

1. INTRODUCTION

Cloudnine group of hospitals is India's leading chain of women, childcare and fertility (IVF) hospital. Cloudnine Hospital was founded by Dr. Kishore Kumar (a Neonatologist and an Executive Director) and Mr. Rohit MA (Executive Director) in the year 2007. Cloudnine Hospital, Noida was founded in the year 2018. It is a 50 bedded-hospital equipped with all the facilities.

4. OBJECTIVE

To observe and analyze the waiting time in Radiology Department for obstetrics and gynecology.

5. METHADODOLOGY

- An observational study was done on the patient flow in the Radiology Department for specifically Obstetrics and gynecology.
- The patients were observed and tracked during the whole process of scanning that is from entering into the hospital to checking out from the hospital.
- Time taken during each process were noted down to analyze the reasons for the waiting time.

6. THEORETICAL KNOWLEDGE VS PRACTICAL EXPOSURE

- Theoretical knowledge made me understand about the core concept of operations and its dimensions and coordination required for the distribution of the health services.
- Practical Knowledge provided an exposure and experience for the whole process and how it is made into action for implementation and getting the desired result.

7. SWOT ANALYSIS

STRENGTH	WEAKNESS
There are in total 6 radiologists and all of them could perform all sort of scans and fetal medicine (fetal echo) can also be done here by the radiologists.	IPD patients and OT cases come together with the booked time slots of the radiologists or with the pre-appointed patients.
OPPORTUNITY	THREAT
Being a single specialty maternity hospital, it is convenient for patient to get every maternal care possible under one roof as there is no single specialty or maternity hospital nearby.	Since almost all the Radiologists and Gynecologists also have their own clinics, patients have the option to move there as well.

8. CHALLENGES

Difficult to collect data for waiting time by observation since each patient is booked with different radiologists, and they come out at different time depending upon the time taken for the scan to be done.

9. LEARNINGS

- Learned about the process flow in OPD.
- Got to know about insights that how each step in the process flow is carried out to deliver the desired services.

10. USEFULNESS

- Got the practical exposure to the theoretical knowledge about the hospital and their management system.
- Internship enhanced the learning process.
- Building up the professional network.

15. SUGGESTIONS

- Slots could be made according to the time duration of the procedure or the scan.
- Prior- Information of the delay - If patients are pre-informed about the delay of the procedure, patients could come accordingly as it is difficult for the pregnant women to wait for a long time.

2. VISION

The Organization's aim is the pursuit of excellence in providing the best maternal and neonatal care by setting higher standards for ourselves and striving constantly to achieve them.

3. MISSION

To be the kind of leader in the space of women and health that India has not witnessed yet, by providing premier quality healthcare to women and children.



11. SCANS BEING CONDUCTED

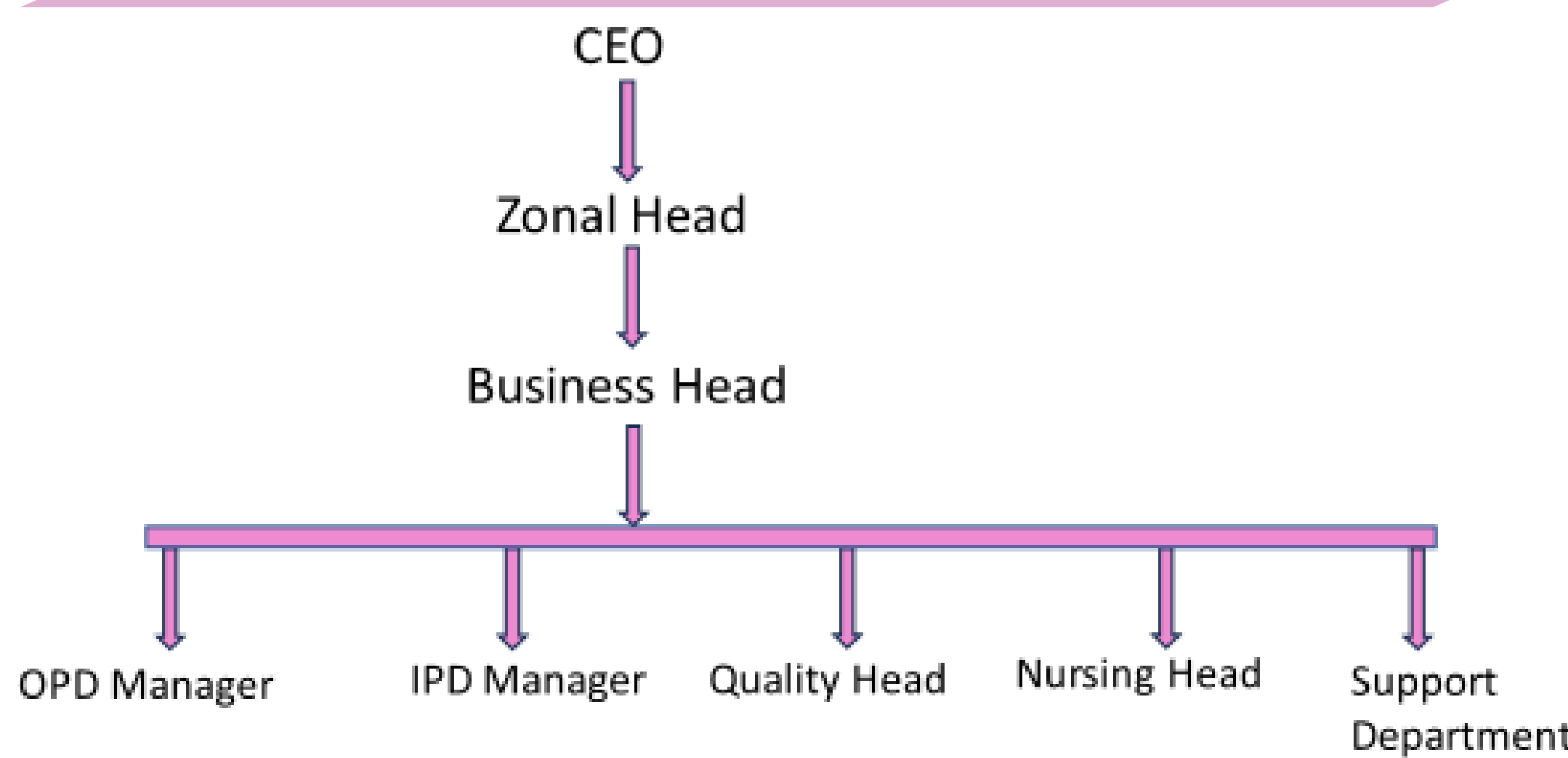
Total Scans covered under pregnancy-

- Early Pregnancy Scan/Dating Scan/ Viability Scan (7th - 12th week)
- Ultrasound Single Pregnancy Doppler 2D (35 weeks)
- Ultrasound Growth Scan Single 2D (after 21week)
- Ultrasound Single Pregnancy Level I/Nuchal Fold Detail 2D (11-13 week)
- Ultrasound Level II/Anomaly Single Gestation 2D. (18-22 week)
- Ultrasound Cervical Screening (19-26 week)
- Screening for AFI (20-35 week)

Scans covered under Trimester 2nd & 3rd-

- Ultrasound Single Pregnancy Doppler 2D.
- Ultrasound Growth Scan Single 2D.
- Screening for AFI.
- Ultrasound Level II/Anomaly Single gestation 2D.
- Ultrasound Cervical Screening.

12. ORGANISATIONAL STRUCTURE



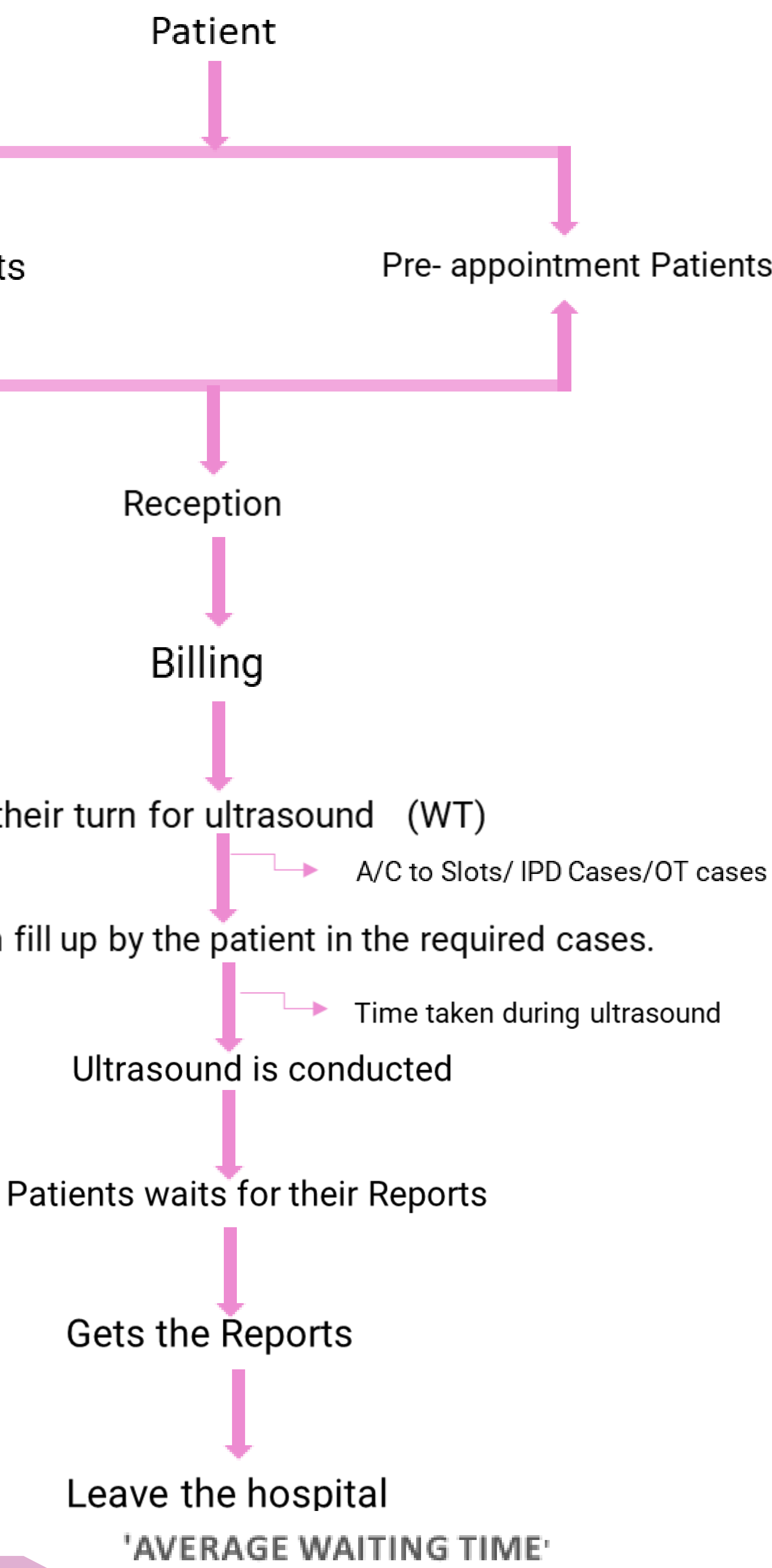
14. CONCLUSION

- To reduce waiting time –**
- Patients should be encouraged more to make pre-appointments..
- Also, by taking appointments through online mode can save their time for their billing process.
- Reminding patients, a day prior to the scheduled appointment so that they report on time.
- Patients can be counselled about the time duration of the procedure and if there is an emergency case or OT case of the doctor, they could be shifted to the other available doctor.
- Different slot timings for IPD patients.

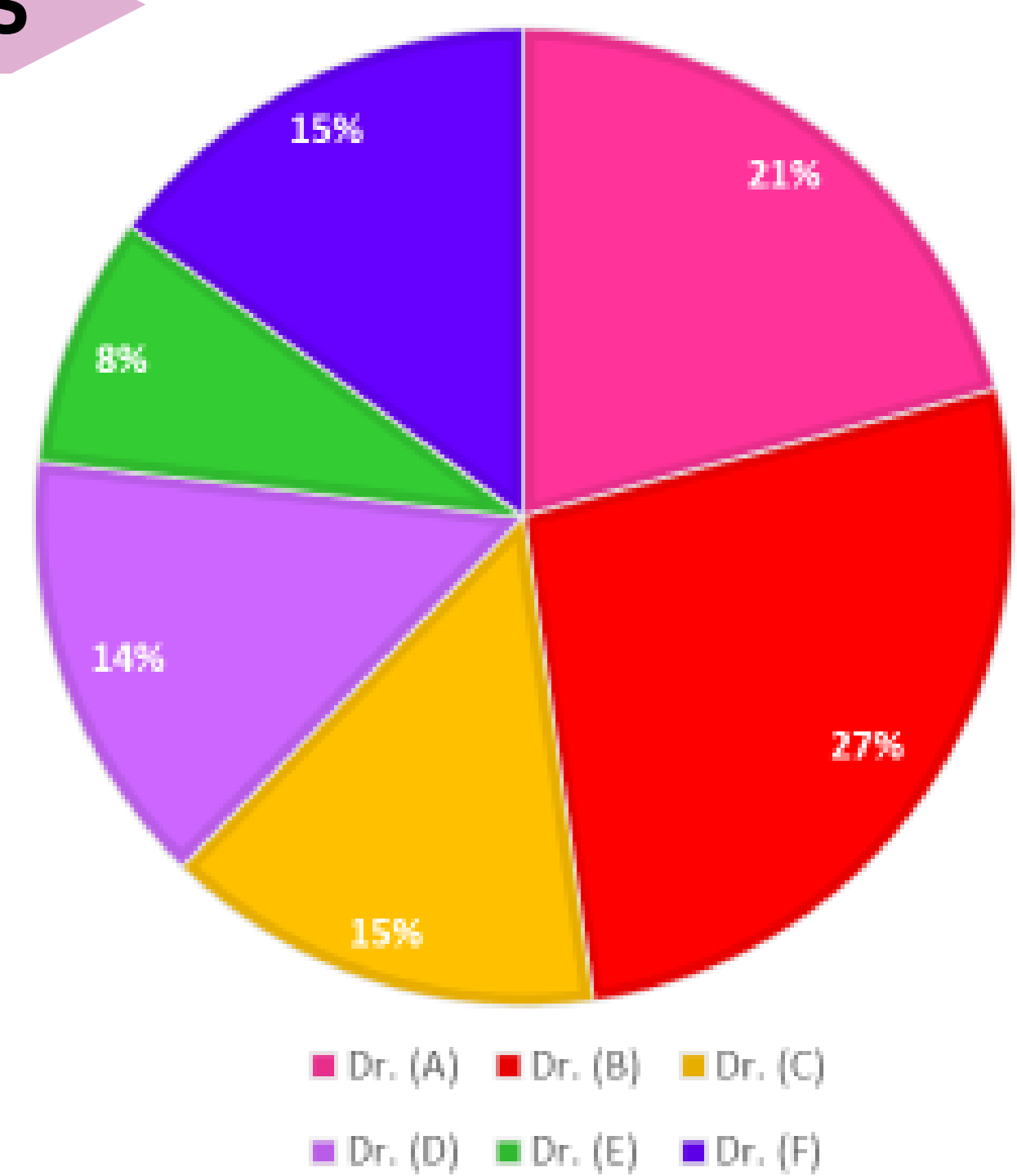
13. ANALYSIS

Lead Time – Time taken during the whole process.

13. ANALYSIS



'AVERAGE WAITING TIME'



FISHBONE/ ISHIKAWA DIAGRAM – REASONS FOR WAITING TIME IN RADIOLOGY DEPARTMENT FOR OBSTETRICS AND GYNAECOLOGY

