

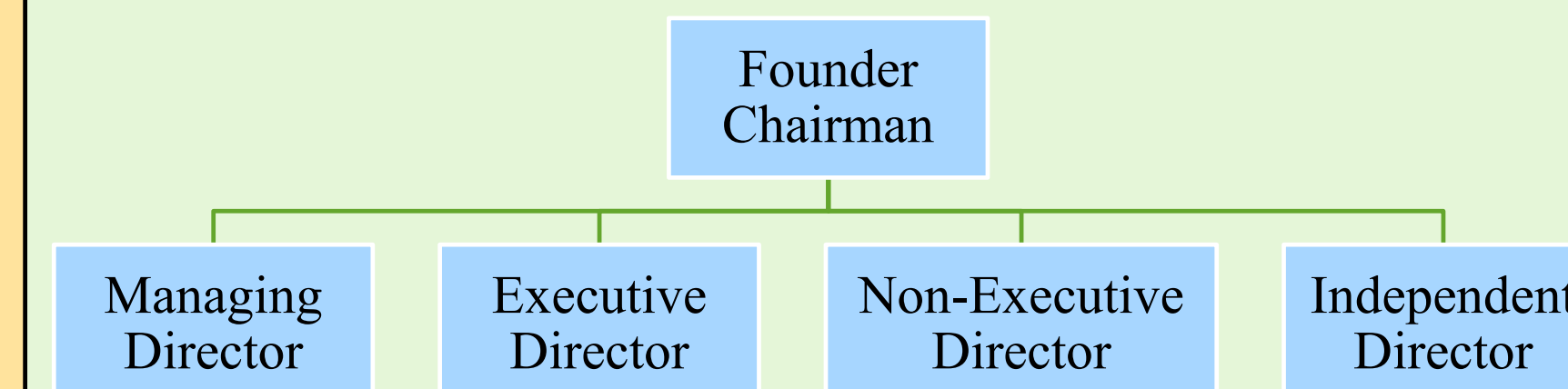
PROFILE

Dr. Habil Khorakiwala founded Wockhardt Hospitals on 28 August 1991 under the companies Act, 1956. Wockhardt Ltd is India's 5th largest pharmaceutical and healthcare company. Hospitals under Wockhardt group are NABH accredited. Wockhardt hospital in Mumbai is a tertiary super speciality healthcare service provider and it is India's first heart hospital to achieve ISO 9002 certification

VISION : "Wockhardt Hospitals will strive with excellence to fulfil the needs of the community in its chosen field of medical treatment."

MISSION : "To serve and enrich the quality of life of patients suffering from diseases, through the efficient deployment of technology and human expertise, in a caring and nurturing environment with the greatest respect for human dignity and life."

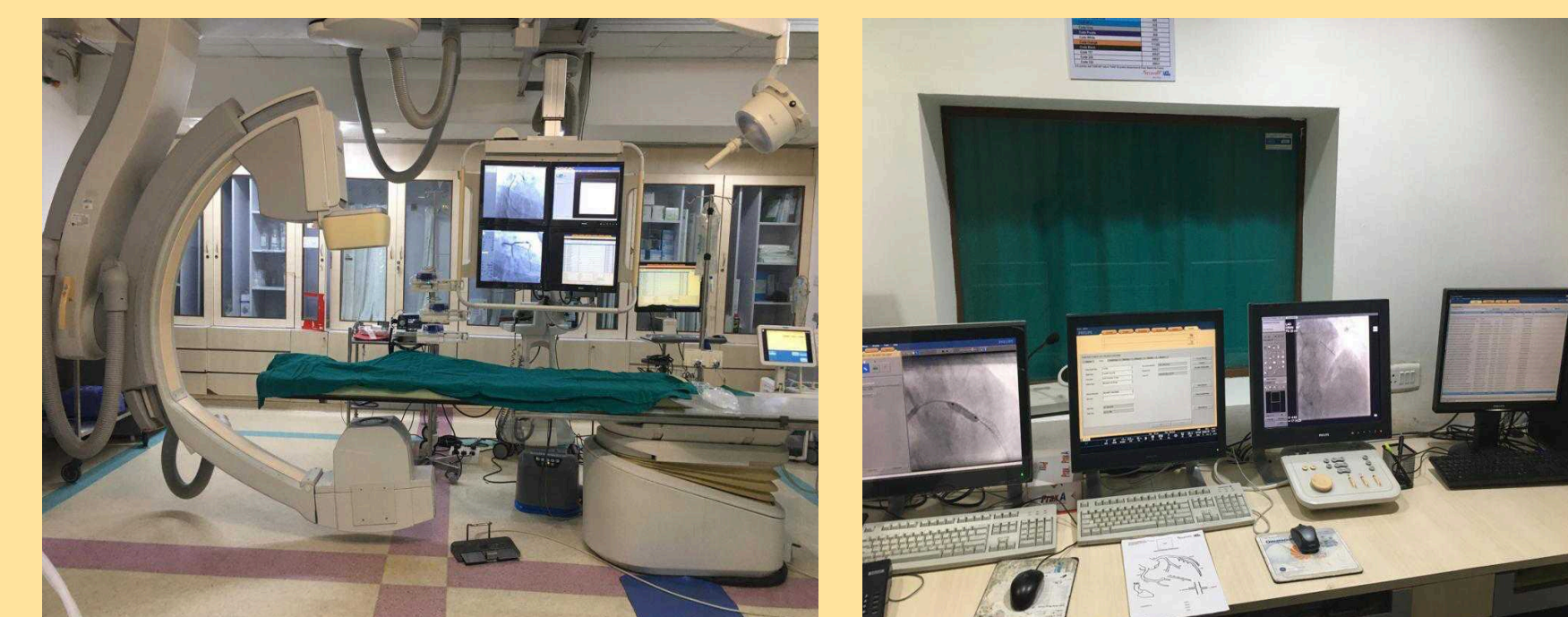
STRUCTURE :



CATH LAB

Catheterization lab, commonly known as a Cath lab, is an examination room in a hospital, clinic, or diagnostic center where several types of tests and procedures like ablation, angiogram, angioplasty, implantation of pacemakers, etc. are performed

Diagnostic imaging equipment used to visualize the arteries of the heart and the chambers of the heart and treat any stenosis or abnormality found



❑ **OBJECTIVE :** Streamline and reduce the delay of cases in Cath Lab (Real-Time Study).

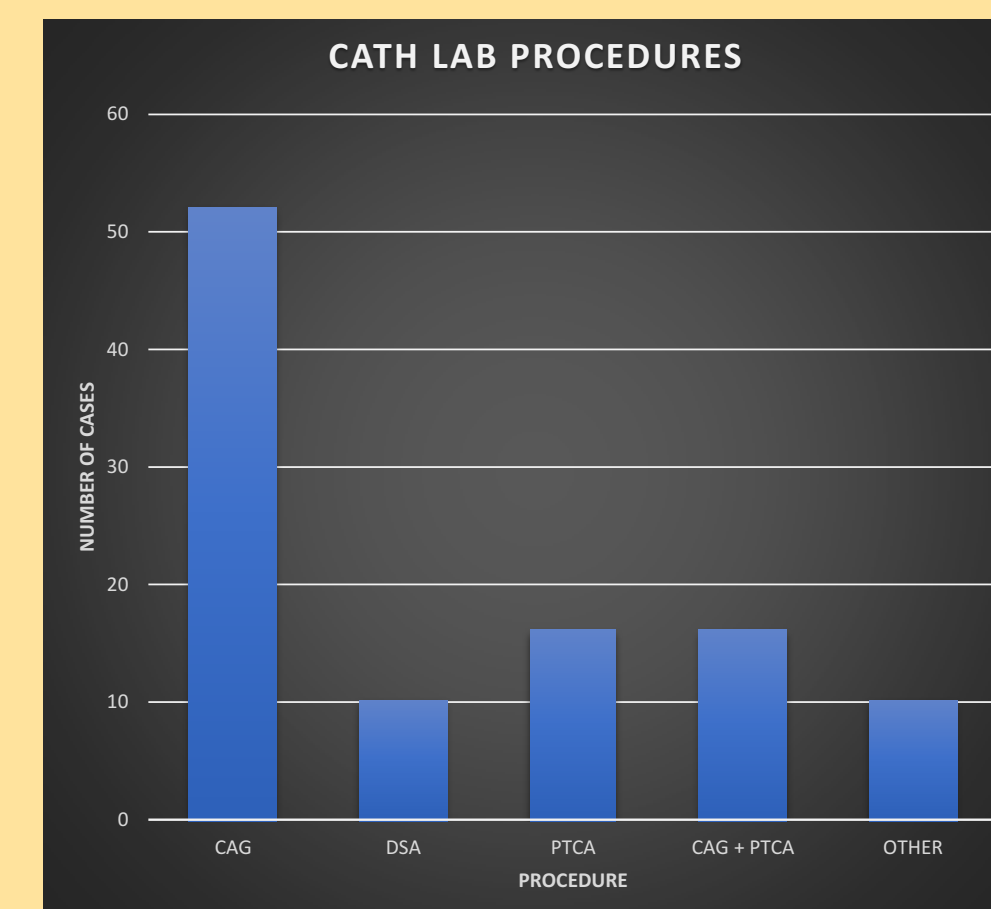
❑ **SAMPLE SIZE :** 104 Cases

❑ **STUDY DATE :** 20/04/2022 TO 25/05/2022

METHOD :

- MONITORING PHASE (41 CASES) : 20/04/2022 TO 05/05/2022
- APPLICATION PHASE (63 CASES) : 06/05/2022 TO 25/05/2022

CATH LAB PROCEDURES



❖ **TOTAL :** 104 Cases

❑ **CAG :** 52 Cases

❑ **PTCA :** 16 Cases

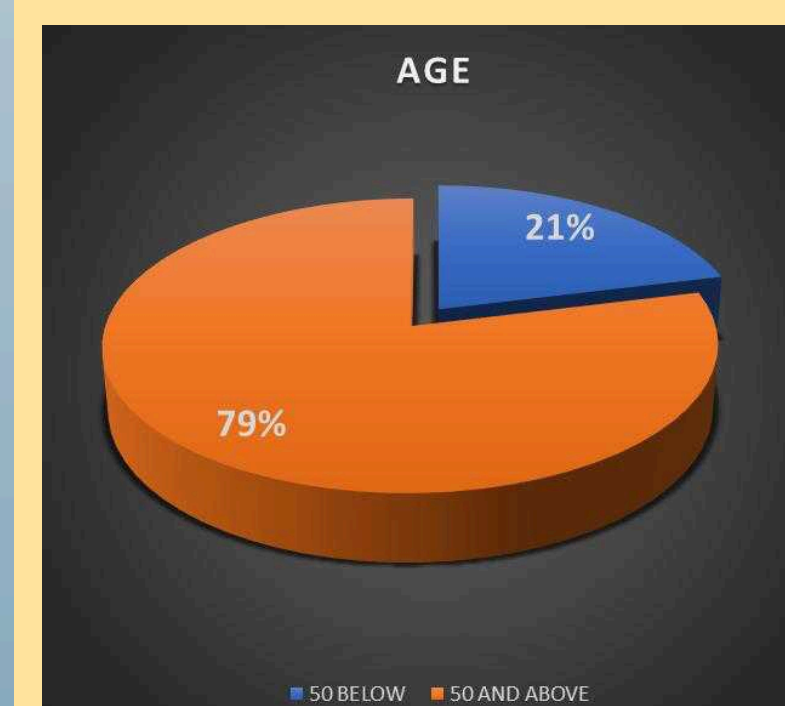
❑ **CAG + PTCA :** 16 Cases

❑ **DSA :** 10 Cases

❑ **OTHER :** 10 Cases

During the study period, it was evident that CAG was the most performed procedure in Cath lab followed by PTCA and DSA. LAB is equipped with competent team of medical staff and cutting-edge equipment to deal with any kind of the cardiac condition or an emergency.

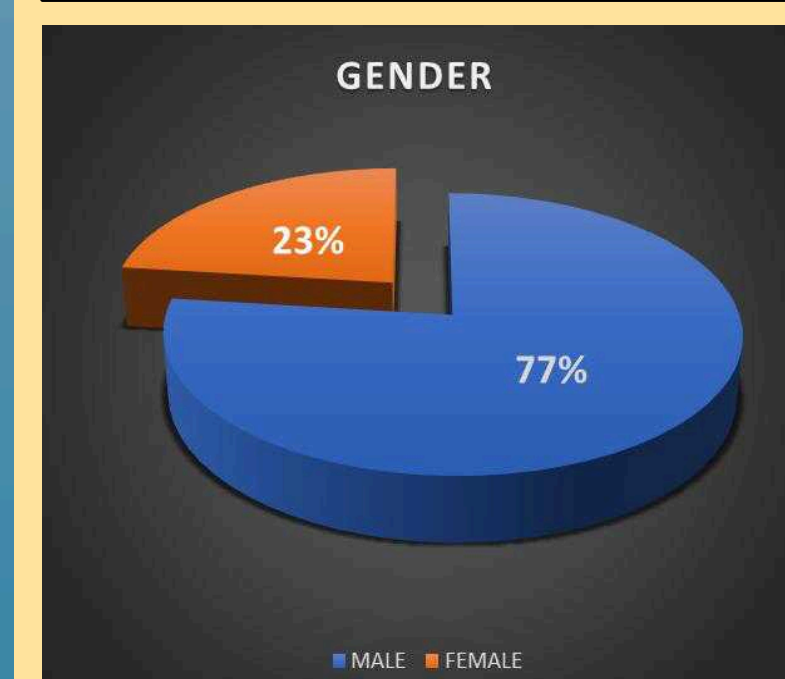
PATIENT AGE AND GENDER



❑ **50 YEARS BELOW :** 22 Cases

❑ **50 YEARS AND ABOVE :** 82 Cases

- Majority of cases was seen in patients 50 years and above
- This was suggestive that age acts as a risk factor
- Cases in younger patients indicated the changing pattern of CVS diseases
- In patients 50 years and above clinical symptoms were quite evident
- Stress was found as a common clinical factor in majority of the age groups

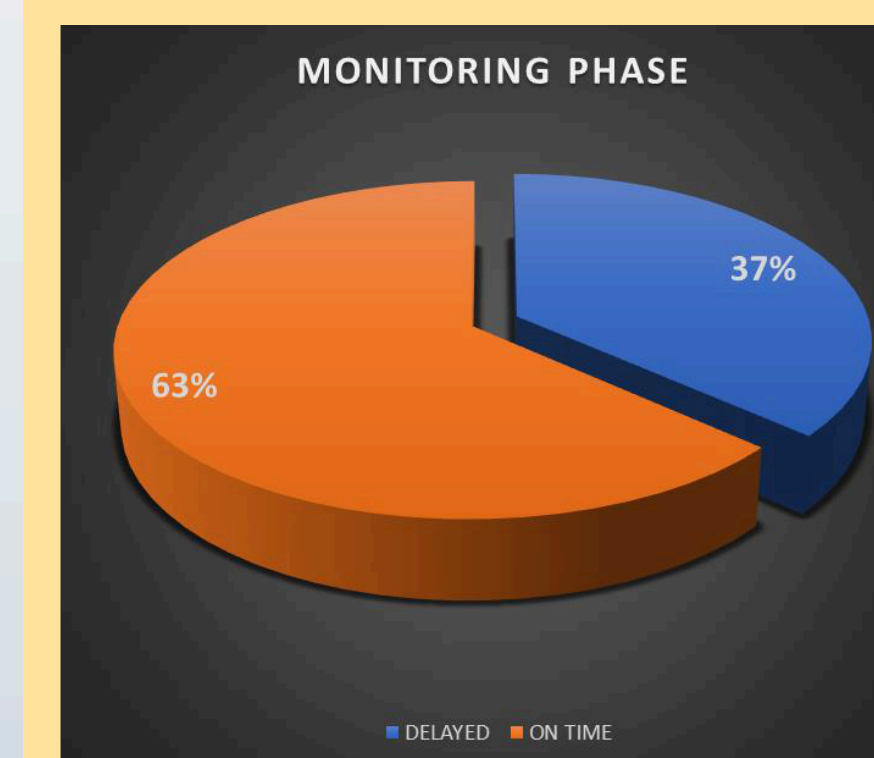


❑ **MALE :** 80 Cases

❑ **FEMALE :** 24 Cases

- Study shows that males were seen three times more affected as compared to females
- In majority of the cases smoking and alcohol were the key predisposing factors
- Modern and sedentary lifestyle are also a cause of concern

MONITORING AND APPLICATION PHASE



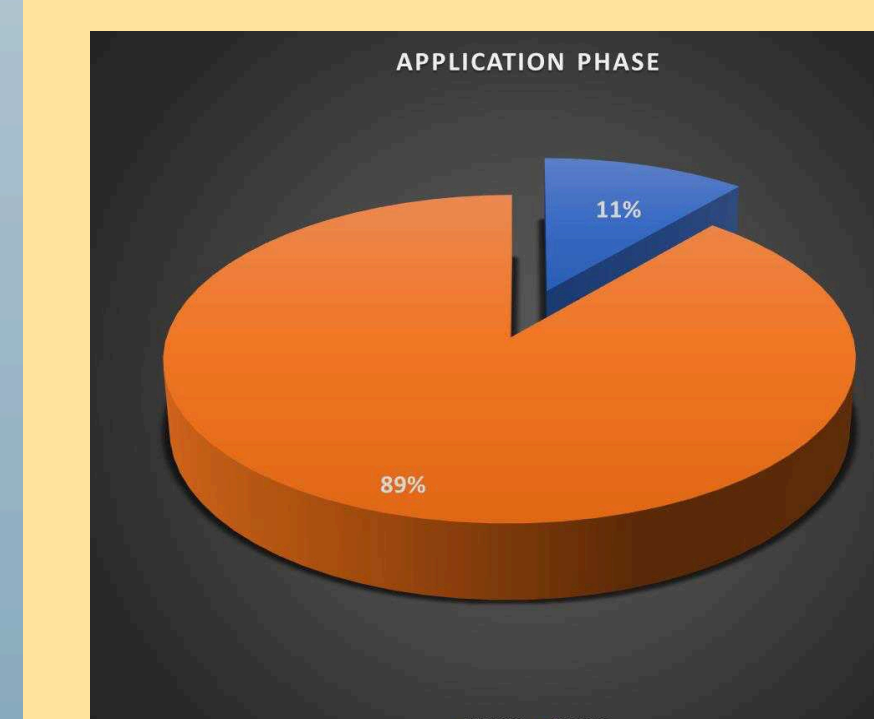
MONITORING PHASE

❖ **TOTAL :** 41 Cases

❑ **DELAYED :** 15 Cases

❑ **ON TIME :** 26 Cases

- Learned about the process and how the system works
- Determined the key elements of Cath Lab
- Understood the inter-relationship between the concerned departments
- Identified causes of delay and the areas that needed focus
- Cause for delay in majority of the cases were medical insurance approval and poor communication between the ward and CATH LAB



APPLICATION PHASE

❖ **TOTAL :** 63 Cases

❑ **DELAYED :** 7 Cases

❑ **ON TIME :** 56 Cases

During the study period, I managed to bring down the delayed cases in application phase as compared to the monitoring phase. This was done by:

- Continuous assessment of the process
- Identified the root cause of the delay and tried to resolve it
- Robust communication between departments played a vital role in achieving the result
- Collected feedback from CATH LAB team to understand the issues and implement the necessary changes

STEPS TAKEN TO REDUCE THE DELAY

- Developed an effective communication strategy between concerned departments
- Contacted ward and billing section regularly to get information about the patient availability
- Guided the patients for faster insurance clearance process
- Called the ward 20 minutes before the procedure to ensure all the pre-operative procedures were done
- Planned case schedules in advance to streamline procedures

LEARNING AND VALUE ADDITIONS

- Received hands-on experience of handling a hospital department
- Understood the objectives and strategy of managing a CATH LAB
- Learned to evaluate the risks and benefits of treating a patient
- Gained practical knowledge about the basics of the working system
- Have a good understanding of the functioning of different departments and how they work as a unit
- Understood the importance of patient education and effective communication
- Exposure to practical environment has boosted my confidence

SWOT ANALYSIS

S STRENGTH	W WEAKNESS	O OPPORTUNITY	T THREAT
▪ PAMI Ready (Within 90 minutes) ▪ NABH Accredited ▪ ISO 9002 Certification ▪ JCI Accreditation ▪ Cutting edge equipment ▪ Well trained staff	• Tedious paperwork • High staff turnover • Expensive treatment plan for patients without insurance	▪ Build on brand ▪ Expand the pool of cardiologist through networking ▪ Introduce cost effective treatment plan ▪ Patient retention through advocacy	▪ Independent CATH LAB units ▪ Overall rising cost associated with healthcare ▪ Delay in procedures

CHALLENGES

- Adjusting to a new working environment
- High levels of pressure due to a hectic schedule
- Preparing paperwork for patients for medical insurance clearance
- Developing a better communication between wards and CATH LAB
- Identifying the root cause for delays in patient treatment
- Working on simultaneous projects

SUGGESTIONS

- More attention needs to be given to CATH Lab
- Focus on retaining CATH Lab consultants
- Simplify and streamline case paperwork to increase productivity
- CATH Lab should be provided with an independent billing section
- Should have a fixed nursing and transport staff for CATH LAB
- Collaborate with voluntary / third sector organization to provide monetary support for patients from a disadvantaged background