SUMMER INTERNSHIP PROGRAM

at

EHCC, Jaipur

From 12/05/2025 to 19/07/2025

REPORT BY
Koshta Sanskruti Prabhat
Master of Business Administration
Hospital and Health Management
Roll no 1983

2024-26

under the Mentorship of
Dr. Deepti Sharma (Associated professor)

IIHMR UNIVERSITY

Ref: EHCC&RI/HR/Office/12419

Date: 21-July-2025

TO WHOMSOEVER IT MAY CONCERN

This is to certify that **Ms Koshta Sanskruti Prabhat** student of **IIHMR University, Jaipur** has completed her internship at **"Eternal Hospital, Jaipur"** from **12th May'25 to 21st July'25.**

During this period, She was inducted, oriented and trained in the working and processes of **Quality Department** under the guidance of **Dr Ruchi Khanna.**

During the period we found her sincere, intelligent, obedient and hard working.

We wish her all the best for future endeavours.

For **ETERNAL HEART CARE CENTRE AND RESEARCH INSTITUTE, JAIPUR**

Ashok K Jeenwal
Head- HR & Training

Heartcare Centre & Research Institute JAIPUR

Annexure A

Completion Certification from the Organization

CERTIFICATE

This is to certify that Dr./Mr./ Ms. Koshta Sanskruti of 2024-26 (batch) of Quality, EHCC, Jaipur (Name of the department/institute) has worked with our organization for his/her summer internship from 12/05/25 to 21/07/25 (date). 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: 21/07/25

(Signature of organization Mentor)

Name: Dr. Ruchi Khanna

Designation: Group Quality Head

Seal/Stamp of the Organization

IIHMR UNIVERSITY

IIHMR University Faculty Mentor Approval

This is to certify that **Koshta Sanskruti Prabhat** 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: _____

Dr. Deepti Sharma
Associate Professor

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Prevention and Management of Deep Vein Thrombosis (DVT) in ICU patients

Presented by: Koshta Sanskruti Prabhat (1983)
Faculty mentor: Dr. Deepti Sharma (Associate Professor)
Organization mentor: Dr. Ruchi Khanna (Quality Head)

IIHMR UNIVERSITY

EHCC ETERNAL HEART CARE CENTRE & RESEARCH INSTITUTE — ETERNAL HOSPITAL

Brief history and description

Eternal Hospital (EHCC) Jaipur was established in 2013 by Dr. Samin K. Sharma, in collaboration with Mount Sinai Hospital, New York. Initially a cardiac care, it grew into a multi-specialty NABH & JCI-accredited hospital. In 2021, it became the first in Rajasthan to perform TAVI. EHCC offers advanced care across specialties and has added a new 100-bed facility in Sanganer, serving both private & government scheme patients.

Vision & Mission

- A center of excellence in area of medicine with highest international standard at affordable cost for the community around the globe.
- To redefine healthcare by improving outcomes and experience of patients through cutting edge research & personalized clinical care including innovative, preventive, diagnostic, therapeutic and rehabilitation services

Project Undertaken

- Prevention and Management of Deep Vein Thrombosis in ICU Patients.
- Objective is to Identify at-risk patients, ensure timely assessment & evaluate prophylaxis intervention.
- Patients across multiple ICUs over a 2.5-month period so there is 240 patients
- Retrospective audit

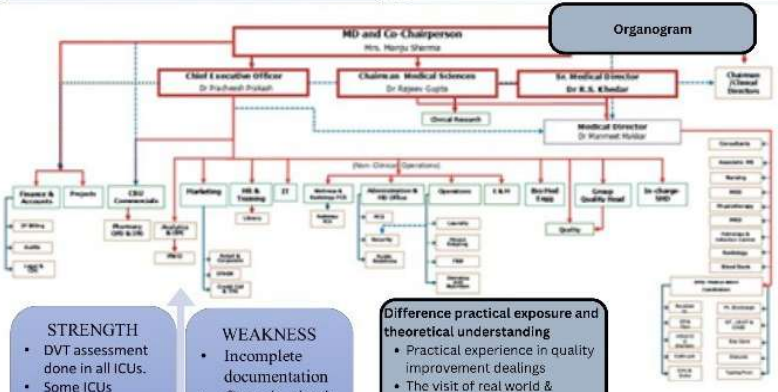
Evaluation Process

- Used a standard DVT risk assessment checklist.
- Patients who are in ICU.
- Prophylaxis interventions were checked against risk scores.
- Reassessment data was reviewed for consistency and completeness.

Results & Findings

- Low-risk patients formed the majority.
- Moderate-risk patients were inconsistently managed—only ~30% to 80% received proper intervention, depending on the
- In some ICUs, 100% intervention compliance was observed.
- Overall Prophylaxis Rate: Only 43.86% of all eligible patients received appropriate intervention.
- Documentation issues and inconsistent reassessment found in multiple units.

Organogram



Causes Identified

- Incomplete or inconsistent documentation of risk assessment and prophylaxis.
- Dr occasionally avoided pharmacological prophylaxis due to perceived bleeding risks.
- Lack of awareness among ICU staff.
- No uniform follow-up system to ensure reassessment.

Suggestions

- Make DVT assessment mandatory within 24 hours, reviewed by the treating physician.
- Train ICU staff periodically on DVT prevention and management protocols.
- Revise DVT forms to clearly separate contraindications and clarify scoring.
- Conduct weekly audits for quality checks.
- Encourage electronic tracking for real-time alerts and follow-ups on reassessments.

STRENGTH

- DVT assessment done in all ICUs.
- Some ICUs achieved 100% intervention compliance.

WEAKNESS

- Incomplete documentation
- Gaps in timely prophylaxis

OPPORTUNITIES

- Modify form
- Weekly audits and reviews

THREATS

- Risk of PE due to missed interventions
- Medical complications limiting prophylaxis use

Difference practical exposure and theoretical understanding

- Practical experience in quality improvement dealings
- The visit of real world & communication with departments
- Underlying exposure to daily challenges in the hospital
- Knowing practical work versus a theoretical study
- Real environment teamwork and communication

Learning During Internship

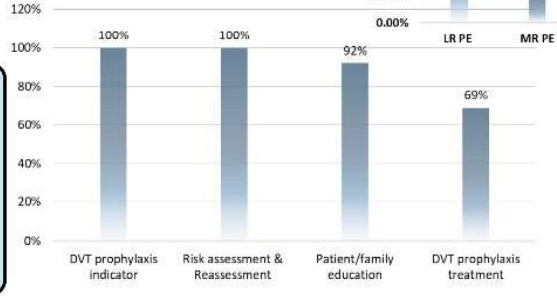
- Gained hands-on experience in clinical quality assessment and hospital protocol.
- Understood how to apply DVT risk stratification tools in real ICU .
- Observed gaps between risk assessment and actual interventions.
- Learned data collection and evaluation methodology including retrospective analysis.

Challenges faced during internship

- Poor communication among nursing and support staff
- Shortage of trained personnel in ICU and PCS
- Incomplete & inconsistent DVT documentation
- Uncoordinated clinical and non-clinical services

ANALYSIS

COMPLIANCE



Weekly Report -1

Name of the Organisation: EHCC

Department: Quality Department From: 12/05/2025 to 17/05/2025

Activity Done	-Documentation & Orientation session was conducted on first day by Quality and HR department. - Had a tour of EHCC Hospital along with detailed overview of some departments like CSSD & HDU's. - Meeting with Dr. Ruchi Khanna ma'am (Quality Head), she had a brief session regarding SIP process followed by project discussion. - Also had a meeting with Amit Khan Sir (Chief Administrative Officer) who briefed us about hospital operations of various departments. - Visited Cardiology Dept, OPD & Physiotherapy observed the process of registration, admission, billing, TPA, consultation to pharmacy. - Had a brainstorming session about the selection of topic. - Visited OPD I & II Obs and Gynae Dept, and had observed the same process of admission, billing, & TPA over there. - Present overview of topic selected for SIP to Quality Head. - Visited ER Module and had a briefing about ER operations by Senio Manager Emergency he explained Emergency Zoning, Triad, TAT. - Visited RGHS Registration Dept. & had an overview of RGHS Services observed the admission process on RGHS software. - Finalisation of Topic
Linking theory (Classroom learning) with practice at your organisation	-Utilised knowledge of Organisational Behaviour, Human Resource Management theories to analyse departmental functioning. -Applied concepts of "Essentials of Hospital Service" to understand the clinical operations of EHCC.

Gaps identified on the working area.	-Inconsistencies in maintaining the feedback process. -Irregularity in nursing assessment of vital signs at the OPDs.
Suggestions for improvement	-Implement a clear, documented feedback process with regularly tracking feedback collection and response. -Implementing a mandatory vital signs protocol and conducting a regular documentation audit.
Plan for the next week	-Working on the approved project observation and data collection of the project. -Along with observing remaining departments.

Weekly Report - 2

Name of the Organisation: EHCC

Department: Quality Department From: 19/05/2025 to 24/05/2025

Activity Done	• Visited IPD Pharmacy and General store and had a brief of the working of both the department under Supply chain Management. • Visited clinical nutrition and dietetics and learned about different types diets and their administration (from ticket generation to their distribution) • Had a brief about security department and learned about their working and management. Also, I had session on fire safety, followed by fire safety drill. • Visited food & beverage's department, got to know about their working and how efficiently they manage hospitals kitchen's • Visited biomedical engineering department learned about their working and how efficiently they manage working of every machine of the hospital. • Visited the project management head Mr Vivek Khatta sir. Had a brief about the working of the department and the management of the department throughout the hospital. • Had a overview of engineering department and their working also we had visited blood bank and got to known about their working and management of the blood storages. • Collection of data for project visited ICUs.
Linking theory (Classroom learning) with practice at your organisation	• Gained Knowledge about Utility Services. • Related concepts of Supply Chain Management in hospitals. • Applied concepts of "Essentials of Hospital Service" to understand the clinical operations of EHCC.
Gaps identified on the working area.	• Overcrowding of Canteen premises during rush hours.
Suggestions for improvement	• Increase capacity according to footfall.
Plan for the next week	• Continue working on SIP project cover the remaining dept. to understand their working.

Weekly Report 3

Name of the Organisation: Eternal Health Care Centre, Jaipur

Department: Quality Department From: 26/05/2025 to 31/05/2025

Activity Done	• Visited Dialysis Department & got a brief about process of dialysis, billing and clinical emergencies that can occur during dialysis. • Visited Housekeeping department understood the link between housekeeping with other depts. Such as CSSD etc. • Worked on my SIP topic (DVT risk management) audited MICU-1, MICU-2, MICU-3, NICU, CTVS-ICU. • Visited TPA department and understood about the process of claim, billing & discharge of various organisations.
Linking theory (Classroom learning) with practice at your organisation	• Related concepts of Financial Management & HRM in hospitals. • Applied concepts of "Essentials of Hospital Service" to understand the clinical operations of EHCC.
Gaps identified on the working area.	• The DVT assessment Checklist in ICUs is not correctly updated by staff.
Suggestions for improvement	• Tracking & Verification by the supervisor or in-charge in respective ICUs.
Plan for the next week	• Work on the SIP topic assigned & cover the remaining department to understand their working.

Weekly Report - 4

Name of the Organisation: EHCC, Jaipur

Department: Quality department **From: 02/06/25 to 07/06/25**

Activity Done	• Understood floor management and patient flow process at the hospital. • Followed patient processes from admission to discharge. • Observed how patient movement is managed by nursing station. • Coordination of various departments like dietetics, housekeeping, clinical pharmacology, IPD pharmacy, IDTR, TPA etc for patient management. • Worked on project topic. • Collected and analysed data about compliance of catheter care checklist.
Linking theory (Classroom learning) with practice at your organisation	• Related concepts of Organisation behaviour in hospital. • Applied concepts of "Essentials of Hospital Service" to understand the clinical operations of EHCC.
Gaps identified on the working area.	• Inconsistencies in documentation of DVT checklist compliance by nursing staff.
Suggestions for improvement	• Data should be routinely analysed to identify trends and departments with higher rates of DVT.
Plan for the next week	• Continue to observe functioning and coordination of various departments in hospital. • Continue data collection and analysis for DVT project.

Weekly Report - 5

Name of the Organisation: EHCC, Jaipur

Department: Quality department **From: 02/06/25 to 07/06/25**

Activity Done	• Learned about various checklists used for internal department auditing. • Continue collection of data for SIP project visited ICUs.
Linking theory (Classroom learning) with practice at your organisation	• Related concepts of Organisation behaviour in hospital. • Applied concepts of "Essentials of Hospital Service" to understand the clinical operations of EHCC.
Gaps identified on the working area.	• Inconsistencies in documentation of DVT checklist compliance by nursing staff and also found various communication gap between them.
Suggestions for improvement	• Data should be routinely analysed to identify trends and departments with higher rates of DVT. • Different shift nurses can also go through the checklist once for better clarification.
Plan for the next week	• Continue to observe functioning and coordination of various departments in hospital. • Continue data collection and analysis for DVT.

Weekly Report - 6

Name of the Organisation: EHCC Hospital, Jaipur

Department: Quality department From: 16/06/2025 to 21/06/2025

Activity Done	• Visited the OT, Patient Care Service department and Wellness Lounge. • In depth understanding of Quality checklists used for internal department auditing. • Overview of the marketing department. • Collected data for SIP. • Visited to wards for overview.
Linking theory (Classroom learning) with practice at your organisation	• Applied concepts of "Marketing Management" to understand the brand management of EHCC. • Related concepts of Hospital Services in hospital.
Gaps identified on the working area.	• PCS lack the consultant that would help one to understand the health concern and packages.
Suggestions for improvement	• A team of consultants that can clear the queries and help in providing the best care.
Plan for the next week	• Quality auditing in the wards. • Continue to work on the project.

Weekly Report - 7

Name of the Organisation: EHCC Hospital, Jaipur

Department: Quality department From: 23/06/25 to 28/06/25

Activity Done	• Visited MRD Department observed the Record section of hospital, got to know about MLC cases and other legal documentations which has to be saved. • Participated in IDTR team, as a member and conducted a IDTR round with PWO department. • Observed the Complaint and Grievance addressing process and RCA, CAPA methods. • Visited Infection Control Department got to know about the mandatory things to be followed within hospital premises. • Conducted an internal audit on a floor checked all the necessary parameters according to IPSG, NABH, JCI guidelines. • Worked on my SIP project and collected data. • Participated in a fun activity organised by HR Dept. “Masti ki Pathshala “.
Linking theory (Classroom learning) with practice at your organisation	• • Related concepts of HRM in MRD dept. • Applied concepts of “Essentials of Hospital Service” to understand the clinical operations of EHCC.
Gaps identified on the working area.	• Infection Control Department could have more members in team to manage efficiently and reduce time.
Suggestions for improvement	• DVT assessment form should be properly modified.
Plan for the next week	• Continue to observe finance department in hospital. • Join or participate in a corporate health camp organised by hospital. • Visit Cath lab and know the process.

Weekly Report 8

Name of the Organisation: EHCC, Jaipur

Department: Quality department **From: 30/06/25 to 05/07/25**

Activity Done	• Visited Emergency Department got to know about Ambulance Operations it's daily management. • Conducted an internal audit regarding patient file checklist. • Reviewed the CPR Running Sheets and compiled data of past month June. • Worked on my SIP project segregated all the data in Excel to assess and find out the compliance rate. • Collected data for SIP.
Linking theory (Classroom learning) with practice at your organisation	• Applied concepts of "Essentials of Hospital Service" to understand the clinical operations of EHCC.
Gaps identified on the working area.	• Theirs is only a single ambulance owner by hospital rest depends on outsourced companies.
Suggestions for improvement	• Staff should get training for DVT assessment
Plan for the next week	• Continue to observe finance department s in hospital. • Join or participate in a corporate health camp organised by hospital

Weekly Report - 9

Name of the Organisation: EHCC Hospital, Jaipur

Department: Quality Department **From:** 07/07/2025 **to** 12/07/2025

Activity Done	• Overview of the finance department. • File audit of Blood Transfusion checklist. • NABH checklist audit of radiology department. • Data analysis and prepared presentation of SIP Topic.
Linking theory (Classroom learning) with practice at your organisation	• Gained knowledge on the concepts of "Essentials of Hospital Services". • Applied concepts of "Financial Management" and "Biostatistics".
Gaps identified on the working area	• Inconsistencies in documentation or incomplete checklists identified during the audit. • Non-compliance with specific NABH criteria in the radiology department. • Challenges in data collection or interpretation, or areas for refining the presentation content.
Suggestions for improvement	• Standardize documentation procedures and provide refresher training on the blood transfusion checklist. • Refine data collection methods and enhance presentation clarity and impact.
Plan for the next week	• Follow-up on implemented suggestions for Blood Transfusion checklist. • Deliver the SIP presentation and incorporate feedback.

Weekly Report - 10

Name of the Organisation: EHCC Hospital, Jaipur

Department: Quality **From:** 14/07/2025 **to** 19/07/2025

Activity Done	• Overview of Medical Administration got to know about the working and coordination with doctors, nurses and other dept. • Submission of Final project and presentation to quality head. • Done the facility round audit on each floor.
Linking theory (Classroom learning) with practice at your organisation	• Gained knowledge on the concepts of "Essentials of Hospital Services"
Gaps identified on the working area	• Inconsistencies in documentation or incomplete checklists identified during the audit. • Challenges in data collection or interpretation, or areas for refining the presentation content.
Suggestions for improvement	• Standardize documentation procedures and provide refresher training on the surgical safety checklist.
Plan for the next week	• Follow-up on implemented suggestions for OT notes and surgical safety checklist. • Deliver the SIP presentation and incorporate feedback.

COMPILED REPORT

Name of the Organisation: EHCC Hospital, Jaipur

Department: Quality department

Name of the Student: Koshta Sanskruti Prabhat

Roll no: 1983 **Stream:** MBA Hospital & Health Management
From: 12/05/2025 **to** 19/07/2025

Activity Done	• HR and quality department will conduct documentation and orientation session. • Agreed upon and closed on the subject of SIP Prevention and Management of Deep Vein Thrombosis (DVT) in the ICU patients o Objective- To prevent pulmonary embolism, lower morbidity and prevent or reduce chances of developing post thrombotic syndrome. o All patients in MICU1, MICU2, MICU 3, CTVSICU, NeuroICU formed the sample size. o Examined several parameters, including ineffective prophylaxis when documentation is poor, inconsistency in the practice and ignorance of the staff members working in the prevention of DVT. - followed up all patients and primarily in patients who has symptoms of DVT. o Evaluated the results and analyzed. o Taken advice of doctors to come up with gaps and give good recommendations to nursing staff. • Went around and saw different departments to get to know their overview, functioning and operation in the hospital: - o CSSD: Got to know about sterilization operations, green linen and how surgical equipment is rewashed/packaged to be used again. o OPD: An out-patient observation in point- of-reception- billing- consultation- investigations. o RGHS Counter: Learnt about the government health schemes. Got to know the list of departments within RGHS which are empaneled

	at EHCC. Enrolment- administration- billing- care- release. o ER Module: Learned to understand how emergency triage, early treatment and recording took place in an emergency. o IPD Pharmacy: monitored the procedures on how IPD pharmacy is receiving the prescribed order- packs the drugs- send it to the nursing station- received by the patient. I also got to know about their inventory management. o General store: Got to know about procurement, how the stock should be replenished and how its supply should be done to the rest of the departments. o Dietetics: Note the rounds of the dietician, creation of tickets, meal preparation by the requirements of the patients. o Food & Beverages: I had noticed the preparation of the meals of the patient based on the tickets issued by the dietician and how they are arranged and supplied to the patients after the correct procedure at the correct time. o Security: Comprehended the system of hospital security. Identified many protocols that security guards ought to observe. Was informed on the practice of fire drills. o Biomedical engineering: gained an idea about the engineering part of the hospital. got to know about how the medical equipments have to be maintained and calibrated. o Dialysis: Learned the process, patient care and an emergency response. o Housekeeping: Visited cleaning schedules, infection control, area wise cleaning practices and protocols. Also observed house keeping with other departments being coordinated. o TPA: got to know about insurance claim processing and discharge process. o PCS: was familiarized with different healthcare packages. witnessed patient coordination, enlightenment and experience which was improved.

	○ Medical records department: Got knowledge on maintenance of files, MLC cases, and documentation requirements. Acquainted with different procedures of the department. ○ Management of ambulances: Learned the logistics, procedures of dispatch, and coordination of the individual moving of patients. ○ Digital Marketing: had acquired the knowledge of different resources to be utilized in hospital branding through google reviews, search engine optimization, actualization of visible feedback systems. Small description of tele-talk department. ○ Blood bank: Got to know how the blood is collected, stored and distributed so that there is supply and demand at all times. Learned also the aspect of counselling. ○ Department of projects. ○ Department of engineering. ○ Finance: knowledge of the revenue collection in the hospital such as billing and cost monitoring as well as patient account and budget. ○ Infection control department: Got to know about its services in preventing and controlling hospital acquired infections. ○ Medical Administration department: Acquired knowledge on how the department achieves an effective process of coordination between clinical and non-clinical activities of the hospital. ○ IDTR (interdisciplinary teams round): the rounds involved in inspection of the admitted patients by the HODs to discuss about their experience and to overcome any issue raised by the patient in due time. Floor management: visited the nursing station and observed the day-to-day functioning. Coordination of nursing staff with other departments like IPD pharmacy, Housekeeping, dietetics, FandB, billing etc. Observed the patient movement management from admission to discharge. • Did audits: - ○ Ward audit: A nursing station was audited. Assessment of signages displays, checklists

	recording, medication utilization, controlling infections and equipment management. The procedural and safety checks were performed, IPSG, Interviewed the staff. o Blood transfusion audit: Reviewed patient files to see whether the Blood transfusion consent forms and monitoring sheets were filled and documented in time. o As part of the facility round audit on floors, we evaluated different aspects such as signages, emergency exit doors, fire extinguishers, harmful obstructions, easy accessibility of basic equipment, sanitary facilities, lightings, counters, eye wash points etc.
Linking theory (Classroom learning) with practice at your organisation	• Application of knowledge of Organizational Behavior and Essentials of Hospital Service. • Learnt new information on the Utility Services and Supply Chain Management. • Corresponding Financial Management & HRM to hospital activities. • Similar terms of Organization Behavior, Financial Management, Biostatistics. • Knew marketing concepts, patient counseling, branding. • Could match up: o NABH Guidelines. o Planning of hospital. o Capacity building of the HR. o Patient satisfaction and quality management. o Hospital information system. o Codes of disaster management. o Supply chain (IPD pharmacy). o Hospital operation process. o Distribution of resources. o Legal aspect and ethics of medicine. o Strategic management. o RCA/CAPA. o Gap analysis.
Gaps identified on the working area	• Lapse in communication among nursing personnel. • Incomprehensive and erroneous recording of DVT. • Limited application of prophylaxis, especially among patients who are at moderate risk of DVT. • Lack of personnel in the ICU with DVT procedure.

	• Variation in ICU procedure. • Sheets were provided by blurred and outmoded reassessment. • The prophylaxis is also not undertaken in most cases as it can even risk some bleeding unless well taken into consideration since there is no contraindication column. • During the interviews, some of the staff members were unable to remember the important elements of bundles. • The missing real time feedback system. • Variations in feedback and vital sign documentations. • Crowding in canteen at rush hours. • Brand-wise shortage of counsellor in Patient Care Services (PCS). • The lack of coordination between clinical and non-clinical terminologies led to poor delivery of services such as late delivery of diet. • Shortage of backup when a lot of emergency is present in the administration of the ambulances. • Periodic delay in scanning MRD. • PCS does not have a patient counsellor to take charge of health packages. • That part is taking a lot of time in pre-authorization and discharge approvals. • Juniors of the staff not able to provide a few answers of written protocols questions during ward audits. • There are some instances in which blood transfusion forms and monitoring sheets were filled partially. • Lack of documentation of dietetic advice and medication briefed to the patient/attendant.
Suggestions for improvement	• Altered documentation of DVT which I have performed. • The form should be filled by the doctors, or in case it is impossible, doctors can read it once. • Putting audit teams to review check list documentation. • Educate nurses regarding the need to timely document DVT. • Inter-shift meetings on regular basis to synchronise with patient care. • Carrying quarterly refresher training on the elements of bundle to the staff. • Reliance on real-time debrief activities to be done after procedures to accumulate feedback. • Make random spot checks and feedback on the same.

	• Install pre-order or food collection with the app at the canteen. • Train cross-skills to the nurses /social workers in basic counselling. • Implement the barcode scanning to accelerate the processes of document digitalization. • Advance notice to the TPA desk on forthcoming discharges in order to enable them to clear paper work in time and in a smooth manner. • Recognise the value of proper documenting of forms and monitoring sheets in shift handovers and treat it as a way of giving feedback on audit as well as areas to improve on.
Key learnings	• Realized the need of DVT evaluation and reevaluation risk in ICU individuals, which may lead to numerous issues being related to patients due to calf being considered as a second heart of the body. • Experienced some hands-on learning of collecting, organizing as well as analysing data to check quality. • Examined the methods of collecting the feedback of patients and evaluating them to ensure continuous improvement. • Learned the absolute relevance of different factors such as signages, emergency exits, hygiene etc in the safety of the patient and staff. • Learned to perform audits and use checklists in the evaluation process adhering to the hospital protocols. • Attained the knowledge of how training, awareness and adherence has a direct impact on prevention of HAIs. • Learned the significance of proper documentation in a timely manner. • Acquired the knowledge of NABH requirements and how they can be applied in hospitals. • Acquired interdepartmental coordination in order to better the services of patient care. • Monitored movement of medical records and documentations in hospital. • Was able to be more confident in the way it approached them to communicate with healthcare professionals, including nurses and head of departments. • Learned how outsourced services affect the internal functions of the hospital.

	• Acquired the knowledge of the inventory management in hospital. • Learned the hands-on experience of co-related theory. • Liked the way the whole system of a hospital works since a patient arrives in the hospital to his/her discharge and talk about clinical and non-clinical care.

Signature of the student