

**Internship at
Sarvodaya Hospital and Research Centre, Faridabad**

By

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INTERNSHIP REPORT

INTRODUCTION

The Sarvodaya Philosophy:

Sarvodaya Hospital is driven by the philosophy - '**Sarve Santu Niramaya**', that is, 'Happiness for all'. Our driving goal, since inception, has been to evolve into a Centre of Excellence that's driven by life-giving innovations, testified by the finest quality benchmarks in the land, and fuelled by a passion for representing the 'Care' in 'Healthcare'.

Where We Are Coming From:

All great journeys happen for a reason. The Sarvodaya journey began with a simple, yet powerful, conviction : Everyone - no matter what the means or background – has a right to quality healthcare. Over time, our relentless evolution has been the outcome of our desire to see people get back on their feet, fast. And, in the process, see Sarvodaya scale the next level of excellence.

A humble clinic in sector 16, Faridabad, had set us off on a life-altering journey. To take better care of our patients, we added 5 beds in 1991. As the flow of patients grew, we started with 30 beds in our sector 19 clinic, soon adding a building. By 2000, Sarvodaya had grown to a 75 bed hospital with an ICU. The year 2000 also witnessed the launch of our 'Life on Wheels' ambulance service to serve patients in faraway corners better. The very next year, we launched Sarvodaya Nursing Institute. 200 more beds were added in sector 8, Faridabad. Quality

certifications like NABH and NABL followed in 2011. Our next milestone, Sarvodaya Health Clinic (Sai Dham) went operational in the Greater Faridabad area in 2014. And the Sarvodaya Institute of Allied Health Sciences was launched in the same year to impart paramedical training. Yes, we have come a long way since the humble clinic was first set-up in sector 16 of Faridabad. And yet, our journey is just beginning.

Here's what have we achieved so far :

- Thousands of lives saved
- Countless smiles delivered on the faces of our patients and their families
- Blending experience, technology and innovation deliver medical excellence
- Integration of super specialty healthcare services
- Bringing affordable medical services to the people

Sarvodaya Today:

Sarvodaya Hospital, over the years, has grown into a 'centre of excellence', commanding the respect of its peers, the trust of its patients and complete commitment of its team. Today – with a capacity of **over 300 beds**, a fully operational super-specialty wing, a gamut of world class services and facilities, proactive stress of cutting-edge R&D and continuous learning, and a professional team focussed on delivering exceptional care with a personal touch - we are amongst the finest health care destinations in Delhi NCR, and certainly the most preferred in Faridabad.

The Road Ahead:

We at Sarvodaya have been updating ourselves with the latest advancements in the healthcare sector and for the same we have been continuously upgrading our technology to provide better medical services to our patients and further improve the experience during their stay at our hospital.

ORGANISATION PROFILE:

Mission

Good health to all at an affordable cost, building a healthcare facility with medical excellence and a committed, dedicated and contented workforce.

Vision

To position the group as a healthcare leader, providing all levels of quality based medical services with a focus on affordability and medical excellence.

EXCELLENT PEOPLE

Sarvodaya distinguishes itself through the calibre of its distinguished staff - the finest professionals across advanced neuro & spine surgery, cardiac surgery & interventional cardiology, joint replacement, minimal access surgery, internal medicine, diabetes, critical care, pulmonology, mother & child, nursing and allied sciences. We also remain committed to training them continuously to remain at the forefront of medical excellence.

WORLD CLASS TECHNOLOGY

Our cutting-edge technologies (and technology-centric competencies) like 128 Slice CT Scanner, DEXA, S7-3D Ultrasound Machine, 1.5 Tesla MRI, Minimal Access Surgery, Advanced Surgical Procedures and Advanced Laboratory Equipment reflect an unwavering commitment to keep investing in the best tools and infrastructure.

HEALTHCARE HUB

The Sarvodaya vision is to be a one-stop Healthcare Hub that delivers a 3600 range of world class medical solutions across primary, secondary and tertiary care – from diagnosis, treatment, consultancy, rehabilitation, support, emergency aid and beyond.

UNMATCHED CARE

At the heart of Sarvodaya's motto to make a difference is our tradition of curing through caring. It is reflected in our doctors who enjoy time-tested bonds of trust with patients, our very own institute for nurses and paramedical staff which was set up to ensure high standards of personalized care, and our commitment to provide world class healthcare to all sections of society irrespective of background or ailment.

Caring:

- For our patients
- For our community
- For each other

Learning:

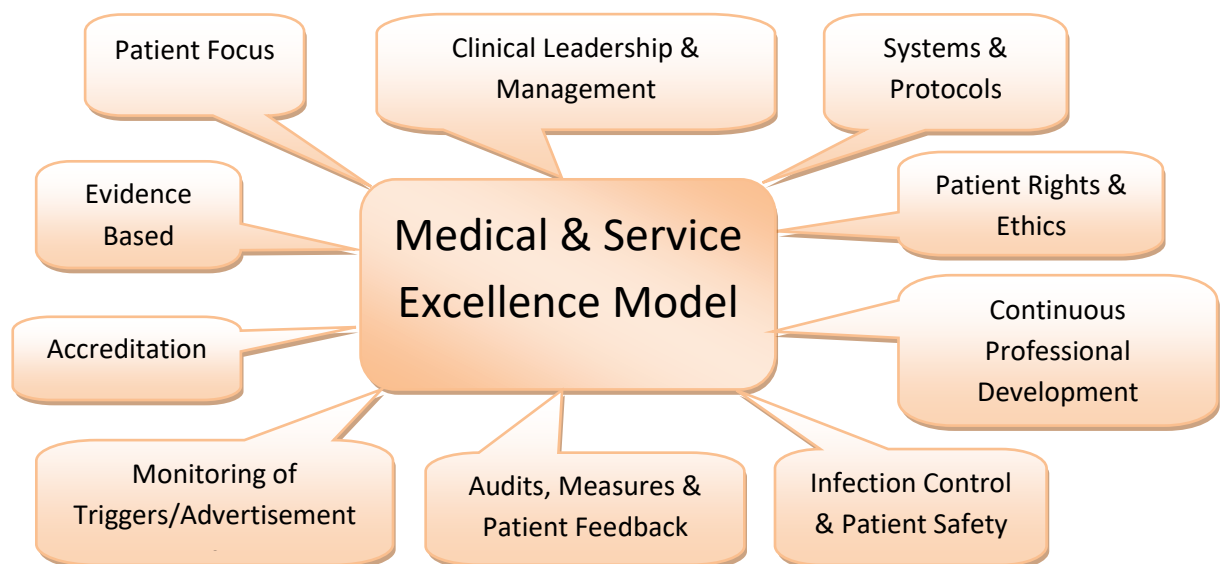
- From others, and sharing our knowledge
- To be a part of a committed team

Leading:

- To be flexible and adaptive
- By motivating others

SERVICES PROVIDED BY THE ORGANISATION:

Sarvodaya follows a core of 'Patient Centred Care'. Widely acknowledged nationally and internationally for its quality patient care, Sarvodaya has successfully implemented the "Medical Excellence Model" through its clinical team of expert physicians and nurses who work together in an integrated manner, assessing patient needs, ordering tests, planning treatments, scheduling surgeries, monitoring progress and planning for early discharge to home.



The pillars of this model include:

- Clinical governance
- Credentialing and clinical privileging of physicians & nurses
- Use of standardized, evidence based protocols

- Patient and staff safety
- Infection control
- A culture of audit and continuous professional development

Every department of the hospital was observed carefully for its working, staff, hierarchy, physical set up and major challenges faced by them and suggestions were made to overcome those challenges.

The hospital has four key areas of specialties:

- Institute of Cardiac Vascular Surgery.
- Institute of Bariatric & Metabolic Surgery.
- Institute of Oncology.
- Institute of Nephrology.

DEPARTMENT VISITED:

FRONT OFFICE

- **First contact point** between the patients / their attendants coming to the facility.
- Gives directions to them about the locations of various departments.
- Helps in planning timely discharge a day before by inquiring about the same from the concerned consultants.
- Performs in patient and out- patient registration.
- Does appointment scheduling of the patients.
- Makes doctors' available summary.
- Insurance management.
- Does registration and scheduling of preventive health check-ups.

Challenges

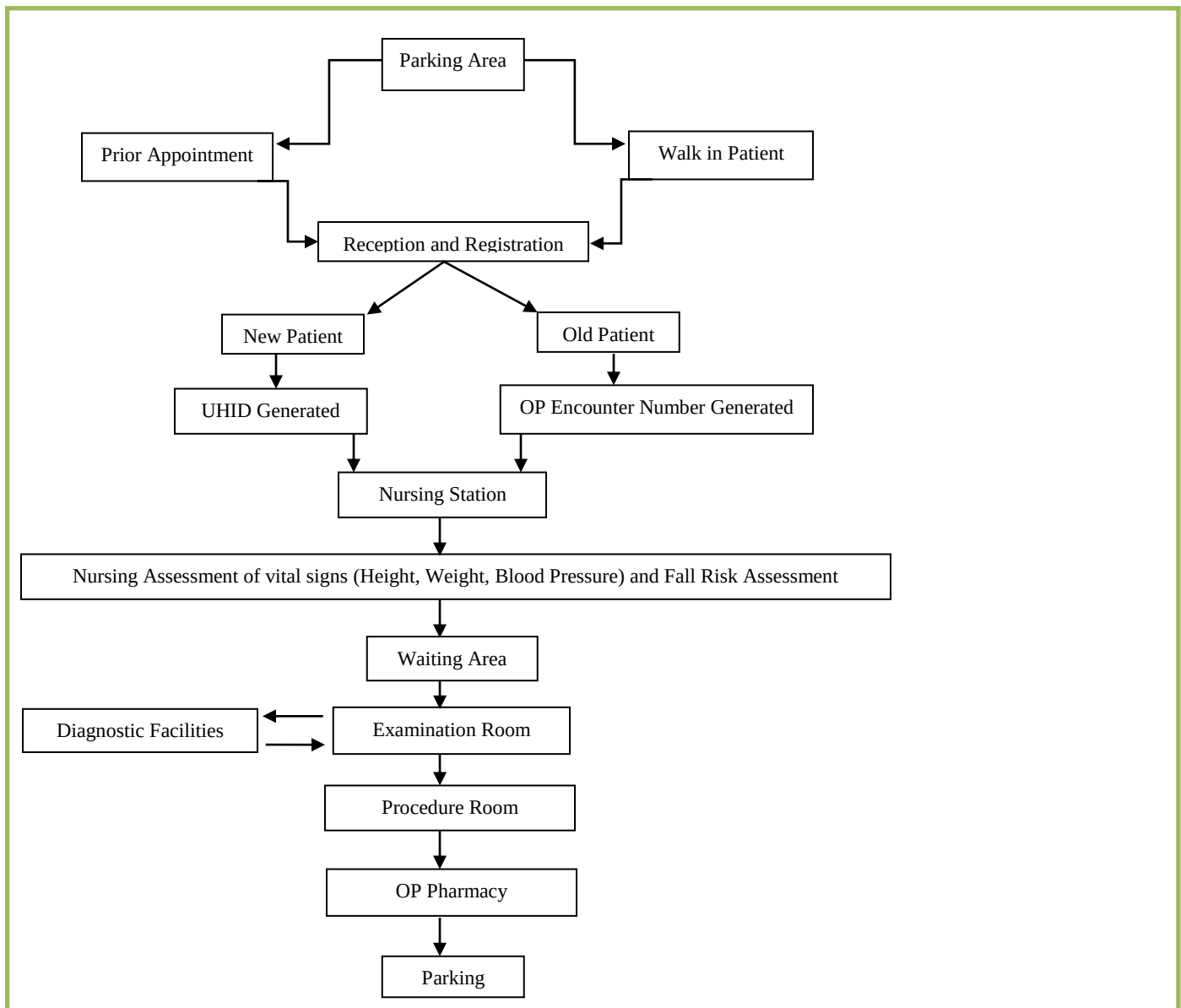
- Shortage of staff
- Huge rush during peak hours such as morning.

OUT-PATIENT DEPARTMENT

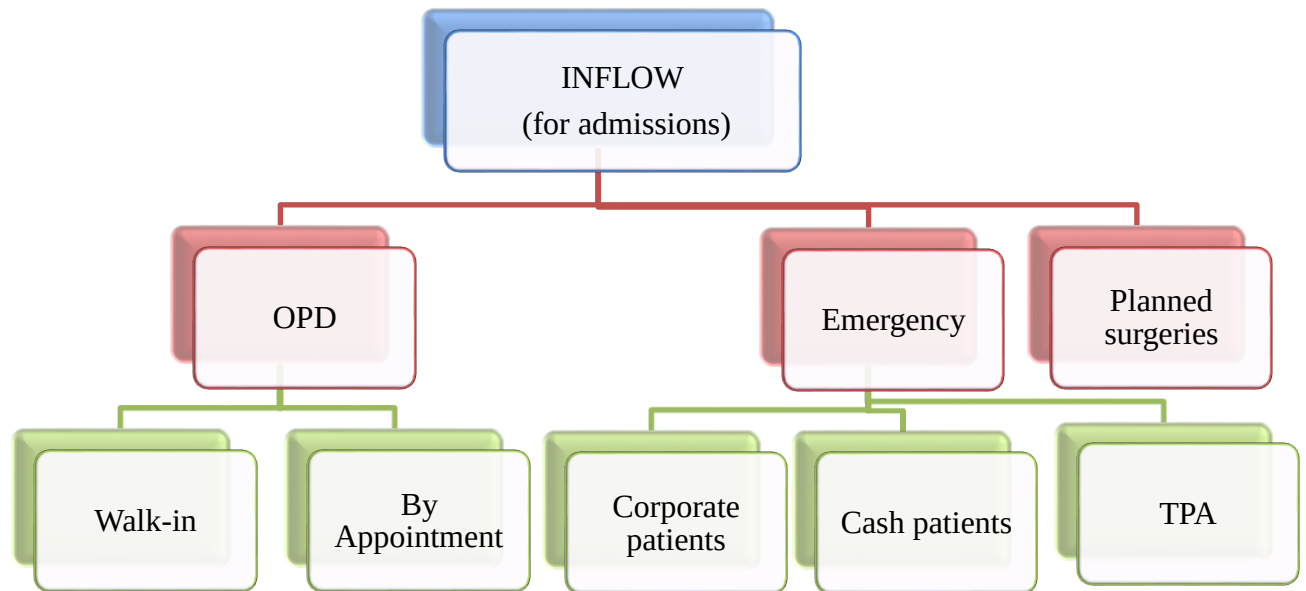
- Each institute of Sarvodaya Hospital has its own OPD area as well as IPD area / day-care area wherever applicable with doctor's chambers and procedure rooms.
- Every OPD has a procedure room and its own Front Desk.

- Appointments are centralized and are recorded on the Hospital Information Management System. As soon as appointments are fixed, a text message is sent to the patient confirming the appointment, and a reminder message is sent on the day before the appointment. No walk-in patient is turned away, and the staffs try to accommodate these patients between the appointments already scheduled for the day.
- Each OPD waiting area has the capacity to handle 70-100 patients waiting.
- In case of a new patient, registration is done which is valid pan- Sarvodaya and for life time of the patient and a UHID is created which becomes a unique identification for all his health related information.
- For Chairpersons and senior doctors, a junior doctor does the initial assessment of the patient, which not only reduces the workload of the senior doctors (whose slots are always overbooked), but it also gives the junior doctors an opportunity to learn from the best brains in the industry.

The general process flow that is followed in all the OPDs is as follows:



- STAFF – 70-80; work in shifts with TPA staff working only from 5-5.
- ISSUES- Huge departmentalisation which causes co-ordination problems



IN-PATIENT DEPARTMENT (IPD)

- IPD is distributed over two floors in which second floor is divided into :
RAGHU AND KANTA wing.
Third floor is divided into:
SHRI AND VIDYA wing.
- Every bedside has:
 - Details of Consultant, Nurse and Mentor written at the top of every bed
 - Room equipment checklist – side rails, Oxygen, Suction
 - Important Instructions
- The rooms available in IPD have the following structure of beds per room:
 - Economy room – 6 beds per room.
 - Twin Sharing – 2 beds per room
 - Single Deluxe
- Every floor has a central nursing station with
 - Information Board covering:
 - Designation & Contact numbers of
 - Duty doctor
 - Administration Staff
 - Floor Mentor
 - Support Staff

- Ward Secretary
 - Bed Manager
 - Nurses' names with shift timing and designation(8-10 nurses per shift)
- Crash Cart parked next to the nursing station
- Cupboards with forms- down time form, investigation track sheet, blood request form, PAC sheet, informed consent, inventory files and registers
- Medication rooms – 2 ;Pantry – 1
- Records room
- Biomedical Waste Disposal
- Nurse to bed ratio = 1:5 or 1:6
- General Duty Assistants (GDAs) = 2-3 in every shift
- Average Length of Stay (ALOS) for normal Laparoscopic surgeries = 2-3 days
- Quality Indicators are: Patient Fall, Hypoglycaemia, Needle stick Injury
- Process of admission of new patient to IPD

Patient comes to the floor along with a face sheet, admission request form and then a ID band is tied on the wrist of the patient on receiving the patient.

Nursing assessment done (age , height , weight , vitals , allergies , risk assessment , requirement of an interpreter or not)

**TAT – 60
Minutes**

Concerned Doctor is informed about the patient. and medications & instructions are entered in Computerized Patient Record System (CPRS), reviewed by IPD Pharmacy

Doctors rounds along with Dieticians, Floor mentors, Nursing Supervisor-, Housekeeping Patient assessment is done and complaints are taken if any.

Plan of Care decided for the Patient.

OT

Medication

Lab

**Radiological
Investigations**

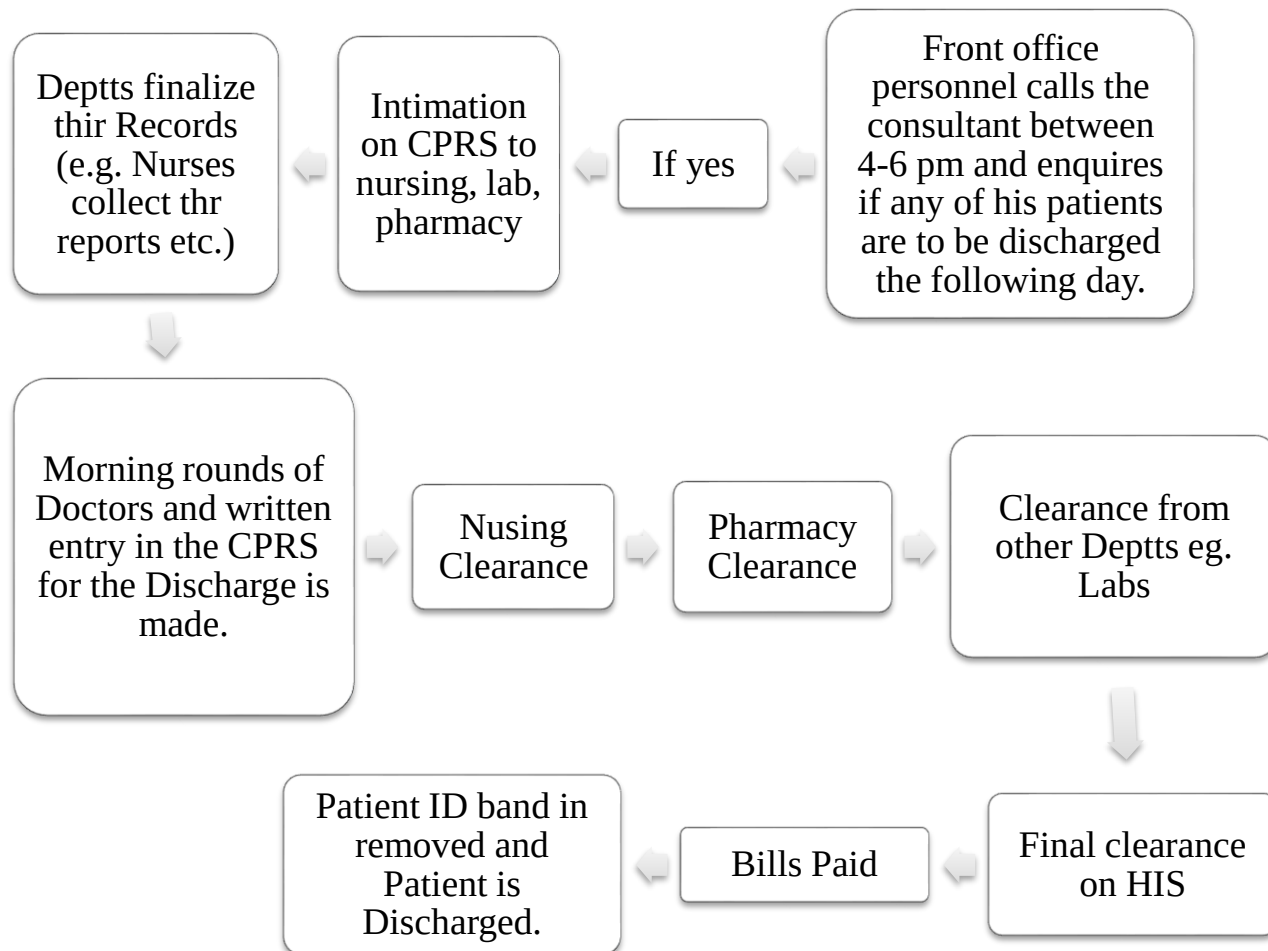
- **BARRIER NURSING-**

Isolation of the patient in case the blood or urine culture of the patient has been tested positive for any infection so that the infection doesn't spread to others .

- **REVERSE BARRIER NURSING-**

Done in cases where patient is immuno compromised so that infection doesn't travel to him from others.

- Process of Discharge of patient from IPD.



EMERGENCY DEPARTMENT

Due to the unplanned nature of patient attendance, this department provide initial treatment for a broad spectrum of illnesses and injuries, some of which may be [life-threatening](#) and require immediate attention, except for major burns. It is located at the ground floor with its own dedicated entrance and operates for 24 hours a day.

Ambulance - 2 ACLS (with CCTV camera for telemedicine, Suction Cardiac Monitor, Defibrillator, Oxygen Pump) and 2 BCLS (Ferno Stretcher, Oxygen Pump)

Patients are either transferred to other departments or are discharged within 4 hours.

Response time:

- EMO response time <1 min
- Consultant response time <60 min
- Code blue response time <3min
- Ambulance response time <10 min

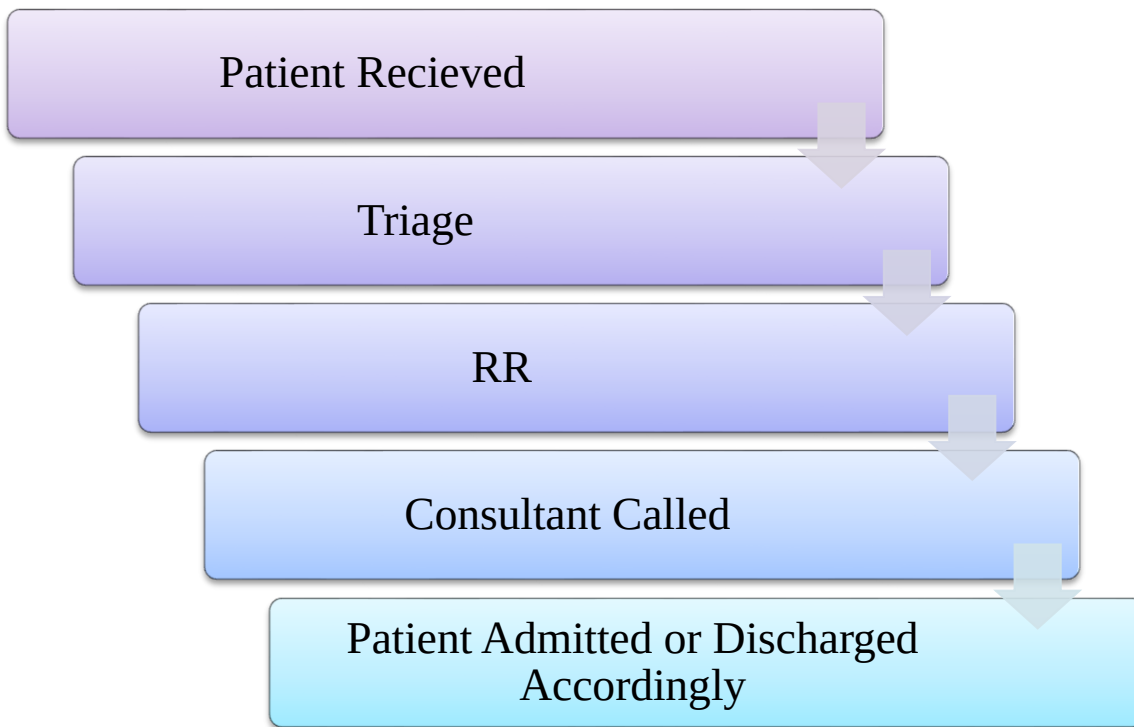
Infrastructure:

- Total 11 bedded triage
- Resuscitation suite -1 bed
- Urgent care area – 2 beds
- Observation area – 8 beds
- Doctors work station-is located in the centre of the urgent care area
- Store room- is located behind the reception. Medications are filled twice a day and stock of two days is kept in advance for Sunday. Narcotics are also available and kept in double lock and key system.
- Hospital information system and HIS
- Waiting area for patient's attendants is outside the department.

Staffing:

1. Senior consultant (Emergency medical officer)
2. 4 doctors
3. Team leader
4. Emergency physicians - 3
5. Nurses : 32 (8 nurses per shift)
6. 2 personnel at reception
7. Paramedical staff for ambulance
8. 4 GDA per shift
9. Outsourced staff : security personnel

Process Flow



OPERATION THEATER COMPLEX

Operation theatre complex of is located on first floor. Operation theatre complex has 6 operation theatre assigned to various departments. Cardiac, oncology , bariatric laparoscopic, gynaecology, ENT surgeries are performed in these operation theatres. It has 7 operation theatres for various departments. Orthopaedic, neurology and general surgeries are performed here.

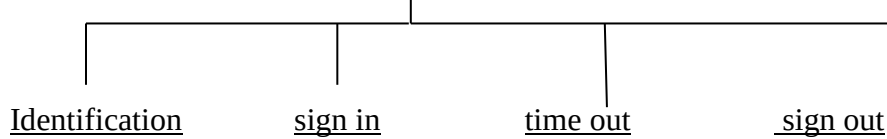
Organization of staff: The staffs of Operation Theatre are organized into four groups: Anaesthetist and surgeon, nursing staff, technician, supportive staff.

- Average number of cases done per day – 30 in each wing
- Temperature - 21 approx
- Humidity – 50-55
- Light – 2000 lux in the centre of OT table and decreases on moving farther
- OT booking is done through online . 2 types of surgeries are performed – *elective*: surgeon gets PAC done and gives an appointment ; *add on*: manual booking of OT in case there is cancellation of the scheduled cases due to any reason.
- Each OT complex has a separate material store and a TSSU_(Theatrical Sterile Supply Unit).
- Staffing ratio- Nurses : patients – 4:1(pre-op) ; 2:1(post-op)

Technicians : patients- 1:1

- OT Utilisation – average is 70%.
- Sterilisation is done by ETO (12 hrs); autoclave. Fumigation is done twice a day in the morning and evening.
- Bio medical waste disposal is done every 2 hours.
- No. Of pre-op beds -6
- No. of post-op beds -7

- **Surgical safety check list includes**



- Quality indicators: wrong patient , wrong surgeon , wrong surgery , return to OT(within 7 days) , waiting time for OT

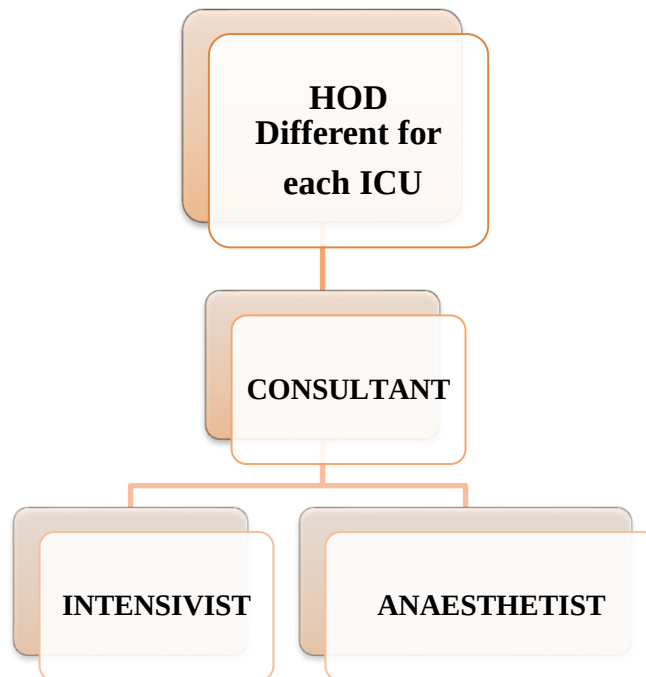
INTENSIVE CARE UNIT (ICU)

Sarvodaya has a total of 7 Intensive Care Units in the Hospital :

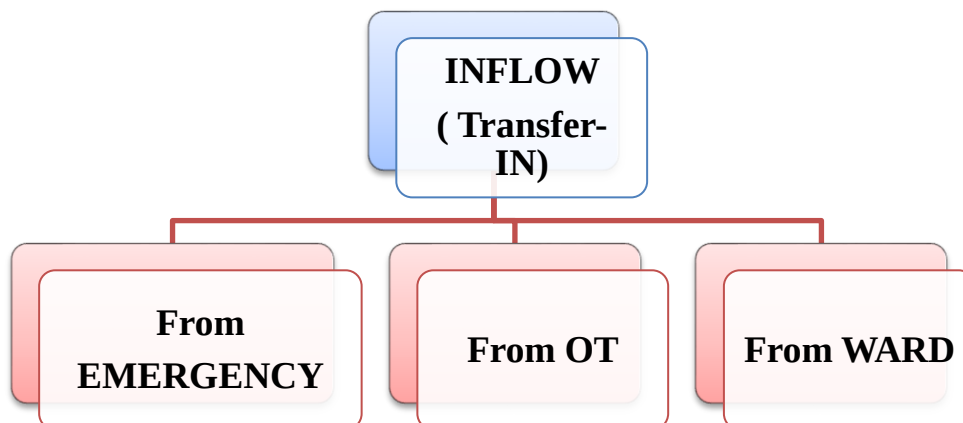
1. Medical ICU – 20 Bedded
2. Neonatal ICU – 8 Bedded
3. Surgical ICU -- 6 Bedded
4. CTVS ICU --- 2 Bedded
5. Coronary Care Unit – 6 Bedded

All Intensive Care Units have a 24 hour service of Intensivist and an Anaesthesit.

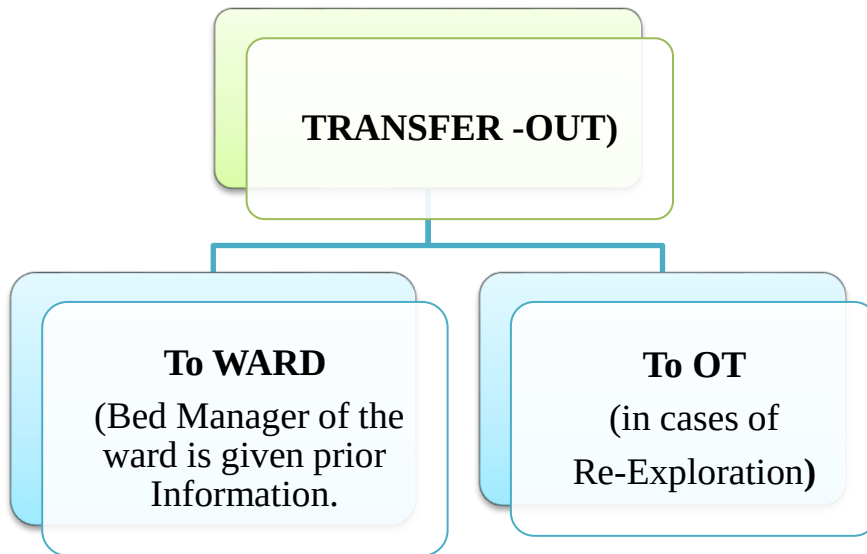
Hierarchy



Patient Flow



Before hand information is given on call to the ICU for *transfer-in* of the patient.



- Patient: nurse – 1:1(for all patients)
- Patient counselling – done throughout the day ; Relative counselling – done twice a day by the Intensivist .
- Protocol for infected patients –
 - Isolation
 - Aseptic policy
 - Full PPA
 - Separate linen disposal in separate bags
 - Separate dressing trolley
 - Separate housekeeping material- dusters, mops etc
- Quality indicators-
 - Patient falls
 - Bed sores
 - Medication error
 - Nosocomial infections

All the Quality indicators are duly noted in “Quality Flash” and it is audited time to time and measures are taken to reduce the number of incidents.

CATH LAB

Catheterization laboratory or cath lab is an [examination room](#) with [diagnostic imaging](#) equipment used to visualize the arteries of the heart and the chambers of the heart and treat any stenosis or abnormality found.

Diagnostic procedures performed here are:

- Angiography
- Electrophysiology study

- Cath study

Other procedures are:

- Percutaneous Transluminal Coronary Angioplasty
- Peripheral Transluminal Angioplasty
- Radio Frequency Ablation
- Permanent Pacemaker Implantation
- Intra Cardiac Defibrillation
- Cardiac Resynchronisation Therapy Defibrillator Device
- Cardiac Resynchronisation Therapy Pacemaker
- Left and right sided pressure studies
- Closure of some [congenital heart defect](#)

Slots are booked for everyday as per the doctors' and patients' convenience. About 70% of the slots booked are treated everyday

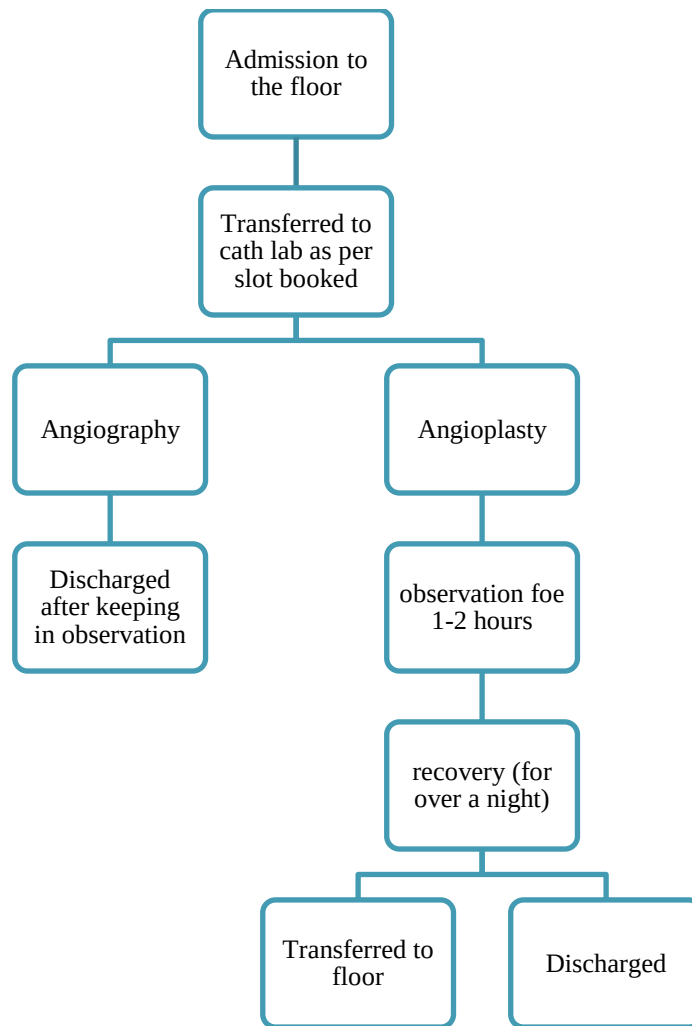
Units of cath lab:

1. Cath lab 1
2. Cath lab 2
3. Technical room
4. Observation area
5. Technician room
6. Store room and utility room
7. Observation area-7 Beds
8. Instrument washroom

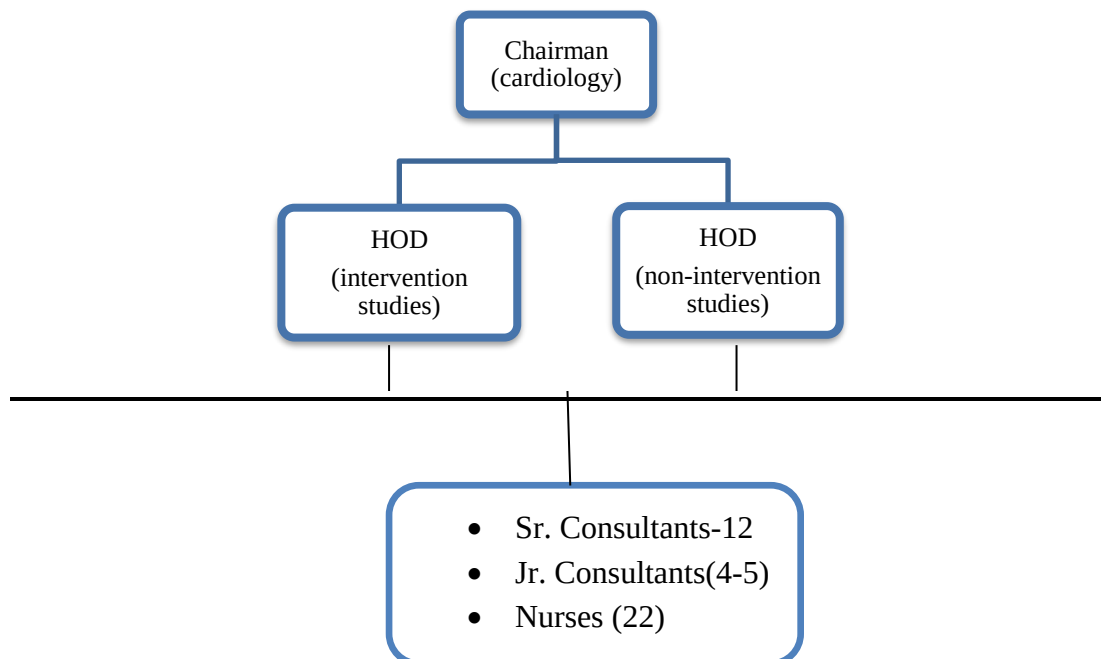
Location: Cath lab is located on the first floor with the vicinity areas as

- Emergency department
- Operation theatre
- Cath recovery – 2 Beds
- Coronary care
- CTVS OT
- SICU
- PICU
- MICU

Process Flow of Patients



Staff



DEPARTMENT OF LAB SERVICES

INTRODUCTION-

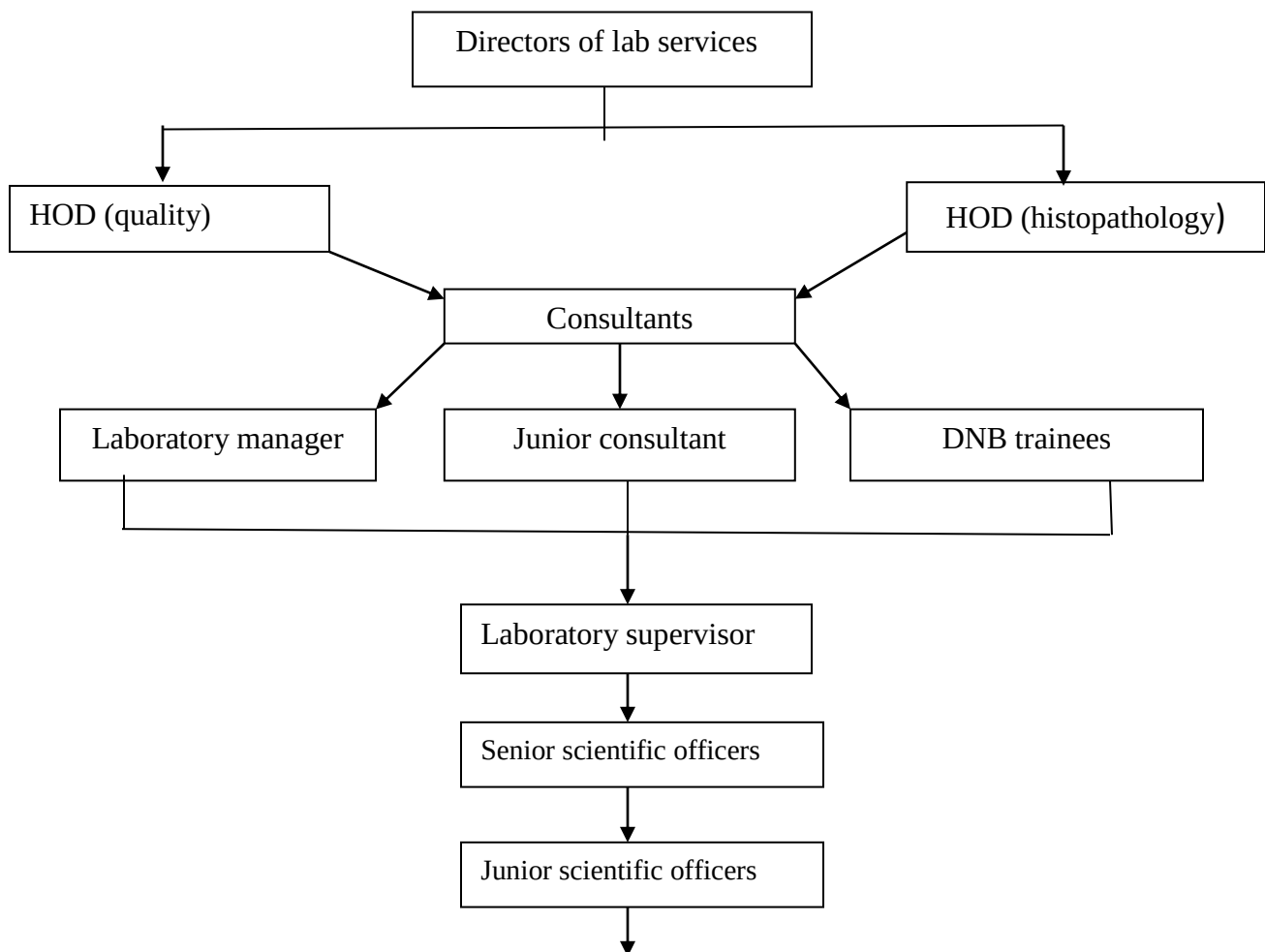
An ISO 9001:2000 certified lab, it is open 24 hrs a day. It's a high-tech lab with fully automated instrument which are directly interfaced with ***hospital information system*** and ***laboratory information system***. Facility of stat tests (emergency) and sample collection from home is also available.

LABORATORY COMPRISES OF THE FOLLOWING DEPARTMENTS-

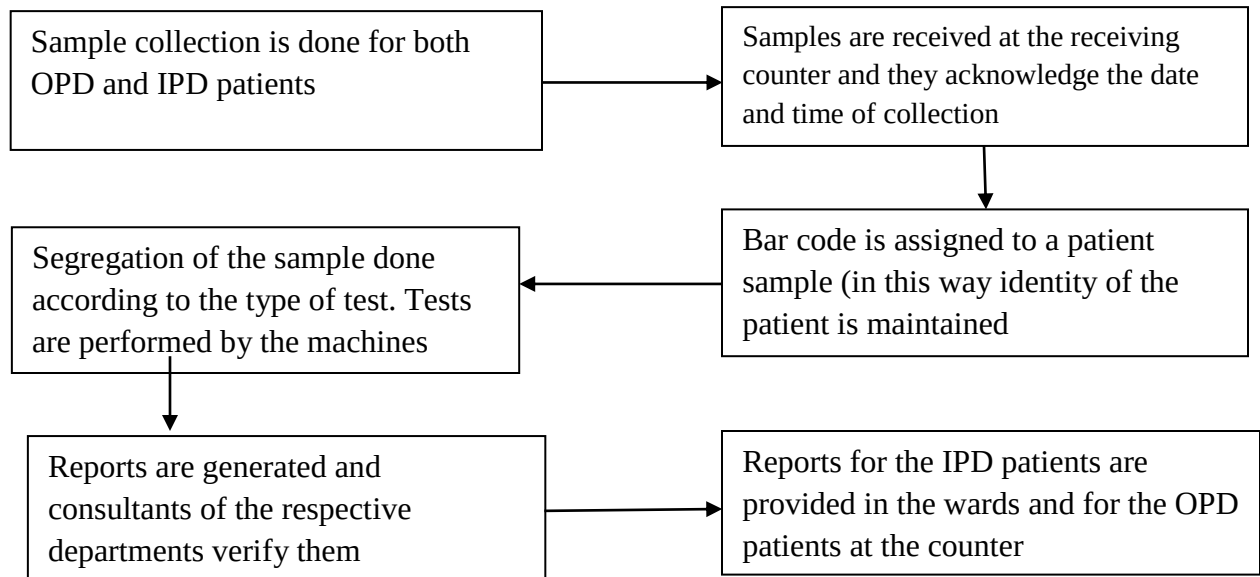
- Biochemistry
- Haematology
- Immunoassay
- Histopathology
- Clinical pathology
- Serology
- Microbiology

HIERARCHY- The Department of Lab Is Broadly Divided In Two Departments

- Lab medicine
- Histopathology



PROCESS FLOW-



LABORATORY INFORMATION SYSTEM-It is connected with hospital information system

- Sample received-red colour
- Samples acknowledged-yellow colour
- Test done-blue colour
- Result verified-green colour
- Billing done-pink colour

RADIOLOGY DEPARTMENT:-

Situated at the ground floor of the hospital.

The total staffs working in the Radiology Department are 35.

Procedures done in the department:-

(1) Routine X-Ray studies

- (a) Plain - e.g. chest, spine, etc
- (b) Routine fluoroscopic procedures e.g. Barium studies

(2) Routine ultrasound studies

- (a) Ultrasonography - e.g. Abdomen, Pelvis
- (b) Doppler studies peripheral (B/W & colour) e.g. 2 D echo, vascular studies, etc

3) Mammography

4) Dexascan

5) Special imaging techniques

- (a) CT Scan (Computerized Axial Tomography)
- (b) MRI (Magnetic Resonance Imaging)

Divided into two parts:-

1) For Ultrasonography, mammography, Dexascan

2) For CT scan, MRI, X-ray, fluoroscopy

Consist of:-

- 1) Reception:-Counter for appointment and billing
- 2) Waiting room with general facilities like toilets, drinking water, air conditioning
- 3) Diagnostic room
- 4) Counseling room
- 5) Changing room
- 6) Film processing room
- 7) Radiologist office
- 8) Report collection room

There is one MRI and one CT scan machine in the department.

Timings for OPD patients:-8am to 5pm

In between this IPD and Emergency patients are also taken.

Report collection: - If the scan is done before 12pm, reports are ready by the evening and can be collected in the same evening. And if done after 12pm, report will be delivered next day.

Patient who comes in the radiology department either walks in or takes the appointment.

Appointment patients are given preference whereas walk in patients have to wait. Emergency, doctor's referred patients or ICU patients scan is done as soon as possible.

Process flow in radiology department (OPD)

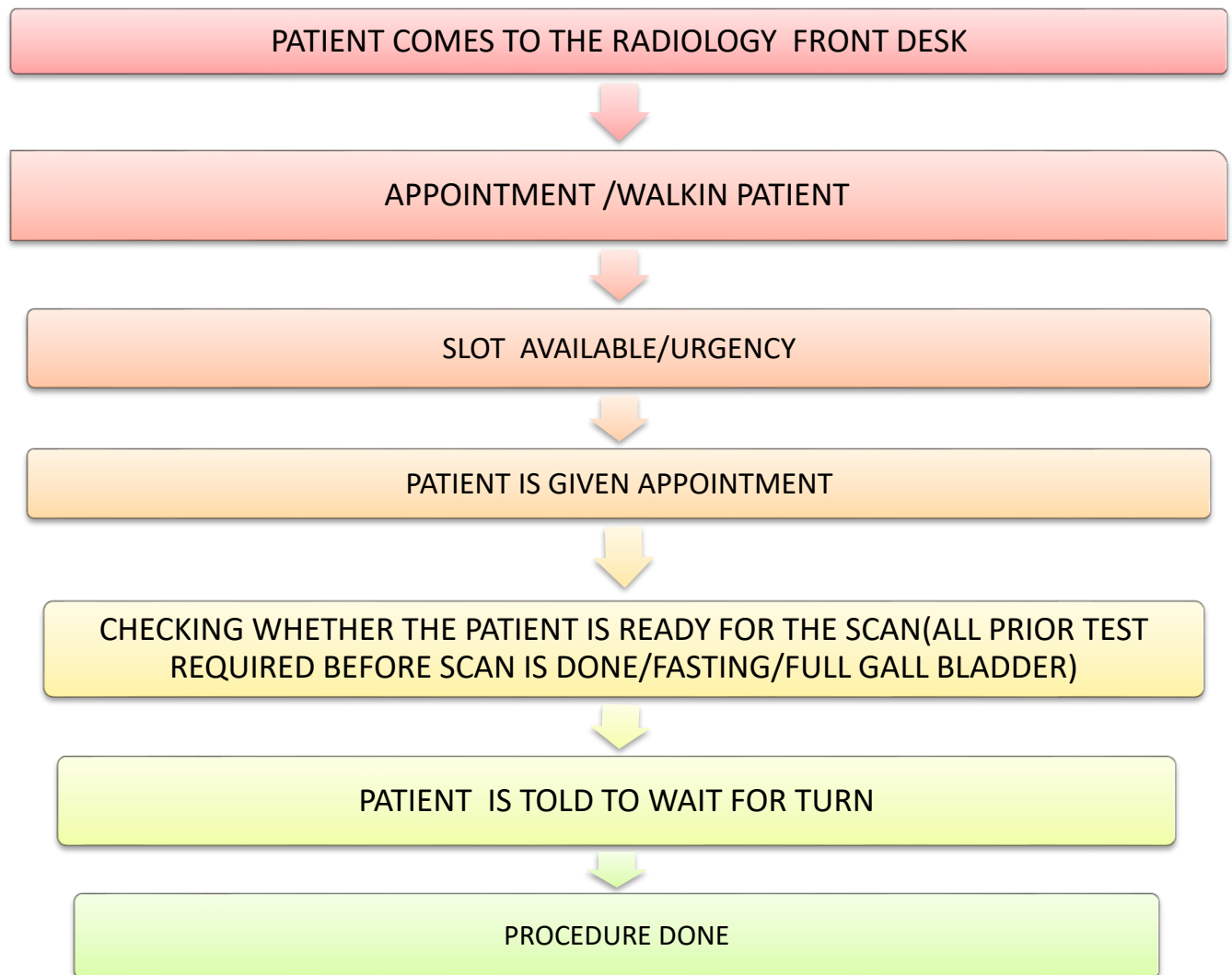


Figure:-Process flow in radiology department for outpatients.

Firstly, the patient comes to the radiology front desk after been prescribed by doctor for the scan; patient is either taken prior appointment or walk in patient. The availability of the slot required is then checked for the walk in patient by the front desk. Once the slot is checked, the requirements

for the scan i.e. condition of the patient required to undergo the scan is checked. (E.g. proper creatinine level for renal patients). After that the patient is provided the appointment and been told to wait for his turn. Finally the procedure is performed.

- Emergency patients especially with a critical diagnosis – highlighted in the register and the consultant is immediately informed about the findings.
- Procedures wherein contrast is to be given, for example MRI, consent of the patient is taken prior to the procedure.

BLOOD BANK

Sarvodaya hospital has its own blood bank. All blood groups are available. But it is preferred that patient arranges blood through his relatives or any friend and should give replacement.

Blood bank consist of:

1. Sample collection area / reception area: In reception area a form is given to the attendant of the patient regarding their details before he/ she donates the blood.
2. Aphaeresis area: blood have several components including red blood cells platelets and Plasma. Donor aphaeresis is a special type of blood donation in which a specific component platelet, plasma is withdrawn from donor
3. Component room: In component room the whole blood is separated into packed cells FFP and platelets.
4. TTI room: It is to diagnose transfusion transmitted infections. If donor is detected positive for TTI status it means donor have the potential to transmit the infection to their partner and children.
5. Issue room: This room is to issue the screened blood bags.

Staff of blood bank consists of 1 HOD, 2 blood bank officer, 1 technician supervisor, 16 technicians, 2 staff nurse, 2 computer executives, 4 GDA.

- The Department is headed by Dr.Sangeeta Pathak and the technical manager is Ms. Ruchi.
- The blood donation timings are from 9am to 5pm and approximately one volunteer comes for donating blood. Blood can be donated after every 3 months.
- The PRBC are stored for 45 days at 2-6 degree Celsius.
- The Platelets are stored for 5 days at room temperature 22± Celsius.
- The FFP (Fresh Frozen Plasma) are stored for 1 year at -40 degree Celsius.

CENTRAL STERILIZATION SERVICE DEPARTMENT

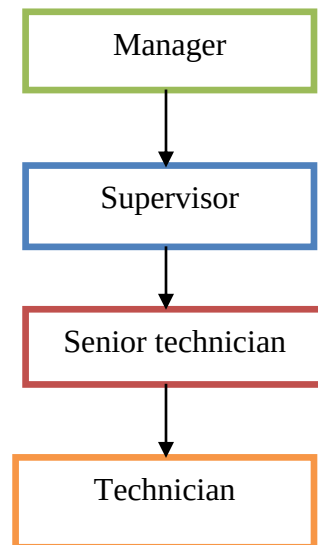
INTRODUCTION-

CSSD is the heart of the hospital infection control and the most important unit of the clinical support services. CSSD role lies in receiving, cleaning, packing, disinfecting, sterilizing, storing and disinfecting instruments as per well-delineated protocols and standardized procedures.

CSSD department is a centralized department and the location of the department is in the basement.

The main aim of the CSSD department is to reduce the level of micro-organisms from 10^6 to 10^{-6} .

HIERARCHY OF THE DEPARTMENT-



The Department is headed by Subash

ZONES PRESENT-

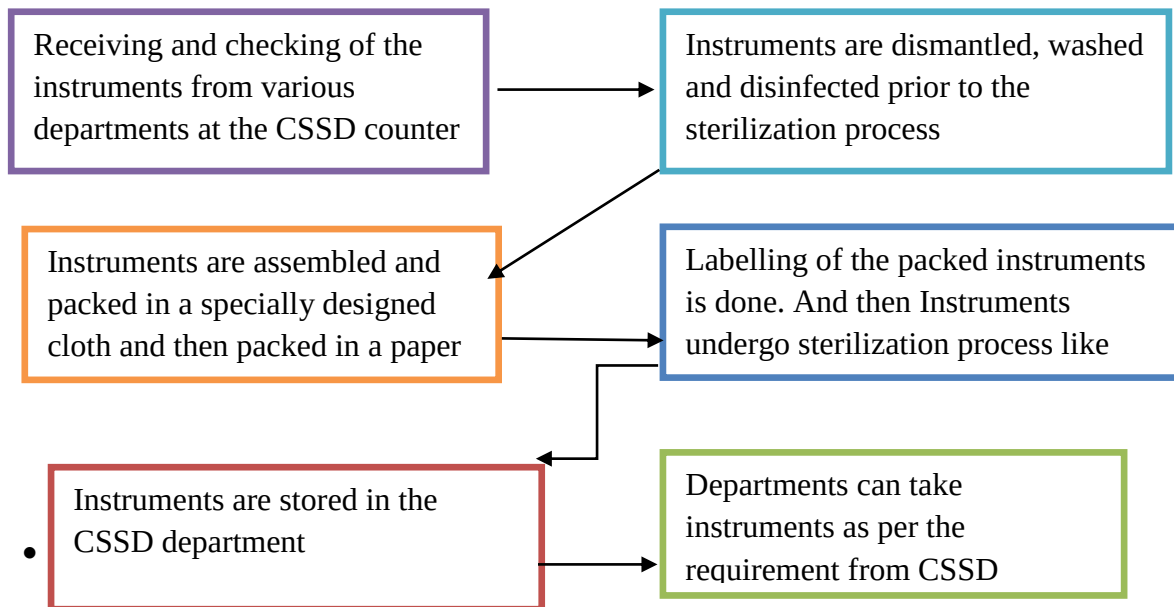
- Decontamination
- Clean
- Sterile

Colour coding for the following zones -

- Decontamination area-red colour

- Clean area-blue colour
- Sterile area-green colour

PROCESS FLOW-



- At the time of receiving the instrument at the CSSD department, the instruments are counted, checked for any damage, segregated according to the method of sterilization required for the instrument.
- Instruments used for the washing of the instruments are fully automated and according to the European standards.
- For packing of the instruments medical grade paper and cloths are used which are specifically designed for the purpose(they have a zig -zag pattern)
- Once sterilized and packed instrument can be used within 6 months.

EQUIPMENT LIST-

- Washer-
- Autoclave -
- Plasma sterilizer-
- ETO sterilizers-
- Dryers-
- Air-guns-

- Water-guns-
- Ultrasonic cleaners-

QUALITY INDICATORS-

Various quality indicators used in CSSD are-

- **Batch monitoring strip-** a yellow colored strip which is attached to every lot which on exposure to right temperature and pressure turns black

FOOD & BEVERAGES

- Food & Beverage department is responsible for the supply of food to the in-patients and sometimes their attendants (if required) and also for arranging food during various meetings and conferences in the hospital.
- Hierarchy

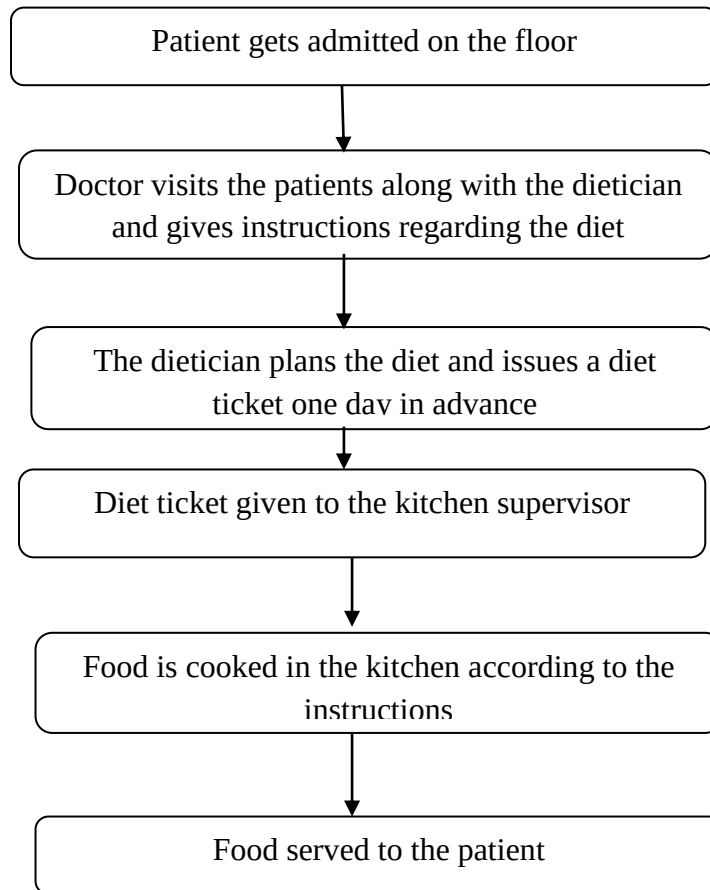


Time table for the diet of the patient

7-8AM	Breakfast
10:30-11:30AM	Soup/Beverages
1-2PM	Lunch
4-5PM	Evening tea
6-7PM	Soup

8-9PM	Dinner
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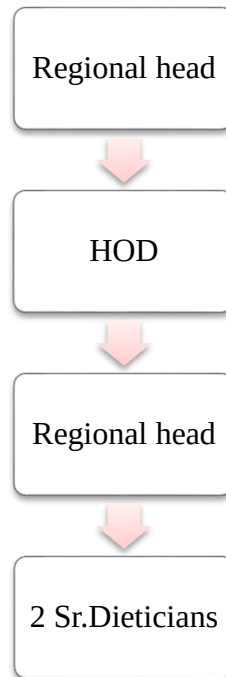
- Dinner of the same day, breakfast and lunch of the next day are decided prior in the evening and diet tickets are issued by the dietician and given to the chef.
- Apart from these if patients wants to have something extra, those can be provided to the patient after consulting dietician, but for an extra charges.
- **Process flow** of the department



DIETETICS

- The department plans diet for all IPD patients in accordance with the primary consultant's opinion on the same.
- Staff- 13 in total.

- Hierarchy



- Dietician: patient – 1:50
- Assessment of each patient to be done within 24 hours of admission and thereafter every 8th day after initial assessment.
- For enteral nutrition, all commercial supplements for each disease are available.

2) Narcotics License

INVENTORY MANAGEMENT PARAMETERS

I. ABC Class

A Items: 7 days

B Items: 10 days

C Items: 15 days

II. EOQ - (economic order quantity)

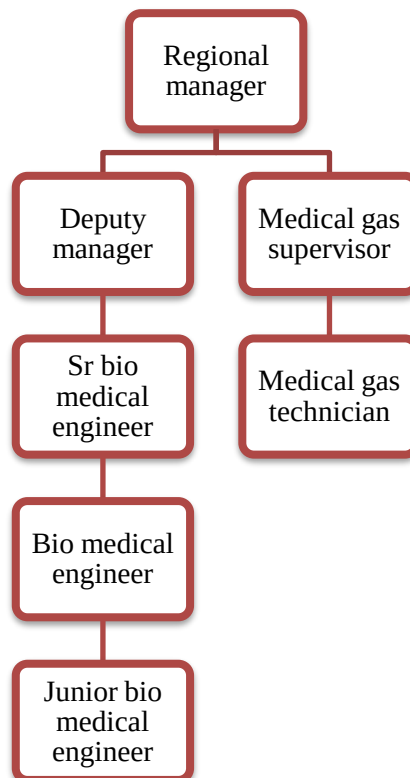
III. LEAD TIME – Time from ordering to delivery of drugs

IV. VED – Vital Essential Desirable (According To move of drugs)

BIOMEDICAL ENGINEERING

- This department deals with purchase, installation and commissioning, training on operating, handling and maintenance of medical equipment in all departments of the hospital.

- Looks after running equipment and new equipment.
- For Running equipment
 - Preventive maintenance is done – to prevent breakdown, maintenance is done.
 - Calibration is done – i.e. to check how accurate an equipment is functioning
 - Breakdown call is checked for
 - Depreciation is measured
- For new equipment
 - Installation and commissioning is done.
- AMC and CMC records are maintained.
- CAPEX (Capital Expenditure) and OPEX (Operating Expenditure) registers are maintained.
- Equipment Incident report is made in case of any physical damage – it is filled mentioning how the damage did happened. Thereafter replacement or repair whatever is required is done.
- Organisational chart



PHARMACY

There is one inpatient pharmacy situated at second floor and one outpatient pharmacy stores at the ground floor.

PURCHASE

Auto purchase requisition is given to central purchasing team which is forwarded to vendor (outsourced). For purchasing the items ABC method is followed. Weekly requisition is done and vendors take minimum 3 days for delivery of drugs to hospital.

STORING OF DRUGS

Oral, parenteral and topical items are stored separately. Near expiry (expiry within 3 months) is stored in separate designated area to expedite the consumptions.

INDENT AND DISPENSE OF MEDICATIONS.

In patient pharmacy-

In HIS, Medication orders posted by the clinicians is verified by pharmacist on PUTTY System labelled with (patient info, SSN no., drug name,) then the medications are dispatched after Billing via HIS (Hospital information system) and finally handover to GDA to dispense medicines. The Stat orders required immediately are dispensed within 30 minutes. The normal order is dispensed within 1 hour and routine order is delivered by 1 round per day.

NARCOTICS DRUGS

They are kept in double lock and key system. Documentation of narcotic drugs is appropriately maintained.

Narcotics drugs under statutory regulation being used in hospitals includes: injection and transdermal patch of Fentanyl and injection and tab. of Morphine.

LOOK ALIKE AND SOUND ALIKE DRUGS

Look alike and sound alike medications have high medication error due to similarities in nomenclature and packaging.

In the main pharmacy stores, (SALA Medications) are stored separately in 2 adjacent racks with blue coloured sound alike and pink coloured look alike medications warning stickers to avoid confusion while dispensing.

Medication Recall: If a drug is found to be defective, it is reported to the office where the records for that particular series of drugs dispensed is checked and verified for medication recall.

Licences acquired by hospital pharmacy -

1) Pharmacist License

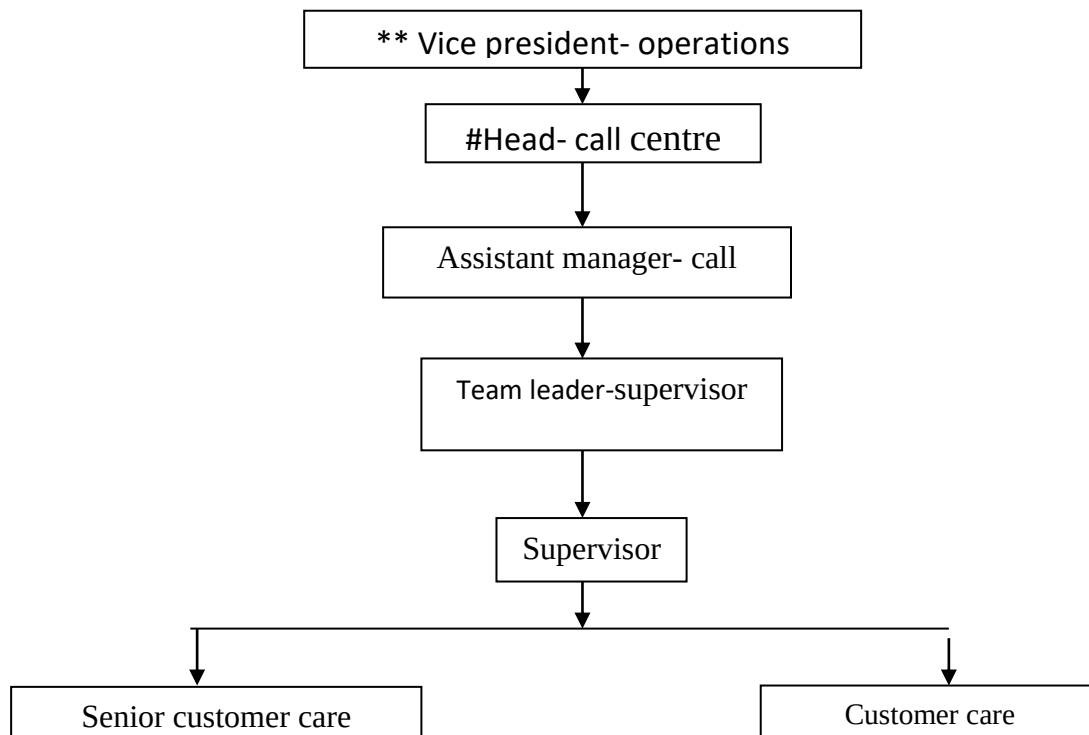
CALL CENTRE

Call centre of Sarvodaya hospital operates at 24*7. It is centralized patient contact centre. It can be used as an information centre for all customers.

Call centre deals with:

- Doctor's appointment
- Health check ups
- Radiology and diagnostic appointments
- Patient's information
- Doctor's information
- Employee's information
- Speciality information
- Other department information
- It handles internal emergency e.g. Blue code

Organization chart:



SECURITY DEPARTMENT

The security department is an eye and ear of every organization acting as a liaison between management and staff. The control room of Security Department is located in the basement.

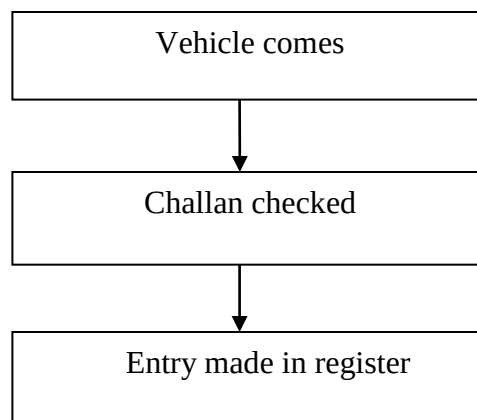
Functions of Security Department:-

1. Security management:-

- Selection of people(guards and supervisors)
- Deploying of security staff to different floors and departments
- Checking of people entering hospital
- Turnout and grooming of security staff
- Training of security staff
- MLC handling
- Dispute handling

2. Material management:-It includes management of both incoming and outgoing materials.

a. Flow for incoming materials:-The incoming materials are received either from a company or a contractor. The process flow is as under:-



3. Disaster management:-

There are seven emergency codes:-

1. Red- Fire

2. Black- Bomb threat
3. Blue-Cardiac arrest
4. Yellow- External disaster like earthquake
5. Violet-Violent patient
6. Pink- Missing patient
- .7. Orange – Rapid Response Team

The SOP's and disaster management plans are prepared by the Security Department. Fire management system includes smoke detectors, sprinklers fitted on ceiling and fire shafts in all corridors.

Walkie talkies are an important source of communication.

Other disasters include floods, water logging, terrorist attack.

HUMAN RESOURCE MANAGEMENT

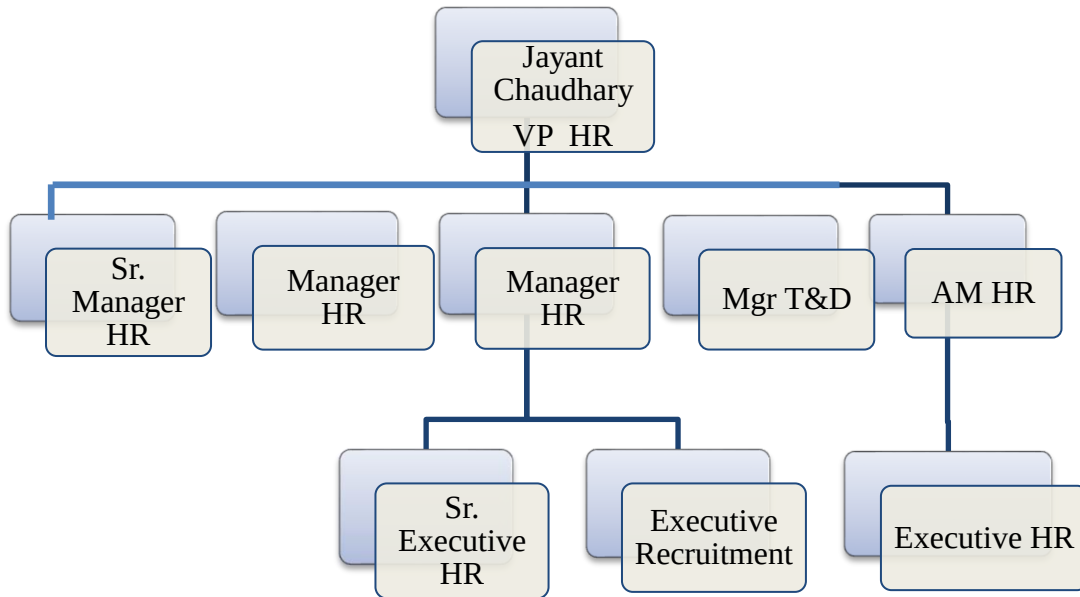
Human resource management (HRM or simply **HR**) is a function in designed to maximize employee performance in service of their employer's strategic objectives. HR is primarily concerned with how people are managed within organizations, focusing on policies and systems.

Following are the policies undertaken by the Human Resource Management Department:-

- Human Resource Planning Policy.
- Job Profile Format.
- Recruitment policy.
- Training and development policy.
- Induction and Orientation policy.
- Performance appraisal Policy.
- Complaint & Grievances Redressal Policy.
- Disciplinary Policy.
- Medical Discount Policy.
- Annual Medical Check-up Policy.
- Clinical credentialing and privileging Policy.

- Nursing Credentialing and Privileging Policy.

HR Structure



INTERNATIONAL PATIENT SERVICES (IPS) DEPARTMENT

It takes a lot to be a world-class health care services provider and as per patient registration data. This department situated at ground floor.

Contact Procedure:

- Patient sends a query and/or reports
- IPS Team consults the relevant consultant and provides diagnosis, proposed treatment and estimate
- If required, a telephonic meeting may also be arranged
- Patient confirms if he wants to have treatment at Sarvodaya to provide Visa Facilitation Letter
- Patient confirms the arrival date and time
- IPS Team, in the meantime, books room, OT etc. for the patient
- Patient is received at the Airport and then, brought to the Hospital/Guest House/Hotel

International patients avail treatment in India mainly because these facilities or treatments are not available in their respective countries, and are available at a much cheaper price in India than other countries such as US, UK or European countries. The countries from

where patients come to seek treatment most commonly are Iraq, African countries (Nigeria, Congo), Oman, Uzbekistan, Afghanistan, Nepal, and Bangladesh.

The hospital provides:

- Various Regional Translators such as Arabic, Persian, Iraqi, Bangladeshi and Russian (In house interpreter).
- Assistance in ground transportation such as finding a shuttle, hiring a car or choosing any other mode of transportation within the city.
- Relationship Managers, who closely work with over 50 Diplomatic Missions and numerous Expat bodies to ensure that international patients have a comfortable and memorable stay in India.

Staffing:

