

The New NMC Advertising Rules, Explained for Doctors

What you can post, what you must stop, and how to stay safe on Instagram, YouTube, Google, WhatsApp and your website

BASED ON

NMC Guidelines on Ethical Advertising and Public Communication
Public Notice No. R-13014/01/2024-Ethics, dated 6 October 2026

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What NMC issued, and why it applies to you today

Document	Guidelines on Ethical Advertising and Public Communication by Hospitals/Medical Institutions and RMPs
Issued by	Ethics and Medical Registration Board (EMRB), National Medical Commission
Date & number	6 Oct 2026 · No. R-13014/01/2024-Ethics
In force	Immediately (clause 1.2). No grace period. Old posts are not exempt.
Legal base	Read with IMC (Professional Conduct, Etiquette & Ethics) Regulations 2002 and NMC Act 2019. The 2023 RMP Regulations remain on hold.
Who enforces	Your State Medical Council (Tamil Nadu Medical Council for TN doctors)

Who is covered

- Every Registered Medical Practitioner (allopathic)
- Hospitals, clinics, diagnostic centres (also under the Clinical Establishments / State Act, clause 4.3)
- Doctor-listing platforms such as directories and booking apps (clause 9.4)

Not covered by this notice

- AYUSH practitioners (regulated by NCISM / NCH)
- Non-doctor wellness influencers (consumer law applies instead)

Inform the public. Do not sell to it.

Clause 3.2 says **any communication with a promotional character is an advertisement**, in any medium. It names these channels:

Instagram & Facebook

YouTube & Reels

Sponsored / boosted posts

Targeted ads

Influencer content

Google search ads

Listing platforms

Audio-visual / podcasts

AI-generated content

WhatsApp broadcasts

Key phrase: **"content OR manner of dissemination."** A purely educational post becomes an advertisement the moment you pay to boost it or attach a "Book now" button.

The quick test

Would this post still be useful to a patient if your name and clinic were removed?

✓ **Yes** → it is education. Allowed (Explanation I, clause 5.1).

✗ **No, its only job is to bring patients to you** → it is promotion. Clause 8.1 restrictions apply in full.

Education is allowed only if it does not promote your practice, does not solicit patients, and is not monetised through promotional marketing (clause 5.1).

8 common myths doctors believe about the new rules

What many doctors think	What the guidelines actually say
Doctors are banned from social media.	False. Educational posts, talks and awareness content are expressly allowed (5.1, 8.2(iii)).
If the patient signs consent, testimonials are fine.	False. Clause 6.2: consent does NOT make a prohibited testimonial or before-after legal.
Unpaid product recommendations are OK.	False. Clause 8.1(iv) bans endorsements 'whether or not' you are paid.
The agency posted it, not me.	No defence. Clause 4.4: you are responsible for what you authorise, commission or knowingly permit.
Only new posts count.	False. No grandfathering. Old testimonials and offers still live on your page are an exposure today.
Hospitals can't list their doctors anymore.	False. A factual doctor directory is expressly allowed (9.1).
SEO and Google Ads are banned.	False. Only manipulation, superlatives and misleading claims are banned (8.1(ix), (xii)).
Publishing my consultation fee is advertising.	False. Public declaration of fees is expressly permitted (8.2(ii), 9.3).

Put your registration details on every post

Explanation III to clause 3.2: every electronic media post by a doctor must transparently show:

1. Your full name
2. Your qualifications
3. Registration status
4. SMR / NMR registration number

Explanation IV: when a hospital or clinic posts content featuring a doctor, the same four details of that doctor must appear.

Telemedicine Practice Guidelines 2020 (s.3.2.5) also require the registration number on prescriptions, websites, WhatsApp/email communication and receipts.

COPY-PASTE TEMPLATE FOR CAPTIONS, BIOS AND VIDEO END-CARDS

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Dr. [Full Name], [MBBS, MD (Dermatology)]  
Registered Medical Practitioner  
Tamil Nadu Medical Council, Reg. No. [XXXXX]
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Where to add it

- Instagram, Facebook, LinkedIn, YouTube bios
- Every caption, reel and video end-card
- Website doctor pages and footer
- Google Business Profile description
- WhatsApp Business profile

Do NOT add "20 years' experience", "Gold medallist" or patient counts to this block. That turns it into a claim banned by 8.1(iii).

What you are still allowed to do

- ✓ **Health education & awareness content:** condition explainers, symptoms, prevention, myths vs facts, when to see a doctor (5.1)
- ✓ **Procedure explainers** including risks, recovery time and who is (and isn't) a candidate (honest risk disclosure protects you under 8.1(vi))
- ✓ **Talks on TV, radio, YouTube, podcasts** in your own name and designation, without promoting your employer (8.2(iii))
- ✓ **Research case studies** in reputed medical journals (8.2(i))
- ✓ **Patient education pamphlets** given in the clinic, with no guarantees or superiority claims (8.2(iv))
- ✓ **Formal announcements:** starting practice, new address, change of practice type, temporary absence, resumption, succession (8.2(ii), 9.3)
- ✓ **Public declaration of your consultation fee** and factual package prices (8.2(ii), 9.1)
- ✓ **Greetings** on national days and medical days such as Doctors' Day, World Diabetes Day, with no offer attached (8.2(v))
- ✓ **Government health campaigns** and schemes in public interest: fully exempt (7.3)
- ✓ **New equipment announcements**, factually, with no "most advanced" or "99% accurate" claims (Explanation II)

The 12 prohibitions in clause 8.1

Clause	What is banned	Example that now violates
8.1(i)	Fear-based marketing; creating demand for unnecessary procedures or diagnostics	<i>"1 in 3 people has a silent heart block. Book your full body check today!"</i>
8.1(ii)	Soliciting patients, self-promotion, engaging third parties to market you, lending your name / image / voice to promotions	<i>A paid clinic video: "Come to me for your knee pain."</i>
8.1(iii)	Success rates, patient numbers, achievements; "guaranteed cure", "best doctor", "No.1", "100% success", "painless", "miracle"	<i>"10,000+ successful surgeries" banner</i>
8.1(iv)	Endorsing any drug, device, supplement, cosmetic or health product, paid OR unpaid	<i>Dermatologist recommending a sunscreen brand on Instagram</i>
8.1(v)	Before-after photos, surgical results, celebrity patients, success stories (only exception: strictly scientific use with anonymised consent)	<i>Hair transplant or smile makeover transformation reel</i>
8.1(vi)	Unrealistic expectations, hiding risks, unproven or secret remedies	<i>"Walk the same day after knee replacement"</i>

The 12 prohibitions in clause 8.1 (continued)

Clause	What is banned	Example that now violates
8.1(vii)	Commission, referral fee, rebate, gift, or lead-generation fee linked to getting patients	<i>Paying an agency or app per lead / per patient</i>
8.1(viii)	Agency, influencer or platform contracts where payment is linked to patients procured	<i>“₹500 per booked appointment” deal</i>
8.1(ix)	“Best”, “No.1”, “leading”, “most trusted”, “top” unless independently verifiable with disclosed methodology	<i>Paid “Best Doctor Award 2026” badge</i>
8.1(x)	Discounts, limited-time offers, contests, coupons, cashbacks, free procedures, referral benefits	<i>“Flat 40% off this Diwali”; “Free consultation this week”</i>
8.1(xi)	Testimonials by celebrities, influencers, patients or staff; using an intermediary to do what you can't do directly	<i>Influencer reel visiting your clinic</i>
8.1(xii)	Fake followers, likes, reviews, views; manipulating search rankings or algorithms	<i>Buying Google reviews; review gating</i>

Google reviews, testimonials and patient messages

Explanation V has two separate rules:

Rule 1 · For doctors AND hospitals

No soliciting, buying, procuring, manipulating or publishing fake, paid or misleading reviews, ratings, testimonials or endorsements.

Rule 2 · For doctors (wider)

A doctor shall not **request or share** patient testimonials, recommendations, endorsements or reviews for professional promotion on social media, **even genuine, unpaid ones**.

Practice	Status
Asking patients “please leave us a Google review” (QR cards, WhatsApp links)	Stop
Reposting a thank-you message or review screenshot	Stop
Patient video testimonial, even with signed consent (6.2)	Stop
Asking only happy patients to review (review gating)	Stop
Buying reviews, followers, likes or views	Stop
Replying politely to a review that arrived on its own	Okay, no patient details
A patient's unsolicited review existing on Google	Grey area; don't showcase it

Never confirm a person was your patient or discuss treatment in a review reply. That also breaches confidentiality.

Patient photos, videos, cases and consent

- ✗ No patient names, faces, scans, records, or identifiable images for advertising (6.1, 7.4)
- ✗ Consent does **not** rescue a testimonial, before-after or success story (6.2)
- ✗ Blurring only the face is not enough: birthmarks, tattoos, scars and other identifying marks must be cropped, blurred or blacked out (6.4)
- ✗ No celebrity-patient photos or “Actor X visited our clinic” posts (8.1(v))

Specialties hit hardest

Dermatology, aesthetics, dental, hair transplant, bariatric, IVF, plastic surgery. Shift to education on procedure steps, candidacy, risks, recovery and costs.

When consent is legally needed, it must be (6.3):

1. **Specific** to that use and platform
2. **Informed** about where it will appear
3. **Voluntary**, never tied to treatment or discounts
4. **Documented** in writing
5. **Capable of verification** years later

Keep a **separate marketing-use consent form**, distinct from treatment consent, and store it retrievably.

Digital use of personal data must also comply with the IT Act 2000 and the DPDP Act 2023 with its 2025 Rules (clause 7.6).

Platform-wise do's and don'ts

Channel	Do	Don't
Instagram / Facebook	Educational reels, carousels, myth-busters, Q&A; disclosure line in caption and bio	Testimonials, before-after, offers, product tie-ups, influencer collabs, boosting promo posts
YouTube / Podcasts	Condition explainers, talks in own name; disclosure on end-card and description	Clinic pitch inside the video, booking CTAs on educational talks, sponsored product segments
Google Business Profile	Accurate timings, services, fees, photos of facility, health tips as posts	Review-request campaigns, “best clinic” in business name, offer posts, fake listings
Website	Factual services, qualifications, registration, fees, doctor directory, blogs	Success counters, superlatives, testimonial sliders, award badges without methodology
WhatsApp	Appointment reminders, factual timings, health education to existing patients	Mass promotional broadcasts, offers, forwarding patient feedback
Google / Meta Ads	Institutional, factual ads on departments and facilities that pass 8.1	Doctor-promotion ads, discounts, fear hooks, “free consultation” lead forms
Listing apps	Factual profile with qualifications, registration, fees	Paying for top ranking (9.4); review packages

What must change in your marketing agency contract

Clause 4.4: publishing through an agency, influencer or platform does not absolve you of content you **authorised, commissioned, sponsored, adopted or knowingly permitted**.

- ✗ No pay-per-lead, pay-per-appointment or per-patient fees (8.1(vii), (viii))
- ✗ No revenue share tied to patients
- ✗ No influencer campaigns or “refer a friend” rewards
- ✗ No agency posting without your written approval

A compliant agency arrangement looks like

- ✓ Fixed monthly retainer or fee per defined deliverable (posts, videos, pages, campaign management)
- ✓ Ad spend billed transparently and separately
- ✓ NMC compliance clause in the contract
- ✓ Two-step approval: agency compliance check, then your named approver
- ✓ Approval log kept for every post
- ✓ Disclosure block built into every template
- ✓ Dated log of old content removed

Using AI tools after the new guidelines (clause 7.2)

- ✗ **No AI-generated promotional campaigns** for commercial interest
- ✗ **No AI avatars of you, cloned voices, synthetic patients** or fake testimonials (7.2(b))
- ✗ **No AI-altered patient images** or outcomes
- ✗ **No misleading AI claims** on diagnosis, treatment, outcomes or qualifications (7.2(a))
- ✗ **Never paste patient details into ChatGPT** or any public AI tool (7.2(d), DPDP Act)

If you use AI for permitted content

- ✓ Add a visible source mark, e.g. “This content was generated with the assistance of AI.”
- ✓ A doctor reviews every medical fact before publishing
- ✓ Extra prominent disclosure where AI use would change how a viewer reads it (7.2(c))
- ✓ Write down your rule on when the label applies (e.g. AI-written text or images: label; spell-check or captions: no label) and apply it consistently

Institutional rules (clauses 8.3, 9.1–9.4)

Hospitals may advertise only factual, verifiable information:

Name & location

Contact details

Departments

Facilities & equipment

Emergency services

Accreditation (NABH etc.)

Charges & fees

- ✓ Website doctor directory with name, qualifications, specialty, registration, availability is allowed (9.1)
- ✓ Hoardings: factual infrastructure information only (5.2)

- ✗ No promotional portrayal of an individual doctor (8.3(ii))
- ✗ No superiority, “best hospital” or unverifiable awards
- ✗ No cure or outcome guarantees
- ✗ No inducements, packages-on-offer or festival discounts
- ✗ No doctor photo used as self-advertisement on signboards or letterheads (9.2)
- ✗ Repeating even a factual ad too frequently can become solicitation (8.3(ii))
- ✗ No paid ranking on listing platforms (9.4)

Clause 11.5: the hospital is penalised under the State Act AND the doctor who approved the content can face Medical Council action separately.

Words and phrases to remove from every post, ad and page

Best

No.1 / Number one

Top

Leading

Most trusted

Unmatched

Guaranteed

100% success

Permanent cure

Painless

Miracle

Exclusive cure

World-class

Advanced-most

10,000+ surgeries

5,000+ happy patients

Expert-approved product

Limited offer

Flat % off

Free consultation

Book now before slots close

Risk-free

Zero side effects

Same-day recovery

Why

Clauses 8.1(iii), 8.1(vi), 8.1(ix) and 8.1(x) name these claims directly. Run a find on your website, captions, ad copy, Google profile and Tamil-language posts too.

Also check

Drugs and Magic Remedies Act 1954 bans claims that a remedy cures or prevents 54 scheduled conditions, including diabetes, cancer, heart disease and epilepsy.

How to turn non-compliant posts into compliant ones

Before (now violates)	After (compliant)
~~Chennai's best skin specialist~~	Dr. A. Kumar, MD (Dermatology). Consultant Dermatologist. TNMC Reg. No. XXXXX
~~100% painless laser hair removal, guaranteed results!~~	How laser hair removal works, how many sessions are usually needed, and the side effects to know before you start
~~Diwali offer: Flat 30% off on full body check-up~~	Our full body check-up includes these 42 tests. Price: ₹X,XXX. Ask your doctor whether you need it.
~~10,000+ successful knee replacements~~	Our orthopaedic department offers knee replacement with a dedicated physiotherapy and rehabilitation unit
~~See how Priya got her smile back! (before/after)~~	What happens during a smile correction: the steps, timeline, and who is a suitable candidate
~~Our patients love us! (review screenshots)~~	Clinic timings, location, consultation fee and services. Factual information only.

The 7-question pre-publish test

- 1 Is this information or promotion? Would a reader learn something even if they never visit me?
- 2 Does it contain a superlative, ranking, success rate or patient count?
- 3 Can any patient be identified: face, voice, story, scan, before-after, tattoo, birthmark?
- 4 Does it name, show or imply endorsement of a drug, device or product?
- 5 Is there an inducement: discount, offer, free consultation, contest, gift, cashback, referral benefit?
- 6 Does it carry my name, qualifications, registration status and SMR/NMR number? And the AI label if AI-made?
- 7 Will it be boosted, sponsored, targeted or shared by an influencer? If yes, re-check Q1 as if it is an ad.

Pass all seven and the post is very likely compliant. Fail one? Fix that point instead of dropping the post.

Penalties and appeals (Chapter V)

1st violation Warning + mandatory ethics training

2nd violation Censure + monetary penalty

3rd violation Registration suspended 3–6 months

Serious violation Suspended 6–12 months (misleading cure claims, patient inducement, digital mass solicitation)

Repeated violations Removed from medical register for 1–3 years

Your procedural rights

- Show-cause notice and chance to explain before any penalty (10.2)
- Reasoned, speaking order from the State Medical Council (10.3)
- First appeal to EMRB within 60 days (NMC Act s.30(3))
- Second appeal within 60 days of that decision (s.30(4))

A dated log showing you removed old non-compliant content voluntarily is your best mitigation if a complaint arrives.

NMC rules are not the only test

Law	What it adds for doctors
Telemedicine Practice Guidelines 2020	Registration number on e-prescriptions, websites, WhatsApp/email; no soliciting teleconsults through ads or inducements
Consumer Protection Act 2019 + CCPA Misleading Ads Guidelines 2022	Medical services are consumer services (IMA v. V.P. Shantha, 1995). Misleading ads: penalty up to ₹10 lakh, ₹50 lakh for repeats; endorsers can be barred
Drugs & Magic Remedies (Objectionable Advertisements) Act 1954	No ads claiming to cure or prevent 54 scheduled conditions; imprisonment up to 6 months for first conviction
DPDP Act 2023 + DPDP Rules 2025	Notice and consent for patient and lead data; core duties phase in around May 2027. NMC consent standard (6.3) applies now
Supreme Court, IMA v. Union of India (2024)	Advertisers file a self-declaration certificate before publishing ads; confirm the process with your agency
Tamil Nadu Clinical Establishments (Regulation) Act	Governs clinics and hospitals; prevails over these guidelines where they conflict (4.3)

The 7-day compliance checklist for doctors

1. **Day 1:** List every channel carrying your name: Instagram, Facebook, YouTube, LinkedIn, website, Google profile, Practo/Justdial, WhatsApp, hospital pages
2. **Day 1:** Pause all boosted posts and paid ads until reviewed
3. **Day 2:** Add name, qualifications, registration status and SMR/NMR number to every bio and caption template
4. **Day 3:** Delete testimonials, review screenshots, before-after photos, success stories and celebrity posts
5. **Day 3:** Remove superlatives, patient counters and unverifiable award badges
6. **Day 4:** Withdraw all offers, discounts and free-consultation promotions; publish fees factually
7. **Day 5:** Remove product endorsements and stop brand collaborations
8. **Day 5:** Review agency, influencer and listing contracts; end per-lead or per-patient payments
9. **Day 6:** Create a separate marketing-use consent form; stop putting patient data into AI tools
10. **Day 7:** Brief your front desk and staff; start an approval log; keep a dated record of everything removed

Grey areas, and the safe approach until NMC clarifies

Open question	Safe approach for now
Where does education end and promotion begin? (the test refers to “intent”)	Treat it as objective: no booking links, offers, urgency or boosting on educational posts
Does YouTube ad revenue count as “monetised through promotional marketing”? (5.1)	Keep your own clinic services and promotions out of monetised channels
How much AI help needs the AI label?	Adopt a written threshold and apply it the same way every time
Are paid Google search ads allowed?	Not named. Treat every paid ad as an advertisement that must pass all of clause 8.1
Unsolicited patient reviews already on Google	Don't request, reproduce or showcase them; reply only courteously without patient details
Clause 12 lets NMC issue clarifications, advisories and SOPs. Re-check your content monthly.	

THE BOTTOM LINE

Keep posting. Post education, not promotion.

Doctors who go silent leave patients to unqualified influencers. Doctors who publish honest, useful, clearly identified health information are exactly who these guidelines protect.

Sources

NMC Public Notice No. R-13014/01/2024-Ethics, 6 Oct 2026 (Guidelines on Ethical Advertising and Public Communication) · IMC (Professional Conduct, Etiquette and Ethics) Regulations 2002 · NMC Act 2019 · Telemedicine Practice Guidelines 2020 · Consumer Protection Act 2019 & CCPA Guidelines 2022 · Drugs and Magic Remedies Act 1954 · DPDP Act 2023

This presentation is a marketing compliance guide based on the public notice dated 6 October 2026, prepared for general information. It is not legal advice. Read the official notice and consult a qualified healthcare lawyer for decisions specific to your practice.