

SUMMER INTERNSHIP PROGRAM

at



PSRI HOSPITAL

From May 6 to July 5 2024

A REPORT BY

Ms. Parthvee Singh

Master of Business Administration

Hospital and Health Management

2023-25

Under the mentorship of

Dr.Sandesh Kumar Sharma

Associate Professor



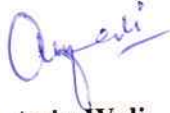
Date: 05.07.2024

INTERNSHIP COMPLETION CERTIFICATE

This is to certify that **Ms. Parthvee Singh** of 2023-25 batch of IIHMR university, Jaipur has done her summer internship with our organization from **06th May 2024 to 05th July 2024.**

The overall performance shown by her during the period was excellent.

This certificate is being issued to meet the requirements of the IIHMR University.



Dr. Anju Wali
Medical Director



Dr. Kaushalendra Pratap Singh
Deputy General Manager-Operations

IIHMR University Faculty Mentor Approval

This is to certify that Ms. Parthvee Singh of the academic year 2023-25 of the INSTITUTE OF HEALTH MANAGEMENT AND RESEARCH has prepared a poster with respect to his/her summer internship held during May-June 2023.

He /she has carried out work as per the guidelines. His / Her poster is approved for presentation.

Date: 23 JULY 2024



(Signature of Faculty Mentor)

Name: Dr. Sandesh Kumar Sharma

Designation: Associate professor

BRIEF HISTORY

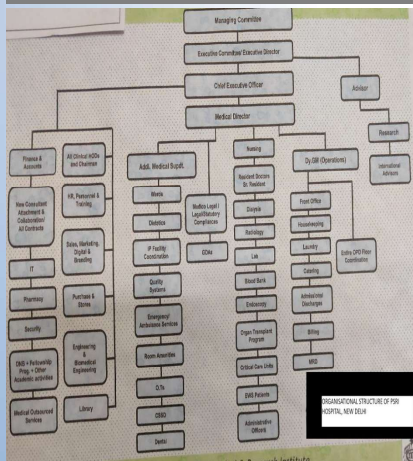
Pushpawati Singhania Research Institute (PSRI) Hospital in Delhi is a renowned multi-specialty healthcare institution established in 1996. Founded with the primary aim of offering specialized and advanced medical care, PSRI initially focused on nephrology, urology, and gastroenterology. Over the years, it has expanded its services to include cardiology, orthopedics, neurology, oncology, and various other specialties. The hospital is well-known for its state-of-the-art facilities, highly skilled medical professionals, and a patient-centric approach. PSRI continues to be a leading healthcare provider in India, committed to excellence in medical care and research.

MISSION & VISION

VISION- To achieve excellence in the health care delivery system through hard work and human touch.

MISSION- To help the ailing people through our chosen specialties. Devote ourselves to professional excellence through original research and academic activities. To work in a team to provide quality services at the most affordable cost.

ORGANOGRAM OF THE PSRI HOSPITAL



INTRODUCTION

In the dynamic healthcare industry, managing costs while ensuring high-quality patient care is paramount. Operating Theatre (OT) consumables represent a significant expense for hospitals. This internship project at PSRI Hospital aims to reduce OT consumable usage to boost profit margins without compromising care quality. By analyzing usage patterns, identifying wastage areas, and implementing optimization strategies, the project seeks to balance cost control with clinical excellence. Leveraging data-driven insights and inventory management best practices, this initiative aims to achieve substantial cost savings and improve the institution's financial health, contributing to sustainable and efficient healthcare delivery.

OBJECTIVES OF THE STUDY:-

- To analyze the consumables used by doctors during surgery
- To analyze the consumables items amount with profitability of hospital

METHODOLOGY:-

RESEARCH DESIGN

Observational perspective study.

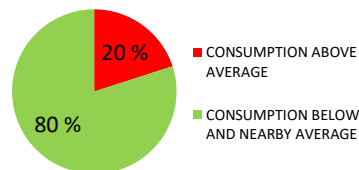
- TIME OF STUDY-** data was collected around the period in month of June.
- PLACE AND DURATION OF STUDY-** Operation theater of PSRI hospital.
- INCLUSION CRITERIA-** Laparoscopic cholecystectomy surgery.
- TYPE OF DATA-** Real time data based on observational studies.
- DATA COLLECTION METHOD-** Operation theater consumables list & Final consumable billing details from IPD billing.

KEY FINDINGS

Table of consumable amount and bill

PATIENT NUMBER	CONSUMABLE AMOUNT	FINAL BILL
1	38000	79572
2	36000	96906
3	23000	79907
4	23273	84978
5	18582	80621
6	25486	244828
7	22681	118893
8	22682	85398
9	24511	195258
10	23189	120966
11	19961	98378
12	30064	151871
13	23799	82729
14	25605	169545
15	19075	79485
AVERAGE	25060	117955

(By considering 10% of average consumable amount which is 2756 insights can be understood)



PERCENTAGE OF MEDICAL CONSUMPTION
OF LAPROSCOPIC CHOLECYSTECTOMY
SURGERY

- Percentage of criteria **RED** i.e. consumable amount exceeding from average amount is 20% (based on the patient condition and clinical reasons the consumable amount has been increased, surgery with consumable amount 38000,36000 was performed by TEAM A and surgery with consumable amount 30064, was performed by TEAM B)
- Percentage of criteria **GREEN** i.e. consumable amount lesser from average amount is 80%

SWOT ANALYSIS OF ORGANIZATION

STRENGTH

- Skilled health care professionals.
- Coordinator and support workers are available
- Good work culture.

WEAKNESS

- Longer waiting time in specific department.
- Shortage of staff.
- Less digitalization.

OPPORTUNITIES

- Cooperation with both private and public companies.
- Expansion of services.
- Establishing a great brand reputation.

THREATS

- Complex infrastructure of the hospital.
- Expensive charges for patients without panels.

LEARNING & VALUE ADDITION

- Learning about different type of departments.
- Understanding the OPD and IPD process.
- Team skilled work
- Understanding the working of OT.

THEORETICAL EXPOSURE V/S PRATICAL EXPSOURE

Theoretical knowledge at the university helped us understanding the fundamental concepts and principles about functioning of a hospital.

The practical exposure demonstrated how the knowledge learnt needs to be implemented in a specific hospital scenario

USEFULLNESS OF INTERNSHIP

- Corporate exposure.
- Patient interaction and experience.
- Proper exposure of the hospital and its functioning.

CHALLENGES FACED

- Limited period.
- More departments can be covered but due to confidentiality issues in organization, could not explore.

SUGGESTION

- Implement standardized surgical kits.
- System for monitoring material usage and providing feedback to surgical team.
- Regular review and update inventory to avoid under stocking.
- Use evidence based guidelines to determine essential material for surgery.



Compiled Report

Name of the Organisation: PSRI MULTI SPECIALITY HOSPITAL

Area/ Department/ Project of Summer Internship Program: OPERATIONS

Name of the Student: PARTHVEE SINGH

Roll no: 1777

Stream: HM-28

Activity Done	1. Visited and explored the hospital on the first day of joining. 2. I was allotted the Operations department for next 15 days currently working in IPD. 3. I was assigned under Ms Sunita (Floor incharge) by Dr Kulvinder (Asst. Medical Superintendent). 4. I was observing the day to day working and management with floor incharge. 5. I got a sound knowledge about NABH doctors booklet and their Guidelines. 6. Analysed various patient files and with necessary consent forms and documents which is maintained on daily basis. 7. I went for daily assessment round in morning regarding various services and patient reviews individually on daily basis. 8. Got the sound knowledge about hospital portal and there working. 9. Done entries for completed patient files which are to be send in Medical record department. 10. Got knowledge about IPD Discharge process, Dispensing process, Admission process and Initial assessment process.
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11. Observed the pre operative ward and post operative ward.
12. Patients are brought about 15-20 minutes prior in the pre operative ward and after the surgical procedure they are kept under observation for 1 hour in the post operative ward in this hospital.
13. Observed the centralised sterile supply department (CSSD).
14. Got familiar to various sterilization technique and different indicators used for sterilization.
15. Got an opportunity to observe a surgical process, preparation of OT, sign in, time out, and sign out process.
16. Got the sound knowledge about isolation rooms, ventilator, and patient monitoring.
17. Observed various machines and equipments used in ICU and OT.
18. Observed the various OT zones.
19. Collected the data of patient of cash and TPA discharge related to my project.
20. Observed the OPD registration in billing area and got knowledge about registration process and billing process.
21. Created some unique ID number of patients based on their registration while observing the registration process in registration and billing area.
22. Got knowledge about critical care alert which are provided by billing and registration area in this hospital.
23. Got more familiar to the discounts and allotments of room based on patient panel ,and Done some admissions process based on their documents.
24. Patient admitted in the hospital various modes of payment and their preferences. Got more knowledge about preparation of patient files their

	necessary documents required to patient to get ad 25. Observed the emergency department Got knowledge about medico legal report, their documentation and causes. 26. Observed the corporate desk admission procedure and TPA (Third party administrator) process in this week. 27. Got more familiar to undertaking forms and process performed when patient comes for admission in both TPA (Third party administrator) and Corporate panels. 28. TPA and Corporate areas have certain rules, regulations and forms which have to be signed before the admission. 29. Done some admissions under corporate area and file preparation. 30. Took some basic information form the patient and their attendant which is required to proceed the TPA process. 31. Observed the international patient admission process. 32. Got more familiar to forms and process performed when international patient comes for admission in hospital. 33. Filled some C forms of international patients. 34.Guided some patients about billing for OPD consultation. 35.Got more familiar to fit to fly forms. 36. Obseved the radiology and dialysis area in this week. 37. Got more familiar to forms and process performed when patient comes for diagnosis and dialysis procedures. 38. In dialysis area initial assessment form are filled after checking the vitals and then procedure is performed.
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	39. Reuse of filters and their forms are filled separately. 40. Observed the full dialysis procedure and got more knowledge about the fistula and parmacath which are made for the procedure of dialysis.
Linking theory (Classroom learning) with practice at your organisation	1. As we have studied various type of Ward system in classroom and here in PSRI there is no nightingale ward system and modified version of ward system is present. 2. Functioning of OPD is closely similar to what we have studied in classroom. 3. As we have studied various type of zones in OT in classroom and here in PSRI similar zones are present. 4. Functioning of OT and ICU is closely similar to what we have studied in classroom. 5. Functioning of CSSD department and there zones were similar to what we have studied in classroom. 6. The triage system which we have studied in the classroom are similar which is have observed in emergency area of PSRI hospital 7. Observed the various modes of admission of the patient in the hospital which we have studied in the classroom. 8. The utility services are similar as we have studied in classroom. 9. Others helping services such as laundry services and food and beverage services are quite similar

	as we have studied in the classroom. 10. The human resource management which we have studied in the classroom are quite similar as we have studied in the classroom. 11. Found the work culture and the problems which we have studied in the classroom are very much related in the hospital premises. 12. Working of HR department, and working of all other department are quite similar to what we have studied in the classroom.. 13. Roles of managers are similar as studied in the classroom. 14. The conflict management and other management areas are similar as we have studied in the classroom. 15. The cleaning and infection control protocols are similar as we have studied in classroom.
Gaps identified on the working area.	1. The Patient- Nurse ratio is needed to be improved, nurses are having more then 6 patients in general ward to look after which sometimes causes issue in proper management and patient satisfaction. 2. More digitalization is required for proper functioning of department as in some areas they have calling system and people are not timely available to respond to calls. 3. Many files of the patient are incomplete and they have been send to MRD, After few days files

are send back to the IPD for proper completion

4. As patients are sometimes not available at the slot or time period provided for surgical process creates a time gap, as OT is ready for the process and waiting for the patient.

5. As in OPD registration area many times i have observed that patients are very much confused about the process from registration to getting admitted in the hospital specially the patient above 50 years and patients with no attendant.

6. Sometimes when a serious patient comes into emergency staff are mainly focused on that patient if any patient comes with minor things such as for having injections etc they are told to wait outside for few minutes until the staff is free.

7. Lack of staff in both TPA and corporate desk was one of the major issues which i have observed which sometimes leads to serious management issue in both the area.

8. Dialysis area is very much crowded which might lead to serious infections.

9. The health information system in the hospital need to me more efficient.

10. In this hospital many procedures and made very complex for their execution alternate ways are there that can help to make process more easy going.

11. In TPA area every time when patient comes for dialysis they have to submit their documents again and again which is a very time consuming process and lead to delay in procedure.

12. The waiting time in radiology area for procedures are very much high on some days.

13. Most of the information in the hospital are written in English which may cause difficulty for the patient who are more comfortable with hindi.

14. Shortage of the staff is the major issue in various department of this organization.

Suggestions for improvement	1. The patient- nurse ratio can be maintained by recruiting more staff nurses, allocation of nurses in night shift also. 2. More digitalised process for functioning and management of department. 3. Recruiting staff for proper management of files on daily basis. 4. Informing the patient that they have to come 3-4 hours prior than the actual surgical process time so that all the necessary check-ups, consent forms can be completed and patient should be ready by the surgical procedure to avoid delay in procedure. 5. Arrow marks indicating the specific area of treatment can be made so that a direction can be provided to the patient to reach specific area and will reduce the confusion. 6. Separate desk can be allotted on registration area for old age and patient with no attendants to help people and guide them about the procedure. 7. More area and cabin can be allocated in dialysis zone it will help to control any infection.

PARTHVEE SINGH

Signature of the Student

Approved by the IIHMR University's Mentor

Weekly Report: 1

Name of the Organisation: PSRI MULTI SPECIALITY HOSPITAL, DELHI

Area/ Department/ Project of Summer Internship Program: IPD DEPARTMENT

Name of the Student: PARTHVEE SINGH

Roll no: 1777

Stream: MBA HOSPITAL AND HEALTH MANAGEMENT

Week no: 1

From: May 6, 2024 to May 11, 2024

Activity Done	1. Visited and explored the hospital on the first day of joining. 2. I was allotted the Operations department for next 15 days currently working in IPD. 3. I was assigned under Ms Sunita (Floor incharge) by Dr Kulvinder (Asst. Medical Superintendent). 4. I was observing the day to day working and management with floor incharge. 5. I got a sound knowledge about NABH doctors booklet and their Guidelines. 6. Analysed various patient files and with necessary consent forms and documents which is maintained on daily basis. 7. I went for daily assessment round in morning regarding various services and patient reviews individually on daily basis. 8. I got the sound knowledge about hospital portal and there working. 9. Done entries for completed patient files which are to be send in Medical record department. 10. Got knowledge about IPD Discharge process, Dispensing process, Admission process and Initial assessment process.
Linking theory (Classroom learning) with practice at your organisation	1. As we have studied various type of Ward system in classroom and here in PSRI there is no nightingale ward system and modified version of ward system is present. 2. Functioning of OPD is closely similar to what we have studied in classroom.
Gaps identified on the working area.	1. The Patient- Nurse ratio need to be improved , nurses are having more then 6 patients in general ward to look after which sometimes causes issue in proper management and patient satisfaction.

	2. More digitalization is required for proper functioning of department as in some areas they have calling system and people are not timely available to respond to calls. 3. Some files of the patient are incomplete and they have been send to MRD, After few days files are send back to the IPD for proper completion.
Suggestions for improvement	1. The patient- nurse ratio can be maintained by recruiting more staff nurses, allocation of nurses in night shift also. 2. More digitalised process for functioning and management of department. 3. Recruiting staff for proper management of files on daily basis.
Plan for the next week	1. Looking forward to observe OT and ICU department their functioning and management. 2. Looking forward to work on a project related to Inpatient Department.



Signature of the Student

Approved by the IIHMR University's Mentor

Weekly Report: 2

Name of the Organisation: PSRI MULTI SPECIALITY HOSPITAL, DELHI

Area/ Department/ Project of Summer Internship Program: IPD DEPARTMENT

Name of the Student: PARTHVEE SINGH

Roll no: 1777

Stream: MBA HOSPITAL AND HEALTH MANAGEMENT

Week no: 2

From: May 13, 2024 to May 19, 2024

Activity Done	1. I was allotted the operation theatre for the initial three days. 2. Observed the various OT zones. 3. Observed the pre operative ward and post operative ward. 4. Patients are brought about 15-20 minutes prior in the pre operative ward and after the surgical procedure they are kept under observation for 1 hour in the post operative ward in this hospital. 5. Observed the centralised sterile supply department (CSSD). 6. Got familiar to various sterilization technique and different indicators used for sterilization. 7. Got an opportunity to observe a surgical process, preparation of OT, sign in, time out, and sign out process. 8. Observed the ICU for next 3 days. 9. Got the sound knowledge about isolation rooms, ventilator, and patient monitoring. 10. Observed various machines and equipments used in ICU and OT.
Linking theory (Classroom learning) with practice at your organisation	1. As we have studied various type of zones in OT in classroom and here in PSRI similar zones are present.

	2. Functioning of OT and ICU is closely similar to what we have studied in classroom. 3. Functioning of CSSD department and there zones were similar to what we have studied in classroom.
Gaps identified on the working area.	1. The Patient- Nurse ratio needs to be improved in OT and ICU, nurses are having more than 2-3 patients to look after in this area also. 2. As patients are sometimes not available at the slot or time period provided for surgical process creates a time gap, as OT is ready for the process and waiting for the patient.
Suggestions for improvement	1. The patient- nurse ratio can be maintained by recruiting more staff nurses 2. Informing the patient that they have to come 3-4 hours prior than the actual surgical process time so that all the necessary check-ups, consent forms can be completed and patient should be ready by the surgical procedure timing.
Plan for the next week	1. Looking forward to observe ICU and Dialysis department their functioning and management. 2. Working on a project related to IPD department.

Output:

Signature of the Student

Approved by the IIHMR University's Mentor

Weekly Report: 3

Name of the Organisation: PSRI MULTI SPECIALITY HOSPITAL, DELHI

Area/ Department/ Project of Summer Internship Program: IPD DEPARTMENT

Name of the Student: PARTHVEE SINGH

Roll no: 1777

Stream: MBA HOSPITAL AND HEALTH MANAGEMENT

Week no: 3

From: May 20, 2024 to May 25, 2024

Activity Done	1. Collected the data of patient of cash and TPA discharge related to my project. 2. Observed the OPD registration in billing area and got knowledge about registration process and billing process. 3. I was observing the day to day working and management of OPD registrations.
Linking theory (Classroom learning) with practice at your organisation	1. Functioning of OPD is closely similar to what we have studied in classroom.
Gaps identified on the working	1. No gaps identified yet currently observing the process only.

area.	
Suggestions for improvement	1. Need more staff for managing the registration of OPD patients.
Plan for the next week	1. Looking forward to observe more processes of OPD



Signature of the Student

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Weekly Report: 4

Name of the Organisation: PSRI MULTI SPECIALITY HOSPITAL, DELHI

Area/ Department/ Project of Summer Internship Program: IPD DEPARTMENT

Name of the Student: PARTHVEE SINGH

Roll no: 1777

Stream: MBA HOSPITAL AND HEALTH MANAGEMENT

Week no: 4

From: May 27, 2024 to June 2, 2024

Activity Done

4. Created some unique ID number of patients based on their registration while observing the registration process in registration and billing area.
5. Got knowledge about critical care alert which are provided by billing and registration area in this hospital.
6. I was allotted in OPD admission area in this week.
7. Observed all the necessary documentation required for the admission procedure.
8. Got more familiar to the discounts and allotments of room based on patient panel ,vaDone some admissions process based on their documents.
9. Got more knowledge about preparation of patient files their necessary documents required to patient to get admitted in the hospital.rious modes of payment and their preferences.

Linking theory (Classroom learning) with practice at your organisation	1. Functioning of OPD is closely similar to what we have studied in classroom.
Gaps identified on the working area.	1. As in OPD registration area many times i have observed that patients are very much confused about the process from registration to getting admitted in the hospital specially the patient above 50 years and patients with no attendant. 2. That sometimes create issues and patients are not able to reach to their diagnostic area within the given period of time.
Suggestions for improvement	1. Arrow marks indicating the specific area of treatment can be made so that a direction can be provided to the patient to reach . 2. A separated desk can be allotted on registration area to with a person to help people and guide them about the procedure
Plan for the next week	1. Looking forward to work on international desk area by next week . 2. Looking forward to collect the data related to OPD project.



Signature of the Student

Approved by the IIHMR University's Mentor

Weekly Report: 5

Name of the Organisation: PSRI MULTI SPECIALITY HOSPITAL, DELHI

Area/ Department/ Project of Summer Internship Program: IPD DEPARTMENT

Name of the Student: PARTHVEE SINGH

Roll no: 1777

Stream: MBA HOSPITAL AND HEALTH MANAGEMENT

Week no: 5

From: June 3, 2024 to June 8, 2024

Activity Done	10. Started the week by collecting the data about OPD project. 11. Topic for the OPD project was patient waiting time in OPD in correlation with patient satisfaction and business of hospital. 12. Completed the project by end of the week. 13. Observed the emergency department simultaneously. 14. Got more familiar to consent forms and process performed when patient comes to the emergency area . 15. Got knowledge about medico legal report, their documentation and causes.
Linking theory (Classroom learning) with practice at your organisation	1. The triage system which we have studied in the classroom are similar which is have observed in emergency area of PSRI hospital.
Gaps identified on the working area.	3. Patient nurse ratio can be more improved in emergency department. 4. Sometimes when a serious patient comes into emergency staff are mainly focused on that patient if any patient comes with minor things such as for having injections etc they are told to wait

	outside for few minutes until the staff is free.
Suggestions for improvement	3. The patient- nurse ratio can be maintained by recruiting more staff nurses, allocation of more nurses in night shift also. 4. Staff for the patient with minor things can also be allocated on daily basis.
Plan for the next week	3. Looking forward to observe TPA and corporate area of the hospital. 4. I will start working on next project related to OT by next



Signature of the Student

Approved by the IIHMR University's Mentor

Weekly Report: 6

Name of the Organisation: PSRI MULTI SPECIALITY HOSPITAL, DELHI

Area/ Department/ Project of Summer Internship Program: IPD DEPARTMENT

Name of the Student: PARTHVEE SINGH

Roll no: 1777

Stream: MBA HOSPITAL AND HEALTH MANAGEMENT

Week no: 6

From: June 10, 2024 to June 15, 2024

Activity Done	16. Started the week by collecting the data about OT project. 17. Observed the corporate desk admission procedure and TPA (Third party administrator) process in this week. 18. Got more familiar to undertaking forms and process performed when patient comes for admission in both TPA (Third party administrator) and Corporate panels. 19. Both the areas have certain rules, regulations and forms which have to be signed before the admission. 20. Done some admissions under corporate area and file preparation . 21. Took some basic information form the patient and their attendant which is required to proceed the TPA process.
Linking theory (Classroom learning) with practice at your organisation	1. Observed the various modes of admission of the patient in the hospital which we have studied in the classroom.
Gaps identified on the working area.	5. Lack of staff in both TPA and corporate desk was one of the major issues which i have observed. 6. Which sometimes leads to serious management issue in both the area.

Suggestions for improvement	5. By recruiting more staff in both TPA and corporate desk area will have to resolve the management issues.
Plan for the next week	5. Looking forward to observe international patient handling area and radiology area of the hospital. 6. Continue to work on OT project



Signature of the Student

Approved by the IIHMR University's Mentor

Weekly Report: 7

Name of the Organisation: PSRI MULTI SPECIALITY HOSPITAL, DELHI

Area/ Department/ Project of Summer Internship Program: IPD DEPARTMENT

Name of the Student: PARTHVEE SINGH

Roll no: 1777

Stream: MBA HOSPITAL AND HEALTH MANAGEMENT

Week no: 7

From: June 17, 2024 to June 22, 2024

Activity Done	22. Started the week by collecting the data about OT project. 23. Observed the international process in this week. 24. Got more familiar to forms and process performed when international patient comes for admission in hospital. 25. International lounge have certain rules, regulations and forms which have to be signed before the admission. 26. Filled some C forms of international patients. 27. Guided some patients about billing for OPD consultation. 28. Got more familiar to fit to fly forms.
Linking theory (Classroom learning) with practice at your organisation	1. The utility services are similar as we have studied in classroom.
Gaps identified on the working area.	7. More staff can be required in this area if international patient admissions are more some days.

Suggestions for improvement	6. By recruiting more staff in international area will help to resolve the management issues.
Plan for the next week	7. Looking forward to observe radiology and dialysis area of the hospital. 8. Continue to work on OT project .



Signature of the Student

Approved by the IIMMR University's Mentor

Weekly Report: 8

Name of the Organisation: PSRI MULTI SPECIALITY HOSPITAL, DELHI

Area/ Department/ Project of Summer Internship Program: IPD DEPARTMENT

Name of the Student: PARTHVEE SINGH

Roll no: 1777

Stream: MBA HOSPITAL AND HEALTH MANAGEMENT

Week no: 8

From: June 24, 2024 to June 29, 2024

Activity Done	1. Started the week by collecting the data about OT project. 2. Obseved the radiology and dialysis area in this week. 3. Got more familiar to forms and process performed when patient comes for diagnosis and dialysis procedures. 4. Various type of consent forms are to be signed before the procedure. 5. In dialysis area initial assessment form are filled after checking the vitals and then procedure is performed. 6. Reuse of filters and their forms are filled separately .
Linking theory (Classroom learning) with practice at your organisation	1. The utility services are similar as we have studied in classroom.
Gaps identified on the working area.	1. Dialysis area is very much crowded which might lead to serious infections .
Suggestions for improvement	1. More area and cabin can be allocated it will help to control any infection.
Plan for the next week	1. Looking forward to observe more utility services area of the hospital. 2. Continue to work on OT project .



Signature of the Student

Approved by the IIHMR University's Mentor

