



कर्मचारी राज्य बीमा निगम
(श्रम एवं रोजगार मंत्रालय, भारत सरकार)
EMPLOYEES' STATE INSURANCE CORPORATION
(Ministry of Labour & Employment, Govt. of India)



मुख्यालय/Headquarters
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F.No. E-15/13/02/2016-PR

Dated: 15.06.2023

To

- 1. All Addl. Commissioner & Regional Director/Regional Directors/Dy. Directors (I/C)**
- 2. All Medical Superintendents, ESIC Hospitals**
- 3. All Deans, ESIC Medical Institutions**

East Zone: Bihar, Chhattisgarh, Jharkhand, Odisha & Uttar Pradesh

North East: Assam, Tripura & West Bengal

West Zone: Gujarat, Goa, Maharashtra, Madhya Pradesh & Rajasthan

South Zone: Andhra Pradesh, Karnataka, Kerala, Puducherry, Tamil Nadu & Telangana

Sub: Creation of Testimonials of Insured Persons/Beneficiaries-reg.


Madam/Sir,

It is informed that Testimonials based on the success stories highlighting the benefits received by Insured Persons/Beneficiaries is proposed to be developed. In this regard, a team of professionals will visit to the offices/hospitals or identified place/beneficiaries in the concerned Zone, for recording/shooting and developing the testimonials. Therefore, the offices/hospitals are requested to:

1. Identify such Insured Persons/beneficiaries and intimate this office with short brief. The unique case/treatment received at ESIC Hospitals/Medical Colleges may also be reported upon.
2. To contact with Insured Persons/ beneficiaries for scheduling of recording/shooting.
3. To ensure the presence of identified Insured Persons/Beneficiaries for recording/shooting on pre-decided date and venue.
4. The brief of such success stories should be sent to e-mail ID: **pr.branch-hq@esic.nic.in** by **25.06.2023**, so that the team can be briefed accordingly. The visit of the team to the selected Office/Hospital on the basis of such briefs will be intimated accordingly in advance.

This issues with the approval of Director General.

Your faithfully,


15.06.2023
(Pranava Kumar)
Dy. Director (PR)

Copy to:

1. **Medical Commissioner (s)**, East Zone, North East Zone, West Zone and South Zone, ESIC
2. **Insurance Commissioner (s)**, East Zone, North East Zone, West Zone and South Zone, ESIC
3. **Website Content Manager** with request to upload the same on ESIC Website.