authorization that has all necessary ratifications and issued by the owner. The owner or its authorized person shall be the immediate person in charge before The Council.





Article (24):

The Council shall determine the conditions, guidelines, and mechanisms related to the evaluation of centers. The evaluation shall be conducted in any of the following ways:

1. Technical Committees Visits;
2. The Council visits;
3. Online; or
4. Any other methods or mechanisms decided by The Council based on the resolutions of the Central Committee.

Article (25):

Medical centers that apply for accreditation shall meet all the conditions, standards and requirements for accreditation set by The Council. The new centers shall be accredited by The Council based on the evaluation of the Technical Committees.

Article (26):

The Council or whoever it authorizes, may evaluate and accredit the new centers remotely as follows:

1. Health institutions shall fill out the accreditation application form and the self-assessment report through The Council 's e-system.
2. The mandatory supporting documents of health institutions shall be attested by at least two GCC embassies or representatives located in the center's country.
3. Health institutions shall acknowledge implementing the provisions set out herein.
4. Health institutions shall pay the evaluation fees.
5. The Council shall review the mandatory supporting documents for each application.
6. The Council shall schedule the online evaluation of health institutions, only if the mandatory supporting documents are completed.





7. The Council shall address the GCC Health Ministries to nominate the evaluators in order to participate in the online evaluation of the applications of health institutions.
8. The Health Ministries shall nominate all evaluators, and The Council 's team shall deliver evaluation requests thereto in order and on an equal basis.
9. Evaluators shall only conduct electronic evaluation of the centers without accreditation
10. The Central Committee shall review the online evaluation report of the centers, then recommend, in any of its regular or special meetings, the accreditation of centers and their number based on the respective evaluations and the actual need therefor.
11. The health institution shall be notified of the initial accreditation resolution and given a membership certificate after paying the prescribed fees.

Article (27):

The medical fitness certificate issued through the e-system, or by health institutions in some countries that do not have accredited centers, shall be acknowledged according to the following:

1. The expatriate shall register and pay the registration fee.
2. The expatriate shall download the medical examination form set by The Council through the e-system.
3. The expatriate shall approach any health institution to conduct the medical examination in the country of residence.
4. The examining physician shall fill out and stamp the medical examination paper form.
5. The medical examination form shall be stamped with the health institution's seal in the country of residence.
6. The expatriate shall scan and upload the medical examination paper form to the e-system.





7. The expatriate shall acknowledge the validity of the medical examination form that has been uploaded, and acknowledge his/her acceptance to be re-examined in the GCC States and that the GCC States shall not be responsible for any disease detected.
8. The expatriate shall acknowledge that The Council holds no responsibility for any administrative or financial consequences as a result of obtaining the electronic medical fitness certificate based on the medical examination form that was uploaded by the expatriate to the e-system.
9. Those The Council's concerned officials shall review the copy of the medical examination form issued by the health institution or the examining physician. Then, the electronic medical examination form shall be filled out in the e-system.
10. A medical fitness certificate shall be issued through the e-system containing a QR code (barcode).
11. The expatriate shall be notified of the readiness of the electronic medical fitness certificate.
12. The expatriate shall download or print the electronic medical fitness certificate.
13. The expatriate shall approach any of the GCC States embassy or its representative agency to obtain the visa, or submit the electronic certificate to the authorities concerned with issuing the visa in the GCC States, if required.
14. Embassies, representative agencies, or authorities concerned with issuing visas in the GCC States may verify the medical fitness certificate through the QR code (barcode) or the e-system between The Council and the GCC Ministries of Foreign Affairs.
15. The Council of Health Ministers shall have the right to amend, cancel or supplement this Article if necessary.



Chapter (11)

Complaints and Appeal

Article (28):

Complaints or appeals against decisions, results, or procedures related to the provisions hereof shall be submitted to The Council, and The Council 's decision thereon shall be final.

Article (29):

The health center may appeal against:

1. Rejection of accreditation thereof.
2. The suspension /Revocation thereof.
3. The observations and recommendations of the Technical Committee.

Article (30):

Complaints or appeals mentioned herein shall be submitted in writing in accordance with the procedures specified by The Council. The Council shall determine the procedures for dealing with such complaints or appeals and suggestions related to the Expatriates' Check-up Program, and shall also determine the forms, conditions and guidelines related thereto.

Article (31):

Complaints received by The Council against any member of the Technical Committees shall be referred to the member's state to be considered by the competent department at the ministry of health, pursuant to Resolution No. (9) Of The Council of Health Ministers at its 50th Conference in Kuwait, as well as Resolution No. (4) At the 51st Conference in Geneva in 2001. The submitted complaints shall be accompanied by evidence and submitted by the official authorities.





Article (32):

Disagreements or disputes, whether judicial or non-judicial, that arise between the owners of accredited centers, between the centers and the authorities of their countries, between the centers and citizens of those countries, or between the centers and their employees, supervisors, or persons referred thereto to undergo the medical examination, shall be related to those parties, and The Council shall neither be a party thereof nor bear any consequences of any kind for any of such disputes or disagreements . If such disputes or disagreements are related to The Council or the implementation of the conditions and guidelines contained herein, then The Council shall have the right to decide on the matter as deems appropriate, in accordance with the provisions of Resolution No. (4) Passed at the 51st Conference of The Council of Health Ministers.

Article (33):

Requests and complaints received by The Council from the accredited centers shall only be submitted by the owner of the center or a duly authorized person by virtue an official written authorization that shall have and meet all necessary ratifications and requirements. Complaints or requests submitted otherwise shall not be considered.

Article (34):

The re-inspection of the revoked centers shall not be accepted unless otherwise decided by The Council of Health Ministers.





Chapter (12)

Confidentiality of Information

Article (35):

The Council shall use any of the internationally established information privacy protection systems to protect the information of the Expatriates' Check-up Program, and preserve the expatriates' personal information securely. To this end, The Council shall:

1. Use strict procedures and measures to protect the security of information and technology to prevent loss, misuse, modification, or unauthorized access to the e-system;
2. Set information access control levels for the e-system users;
3. Update protection procedures and controls on regular and periodical basis; and
4. Qualify and train The Council 's staff to respect the confidentiality of information.





Chapter (13)

Code of Conduct and Work Ethics

Article (36):

The Council shall ensure the integrity and fairness of all work carried out by the members of the Central Committee, Technical Committees, staff working at The Council.

Article (37):

All accredited health centers or participating in the accreditation process and their affiliates shall avoid any act or behavior that may lead to a conflict of interest, including:

- Accept or offer any fees, rewards, gifts or gratuities, of any value, from or to any party whatsoever.
- Employ, contract, or establish any financial relationship with The Council 's staff or members of the Central Committee or the Technical Committee for the purpose of providing advisory or related services in any capacity, whether directly or through a third party, including services provided to prepare for the evaluation, assistance in the interpretation of standards, etc.
- Establish an employment relationship with one or more members of the Technical Committees, whether directly or through a third party.

Article (38):

Members of the Technical Committee can use the health center vehicle to transport from and to the evaluations site.





Article (39):

The Council shall strive to maintain the highest ethical and legal standards in conducting its work, including honesty and transparency in all The Council's dealings.

Article (40):

Health centers that are accredited or seeking accreditation shall strive to maintain the highest ethical and legal standards in conducting their work; this shall include honesty and transparency in all of their dealings.

Article (41):

The Council shall consider complaints it receives in accordance with the provisions of The Council's rules and regulations; and the rules of justice, confidentiality and impartiality.



Chapter (14)

Final Provisions

Article (42):

The validity period of the medical certificate issued by the accredited centers shall be (2) two months as of issue date, for issuing or approving visa by the issuing authorities.

Article (43):

Upon the expatriate's arrival to any of the GCC countries that issued the visa, the Ministry of Health in that country shall conduct the medical examination thereon. If the expatriate is proven to be medically unfit in accordance with the provisions hereof, The Council shall have the right to take the actions it deems appropriate against this violation, including taking and implementing any of the actions against the violating center, within the following period:

Disease	Action Application Period
Tuberculosis	6 months as of the medical examination date in the country of origin
AIDS	3 months as of the medical examination date in the country of origin
Hepatitis (B) and (C)	3 months as of the medical examination date in the country of origin
Leprosy	2 months as of the medical examination date in the country of origin
Pregnancy	2 months as of the medical examination date in the country of origin
Malaria	One month as of the medical examination date in the country of origin
Mental Illnesses	3 months as of the medical examination date in the country of origin





Article (44):

If any of the centers violates any of the provisions hereof, The Council may take such actions as deems appropriate, including those prescribed for violations committed by the centers, and The Council shall determine those actions and the mechanism for application thereof.

Article (45):

Medical examination procedures shall be applied to all expatriates coming to any of the GCC States for work or residence, except those under the age of 16, taking into account that the vaccination card shall be attached.

Article (46):

The prescribed fees imposed on the centers shall be calculated in accordance with the Financial Rules and regulations for the Expatriates' Check-up Program, Where, The Council shall be responsible for issuing these rules and regulations, and the mechanism for applying thereof.

Article (47):

Except as otherwise provided herein and where the interest of The Council requires decisions or actions thereon, the General Manager shall have the right to issue all decisions and take all actions he/ she deems appropriate in this regard. Such decisions and actions shall be submitted to The Council of Health Ministers in its first meeting to deal therewith as it deems fit.





Article (48):

Any of the Member States, the Executive Board, or the General Manager may propose the amendment of these Regulations, and the proposal for amendment shall be submitted to The Council of Health Ministers to take necessary actions

Article (49):

These Regulations shall replace the Regulations promulgated by The Council of Health Ministers' Resolution No. (5) Passed at its 82nd Conference. These Regulations shall also supersede all previous provisions, rules or resolutions that inconsistent herewith.

Article (50):

These Regulations shall come into force as of the date of its approval and issuing the resolution approving the implementation thereof by The Council of Health Ministers.

Article (51):

These Regulations was drafted in the adopted language, which is Arabic. If these Regulations are translated into any other language, the Arabic language shall be the adopted language in interpreting and implementing hereof.



Article (52):

The Council shall be responsible for identifying and issuing all necessary forms, conditions, requirements, mechanisms, procedures, examinations, standards, sub-regulations, manuals, rules, guidelines, schedules and documents for the implementation of these Regulations, after submitting thereof to the Executive Board, including:

1. Medical Examination Forms.
2. Components of Medical Examinations.
3. Medical Unfitness Cases.
4. Accreditation Criteria of Expatriates Health Check-up Centers
5. Accredited Centers Evaluation Forms.
6. New Centers Evaluation Forms.
7. Electronic Medical Examination Forms.
8. Complaint Forms.
9. Mechanisms for Handling Complaints and Violations Related to the Expatriates' Check-up Program and Penalties Determination.
10. Financial Rules and Regulations for the Expatriates' Check-up Program.



MEDICAL EXAMINATION FORM



DETAILED CANDIDATE REPORT						
LOGO	Medical Center Name:	G.C.C CODE NO				
	Address	GCC Slip NO				
	Phone: Fax:	Date Examined:	Report Expiry Date:			
	Email:					
	Website URL:					
CANDIDATE INFORMATION						
Name		Age		Marital Status		PHOTO
Height		Weight	Kgs	Nationality		
Place of issue		Travelling To		Passport No		
Profession		Visa No		Visa Date		
Gender						
GCC Slip No		Date Examined		Report Expiry		
History of any significant past illness including : 1) Allergy: _____ 2) Others: _____ 3) Psychiatric and neurological disorders (Epilepsy, depression, schizophrenia) : _____						
<p>'I hereby permit the : _____ Medical Center and the undersigned physician to furnish such information the company may need pertaining to my health status and other pertinent and medical findings and do hereby release them from any and all legal responsibility by doing so. I also certify that my medical history contained above is true and any false statement will disqualify me from my employment, benefits and claims.'</p>						
MEDICAL EXAMINATION				LABORATORY INVESTIGATION		



TYPE OF EXAMINATION	RESULTS	TYPE OF LAB INVESTIGATION	RESULTS
EYE	Lt. /6 Rt. /6	URINE	
Comment.		SUGAR	
Ear	Lt. Rt.	ALBUMIN	
SYSTEMIC EXAM:		BILHARZIASIS (IF ENDEMIC)	
CARDIOVASCULAR		STOOL	
B.P		ROUTINE	
HEART		1. HELMINTHES	
RESPIRATORY		2. GIARDIA	
LUNGS		3. BILHARZIASIS (IF ENDEMIC) CULTURE	
CHEST X-RAY		4. SALMONELLA/SHEGELLA	
GASTRO INTESTINAL: ABDOMEN		5. CHOLERA (IF ENDEMIC)	
OTHERS: HERNIA		BLOOD	
VARICOSE VEINS		BLOOD GROUP	
EXTREMITIES		HAEMOGLOBIN	
DEFORMITIES		THICK FILM FOR	
SKIN		1. MALARIA	
VENEREAL DISEASES: CLINICAL		2. MICRO FILARIA	
C.N.S		SEROLOGY	
PSYCHIATRY		1. R.B.S	





Remarks:	2. L.F.T.	
Dear Sir/Madam, Mentioned above is the medical report for Mr./Miss _____ who is FIT/UNFIT for the above mentioned job according to the GCC Criteria.	3. CREATININE	
	ELISA	
	1.HIV I & II	
	2. HBs Ag	
	3.Anti HCV	
	VDRL	
	TPHA (IF VDRL POSITIVE)	
BAR CODE		
P.O Box 7431 - 11462, Riyadh Phone : 966 1 4885270 Fax : 966 1 4885266 EmailID: info@gcchmc.org		





COMPONENTS OF EXPATRIATES MEDICAL EXAMINATIONS

The purpose of the medical examination is to ensure the physical and mental health of the expatriate and that he/she is free from non-communicable (chronic) or infectious diseases, and fit to perform his/her job duties.

The expatriate medical examination shall include: Medical History, Clinical Examination, Laboratory Tests, and Psychological and Mental Status Examinations.

First: Medical History

The expatriate shall not have suffered from any of the following diseases:

1. Any mental or neurological disease, and shall be free from symptoms and clinical signs indicating the presence of these diseases;
2. Heart diseases;
3. Lung diseases such as bronchial asthma;
4. Renal disease, Renal failure, or chronic Renal disease that leads to Renal failure;
5. Liver disease or failure;
6. Any hernia or intra-abdominal swelling or inflammation;
7. Congenital/pathological limb or vertebral anomalies.
8. Chronic or viral skin diseases;
9. Rheumatism or Lymphadenoma;
10. Blood diseases such as anemia, leukemia, etc.; and/or
11. All allergic diseases, or clinical signs of allergies.





Second: Clinical Examination

It shall include general and systemic examination

1. General Medical Examination

- a. Weight and height;
- b. Blood Pressure: Within the normal measurement limits;
- c. Heart rate: Regular and within the normal measurement limits;
- d. Visual acuity: Adequate for the duty, taking into consideration the occupations that require a visual acuity of no less than 6/6 and 6/9, with or without glasses; and
- e. Color Vision: Shall be normal.

2. Systemic Examination

a. Circulatory System:

Normal heart function, and the heart shall be free from congenital heart defects and organic cardiovascular diseases.

b. Respiratory System:

Normal lung function tests.

c. Digestive System:

The expatriate shall not be suffering from any type of hernias (umbilical or inguinal) or ascites. Also, the expatriate shall have no intra-abdominal organs enlargement or inflammation nor tumor.

d. Locomotor System:

The extremities shall be free from any congenital or pathological abnormalities. The legs shall be free from varicose veins, and there shall be no spinal deformities or herniated discs.





e. Genitourinary System:

Free of symptoms or clinical signs of any venereal diseases.

f. Skin:

Free of pathological signs of leprosy and other chronic skin diseases such as (Eczema and psoriasis) or any other infectious skin diseases such as chronic tinea and other skin fungi and scabies.

g. Nervous and Sensory System

- Normal pupils size and visual field, without apparent strabismus, and with normal near vision.
- No infectious diseases such as (granular conjunctivitis - purulent conjunctivitis - trachoma), as well as other diseases that require prolonged treatment or surgical operations such as (cataracts or glaucoma).
- Normal hearing levels.

h. Mental Status Examination

1. General Observations

a. Appearance

- Physical: healthy, ill, distress
- Hygiene: clean, body odor, shaven, grooming
- Dress: clean, dirty, neat, ragged, climate appropriate — anything unusual?

b. Speech

- General: accent, clarity, stuttering, lisp
- Rate: fast (push of speech) or slow
- Latency (pauses between questions and answers): increased or decreased
- Volume: whispered, soft, normal, loud





c. Behavior

- General (Psychomotor activities): increased activity (restlessness, agitation, hyperactive, lethargic), decreased activity.
- Eye Contact: decreased, normal, excessive, intrusive
- Manners: motivated, negativistic

d. Cooperativeness

- Cooperative, friendly, reluctant, hostile

2. Thinking

a. Thought Process

- Tight, logical, goal directed, loosened, circumstantial, tangential, flight of ideas, word salad

b. Thought Content

- Future oriented, suicidal ideation, homicidal ideation, fears, ruminative ideas

c. Perceptions

- Hallucinations (auditory, visual, olfactory)
- Delusions (paranoid, grandiose, bizarre)

3. Emotion

a. Mood

- Candidate describes in own words

b. Affect

- Type: depressed/sad, anxious, euphoric, angry
- Range: full range, labile, restricted, blunted/flattened





4. Cognition

a. Orientation/Attention

- Time, place, person, situation

b. Memory

- Immediate, short and remote

c. Insight/Judgment

- Good, limited or poor (based on actions, awareness of illness, plans for the future)

i. Other

1. Swollen lymph nodes, goiter, and any apparent tumors.
2. Breast check for women.
3. For females: Applicant shall not pregnant and shall not suffer from any type of vaginal bleeding, uterine prolapse and breast tumors.

Third: Laboratory Tests

1. Blood:

- a. A Complete Blood Count (CBC); with normal result, and the hemoglobin percentage shall not be less than 7 g / 100 ml.
- b. Blood smear for malaria and filaria to ensure non-existence thereof.
- c. Blood Sugar Level: shall not be higher than normal.
- d. Normal Renal and Liver Functions.
- e. HBsAg and Anti-HCV: results should be "Negative".
- f. HIV test: result should be "Negative"
- g. VDRL or TPHA test: VDRL result should be "Negative", if it is "Positive", TPHA test should be "Negative".

2. Urine

A complete urinalysis with normal results and no sugar, albumin traces and no Schistosomal infections (bilharzia) in endemic areas.





3. Stool

Routine Stool analysis shall be conducted to ensure that the expatriate is free from infectious parasites and intestinal worms.

A Stool culture analysis shall also be conducted to ensure that the expatriate is free from salmonella, shigella and cholera in endemic areas.

Fourth: Radiological Examinations:

- A chest x-ray shall be conducted to ensure that there are no lung diseases.

* For pregnant women joining their families, the following conditions shall be applied:

First Trimester of Pregnancy	Chest x-ray shall be postponed to the second trimester of pregnancy
Second Trimester of Pregnancy	To explain to the pregnant woman that conducting x-ray during the second trimester of pregnancy cause no harm and obtain her consent. If she refuses, the chest x-ray shall be postponed until after giving birth.
Third Trimester of Pregnancy	To explain to the pregnant woman that conducting x-ray during the second trimester of pregnancy cause no harm and obtain her consent. If she refuses, the chest x-ray shall be postponed until after giving birth.





MEDICAL UNFITNESS CASES

Infectious Diseases

- 1- Positive Human Immunodeficiency Virus (AIDS).
- 2- Positive Hepatitis (B) Surface Antigen (HBs Ag).
- 3- Positive Anti Hepatitis (C) Virus (Anti-HCV).
- 4- Microfilaria and Malaria.
- 5- Leprosy.
- 6- Any abnormal changes on the chest x-ray, including but not limited to:
 - a. Active or past pulmonary tuberculosis.
 - b. Pulmonary cavitation, fibrosis, and pulmonary calcification.
 - c. Pleural effusion or condensation.
 - d. Lymphadenopathy

Non-Communicable Diseases

1. Renal Failure.
2. Liver Failure or hepatic insufficiency.
3. Heart Failure.
4. Uncontrolled Hypertension.
5. Uncontrolled Diabetes.
6. Cancer of All Types.
7. Psychological and Neurological disorders.
8. Any distortion, amputation or physical disability impeding the performance of work.
9. Hemoglobin below 7 g/dL.

Others

1. Pregnancy in case the expatriate applies for a work visa.





ACCREDITATION CRITERIA OF EXPATRIATES' HEALTH CHECK-UP CENTERS

The criteria below represent the minimum requirements for the accreditation of the health facilities for the Expatriates' Health Check-up.

First: Mandatory Standards

1. Local authorities license
2. Medical X-ray services license
3. Medical staff practice license
4. Active electronic verification personal identification system
5. Internal electronic registration system

Medical Screening Service

1. Two (2) physicians
2. Two (2) nurses
3. Two (2) medical examination rooms

Laboratory Service

1. One (1) Clinical pathologist
2. Two (2) Laboratory Technician
3. One (1) Nurse or Phlebotomist for samples collection
4. Fully automated ELISA analyzer
5. Chemistry equipment
6. Hematology Analyzer Device
7. Microscope





X-Ray Service

1. Full time or part time radiologist
2. Two (2) full time X-ray technicians
3. Digital X-Ray Machine

Second: Other Standards

1. Center Building

- Convenient location and easy access
- General appearance of the building
- The entrance in front of the building and easily identified
- All sections of the center are in one building.

2. Reception and Waiting Room

- General appearance
- The space and capacity of waiting area
- Furniture
- Public services

3. Administration

- Director or administration office
- Report generation area

4. Medical Examination Service

- The Space and general appearance of examination rooms
- Active electronic personal identification system (Score 0 or 5)
- Clinical examination equipments
- Availability and Quality of visual acuity testing procedure





5. Sample Collection Service

- Independent place and general appearance
- Active electronic personal identification system (Score 0 or 5)
- Sample collection tube/containers
- Samples labeling method
- Medical waste disposal method
- Infection control procedure

6. Laboratory Service

- The area and general appearance
- Refrigerator temperature monitoring (thermometer/chart)
- Results recording system
- The quality assurance program
- The availability of purchase invoices for laboratory equipments
- Availability of laboratory equipments maintenance contract
- Medical waste disposal method

7. X-Ray Service

- The area and general appearance
- Active electronic personal identification system (Score 0 or 5)
- X-ray films recording system
- Adequacy of changing room
- Reporting area



ACCREDITED CENTERS EVALUATION FORM

City:		Date of Evaluation:	
Centre Name:		Code Number:	
The Centre		Notes/Action	
1)	General appearance, Cleanliness, Reception (Space, seats, furniture)		
2)	Active electronic ID system & linked to all sections		
The Administration		Notes/Action	
1)	Valid local authorities License		
2)	Valid employment contract for medical staff		
3)	Adequacy of candidate Record-keeping system		
4)	Medical waste disposal (contract/procedure)		
Consultation Room		Notes/Action	
1)	Adequacy of the medical examination site (tools, area, cleanliness)		
2)	Adequacy of visual acuity testing procedure		
Sample Collection Room		Notes/Action	
1)	Independent place, area & general appearance		
2)	Availability and quality of sample collection (tube/containers)		
3)	Adequacy of infection control procedures		
Laboratory		Notes/Action	
1)	The area and general appearance		
2)	Registration & Results recording system		
3)	Reagents purchase invoices & equipments maintenance contract		
4)	Refrigerator temperature monitoring (thermometer/chart)		
5)	Validity of Reagents		
6)	Quality assurance certificate		
Radiology		Notes/Action	
1)	The area, general appearance and adequate changing room		
2)	X-ray films recording & data saving for 1 year		
3)	Digital X-Ray Machine & maintenance contract		
Committee Decision			
Committee Members			
1)	2)	3)	
4)	5)	6)	





NEW CENTERS EVALUATION FORM

City				
Centre Name				
Date of Evaluation				
Section	No	Mandatory Standard	Yes/No	Remarks
Management	1)	Local authorities license		
	2)	Medical X-ray services license		
	3)	Medical staff practice license		
	4)	Active electronic verification personal identification system		
	5)	Internal electronic registration system		
Medical Examination	6)	Two (2) doctors		
	7)	Two (2) nurses		
	8)	Two (2) medical examination rooms		
Laboratory	9)	Clinical pathologist		
	10)	Two (2) Laboratory Technician		
	11)	Nurse or Phlebotomist for samples collection		
	12)	Fully automated ELISA analyzer		
	13)	Chemistry equipment		
	14)	Hematology Analyzer Device		
	15)	Microscope		
Radiology	16)	Full time or part time radiologist		
	17)	Two (2) full time X-ray technicians		
	18)	Digital X-Ray Machine		
No	Other Standards		Rating 1-5	Notes
The Center Building				
1)	Convenient location and easily accessible			
2)	The appearance of the building			
3)	The entrance in front of the building and easily identified			
	Total		15	
Reception and waiting area				



4)	The general appearance		
5)	The space and capacity of waiting area		
6)	The furniture		
7)	Public services		
	Total	20	
The Administration			
8)	Director or administration office		
9)	Report generation area		
	Total	10	
Clinical Examination Area			
10)	The Space and general appearance of examination rooms		
11)	Active electronic personal identification system (score 0 or 5)		
12)	Clinical examination equipments		
13)	Availability and Quality of visual acuity testing procedure		
	Total	20	

No	Other Standards	Rating 1-5	Notes
Sample Collection Room			
14)	Independent place and general appearance		
15)	Active electronic personal identification system (score 0 or 5)		
16)	Sample collection tube/containers		
17)	Samples labeling method		
18)	Medical waste disposal method		
19)	Infection control procedure		
	Total	30	
Laboratory			
20)	The area and general appearance		
21)	Refrigerator temperature monitoring (thermometer/chart)		
22)	Results recording system		
23)	The quality assurance program		
24)	The availability of purchase invoices for laboratory equipments		
25)	Availability of laboratory equipments maintenance contract		
26)	Medical waste disposal method		
	Total	35	



Radiology			
27)	The area and general appearance		
28)	Active electronic personal identification system (score 0 or 5)		
29)	X-ray films recording system		
30)	Adequacy of changing room		
31)	Reporting area		
	Total	25	
Final grade			
/155			
Committee's decision			
Remarks			
Committee's members			
1)	2)	3)	
4)	5)	5)	



ELECTRONIC MEDICAL EXAMINATION FORM

DETAILED CANDIDATE REPORT

CANDIDATE INFORMATION										PHOTO
Name			Age		Nationality					
Gender			Marital Status		Profession					
Passport No			Place of issue		Travelling To					
Phone		Email:			Examination Date					
Medical Centre Name				Report Issue Date						
				Report Expiry Date			*From Examination Date			
MEDICAL EXAMINATION: General					INVESTIGATION					
Height		cm	Weight		Kgs	BMI	CHEST X-RAY			
B.P		/	Pulse		/min	RR	/min	LABORATORY INVESTIGATION		
Visual Acuity		Unaided		Aided		TYPE OF LAB INVESTIGATION			RESULTS	
		Rt. Eye	Lt. Eye	Rt. Eye	Lt. Eye	BLOOD GROUP				
Distant						HAEMOGLOBIN				
Near						THICK FILM FOR				
Colour Vision		<input type="checkbox"/> Normal	<input type="checkbox"/> Doubtful	<input type="checkbox"/> Defective		1. MALARIA				
Hearing		Rt. Ear		Lt. Ear		2. MICRO FILARIA				
						BIOCHEMISTRY				
MEDICAL EXAMINATION: Systemic					FINDINGS			R.B.S		
GENERAL APPEARANCE								L.F.T.		
CARDIOVASCULAR								CREATININE		
RESPIRATORY								SEROLOGY		
ENT								HIV I & II		
GASTRO INTESTINAL:								HBs Ag		
ABDOMEN (Mass, tenderness)								Anti HCV		
HERNIA								VDRL		
GENITOURINARY								TPHA (IF VDRL POSITIVE)		
HYDROCELE								URINE		
MUSCULOSKELETAL								SUGAR		
EXTREMITIES								ALBUMIN		
BACK								STOOL		
SKIN								ROUTINE		
C.N.S								HELMINTHES		
DEFORMITIES								OVA		
MENTAL STATUS EXAMINATION								CYST		
A. Appearance								OTHERS		
Speech										
Behaviour										
B. Cognition:										
Orientation								VACCINATION STATUS		
Memory						TYPE	STATUS	DATE		
Concentration						Polio				
C. Mood						MMR 1				
D. Thoughts						MMR 2				
OTHERS:						Meningococcal				
						COVID 19 *Optional				



REMARKS

Dear Sir/Madam,

On the basis of the examinee's clinical examination and the diagnostic test results recorded above, the GHC declare that

Mr./Miss

is medically

Fit/Unfit

for the above mentioned job according to the GCC Criteria.

BAR CODE

P.O Box 7431 - 11462, Riyadh | Phone : 966 1 4885270 | Fax : 966 1 4885266 | EmailID: info@gcchmc.org

I hereby,

- Acknowledge that the medical examination form that I submitted through the GHC electronic system is accurate,
- Acknowledge that this GHC electronic medical fitness certificate is based on the submitted medical examination form,
- Acknowledge that the GHC hold no responsibility for any administrative or financial consequences resulting from the issuance of this electronic medical fitness certificate,
- Accept the re-examination in the GCC countries, and that the GCC countries hold no responsibility in case that any disease is discovered during the re-examination.



COMPLAINT FORM

Instructions:

Please use this form to submit a complaint

Complete all items to the best of your knowledge. Failure to do so may result in delays or rejection.

Enclose any copies of the connotation that may be relevant to your claim.

* Indicates a required field

*The GHC does not investigate complaints regarding personality conflicts

* Complainer's Name	* Contacts	* Email
* Applicant's Name * if different than above	* Relationship to the Complainer	* Date

* Define your problem

Please select the reason/s you are filing this complaint

* Please select all that apply

Category	Sub-Category
Technical	<ul style="list-style-type: none"> - Medical examination was not conducted - Laboratory tests or chest X-rays was not performed - Error in the result of laboratory analysis and/or radiology report - Not being vaccinated
Administrative	<ul style="list-style-type: none"> - Inadequate level of the facility environment - Delay in the issuance of the medical fitness certificate - Loss of specimen - Postponing or delaying the examination appointment - Delay in the determination of health fitness - Violation / breach of confidentiality

Complaint Content

* Provide a complete description of the complaint.





Supporting Documents

* Are you sending supporting documents?	Attach
	Attach
	Attach
	Attach

* Defendant's Information

Country	City	* Health Centre Name
---------	------	----------------------

* Declaration

By filling in my name and date below, I declare that:

- a) The information contained on this form is true and accurate and I assume full responsibility for the incorrectness of this information.
- b) This complaint will become part of GHC's permanent records and is subject to GHC rules and regulations.
- c) This complaint may be released to the accredited Health Centre whom I am complaining.

Complainer's Name	Date
-------------------	------

For Official Use Only

Reference No.	Received through	Specialist Name	Date
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THE MECHANISM FOR HANDLING COMPLAINTS AND VIOLATIONS RELATED TO THE EXPATRIATES CHECK-UP PROGRAM

1. Introduction

Health complaints are defined as any notification of dissatisfaction from the beneficiary of the services provided to him/ her, which are addressed by the client to the officially competent authority. The complaint may be related to the administrative policies or procedures, service providers' behavior, the quality of services, or the speed and ease of access to the service.

Complaints filed by clients are one of the most important tools for measuring and improving the services provided to beneficiaries, and they significantly show everything that would affect the level of beneficiaries' satisfaction with these services.

In order to realize The Council's vision of raising the level of services provided to clients by the accredited centers, and increase their satisfaction level, The Council has established this mechanism to facilitate filing and dealing with complaints related to the Expatriates' Check-up Program.

2. Complaint Management

The Council shall form a specialized work team called the "Complaints Unit", and the Complaint Unit shall report directly to the director of the Expatriates' Check-up Program.

Complaint Unit Duties

The Complaint Unit at The Council shall be responsible for the following:

1. Receive and follow up all client complaints submitted to The Council and ensure the authenticity of the information;
2. Respond to all complaints without exception or delay;
3. Classify complaints, and inform the applicant of complaint receipt;



4. Analyze complaints;
5. Communicate with the concerned entities related to the complaint in order to discuss the necessary solutions to address it;
6. Adhere to timeframes for resolving complaints;
7. Prepare a comprehensive register of complaints and their data;
8. Prepare periodic reports on all submitted complaints, and describe their status (whether those that have been resolved or being processed, along with mentioning the problems and obstacles to their resolution); and
9. Study the suggestions submitted to the Complaint Unit and consider the possibility of implementation thereof.

Complaint Unit Work Rules

1. The complainer shall be informed of the complaint acceptance or rejection, together with the reasons, within a maximum of (3) three working days as of the filing date thereof.
2. When required, the Complaint Unit shall have the right to request or review any files, data, papers, documents or information related to the subject of the complaint from the client or the accredited center, for the purposes of verification and handling thereof.
3. If the complaint is accepted, the Complaint Unit shall follow the following procedures:
 - a. Communicate with the center concerned with the subject of the complaint to request its responses and explanations thereon.
 - b. If the subject of the complaint is related to medical records and reports, the Complaint Unit shall extract the complainer's medical file from the e-system.
 - c. Submit all papers and documents associated with the relevant complaint to a committee of (3) three members of the Gulf Central Committee to take the necessary decision or action.
 - d. The Complaint Unit shall to notify the health center and the complainer, in writing or electronically, of the final decision within a maximum period of (30) thirty days as of the filing date of the





relevant complaint, unless it is unable to do so for reasons beyond its control.

4. The information, data and documents related to the complainer and the party complained against that the Complaint Unit's employees have access thereto shall be treated as confidential and shall not be accessed by any other party.
5. Complaints considered by the Complaint Unit shall be related to the expatriate's medical examination.
6. Complaints that are not considered by the Complaint Unit shall be:
 - a) The complaints that are not directly related to the Program; including complaints related to internal disputes between persons and government actions in the concerned country. The response to the complainer regarding these complaints shall be made in accordance with the laws and procedures of the concerned country.
 - b) The complaints previously filed, handled, and decided or rejected by the Complaint Unit.
 - c) The complaints which are older than two weeks.
 - d) The anonymous complaints.

3. Receipt of Complaints

1. Anyone may file a complaint provided that it shall be related to the expatriates' medical examination.
2. The complaint shall be received as follows:
 - Personal presence of the client or his/her representative and filling out a written complaint form;
 - Fax;
 - Mailbox;
 - E-mail; and/or
 - Any other method approved by The Council.
3. Complaints shall always be filed in writing.





4. When submitting a complaint to The Council, the complainer shall identify himself, identify the subject of the complaint, describe the subject clearly and provide any objective evidence to support each element or aspect of the complaint, if any.
5. Complaints that are insufficiently substantiated or incomplete may be considered inadmissible and rejected by The Council. In such case, The Council shall inform the complainer of the same.
6. Once a complaint is filed, the complainer shall be notified of receipt of the complaint.
7. Complaints shall be submitted to The Council within (2) two weeks as of the date of the event that led to the submission thereof. Complaints that are submitted to The Council after this period shall not be considered.

4. Follow-Up and Completion Reports

1. In case a default or negligence in the expatriate examination service is proven, the Complaint Unit may, through the Three-Member Committee of the Gulf Central Committee (based on the severity of the complaint), take one of the following actions against the health center:
 - a. Give a written notice.
 - b. Give a written warning.
 - c. Evaluate the center by the Technical Committee.
 - d. Suspend the center for a certain period.
 - e. Revoke the center.
2. The Council shall record the complaint, its results and any action taken thereon in the complaints database, including any specific correction and corrective action.





5. Appeal Right

In case a disciplinary penalty from the above-mentioned actions (except for the written notice) is taken, the health center shall have the right to appeal against the taken decision made based on these Regulations.

6. Complaint Classification

The tables in Paragraph No. (7) of this mechanism show the classification of complaints, violations, and penalties prescribed therefor.

7. Tables of Complaints, Violations and Their Prescribed Penalties

First: Table of Violations and Penalties Related to Duties and Functions of Accredited Centers:

Category	Classification	Violation and Penalty	
		Violation	Penalty
Technical Complaints	Failure to conduct the examinations	Failure to conduct the required examinations according to the Medical Examination Form	Notice/Warning/Re-evaluation/Suspension/Revocation
	Failure to conduct the required tests	Failure to conduct lab tests or chest x-ray	Notice/Warning/Re-evaluation/Suspension/Revocation
	Error in the results of the lab test and x-ray report	Error in the medical examination results and reports	Notice/Warning/Re-evaluation/Suspension/Revocation





	Failure to vaccinate	Non-compliance with the controls and conditions set by The Council regarding the vaccinations of expatriates	Notice/Warning/Re-evaluation/Suspension/Revocation
Administrative Complaints	Inadequate level of the facility environment	Non-compliance with the standards of expatriates medical examination centers	Notice/Warning/Re-evaluation/Suspension/Revocation
	Late issuance of the medical fitness certificate	Late issuance of the medical fitness certificate for a period of more than (3) three days as of the medical examination date	Notice/Warning/Re-evaluation/Suspension/Revocation
	Loss of the client's specimen	Negligence or default in the medical examination procedures	Notice/Warning/Re-evaluation/Suspension/Revocation
	Deceleration of examination procedures	Delay the examination or the examination date by the center	Notice/Warning/Re-evaluation/Suspension/Revocation
	Delay fitness determination	Delay in determining medical fitness and unfitness cases according to the conditions set by The Council	Notice/Warning/Re-evaluation/Suspension/Revocation
	Violation /breach of confidentiality	Failure to maintain confidentiality in medical examination results	Notice/Warning/Re-evaluation/Suspension/Revocation



Second: Table of Administrative and Financial Violations, and Their Prescribed Penalties:

#	Violation Type	Penalty
1	Failure to use or enter examinees' data into the e-system.	Fine/Suspension/Revocation
2	Non-conformity of the information of the expatriate's health status (report) which is registered in the e-system for expatriates' examination and the information registered with the relevant visa issuance authorities \in the GCC States.	Fine/Suspension/Revocation
3	Failure to pay the annual fee to The Council within a month as of The Council's notification date.	Suspension for (3) months
	In case of failure to pay the annual fee within (2) two months as of the suspension date.	Revocation
4	Failure to pay the imposed fines within a month as of the date of being notified by The Council.	Suspension for (3) months
	In case of failure to pay fines within (2) two months as of the suspension date.	Revocation
5	Relocation to another location without obtaining the approval of The Council.	Revocation
6	Relocation to another location after obtaining the approval of The Council.	Evaluation score is less than 60% - (Revocation) Evaluation score is between 60-80% - the center shall be suspended for a period of (3) months, provide The Council with the required amendments during the suspension period, and shall be re-evaluated in the next visit.





		In case of failure to pass the second evaluation - (Revocation)
7	Providing the medical examination service for expatriates at a sub-center/s of the accredited center.	Revocation
8	Absence of an activated identification system.	Partially \$2500 Completely \$5000
9	Absence of local licenses to practice for medical staff.	A fine of \$5000
10	Absence of a valid local authorities License.	A fine of \$5000 With a grace period of one month to provide the License, and in case of failure to do so, the center shall be suspended until the License is provided
11	The absence of one of health practitioners in the center.	A fine of \$2000
12	Failure of reallocation as recommended by the Technical Committee.	Revocation
13	Evidence of deficiencies/ negligence in the expatriates examination service	Notice/Warning/Re-evaluation/Suspension/Revocation
14	Any act or behavior that may lead to a conflict of interest or non-compliance with the local regulations and prices	Warning/Suspension/Revocation



Third: Table of Technical Violations and Their Prescribed Penalties:



#	Violation Type	Penalty
1	The absence of x-rays/lab test results for one year.	A fine of \$5000
2	Failure to update equipment and devices.	A fine of \$1000, and \$5000 if repeated.
3	Non-use of a digital x-ray machine.	A fine of \$5000
4	Use of expired reagents or vaccines.	A fine of \$5000
5	Use of rapid reagents for viral assays.	A fine of \$5000
6	Reagents refrigerators are not equipped with temperature monitoring device.	A fine of \$2000
7	Use of expired or poor quality sample collection tubes.	A fine of \$2000
8	Following improper vaccines storage method.	A fine of \$3000
9	Absence of vaccination records for one year.	A fine of \$2000
10	Inadequate visual acuity testing procedure	Warning
11	Failure to implement the Infection Control/ Medical Waste Disposal procedures	Partially: Warning Completely: A fine of \$2000
12	Substantiating of a violation not included in the Penalties List.	The penalty shall be estimated according to the violation by the Technical Committee and shall be applied after being approved by the Central Committee





Fourth: Table of Violations Related to Unfitness Cases, and Their Prescribed Penalties:

#	Case	Violation Type	Penalty
1	AIDS	1-3 4-7 7 and above	A fine of \$2500 per case Suspension for (6) months Revocation
2	Hepatitis "B" and "C"	1-3 4-7 8-11 12-15 16-19 20-23 24 and above	A fine of \$1500 per case A fine of \$2000 per case A fine of \$2500 per case Suspension for (3) months Suspension for (6) months Suspension for (9) months Revocation
3	Tuberculosis or any pathological signs on the chest x-ray	1-5 6-10 11-15 16-20 21-25 26-30 31 and above	A fine of \$1500 per case A fine of \$2000 per case A fine of \$2500 per case Suspension for (3) months Suspension for (6) months Suspension for (9) months Revocation
4	Leprosy	1-5 6-10 11-15 16-20 21-25 26-30	A fine of \$1500 per case A fine of \$2000 per case A fine of \$2500 per case Suspension for (3) months Suspension for (6) months Suspension for (9) months





		31 and above	Revocation
5	Microfilaria and Malaria	1-5 6-10 11-15 16-20 21-25 26-30 31 and above	A fine of \$1500 for the total number of cases A fine of \$3000 for the total number of cases A fine of \$5000 for the total number of cases Suspension for (3) months Suspension for (6) months Suspension for (9) months Revocation
6	Non-Communicable Diseases	10-19 20-29 30-39 40-49 50-59 60 and above	A fine of \$3000 for the total number of cases A fine of \$5000 for the total number of cases Suspension for (3) months Suspension for (6) months Suspension for (9) months Revocation
7	Psychological Disease	1-3 4-7 8-11 12 and above	A fine of \$1500 per case A fine of \$2500 per case Suspension for (6) months Revocation



Fifth: Table of Repeated Violations and their Prescribed Penalties:

#	Violation Type	Penalty
1	If a total of 30 unfit cases (viral diseases and tuberculosis) are recorded for (2) two consecutive years.	Suspension for (6) months
2	Suspension of the center for (6) months for (2) two consecutive years due to unfit cases.	Revocation





FINANCIAL RULES AND REGULATIONS FOR THE EXPATRIATES CHECK-UP PROGRAM

Introduction

The purpose of these Financial Rules and Regulations is to set out the policies and procedures that govern payable fees for The Council Expatriates' Check-up Program, and they shall be followed by all of the Program staff when conducting all financial activities. The purpose of these policies and procedures shall be to:

1. Set appropriate regulatory standards for all financial activities of The Council Expatriates' Check-up Program and the Finance Department;
2. Clearly define the financial policies and procedures for the Expatriates' Check-up Program, including efficient and effective administrative reports, in order to be used in managing and organizing the Program with all activities and functions thereof;
3. Secure and provide a reference guide for all staff of the Expatriates' Check-up Program and the Finance Department at The Council; and
4. Provide a basis for a correct, consistent and comprehensive awareness and understanding of all aspects related to the fees for the Expatriates' Check-up Program even when its staff is changed.





Chapter (1)

Definitions

Article (1)

In applying the provisions of the Financial Rules and Regulations, the following words and phrases shall have the meanings ascribed thereto unless the context otherwise requires:

The Council: Gulf Health Council.

General Manager: The Council's General Manager.

Central Committee: Gulf Central Committee for the Expatriates Check-up Program.

Expatriates Check-up Program: The Council's Expatriates' Check-up Program.

Finance Department: The Council's Finance Department.

Fee/s: Amounts or fees imposed by The Council on the registration in the e-system, submission of applications, membership, membership renewal, evaluation, re-evaluation, grievances, penalties, violations, or other works, services and procedures related to expatriates' Check-up program.

Penalties: Penalties stipulated in the Mechanism for Handling Complaints and Violations Related the Expatriates' Check-up Program.

Application Fee: Imposed fee on the centers applying for accreditation to examine expatriates, stipulated in the Financial Rules and Regulations, and that shall be paid upon the application submission, in order to cover the efforts of The Council from the stage of submission thereof pending to a decision thereon. It shall be due for one time.

New Membership Fee: Fee imposed by The Council on the centers' membership, and shall be paid when The Council notifies the applicant of the accreditation approval and before the membership is issued.

Membership Renewal Fee: Fee imposed by The Council on renewing the membership of the accredited Expatriates' Health Check-up Centers in the





countries of origin. Such fee shall be paid upon the notification of the said renewal by The Council to the accredited center prior to the issuance of the membership renewal.

Re-Evaluation Fee: Fee imposed by The Council on the re-evaluation of the accredited Expatriates' Health Check-up Centers in the countries of origin.

Fines: Financial penalties that are applied to the accredited Expatriates' Health Check-up Centers, and stipulated in the Mechanism for Handling Complaints and Violations.

Appeal Fee for Center's Accreditation: Fee imposed by The Council on the centers that appeal for not being accredited.

E-System Registration Fee: Fee imposed by The Council on expatriates for booking medical examinations through the Program's e-system.





Chapter (2)

Fees Included in the Fee Table

Article (2)

The fee tables in the Financial Rules and Controls shall include the following fees:

1. Application Fee;
2. Center Inspection Fee;
3. New Membership Fee;
4. Membership Renewal Fee;
5. Re-Evaluation Fee;
6. Fines;
7. Appeal Fee for Center's Accreditation; and
8. E-System Registration Fee.





Chapter (3)

General Principles for Fees-Setting

The annual and temporary fees shall represent a part of the revenues collected by The Council in order to finance its activities, and shall be based on the following general principles:

1. The application fee shall be paid in full upon the submission of the application, and shall be non-refundable regardless of the acceptance or rejection of the accreditation.
2. Fees shall be set so that they shall be sufficient and appropriate to fund the activities of the Expatriates' Check-up Program Department.

Article (3)

The following factors shall be taken into consideration when calculating fees:

1. Participate in the membership application and encourage competition;
2. Impact of fees on expatriates;
3. The fees shall reflect the actual value of the expatriates' health Check-up service in the country of origin;
4. The fees shall not violate the Medical Examination Regulations of Expatriates Coming to GCC States for Work or Residence; and
5. Economic considerations that may affect the work of the accredited centers.





Article (4)

The Council may take the necessary measures in case of failure to pay the fees specified in the Financial Rules and Regulations in accordance with the procedures herein stipulated.

Article (5)

Upon the recommendation of the Central Committee, The Council shall amend the fees from time to time if the Central Committee deems it necessary.





Chapter (4)

Fees Collection Principles and Rules

Article (6)

Fees shall be set as follows:

Table No. (1): Fees Payable to the Gulf Health Council

Fee Type	Value
1. Application Fee	\$1,000
2. Center Inspection Fee	\$5,000
3. New Membership Fee	\$3,000 (To be reduced according to the months of work)
4. Membership Renewal Fee	\$3,000
5. Re-Evaluation Fee	\$5,000
6. Fines	As stipulated in the Penalties List
7. Appeal Fee for Center's Accreditation	\$1,500
8. E-System Registration Fee	\$10

Article (7)

In all cases, the e-system registration, application, new membership, membership renewal, re-evaluation, and appeal fees shall be paid in advance and in full. These fees shall be considered non-refundable.

Article (8)

The membership renewal fee shall be paid annually before the renewal for another year, and The Council may amend the terms and dates of payment thereof.





Article (9)

The application fee shall be paid on the submission thereof whether or not the application is accepted.

Article (10)

The new and renewed membership fees shall be paid as of the membership issuance date, and shall be determined proportionally from such date by the number of months. For the purposes of Financial Rules and Regulations, the fraction of a month shall be considered a full month.

Article (11)

The re-evaluation fee shall be payable to cover the costs of assignments related to the re-evaluation.

Article (12)

The fines imposed on accredited centers shall be paid in full and within one month as of notification to The Council.

Article (13)

The number of unfit cases shall be calculated in accordance with the mechanism for calculating unfit cases set out in Annex (1) of the Financial Rules and Regulations.

Article (14)

The Council shall impose the fines on the unfit cases on a quarterly basis, and they shall be paid in full and within one month as of notification by The Council.





Article (15)

The Council shall calculate the differences in fines for unfit cases between each quarter, if any, and include these differences in the invoices for the next quarter. These differences shall be paid within one month as of notification by The Council.

Article (16)

The appeal fee shall be paid upon the submission of the application. \$1,000 of the fee shall be refunded if the appeal is proven to be valid.

Article (17)

The accredited center shall notify The Council before 30th November of each year by a request to cancel the membership. The membership shall be automatically renewed for one year. Further, the accredited center shall pay the fees of the next year, accordingly, the necessary invoices shall be issued thereto. Any cancellation request after this calendar year date shall not be considered.

Article (18)

The Council shall issue invoices to the centers owners, including a list of the payable fees.

Article (19)

The Council shall refund or recover all or part of the previously paid fees in the following two cases:

1. The centers' appeal against fines is proven to be valid; or
2. Failure to visit the center, or renew its membership.





Article (20)

Where possible, the refund or recovery of all or part of the paid fees shall be made by a memo from the Expatriates' Check-up Department on its own or at the request of the concerned person or his/her legal representative. Such memo shall include the total estimated fees, the amount to be refunded or recovered therefrom, and the reason for the refund shall be indicated. This memo shall be made within (2) two weeks as of the date of submitting the fees refund requests or proving the right to refund thereof.

Any requests for fees refund submitted by the concerned parties after the lapse of (3) three months from the payment of these fees shall not be considered.





Chapter (5)

Fees Waivers and Reduction

Article (21)

Based on a decision of the General Manager and upon a recommendation from the Central Committee, the fees imposed on some centers may be reduced or exempt from paying such fees, totally or partially, on a permanent or temporary basis, for economic, social or humanitarian reasons.

Article (22)

The fees for new membership, renewal, and fines shall be reduced in accordance with the General Principles set out in Annex (2) of the Financial Rules and Regulations, and in accordance with Tables No. (4, 8) shown in the same Annex.

Article (23)

The Central Committee may amend the above-mentioned Annex from time to time as it deems necessary.

Article (24)

The Central Committee shall determine the period of reduction or exemption from fees.





Article (25)

Exemptions or reductions on fees shall not prevent the centers from complying with these Regulations.

Article (26)

The Department of the Expatriates' Check-up Program shall notify the accredited centers of the fees payable by them or of any adjustment, correction or change in the fees value, by registered letter with acknowledgment of receipt.





Chapter (6)

General Provisions

Article (27)

The Council shall review the fees periodically or within a shorter period as needed.

Article (28)

Any amendments to the Financial Rules and Regulations shall be approved by the General Manager upon the recommendations of the Central Committee.

Article (29)

The director of the Expatriates' Check-up Program shall be responsible for following up the timely payment of fees, and shall inform the General Manager in writing of each delay thereof and the consequent rescheduling of fees.

Article (30)

The Finance Department shall collect all fees, and the payment shall be made against stamped payment receipts in which the name of the applicant, membership or penalties, the payment date, and the collector's signature shall be indicated.

Article (31)

The director of the Expatriates' Check-up Program and his/her employees shall be held accountable to the General Manager for implementing the provisions of the Financial Rules and Regulations.





Article (32)

The provisions of the Financial Rules and Regulations shall be applicable to all fees for the Expatriates' Check-up Program.

Article (33)

The Council shall have the right to not issue the membership, or suspend access to the e-system of the Expatriates' Check-up Program if the center has not paid all the fees due thereon.

