



Marketing your practice inside the NMC code

What a doctor in India can and cannot put on a signboard, a website, social media and a Google profile, after the NMC's advertising guidelines of 6 October 2026. Plain English, a source against every rule, ten things to fix this week, and eight ways to stay visible that are all allowed.

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This is a working guide built from the published texts, not legal advice. Where the guidelines leave room, we say so. Rules change: check the date above, and ask your council or a health lawyer about your own case.

What changed on 6 October 2026

On 6 October 2026 the National Medical Commission published **Guidelines on Ethical Advertising and Public Communication** for doctors, hospitals and medical institutions. They came into force the same day. [1]

They are a public notice, not a new Gazette regulation. They sit on top of the 2002 Regulations, which are still the binding code. But State Medical Councils are to act on breaches, and a breach may be treated as professional misconduct, so the safe reading is: **follow them as if they were law**.

[1, 4.2, 10.1]

The seven changes most clinics will feel

1. Every post online should show the doctor's name, qualifications, registration status and registration number. [1, 3.2 Expl. III]
2. No testimonials, promotional patient stories or before and after photographs. **Patient consent does not make them acceptable**. The only exception is anonymised material used strictly for scientific or educational purposes, such as a case report in a medical journal. [1, 6.2, 8.1(v), 8.2(i)]
3. Do not ask patients for reviews for promotion on social media. [1, 3.2 Expl. V]

4. No discounts, coupons, cashback, contests or free procedures that pull patients in. [1, 8.1(x)]
5. No influencers, celebrities, staff or patients promoting your services. [1, 8.1(xi)]
6. No AI-generated promotional campaigns, and any allowed AI content must say it is AI-generated. [1, 7.2]
7. A doctor shall not engage a third party for marketing medical services, agency payments cannot be linked to patients, and using an agency does not move the responsibility off you. [1, 4.4, 8.1(ii), 8.1(viii)]

The guidelines set out a graded scale a State Medical Council may use: a warning and mandatory ethics training for a first violation, censure and a monetary penalty for a second, suspension for 3 to 6 months for a third, suspension for 6 to 12 months for a serious violation such as misleading cure claims, patient inducement or digital mass solicitation, and removal from the register for 1 to 3 years for repeated violations. A show-cause notice and a reasoned order come first.

[1, 10.1 to 10.3]

Which rules apply to you

- The Indian Medical Council (Professional Conduct, Etiquette and Ethics) Regulations 2002 are still the binding code of conduct. [2]
- The NMC's own 2023 conduct regulations were put on hold on 23 August 2023. We found no later notification reviving them. [3]
- The 6 October 2026 NMC guidelines are read together with the 2002 Regulations. [1, 4.2]
- The Telemedicine Practice Guidelines 2020 govern online consultations, including a bar on attracting patients through advertisements or inducements. [10]
- The Drugs and Magic Remedies Act 1954 bars advertising a drug for diseases in its schedule, which includes diabetes and obesity, high blood pressure, heart disease and cancer. [4, s. 3, Schedule]
- Clinical establishments covered by the Clinical Establishments Act 2010 must display their rates in English and the local language. [5, rule 9(i)]
- In a letter reported on 13 October 2026, the Union Health Secretary asked all states to enforce this display. [6]

- Telangana adopted the Clinical Establishments Act 2010 by resolution in 2017. [7]

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- The Digital Personal Data Protection Act 2023 and its 2025 Rules apply to enquiry forms, WhatsApp lists and patient photographs. Its core duties start in phases through 2027. [11]

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- Dentists answer to the Revised Dentists (Code of Ethics) Regulations 2014 and the National Dental Commission, which issued its own social media advisory on 14 October 2026. [13]

In Telangana, the Telangana Medical Council handles complaints against doctors. An appeal lies to the NMC's Ethics and Medical Registration Board within 60 days. [1, 11.1]

Ten things to fix this week

1. **Add your registration number everywhere.** Clinic board, prescription, certificates, receipts, website footer, every social media profile and every post.
2. **Take down testimonials.** Video reviews, "thank you doctor" reels, patient stories and screenshots of messages. Consent does not save them.
3. **Take down before and after photographs.** On the website, Instagram, Facebook and in WhatsApp status.
4. **Remove the superlatives.** Search your site and profiles for best, No. 1, top, leading, most trusted, guaranteed, 100%, painless, miracle.
5. **Remove numbers that sell.** Success rates and "5,000 patients treated".
6. **End the offers.** First consultation free, festival discounts, referral rewards, contests.
7. **Stop asking for Google reviews.** Remove review QR codes from the reception desk, and change automatic after-visit review links (from your EMR or WhatsApp) to a private feedback form.
8. **Check drug names.** Remove any post or page that promotes a named medicine for diabetes, obesity, blood pressure or another scheduled disease.
9. **Check how you use outside help.** Clause 8.1(ii) says a doctor shall not engage a third party for marketing medical services, and 8.1(viii) bars payments linked to patients. The safest course: use outside help for factual, patient-information work such as your website, directory listings, fees and timings, pay a flat fee, never per lead or per patient, and approve every word yourself. Until the NMC clarifies, ask your council or a health lawyer before using an agency for promotion.
10. **Show your fees** at the clinic in English and Telugu. If you put them on your website, keep them factual and complete.

Eight ways to stay visible, all allowed

The guidelines close the old shortcuts, but they also say plainly what is **not** advertising. A practice that works inside these lanes can stay very visible online.

1. **Be easy to find.** Information given in the normal course, without promotional intent, is not an advertisement. Your website, Google profile, timings, fees, services and doctor directory are all allowed. Being found by a patient who is already searching is not solicitation.
[1, 3.2 Expl. I, 9.1]
2. **Teach.** Health education in your own name and designation is allowed, on TV, radio and online, as long as it does not promote your practice. This is the main lane for social media: explain conditions, tests and prevention, and add your name, qualifications and registration number.
[1, 5.1, 8.2(iii)]
3. **Announce.** Opening a practice, a new service, a change of address, absence and return, and your charges are all permitted announcements. Most clinics have two or three genuine ones a month.
[1, 8.2(ii), 9.3]
4. **Mark the day.** Festival and national day greetings without advertising are allowed, and health awareness days are a natural reason to teach. See the calendar. [1, 8.2(v)]
5. **Give patients tools, not claims.** A risk calculator, a lab report explainer or a preparation sheet is patient information and service. It brings people to you without a single testimonial.
6. **Ask for feedback, privately.** Requesting public reviews for promotion is out, but a private feedback form after a visit is ordinary quality work, and NABH expects a feedback system anyway. Reply politely to the reviews patients leave on their own, without any patient detail.
[1, 3.2 Expl. V]
7. **Teach your peers.** CMEs, talks to doctors, referral pages for colleagues and case studies in reputed journals are not patient solicitation. Keep referral fees out of it. [1, 8.1(vii), 8.2(i)]
8. **Show real recognition properly.** An award may be mentioned if the awarding body, the date and the method are disclosed. [1, 8.1(ix)]

What does not work: doing through someone else what you cannot do yourself. Relatives or staff posting testimonials, fan pages, influencers and agencies are all treated as you.

[1, 4.4, 8.1(xi)]

Your signboard, letterhead and prescription

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- Only your name, recognised qualifications, titles, speciality, and registration number with the council's name. Not unusually large. [2, 7.13]
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- Your prescription paper carries the same content as the signboard. [2, 7.13]

- No photograph of yourself on the letterhead or signboard. Diagrams and pictures of the human body are fine. [2, 6.1.2]

- Put only recognised degrees, and certificates, diplomas or memberships that confer professional knowledge, after your name. Do not call yourself a specialist without a special qualification in that branch. [2, 1.4.2, 7.20]

- Show your registration number in your clinic and on every prescription, certificate and receipt. [2, 1.4.1]

- The Telangana council has flagged hospital boards that leave consultants' registration numbers out. [8]

- Display your fees and charges at your chamber and at hospitals you visit. [2, 3.7.1]

- The Drugs and Magic Remedies Act does not apply to a board on your own premises saying you treat a scheduled disease, such as "Diabetes clinic". The council's signboard rule still limits what the board says. [4, s. 14(a)]

Your website

- A clinic or hospital may publish factual, checkable information: name, location, contacts, departments, facilities, equipment, services, emergency services, accreditation and charges. [1, 8.3(i), 9.1]

 - A directory of doctors with names, recognised qualifications, specialities, registration details and availability is allowed. It is patient information, not promotion. [1, 9.1]

 - Describe equipment factually. No claims of superiority, guaranteed accuracy or comparison with others. [1, 3.2 Expl. II]

 - Do not let the way you present a doctor turn factual information into promotion. [1, 8.3(ii)]

 - Fees and packages may be published if they are factual and complete. [1, 8.1(x), 9.3]

 - Health education is allowed if it does not promote your own practice or solicit patients. [1, 5.1]
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Social media and WhatsApp

- Every post shows your name, qualifications, registration status and registration number. A clinic's posts show this for its doctors. [1, 3.2 Expl. III, IV]
 - No patient names, faces or identifying features. [1, 7.4]
 - No buying or manipulating followers, likes, reviews, ratings or search rankings. [1, 8.1(xii)]
 - Festival and national day greetings are allowed if they carry no advertisement. [1, 8.2(v)]
 - Public talks on TV, radio and online in your own name are allowed, without promoting an employer. [1, 8.2(iii)]
 - No fear-based posts meant to create demand for tests or procedures. [1, 8.1(i)]
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Google reviews

- Do not request or share patient reviews, recommendations or testimonials for promotion on social media. Read literally, this covers asking patients for Google reviews. [1, 3.2 Expl. V]
 - Never buy, procure or manipulate reviews or ratings. [1, 8.1(xii)]
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Photographs

- Your photograph is not allowed where it is self-advertisement or promotional publicity, and never on a letterhead or signboard. [1, 9.2]
 - Hospital advertisements carrying doctors' photographs have led to censure before. In 2020 the Kerala council censured 11 doctors for one newspaper advertisement. [15]
 - Patient material can be used only where the law permits, with consent that is specific, informed, voluntary, documented and verifiable, and with names, faces and identifying marks cropped, blurred or blacked out. Testimonials and before and after photographs stay banned even with consent. [1, 6.1 to 6.4]
 - AI must never create or alter a patient's image, voice or result. [1, 7.2]
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Fees, offers and free camps

- Publishing your fees is a permitted announcement. It must be factual. [1, 8.2(ii), 9.3]
 - Discounts, limited-period offers, contests, coupons, gifts, cashback, referral benefits and free procedures are banned where they encourage unnecessary visits, tests or treatment, or solicit patients. [1, 8.1(x)]
 - Free camps are not named in the guidelines. Apply the same test: does the camp inform the public, or does it pull patients into tests and treatment they may not need? [1, 8.1(x)]
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Agencies, influencers and AI

- You are responsible for anything an agency, influencer or platform publishes that you authorised, paid for or knowingly allowed. [1, 4.4]
 - Agency, influencer and platform payments cannot be linked to individual patients, leads or referrals. [1, 8.1(vii), 8.1(viii)]
 - No celebrity, influencer, patient or staff member may promote your services. [1, 8.1(xi)]
 - No endorsing any drug, device, supplement or product, paid or unpaid. [1, 8.1(iv)]
 - No AI-generated promotional campaigns for commercial interest. Any permitted AI-generated promotional content must carry a mark saying its origin is AI. A caption such as "Illustrative image" alone does not meet this. [1, 7.2]
 - Real photographs, including licensed stock photographs, are not AI-generated. Label them as illustrative if they do not show your own clinic, and never let any image stand in for a patient or a result. [1, 6.2, 7.2]
 - Award and ranking claims need the awarding body, date and method disclosed. [1, 8.1(ix)]
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Special cases

- Online consultations must not be anonymous: tell the patient who you are and give them a way to check your registration. Do not attract teleconsultation patients with advertisements or inducements. [10]
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- Ultrasound: never advertise sex determination in any form, including online. [12, s. 22]

 - Psychiatry: a person with mental illness has a statutory right to confidentiality, and photographs or information cannot be released to the media without consent. [14, ss. 23, 24]

 - Dentistry: the National Dental Commission warned against testimonials, before and after photographs, recorded procedures and oversized signboards. [13]

 - Patient data: get clear consent and give a privacy notice before collecting patient details through web forms or WhatsApp. [11]
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On one page

Do

- ✓ Show your registration number on boards, paper, the website and every post
- ✓ Keep the website factual: services, doctors, timings, location, fees
- ✓ Publish health education that teaches rather than sells
- ✓ Use diagrams and drawings instead of your own photograph
- ✓ Display rates in English and Telugu at the clinic
- ✓ Use outside help only for factual work, at a flat fee, and approve every word yourself
- ✓ Mark AI-generated promotional content as AI-generated
- ✓ Take written, specific consent before using any patient material, and blur it

Do not

- ✗ Testimonials, patient stories or thank-you reels, even with consent
- ✗ Before and after photographs
- ✗ Asking for Google reviews, or resharing them as promotion
- ✗ Best, No. 1, top, leading, guaranteed, painless, 100%
- ✗ Success rates or patient counts
- ✗ Discounts, coupons, free first consultation, referral rewards
- ✗ Named drugs for diabetes, obesity, blood pressure or other scheduled diseases
- ✗ Influencers, celebrities or staff promoting your practice
- ✗ Paying anyone per lead or per patient

What Telangana's council has acted on

- In April 2024 the state council listed, among lapses found on inspection, that most hospitals were not showing council registration numbers against consultants' names on display boards, and warned it would act on violations. [8]
 - In September 2025 it suspended five doctors, including one for displaying unrecognised qualifications and one for presenting himself as a cosmetologist and hair transplant surgeon without recognised qualifications. [9]
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We found no reported action under the 6 October 2026 guidelines when this guide was updated.

Sources

Every rule above links to one of these. Where we could only read a secondary copy, the source is the copy we read.

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8. Telangana State Medical Council circular on registration numbers on display boards, 10 April 2024 <https://onlinetsmc.in/wp-content/uploads/2024/04/TSMC-Circular.pdf>
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