Summer Training at
Eternal Hospital, Jaipur, Jaipur
(April 3 to June 2, 2017)

- **Study on Attributes for Choosing Healthcare Facilities in Jaipur city**
- **Designing Marketing Mix of Wellness/ Healthcare Package for Eternal Hospital According to the need and Prevalence of Disease in Jaipur City**
- **Study on Disease based Preference of Hospital and Factor Which can Affect or Change these Preferences**

By
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Under the guidance of
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MBA Hospital & Health Management
2016-2018

Institute of Health Management Research
The IIHMR University, Jaipur
2017

INSTITUTE OF HEALTH MANAGEMENT RESEARCH
(WHO Collaborating Centre for District Health System Based on Primary Health Care)

IIHMR UNIVERSITY

CERTIFICATE

This is to certify that **Brijmohan Munjal** has undergone summer training in **Eternal Hospital , Jaipur** from **3rd April to 2nd June 2017**.

The candidate himself completed the project assign to him during summer training. His approach to the project was sincere and proactive. This summer training is in partial fulfillment of the course requirement recommended for the award of MBA in Hospital and Health Management.

I wish him success in all his future endeavors.

Col. (Dr.) Ashok Kaushik
Dean (Academic & Student Affair)
The IIHMR University, Jaipur

27-06-17.

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EHCC ETERNAL HEART CARE CENTRE & RESEARCH INSTITUTE "Where good care leads... good health follows"

ETERNAL HOSPITAL

Unit of Eternal Heart Care Centre & Research Institute Pvt. Ltd.

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TO WHOMSOEVER IT MAY CONCERN

This is to certify that **Brijmohan Munjal** student of **IIHMR, Jaipur** has completed his internship at **"Eternal Hospital, Jaipur"** from **03rd April 2017 to 02nd June 2017**.

During this period, he has successfully completed his projects on:

1. Designing Marketing Mix of Wellness/Healthcare Package for Eternal Hospital according to the need and Prevalence of Disease in Jaipur city.
2. A Study on Attributes for Choosing Healthcare Facilities in Jaipur city.
3. A Study on Perception of People regarding Healthcare/Wellness Facilities.
4. A Study on Disease Based Preferences of the Hospitals and Factors which can Affect or Change these Preferences.

He comes across as a committed, sincere & diligent person who has a strong drive and zeal for learning.

We wish him all the best for future endeavours.

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

Ashok K Jeenwal
Manager - HR

ACKNOWLEDGEMENT

The internship I with Eternal Hospital, Jaipur was wonderful chance for learning professional development. Therefore, I consider myself as a very fortune individual as I was provided with an opportunity to be part of it. I am also grateful for having chance to meet so many amazing people and professionals who lead me through this wonderful internship period.

Bearing this thing in my mind I am using this opportunity to express my deepest gratitude and special thanks to Mr. Sachin Singh (assistant general manager) and Mr. Ashish Khuteta (senior manager) for allowing me to carry out my summer training and project in the esteemed organization.

I express my deepest thanks to Mr. M.L Chaudhary (O.T Manager), who in spite of being very busy with his duties, took time to hear and guide me.

I would like to thanks Dr. Bhawani Singh (Head of Medical Record Department), Mr. Kishore (CSSD Manager), Miss Manadavi Saxena (Floor coordinator of ER), Mr. Sunil Sharma (Pathology supervisor) for giving necessary advices and guidance.

I also want to extend my thanks to Dr. S.D Gupta, Director The IIHMR University for incorporating right attitude towards learning and Col. (Dr.) Ashok Kaushik, Dean academics and Student affair, for helping me and supporting me to reach my goals and endeavors.

Finally, I acknowledge my indebtedness to Dr. Sandesh Kumar Sharma my guide and Dr. Seema Mehta, Dr. Neetu Purohit, Dr. Sunita Nigam and Dr. J.P Singh for their constant support by guiding me throughout my training period.

Sincerely

Brijmohan Munjal

MBA-HM (2016-2018)

Roll No: 406

TABLE OF CONTENTS

ABBREVIATIONS

C

Cath- catheterization

CT-Computed tomography

CTVS-cardiovascular and thoracic surgery

E

ENT- "Ear nose throat"

H

HR- Human Resource Department

HDU- High Definition Unit

I

ICU-Intensive Care Unit

IPD-In Patient Department

M

MRI- Magnetic Resonance Department

MICU- Medical Intensive Care Unit

Mrkt- Marketing

N

NICU-Non Invasive Cardiac Unit

O

OT- Operation Theater

P

PAPI- Paper and Pencil Interviewing

INTRODUCTION

Eternal Hospital, Jaipur is the state of the art tertiary care hospital in Rajasthan State embarking on the mission of redefining patient care with international clinical excellence and advanced technology. Eternal hospital is one of the latest and advanced tertiary care facilities under the visionary of Dr. Samin K Sharma and his wife Mrs. Manju Sharma boosted with great expertise in healthcare by leading clinician, astute management team supported by highly trained clinical and non-clinical staff.

Eternal Hospital states latest addition of tertiary care hospital which brings together the state-of the-art medical infrastructure, cutting edge technology and well integrated and comprehensive information system along with quest for exploring and developing newer therapies. To serve the society at large we have energetic, enthusiastic, forward looking, devoted and able technical expertise of consultants from within and outside the country. Eternal Hospital is stand up by the trained supportive staff, efficient system procedures in affiliation with Mount Sinai Medical Centre, New York with an aim to serve the needs of Rajasthan State and people across the globe promoting the medical tourism.

ORGANIZATION PROFILE

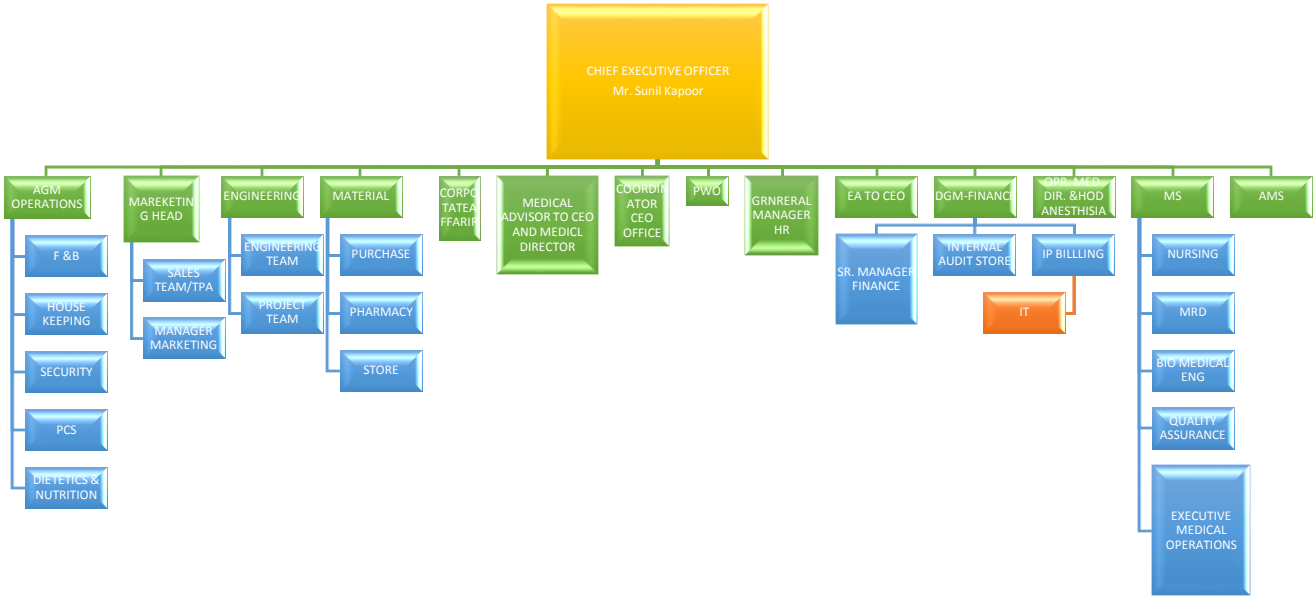
Vision

A Centre of excellence in area of medicine with highest international standard at affordable cost for the community around the globe.

Mission

To redefine healthcare by improving outcomes and experience of patients through cutting edge research and personalized clinical care including innovative, preventive, diagnostic, therapeutic and rehabilitation services.

EHCC THE LEADERSHIP TEAM



SERVICES OFFERED BY THE HOSPITAL

SPECIALITIES

- Anesthesia
- Dentistry
- Dermatology and Venerology
- Ear, Nose, Throat
- General Surgery
- Gynecology and Obstetrics
- Internal Medicine
- Orthopedics & Joint Replacement
- Pediatrics
- Physiotherapy
- Pulmonology

SUPER SPECIALITIES

- Cardiothoracic & Vascular Surgeries
- Cardiac Anesthesia
- Clinical Psychiatry
- Diabetes and Endocrinology
- Gastro-Intestinal Surgery
- Interventional Cardiology
- Noninvasive Cardiology
- Nephrology
- Nuclear Medicine
- Neuro and Spine Surgery
- Pediatric Cardiology
- Plastic Surgery
- Urology

SUPPORTIVE SERVICES

- Department of Dietetics
- Physiotherapy

DIAGNOSTIC AND IMAGING SERVICES

- Blood Bank
- Pathology
- Critical Care
- Emergency and Ambulance Services

24 X 7 SERVICES

- Ambulance
- Pharmacy
- Emergency
- Laboratory
- Radio diagnosis

A QUICK TOUR

- 225 Bedded Super Specialty Hospital (Operational Beds-130)
- Modular “class 100” Operational Theatre
- 24 X 7cath lab
- 24 X 7 emergency with fully equipped ALS/BLS Ambulances
- Blood storage bank
- Nuclear medicine (gamma camera with stress thallium)
- Radio- diagnosis & Imaging sciences (MRI, CT scan, CT Angiography, bone densitometry, x-ray)
- Clinical Pathology-Biochemistry & Microbiology
- Pneumatic chute for quick sample transportation
- Transfusion medicine

- Non-invasive cardiology
- Environment friendly: use of solar energy, green building &recycled water
- Café lounge
- Library
- Seminar hall and conference roof

FLOOR PLAN

Basement 2

- Parking
- Medical record department
- Bio medical plant

Basement 1

- Dialysis department
- Dietician
- Kitchen
- Staff cafeteria
- Laundry
- IPD pharmacy
- Mortuary

Ground floor

- OPD
- Reception
- OPD pharmacy
- Billing and discharge
- TPA

- Radiology
- Cafeteria
- Prayer room
- Emergency department
- Nuclear medicine

M floor

- HR department
- CEO
- Finance department
- Library
- Auditorium
- IT department
- Quality Assurance Department
- Wellness lounge
- Blood bank
- Reception
- Plastic surgery
- Physiotherapy
- Pathology department
- Dental department
- Ophthalmology department

First floor

- ICU
- Consultants

Service floor

- CSSD

Second floor

- OT area
- Pre-Operative Ward
- CTVS ICU
- Surgical ICU
- MICU
- 6 OT
- 2 Cath lab

Third and Fourth Floor

- Wards

Fifth Floor

- Marketing Department

CLINICAL SERVICES

Those services are which are directly related to medical practice. These include

1. Outpatient department
2. Inpatient department
3. Accident and emergency department
4. Pathology department
5. OT
6. Dialysis unit
7. Physiotherapy department
8. CSSD

NON- CLINICAL SERVICES

Those services are which are related to administrative and non-medical side of the hospital. These include

1. Admission and Billing
2. Quality Assurance Department
3. Human Resource Department
4. Medical record department
5. Pharmacy
6. Housekeeping
7. Marketing
8. Finance
9. Information technology
10. Dietician
11. Food and beverages
12. Purchase department
13. Engineering
14. Patient welfare department
15. Bio medical engineering
16. Security
17. Laundry

CLINICAL SERVICES

Out Patient Department

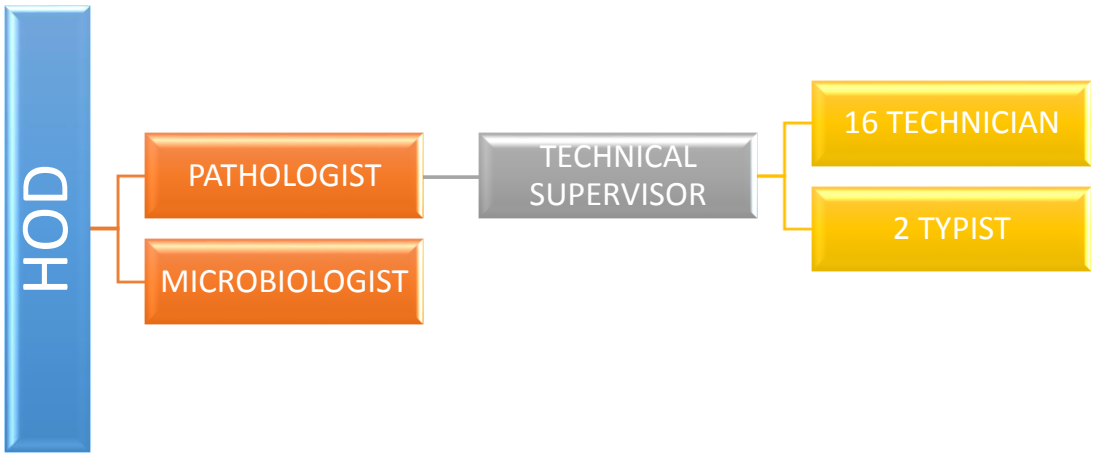
Patient who in the considered view of a competent professional do not immediately require hospital admission and who can satisfactorily treated on a domiciliary basis are classified as ambulatory patients and commonly called as out patients. Hence the department of ambulatory care is also known as outpatient department.

Inpatient Department: -

Inpatient department deals with patients whose Disease or treatment requires admission to a hospital. Recent development in modern medicine and the advent of comprehensive outpatient department and day care ensure that patients are only admitted to a hospital when they are severely ill or have severe physical trauma.

Pathology Department: -

All types of diagnostic test are performed here under the guidance of pathologist. There are fully automatic machines with provide the specific results. Some services are outsourced from different companies.



Operation theatre

All type of surgeries are performed here. There are SICU, MICU, NICU, HDU, CTVS and General ward. The services include invasive monitoring, patient assessment (physician, nursing, dietary and physiotherapy).

Dialysis unit

It deals with the artificial replacement of the lost kidney function in patient with renal failure to remove excess water and waste products from the blood

Physiotherapy: -

The department provides facilities such as Electrotherapy, Diagnostic, Manual, Mechanical mobilization Therapy, Exercise therapy etc.

CSSD: -

The department provides clean and sterile supplies which help in reduction of infection and improving the quality of care. The department provided infection control by educating staff on different topics

NON CLINICAL SERVICES

Admission and Billing: -

This is the department involved in the counselling to the patients, admission process and guiding them while billing is done after final discharge of the patients.

Quality Assurance Department: -

Headed to maintain and perk up the standards. Quality assurance (QA), the activity of providing evidence needed to establish quality in work and the activities that require good quality is being performed effectively. It included all those planned or systematic actions necessary to provide enough confidence that a product or service will satisfy the given requirement for quality.

Human Resource Department

The department helps to ensure the availability and retention of quality talent to meet organization goals and objectives and to provide overall growth and development of employee's orientation and functional training. The department looks into the matter like attendance and leave management, appraisal and promotion process, medical benefits, employee welfare programs, payroll management , grievance handling.

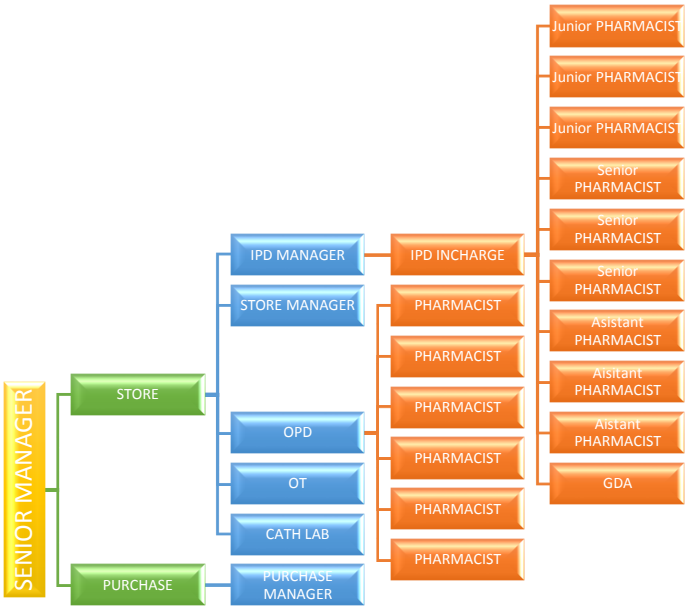
Medical record department

MRD is the custodian of all the discharged/expired health records documents. The MRD staff ensures the confidentiality, preservation, storage and retention of the documents.

The department deals with record collection, codification, storage, analytical evaluation and retrieval of record if needed.

Pharmacy

The goal of the pharmacy is to procure and provide medicines and surgical items to the patients. The pharmacy serves various areas of the hospital like customs, special wards.The Department services include procurement and providing medicines to the patients. The department also provides medicines to the wards if needed and give details to the billing department at the time of discharge of patients.

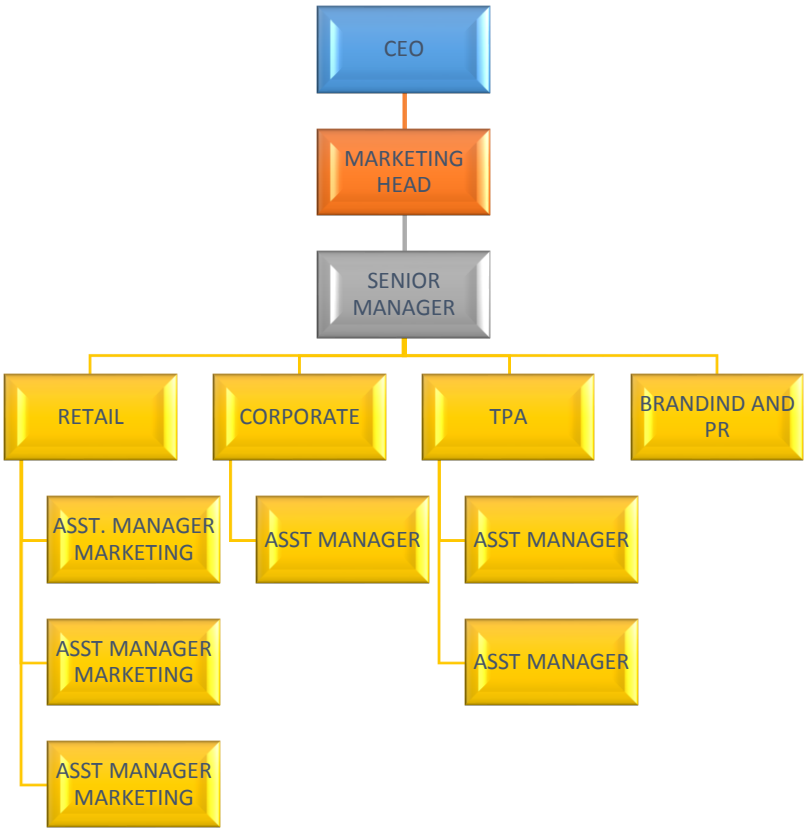


Housekeeping

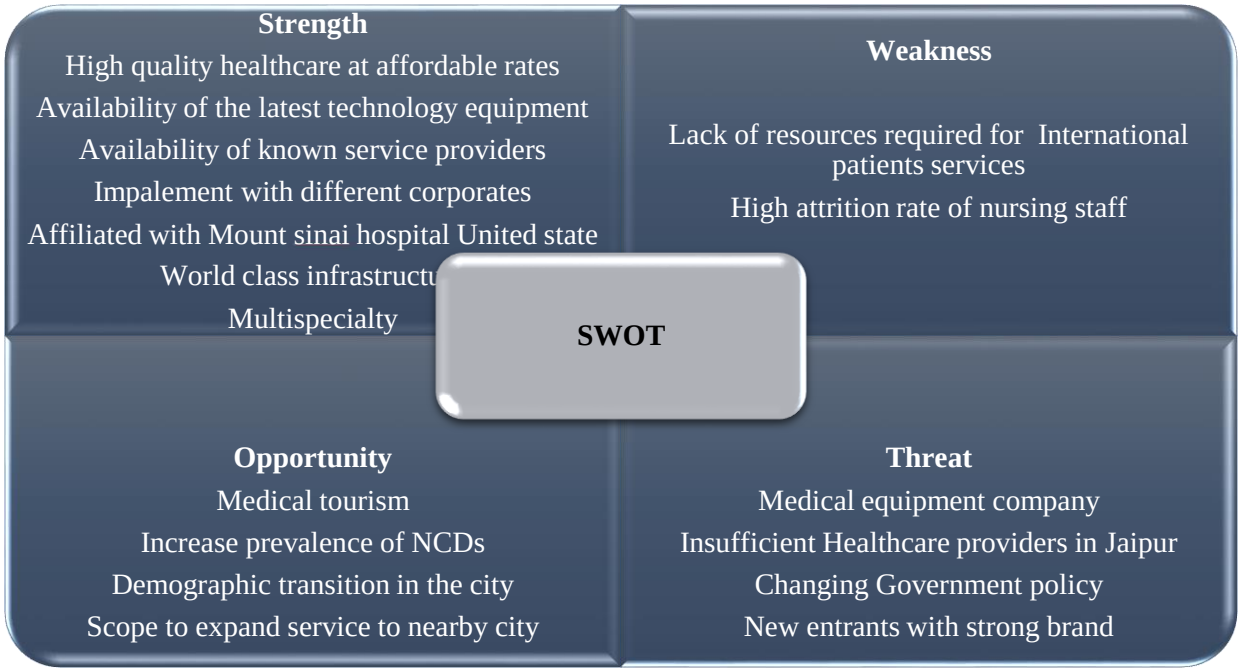
The aim of the department is to achieve defect free room with 100% hygiene and cleanliness to maximize patient's satisfaction along with minimum cost. The department performs activities like cleaning providing room amenities, pest controlling and waste disposal.

Marketing

The department is responsible for the revenue generation through brand building, retail sales, cooperate marketing, PR and media communications and liaison with the government. Some activities of the department are brand awareness, events management, cooperate social responsibility and ensure business and growth in line with organizational objectives.



SWOT Analysis of Eternal hospital



Finance

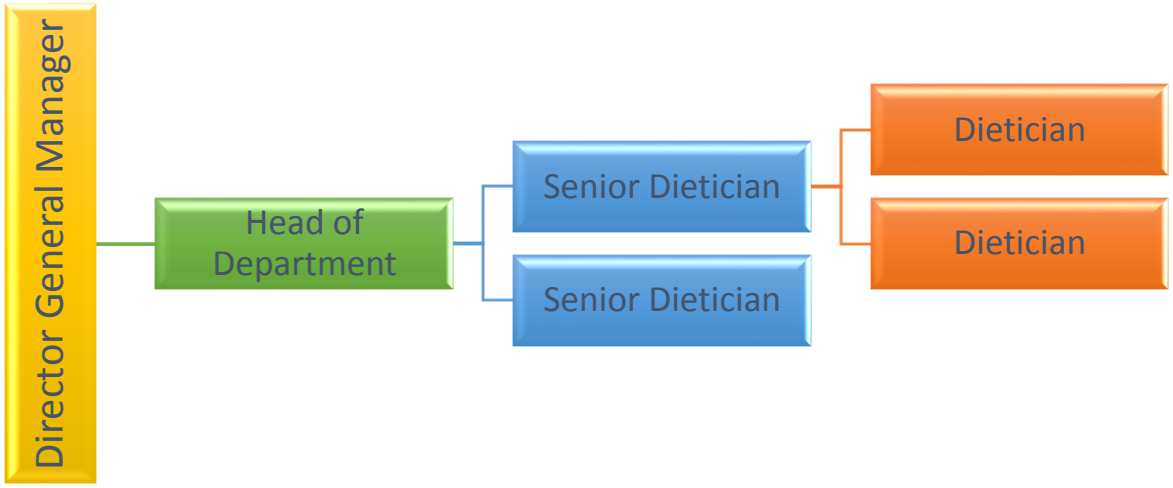
The department provides accurate relevant and timely financial information necessary in making the right business plan and decisions. The finance department looks into the business building insight, areas for lowering cost and improving profitability, updating of bills on daily basis for IPD patients. The billing staff has overall responsibility for coordination of various functions and daily basis report for the admission and provide the necessary solution to daily problems as deemed proper and reasonable.

Information technology

It department provides it values to the end users with respect to their day to day function. The department serves various departments for IT infrastructure, hardware and network, anti- virus services, internet services, upgradation of software, telecommunication between various departments, auditorium functioning.

Dietician: -

The department provides the food and beverages to the esteemed customers. The department performs daily audits of the store and kitchen areas, take round of the entire service area with and after the service timings, monitoring of services.



Engineering: -

The department manages all the engineering and machines, supervising day to day hospital maintenance work and ensuring smooth functioning of facilities of the hospital. The department coordinates with various department non-medical so that there is no hindrance in day to day work of all facilities. The department is responsible for managing plant engineering equipment, utilizes spares and consumables like diesels generators, plumbing, pipelines, ventilation, air conditioner, water treatment plants etc.

Patient welfare department: -

The departmental goal is to make and position the hospital as a center of excellence by ensuring customer satisfaction through personalized customer care. The department manages patients attendants expectations as well as keeping the interests of organization alive, improves the quality of the services for the patients through feedback given by the, networking within the organization for the benefit of the patient and attendant.

Bio medical engineering: -

The department installs commission and maintains all the medical equipment in an efficient and cost effective way and makes technical appraisal and recommendation for purchase of new equipment. The department provided inputs to commercial department about new/renew of contract with equipment supplier including annual maintenance contracts.

Security: -

The department provides proactive, competent services, to protect the life and property of every individual present in the primases, to prevent any action or situation that might result in an injury or death when a patient/attendant/visitor/employee are lawfully on the hospital premises.

Laundry

The department delivers spotlessly clean and hygiene linen and uniforms to the users of different departments. The department maintains records for issued linen, received linen, new linen and alteration if needed. The department treats infected/contaminated linen, treats heat labile linen.

Project: - A Study on Attributes Affecting for Choosing Healthcare Facilities in Jaipur city

INTRODUCTION

Astoundingly growing population and lack of healthcare service providers are the important bottlenecks for the growth of the society. As such with the rapid explosion of population and insufficient healthcare facilities in governments hospitals, corporate and private hospitals in the society have been playing a vital role. Even though there are many government hospitals which include CHC, PHC, District hospital and Medical colleges, which are providing health services to the populace of the region, the services rendered is inadequate in terms of quantity and quality. The demand of health services in private and corporate hospitals is increasing every day because of the certain factors like better treatment and facilities provided to the patients.

Preference of the patients for the selection of a hospital for treatment purpose varies from patient to patient. It also changes from time to time. The variation may be due to multiple reasons. Preference may be because of site of the hospitals, expenditure in the treatment, infrastructure available with the hospitals, other patients' suggestion, doctors' reference etc.

REVIEW OF LITERATURE

Ankur, Kumar Sanjeev (2015) according to them Good doctors was the prominent reason for selecting the hospitals followed by, easily available facilities and low cost services. Nearness to the hospitals was on fourth and recommendation from the friends and relatives was on fifth preferred reason while choosing a hospital. Motwani & Shrimali (2014) according to them, the growing importance of service marketing, hospital administrators are becoming increasingly marketing oriented. Chen & Kao (2011) found that the top six marketing-related ways influencing consumers' choice of hospitals are: free medical advice, referral by known person, free clinic treatments, the mailing of clinic schedules to potential customers, TV news exposure, and providing education in public health and hygiene. Escarce et al. (2009) examines the hospital characteristics that are associated with patients choosing rural hospitals. He used data from California hospitals, the research showed that patients were more commonly choose nearby hospitals, larger hospitals, and

hospitals that offered more services and technologies. Kumar et al. in 2013 stated in their research that most of the patients' survey were happy with the facilities they have taken at OPD, attitude of front desk Office Staff including Health Care Providers was found to be Satisfactory. According to Dubey et al. punctual staff, newspaper advertisement, Hospital close to residence, 24*7 o'clock emergency, hassle free admission process and less waiting time, well maintained medical device, OT equipment and advance technology, well trained doctor for treatment, Approach of the service provider to the patient, confidential treatment record are the most viable variables for selecting Hospital facilities in Bilaspur city.

RESEARCH QUESTION

- What are the most important attributes that influence the consumers in selection of the hospital?

OBJECTIVES OF STUDY

- To analyze different attributes which are consider to be important in selection of hospital facilities in Jaipur.

METHODOLOGY

- Research design - – Cross-sectional descriptive study
- Sampling design –Convenient Sampling
- Sample population- Shopkeepers, corporate and government employee, and retired.
- Sample Size –Total sample size of 312 were taken which include male and female both.
- Sample area – Which Cover North, South, East, West and Central Zone of Jaipur, major Sample Collected from nearby of Eternal hospital (Malviya Nagar, Sanganer, Mahaveer nagar)
- Tool and technique- Structured Questionnaire was used to collect primary data with PAPI
- Study duration-one and half month

RESULT AND ANALYSIS

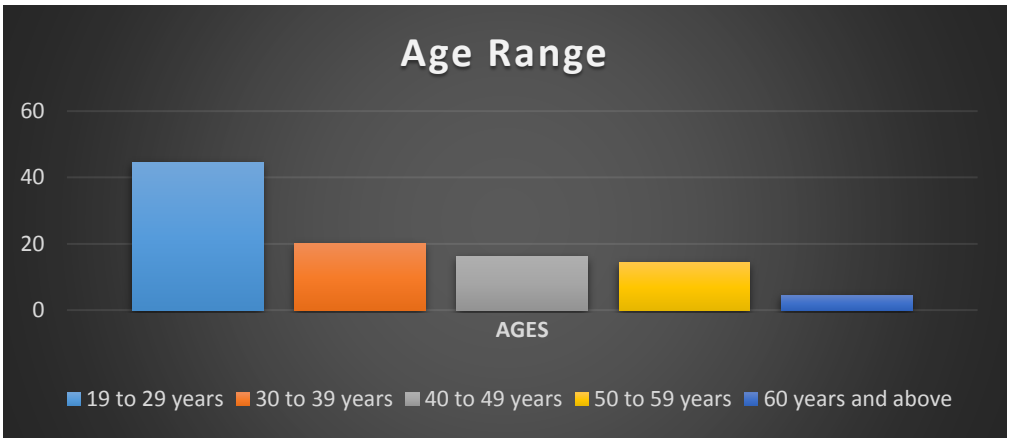


Fig no.1 show distribution of different age groups

Inference: There were 365 respondents out of which the correct response were taken from 312 respondents. The number of respondents from age group 19-29 were 44.6%, from 30-39 were 20.2% ,40-49 were 16.3%, and from 50-59 were 14.4% and above 60 years were 4.5% .The mean age of the respondents was found to be 35.5 years.

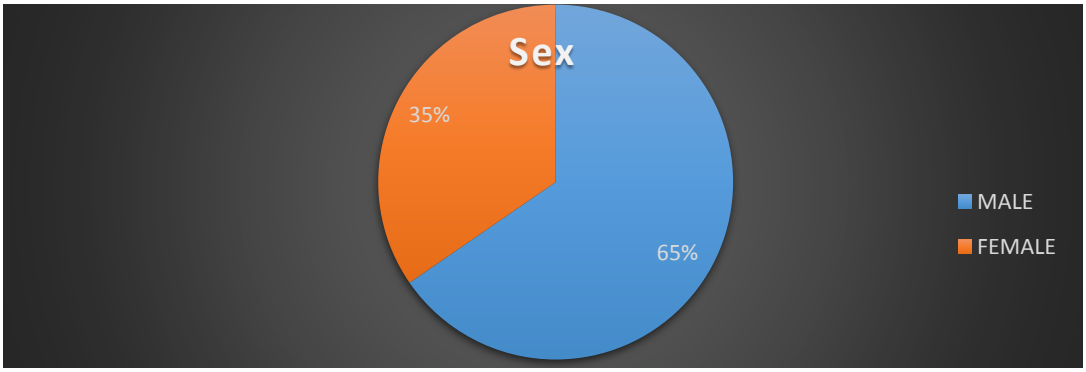


Fig no.2 shows that distribution of the sex in the collected sample

Inference: Out of 312 respondents 65% were male respondents and 35% were female respondents.

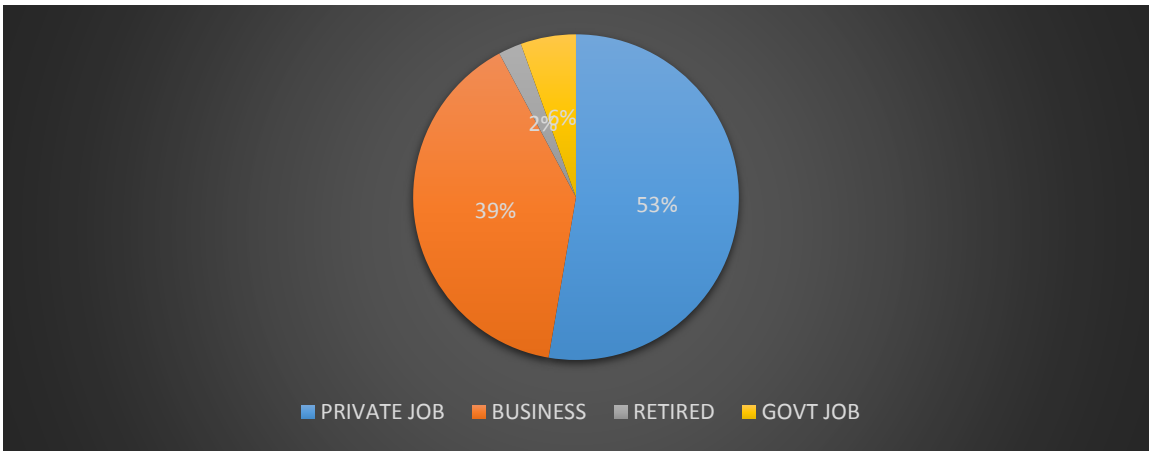


Fig no.3 shows that distribution of the different occupation in the collected sample

Inference: Among 312 respondents 53% respondents belongs to private job39% respondents were indulged in business 6% were in government job while 2% were retired.

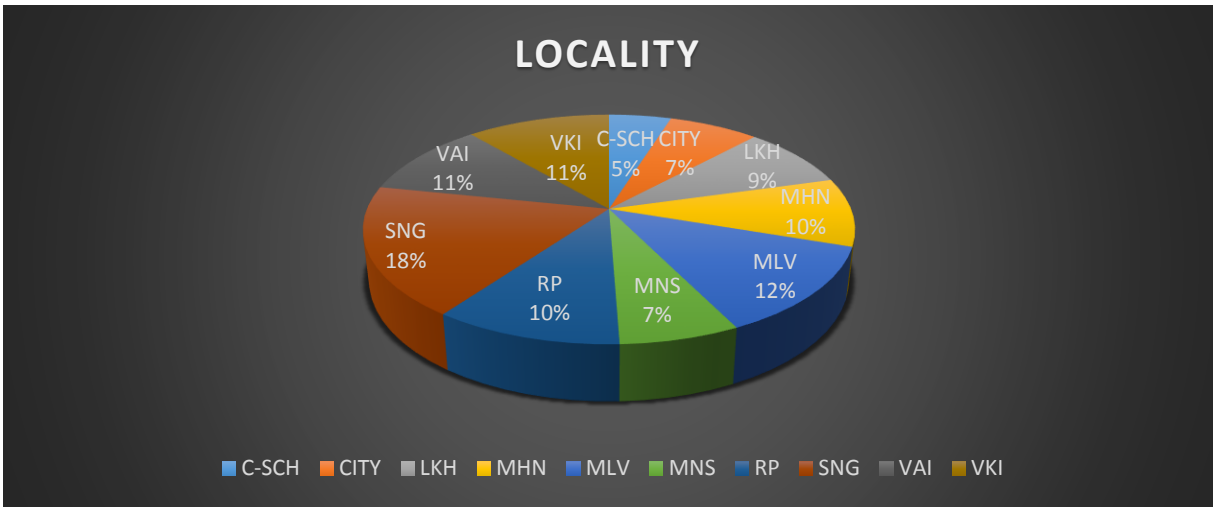


Fig no.4 shows that distribution of the area in the collected sample

Inference: Among 312 respondents 18% were from sanaganer, 12%from malviya nagar, 11% each from vaishali and VKI, 10% each from MHN and Raja Park, 7% each from mansarover and city, and 55 from c-scheme.

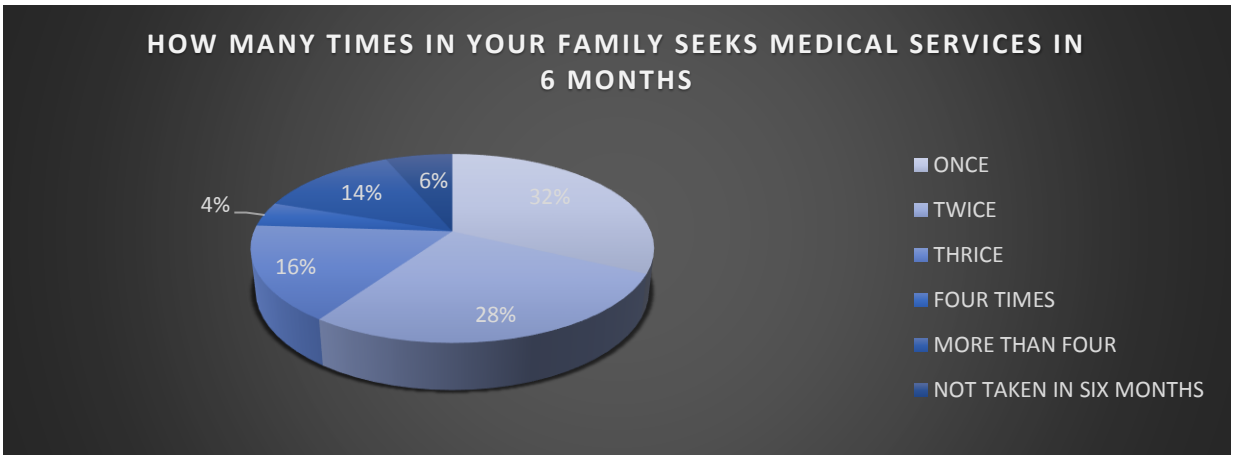


Fig no. 5 shows that distribution of percentage of numbers of times people seeks healthcare service in six months

Inference: **Out** of 312 respondents 32% visit hospital once,28% twice ,16% thrice,4% four times,14% more than four times,6% not taken in last six months

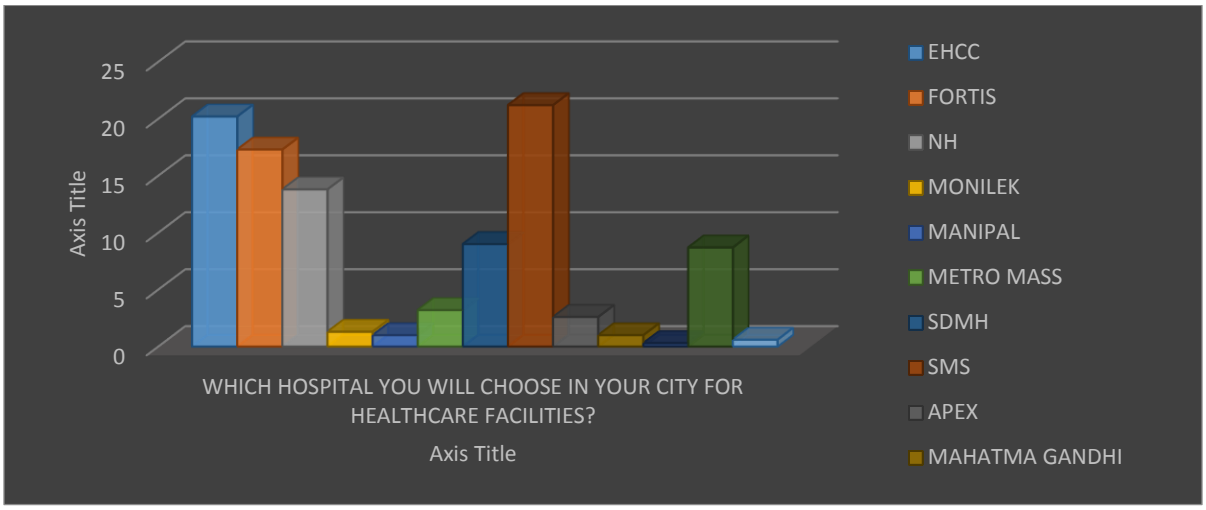


Fig no 6 shows that percentage of the hospital preference in the Jaipur city where patients wants to seeks service

Inference: Out of total respondent, 20.2% prefer Ehcc, Fortis 17.3%, NH 13.8%, Monilek 1.3%, Manipal 1%, metro mass 3.2%, SDMH 9%, SMS 21.2%, and Apex 2.6%.

LIKERT SCALE	FEES OF THE OF THE HOSPITAL	NAME OF DOCTOR	INFRASTRUCTURE	CLEANLINESS
SRRN DIS A	9	5.8	10.3	3.8
DIS A	12.2	6.7	10.6	6.1
N A NOR DIS A	15.7	7.7	17.7	8
AGR	34.9	36.9	34.4	31.1
STRN AGR	28.2	42.9	27	51
Total	100	100	100	100

LIKERT SCALE	NEAR TO HOME	TRUST ON THE HOSPITAL	BEHAVIOR OF HOSPITAL STAFF	LESS WAITING TIME	BRAND NAME OF THE HOSPITAL
SRRN DIS A	5.4	4.8	7.7	9.3	5.1
DIS A	4.8	6.7	8	10.9	14.1
N A NOR DIS A	15.7	10.6	15.1	19.9	12.2
AGR	41.3	48.1	42.4	37.5	41.7
STRN AGR	32.7	29.8	26.7	22.4	26.9
Total	100	100	100	100	100

LIKERT	KNOWN ONE IN THE	DIFFERENT SPACIALITIES	ADVANCE	ADVANCE RADIODIAGNOSIS	PARKING AREA	ACCREDATION

SCALE	HOSPITAL		TREATENT			
SRRN DIS A	10	5.4	6.7	7.1	7.1	9
DIS A	9.4	6.1	6.4	8.7	13.1	11.5
N A NOR DIS A	15.5	12.8	13.5	14.1	16	15.4
AGR	38.1	40.7	41	47.4	39.7	42.9
STRN AGR	27.1	34.9	32.4	22.8	24	21.2
Total	100	100	100	100	100	100

LIKERT SCALE	PHYSICIAN REFERE	ADVERTISEMENT OF HOSPITAL	WEBSITE SEARCH	PRACTO APP	AMBULANCE SERVICE
SRRN DIS A	9.3	17.7	23.8	30.4	13.5
DIS A	16	22.5	23.5	24	16.3
N A NOR DIS A	19.9	21.9	23.2	18.9	14.4
AGR	37.5	26.4	21.5	19.6	35.9
STRN AGR	17.3	11.6	8	7.1	19.9
Total	100	100	100	100	100

Inference:

Out of all twenty Attributes for choosing a hospital, cleanliness, Near to Home, Different specialties in one roof, Name of the doctor, and Trust on the hospital, have proven to be most important factor in our analysis these Attributes are most influencing in choosing the hospital.

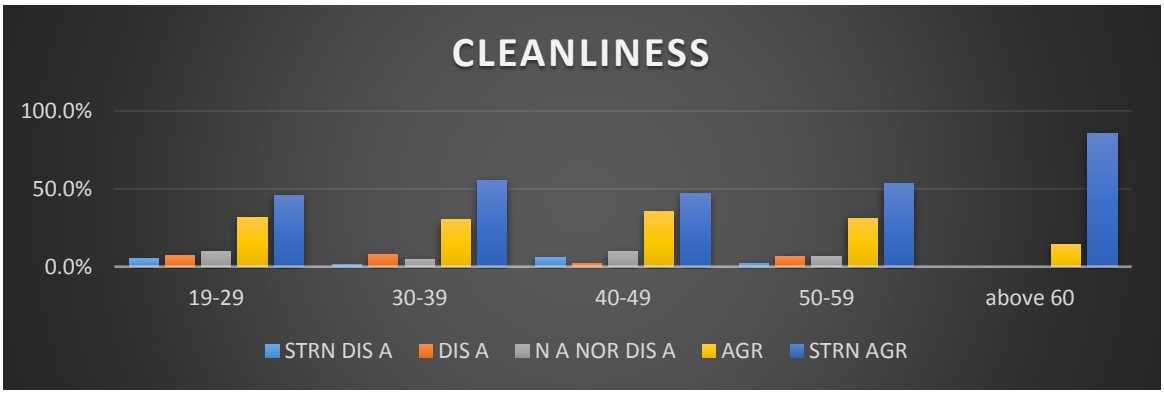


Fig 7

Inference:

After the cross tabulation of cleanliness with age groups the analysis would reveal that cleanliness is most important attribute for the above 60 age group, and 30 to 39 years of age group people.

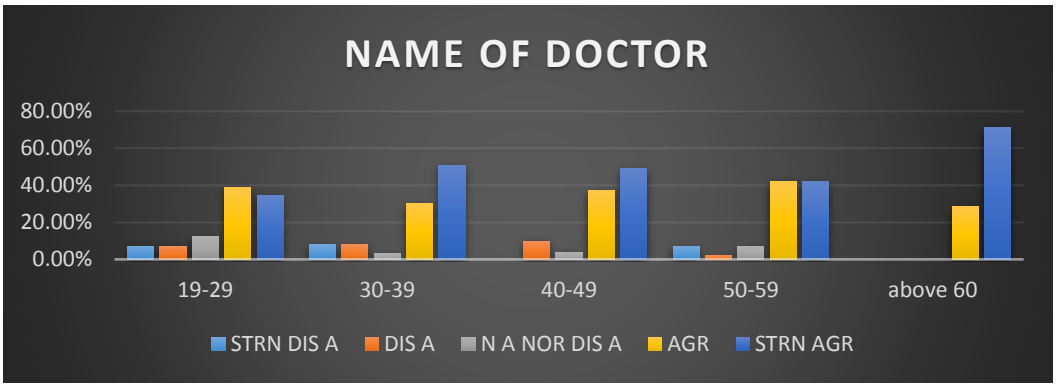


Fig 8

Inference:

After the cross tabulation of Name of Doctor with age groups the analysis would reveal that Name of the Doctor is most important attribute for the above 60 age group, and 40 to 49 years of age group people.

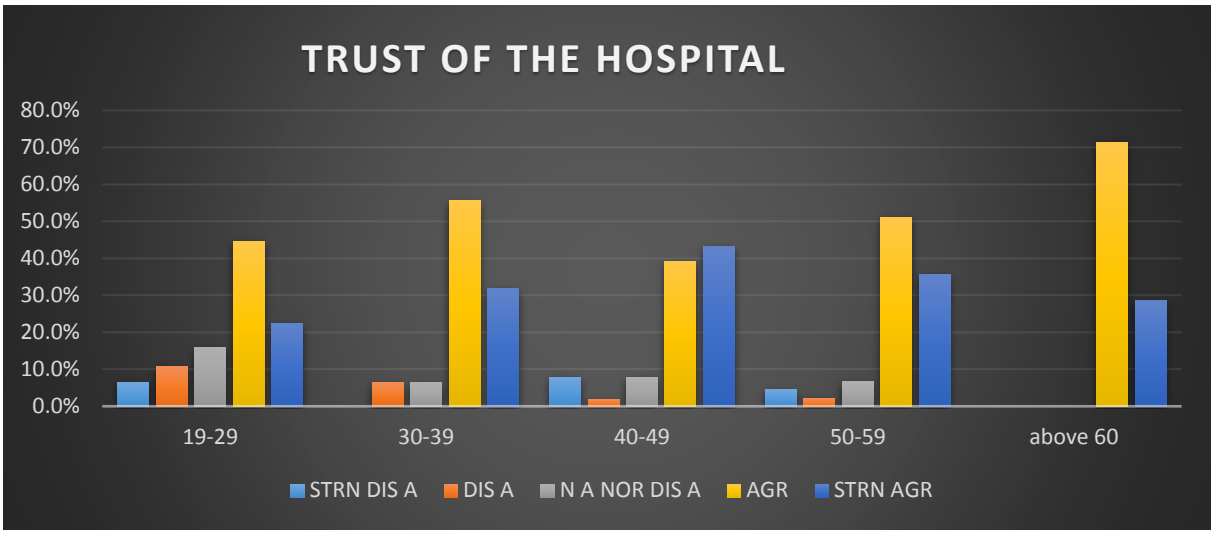


Fig 9

Inference:

After the cross tabulation of Trust on the Hospital with age groups the analysis would reveal that Trust on the Hospital is most important attribute for the above 60 age group, 30 to 39 years of age group people and 50 to 59 age group of people. Most of the age groups are agree in the attribute with more than 70% agree in 60 and above age group, 50 to 59 with more than 50% and 30 to 39 with more than 55%.

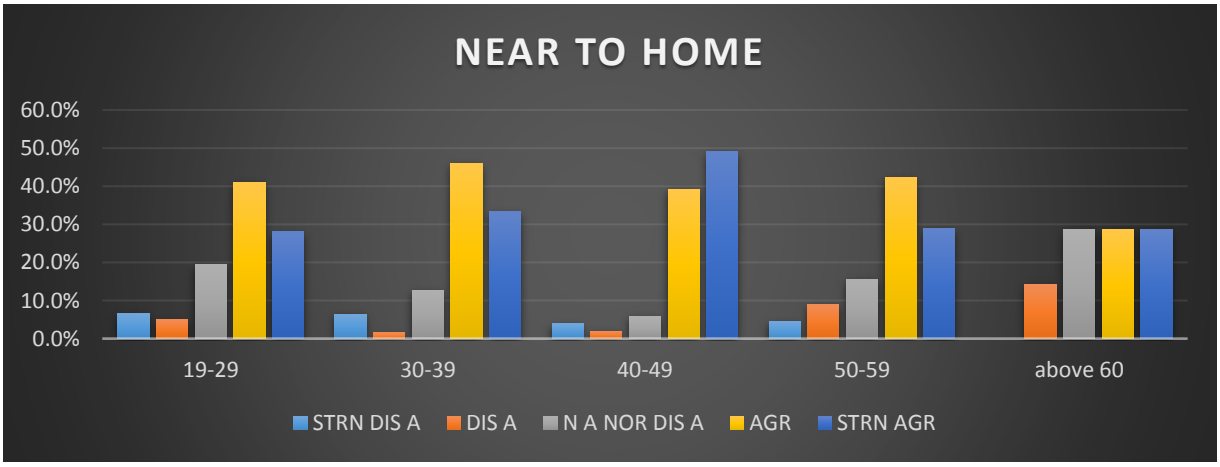


Fig 9

Inference:

After the cross tabulation of Near to home with age groups the analysis would reveal that Near to Home is most important attribute for the 40 to 49 age group, 30 to 39 years of age group people and 50 to 59 age group of people.

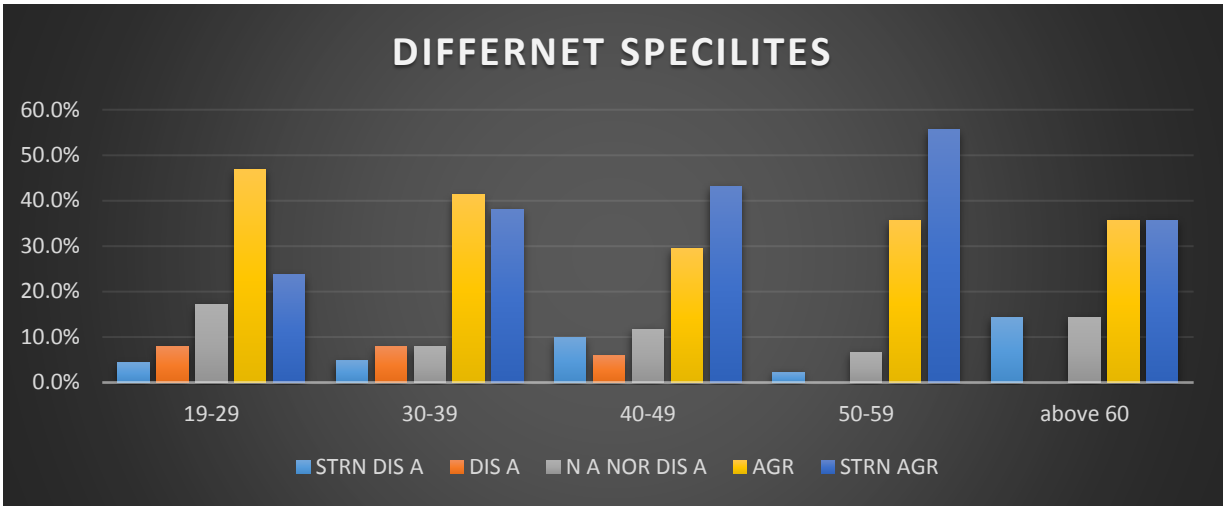


Fig 10

Inference:

After the cross tabulation of Trust on the Hospital with age groups the analysis would reveal that Trust on the Hospital is most important attribute for the 50 to 59age group, 40 to 49 years of age group people and 30 to 39 age group of people.

Conclusion

According to the result of the present study, it concludes that main key attribute for selecting the hospital are, cleanliness, Name of the Doctor, Trust on the Hospital, Different specialties in one roof, and Near to home. Therefor these factors should be use as the marketing promotion method in the Jaipur city for Eternal hospital as Eternal hospital already have all these attributes.

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4) Sharma S.K and Chowhan S.S(2013), "Patient Survey to Measure the Quality of Care Provided by Health care Providers in OPD of Tertiary Care Hospitals" Indian Journal of Research, Vol. 2 No.2 ,208-209
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Project:

Designing Marketing Mix of Healthcare Package for Eternal hospital according to the need and Prevalence of Disease in Jaipur

INTRODUCTION

Wellness is an evolving process of becoming aware of and making choices toward a fulfilling sense of individual life accomplishments. Dimensions of wellness include both physical and mental components. Wellness describes a multidimensional state of being involving the existence of positive health, exemplified by the individual's experience of life quality and his or her sense of well-being

The health care market has become consumer centered and expecting high quality care at a reasonable price. As we are moving to service economy, the customers are more critical and keen towards quality services and high standards. As every one of us know patient is the important person in this changed environment, the hospitals must strive for maximum patient satisfaction. In deriving patient satisfaction, hospital marketing is playing crucial role. The future healthcare environment is likely to be characterized by more competition; tighter margins; more diverse, better informed, and more demanding consumers; demands for accountability; and growing labor shortages. Marketing may not be a panacea for this laundry list of challenges, but the judicial use of marketing resources can certainly contribute to their amelioration.

Research question

What is best product mix for the healthcare packages?

What is the best, information and selecting medium for healthcare packages?

What is the prevalence of diseases in Jaipur city?

Objective

To design the Product mix for healthcare packages

To identify best, information and selecting medium for healthcare packages.

To identify Prevalence of disease in Jaipur.

Literature Review

Lee, et al. in his study on "healthier lifestyles", said that, there is a steady increase in the utilization of national healthcare resources because of the changing age pyramid in recent years, along with the rapid increase in healthcare costs. Governments are searching methods to control the use of healthcare resources and hold the rise of healthcare costs[1]. Hoebel et al. in 2014 stated that, in several health care systems of developed nation, general health checks are administered for primary and secondary prevention of cardiovascular diseases, diabetes mellitus, and other chronic disease. Chronic diseases of life-style particularly Hypertension, DM and CHD account for millions of deaths each year globally. These diseases share similar modifiable risk factors, including tobacco smoking, alcohol consumption, hyperlipidemia, physical inactivity, obesity etc. That is why to identifying and modifying these risk factors have been advised as a strategy for their prevention and control in various diseases. According to Daivadanam M et al India has the second largest number (>61 million) of individuals with Type 2 Diabetes Mellitus (T2DM) in the world and this will be expected to nearly double by 2030. The national T2DM prevalence in 2011 was already 8.3 percent. Furthermore, a large proportion of individuals are at "high risk" of progression to diabetes which occurs more rapidly than in most developed countries. These observations, together with the high rates of complications and mortality associated with T2DM, demonstrate that diabetes prevention should be an urgent priority for the government and other organizations in India. Agardh E. et. al. study showed that, the world prevalence of diabetes has been estimated to rise from today's 220 million to 300 million by the year 2025, 1, 2 resulting in increasing number of subjects with severe complications in the cardiovascular system, kidneys, eyes and peripheral nerves. As the prevalence rises there is an urge to characterize determinants beyond traditional risk factors, e.g. sedentary behavior and obesity.

Epidemiology of Musculoskeletal Conditions in India task force project by ICMR new Delhi stated that, Musculoskeletal Disorders are one of the most leading causes of morbidity, have a substantial

influence on health and quality of life and impose an enormous burden of cost on the healthcare system. The existing knowledge on musculoskeletal conditions comprise over 150 diseases and disorders usually associated with pain and discomfort. They can broadly be categorized as joint diseases, spinal disorders and conditions resulting from trauma. Pain in neck and back are the primary manifestations considered for most spinal disorders. Non-specific spinal disorders were further classified based on duration of symptoms as acute (3 months or frequently in the past 6 months).

Natasha Hubbard Murdoch in his chapter book on health, illness and wellness, that the WHO's new definition of wellness is the optimal state of health of individual and groups. There are two focal concerns: the realization of the fullest potential of an individual physically, psychological, socially, spiritually, and economically and the fulfillment of one's role expectation in the family, community, place of worship, workplace, and other settings.

METHODOLOGY

- Research design – descriptive cross-sectional study
- Sampling design –Convenient Sampling
- Sample population- Shopkeepers, Industrial working people
- Sample Size –Total sample size of 312 were taken which include male and female both.
- Sample area – Which Cover North, South, East, West and Central Zone of Jaipur, major Sample Collected from nearby of Ehcc (Malviya Nagar, Sanganer, Mahaveer nagar)
- Tool and technique- Semi Structured Questionnaire was used to collect primary data with PAPI
- Study duration-one and half month

Results

Descriptive analysis done for the analysis of demographic variable like Age, and sex.

Descriptive analysis done for medical insurance percentage, chronic illness, numbers of times seeking medical services in six months, selecting the hospitals, decision maker in the family,

wellness packages, selecting the wellness packages, to know the best information medium, and to know by which medium they would like to select the healthcare and wellness packages.

Cross tabulation done to segmentation wellness packages, chronic disease vs healthcare/ wellness packages choice, and medical insurance vs healthcare/ wellness packages taken

Descriptive cross tabulation was done for further segmentation, targeting and positioning of wellness packages between age group (independent variable) and information medium (dependent variable) and for selecting medium and age group.

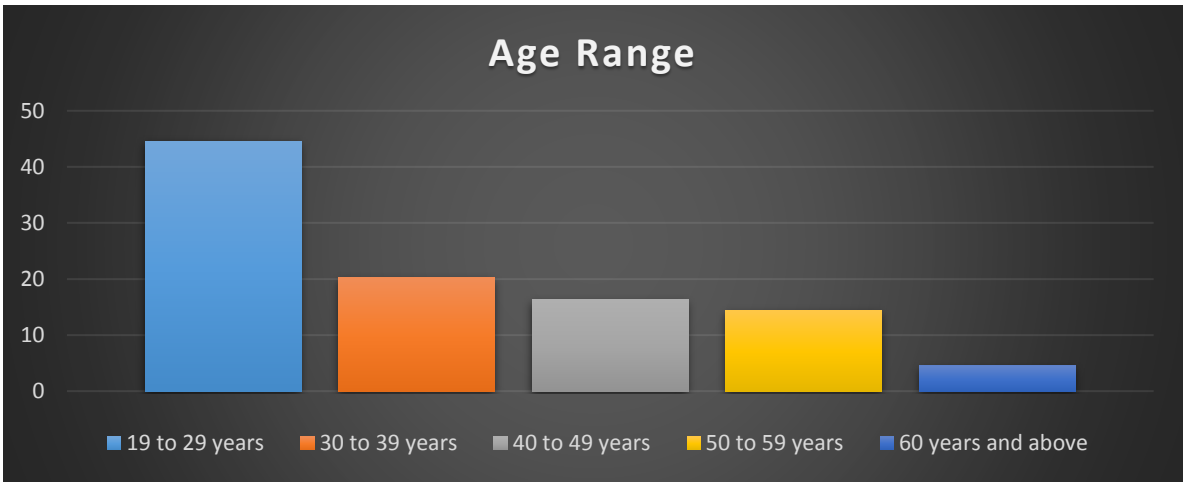

Fig no.1 show distribution of different age groups

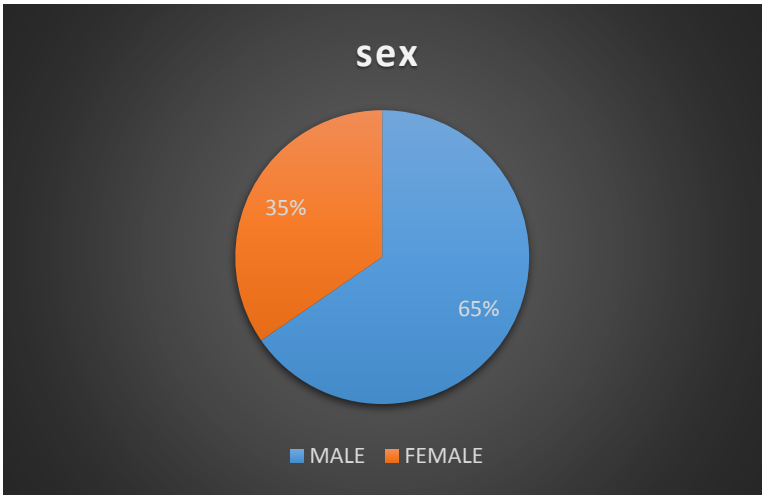

Fig no.2 shows that distribution of the sex in the collected sample

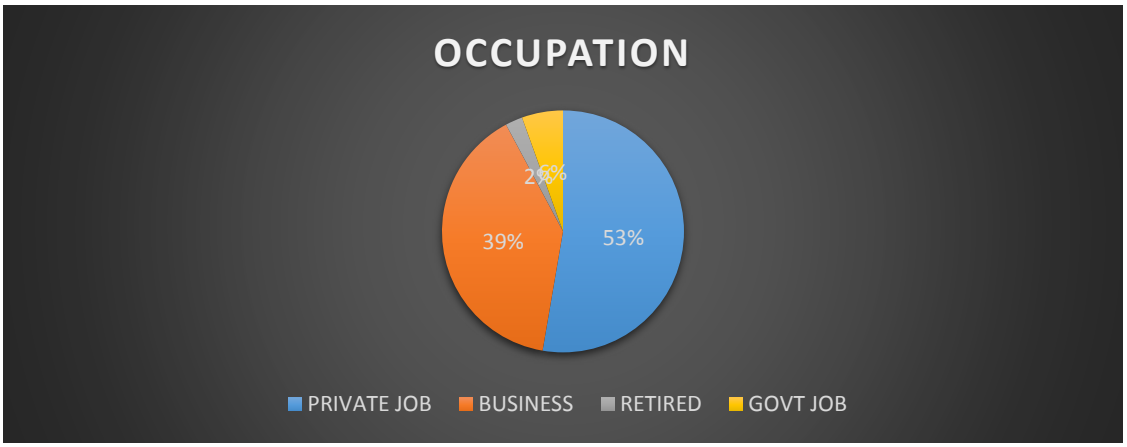

Fig no.3 shows that distribution of the different occupation in the collected sample

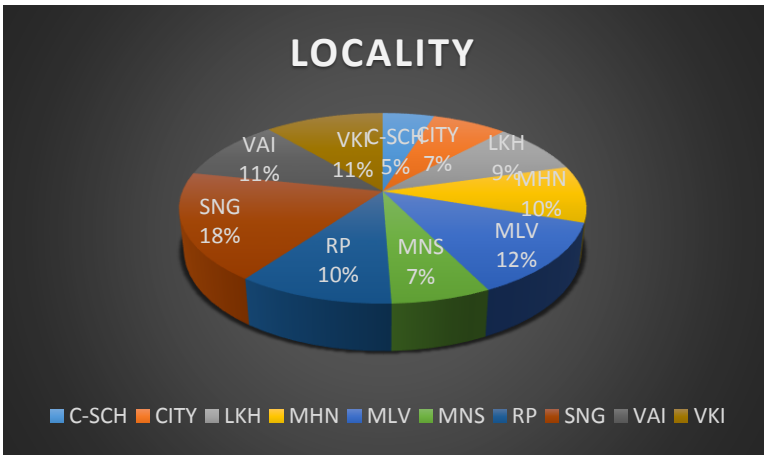

Fig no.4 shows that distribution of respondent localities from the collected sample

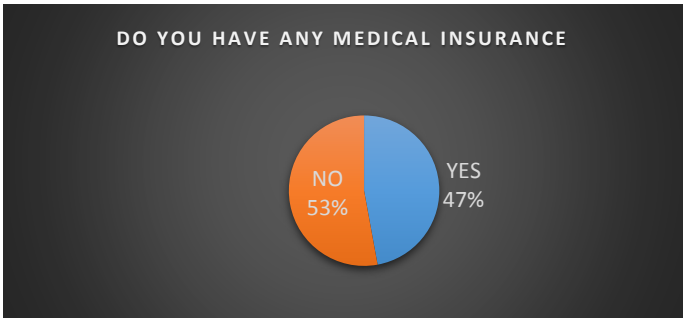

Fig no.5 shows that percentage of people have medical insurance in collected sample

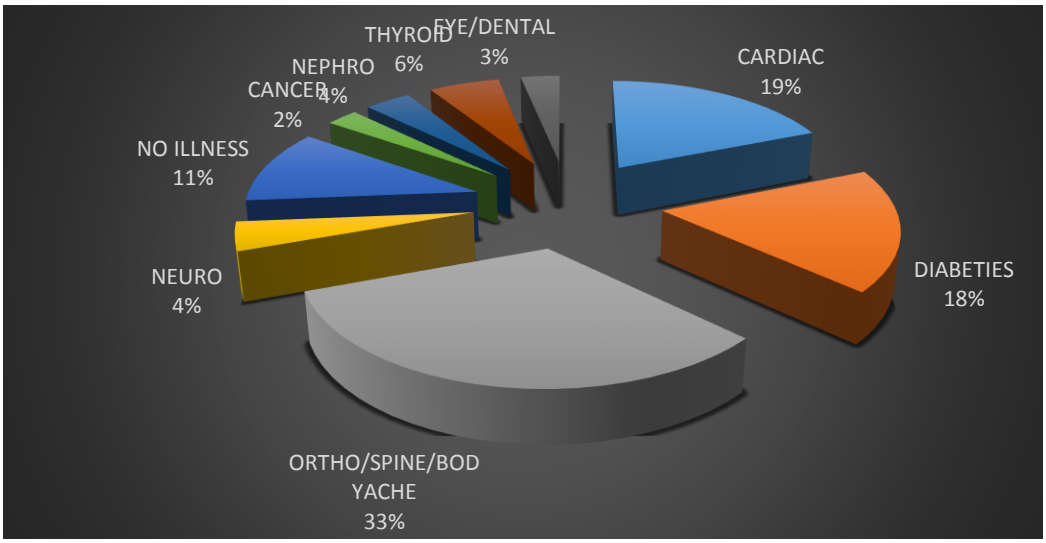

Fig no.6 shows that percentage of people have chronic illness and no illness in collected sample

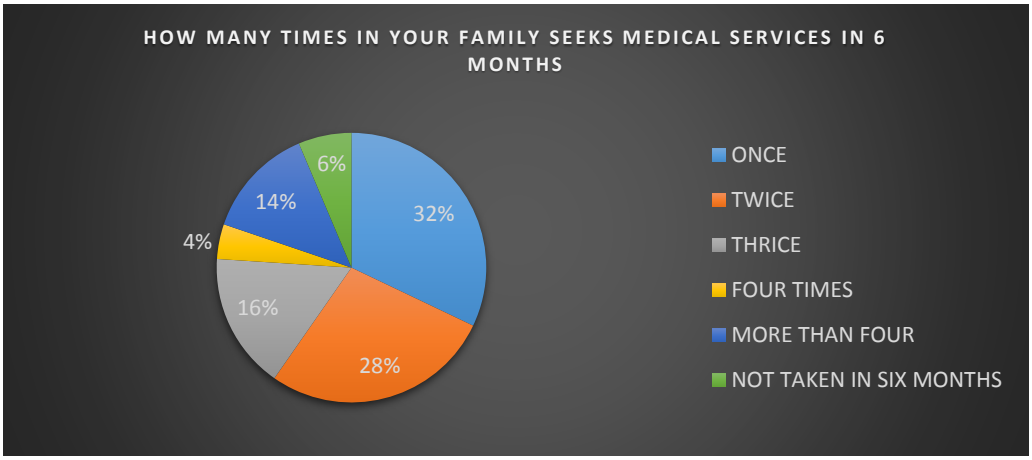

Fig no.7 shows that percentage of who visit a number of times in the hospital in six months

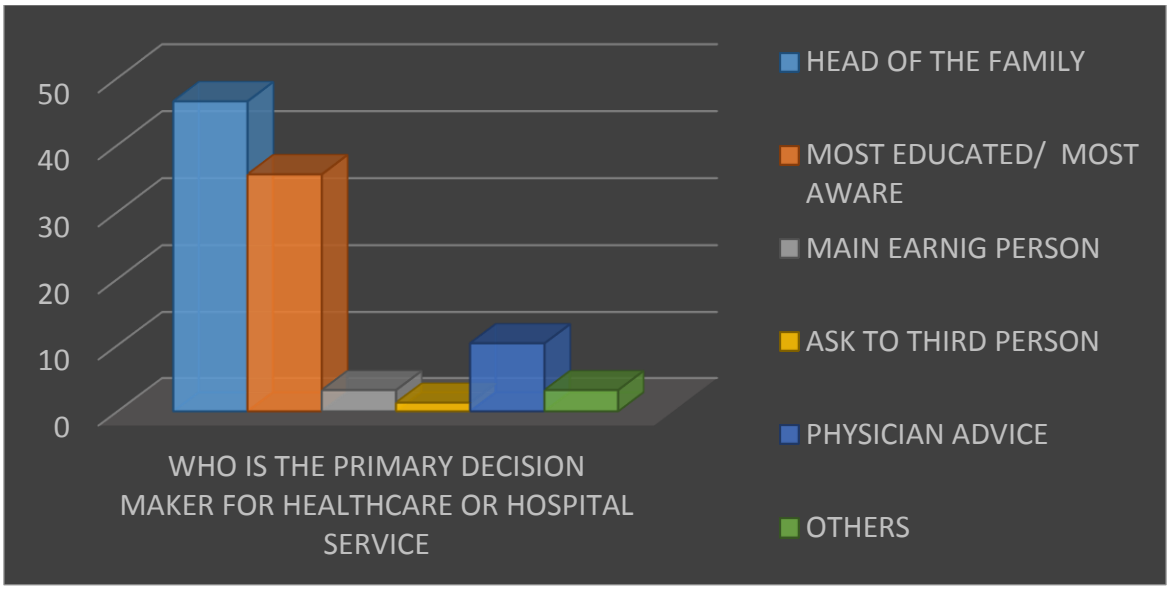

Fig no. 8 shows that distribution of the decision maker in the collected sample

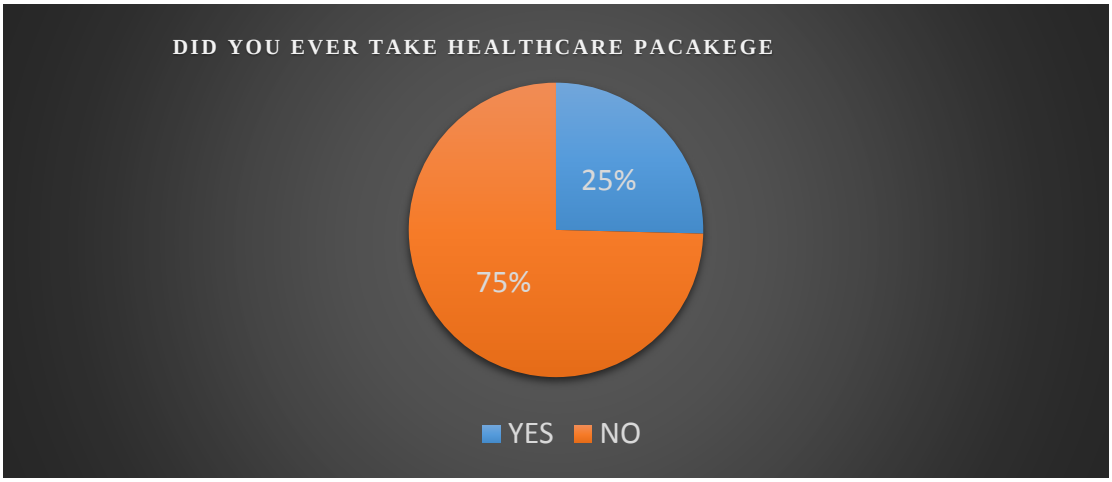

Fig no. 9 shows percentage of people taken the healthcare/ wellness packages

Fig no. 10 percentage of wellness packages choice by the collected sample

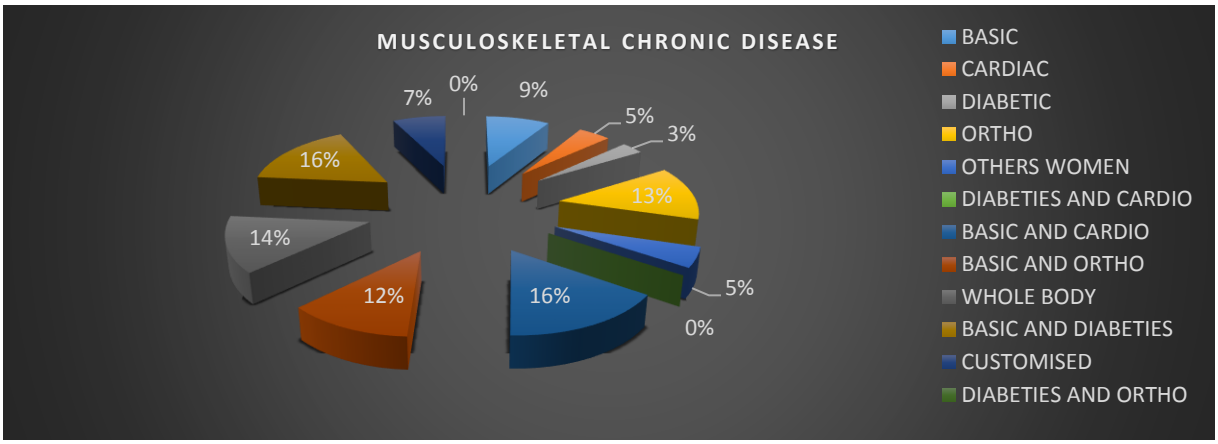

Fig no. 11 shows that distribution of the different type of the package choice for chronic disorder related to musculoskeletal

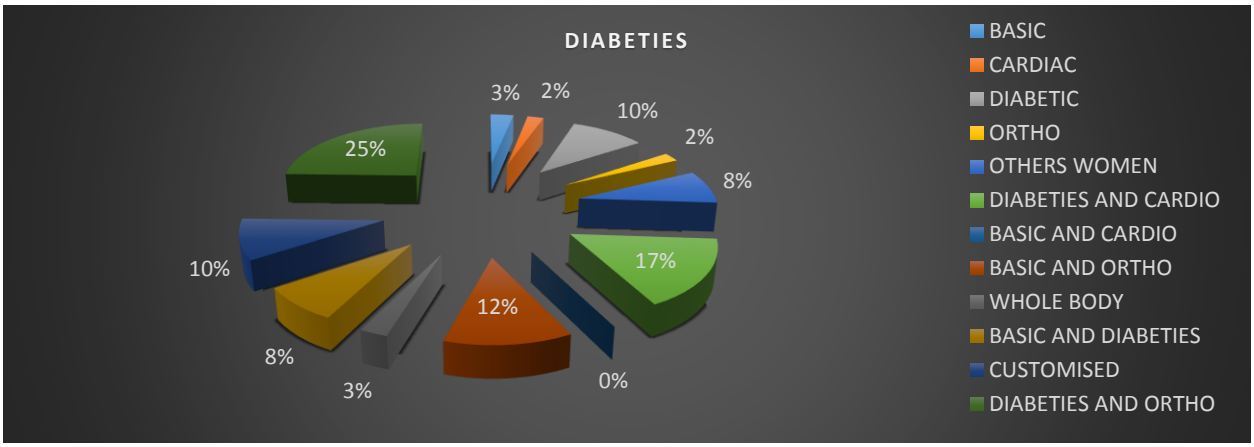

Fig no. 12 shows that distribution of the different type of the package choice for chronic disorder related to diabetes

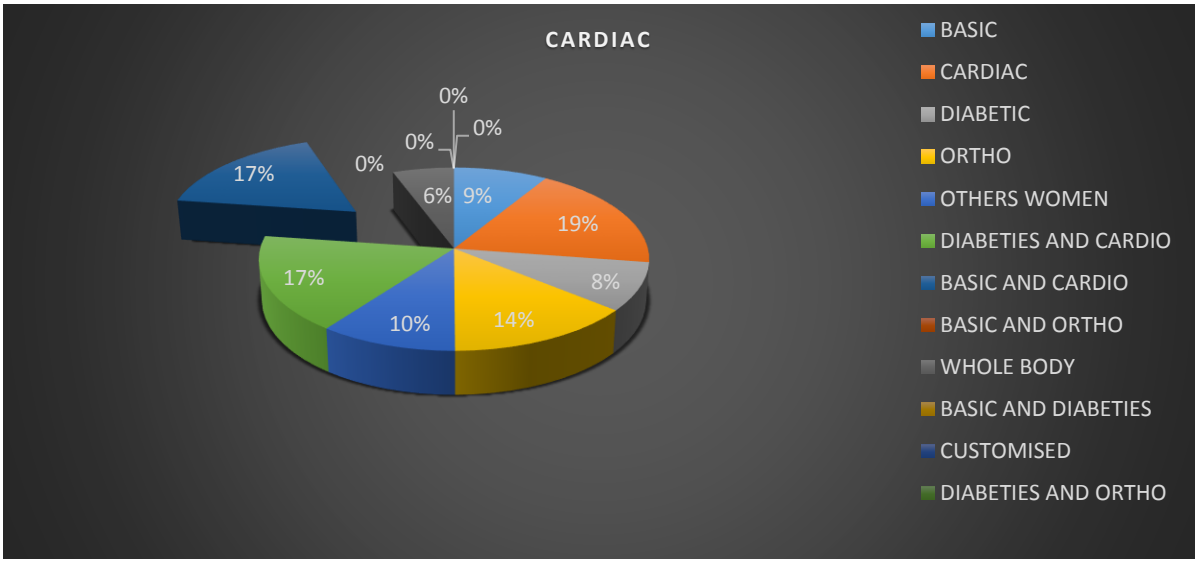

Fig no. 13 shows that distribution of the different type of the package choice for chronic disorder related to cardiac

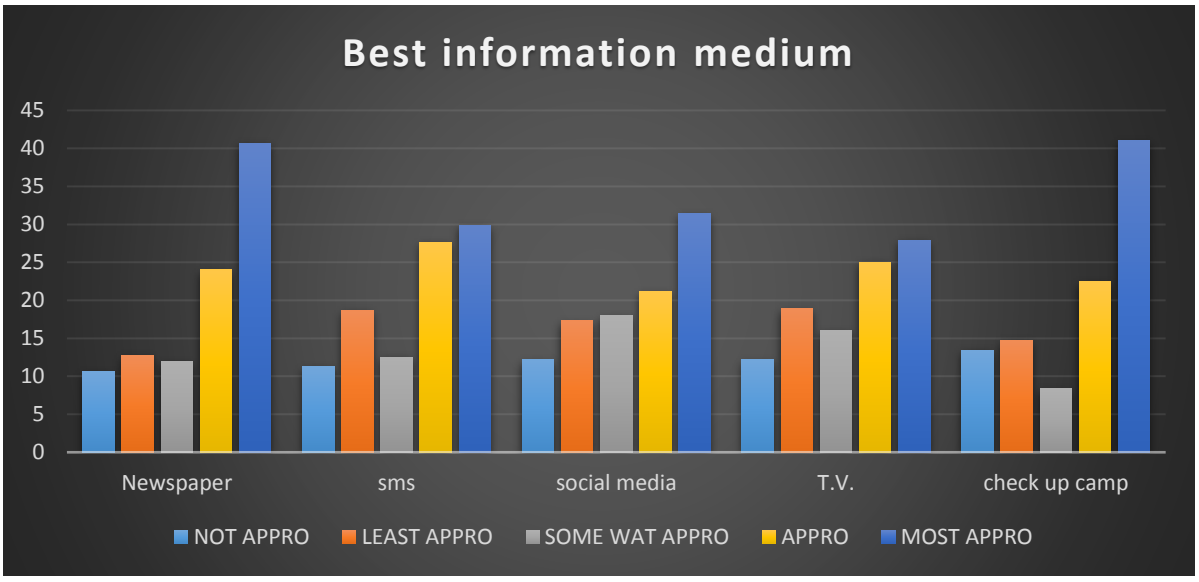

Fig no. 14 shows that best information medium

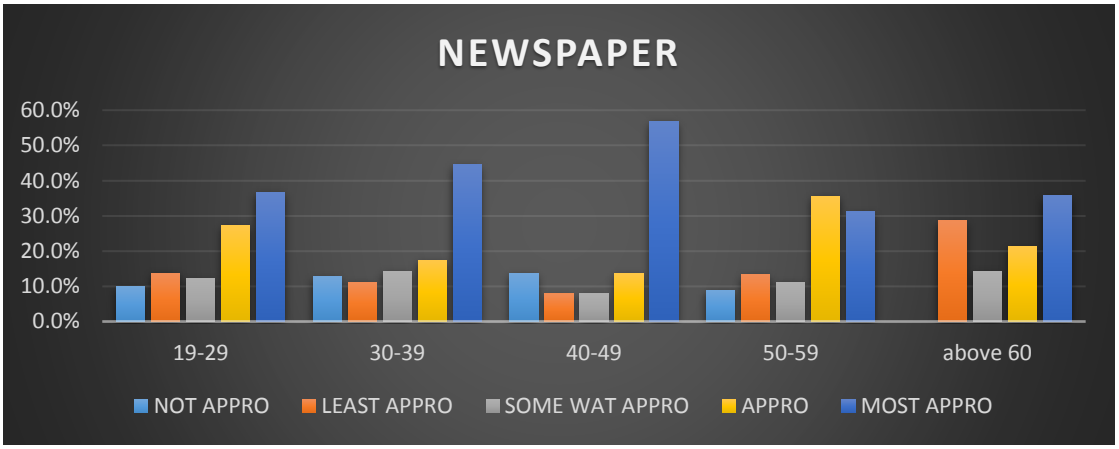

Fig no.14 show choice of newspaper with different age group

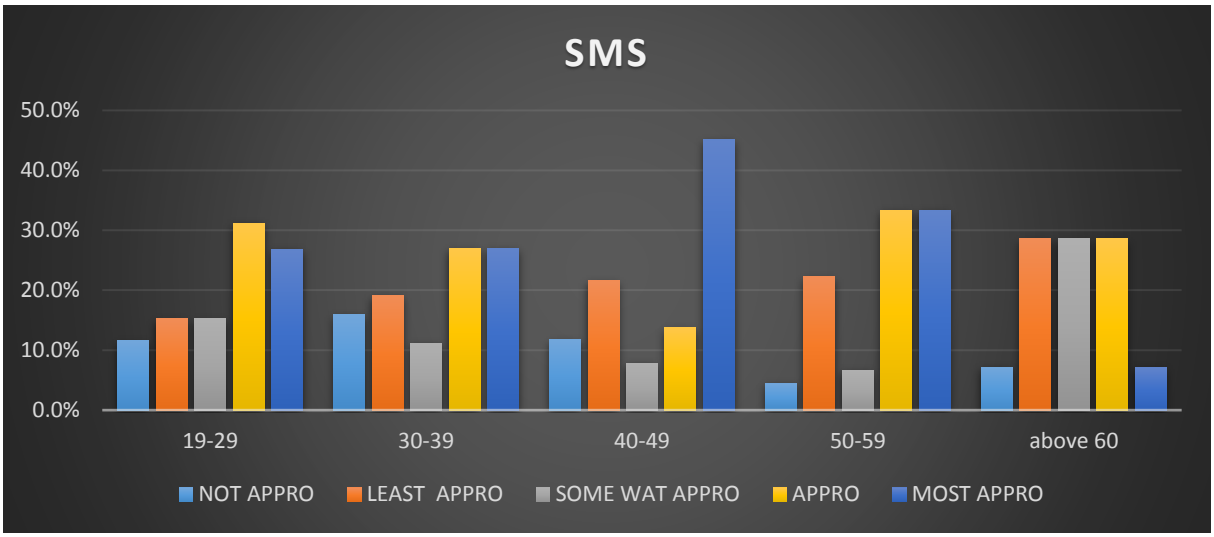

Fig no. 15 show cross tabulation with age group

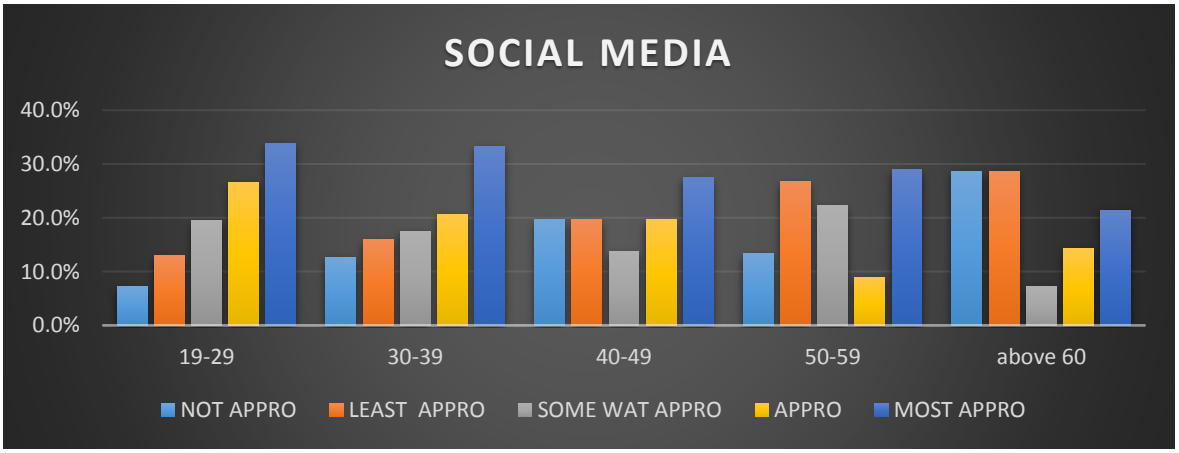

Fig no.16 show cross tabulation of social media with age group

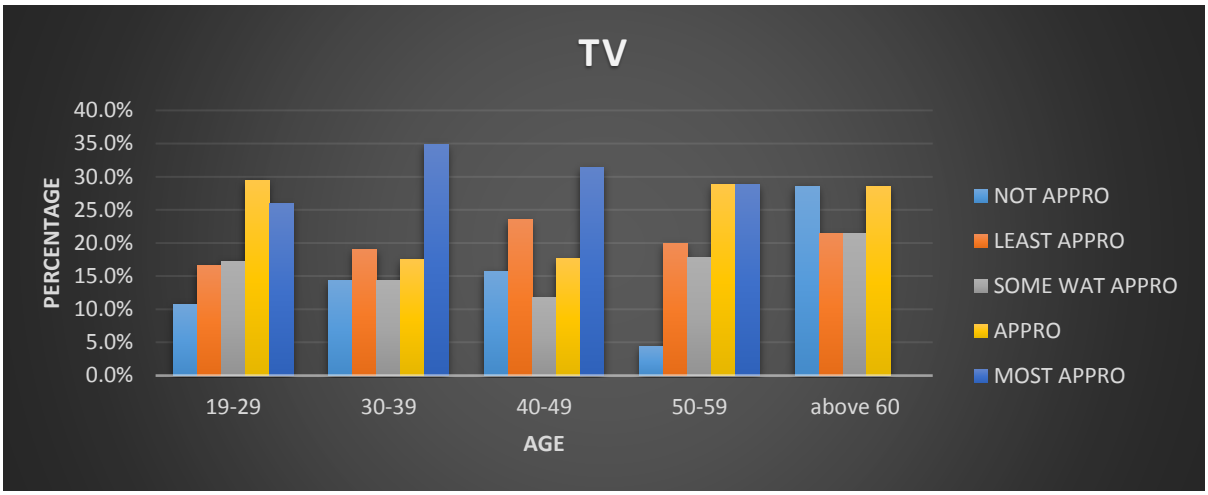

Fig no. 16 show cross tabulation of T.V. with different age group

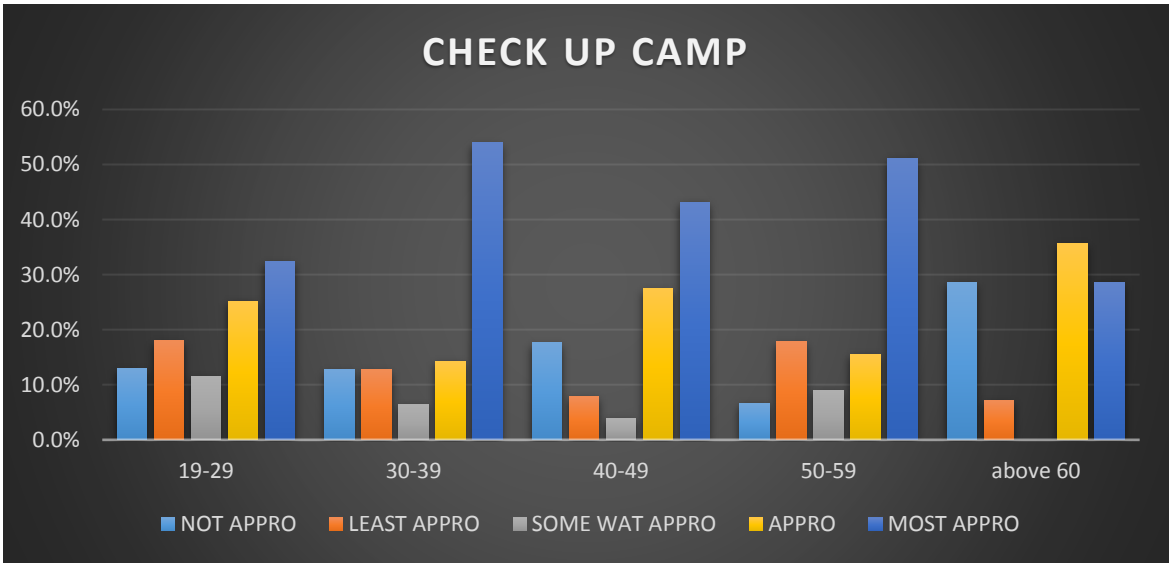

Fig no. 17 show cross tabulation of checkup camp with different age group

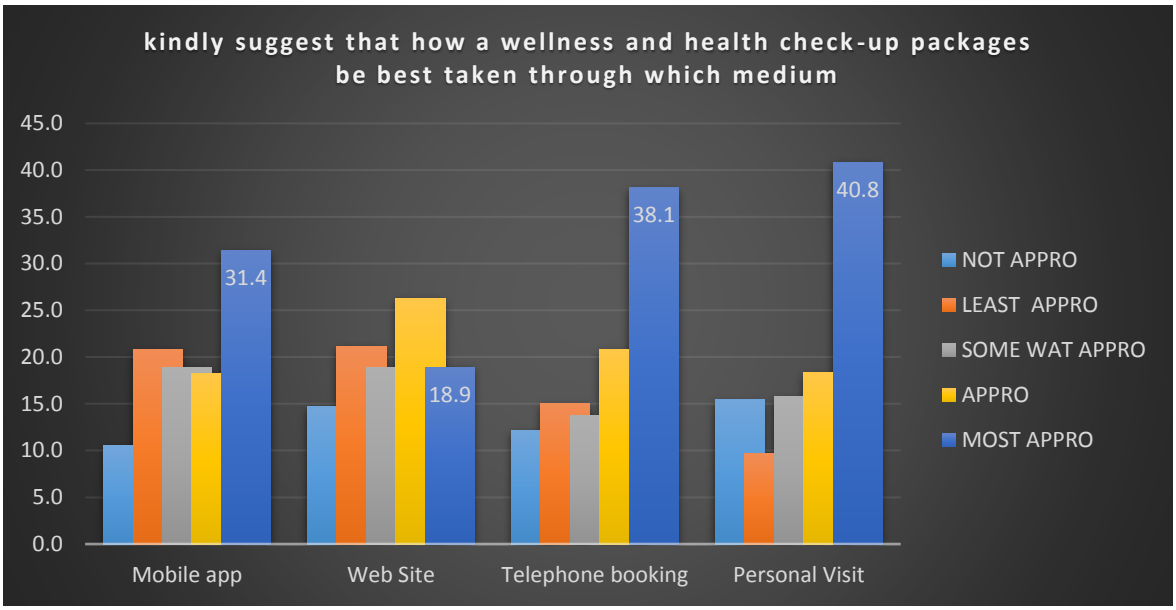

Fig no. 18 shows that medium of choosing the wellness package.

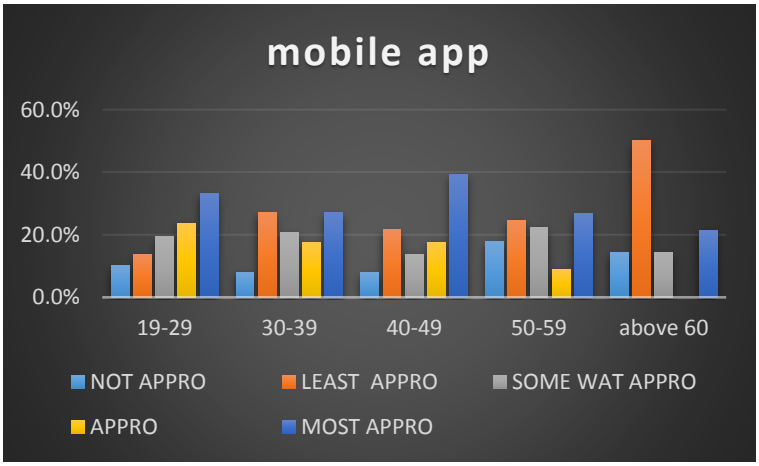

Fig no. 18 show cross tabulation of mobile app with different age group

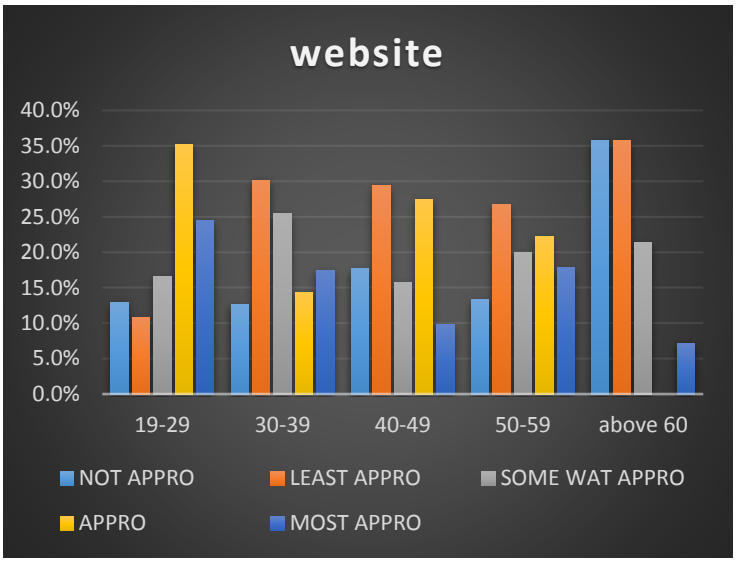

Fig no 19 show cross tabulation with different age group

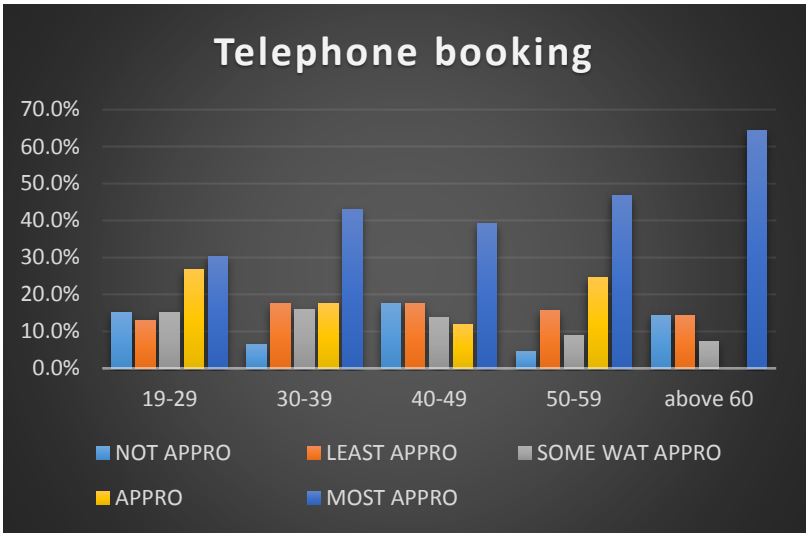

Fig no. 20 show that cross tabulation of Telephone booking with different age group

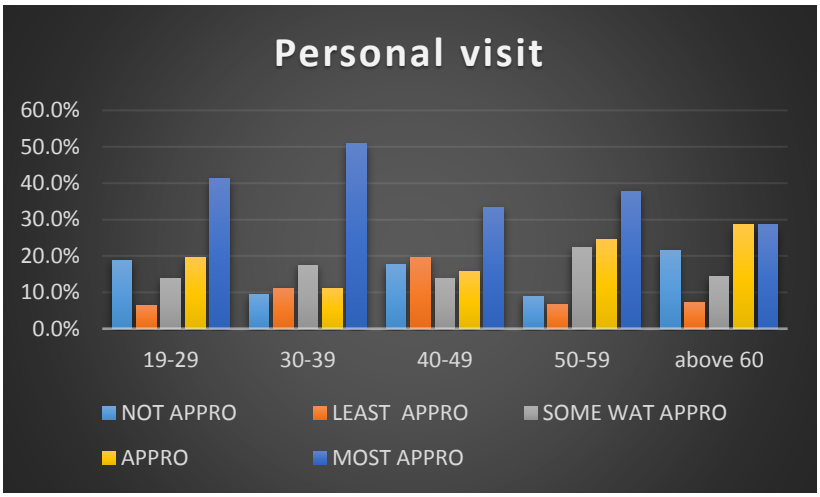

Fig no 21 show cross tabulation of personal visit with different age group

DISCUSSION

There were 365 respondents out of which the correct response were taken from 312 respondents. The number of respondents from age group 19-29 were 44.6%, from 30-39 were 20.2%, 40-49 were 16.3%, and from 50-59 were 14.4% and above 60 years were 4.5%. Out of 312 respondents 65% were male respondents and 35% were female respondents. Among 312 respondents 53% respondents belongs to private job39% respondents were indulged in business 6% were in government job while 2% were retired. Among 312 respondents 18% were from sanaganer, 12%from malviya nagar, 11% each from vaishali and VKI, 10% each from MHN and Raja Park, 7% each from mansarover and city, and 55 from c-scheme. Further analysis of medical insurance reveals that 47% have medical insurance and 53% don't have analysis of the chronic disease reveals that among all the respondents 33% have musculoskeletal disorder in the family, 19%have cardiac problem, 18% diabetes, 4.5% neuro, and 11% don't have any chronic illness,

Analysis of the no of the visit to hospital reveals that Out of 312 respondents 32% visit hospital once,28% twice ,16% three times ,4% four times,14% >four times,6% not taken in last six month

During the analysis of the primary decision maker the head of the family with 46.5%, then most aware 35.65, main earning person 3%, and physician advice 10.3%

Among 312 respondents 25% have taken healthcare package while 75% have not taken the wellness package.

Out of 312 respondent 62.4% people will choose go for the basic wellness package, cardiac occupy second position with 10.6, diabetic will occupy 3rd with 7.7%, and women package occupy the 4.8%

27% of the people who wants to take service from the Ehcc have ortho and spine problem, 17.50% cardiac, 20.60% are diabetic, and 14.30% are those who have thyroid problem

People whose family history is cardiac disease mostly likely to go cardiac package with 19%, basic and cardiac with 17%, diabetes and cardiac 17%, ortho occupy 14%

Most of people who have family diabetes chronic history want to choose 25% diabetic and ortho combine package, 17% will choose diabetes and cardio, basic and ortho, 10% will choose customized.

People who have family history of ortho problem most likely to go for, basic and cardio, basic and diabetes with 16%, 16%, next they prefer whole body with 14%, 13% person they prefer ortho and 12% they prefer basic and ortho.

Person who has taken the wellness package out that 70.10% people are those who have medical insurance too, and 29.90% don't have medical insurance. Person who haven't taken the wellness packages out of that 41.60% have medical insurance and 58.40% don't have medical insurance

Best information medium analysis shows that newspaper and checkup camp are best to aware people regarding health care package as most of the response fall in the most appropriate and appropriate

In the cross tabulation descriptive analysis between the newspaper as a medium and age group reveal that Newspaper will be the first choice of information for the 40 to 49 age group people followed by 30 to 39 years age group

In the cross tabulation descriptive analysis between the SMS as a medium and age group reveal that SMS will be the first choice of information for the 40 to 49 age group people followed by 50 to 59 years age group

In the cross tabulation descriptive analysis between the Social Media as a medium and age group reveal that Social Media will be the first choice of information for the 19 to 29 age group people followed by 30 to 39 years' age group

In the cross tabulation descriptive analysis between the T.V. as a medium and age group reveal that T.V. Will be the first choice of information for the 30 to 39 age group people followed by 50 to 59 years' age group

In the cross tabulation descriptive analysis between the Checkup camps as a medium and age group reveal that checkup camps will be the first choice of information for the 40 to 49 age group people followed by 30 to 39 years age group

In the cross tabulation descriptive analysis between the Personal visit as a medium for selecting the wellness packages and age group reveal that Personal visit will be the first choice of selecting for all age group except 40 to 49

In the cross tabulation descriptive analysis between the Mobile Application as a medium for selecting the wellness packages and age group reveal that will be the first choice of selecting for 19 to 29 age group and 40 to 49 age group

In the cross tabulation descriptive analysis between the Website as a medium for selecting the wellness packages and age group reveal that Web site will be the first choice of selecting for 19 to 29 age group and least preferred by the 60 and above

In the cross tabulation descriptive analysis between the Telephone booking as a medium for selecting the wellness packages and age group reveal that Telephone booking will be the first choice of selecting for 60 and above age group and 50 to 59 age group.

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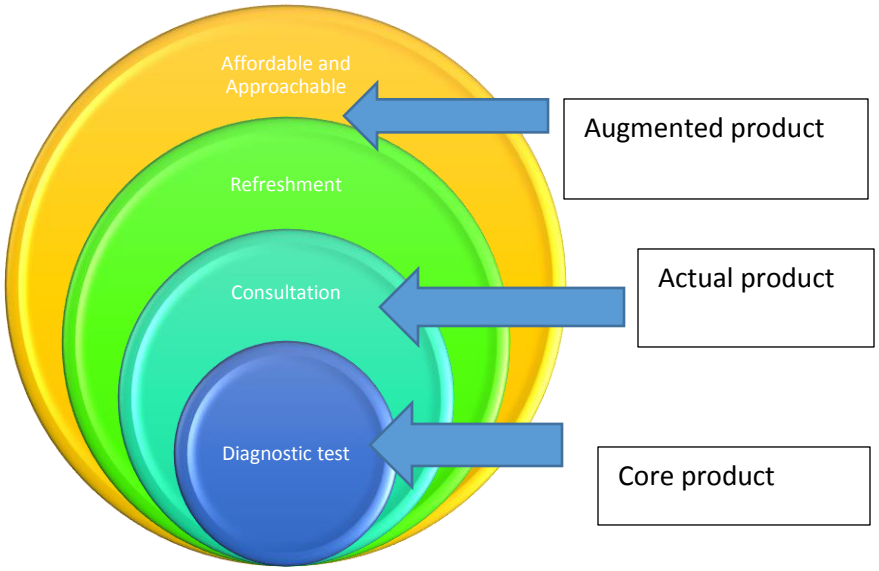
Designing The Product

After the analysis reveal that people prefer the basic package mostly and some wants combination of two, but the major disease found to be musculoskeletal, cardiac, and diabetes, so designing of the wellness/healthcare product should match their requirement and fulfill the need of the client

We have design the according to the age segment with 19 to 29 age, 30 to 39, 40 to 49 and 50 and above



Healthcare package	Today's fast paced lifestyle and using on technology leads lots of diseases like Diabetes, Dyslipidemia, Ischaemic Heart Disease, Malignancies musculoskeletal disorder (like cervical, back pain knee pain, other joints pain), among others Keeping "WELLNESS IS FIRST PRIORITIES" regular health check up is need to make you better and productive in your life. “Where good care leads good health follow” Eternal healthcare packages are made according to your age specific problems.

Eternal Hospital

AGE GROUP 19 TO 29

- CBC
- ESR
- BLOOD GLUCOSE
- TOTAL CHOLESTEROL
- TSH,T3,T4
- SGOT
- SGPT
- SERUM CREATININE
- URINE ROUTINE
- X RAY CHEST PA/X RAY CERVICAL/X-RAY LUMBAR
- ECG
- VIT D3,
- /CALCIUM/PHOSPHROUS
- VITAMIN B12
- ERGONOMIC ASSESSMENT
- CONSULTATION BY:-
- PHYSICIAN
- DIETICIAN
- OPTHALMOLOGIST
- DENTIST
- PHYSIOTHERAPIST

Eternal Hospital

AGE GROUP 30 39

- CBC
- ESR
- BLOOD GLUCOSE
- TOTAL CHOLESTEROL
- TSH,T3,T4
- SGOT
- SGPT
- SERUM CREATININE
- URINE ROUTINE
- STOOL EXAMINATION
- X RAY CHEST PA/X RAY CERVICAL/X-RAY LUMBAR
- ECG
- VIT D3,/CALCIUM/PHOSPHROUS
- VITAMIN B12
- ULTRASOUND WHOLE ABDOMEN
- ERGONOMIC ASSESSMENT
- CONSULTATION BY:-
- PHYSICIAN
- DIETICIAN
- OPTHALMOLOGIST
- DENTIST
- ENT
- PHYSIOTHERAPIST

Eternal Hospital

AGE GROUP 40 TO 49

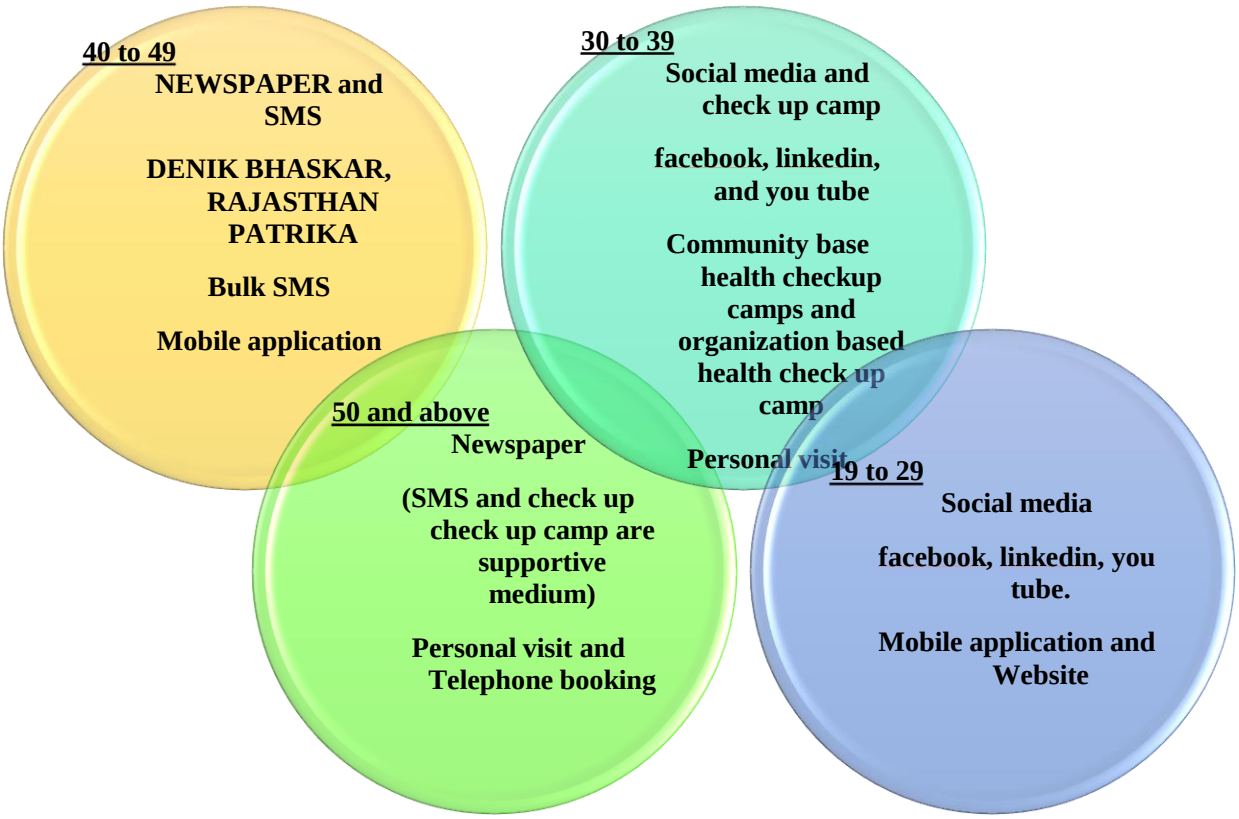
- CBC
- ESR
- BLOOD GLUCOSE
- TOTAL CHOLESTEROL
- TSH,T3,T4
- HbA1c
- LIPID PROFILE
- ECG
- SGOT
- SGPT
- SERUM CREATININE
- URINE ROUTINE
- STOOL EXAMINATION
- X RAY CHEST PA/X RAY CERVICAL/X-RAY LUMBAR
- VIT D3,
- /CALCIUM/PHOSPHROUS
- VITAMIN B12
- ERGONOMIC ASSESSMENT
- LIFE MODIFICATION CONSULTATION
- CONSULTATION BY:-
- PHYSICIAN
- GYNECOLOGICAL (FOR WOMEN)
- DIETICIAN
- OPTHALMOLOGIST
- DENTIST
- ENT
- PHYSIOTHERAPIST
- REFRESHMENT

Eternal Hospital

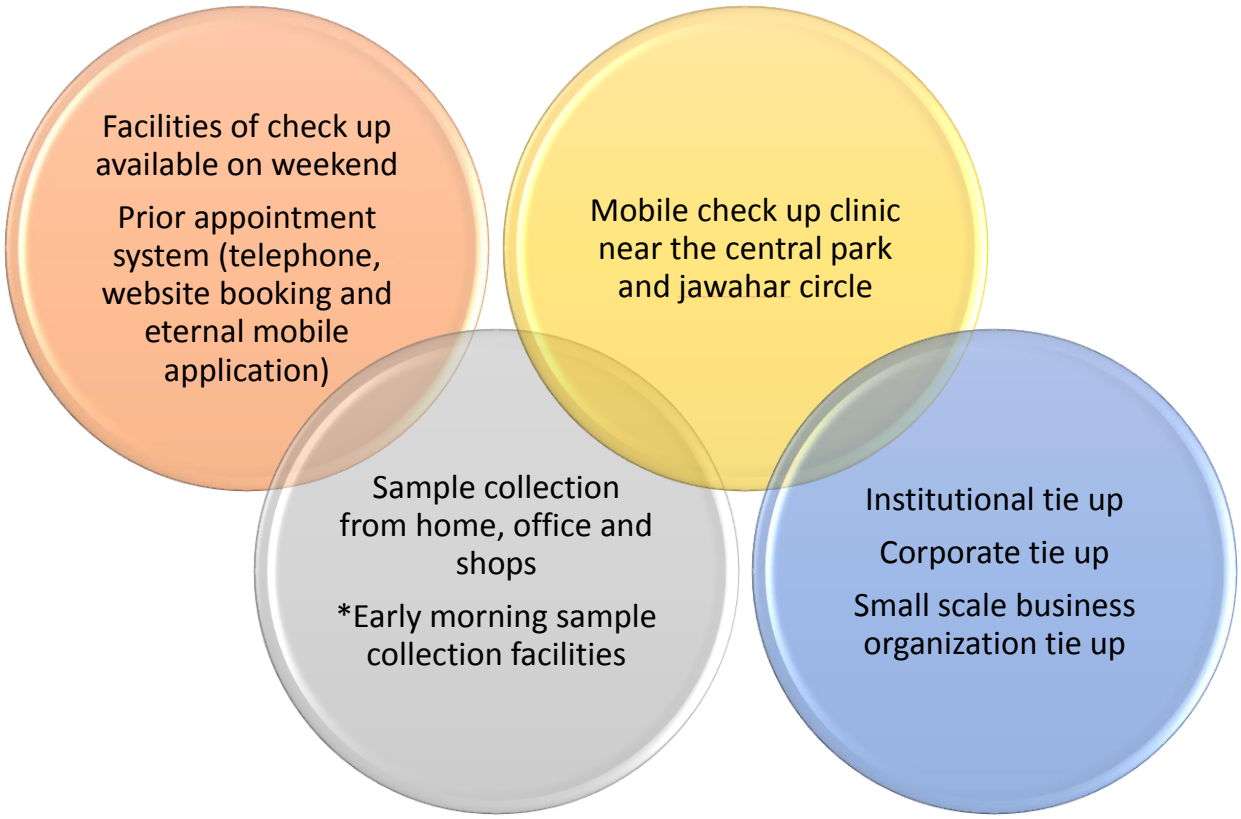
AGE GROUP 50 AND ABOVE

- CBC
- ESR
- BLOOD GLUCOSE (F)
- BLOOD GLUCOSE (PP)
- TOTAL CHOLESTEROL
- TSH,T3,T4
- HbA1c
- LIPID PROFILE
- ECG
- SGOT
- SGPT
- SERUM CREATININE
- URINE ROUTINE
- STOOL EXAMINATION
- X RAY CHEST PA/X RAY CERVICAL/X-RAY LUMBAR
- X- RAY KNEE B/L
- TMT/ECHO
- LFT
- MICROALBUMIN URINE
- BLOOD UREA
- VIT D3
- /CALCIUM/PHOSPHROUS
- VITAMIN B12
- PHYSICAL EXAMINATION
- LIFE MODIFICATION CONSULTATION
- CONSULTATION BY:-
- PHYSICIAN
- GYNECOLOGY (WOMEN)
- DIETICIAN
- OPTHALMOLOGIST
- DENTIST
- PHYSIOTHERAPIST
- REFRESHMENT
- If needed refer to particular specialist

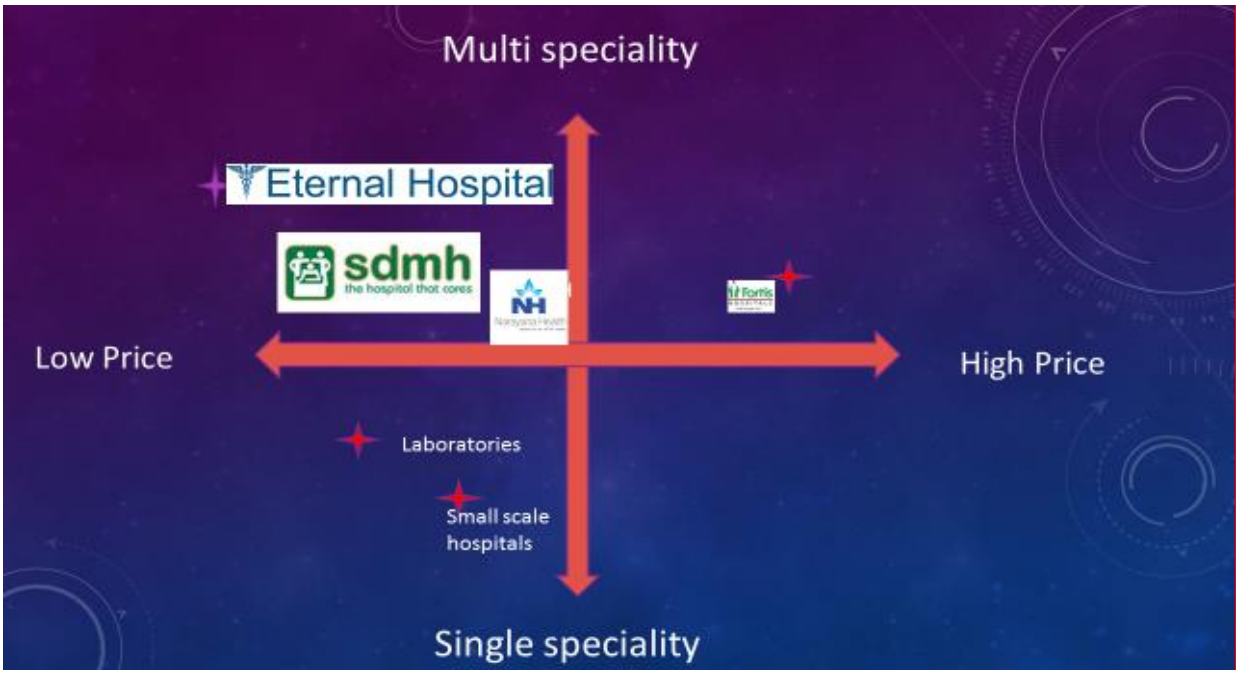
Promotion


40 to 49
NEWSPAPER and SMS
DENIK BHASKAR, RAJASTHAN PATRIKA
Bulk SMS
Mobile application
30 to 39
Social media and check up camp
facebook, linkedin, and you tube
Community base health checkup camps and organization based health check up camp
Personal visit
50 and above
Newspaper
(SMS and check up check up camp are supportive medium)
Personal visit and Telephone booking
19 to 29
Social media
facebook, linkedin, you tube.
Mobile application and Website

Place


Facilities of check up available on weekend
Prior appointment system (telephone, website booking and eternal mobile application)
Mobile check up clinic near the central park and jawahar circle
Sample collection from home, office and shops
*Early morning sample collection facilities
Institutional tie up
Corporate tie up
Small scale business organization tie up

Positioning



Newspaper addvertisement

Conclusion

According to the result of the present study, it concludes that people are somewhat aware of the wellness packages but they have fear to go to hospital and moreover they don't know which type of healthcare package best suits to them that's why most of them have chosen basic wellness package that's why it is important to address the need of the population by the informative media and aware them what is best for them. Time and money is the another factor they think of so it again to address in such a manner so that they can realize health is our priorities.

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A Study on Disease based Preference of Hospital and factor Which can affect or change these Preferences

INTRODUCTION

Non communicable diseases (NCDs) are defined as diseases of prolong duration, and are generally slow in progression. NCDs are the leading cause of adult mortality and morbidity worldwide. Four main diseases are useually considered to predominate NCD mortality and morbidity that is cardiovascular diseases, diabetes, cancers and chronic respiratory diseases. These four NCDs are developed, due to a large extent, by four modifiable behavioral risk factors that is smoking or intake of tobacco, sedentary lifestyle or bad eating habits, lack of physical activity and harmful use of alcohol. NCDs have now touched epidemic proportions in many countries. NCDs hit hardest at the world's low-and middle-income groups and place a tremendous demand on health systems and social welfare, cause decreased productivity in the workplace, prolong disability and diminish resources within families. Globally, NCDs are estimated to cost more than US$30trillion over the next 20 years, representing 48% of global gross domestic product (GDP) in 2010. NCDs are expected to rise substantially in the coming decades, partly due to a growing ageing global population. Further, as urbanization and globalization increase in the developing world, there is likely to be an increase in the prevalence NCDs. Therefore, unless the NCD epidemic is aggressively confronted, the mounting impact of NCDs will continue unabated.

LITERATURE REVIEW

D Prabhakaran et al. in 2011 stated that, It is estimated that NCDs accounted for 53% of the total mortality and 44% of disability adjusted life years (DALYs) lost in India, in 2005, with projections indicating a further rise to 67% of total mortality by 2030. CVD is the major contributor to this burden and accounts for 52% of NCD-associated mortality and 29% of total mortality. CVD related deaths are expected to rise from 2.7 million in 2004 to 4 million by 2030. According Gururaj et al in 2005, Mental health disorders are one of the major contributors to the risen NCD burden in India. At least 7% of the adult population suffering from a serious mental illness, including schizophrenia and mood disorders. This burden increases significantly if we consider alcohol use disorders and common mental conditions such as anxiety. Most of the NCDs have associated risk factors like consumptions of tobacco, lack of healthy diet, physical inactivity and alcohol use, integrated

interventions focused on these risks form the cornerstone of the effort to prevent and control NCDs. Given that risk factors of today are indicative of future diseases, information on risks is vital for surveillance as well as for monitoring and evaluating the effectiveness of potential interventions. Information on the major NCD risk factors in India that contribute the most to the associated disease burden is summarised in the following section. The highest rates of overweight and obesity have been observed in the epidemiologically and nutritionally advanced states of Punjab, Kerala and Delhi, which, incidentally, also have higher rates of NCD risk and disease burden. (Gupta R, Misra A, Pais P, Rastogi P, Gupta VP, 2009). The Jaipur Heart Watch studies demonstrated an increasing trend in overweight/obesity among urban men (21.1% in 1994 to 50.9% in 2005) as well as in women (15.7% in 1994 to 57.7% in 2005). (Gupta R, Gupta VP, 2009).

METHODOLOGY

- Research design - – Cross-sectional descriptive study
- Sampling design –Convenient Sampling
- Sample population- Shopkeepers, corporate and government employee, and retired.
- Sample Size –Total sample size of 312 were taken which include male and female both.
- Sample area – Which Cover North, South, East, West and Central Zone of Jaipur, major Sample Collected from nearby of EHCC (Malviya Nagar, Sanganer, Mahaveer nagar)
- Tool and technique- Semi Structured Questionnaire was used to collect primary data with PAPI
- Study duration-one and half month

RESULT AND ANALYSIS

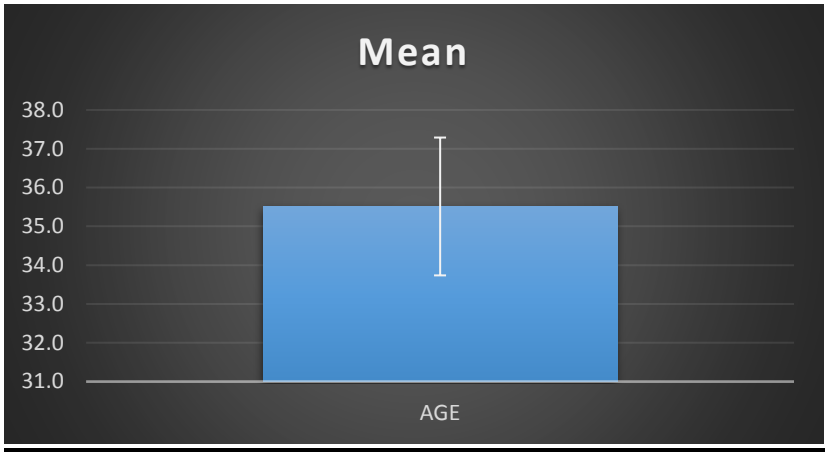


Fig.1 Mean age of the respondents

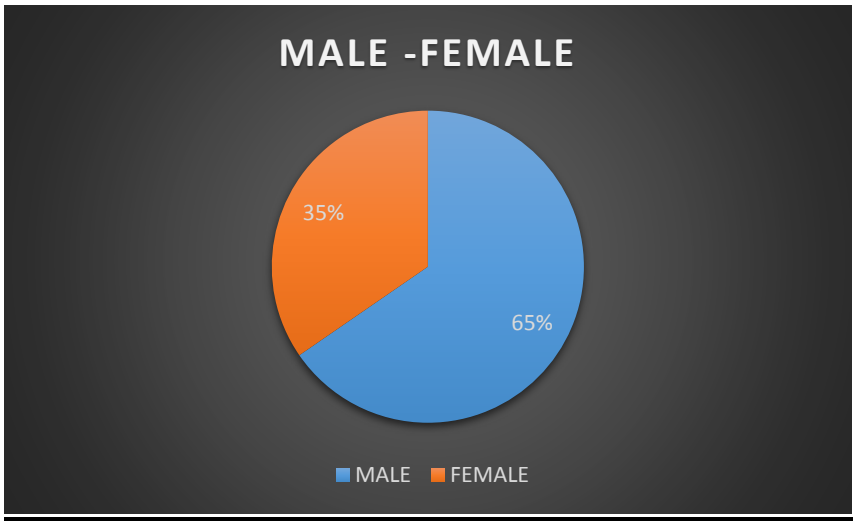


Fig.2 Percentage of male-female of the respondents

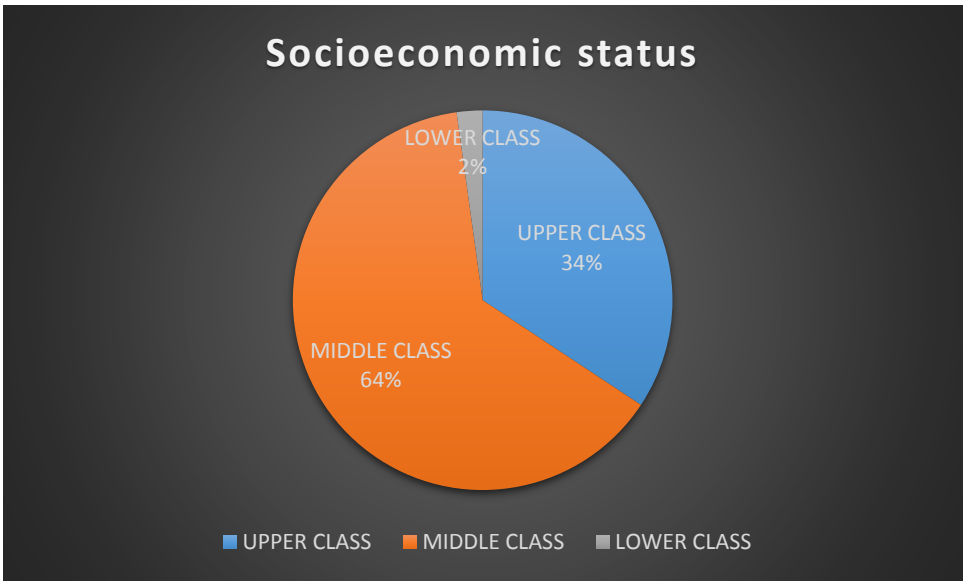


Fig no.3 shows that percentage of socioeconomic status in sample population

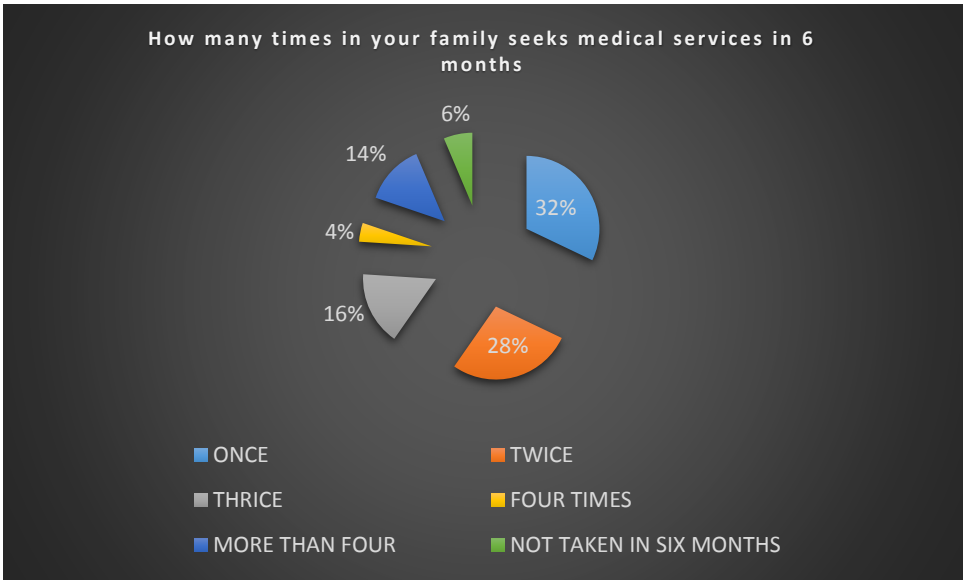


Fig no.4 Shows the distribution of percentage of numbers of times people seeks healthcare service in six months

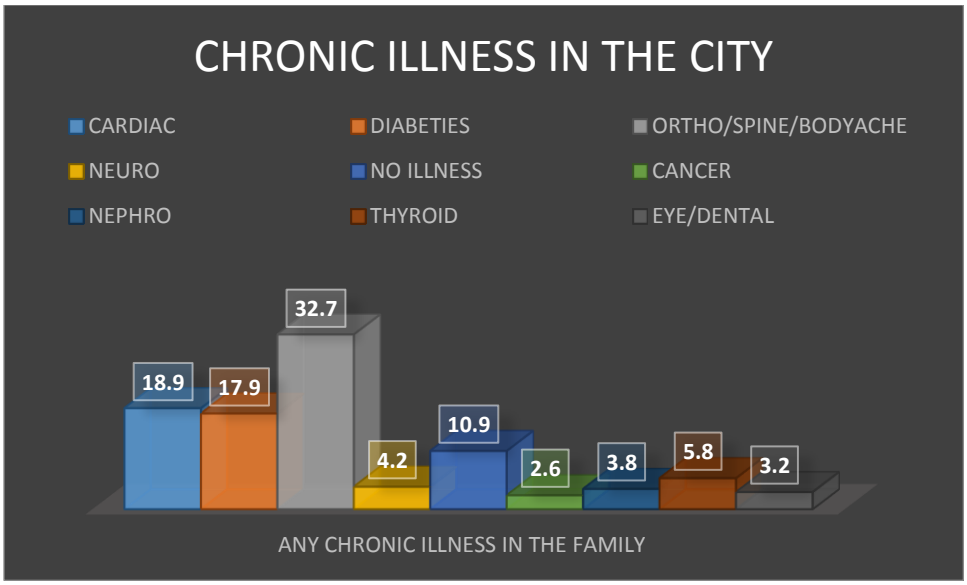


Fig.5 Percentage of chronic illness

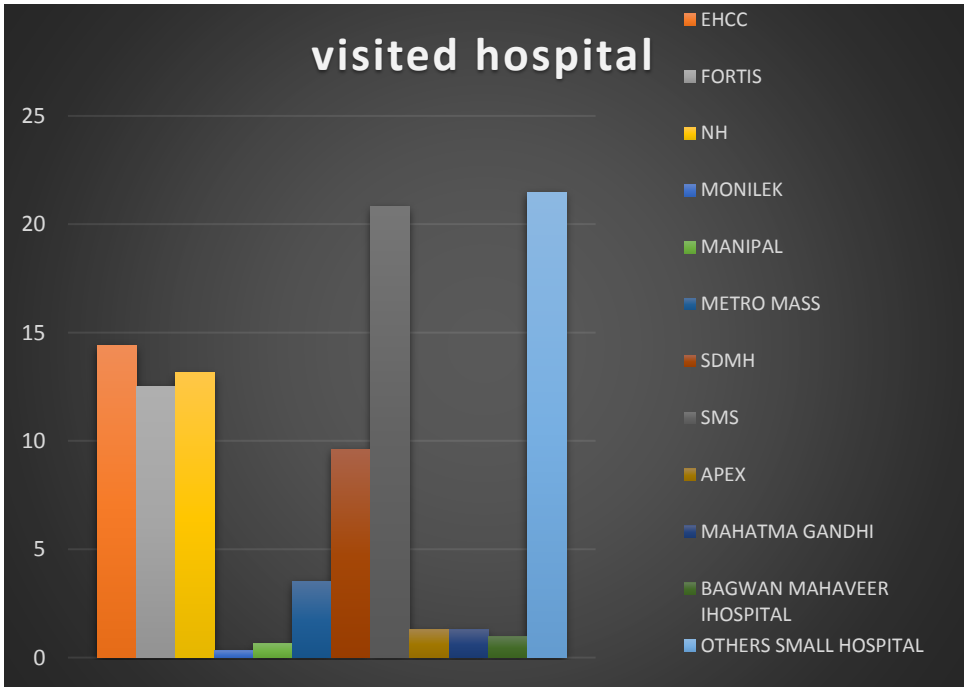


Fig no. 6 shows percentage of sample in visited hospital

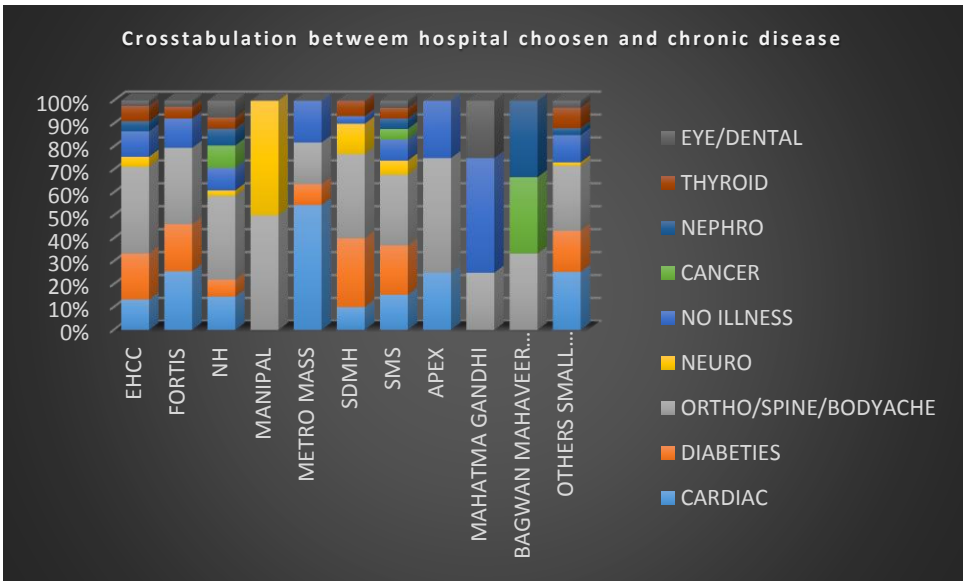


Fig no. shows that preferred hospital according to disease

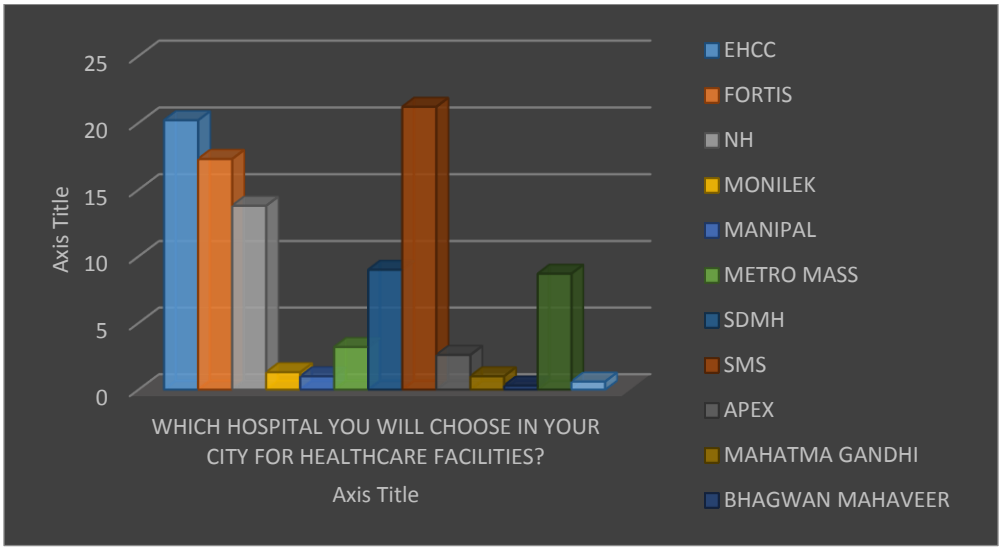


Fig no 6 shows that percentage of the hospital preference in the Jaipur city where patients wants to seeks service

Inference: Out of total respondent, 20.2% prefer Ehcc, Fortis 17.3%, NH 13.8%, Monilek 1.3%, Manipal 1%, metro mass 3.2%, SDMH 9%, SMS 21.2%, and Apex 2.6%.

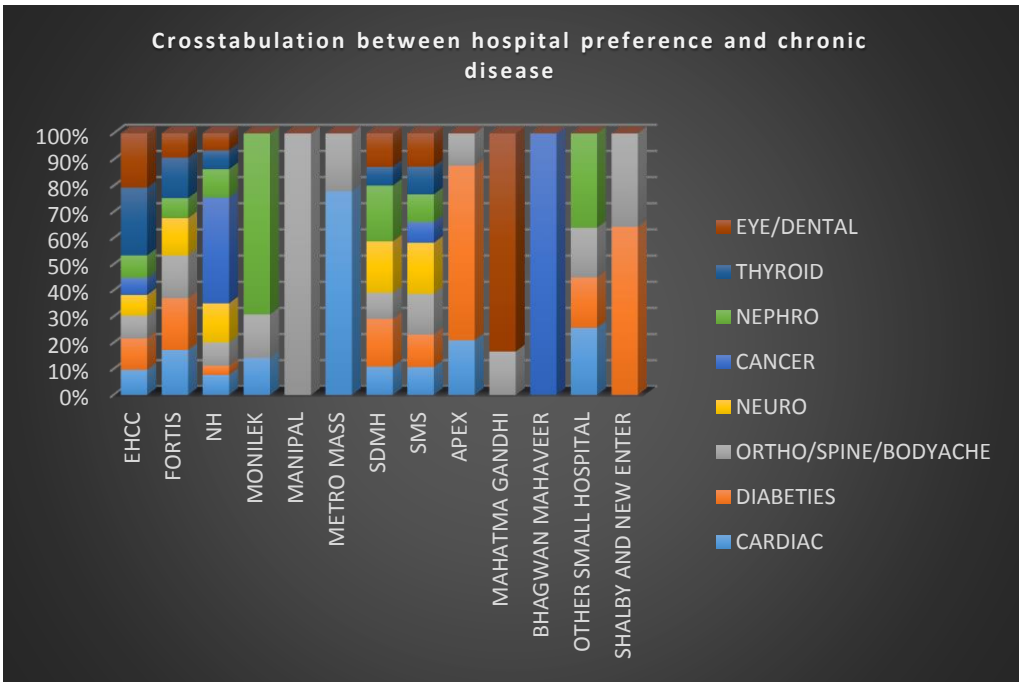


Fig no.7 shows that preference of the hospital according to the disease

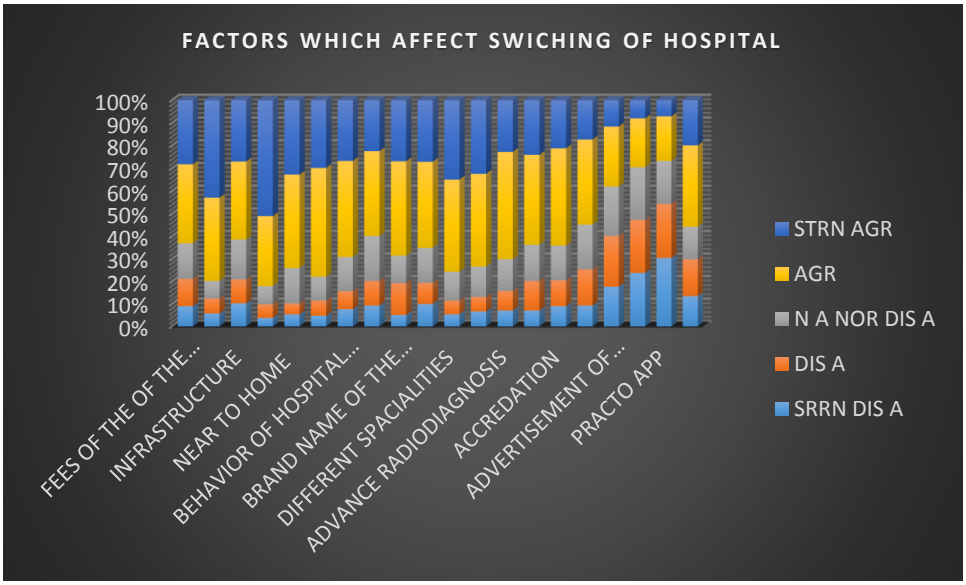
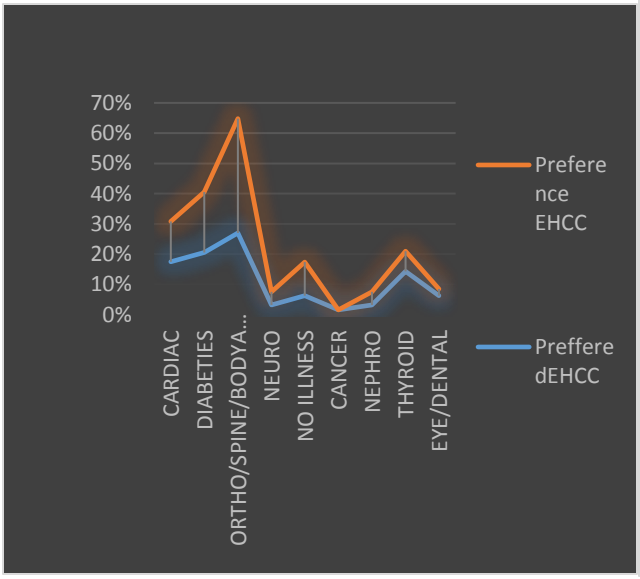


Fig no.8 shows that factors responsible for changing the hospital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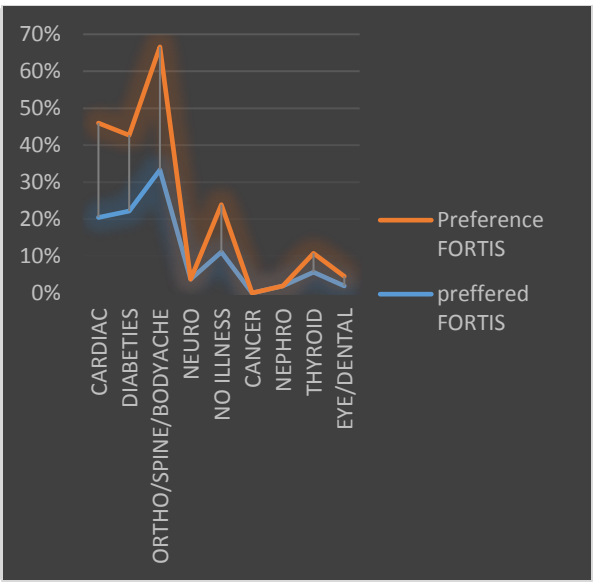
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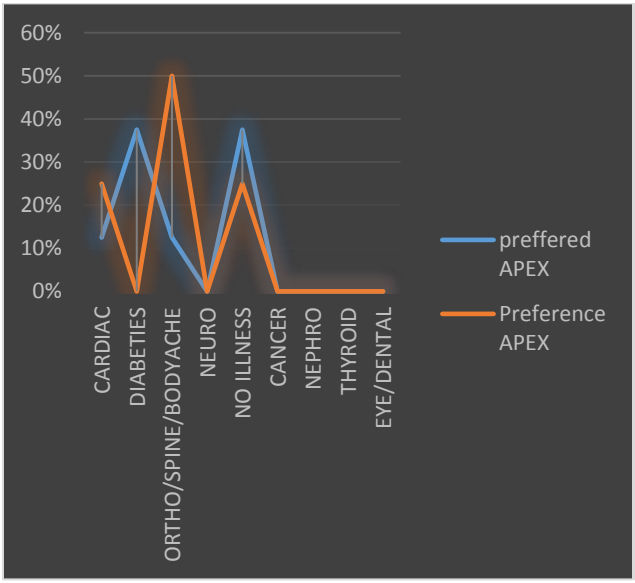
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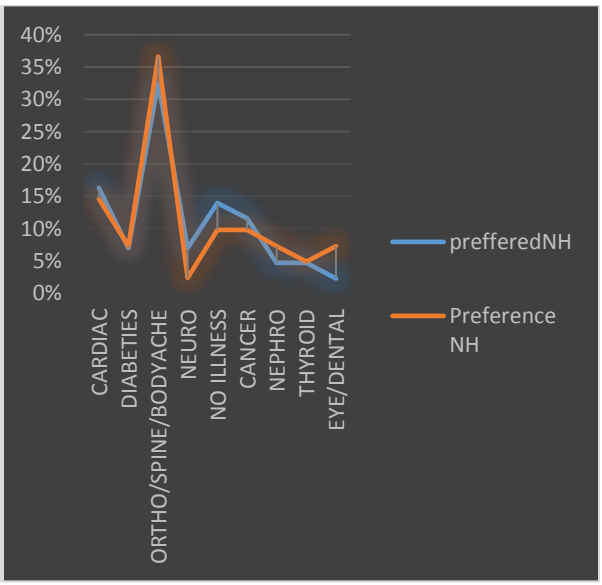
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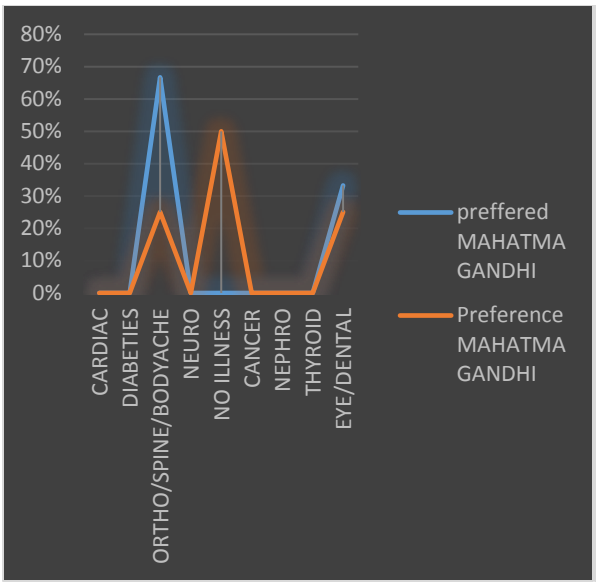
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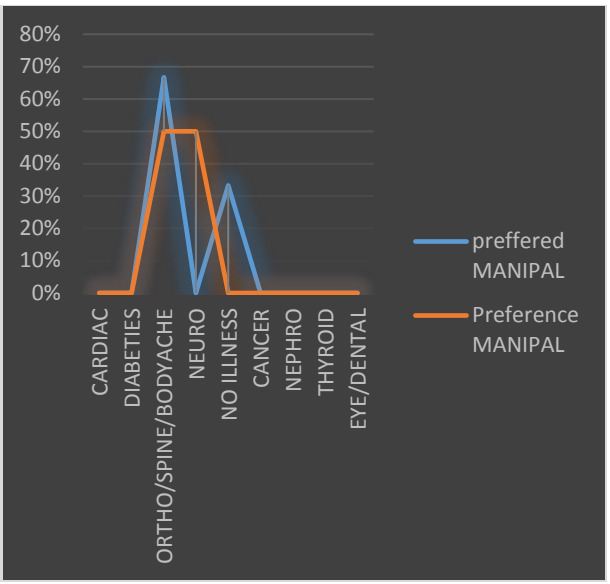
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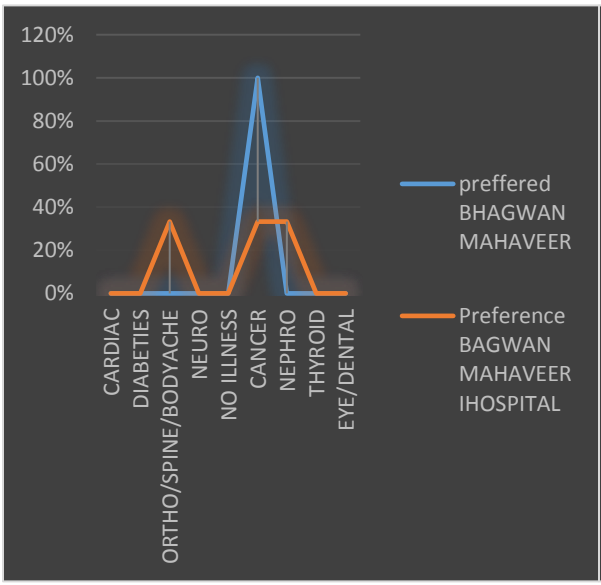
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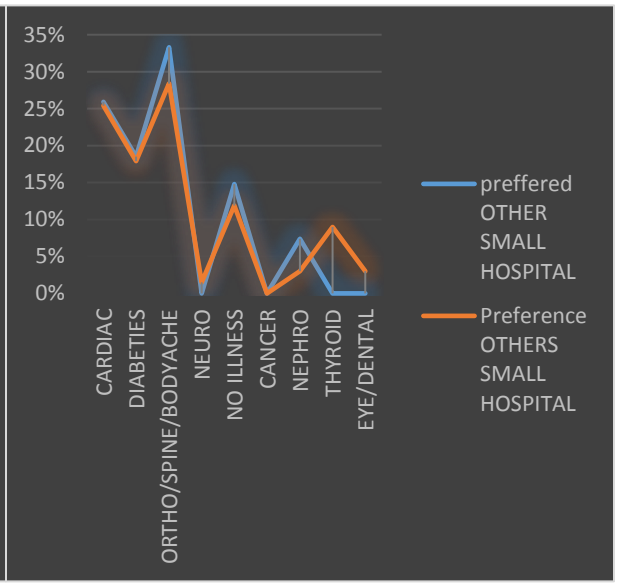
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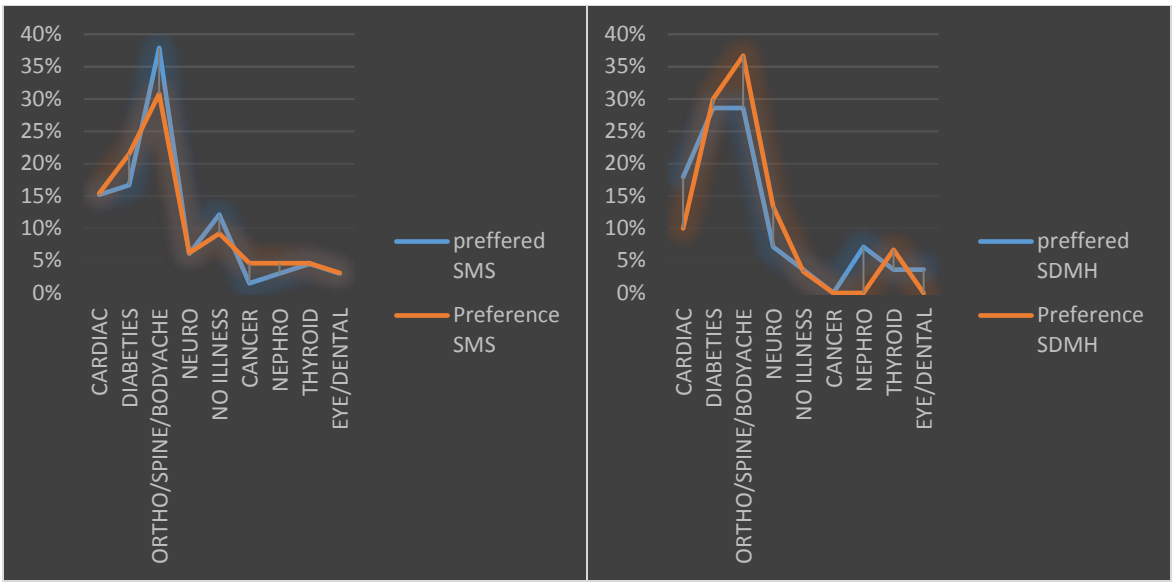

Fig no shows that changes of preference of the sample for the hospital with respect the disease

Conclusion

According to the result of the present study, it concludes that preference of the hospital is mainly according to specialties present in the hospital that's why customer choose multispecialty hospital, but some chunk of the customer preferred small hospital as those hospital present near by and they have trust on the hospital. Moreover some superspecialty hospital like bhagwan mahaveer cancer hospital have their own customer based, there is less no of customer switch. Disease based hospital preference is become the important factor that's why all superspeciality hospital try to appoint best doctor, as name of the doctor is another factor for selecting the hospital.

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Data collection form

Designing Marketing Mix of Wellness/ Healthcare Package for Eternal hospital according to the need and Prevalence of Disease in Jaipur city

1. Name……
2. Age…….. Sex……
3. Occupation……
4. Locality……
5. Socioeconomic status…….
6. Total member in the family…….
7. Highest Education level in the family

1) Since how many years have you lived in this community? ☐

2) Do you have any medical insurance?
   a) Yes b) No

3) Have you or your family member ever visited to any Hospital?
   a) Yes b) No

4) Can you name them
   …….. ……

5) For what purpose you have visited the hospital
   ……
   …….

6) Any chronic illness in the family…….

7) How many times in your family seeks medical service in 6 months?
   1) Once 2) Twice 3)Thrice 4) Four times 5) more 6) never visited in last 6 months

8) Which hospital will you choose in your city, for healthcare facilities?
   1. Eternal hospital (EHCC)
   2. Fortis hospital
   3. Narayna hospital
   4. Monilek hospital
   5. Manipal hospital
   6. Metro mass hospital
   7. SDMH (santokhba durlabh ji)
   8. Government hospital (SMS Hospital)
   9. Other specify……

9) Why you choose this/these hospital?

	5. Strongly agree	4. Agree	3. Neither agree nor disagree	2. Disagree	1. Strongly disagree
1. Charge and fee of the service	☐	☐	☐	☐	☐
2. Doctor name	☐	☐	☐	☐	☐
3. Infrastructure	☐	☐	☐	☐	☐
4. Cleanliness	☐	☐	☐	☐	☐
5. Near to your area	☐	☐	☐	☐	☐
6. Trust on the hospital	☐	☐	☐	☐	☐
7. Behaviour of the hospital staff	☐	☐	☐	☐	☐
8. Less waiting time	☐	☐	☐	☐	☐
9. Brand name of the hospital	☐	☐	☐	☐	☐
10. Known person in the hospital	☐	☐	☐	☐	☐
11. Different kind of specialities within one roof	☐	☐	☐	☐	☐
12. Advance treatment procedure in the hospital	☐	☐	☐	☐	☐
13. Advance radio diagnosis in the hospital	☐	☐	☐	☐	☐
14. Good parking area	☐	☐	☐	☐	☐
15. Accreditation of the hospital	☐	☐	☐	☐	☐
16. Referred from physician	☐	☐	☐	☐	☐
17. Advertisement of the hospital	☐	☐	☐	☐	☐
18. Website search	☐	☐	☐	☐	☐
19. Use of the latest healthcare app like practo	☐	☐	☐	☐	☐
20. Pick and drop service	☐	☐	☐	☐	☐

10) When a health care decision for your family, who is the primary decision maker?

1. Head of the family

2. Most educated /most aware person
3. Main earning person
4. Ask to third person
5. Physician/ primary care advice
6. Other specify…….

11) Did you ever take wellness packages/Healthcare check up package?

a) Yes b) No

12) Give your views on following statements, written below

Q,	Strongly agree 5	Agree 4	Neither agree nor disagree 3	Disagree 2	Strongly disagree 1	comments
Like your car, house and other amenities needs periodic assessment and maintenance do you think our body need the same?						
prevention is better than cure".						
Should a normal person also need a regular check up?						
Life threatening disease can be prevented with periodic health check up						
Person should take healthcare package on regular interval						
Do you know if a healthy person will undergo regular interval health check up it may live better and stay longer						

14) Which health care/wellness package is best for you……

1. Basic
2. Cardiac
3. Diabetic
4. Ortho
5. Any Other Which You Want to Suggest

15) Do you know the full form of the EHCC?

a) Eternal heart care centre b) Eternal health care centre c)Don't know

16) Have you ever been to that Eternal (EHCC) hospital?

a) Yes b) No

17) Do you know it's more cost effective than other private?

a) Yes b) No

18) Do you know they offer multi variety of services in one roof with world class facility?

a) Yes b) No

19) What is the better strategy to aware people about health care packages? Which mode do you prefer to get the information on health packages	Most appropriate. 5	Appropriate. 4	Somewhat appropriate. 3	Least appropriate. 2	Not appropriate 1	Comments name the best source(t.v. channel, radio channel, newspaper etc
Newspaper advertisement						
Mobile SMS						
Social media advertisement						
Television advertisement						
Check-up camps						

20) kindly suggest that how a wellness and health check-up packages be best taken through which medium	Most appropriate. 5	Appropriate. 4	Somewhat appropriate. 3 appropriate3	Least appropriate, 2	Not appropriate. 1

Hospital mobile app					
Hospital website					
Telephonic booking					
Through personal visit to hospital					
Others					

21) In your opinion how can a wellness package/health check-up packages can be more beneficial to you?

……