SUMMER INTERNSHIP PROGRAM

at

MAX HOSPITAL, GURUGRAM

From May 12th, 2025 to July 19th, 2025

TIME AND MOTION STUDY AT TPA DEPARTMENT: AT MAX HOSPITAL

A REPORT BY

Maitri Singh

Master of Business Administration

(Hospital and Health Management)

Roll number – 1990

2024-26

Under the mentorship of

DR. SEEMA MEHTA, PROFESSOR

MAX Healthcare | 25 YEARS OF SERVICE AND EXCELLENCE

Annexure A

Completion Certification from the Organization

CERTIFICATE

This is to certify that **Dr. Maitri Singh** of MBA HM-29 batch of IIHMR University Jaipur has worked with our organization for her summer internship from 12/05/2025 to 25/07/2025.

The overall performance shown by him/her during the period was excellent/good/average.
This certificate is being issued to meet the requirements of the IIHMR University.

Date: 25/07/25

(Signature of organization Mentor)

Name: Dr. Devesh Tiwari

Designation: Head Operations

Seal/Stamp of the Organization

MAX HOSPITAL MAX Healthcare GURUGRAM

Max Hospital, Gurugram
(A unit of ALPS Hospital Ltd.)
Opposite Millennium City Centre Metro Station
B - Block, Sushant Lok - I, Gurugram - 122 001
For medical service queries or appointments,
call: +91-124 6623 000
www.maxhealthcare.in

ALPS Hospital Ltd.
Regd. Office: 401, 4th Floor, Man Excellenza, S. V. Road,
Vile Parle (West), Mumbai, Maharashtra - 400 056
T: +91-22 2610 0461/62
E: secretarial@maxhealthcare.com

(CIN: U85191MH2014PLC255294)

Certificate No – 2025/20533

CERTIFICATE
OF ACHIEVEMENT

MAX Healthcare

Max Institute of Medical Education

Certifies that

Dr Maitri Singh

has completed Internship in the department of

Hospital Operation

at Max Super Specialty Hospital, Gurgaon

from 12th May 2025 to 25th July 2025

Dr Devesh Tiwari

Head of the Department

Vinitaa Jha

Dr Vinitaa Jha
Director - Research & Academics
Max Healthcare Institute Ltd

IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

This is to certify that **Dr. Maitri Singh** 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 guidelines. Her poster is approved for presentation.

Date: 28/07/25

(Signature)

Dr. Seema Mehta

Professor

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TIME AND MOTION STUDY IN TPA DEPARTMENT: AT MAX HOSPITAL

Name: Dr. Maitri Singh (HM-29)
Roll no.: 1990
Faculty Mentor: Dr. Seema Mehta

Organisation: Max Hospital, Gurugram
Organisation Mentor: Dr. Devesh Tiwari

ABOUT THE ORGANISATION

Founded in the year 2007, Max Hospital, Gurugram is a leading hospital in Haryana. The 104+ bedded facility with a team of 290 doctors and 201 nursing staff has provided world class healthcare services to over 5 lakh patients. It is equipped with 16 ICU beds, 6 PICUs, 7 NICUs and 5 Cardiac Care beds. The hospital uses state-of-the-art technology, four high-end Operation Theatres, an NABL accredited Max Lab and NABH accreditation.

VISION

To be the most well-regarded healthcare provider in India, committed to the highest standards of clinical excellence and patient care, supported by latest technology and cutting-edge research.

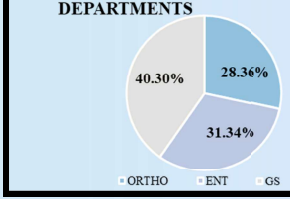
OBJECTIVES

- To understand the process flow of TPA
- To evaluate average time taken at various stages of work
- To identify the main challenges faced by the department

METHODOLOGY

- Study setting: TPA department at Max Hospital, Gurugram
- Study Design: Retrospective observational study
- Method: Mixed method research
- Sampling Method: Purposive Sampling
- Sample: 67 patients admitted between June 9th, 2025 to July 6th, 2025 in the IPD of ENT, General Surgery and Orthopaedics department.
- Primary data collected through activity mapping and observation, secondary data collected from HIS and IHX
- Data analysis: Process mapping, average and Time and motion analysis

DISTRIBUTION OF PATIENTS BASED ON DEPARTMENTS



TIME V/S MOTION CHART

Activity	Start Time	Time Taken	End Time
Sending initial documents to	0 Hr 0 Min 0 Sec	10 Hrs 16 Mins 46	10 Hrs 16 Mins 46 Secs
Query raised	10 Hrs 16 Mins 46 Secs	47 Mins 58 Secs	11 Hrs 04 Mins 44 Secs
Query replied	11 Hrs 04 Mins 44 Secs	22 Hrs 30 Mins	33 Hrs 34 Mins 44 Secs
Initial approval	33 Hrs 34 Mins 44 Secs	02 Hrs 34 Mins 22	36 Hrs 09 Mins 06 Secs

Patients stay in the hospital

Sending final bill to insurance	0 Hrs 0 Mins 0 Secs	21 Mins 0 Secs	21 Mins 0 Secs
Query raised	21 Mins 0 Secs	13 Mins 08 Secs	34 Mins 08 Secs
Query replied	34 Mins 08 Secs	07 Mins 40 Secs	41 Mins 48 Secs
Final approval	41 Mins 48 Secs	01 Hrs 50 Mins 37 Secs	02 Hrs 32 Mins 25 secs

CHALLENGES

- Delay in pre-authorization form completion.
- Incomplete documentation raises query.
- Obtaining documents from other departments maybe time taking.
- Lack of clarity amongst patients about policy coverage and what factors may lead to denials.

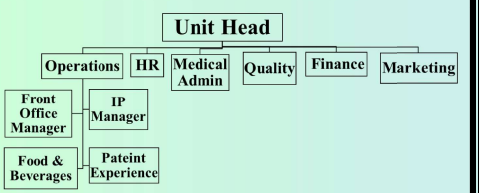
SUGGESTIONS

- Counselling the patient properly about their policy.
- Checklist of documents to avoid incomplete documentation.
- Proper communication to avoid confusion.
- Integrating AI in system to automate data processing
- Proper follow up with cases.
- Monitor performances of staff to enhance delivery time.

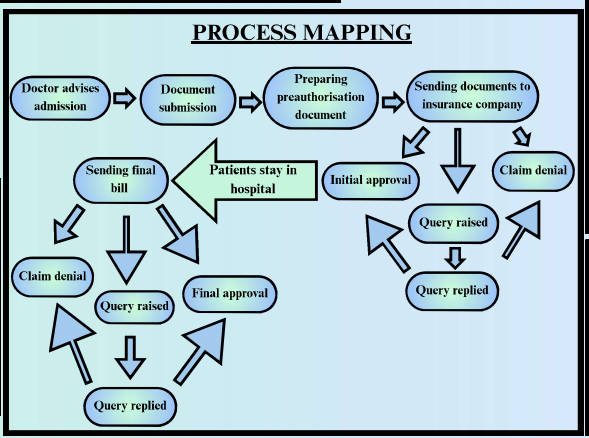
SWOT

S High end machines and latest technologies Entirely digitalised	**W** Limited number of beds Not patient pocket friendly
O Expansion of services and facilities Rising demand	**T** High demand, less supply Competitive market

ORGANISATIONAL STRUCTURE



PROCESS MAPPING



CONCLUSION

- For planned admissions initial approval processing can take up to 3 days whereas the final approval at the time of discharge can be obtained in approximately two to three hours
- Query reply on intial claim takes the maximum amount of time.
- There is a significant difference in the mean time for query reply on intial claim of the patients in the three departments with maximum time taken in orthopaedic department and lowest in general surgery.

KEY LEARNINGS

- In depth understanding of work done in TPA department and its contribution in optimizing the efficiency of hospital
- Proper counseling of the patient is a necessity to maintain the trust and avoid confusion.
- Reverting back to insurance queries, obtaining approval and handling denials

COMPILED SUMMARY OF SUMMER INTERNSHIP

I started my internship at Max Hospital, Gurugram on May 12th, 2025. It started with a meeting with my mentor Dr. Devesh Tiwari sir (Head of Operations), Dr. Simranjeet Kaur ma'am (Senior executive in hospital operations) and Ms Jayita Biswas ma'am (Head of Front office).

I was given an orientation of the entire hospital, where I learned that the hospital is planned in a horizontal landscape, with ground plus 3 floors and is divided into two blocks, A and B. The ground floor consists of main OPD, IPD admission desk, cardiology and radiology department, accident and emergency department and a few consultation rooms specific to urology, ENT and orthopaedics department. The first floor comprises of ICU's and operation theatre. The second floor is designated to gynaecology and paediatrics department with NICU and PICU whereas the third floor majorly consists of rooms for patients along with the gastroenterology and oncology department. The hospital consists of 105 beds divided into economy, double sharing and private rooms. In addition to this, it also consists of daycare centres and a mobile unit.

After my orientation was done, I got posted in the Front Office and the TPA department for the course of my internship. In the TPA department, I met Mr. Nitin Chandra sir (Head of TPA department) and the rest of the team. In the first week itself I was assigned a project by Dr. Devesh sir to work on discharge turnaround time, identify causes for delay and provide suggestions to handle the same.

During the first three weeks of my internship, I observed the work done in various departments. Under the guidance of Tanushree ma'am and Dinesh sir, I learned the work done in front office such as OPD registration, generating a new Max ID, billing, refund generation, appointment scheduling and changing. I met Mr. Gurpreet sir from whom I learned about the process of admission, the various documents required for admission of a patient, different payment modes like cash or insurance, how the available beds are allotted to the patients, how the situation is managed in case of bed unavailability and the various colour codes indicating status of bed. I also observed the cases and handling of patients in ER and learned about the processes such as registration, billing, admission and discharge of patients in Emergency. Following this I performed the registration and billing of patients at OPD and in ER and carried out the admission of patients.

Next, I moved on to the TPA department, where from Nitin sir, I learnt about preparing a patients preauthorisation documents to be sent to the insurance company for an initial approval, sending final bill with discharge summary for final approval, learned about what documents are required when claiming for cashless insurance, the various TPA portal available at Max Hospital and how to handle the denial cases. Learned how to reply to a query raised against initial claim or final bill and how to prepare patients KYC documents when applying for insurance. Under his guidance I started my work in the TPA department where I would check the status of under process patient documents, prepared patients' preauthorisation form, uploaded patients document on the portal and sent final bill to the insurance companies. He also taught me how to address the query raised by insurance company and how to counsel and guide the patients.

Towards the end of week three, I took rounds with Ms Ipshita, the floor manager, we observed various case files, understood patient queries and I assisted the floor manager in resolving them. I started working on my project by learning and understanding the process of discharge. I followed discharges during that week, learned about the various steps in discharge, learned how to check discharge intimation and patient case reports on HIS, discharge tracking dashboard and CPRS. I observed that due to low bed facilities, management of patients is difficult, the waiting time for admission of patients is higher, services may be delayed when patient load increases due to shortage of staff and designated waiting areas are not available.

Week four onwards I continued my work in the TPA department and started collection of data for my project, followed patient discharge status from discharge tracking dashboard and HIS, checked their discharge summary from CPRS. I had to work in the TPA department during the first half and work on my project in the second half. In the TPA department, I would assist the staff or carry out the various processes, assist the patients and counsel them.

As I started working on my project, I focused on collecting data for planned and unplanned discharges of patients for both TPA and cash. I talked to the nursing supervisor Ms Babita Varghese to understand their clearance process and where they might be facing difficulties. I also talked with Gyan sir (Head of Pharmacy department) to understand the flow of work in IP pharmacy and their clearance procedure. I discussed the various difficulties each department like nursing, billing and TPA faces when giving a patient clearance for discharge with the respective staff.

By the end of week four, I was assigned a second project, to work on a time and motion study in the TPA department. In this project I had to understand the work done in TPA and prepare a time v/s motion chart. For this project I collected data for planned admissions of patients in the department of ENT, General surgery and Orthopaedics.

During week five, I learned about how insurance policy differs for daycare patients, listened to the patients concern, queries, counselled them and even took their feedback regarding their stay at the hospital. I started collection of data for my second project from this week. I observed that regular meetings and briefing were held for staff made the daily agenda clear for a smooth workflow through the day.

During week six and seven, I continued my work in TPA under the guidance of Nitin sir and other staff members, I would also interact with patients to understand their experience and take their feedback. While working on my projects, I learned about the possible reasons for delay in discharges, what challenges all concerned departments face and how the TPA department works. I took Nitin sir’s guidance to follow cases and track down the timings of their processes.

In these few weeks, I observed that due to shortage of staff, intimations maybe delayed, information to the attendant maybe missed, the present staff might be overburdened, patients appear confused about billing process when they go via TPA or pay via insurance which may lead to long queue of attendants at the billing and TPA counter. Attendants have to run between departments for clarity, moreover, patient economic factors may not be taken into consideration as every patient may not be able to afford the treatments.

To overcome these situations, I gave certain suggestions such as increasing manpower, better planned duty rosters, provision of more waiting areas, provision of newspaper or magazines in the waiting area, on time intimations to the attendants, communication training for the staff and counselling of patients regarding each aspect while getting admitted specially when the patient claims for cashless insurance to avoid confusion and dissatisfaction later.

Weeks eight and nine were dedicated to finalising a title, analysing data for both projects, preparation of reports and PowerPoint presentations of the same. While analysing project 1 titled "Analysis of discharge turnaround time at Max Hospital, Gurugram", I focused on following aspects:

- Categorising discharges into Planned and unplanned for both TPA and cash patients.
- Calculation of average turnaround time for discharge of TPA and cash patients.
- Identification of cases that were discharged under and over benchmark (defined) TAT and average TAT.
- Calculated overall percentage of cases that saw delay in discharge in TPA and cash respectively.

I found factors such as delay in signing of discharge summary, additional time required due to doctor rounds, delayed response from insurance providers, poor coordination within departments and unavailability of attendant are the most common causes for delay in discharge.

During analysis of second project titled "Time and Motion study in TPA department", the data collected included categorising patients based on specific departments including ENT, General Surgery and department of Orthopaedics. I focused on the aspects such as:

- Mapping the workflow of processes in TPA department.
- Calculating average time taken at each step of TPA.
- Preparing a time and motion chart using the average time calculated.

From the analysis, it can be concluded that delay in preauthorisation form completion, incomplete documentation, absence of clarity about policy coverage amongst patients/attendants pose as a challenge in claim approvals.

I prepared a report consisting of an abstract, introduction including background and objectives, methodology, data analysis, result, challenges, suggestions and a conclusion. I sent it to Simranjeet ma'am and took her suggestions to correct my reports.

In the last week of my internship, I presented my findings in front of Dr. Devesh sir with all the data, my findings and explained my analysis using visual representations including graphs, chart and tables. I concluded my presentations with certain recommendations such as early planning of discharge and clearance, checklists to avoid lack of documentations, timely completion of discharge summary, prior preparation of patient docket and ensuring proper communication can improve discharge TAT whereas proper counselling of patients and follow up of cases can help the organisation overcome challenges faced in the TPA department. This week marked the end of my internship.

WEEKWISE REPORT 1

Name of the Organisation: MAX HOSPITAL, GURUGRAM

Area/ Department/ Project of Summer Internship Program: OPERATIONS (FRONT DESK AND TPA)

Name of the Student: Dr. MAITRI SINGH

Roll no: 1990 **Stream:** MBA–HOSPITAL AND HEALTH MANAGEMENT

Week no: 01 **From:** MAY 12TH,2025 TO MAY 17TH, 2025

Activity Done	• Orientation of the hospital. • Observation of various departments. • Observation and learning in the TPA department. • Observation of the processes and work done in the TPA department. • Learned about the different types of payment modes: cash, corporate insurance and TPA. • Learned about handling denial cases and the various documents required while claiming insurance. • Observation of cases and case files of IPD. • Learned about the various types of consent forms required pre surgery. • Observed the registration and billing process in OPD. • Learned about the necessary fields to be filled during registration of a patient. • Observed the process of invoice generation and refund. • Did the OPD registration and billing for patients. • At the admission desk, learned about the process of admission and bed management. • Learned about the various documents required while admitting a patient and during discharge. • Learned how the beds are allotted to a patient and what is done in case of unavailability of beds. • Did the admission process for a patient. • Learned about the colour coding for bed management and discharge process. • Observation and learning in ER. • Learning about registration, billing and discharge of patients from ER. • Did registration and billing of patients in ER • Observation of cases in ER. • Observation of bed management and handling of critical patients in ER.

Linking theory (Classroom learning) with practice at your organisation	• The hospital has a horizontal layout. • One OPD and one emergency entrance present. • Different types of rooms are available. • OTs and ICUs are on the 1st floor. • Signage posting are present everywhere. • Importance is given to proper documentation. • Patient concern is of utmost importance. • Organisational culture is very inclusive. • Quality standards are maintained.
Gaps identified on the working area.	• Due to less availability of beds, patient management is difficult. • Patient waiting time due to non-availability of beds • Discharge process takes considerable amount of time • Designated waiting areas for attendants not there.
Suggestions for improvement	• Provisions for patients should be there in case of nonavailability of beds. • More waiting space should be provided for the attendants • Provision of magazines and newspapers for attendants while waiting. • Better flow of work among the various departments to decrease discharge process time.
Plan for the next week	• Learning more about the IPD • Learning more about the emergency department. • Understand discharge process in detail.

Signature of the Student

Approved by the IIHMR University's Mentor

WEEKWISE REPORT 2

Name of the Organisation: MAX HOSPITAL, GURUGRAM

Area/ Department/ Project of Summer Internship Program: OPERATIONS (FRONT OFFICE AND TPA)

Name of the Student: Dr. MAITRI SINGH

Roll no: 1990 **Stream:** MBA–HOSPITAL AND HEALTH MANAGEMENT

Week no: 02 **From:** MAY 19TH, 2025 TO MAY 24TH, 2025

Activity Done	• Observation of front desk procedures. • Learned about OPD billing and refund procedure. • Learned how to schedule and change appointments. • Learned about HIS and how to work with it. • Used HIS to check patient discharge intimation. • Checked under process patient documents. • Learned how to send patients final bill to insurance companies. • Sent patient documents to insurance companies before discharge. • Prepared patient's documents to be sent to insurance companies. • Learned about various TPA portals. • Uploaded patient documents on portal. • Learned how to reply to a query in TPA. • Learned how to prepare a preauthorisation document.
Linking theory (Classroom learning) with practice at your organisation	• HIS records past medical history of patients for easy access in future. • Systematic procedure of OPD billing, scheduling and changing patient appointments. • Hassle free OTP based refund procedure. • Regular briefing and meetings to enhance healthcare delivery. • Coordinators available to make the process smooth. • Streamlined working in departments creates a smooth workflow and avoids confusion.
Gaps identified on the working area.	• Long waiting time before admission of patients. • For any reason if the doctor is not available, appointments are not rescheduled.
Suggestions for improvement	• Appointments can be cross checked and rescheduled after consulting patient using a chat bot feature in case of unavailability of doctor. • Better bed management is required to avoid long patient wait time.

Plan for the next week	• To understand more about bed management and discharges. • Learning more about ER department

Signature of the Student

Approved by the IIHMR University's Mentor

WEEKWISE REPORT 3

Name of the Organisation: MAX HOSPITAL, GURUGRAM

Area/ Department/ Project of Summer Internship Program: OPERATIONS (FRONT OFFICE AND TPA)

Name of the Student: Dr. MAITRI SINGH

Roll no: 1990 **Stream:** MBA–HOSPITAL AND HEALTH MANAGEMENT

Week no: 03 **From:** MAY 26TH, 2025 TO MAY 31ST, 2025

Activity Done	• Observation in TPA department. • Used HIS to check patient discharge intimation. • Used CPRS to check status of discharge summary. • Observed discharge tracking dashboard to follow up with patient discharge status • Learned how to reply to a query in TPA. • Learned how to prepare patient KYC when applying for insurance. • Took rounds with floor manager. • Understood patient queries and assisted the floor manager in resolving them. • Observed the stages of discharge. • Talked with the nursing supervisor to understand their clearance process.
Linking theory (Classroom learning) with practice at your organisation	• Regular briefing and meetings of various departments. • Entirely digitalised system of working makes the process of addressing patients and their records easier. • Additional benefits provided to the staff.
Gaps identified on the working area.	• Services may be delayed when patient load increases due to shortage of staff.
Suggestions for improvement	• Staffing maybe increased and trained to assist the patients/attendants.
Plan for the next week	• To learn about billing estimates.

Signature of the Student

Approved by the IIHMR University's Mentor

WEEKWISE REPORT 4

Name of the Organisation: MAX HOSPITAL, GURUGRAM

Area/ Department/ Project of Summer Internship Program: OPERATIONS (FRONT OFFICE AND TPA)

Name of the Student: Dr. MAITRI SINGH

Roll no: 1990 **Stream:** MBA–HOSPITAL AND HEALTH MANAGEMENT

Week no: 04 **From:** JUNE 2ND, 2025 TO JUNE 7TH, 2025

Activity Done	• Assigned second project "To study the Time and Motion in TPA". • Learned how to fill a KYC form of patient/attendant in TPA. • Filled KYC forms of patients in TPA for processing • Understood the various stages of work in TPA. • Observation in TPA department. • Used HIS to check patient discharge intimation. • Used CPRS to check status of discharge summary. • Observed discharge tracking dashboard to follow up with patient discharge status. • Observed flow of work in IP Pharmacy. • Collected data for discharge delay project.
Linking theory (Classroom learning) with practice at your organisation	• Patient oriented environment of any hospital is an essential. • Staff of the week/month/year to motivate employees. • Digitalisation makes patient record keeping and tracking easier.
Gaps identified on the working area.	• Staff might be overburdened. • Patients appear confused about billing process when they go via TPA/insurance.
Suggestions for improvement	• Weekly roster should be carefully crafted so as to prevent employee fatigue. • Patients must be explained every step when planning to go for TPA.
Plan for the next week	• To understand flow of work in TPA and progress with project.

Signature of the Student

Approved by the IIHMR University's Mentor

WEEKWISE REPORT 5

Name of the Organisation: MAX HOSPITAL, GURUGRAM

Area/ Department/ Project of Summer Internship Program: OPERATIONS (FRONT OFFICE AND TPA)

Name of the Student: Dr. MAITRI SINGH

Roll no: 1990 **Stream:** MBA–HOSPITAL AND HEALTH MANAGEMENT

Week no: 05 **From:** JUNE 9TH, 2025 TO JUNE 14TH, 2025

Activity Done	• Learned about the various reasons for delay in discharge • Discussed with the staff to understand the difficulties that occur when giving a patient clearance for discharge. • Collection of data. • Learned about patient concern and queries. • Learned about insurance policy for daycare patients.
Linking theory (Classroom learning) with practice at your organisation	• Regular meeting of department heads and briefing of staff. • Discharge tracker is present on every floor. • Digital platforms such as DISHA and ERP available.
Gaps identified on the working area.	• Missed data entries. • Clearance time being changed by other departments leads to confusion and projects delayed TAT. • Lack of staff results in delayed intimation.
Suggestions for improvement	• Data should be clearly entered on a daily basis. • Clearance time of one department should be handled by them only. • Timely intimation of clearance and discharge should be done.
Plan for the next week	• To understand the process of TPA in detail.

Signature of the Student

Approved by the IIHMR University's Mentor

WEEKWISE REPORT 6

Name of the Organisation: MAX HOSPITAL, GURUGRAM

Area/ Department/ Project of Summer Internship Program: OPERATIONS (FRONT OFFICE AND TPA)

Name of the Student: Dr. MAITRI SINGH

Roll no: 1990 **Stream:** MBA–HOSPITAL AND HEALTH MANAGEMENT

Week no: 06 **From:** JUNE 16TH, 2025 TO JUNE 21ST, 2025

Activity Done	• Prepared Preauthorisation documents for patients claiming cashless insurance. • Filled patient/attendant KYC forms. • Listened to patient's concern and queries. • Checked patient admission records and bed details. • Collection of data using various portals.
Linking theory (Classroom learning) with practice at your organisation	• Analysis of past cases is easy using platforms such as HIS. • Patient/attendant query is given priority. • Occupancy of bed at any floor can be assessed through desktop to analyse and allot bed to new patients accordingly.
Gaps identified on the working area.	• Long queue of patient leads to delayed response from departments. • Delayed doctor rounds cause delayed clearances and signing of discharge summary.
Suggestions for improvement	• Doctor round timing should be separate from their OPD timing to avoid delay in discharge. • Manpower may be employed for better patient/attendant management.
Plan for the next week	• To understand patient aspect and their concerns in detail when they claim cashless insurance. • Collection of data.

Signature of the Student

Approved by the IIHMR University's Mentor

WEEKWISE REPORT 7

Name of the Organisation: MAX HOSPITAL, GURUGRAM

Area/ Department/ Project of Summer Internship Program: OPERATIONS (FRONT OFFICE AND TPA)

Name of the Student: Dr. MAITRI SINGH

Roll no: 1990 **Stream:** MBA–HOSPITAL AND HEALTH MANAGEMENT

Week no: 07 **From:** JUNE 23RD, 2025 TO JUNE 28TH, 2025

Activity Done	• Prepared Preauthorisation documents for patients claiming cashless insurance. • Filled patient/attendant KYC forms. • Counselled patients regarding their queries. • Checked patient admission records and bed details. • Collection of data using various portals.
Linking theory (Classroom learning) with practice at your organisation	• Feedback forms (physical and online) are available for patients. • Facilities like Wi-Fi, dental kit etc available for patients. • Informed consent forms for patients and attendants available.
Gaps identified on the working area.	• Excess burden on F&B staff. • Attendants have to run between departments for clarity.
Suggestions for improvement	• Communication should be present between patient/attendant and patient coordinators to avoid confusion. • F&B must be monitored at each level to avoid any complaints as well as reduce burden on each staff.
Plan for the next week	• Collection of data. • To understand patient experience.

Signature of the Student

Approved by the IIHMR University's Mentor

WEEKWISE REPORT 8

Name of the Organisation: MAX HOSPITAL, GURUGRAM

Area/ Department/ Project of Summer Internship Program: OPERATIONS (FRONT OFFICE AND TPA)

Name of the Student: Dr. MAITRI SINGH

Roll no: 1990 **Stream:** MBA–HOSPITAL AND HEALTH MANAGEMENT

Week no: 08 **From:** JUNE 30th, 2025, TO JULY 5TH, 2025

Activity Done	• Communicated with patients to understand their problems and took feedback. • Counselled patients regarding their queries. • Assisted patients in the TPA department. • Collection of data using various portals. • Preparation of report.
Linking theory (Classroom learning) with practice at your organisation	• It is essential to keep the patient and/or attendant informed at each step to maintain patient-provider trust. • Proper counselling patients should be prioritised to avoid any misinformation or misguidance.
Gaps identified on the working area.	• Timely information to the attendant maybe missed due to overload of cases which leads increased burden on attendants and decreased patient satisfaction.
Suggestions for improvement	• On time intimations to the attendant/patient should be maintained via message, apps etc.
Plan for the next week	• Collection of data. • Completion of Report.

Signature of the Student

Approved by the IIHMR University's Mentor

WEEKWISE REPORT 9

Name of the Organisation: MAX HOSPITAL, GURUGRAM

Area/ Department/ Project of Summer Internship Program: OPERATIONS (FRONT OFFICE AND TPA)

Name of the Student: Dr. MAITRI SINGH

Roll no: 1990 **Stream:** MBA–HOSPITAL AND HEALTH MANAGEMENT

Week no: 09 **From:** JULY 7th, 2025, TO JULY 12TH, 2025

Activity Done	• Assisted in Gynaecology OPD. • Counselled patients regarding their queries and took their feedback. • Assisted patients in the TPA department. • Completion of report.
Linking theory (Classroom learning) with practice at your organisation	• Properly counselling patients should be prioritised to avoid any misinformation or misguidance. • Measures were taken to settle the situation during Code violet and code yellow.
Gaps identified on the working area.	• Staff might communicate with patient in an ill manner causing patient dissatisfaction.
Suggestions for improvement	• Communication training must be given to all staff members to ensure patients are communicated and counselled properly
Plan for the next week	• Interview staff to understand their experience. • Presentation

Signature of the Student

Approved by the IIHMR University's Mentor

WEEKWISE REPORT 10

Name of the Organisation: MAX HOSPITAL, GURUGRAM

Area/ Department/ Project of Summer Internship Program: OPERATIONS (FRONT OFFICE AND TPA)

Name of the Student: Dr. MAITRI SINGH

Roll no: 1990 **Stream:** MBA–HOSPITAL AND HEALTH MANAGEMENT

Week no: 10 **From:** JULY 14th, 2025, TO JULY 19TH, 2025

Activity Done	• Learnt a few more things about the organisation. • Completed both projects. • Presentation taken by Dr. Devesh Sir. • Based on my internship experience, learning and observations, did a SWOT analysis of the organisation.
Linking theory (Classroom learning) with practice at your organisation	• The study on project topics provides an idea about the possible factors leading to delay in discharge and how the working in TPA can be improved.
Gaps identified on the working area.	• Unavailability of blood bank, radiation therapy. • Patient economic factor – every patient may not be able to afford the treatments.
Suggestions for improvement	• Prior planning of discharges, discharge counselling of patients and preparation of all necessary documents in advance can help in faster discharges and better bed turnover rate. • Introducing more patient pocket friendly packages.

Signature of the Student

Approved by the IIHMR University's Mentor