

DISSERTATION SYNOPSIS

1. TITLE

Utilization of Lab and Scan Services by Out-Patient Department Cases at Cloudnine: A Study

2. INTRODUCTION

Background:

Hospitals increasingly face challenges not only in managing outpatient department (OPD) load but also in ensuring optimal retention of patients for in-house diagnostic services such as laboratory tests and scans. Patient leakage—when patients seek diagnostics outside the hospital—represents lost revenue and missed opportunities to streamline care. At Cloudnine, a leading maternity and women’s hospital, understanding and optimizing OPD flows and diagnostic service uptake is vital for improving operational performance and patient experience.

High OPD footfall does not always translate to proportional diagnostic revenue or continuity of care. By identifying patterns in patient drop-off after consultation and the underlying reasons for not opting for in-house diagnostics, the hospital can enhance patient retention, service satisfaction, and financial performance.

This study will help Cloudnine analyze current OPD patterns, understand leakage points in diagnostic recommendations, and design interventions to increase diagnostic service retention.

To explore the points at which patients discontinue their care journey during or after OPD consultations at Cloudnine, identify the underlying reasons for skipping diagnostic services, and understand the factors affecting continuity of care within the outpatient setting.

3. RESEARCH QUESTIONS:

- Do patients discontinue or skip recommended in-house lab and scan services?
- If Yes, at what points in the outpatient care journey they do?
- What are the key factors influencing their decisions?

4. OBJECTIVES

- To study the out-patients who availed in-house lab and scan services at Cloudnine
- To examine the factors that influence beneficiaries decisions behind discontinuing/

- skipping lab and scan services at the Cloudnine
- To suggest ways for increasing patient retention for in-house lab and scan services at Cloudnine.

5. MATERIAL AND METHODS

Study Design:

Retrospective study

Setting:

Cloudnine Hospital, Bangalore, focusing on OPD services and in-house diagnostics.

Study Population:

Primary respondents: OPD beneficiaries from the following departments:

Obstetrics,

Gynaecology, and

Paediatric care

a. Inclusion Criteria: OPD registration who received recommendations for in-house laboratory or scan tests during the study period.

b. Exclusion Criteria: Patients referred externally by necessity

Secondary respondents: Consultants and diagnostic service staff involved in the OPD workflow and patient referral process.

Study Tools: Hospital records of OPD registrations and lab and scan test recommendations

Duration of Study: 4 weeks (May 1 to 31' 2025)

Sample size: Total sample size- 180 patients

Scan records-100 patients

Lab records- 80 patients

Data Collection Procedure:

- Interaction with beneficiaries and staff
- Review of hospital data on referrals and test completions
- Tracking pathways from consultation to test completion

Operational Definitions:

- Patient inflow: The number of patients attending outpatient consultations within a given period.
- Patient Retention: The proportion of patients opting for in-house diagnostic services after recommendation.
- Patient Leakage: The proportion of patients referred for diagnostics who choose external facilities.

6. DATA ANALYSIS PLAN

- **Department-wise Comparison:** Evaluating retention and leakage rates across different specialties (e.g., Obstetrics, Gynaecology, Paediatric).
- **Statistical Tools:** Descriptive statistics (percentages, averages)

7. ETHICAL CONSIDERATIONS

Informed written consent will be obtained from all participants. Confidentiality of patient data will be maintained. Ethical clearance will be obtained from Cloudnine Hospital's Ethics Committee.

8. IMPLICATIONS OF RESEARCH

This study will provide Cloudnine with actionable insights into:

- Improving OPD-to-lab and scan test conversion rates
- Enhancing service delivery and hospital revenue
- Addressing operational bottlenecks in patient flow and test recommendation follow-through

9. REFERENCES

- Patel S, Kumar A, Singh R. Effectiveness of Communication and Patient Navigation in Improving Diagnostic Retention. J Health Serv Manag. 2022;28(3):145-152.
- Sharma P, Verma S, Gupta N. Diagnostic Service Retention in Indian Metropolitan OPDs: A Multi-Centre Survey. Indian J Public Health Res Dev. 2021;12(4):221-227.
- Bhatia R, Mehta K, Joshi L. Convenience Factors Influencing Diagnostic Service Choices Among OPD Patients. Asian J Health Policy Manag. 2020;6(2):88-94.
- Singh V, Gupta D. Impact of Cost and Pricing Models on Diagnostic Retention in OPD Settings. Int J Health Econ Manag. 2019;23(1):59-67.
- Joshi M, Rao S, Desai P. Operational Bottlenecks and Digital Solutions in Diagnostic Service Retention. J Med Syst Innov. 2017;15(1):33-39.
- <https://scholar.google.com/...>
- <https://journal.example.com/...>