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சுவசிரிபாய  
SUWASIRIPAYA

මගේ අංකය )  
எனது இல )  
My No. ) CF/EXM/06/2017

ඔබේ අංකය )  
உமது இல )  
Your No. : )

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திகதி )  
Date ) 19/09/2017

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சுகாதாரம், போஷணை மற்றும் சுதேசவைத்திய அமைச்சு  
Ministry of Health, Nutritions & Indigenous Medicine

General Circular Letter No: 02 - 174 / 2017

Provincial Health Secretaries  
Deputy Director General National Hospital of Sri Lanka  
Provincial Directors of Health Services  
Directors of Hospital under the Line Ministry  
Regional Directors of Health Services  
Heads of Institutions

First Departmental Examination for Officers in Class II Segment II  
In the Sri Lanka Scientific Service - 2017 (2<sup>nd</sup> Term)

It is hereby notified that the Departmental Examination which should be passed by Officers in Class II Grade II in the Sri Lanka Scientific Service within three years, will be held on 15/10/2017 in Sinhala, Tamil and English medium. The venue and the time of the examination will be notified along with the Admission Card.

02. Qualifications

Officers who have been appointed to the segment II of the Sri Lanka Scientific service and not completed the examination as yet can apply.

03. Applications

Applications prepared by the candidates as per specimen appended to this letter should be sent under registered cover to reach the Director (Examinations) Ministry of Health, Nutritions & Indigenous Medicine, "Suwasiripaya" No.385, Ven. Baddegama Wimalawansa Thero Mawatha, Colombo 10, on or before 06/10/2017 through their Heads of Institutions. The Head of Division should certify the accuracy of contents in each application. Two self addressed envelopes (Candidates can write their official or private address) in the size of 9" x 4" inches, affixed with stamps to the value of Rs. 35.00 should be sent along with the application. Applications which are received late, incomplete or inaccurate will be rejected.

N.B. Applications should be prepared using a paper of A4 size in such a way that the numbers 01 to 04 appear on the 1<sup>st</sup> page whilst the numbers 05 to 09 appear on the 2<sup>nd</sup> page. Applications that do not comply with the above specimen will be rejected without notice.

04. Examination fees:-

- I Candidates who sit the examination for the first time need not pay examination fees. However in every subsequent sitting they should affix stamps to the value of Rs.25/= per subject in the stamps cage provided for in the application and cancel same by placing their signature and the date.
- II The fees once paid will not be allowed to transfer for any other Examination or refunded under any circumstances.

## 05. Admission to the Examination:-

- I Candidates whose applications have been accepted will be issued with Admission Cards. They should duly complete and submit same to the Supervisor at the Examination centre. Otherwise they will not be allowed to sit the examination.
- II Candidates should prove their identity to the Supervisor at the examination hall. For this purpose one of the following documents will be accepted.

- |                                |                           |
|--------------------------------|---------------------------|
| (a) National Identity Card     | (c) Valid Driving License |
| (b) Departmental Identity Card | (d) Valid Passport        |

## 06. Scheme of the Examination:-

The examination consists of two written question papers such as **Administration, Establishments and Disciplinary Actions, Medical Services and Laboratory Services** and each paper will receive 100 marks. Candidates should score minimum of 40 marks for each part to obtain a pass from each paper. The examination can be completed at one sitting or at several sittings. At the first attempt officer should apply for all relevant subjects.

## 07. Syllabus of the Examination

### 07.1 Administration, Establishments and Disciplinary Actions Question Paper

Duration 1½ hours. Total marks 100.

Any 04 Questions out of 05 Questions should be answered.

#### Syllabus

Following chapters of the Health Departmental Manual.

- |           |     |   |                                  |
|-----------|-----|---|----------------------------------|
| Chapters: | I   | - | Administration (All Parts)       |
|           | II  | - | Establishments (All Parts)       |
|           | III | - | Disciplinary Actions (All Parts) |

### 07.2 Medical Services and Laboratory Services Question Paper

Question paper consists of 02 parts. Duration 02 hours. Total marks 100.

Any 04 Questions out of 07 Questions should be answered.

#### (a) Medical Services

Following chapters of the Part II of the Health Departmental Manual.

- |            |      |   |  |
|------------|------|---|--|
| Chapters : | I    | - | Hospitals                                |
|            | II   | - | Hospital Patients                        |
|            | III  | - | Sanitation, &c., of Medical Institutions |
|            | IV   | - | Diets                                    |
|            | V    | - | Drugs                                    |
|            | X    | - | Medico Legal Duties                      |
|            | XI   | - | Medical Certificates and Reports         |
|            | XIII | - | Medical Boards                           |
|            | XIV  | - | Hospital and Dispensary Visitors         |

**(b) Laboratory Services**

Following chapters of the Part III of the Health Departmental Manual.

- Chapters :
- I - Administration
  - II - A Pattern for Laboratory Services
  - III - Classification and Grading of Laboratories
  - IV - Laboratory Equipment
  - V - Laboratory Procedures
  - VI - Lists of Duties of Medical Research Institute Staff
  - VII - Lists of Duties of Medical Laboratory Staff other than Medical Research Institute Staff

**08. To follow the Regulations Related to Examination Procedure**

Candidates are warned against copying or attempting to copy from the script of another candidate or from any book or paper or notes whatsoever. No candidate should attempt to look at the script of another candidate and should not help any candidate either help another candidate or obtain help from another candidate or person. Further Mobile phones & the similar electronic equipments should not be used. Any candidate who disregards this rule is liable to punishment.

**09.** Please bring the contents of this circular to the notice of all relevant Officers in your Division / Specialized Campaign /Institution. The information is also available in the Web Site – [www.health.gov.lk](http://www.health.gov.lk)

**n.b - Sinhala medium notification on examination will be effected if any contradictory is arisen in the examination notifications published in Tamil and English mediums.**



M B L Rahuman

Deputy Director General (Admin) 02

For Secretary

Ministry of Health, Nutrition & Indigenous Medicine

**M. B. L. Rahuman**

Deputy Director General (Admin) II

Ministry of Health, Nutrition & Indigenous Medicine

"Suwasiripaya",

385, Rav. Saddagama Wimalawansa Thero Rd.

Colombo 10.



05. (a) Whether you sit for the examination for the first time: -.....
- (b) If not so, have you affixed stamps to the application?

Stamp Cage
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**06. Certificate of the candidate :-**

- (i) I do hereby certify that the particulars furnished by me in this application are true and accurate to my knowledge and I need not affix stamps since I sit the Examination for the first time / have affixed stamps to the value of Rs. .... since I repeat the Examination,\* and the stamps affixed by me to the application are genuine and not used before.
- (ii) I agree to abide by the rules and regulations stipulated by the Department of Health for the conduct of this Examination and if I was found ineligible in accordance with the scheme of the Examination I agree with whatever decision taken for the cancellation of my candidature.

.....  
Date

.....  
Signature of the candidate

**07. Certification of the officer who handle the Personal File.**

I do hereby certify that \*Mr/Mrs/Miss ..... has correctly handed over me the duly filled application before the closing date and particulars furnished in this application are true and accurate as per her personal file and kept a copy of this application is attached to her personal file.

.....  
Date

.....  
Name & Signature

**08. Certification of Head of Institution:**

I do hereby certify that Mr./Mrs./Miss\*..... serves as a ..... in this institution and he / she\* sits the Examination for the first time / not for the first time\* and has affixed stamps to the value of Rs. .... / not necessary to affix stamps\* and the particulars furnished in the Application are true and correct to his/her\* personal file and he/she\* is eligible to sit for the Examination. he/she\* placed his/her\* signature before me.

Date :.....

.....  
Signature of the Head of Institution  
(Rubber Stamp)

**09. Certificate of the Head of Decentralized unit / specialized Campaign**

\*Mrs/Miss ..... serves as a class II Seg II Scientific officer in my Institution and the particulars furnished by her in the Application are correct in accordance with the particulars available in her personal file and she is eligible to sit for the Examination.

.....  
Date

.....  
Signature of Head of Decentralized unit /  
Specialized campaign  
( Frank / Rubber stamp )

\* - Delete words which are inapplicable