RAISEQUE | AI-POWERED HEALTHCARE DIGITAL MARKETING

# Healthcare Marketing Guidelines 2026

Complete compliance checklist for hospitals, clinics and doctors

| | |
|---|---|
| Prepared for | Raiseque - client onboarding, campaign planning, internal SOP |
| Version / date | 13 October 2026 (reflects NMC notice dated 6 October 2026) |
| Audience | Raiseque team, client doctors, clinic owners, hospital administrators |
| Covers | NMC rules, ASCI, DMR Act, DPDP, Google and Meta Ads, Google Business Profile, content checks, international markets |

**Disclaimer:** This document is an internal screening tool, not legal advice. Confirm final decisions against the official NMC notice (nmc.org.in) and the client's legal advisor. Clause numbers are taken from secondary summaries; match them against the official document.

## Verification summary - what was checked and corrected

The original checklist was cross-checked against current sources. The core claim is correct: on 6 October 2026 the NMC issued the *Guidelines on Ethical Advertising and Public Communication by Hospitals/Medical Institutions and Registered Medical Practitioners* (Public Notice No. R-13014/01/2024-Ethics), with immediate effect. Several points needed correcting or tightening:

| # | Original draft | Verified / corrected position |
|---|---|---|
| 1 | AI: only fake AI patients/testimonials prohibited | **Stricter.** AI-generated promotional campaigns for commercial interest are prohibited (cl. 7.2). Permitted AI content must carry an AI-generated mark. AI may never create or alter a patient's image, voice, testimonial or outcome. **Directly relevant to Raiseque.** |
| 2 | Discounts/offers: "use after compliance review" | **Avoid.** Discounts, limited-period offers, contests, coupons, gifts, cashback, referral benefits and free procedures are treated as inducements (cl. 8.1(x)). Only factual fee disclosure is allowed. Do not run festival offers. |
| 3 | Testimonials: permitted uses with consent | **Consent does not make prohibited content permissible.** A doctor also cannot request or share reviews for promotion (cl. 6.2 / Explanation V). |
| 4 | Agency contracts: "client's responsibility" | Publishing through an agency does not remove the doctor's or hospital's liability (cl. 4.4). Hiring a third party to market the doctor is also restricted. Avoid pay-per-patient and lead-generation fee models. |
| 5 | Hospitals: general claims | Hospital communication must not promotionally portray an individual doctor. Hoardings may carry only factual infrastructure and facility information (cl. 5.2). |
| 6 | Penalties not mentioned | Graded penalty ladder: from a warning up to removal from the register for 1-3 years for repeated breaches. |
| 7 | DPDP dates: "verify" | Rules notified 13 Nov 2025. Consent Manager provisions from ~13 Nov 2026. Core duties (notice, consent, security, breach reporting, children's data) from ~13 May 2027. Sources differ by one day; confirm in the Gazette. |
| 8 | Same NMC rules for all clinics | **Check applicability.** The NMC term 'RMP' means practitioners registered under the NMC Act. Dentists and AYUSH practitioners have their own councils. For dental clients, check Dental Council and state rules separately. Safe approach: treat the NMC standard as the baseline. |
| 9 | Source markers / UI text (0/10, Reset checklist) in draft | Removed. The checklist is now in printable form. |

**Note:** Clarifications may still follow on the new guidelines (for example, the exact scope for dentists/AYUSH and the penalty procedure). Check the NMC 'What's New' page in the monthly review.

# 1. NMC Guidelines - 6 October 2026 (Priority 1)

| Item | Detail |
|---|---|
| Title | Guidelines on Ethical Advertising and Public Communication by Hospitals/Medical Institutions and Registered Medical Practitioners |
| Issued by | NMC Ethics and Medical Registration Board; Public Notice No. R-13014/01/2024-Ethics |
| Effective | 6 October 2026 - immediate effect, no grace period reported |
| Applies to | Registered Medical Practitioners (National/State Medical Register), hospitals and medical institutions; indirectly agencies, influencers and platforms acting on their behalf |
| Scope of 'advertising' | Websites, social media, influencer content, search ads, sponsored posts and AI-generated promotional content all count |
| Penalties | Graded ladder - warning up to removal from the register for 1-3 years for repeated breaches |
| Official source | nmc.org.in - 'What's New' - notice dated 6 October 2026 |

## A. Prohibited / restricted activities - action table

| No. | Marketing activity | Required action | Ref. |
|---|---|---|---|
| 1 | Patient testimonials used for promotion | **STOP** promotional use. Consent does not make them permissible | 8.1(v), 6.2 |
| 2 | Before-and-after photos, surgical-result ads, promotional case posts | **STOP**. Exception: scientific/educational use with anonymised consent (journals, CME) | 8.1(v) |
| 3 | Success stories, celebrity-patient publicity | **STOP** | 8.1(v) |
| 4 | "100% success", "guaranteed cure", unsupported outcome claims | **STOP** / remove | 8.1; ASCI |
| 5 | "Best doctor", "No. 1 clinic", "top specialist" | **AVOID** unverifiable superiority claims | 8.1 |
| 6 | Fear-based content driving unnecessary tests/procedures | **STOP** | 8.1 |
| 7 | Fake/paid reviews, ratings, followers, likes, comments; search-ranking manipulation | **STOP** - prohibited manipulation. Doctors may not request or share reviews for promotion | 6.2 Expl. V |
| 8 | Celebrity / influencer / patient endorsements of medical services | **STOP** / remove existing | 8.1 |
| 9 | Discounts, limited-period offers, contests, coupons, gifts, cashback, free procedures | **AVOID**. Factual fee disclosure only | 8.1(x) |
| 10 | Referral commission, pay-per-patient, lead-generation fees | **STOP**. Use fixed-fee retainers | 8.1 |
| 11 | Doctor's name/image/voice used to endorse medicines, devices, products | **STOP** | 8.1 |
| 12 | AI-generated promotional campaigns; fake AI patients, synthetic testimonials, fabricated outcomes | **STOP**. Label permitted AI content with an AI mark | 7.2 |
| 13 | Promotional portrayal of an individual doctor in hospital content | **AVOID** | Hospital rules |

Clause references are taken from secondary summaries; match them against the official annexure.

## B. What is still allowed

- **ALLOWED** Evidence-based health education and public-awareness content (without patient solicitation).

- **ALLOWED** Factual institutional information: facilities, specialties, services, qualifications, timings, address, factually stated fees.
- **ALLOWED** Public-health talks by a doctor in their own name and designation (without promoting their employer).
- **ALLOWED** Research-based case studies published in peer-reviewed journals.
- **ALLOWED** Genuine facility, equipment and infrastructure photos.

### C. Social media and website requirements

| Area | What Raiseque should implement |
|---|---|
| Doctor identity | Verify full name, qualifications and medical registration details |
| Doctor's social posts | Check the requirement to display applicable registration information on electronic communications |
| Health education | Factual, evidence-based and clinician-reviewed; must not turn into solicitation |
| Clinic website | Remove dynamic review feeds, star-rating pop-ups, before/after sliders and limited-time offer banners |
| Patient photos/videos | Avoid for promotion; for permitted educational use, obtain legally required consent |
| AI-generated content | No fake patients, endorsements or results; label permitted AI content |
| Agency contracts | Document client approval and compliance duties; publishing through an agency does not remove the client's liability |

> **Important:** The guidelines do not ban all healthcare communication. Factual institutional information and non-promotional health education remain allowed.

## 2. AI content - special section for Raiseque

Raiseque is an AI-powered agency, so these rules should apply first in the internal workflow.

- **Prohibited:** AI-generated promotional campaigns run for commercial interest (cl. 7.2).
- **Never:** use AI to create or alter a patient's image, voice, testimonial or clinical outcome.
- **Permitted AI content:** where AI use is allowed, clearly mark it 'AI-generated / AI-assisted'.
- **Patient data as AI input:** follow privacy and data-protection rules; do not paste identifiable patient data into public AI tools.
- **Internal rule:** a qualified clinician always reviews AI-drafted medical content, and the client gives written approval.
- Confirm the exact boundary of what counts as a 'promotional campaign' versus 'educational content' against the official text, and clarify with the client's legal advisor.

## 3. Other Indian laws and standards

| Law / Standard | What to do | Note |
|---|---|---|
| ASCI Code | Ads must be truthful, substantiated and not misleading. Scrutinise outcome, ranking, award and scientific claims | ascionline.in |
| Drugs and Magic Remedies (Objectionable Advertisements) Act, 1954 | Avoid misleading cure or treatment claims for listed diseases/conditions. Extra care for fertility, sexual health and alternative remedies | India Code |
| DPDP Act 2023 / Rules 2025 | Treat names, phone numbers, appointment records, diagnoses, clinical photos and treatment history as sensitive. Follow consent, notice, access-control and retention requirements | Rules notified 13 Nov 2025. Consent Managers: ~Nov 2026. Core duties: ~13 May 2027 |
| Clinical Establishments Act / state law | For hospitals, the NMC guidelines are read together with these | Check by state |
| Dental / AYUSH councils | Check the advertising rules of the relevant council for dentists and AYUSH practitioners | NMC standard as baseline |

The DPDP core duties are not yet in force, but build the consent and data-handling SOP into client onboarding now so you are ready before May 2027.

# 4. Google Ads and Meta Ads

### Google Ads - healthcare and medicines policy

- Check restrictions for medicines, pharmacies and healthcare products.
- Do not promote prohibited products or services; verify country-specific certification where applicable.
- Check landing pages as well as ad copy.
- Avoid misleading health claims.
- Check the rules on remarketing and personalised targeting based on sensitive health information.

### Meta Ads - advertising standards

- Avoid copy that asserts or implies the viewer has a medical condition (e.g. 'Do you have diabetes?').
- Avoid shame, fear and negative self-perception tactics.
- Review additional restrictions for cosmetic procedures, online pharmacies and health products.
- Check audience targeting, creatives, lead forms and destination pages.
- Collect only necessary data in lead forms; do not ask for medical details in the form.

**Important:** Platform approval does not mean a campaign complies with Indian medical ethics or advertising law. Both checks are required separately. Also avoid offer-based creatives (discounts, free consultations) in ads, as they conflict with the NMC rules.

# 5. Local SEO, Google Business Profile and reviews

| No. | Area | Guideline for the team |
|---|---|---|
| 1 | Business name | Use the clinic's real-world name; do not add extra keywords to influence ranking |
| 2 | Categories | Select accurate primary and secondary categories |
| 3 | Services | List only services the clinic actually provides |
| 4 | Doctor profiles | Verify qualifications, registration details and specialty claims |
| 5 | Reviews | Never buy, fabricate or manipulate reviews |
| 6 | Review responses | Never disclose a patient's treatment or medical details in a reply |
| 7 | Review requests | Review the NMC restrictions before requesting or reposting reviews for doctor promotion. Organic third-party reviews are different, but do not reuse them in promotion |
| 8 | Photos and videos | Use genuine clinic, equipment and facility images; avoid promotional patient imagery |
| 9 | Website/landing pages | Keep contact information, address, hours, fees and service descriptions accurate |
| 10 | Rankings and reports | Report actual SEO performance; never fabricate rankings, awards or patient outcomes |

## 6. Content and reels pre-publication checklist

Tick every item before publishing Instagram Reels, YouTube Shorts, Facebook posts, blogs or doctor videos.

- [ ] Medical information has been reviewed by a qualified clinician
- [ ] No guaranteed cure or unsupported success-rate claim
- [ ] No patient testimonial, success story or before-and-after promotion
- [ ] No fear-based claim that drives unnecessary treatment
- [ ] No fabricated patient, doctor or clinical-outcome visual (AI included)
- [ ] No identifiable patient information disclosed
- [ ] Doctor's name, qualifications and registration details checked
- [ ] AI-generated/assisted content checked against NMC rules and AI mark applied
- [ ] No prohibited endorsement, discount/offer, inducement or referral commission
- [ ] No superiority claims such as 'best', 'No. 1' or 'top'
- [ ] Written client approval received
- [ ] Final copy, visual and CTA reviewed before publishing

Post / campaign: _____ Reviewed by: _____ Client approval: _____ Date: _____

## 7. Special rules by healthcare niche

| Specialty | Additional risks to check |
|---|---|
| Dental clinics | Whitening, implants, smile transformations, treatment guarantees, patient photos. Verify Dental Council rules separately |
| Dermatology | Acne, pigmentation, hair loss, anti-ageing and cosmetic procedure claims; transformation videos |
| IVF and fertility | Guaranteed pregnancy claims, success-rate statistics, sensitive patient data, fear-based messaging |
| Orthopaedics | Pain-free promises, guaranteed mobility, surgical outcomes, unsupported recovery timelines |
| Hair transplant | Guaranteed graft survival/density, before-and-after promotions, fabricated results |
| Hospitals | Facility and specialty claims, doctor profiles, awards, patient stories, promotional offers, portrayal of individual doctors |
| Diagnostics | Test accuracy and disease-detection claims, unnecessary testing |
| Paediatric clinics | Children's personal information, photos, consent, developmental information |

These are risk areas to audit, not a claim that every service or informational post in these categories is prohibited.

## 8. International healthcare clients

Do not apply India's rules as the only standard for international clients. Each market has its own framework.

| Market | Framework to review |
|---|---|
| India | NMC ethics, applicable council rules, ASCI, DMR Act, DPDP, platform policies |
| USA | FTC health advertising and substantiation, HIPAA where applicable, state medical-board rules, platform policies |
| UK | ASA/CAP rules, GMC guidance, UK GDPR where applicable |
| Australia | Ahpra advertising guidelines (testimonial restrictions), National Law, privacy requirements |
| Dubai / UAE | Health authority advertising approvals (e.g. DHA), professional rules, UAE privacy legislation |

Requirements differ by service, location and provider type. Confirm with local counsel before international onboarding.

## 9. Implementation plan for Raiseque

### Step 1 - Audit existing content

Review websites, Google Business Profiles, Instagram, Facebook, YouTube, landing pages, active ads and WhatsApp promotional material. Remove testimonials, before/after content, offers, superlatives and review widgets first.

### Step 2 - Prohibited-claims library

Maintain approved and rejected examples for guarantees, testimonials, before-and-after content, awards, rankings, offers and medical claims.

### Step 3 - Client approval workflow

Obtain documented written approval for medical facts, doctor credentials, service descriptions and permitted data use before publication.

### Step 4 - Contracts and compensation

Specify compliance responsibilities. Avoid pay-per-patient, commission or lead-based fees; use fixed-fee or retainer models.

### Step 5 - AI content protocol

AI drafts are clinician-reviewed, carry an AI mark where permitted, and never include synthetic patients or outcomes.

### Step 6 - Monthly compliance review

Recheck new posts, ad campaigns, profile changes, claims, reviews and platform/NMC updates.

## 10. Official resources to bookmark

| Resource | Where |
|---|---|
| NMC - 6 October 2026 notice and annexed guidelines | nmc.org.in - What's New (read this first) |
| ASCI Code | ascionline.in |
| Drugs and Magic Remedies Act, 1954 | indiacode.nic.in |
| DPDP Rules, 2025 | meity.gov.in |
| Google Ads - Healthcare and medicines policy | support.google.com/adspolicy |
| Meta Advertising Standards | transparency.meta.com |

**Open items to verify:** Do not approve campaigns without reading the official NMC notice. Clause numbers in this guide are based on secondary summaries.