SUMMER INTERNSHIP PROGRAM

at

TATA MEMORIAL HOSPITAL,MUMBAI

From 13th May 2025 to 11th July 2025

A Report By

Reba Mary Mathew

Master of Business Administration

Hospital and Healthcare Management - 29

(2049)

Under the Mentorship

Of

Dr. Sandesh Kumar Sharma

Associate Professor

IIHMR UNIVERSITY

टाटा स्मारक केंद्र
TATA MEMORIAL CENTRE
टाटा स्मारक अस्पताल
TATA MEMORIAL HOSPITAL
प. ऊ. वि.भारत सरकार का एक सहायता अनुदान प्राप्त संस्थान
A GRANT-IN-AID INSTITUTION OF THE DEPARTMENT OF ATOMIC ENERGY. GOVT OF INDIA

AA No. 1399052

[OFFICE OF THE DIRECTOR (ACADEMICS)]

INT/2025/1897 **11th July, 2025**

TO WHOMSOEVER IT MAY CONCERN

This is to certify that **Ms. Reba Mary Mathew** has Completed **Internship** in the Department of **Medical Administration** at Tata Memorial Centre for a period from **13.05.2025 to 11.07.2025.**

Banavali

PROF. S. D. BANAVALI
DIRECTOR (ACADEMICS), TMC

Dr. E. Borges Marg, Parel
Mumbai - 400 012. India.
Phone : +91-22-2417 7000
+91-22-6953 7300

डॉ. ई. बोर्जेस मार्ग, परेल,
मुंबई - ४०० ०१२. भारत.
दूरभाष : +९१-२२-२४१७ ७०००
+९१-२२-६९५३ ७३००

IIHMR University Faculty Mentor Approval

This is to certify that **Ms Reba Mary Mathew** of academic year 2024-26 of **Institute of Health Management Research** has prepared a poster with respect to her summer internship held during May-July 2025.

She has carried out work as per the guidelines. Her poster is approved for presentation.

Date: 28.07.2025

Dr. Sandesh Kumar Sharma

Associate Professor

TATA MEMORIAL HOSPITAL, MUMBAI

A grant-in-aid institution administered under the Department of Atomic Energy, Government of India.

Observational Study of Admission Process in the Hospital : Difficulties and Challenges Faced

REBA MARY MATHEW

MBA in Hospital and Healthcare Management
Roll No. 2049
Mentor: Dr. Sandesh Kumar Sharma

INTRODUCTION

Tata Memorial Hospital (TMH) in Mumbai is a leading cancer center renowned for its comprehensive cancer care, cutting-edge research, and extensive training programs. Established in 1941 by the Sir Dorabji Tata Trust, it has evolved into a major center for cancer treatment, education, and research, operating under the Department of Atomic Energy. TMH is a key component of the Tata Memorial Centre (TMC) and plays a vital role in India's national cancer control efforts.Tata Memorial Hospital (TMH) has a total of 700 beds.

The TMC umbrella includes at least 10 cancer institutes across India, the largest and the central hub of which is the Tata Memorial Hospital (TMH) in Parel, Mumbai, is India's oldest and largest cancer institute.

VISION

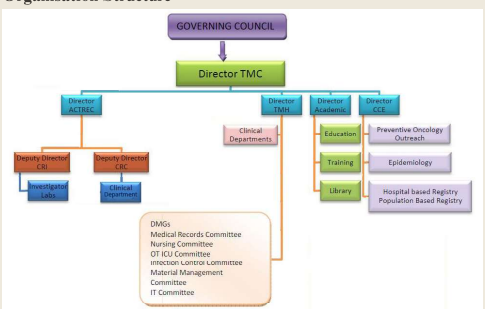
As the premier cancer center in the country, we will provide leadership in guiding the national policy and strategy for cancer care by:

- Promoting outstanding services through evidence based practice of oncology
- Commitment of imparting education in cancer to students, trainees, professionals, employees, and the public.
- Emphasizing on research that is affordable, innovative ,and relevant to the needs of the country

MISSION

The Tata Memorial Centre's mission is to provide comprehensive cancer care to one and all, through its motto of excellence in service, education and research.

Organisation Structure



Introduction to Admission Process in TATA

Objective:

- To observe each step of the hospital admission process
- To assess the effectiveness of existing admission protocols and suggest improvements to enhance patient experience.
- To identify the key difficulties and delays faced by patients and hospital staff during the admission process.

Methodology - An observational study was conducted at the admission desk

Samplig Technique - Convenient Sampling

Sample size - 180 patients

Inclusion Criteria - All patients for admission

Exclusion Criteria - All other OPD patients

Learnings during Internship

- Understanding the Workflow of the Admissions department in the hospital which is for surgery and other ward admissions.
- Streamlining the workflow with Doctor and admission office for easeness of the patients.
- Preference to patients given for room allotment.

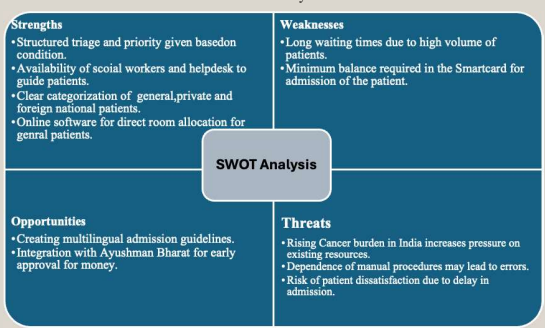
Results

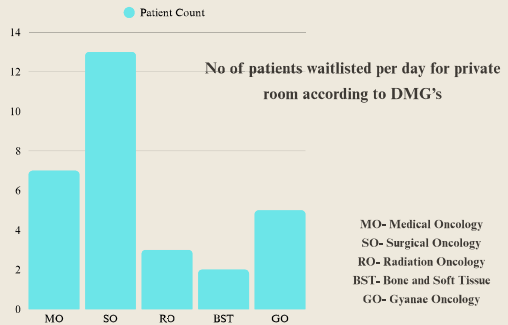
Practical Exposure and Theoretical Learning

-Theoretical knowledge provides a strong foundation in concepts, principles, and functions through coursework and lectures.

-Practical exposure focuses on communication, observation, and critical thinking, while theoretical understanding emphasizes knowledge acquisition and conceptual understanding

-Practical exposure to the struggles of the administration process and allocation of rooms as it is done manually.





Challenges Faced

1. Language barrier
2. Time consuming
3. Busy schedule of Administartion staff
4. Limited knowledge on various departments

Conclusion

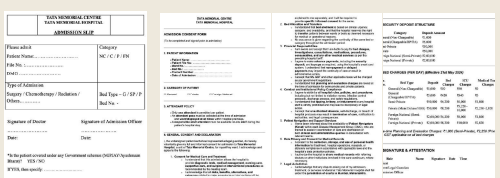
-The hospital admission process, while systematic in structure there are issues faced due to manual entry.

-Staff members, despite high patient volume, demonstrated a cooperative and patient-friendly attitude, helping guide patients through the process

-Efforts toward continuous improvement were observed, including the software update.

Suggestions

- A general Consent form for patients to be signed and verified by the admission officer also.
- An admission slip for doctors to fill details.
- Online software for room allocation of private patients.



Reporting Format (Weekly)

Name of the Organisation: TATA Memorial Hospital

Area/ Department/ Project of Summer Internship Program: Medical Administration

Name of the Student: Reba Mary Mathew

Roll no: 2049 **Stream:** Hospital and Healthcare Management

Week no: 01 **From:** 13/05/2025 **to** 17/05/2025

Activity Done	Conducted comprehensive observation across the whole TATA Memorial Hospital which included their five buildings - Homi Bhabha Block, Main Building, Annexe Building, Service Block and Golden Jubilee Building. Also observed the 11 active Disease Management Groups(DMG's) in the hospital. Noted the departments and different specialities on each floor and familiarized ourselves with clinical, diagnostic and administrative areas.
Linking theory (Classroom learning) with practice at your organisation	The theoretical knowledge from the subject of Essential of Hospital Services helped in the practical understanding of the different zoning in CSSD, layout and structure of various departments in the hospital with exit plans and ventilations.
Gaps identified on the working area.	Patient overcrowding in OPD
Suggestions for improvement	Better arrangement for seating in the waiting areas for patient and relatives.
Plan for the next week	Detailed orientation and working of each department.

Signature of the Student:

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: TATA Memorial Hospital

Area/ Department/ Project of Summer Internship Program: Medical Administration

Name of the Student: Reba Mary Mathew

Roll no: 2049 **Stream:** Hospital and Healthcare Management

Week no: 02 **From:** 19/05/2025 **to** 24/05/2025

Activity Done	A detailed orientation of all departments in the hospital for 3 days and followed by assisting in a research study, which hs data of around 449 patients availing MJPJAY Scheme to be updated and follow up of the current status for further analysis of the study.
Linking theory (Classroom learning) with practice at your organisation	Applied the knowledge from Reseach methods and Biostatistics to design protocol which includes data collection tools,sampling techniques and data analysis. .
Gaps identified on the working area.	Nil
Suggestions for improvement	Nil
Plan for the next week	Analysis of the collected and updated data for the study.

Signature of the Student:

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: TATA Memorial Hospital

Area/ Department/ Project of Summer Internship Program: Medical Administration

Name of the Student: Reba Mary Mathew

Roll no: 2049 **Stream:** Hospital and Healthcare Management

Week no: 03 **From:** 26/05/2025 **to** 31/05/2025

Activity Done	A collected data of 500 patients were given of two different government schemes MJPJAY and Ayushmaan Bharat was given to analyse. A work flow analysis between the both schemes were conducted to know the time gaps between authorization and claim submission time. A rough report on the topic including Aim,objective,data analysis,results and discussion was made.
Linking theory (Classroom learning) with practice at your organisation	The theoretical knowledge from the subject of Research methods helped in an easy understanding and analysis with report writing also. The use of excel for data interpretation and analysis for graphs or charts. The use of literature review and to easily find other research papers were easy.
Gaps identified on the working area.	As the data was collected by a previous intern student, could not make any changes or more specific questions. The data was not arranged properly.
Suggestions for improvement	A better framed questionnaire would have been easy to analyse for a better output.
Plan for the next week	To observe in the IP admission counter and how the allotment is given for each patients as the patient count is very high in the hospital and waiting list is always there. To create a form for patient admission in hospital for a surgery or any other complaints.

Signature of the Student:

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: TATA Memorial Hospital

Area/ Department/ Project of Summer Internship Program: Medical Administration

Name of the Student: Reba Mary Mathew

Roll no: 2049 **Stream:** Hospital and Healthcare Management

Week no: 04 **From:** 02/06/2025 **to** 07/06/2025

Activity Done	An Incident report of the hospital was given to conduct a root cause analysis of the situation using WHY analysis. An enquiry was done on the reported person and by whom, about the incident and how it has occurred. The report was made with 5 why questions and the gathered answers with preventive and corrective measures. Observation was done to see the admission process of the hospital for surgery and in-patient for further analysis.
Linking theory (Classroom learning) with practice at your organisation	Relating with the subjects Principles of Management and Human Resource Management, we can see the need of standard operating principles to be followed and regular training sessions to be conducted for the staff.
Gaps identified on the working area.	Lack of double check system, manual prescription to entry errors, delayed incident reporting process and no standard operating procedure followed in the OPD. While for admission process the bed allotment is completely done manually,
Suggestions for improvement	Regular training and sessions for staff on high alert medication protocols and attentive while entering prescriptions. Suggestion was given to digitize the bed allotment for easiness.
Plan for the next week	To form an outline of admission form for doctors to give to the patients in OPD as right now admission note is written in the case file.

Signature of the Student: R

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: TATA Memorial Hospital

Area/ Department/ Project of Summer Internship Program: Medical Administration

Name of the Student: Reba Mary Mathew

Roll no: 2049 **Stream:** Hospital and Healthcare Management

Week no: 05 **From:** 09/06/2025 **to** 14/06/2025

Activity Done	An Incident report of the hospital was given to conduct a root cause analysis of the situation using WHY analysis. An enquiry was done on the reported person and by whom, about the incident and how it has occurred. The report was made with 4 why questions and the gathered answers with preventive and corrective measures. Observation was done to see the admission process of the hospital for surgery and in-patient and made a sample consent form for admission. Data entry done for night report of inpatient count manually.
Linking theory (Classroom learning) with practice at your organisation	Relating with the subjects Principles of Management and Human Resource Management, we can see the need of standard operating principles to be followed and regular training sessions to be conducted for the staff.
Gaps identified on the working area.	No online system to see the total impatient count
Suggestions for improvement	Regular training and sessions for staff on usage of different pumps and materials for patients and also educating the patients also about the abnormalities they have to check for.
Plan for the next week	Working on a documentary as part of CSR activity for donations

Signature of the Student:

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: TATA Memorial Hospital

Area/ Department/ Project of Summer Internship Program: Medical Administration

Name of the Student: Reba Mary Mathew

Roll no: 2049 **Stream:** Hospital and Healthcare Management

Week no: 06 **From:** 16/06/2025 **to** 21/06/2025

Activity Done	• An Incident report of the hospital was given to conduct a root cause analysis of the situation using WHY analysis. An enquiry was done on the reported person and by whom, about the incident and how it has occurred. The report was made with 4 why questions and the gathered answers with preventive and corrective measures. • An Admission slip format for doctors was made and also a consent form format made and submitted for review. • Observation to see the process of the Minor OT Department. • Working with IT Department and Nursing Department to make their Night report all digitalised with a software.
Linking theory (Classroom learning) with practice at your organisation	Relating with the subjects Principles of Management and Human Resource Management, we can see the need of standard operating principles to be followed and regular training sessions to be conducted for the staff. Organisational behaviour has taught in giving essential feedback and team dynamics.
Gaps identified on the working area.	Limited staff training on SOPs, Patients have to revisit doctors for confirmation of admission process
Suggestions for improvement	• Regular training and sessions for staff on usage of different pumps according to their diagnosis and materials for patients and also educating the patients also about the abnormalities they have to check for. • Vendors should be notified of any faulty batches immediately and only validated suppliers should be procured. • More coordination among different departments is hospital.

Plan for the next week	Working on the software development to digitalize the nursing night report which is manually done by two night supervisors now.

Signature of the Student:

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: TATA Memorial Hospital

Area/ Department/ Project of Summer Internship Program: Medical Administration

Name of the Student: Reba Mary Mathew

Roll no: 2049 **Stream:** Hospital and Healthcare Management

Week no: 07 **From:** 23/06/2025 **to** 28/06/2025

Activity Done	• An Incident report of the hospital was given to conduct a root cause analysis of the situation using WHY analysis. An enquiry was done on the reported person and by whom, about the incident and how it has occurred. The report was made Why Analysis with 4 questions and the gathered answers with preventive and corrective measures. • The problems faced in Minor OT related to appointment, patient queries and call in time issues were resolved including software issues. • Daycare issues faced due to high patient count was discussed to be resolved.
Linking theory (Classroom learning) with practice at your organisation	Organisational behaviour has taught in giving essential feedback and team dynamics. Digital Health subject has given immense knowledge in how the need of digitalisation of manual records and how it will become easier for reference.
Gaps identified on the working area.	Limited staff training before new postings, Minor OT has a long patient calling time.
Suggestions for improvement	Training conducted at unit level to prevent all types of medication error. Emphasized move on vigilance while giving care to patients at the same time. Ensured double checking of name before administering the medicine.
Plan for the next week	Working on the software development to digitalize the nursing night report which is manually done by two night supervisors now.

Signature of the Student:

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: TATA Memorial Hospital

Area/ Department/ Project of Summer Internship Program: Medical Administration

Name of the Student: Reba Mary Mathew

Roll no: 2049 **Stream:** Hospital and Healthcare Management

Week no: 08 **From:** 30/06/2025 **to** 05/07/2025

Activity Done	• Conducted a meeting with the nursing In charge to see the indicators needed to digitalise the night report with all the needed details for the software. • Issues faced in the wheelchair allocation was given to observe and report. • Created a feedback form for patients on their experience of wheelchair use.
Linking theory (Classroom learning) with practice at your organisation	Essentials of Hospital services have given the knowledge is seeing what is very essential for the working of the hospital and what needs to be given the first preference. Coordination with the clinical and the other support services for smooth functioning.
Gaps identified on the working area.	Software not being updated timely for the better usage. Long time process in every department.
Suggestions for improvement	Implement automatic software update for checks and reminders. Staff training to report manually whenever software issues are faced.
Plan for the next week	To make a report for wheelchair format where with all the indicators daily report can be seen.

Signature of the Student:

Approved by the IIHMR University's Mentor

Reporting Format (Weekly)

Name of the Organisation: TATA Memorial Hospital

Area/ Department/ Project of Summer Internship Program: Medical Administration

Name of the Student: Reba Mary Mathew

Roll no: 2049 **Stream:** Hospital and Healthcare Management

Week no: 09 **From:** 07/07/2025 **to** 11/07/2025

Activity Done	• An Incident report of the hospital was given to conduct a root cause analysis of the situation using 5 WHY analysis. An enquiry was done on the reported person and by whom, about the incident and how it has occurred. The report was made with 5 why questions and respective answers with preventive and corrective measures. • Wheelchair Daily Report Format was made in excel for reference and to make a software from it. • An Excel Nursing night report of the RT ward for the Month of July,2025 was verified and entered.
Linking theory (Classroom learning) with practice at your organisation	Essentials of Hospital Services related with Incident report helps in understanding service delivery system and various administrative procedures, how the patient care connects to hospital coordination and service quality. Conducting enquiry to find who was involved in the incident to understand the human behaviour in workplace settings and the communication among them.
Gaps identified on the working area.	Vendors delay in reporting back with the issues faced with specific batches of the faulty equipment's.
Suggestions for improvement	Regular training sessions for staff on usage of different pumps and materials for patients and also educating the patients also about the abnormalities they have to be aware.
Plan for the next week	Nil

Signature of the Student:

Approved by the IIHMR University's Mentor

Compiled Reporting Format

Name of the Organization: TATA Memorial Hospital

Area/ Department/ Project of Summer Internship Program: Medical Administration

Name of the Student: Reba Mary MATHEW

Roll no: 2049 **Stream:** Hospital and Healthcare Management

Activity Done	• Conducted comprehensive observation across the entire TATA Memorial Hospital. • Covered five major buildings: Homi Bhabha Block, Main Building, Annexe Building, Service Block, and Golden Jubilee Building. • Observed the 11 active Disease Management Groups (DMGs) functioning in the hospital. • Noted the departments and various specialities located on each floor. • Familiarized with clinical, diagnostic, and administrative areas. • Attended a detailed orientation of all departments in the hospital for 3 days. • Assisted in a research study involving 449 patients availing the MJPJAY Scheme. • Updated patient data and conducted follow-up on their current status. • Contributed to further analysis of the ongoing research study. • Conducted a workflow analysis to compare both schemes. • Focused on identifying time gaps between authorization and claim submission. • Prepared a rough report including aim, objectives, data analysis, results, and discussion. • Received 5 incident reports from the hospital to conduct a root cause analysis using the 5 WHYs method. • Prepared a report with 5 WHY questions, their corresponding answers, and proposed preventive and corrective measures. • Observed the hospital's admission process for surgery and in-patient cases for further analysis. • Designed and submitted a new admission slip format for doctors and a consent form format for review. • Observed the operational process of the Minor OT Department.

	• Collaborated with the IT and Nursing Departments to digitalize their Night Report using software. • Resolved issues in the Minor OT related to appointments, patient queries, call-in time, and software problems. • Discussed and proposed solutions for daycare issues caused by high patient volume. • Conducted a meeting with the Nursing In-Charge to identify key indicators required for digitalizing the night report through software. • Observed and reported the issues faced in wheelchair allocation and created a patient feedback form to assess their experience of wheelchair use. • Created a Wheelchair Daily Report Format in Excel to be used as a reference for software development. • Verified and entered the Excel Nursing Night Report of the RT Ward for the month of July 2025
Linking theory (Classroom learning) with practice at your organization	• The subject Essentials of Hospital Services provided practical insights into hospital zoning, particularly in the CSSD, along with understanding the departmental layout, ventilation systems, and emergency exit planning. • earning from Essentials of Hospital Services was directly applicable while working with incident reports, helping to understand hospital service delivery systems, administrative procedures, and the role of interdepartmental coordination in patient care quality. • Research Methods and Biostatistics aided in designing study protocols, including data collection tools, sampling techniques, and methods for data analysis. • Theoretical knowledge from Research Methods enhanced the ability to interpret data using Excel, create meaningful visual representations like graphs and charts, and conduct literature reviews efficiently. • Subjects like Principles of Management and Human Resource Management highlighted the importance of implementing standard operating procedures (SOPs) and organizing regular training sessions to improve staff performance and ensure consistent service delivery.

	• Lessons from Organisational Behaviour were instrumental in understanding team dynamics, giving constructive feedback, and observing human behaviour in workplace settings, especially during incident-related enquiries. • The Digital Health subject provided valuable awareness about the transition from manual to digital systems, underlining how digitalization can streamline hospital record-keeping and make referencing easier.
Gaps identified on the working area.	• Patient overcrowding in OPD • As the data was collected by a previous intern student, could not make any changes or more specific questions. The data was not arranged properly. • Lack of double check system, manual prescription to entry errors, delayed incident reporting process and no standard operating procedure followed in the OPD. • For admission process the bed allotment is completely done manually. • No online system to see the total impatient count. • Limited staff training on SOPs • Patients have to revisit doctors for confirmation of admission process. • Limited staff training before new postings • Minor OT has a long patient calling time. • Software not being updated timely for the better usage • Vendors delay in reporting back with the issues faced with specific batches of the faulty equipment's.
Suggestions for improvement	• A better framed questionnaire for data collection would have been easy to analyse for a better output of the study conducted. • Regular training and sessions for staff on high alert medication protocols and attentive while entering prescriptions. • Suggestion was given to digitize the bed allotment for easiness. • Regular training and sessions for staff on usage of different pumps and materials for patients and also educating the patients also about the abnormalities they have to check for.

	• Vendors should be notified of any faulty batches immediately and only validated suppliers should be procured. • Training conducted at unit level to prevent all types of medication error. Emphasized move on vigilance while giving care to patients at the same time. Ensured double checking of name before administering the medicine.
Key Learnings	• This internship gave me genuine experience in translating what I learned in the classroom into real solutions. • I became more self-aware, recognized my strengths and learned to address my weaknesses with honesty and proactive effort. • Learned that clear, open communication and strong collaboration are essential for team success and professional growth. • Left the internship feeling confident and well-equipped, grateful for the mentorship and support, and ready to take on more responsibility in my career ahead.

Signature of the Student

Approved by the IIHMR University's Mentor

Forms Created and Submitted

	TATA MEMORIAL CENTRE TATA MEMORIAL HOSPITAL **ADMISSION SLIP**	

Please admit Patient Name:…… File No. :…… DMG :……	Category NC / C / P / FN
Type of Admission Surgery / Chemotherapy / Radiation / Others……	 Bed Type – G / SP / P Bed No. -

Signature of Doctor

……

Date:

Signature of Admission Officer

……

Date:

*Is the patient covered under any Government schemes (MJPJAY/Ayushmaan Bharat)? YES / NO

If YES, then specify: ……

TATA MEMORIAL CENTRE
TATA MEMORIAL HOSPITAL

ADMISSION CONSENT FORM

(To be completed and signed prior to admission)

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1. PATIENT INFORMATION

- **Patient Name**: ……..……
- **Patient File No.**: ……
- **Ward No.**: ……..
- **Bed No.**: ……..……
- **Contact Number**: ……
- **Date of Admission**: ……

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2. CATEGORY OF PATIENT

☐ General ☐ Private ☐ Foreign National

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3. ATTENDANT POLICY

- Only **one attendant** is permitted per patient.
- An **attendant pass** must be collected at the time of admission and **worn/displayed at all times** within hospital premises.
- A **responsible adult attendant** must be available on-site **24x7** during the patient's hospital stay.

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4. GENERAL CONSENT AND DECLARATION

I, the undersigned patient/authorized representative/legal guardian, do hereby voluntarily give my full and informed consent for admission to **Tata Memorial Hospital**, a unit of **Tata Memorial Centre**, for myself/my ward. I acknowledge and agree to the following:

1. **Consent for Medical Care and Treatment**
    - I understand that this admission allows the hospital to provide **diagnostic tests, medical management, nursing care, supportive care, and surgical or interventional procedures** as recommended by the treating team.
    - I acknowledge that all **risks, benefits, alternatives, and outcomes** related to major procedures or interventions will be

explained to me separately, and I will be required to provide **specific informed consent** for the same.

2. **Bed Allocation and Transfers**
    - I understand that **bed allotment** is based on clinical urgency, category, and availability, and that the hospital reserves the right to **transfer** patients between wards or beds as deemed necessary for medical or operational reasons.
    - No assurance is given regarding the continuity of the same bed or category throughout the admission period.
3. **Financial Responsibilities**
    - I am aware and accept that I am liable to pay for **bed charges, investigations, consultations, medications, procedures, consumables, and any other medical services** as per the prevailing hospital tariff.
    - I agree to make **advance payments**, including the **security deposit**, and **top-ups** as required, using the hospital's smart card system. I understand that **non-payment** or **delayed payments** may impact the continuity of care or result in administrative action.
    - I accept that **5% GST** and other applicable taxes will be charged as per government regulations.
    - I understand that **planning and evaluation charges** are levied at the time of admission for semi-private and private patients.
4. **Conduct and Institutional Policy Compliance**
    - I agree to abide by all **hospital rules, policies, and procedures**, including but not limited to visitation norms, infection control protocols, discharge process, and safety regulations.
    - I understand that **tipping, bribery, or inducement** to any hospital staff is strictly prohibited and may lead to disciplinary or legal action.
    - I accept that **unauthorized absence**, self-discharge, or breach of hospital protocols may result in **termination of care**, notification to authorities, and legal consequences.
5. **Patient Navigation and Support Services**
    - I have been informed about the availability of **Patient Navigators (Kevat)** within each Disease Management Group (DMG), who are trained to assist in coordination of care and clarification of both **clinical and administrative queries** in consultation with relevant teams.
6. **Data Privacy and Consent for Medical Records**
    - I consent to the **collection, storage, and use of personal health information** for treatment, hospital operations, research, or statutory compliance in accordance with applicable laws and the hospital's data protection policies.
    - I authorize the hospital to **share medical records** with referring doctors or other institutions involved in the care continuum, where necessary.
7. **Legal Jurisdiction**
    - I acknowledge that any dispute arising out of my admission, treatment, or services rendered at Tata Memorial Hospital shall fall under the **jurisdiction of courts in Mumbai, Maharashtra**.

5. SECURITY DEPOSIT STRUCTURE

Category	Deposit Amount
General (Non-Chargeable)	₹1,000
General (Chargeable/BP/TA)	₹5,000
Semi-Private	₹50,000
Private	₹50,000
Foreign National (Semi-Private)	₹2,00,000
Foreign National (Private)	₹2,00,000

6. BED CHARGES (PER DAY) *(Effective 21st May 2024)*

Sr. No.	Bed Type	Deposit	Bed Charges	ICU Charges	Medical Team Charges
1	General (Non-Chargeable)	₹1,000	₹50	₹90	₹0
2	General (Chargeable/BP/TA)	₹5,000	₹420	₹840	₹0
3	Semi-Private	₹50,000	₹4,200	₹6,000	₹1,800
4	Private (Main/Deluxe/HBB)	₹50,000	₹8,200	₹9,220–10,000	₹2,250–2,820
5	Foreign National (Semi-Private)	₹2,00,000	₹4,200	₹6,000	₹1,800
6	Foreign National (Private)	₹2,00,000	₹8,200	₹10,000	₹2,820

One-time Planning and Evaluation Charges: ₹1,800 (Semi-Private), ₹2,250 (Private)
5% GST applicable on all bed charges

7. SIGNATURE & ATTESTATION

Role	Name	Signature	Date	Time
Patient				
Parent/Legal Guardian				
Admission Officer				