



Ministry of Health

REQUIREMENTS BY MINISTRY OF HEALTH FOR APPROVAL TO GET TREATMENT ABROAD

1. **Email printout** from the local doctor sent to the Kenya Medical Practitioners and Dentists Council (KMPDC).
2. **Referral** for overseas treatment from **the Kenya Medical Practitioners and Dentists Council (KMPDC)** signed by the **Specialist Doctor** for the **particular disease** should be original, typed and stamped
3. **NHIF Form** (referral for overseas treatment) **Signed** by the **Principal Member, the Specialist Doctor** and **Stamped**
4. **A Referral Letter** by the **Local Referring Specialist** (doctor) which should be **Typed, Original** and **Stamped**
5. **A letter** from the **Receiving Facility** in India or whichever country.
6. **Submit** the documents to the Director General for Health at Afya House, Cathedral Road, NAIROBI.