

# Nursing updates

- Overview
- Talent development
- New initiatives
- Attrition



# Nursing Overview (All locations)

Nursing Details	Locations					
	Total	Gurgaon	Patna	Indore	Ranchi	Lucknow
<b>Total Head count</b>	<b>4408</b>	<b>2248</b>	<b>615</b>	<b>234</b>	<b>223</b>	<b>1088</b>
<b>Male</b>	<b>965</b>	<b>501 (22%)</b>	<b>139 (23%)</b>	<b>94 (40%)</b>	<b>19 (9%)</b>	<b>212 (19%)</b>
<b>Female</b>	<b>3443</b>	<b>1747 (78%)</b>	<b>476 (77%)</b>	<b>140 (60%)</b>	<b>204 (91%)</b>	<b>876 (81%)</b>

Education :						
ANM	115	57	47	0	10	1
GNM	3110	1287	451	145	195	1032
B.sc. Nursing	1191	928	112	88	13	50
M.sc. Nursing	30	23	3	1	0	3
Post.Bsc. Nursing	50	43	2	0	5	0

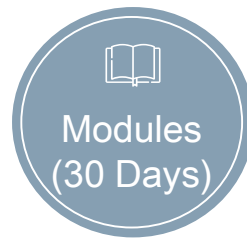
# Talent Development

*How we train...*



# 1. Induction training (30 days)

Each nurse has to undergo mandatory 30 days induction training followed by an OSCE (Objective structured clinical examination)



## 1. Mandatory Theory training (Topics covered during 30 days of induction)

- Admission process
- Transfer & Handover Process
- Discharge Process
- eHis/EMR/MyHub/Spandan
- Documentation
- Pediatric Assessment
- Assessment of Patient
- Soft skills & Communication
- Biomedical equipment
- Crash Cart & Emergency Medicine
- Emergency Codes
- Care of Care of Patients
- Nutrition & Diet
- Infection Control Practice
- Blood Transfusion Protocol
- NABH/JCI/ Nursing Excellence
- Fire safety

## 2. Hands on practice

- Common Emergencies
- Patient assessment & History Collection
- Diagnostics
- Medication Administration
- Basic Nursing Procedure
- ECG
- Care of Lines & Tubes
- PPE/Infection Control Practice
- Hands on Practice

## 3. BLS (Basic life support) – American heart association

- Basic life support provider course

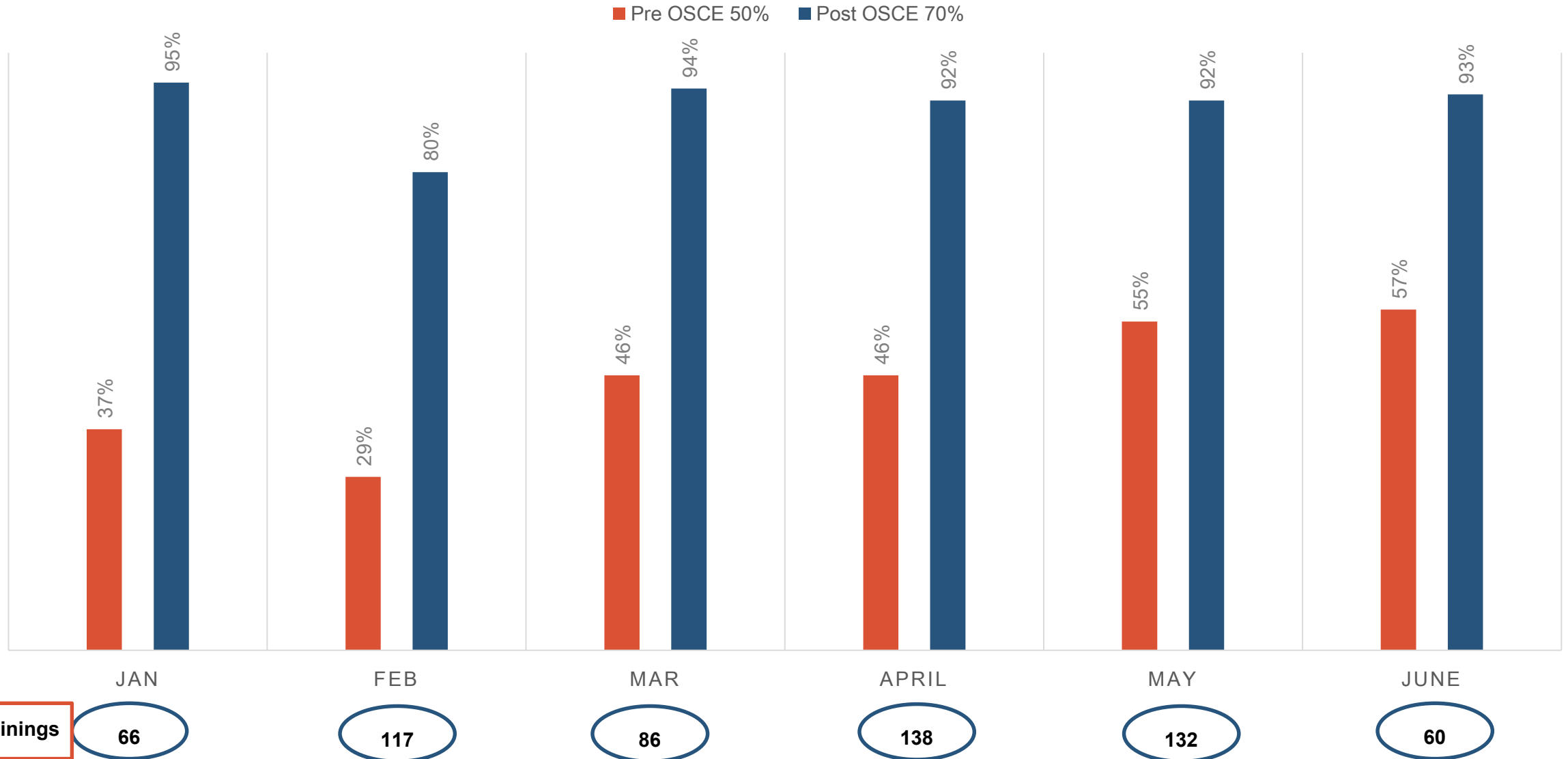
## 4. Departmental Specific

- Top 10 modules (Top 10 Diagnosis, Top 10 Procedure, Top 10 Drugs, Top 10 Investigation & Equipment)
- Return demonstration - RBS Monitoring/Medication Administration, ET/TT Suctioning & Care, Vitals Signs Monitoring, CVP/PICC Line Care/Catheter Care

# Impact

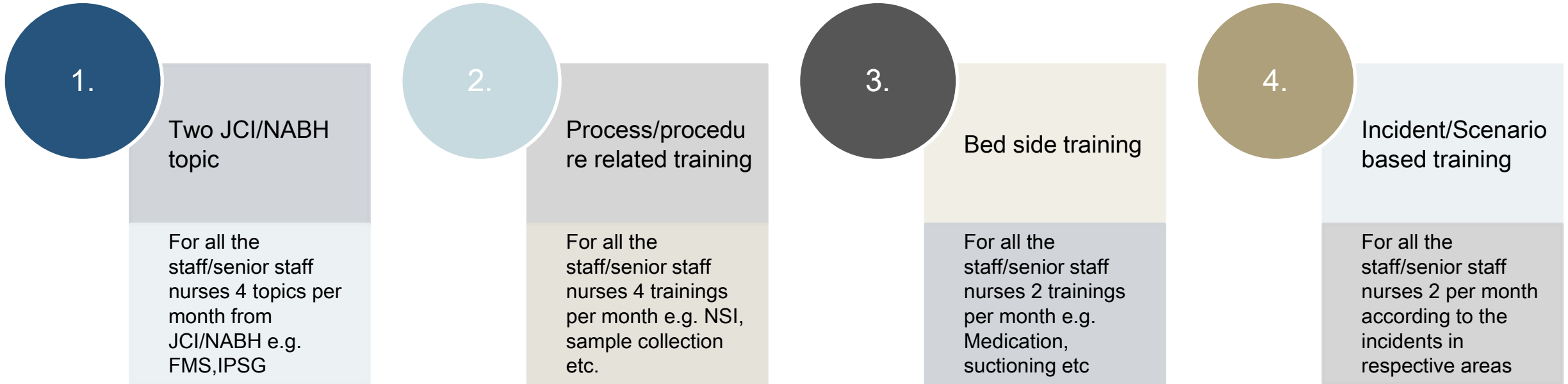
## OSCE & Return demonstration (GGN)

Pre & Post OSCE passing percentage (Jan'23 – Jun'23)



## 2. On the job training (OJT)

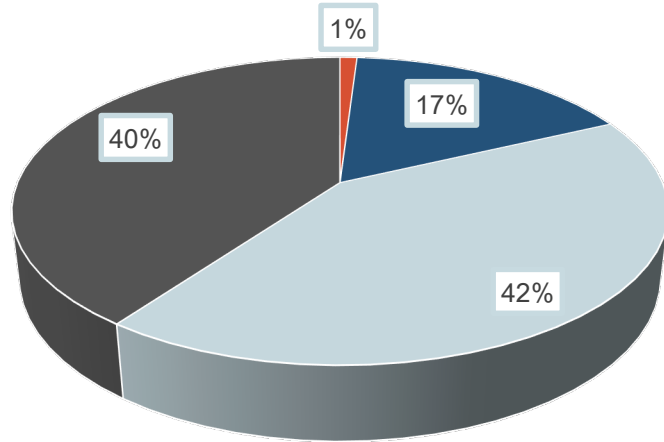
Each nurse has to undergo mandatory 8 hours/ month on the job training to ensure continuity of competency



# Quarterly Staff Competency Assessment (GGN) - April 2023

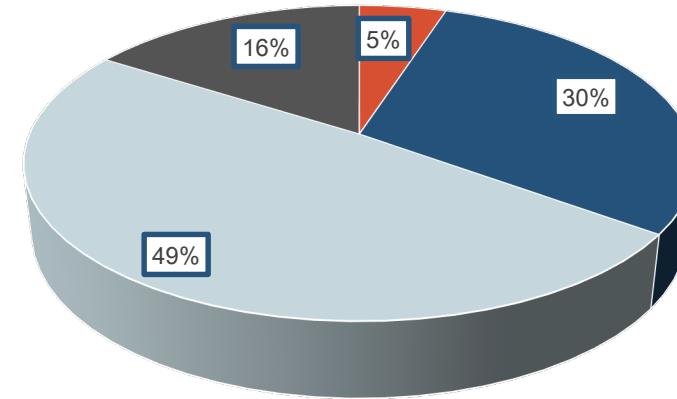
To evaluate the On job trainings

### ICU ASSESSEMT



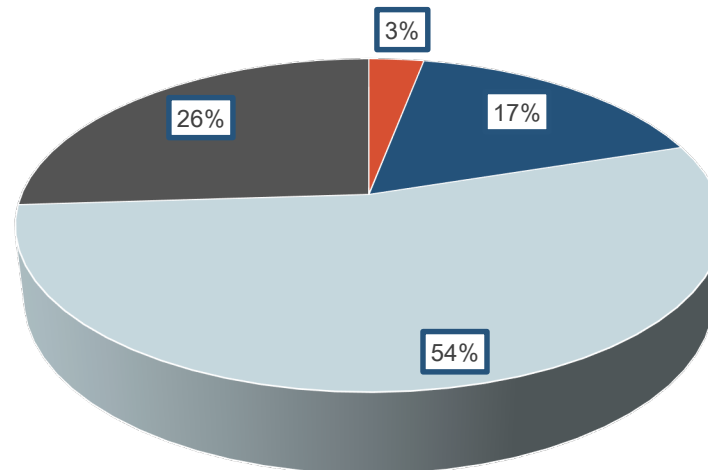
- 0-10 (POOR)
- 11-18 (AVERAGE)
- 19-24 (GOOD)
- 25-30 (EXCELLENT)

### IPD ASSESSMENT



- 0-10 (POOR)
- 11-18 (AVERAGE)
- 19-24 (GOOD)
- 25-30 (EXCELLENT)

### OPD ASSESSMENT



- 0-10 (POOR)
- 11-18 (AVERAGE)
- 19-24 (GOOD)
- 25-30 (EXCELLENT)

### 3. Specialty trainings

#### Introduction & Objectives

- Introduced to create opportunities and to ensure specialized care to the patients with the following objectives :
  1. To provide **autonomy** and increase responsibility of nurses and have a pool of nurses trained in the respective specialty.
  2. To improve the **critical thinking**
  3. To empower the nurses for **clinical decision making**
  4. To increase the **competency and skills** of nurses on specialized nursing fields
  5. To ensure **patient safety**





# Pre requisites & Course outline

Create a pool of specialized nurses trained in key specialties



## Classes

- Theory (192 hrs)- covers all basic theoretical knowledge/topic
- Practical (2496 hrs) - bedside trainings & demonstration

## Faculty

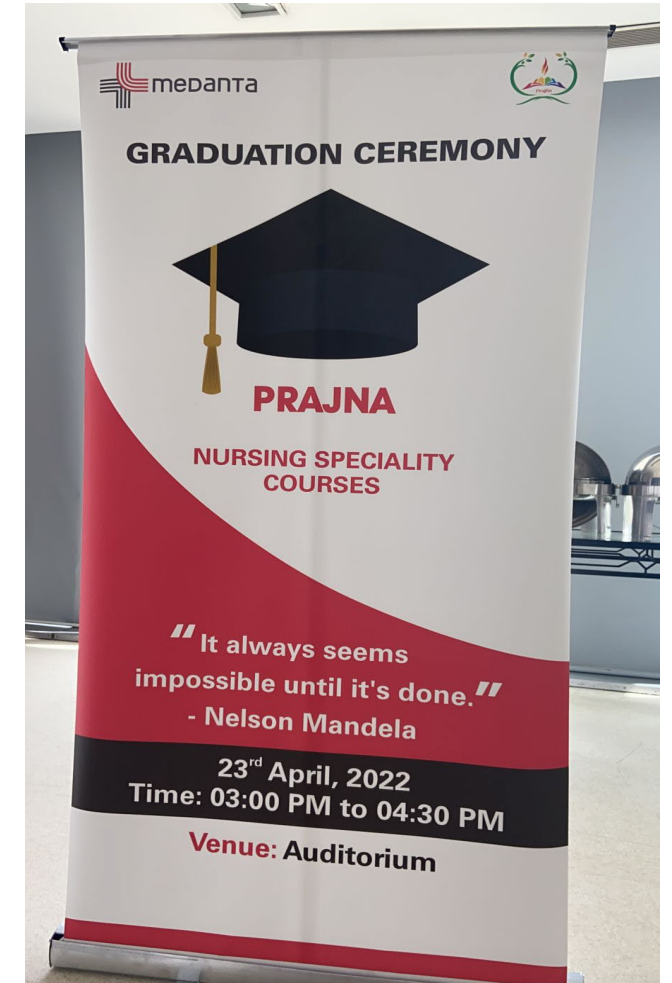
- Physicians- Chairman, Director & other attending Doctors
- Dietician,
- Clinical Instructors
- External lecturers- faculty from outside for lectures

## Evaluation

- Assignment - theory assignments, case & drug presentations
- Theory and practical exam – 60 % & 75% passing respectively

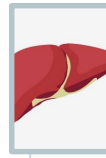
## Pre-requisites:-

- Pass a **mandatory entrance exam & counselling**
- RNRM (HNRC)
- 6 months working experience in Medanta
- **Diploma or Degree** in Nursing from recognized university
- Sign an **undertaking** to work at Medanta hospital for **at least 2 years after completion of course**



# Specialties Introduced

## Launch year specialties 2021- 2022



Liver transplant Nursing



Kidney transplant nursing



Neuroscience Nursing



Cardiology and CTVS Nursing



Oncology Nursing



Dialysis Nursing

## Additional specialties introduced 2022-23



Pediatric Nursing



Emergency & Trauma Nursing



Anesthesia Nursing



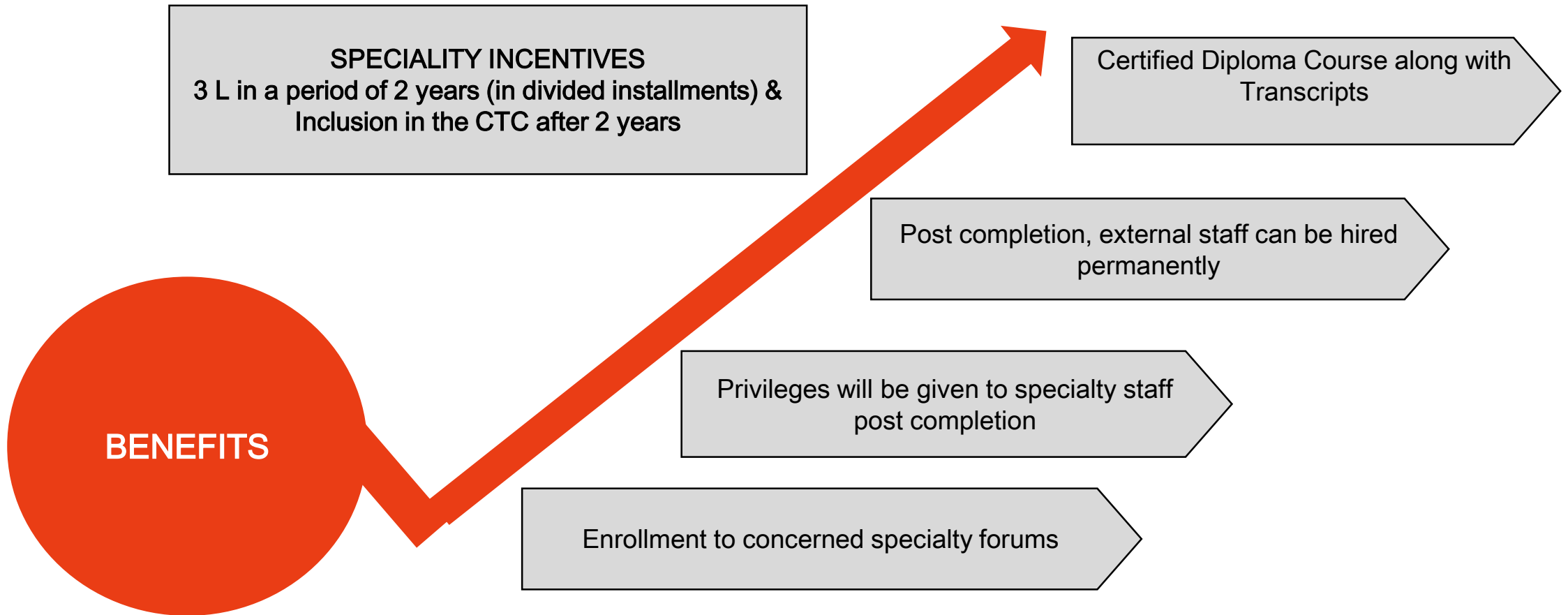
Operation Theatre Nursing



Orthopedic



Bone marrow transplant



# Retention after an year (1<sup>st</sup> & 2<sup>nd</sup> Batch) (GGN unit)

First Batch			
Specialties	No. of candidates passed	No. of staff retained	% Retention
Cardiology	9	7	77%
Neuroscience	6	6	100%
Kidney Transplant	7	7	100%
Liver Transplant	5	3	60%
Dialysis	7	3	43%
Oncology	10	4	40%
<b>Total</b>	<b>44</b>	<b>30</b>	<b>75%</b>

Second Batch			
Specialties	No. of candidates passed	No. of staff retained	% Retention
Cardiology	9	8	88%
Neuroscience	7	7	100%
Kidney Transplant	6	6	100%
Liver Transplant	6	5	83%
Dialysis	7	6	85%
Oncology	9	9	100%
Anesthesia	5	4	80%
ER	8	7	87%
OT	10	10	100%
Pediatric	4	4	100%
<b>Total</b>	<b>71</b>	<b>66</b>	<b>93%</b>

## 4. Advance Skill Training

01

IV Cannulation Training

Total – 14 hrs  
Theory – 03 hrs  
Return/Practical demonstration – 11 hrs

02

Stoma Care Course

Total – 14 hrs  
Theory – 10 hrs  
Return/Practical demonstration – 04 hrs

03

Wound Care Nursing

Total – 08 hrs  
Theory – 03 hrs  
Return/Practical demonstration – 05 hrs

04

Diabetic Educator

Modules - 04

05

Biomedical training

Modules – 02 (Basic & Advanced)



# **New initiatives (Competency based Nurse-Patient allocation)**

TISS (Therapeutic intervention scoring system)

NDRS (Nurses Duty Roster System)

# Introduction of TISS (Therapeutic intervention scoring system)

## Introduction

- A scoring system based on therapeutic intervention on critically ill patients. It is used to assess the quantity of care provided in a patient unit.
- TISS for each patient is recorded in the same shift (2 hours before handover) each day by a nurse.

## Objectives

To observe the appropriate utilization of Intensive care facilities

To observe the unit census

Evaluation of nursing workload & patient condition in a unit

To observe the severity of illness

To observe the nurse – patient ratio in a unit

# Scoring criteria

## ICUs

S No.	4 Points	Score
1	Cardiac Arrest and/or countershock within past 48 hours	4
2	Controlled ventilation with or without PEEP	4
3	Pulmonary Artery Catheter	4
4	Atrial and/or ventricular pacing	4
5	Hemodialysis in unstable patient	4
6	Intracranial Pressure monitoring	4
7	IABP(Intra Aortic Balloon Pressure)	4

S No.	3 Points	Score
1	Central iv hyper alimentation(Includes renal,cardiac and Hepatic failure fluid)	3
2	Pacemaker on standby	3
3	Chest tubes	3
4	IMV or assisted ventilation	3
5	CPAP	3
6	Concentrated K+ infusion via central catheter	3
7	Frequent infusion of blood products(>5 units/24 hours)	3
8	Vaso active drug infusion(1 drug)	3
9	Continuous antiarrhythmic infusions	3

S No.	2 Points	Score
1	Hemodialysis stable patient	2
2	Fresh Tracheostomy within 48 hours	2
3	Spontaneous respiration by endotracheal tube or tracheostomy	2
4	Gastro intestinal feeding	2
5	Parenteral chemotherapy	2

S No.	1 Points	Score
1	Hourly vital signs	1
2	stat blood tests	1
3	Intermittent scheduled iv medications	1
4	standard orthopedic traction	1
5	tracheostomy care	1
6	Peripheral Nutritional/Intralipid	1
	Total	71



# Scoring criteria

## Wards

S No.	4 Points	Score
1	Atrial and/or ventricular pacing	4
2	Peritoneal Dialysis	4
3	Platelet infusion	4
4	Lavage of acute GI Bleeding	4

S No.	3 Points	Score
1	Central iv hyper nutritional therapy(Includes renal,cardiac and Hepatic failure fluid)	3
2	Chest tubes	3
3	Concentrated K+ infusion via central catheter	3
4	Active diuresis for fluid overload or cerebral edema	3
5	Emergency Thora,para and pericardiocentesis	3
6	Coverage with more than 2 iv antibiotics	3
7	Treatment of seizures or metabolic encephalopathy(within 48 hours or onset)	3
8	Complicated orthopedic traction	3

S No.	2 Points	Score
1	2-Peripheral IV Catheters	2
2	Hemodialysis stable patient	2
3	Fresh Tracheostomy within 48 hours	2
4	Spontaneous respiration by endotracheal tube or tracheostomy	2
5	Gastro intestinal feeding	2
6	Replacement of excess fluid loss	2
7	Parenteral chemotherapy	2
8	Hourly neuro vital sign	2
9	Multiple dressing changes	2

S No.	1 Points	Score
1	1 Peripheral iv catheter	1
2	Routine dressing changes	1
3	standard orthopedic traction	1
4	tracheostomy care	1
5	Decubitus ulcer	1
6	urinary catheter	1
7	supplemental oxygen(Nasal or Mask)	1
8	Antibiotics iv(2 or less)	1
9	Chest physiotherapy	1
10	Extensive irrigations packings or debridement of wound fistula or colostomy	1
11	Gastro intestinal decompression	1
12	Peripheral Nutritional Therapy/Intralipid	1
	Total	73

# Criteria definition

Criteria - Patient Severity Scale						
Modified TISS Score			ICU		Ward	
Level	Score of ICU	Score of Ward	Maximum Acceptable ratio	Minimum Acceptable ratio	Maximum Acceptable ratio	Minimum Acceptable ratio
<b>High Risk Patient</b>	14-71	9-73	1:1	1:1	1:3	1:1
<b>Moderate Risk Patient</b>	8-13	6-8	1:2	1:1	1:6	1:1
<b>Stable Patient</b>	1- 7	1- 5	1:2	1:1	1:8	1:1

## Key advantages

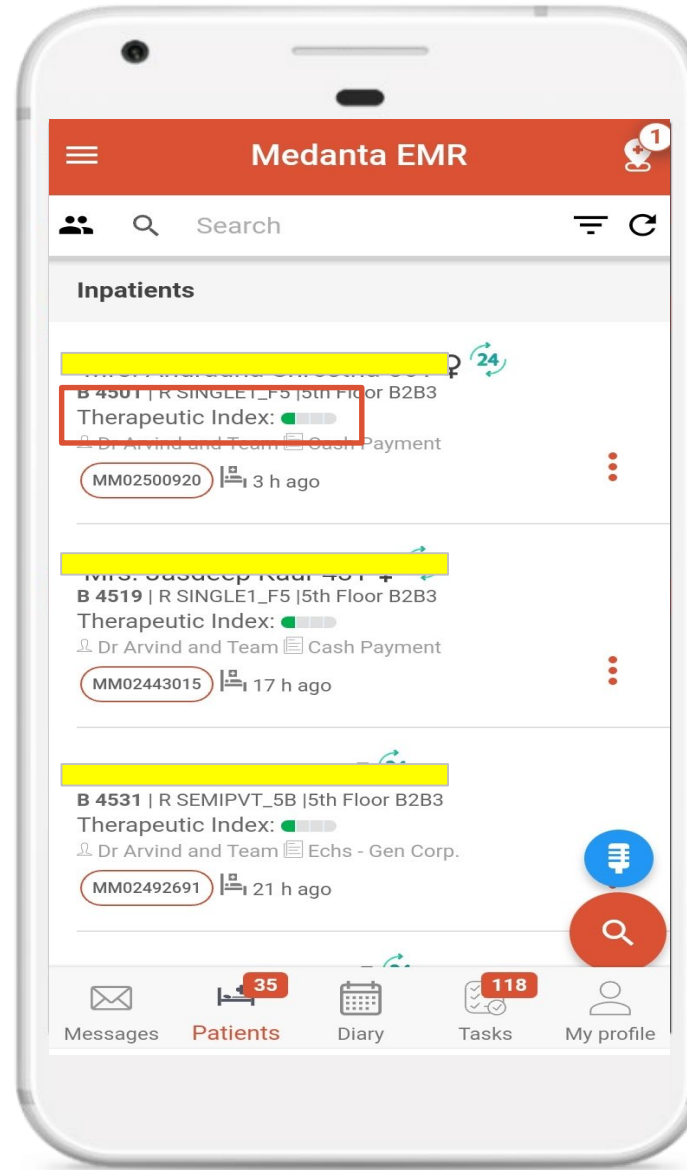
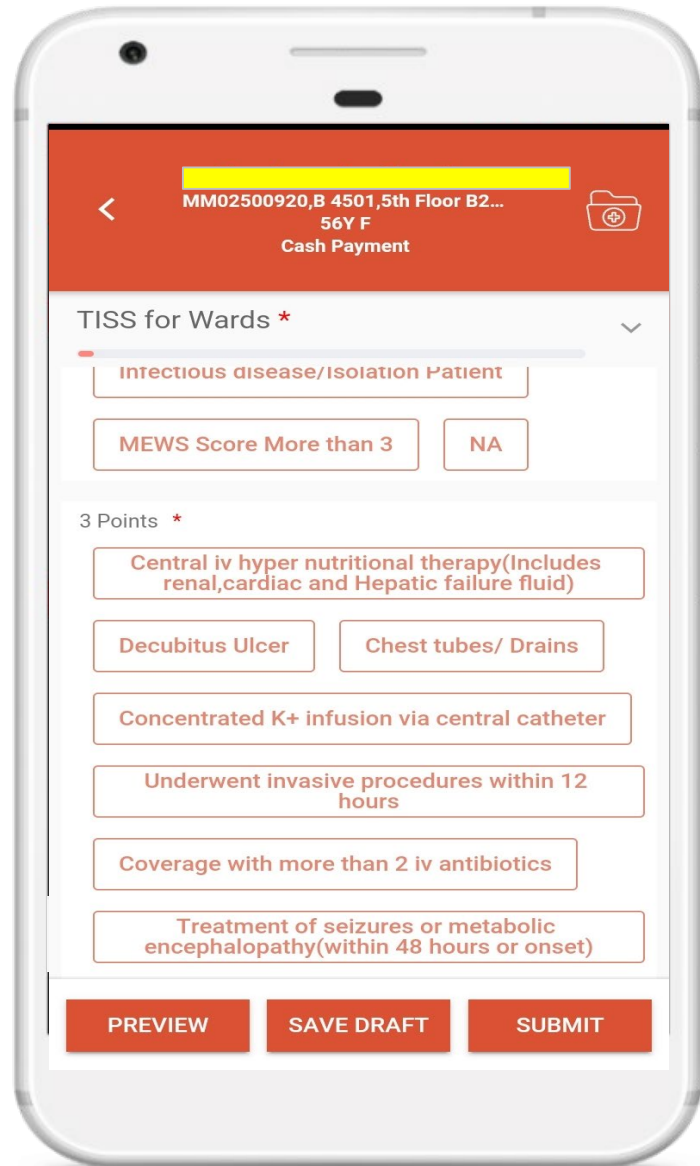
- Simplifying & organizing activities related to patient care
- An indicator of nurse's workload
- Information on nurse staffing ratios
- Analyzes the cost of intensive care relative to extent of care offered
- Quantitative validation of a clinical classification of patients

For ICU **	
Score	Ratio
If Score >13	01:01
If Score <13	01:02

For Wards **	
If Score > 16	01:01
If Score in between 10-15	01:03
If Score is <10	01:05
Pediatric (Age <12)	01:03

\*\* Score is calculated according to scoring criterias given in EMR & HIS for Wards & ICUs.

# EMR implementation of TISS



# Nursing competency allocation as per patient criticality

## Shift wise data (GGN unit)

### Sample daily Dashboard (28.03.2023)

Patient/Nurse distribution (Morning)	Grade A	Grade B	Grade C	Grade D	Team Leader	Grand Total
High Risk	26	35	63	4	11	139
Low Risk	48	159	217	12	50	486
Moderate Risk	17	56	81	1	7	162
TISS not done	6	10	21		4	41
Grand Total	97	260	382	17	72	828
Patient/Nurse distribution (Evening)	Grade A	Grade B	Grade C	Grade D	Team Leader	Grand Total
High Risk	13	44	52	3	8	120
Low Risk	61	142	266	13	56	538
Moderate Risk	16	54	74		12	156
TISS not done	7	30	26		11	74
Grand Total	97	270	418	16	87	888
Patient/Nurse distribution (Night)	Grade A	Grade B	Grade C	Grade D	Team Leader	Grand Total
High Risk	23	34	47	2	11	117
Low Risk	39	147	246	8	21	461
Moderate Risk	22	49	69		10	150
TISS not done	9	12	17		8	46
Grand Total	93	242	379	10	50	774

High risk patient gets competency assessment based experienced nursing staff

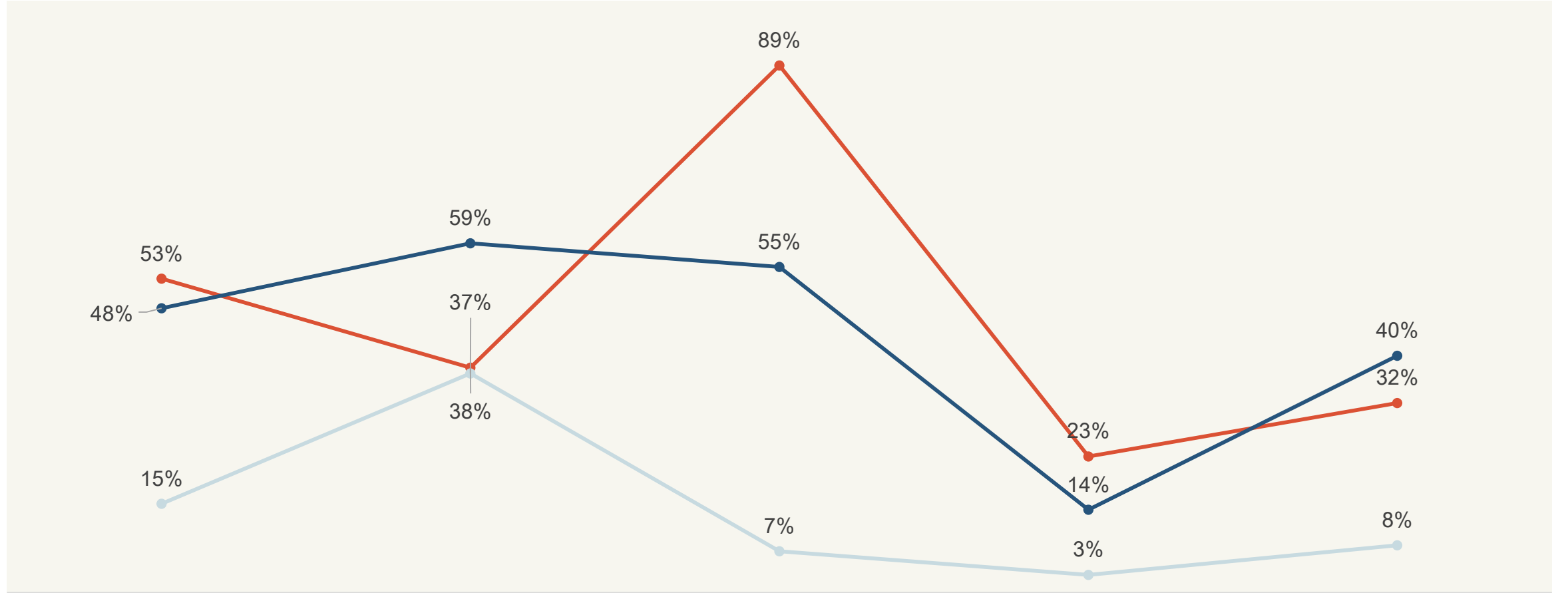
- **NDRS** is an application to ensure acuity based assignments for nurses and patients. Nurse-patient assignment is a very complex process which reoccurs every day at the start of the each shift. If it is not well defined it may create dissatisfaction among nurses and poor quality of care in patients. Creating well-balanced, high quality assignments is crucial to ensuring patient safety, quality of care, and job satisfaction for nurses.
- Done with an **objective** to improve patient assignment as per acuity and effective & efficient utilization of manpower & to promote & ensure patient safety.

## Key advantages

- Equal distribution of workload.
- Efficient manpower utilization.
- Improve patient satisfaction in terms of skill of assigned staff.
- Improve Nurses satisfaction in terms of workload.
- Ensure safe patient care

# Attrition

Attrition – YTD (All units)



— 2021-22 — 2022-23 — 2023-24 (1st Qtr)

**5 days /week  
Implementation**

**Specialty  
Incentives**

**Mentor mentee-  
“Parinam” project**

**New Joinee  
feedback  
(Quarterly)**

**Recreational  
Activities**

**Health days  
celebrated**

**Staff satisfaction  
survey (half yearly)**



*Almost 350 nurses pledged their organs on the occasion of Nurses Day*





**Jay Prabha Medanta Super Specialty Hospital, Patna**  
**Familiarization of Medanta Patna to GHIL Board Members**

Started with an aim to provide advanced healthcare to 120 mn people of Bihar  
**Delivering highest end of medical services in Bihar**



- Largest private hospital in Patna with planned bed capacity of 650
- Built-up Area of 10 Lakh Sq. ft.
- Started IPD in Jan'2022 with:
  - 100 operational beds
  - 4 OTs
  - 2 cath labs
  - 28 ICU beds
- Started with all major specialties: Cardiac, Neuro, Onco, and Gastro



# From ~100 beds in Jan'22, we grew to over ~300+ beds in FY'23

Delivering highest end of medical services in Bihar

## Beds Addition

**102 Beds Added**

**29 Critical Care Beds added**

## Specialties and services launched

From 7 specialties to 15+ specialties now

### 8 New Specialties

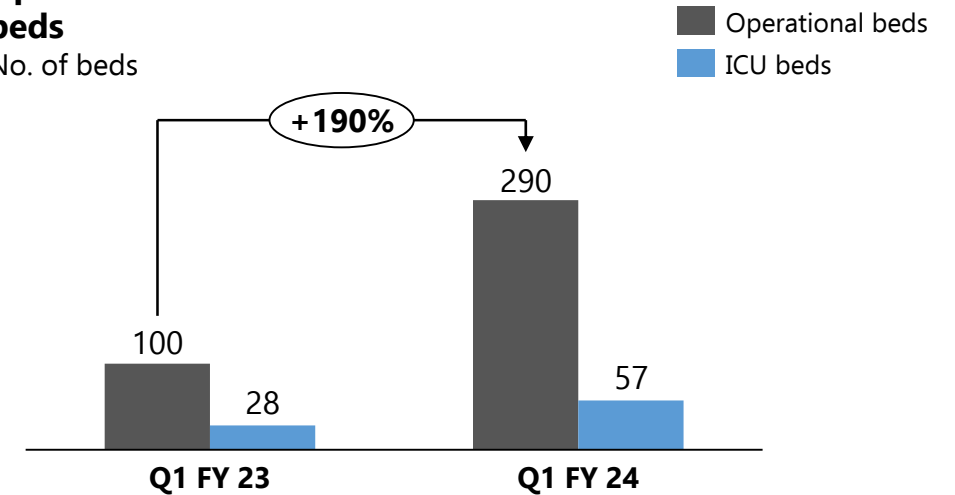
- Gastroenterology
- Surgical Oncology
- Radiation Oncology
- Psychiatry
- Paediatrics
- ENT
- Dental
- Blood Bank

## Infrastructure/technology

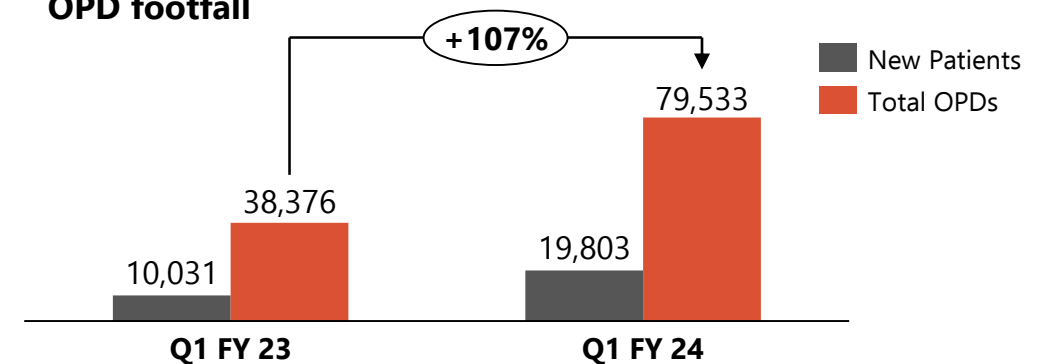
- From **4 OTs** in Jan'22 to **8 operational now** (5 additional to be handed over this month- will take total count to 13 OTs)

## Operational beds

No. of beds



## OPD footfall



# Major Achievements



**91,704** Registrations  
**1,54,269** OPD



**18,075** Admissions



**4,133** Total Surgeries  
**685** Cardiac Surgeries



**5,109** Cath Procedures  
**1,116** Angioplasties

Data till 30<sup>th</sup> June 23

# Exceptional clinical talent on boarded in year 1



Clinicians in first full year of operations



**Dr. Pramod Kumar**

Director & HOD  
Clinical & Preventive Cardiology



**Dr. Ajay Kumar Sinha**

Director  
Clinical Cardiology & Research



**Dr. Anshuman Kumar**

Consultant Endocrinology  
& Diabetes



**Dr. Saket Sharma**

Director Respiratory  
Medicine



**Dr. Suraj Kumar**

Director - Nephrology &  
Kidney Transplant Medicine



**Dr. Sanjay Kumar**

Director  
CTVS



**Dr. Rajeev Ranjan**

Director - Cardiovascular  
Anesthesia and CTVS ICU



**Dr. Ranjan Kumar**

Director  
Diagnostic Radiology



**Dr. Mrityunjay Kumar**

Associate Director  
Internal Medicine



**Dr. Sanjoy Kumar**

Director - GI Surgery,  
GI Oncology & Bariatric Surgery



**Dr. J Chandra Pandey**

Director  
General Anesthesia



**Dr. Niharika Roy**

Senior Consultant  
Breast Services



**Dr. Amit Kumar**

Senior Consultant  
Medical and Haemato Oncology



**Dr. Mukund Prasad**

Director  
Neurosurgery



**Dr. Rajiv Ranjan Sinha**

Director  
Orthopaedics



**Dr. Amarendra Amar**

Senior Consultant  
Medical and Haemato Oncology



**Dr. Prabhat Ranjan**

Director - Urology and  
Kidney Transplant Surgery



**Dr. Imranul Haque**

Director  
Pathology & Laboratory Medicine



**Dr. Karan Bhargav**

Associate Consultant  
Gastroenterology



**Dr. Ravishwar Narayan**

Consultant  
Nuclear Medicine

# Significant addition in senior clinicians across specialties

Exceptional clinical talent to provide highest quality of care

## Significant additions in FY 2023

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**Dr. Rajiv Ranjan Prasad**  
Director  
Radiation Oncology



**Dr. Vibhu Priyadarshi**  
Director  
Internal Medicine



**Dr. Kishore Jhunjunwala**  
Director  
Critical Care Medicine



**Dr. Sundeep Kumar**  
Associate Director  
Surgical Oncology GI & Gynaecology



**Dr. Amlan Gupta**  
Associate Director  
Histopathology



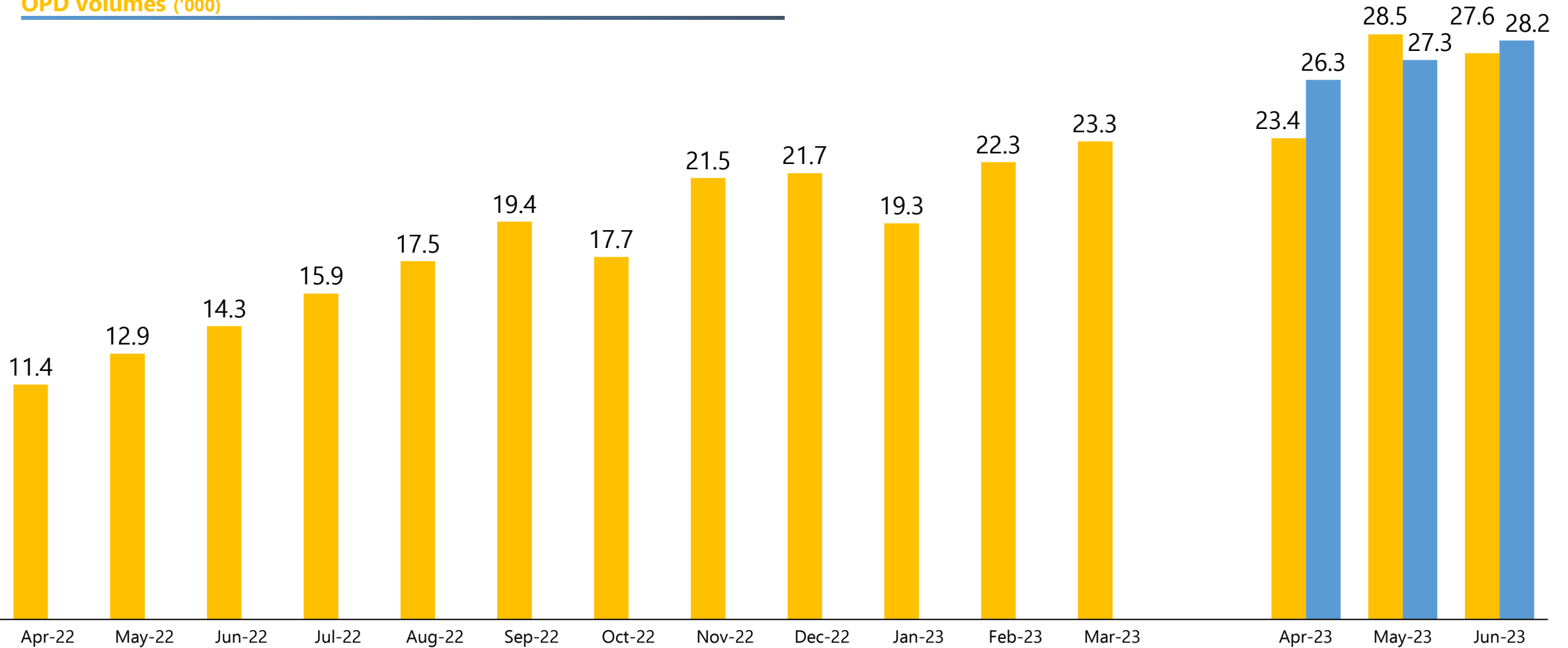
**Dr. Sarita Sharma**  
Senior Consultant  
Gynaecology and Gynaecology

# While we saw strong growth in OP volumes from 22k in Q3 FY23 vs 27k in Q1 FY24.... (1/2)

Strong growth in OP footfall

**OPD volumes ('000)**

■ Actual  
■ Budgeted

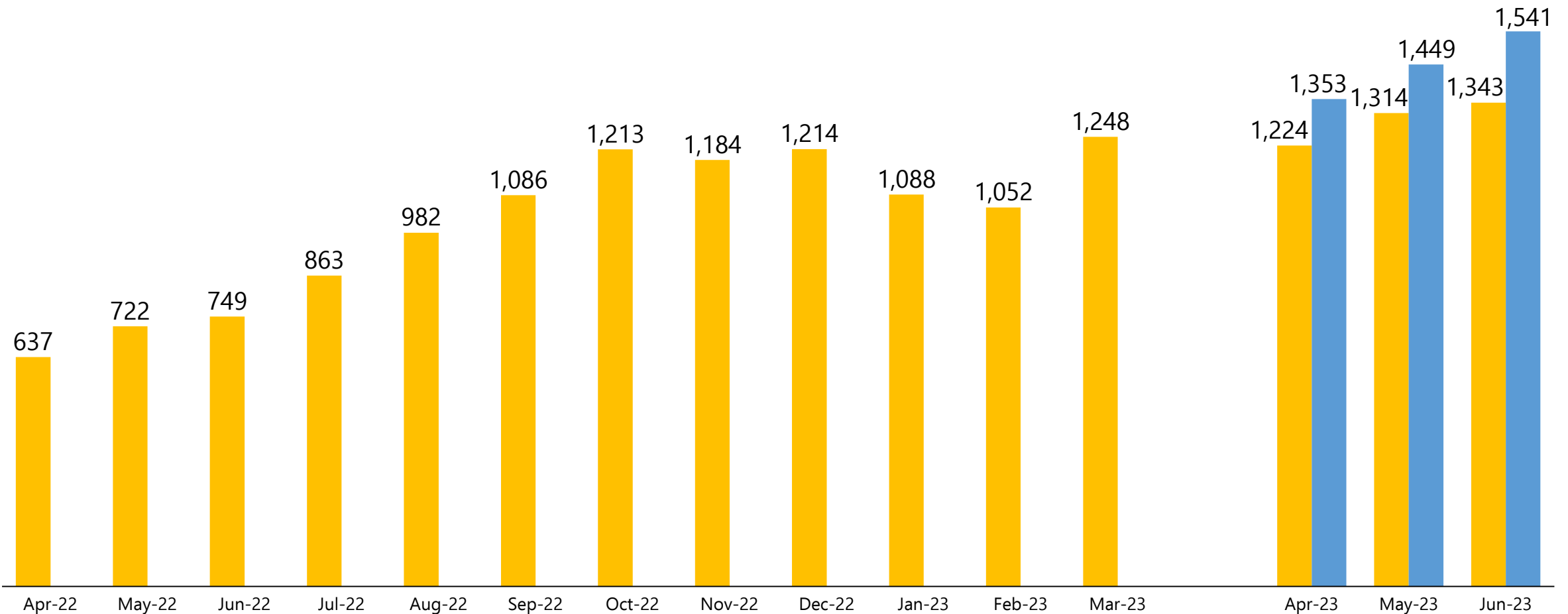




## IP volumes in the range of 1200-1300 per month (2/2)

IP in Q1 at 89% of the budgeted volumes

IPD volumes ('000)



# Infrastructure & Major Equipment



MRI Machine | Model:  
Magnetom Altea | 32 Channel  
MRI 1.5T with Biomatrix  
Technology



CT Scan | Model: Somatom  
go.Top | 128 Slice CT  
Scanner



PET CT | Model: Biograph  
mCT | Biograph mCT-S (40)  
Wide Bore PET CT Scanner



Gamma Camera | Model:  
Symbia Evo Excel | Symbia Evo  
Excel Dual Head Gamma  
Camera



Cathlab Machine  
(02 Nos.) | Model:  
Artis Zee Floor |  
Artis Zee Floor  
combo Card./Rad.



Mammography  
Machine | Model:  
MAMMOMAT  
Inspiration |  
MAMMOMAT  
Inspiration for  
Tomosynthesis



ECHO Machine |  
Model: EPIQ  
CVXi(Philips) |  
EPIQ CVXi 3D/4D  
Ultrasound  
System

# MAJOR INSTALLATIONS



Plasma Sterilizer  
Model: Sterrad  
100NX



LTSF Sterilizer (2 Nos.)  
Model: GSS67F



Steam Sterilizer  
Model: Solsus 66



Surgical Microscope  
Model: Opmi Pentero  
800



Heart Lung  
Machine (2 Nos.)  
Model: APS



ECMO Machine  
Model:  
Rotaflow II



Neuro Navigation System  
Model: NIM Eclipse



BMD | Model: Prodigy  
Advance | Prodigy  
Advance Densimeter  
Full Size

# MAJOR INSTALLATIONS



HD Lap Tower (3 Nos.)  
Karl Sotrz



4K Lap Tower  
Stryker



Endoscopy  
Tower(2 Nos.)  
Olympus



Ventilator (30 Nos.)  
Model: Carescape  
R860



IABP Machine (7 Nos.)  
Model: CS 300



Pulmonary  
Function Test  
Powercube  
Diffusion +  
Installed in Mar-  
2022

## UPCOMING EQUIPMENT



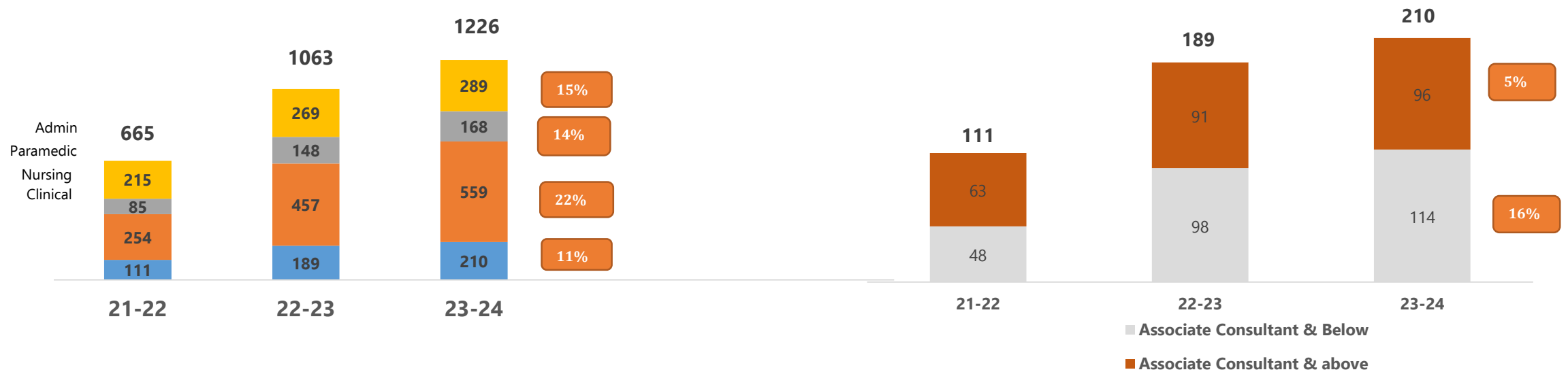
Linear Accelerator

Model: EDGE II

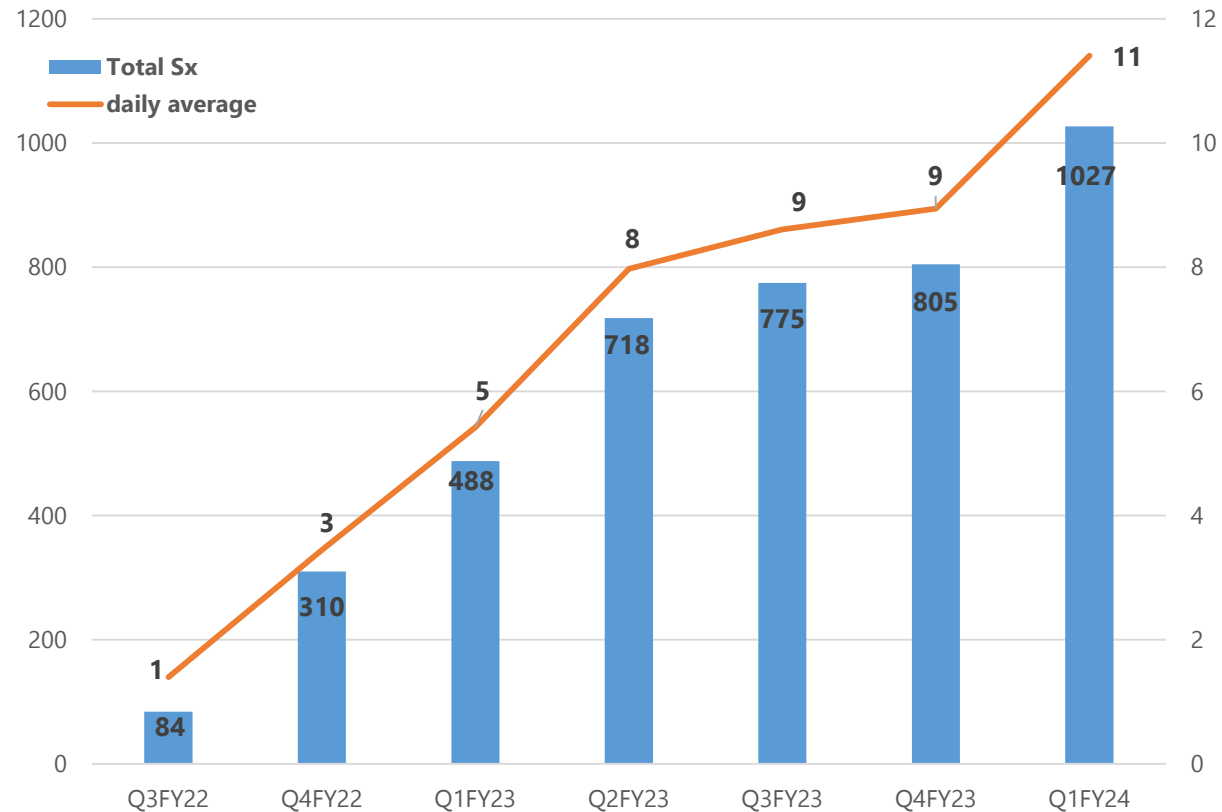
Linear Accelerator Model Edge II  
with Eclipse Treatment Planning  
System & ARIA Oncology  
Information System

# Employees Headcount Trend

**Change from  
2021-2024**



# Surgical Volume trend (quarterly)



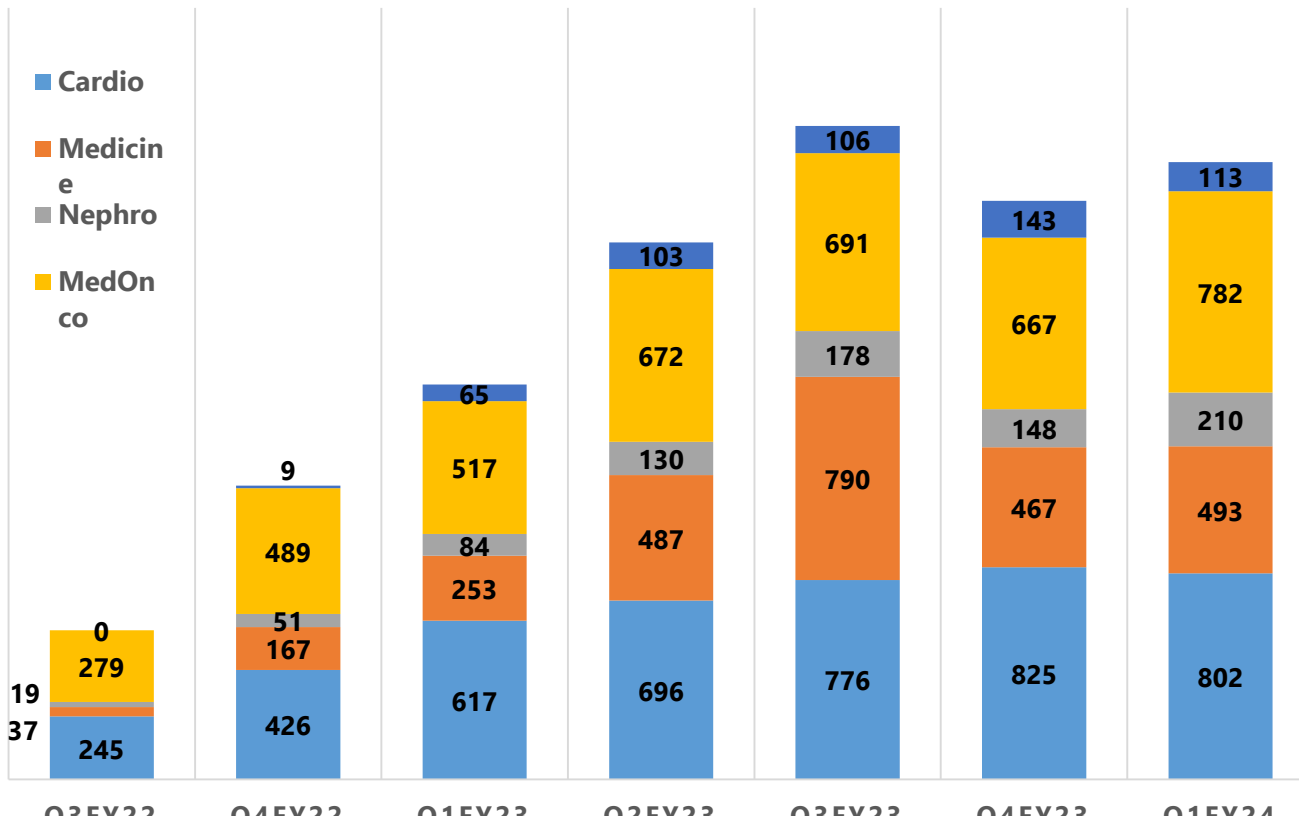
Nov-Dec

## Speciality wise surgeries FY23

Cardiac Surgery	491
Neurosurgery	315
GI Surgery	704
Urology	645
Orthopaedics	239
Surgical Oncology	137



# Non Surgical volume trend (quarterly)



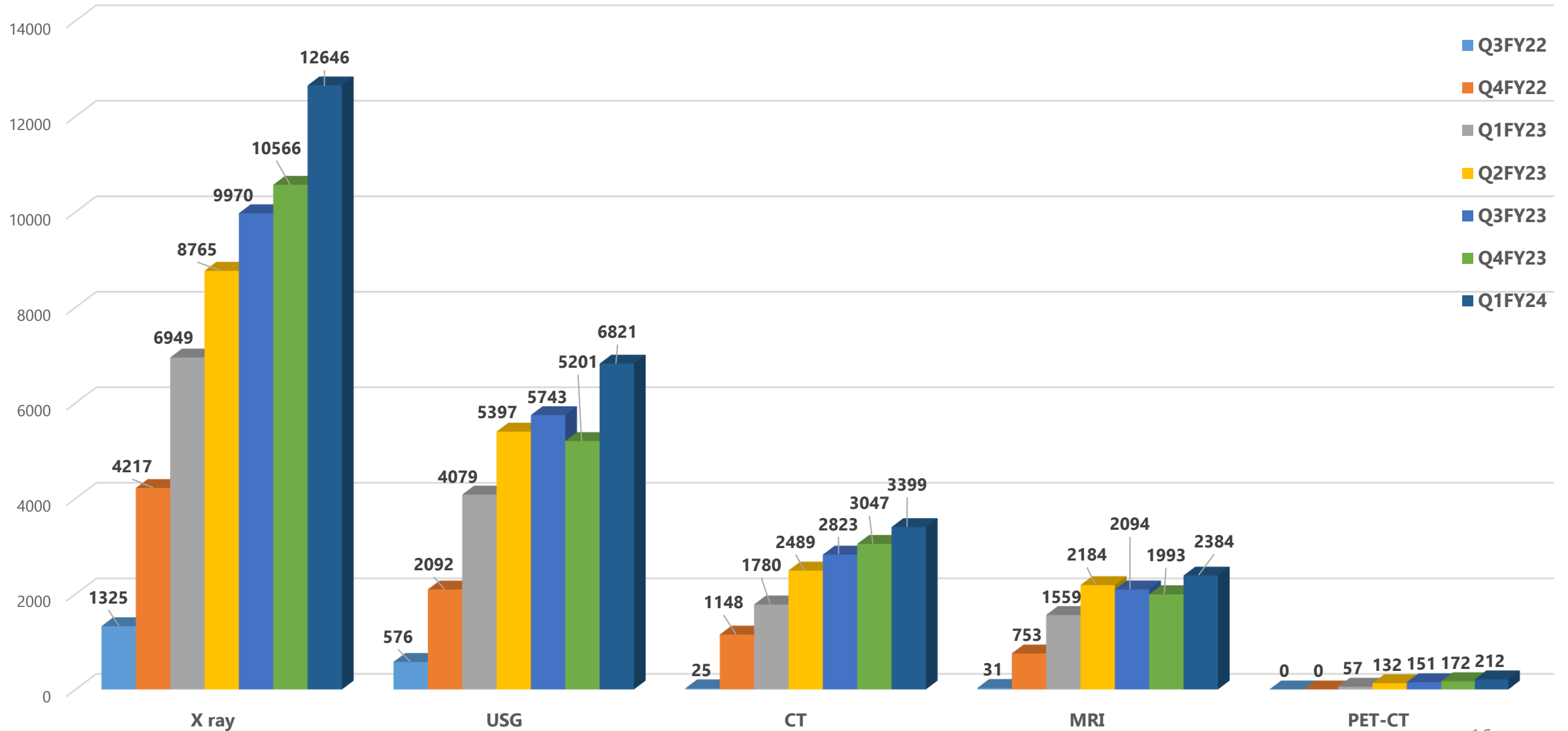
Nov-Dec

## Speciality wise non Surgical FY23

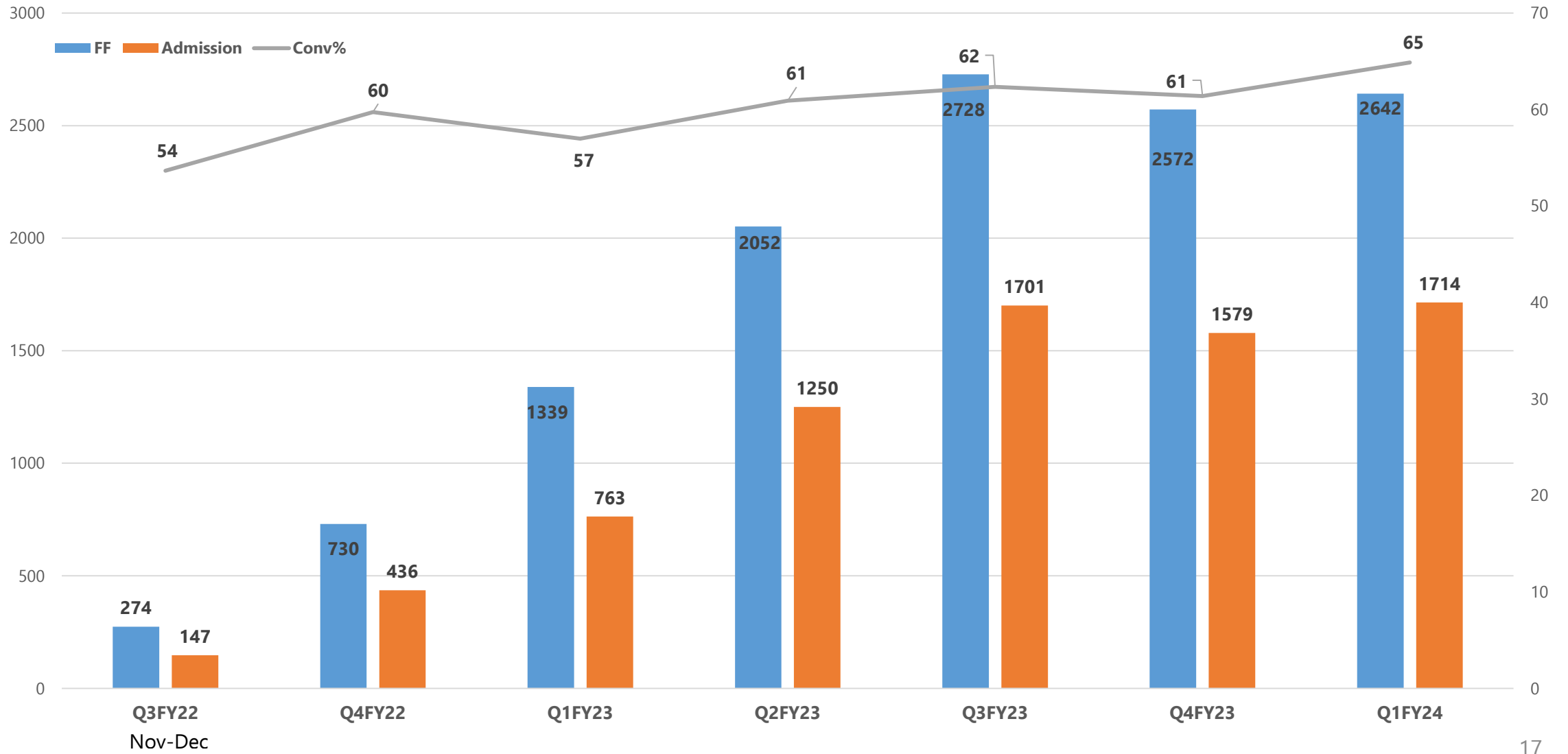
Cardiology	2914
Medicine	1999
Nephrology	540
Med Oncology	2547
Neurology	417



# Radiology volume trend



# ER footfall trend



# Governing Committees

## Directors Committee : Monthly

### Patient Care

Quality Assurance Committee

**Monthly**

Mortality & Morbidity Committee

**Monthly**

Hospital Infection Control Committee

**Monthly**

Pharmacy & Therapeutic Committee

**Quarterly**

### Safety & Risk Management

Code blue review Committee

**Monthly**

Safety Committee

**Monthly**

Blood Transfusion Committee

**Once in 3 months**

Radiation Safety Committee

**Alternate Month**

Diagnostics Review Committee

**Alternate Month**

OT Committee

**Alternate Month**

### Operational Management

Privileging and Credentialing Committee

**Quarterly**

MRD Committee

**Monthly**

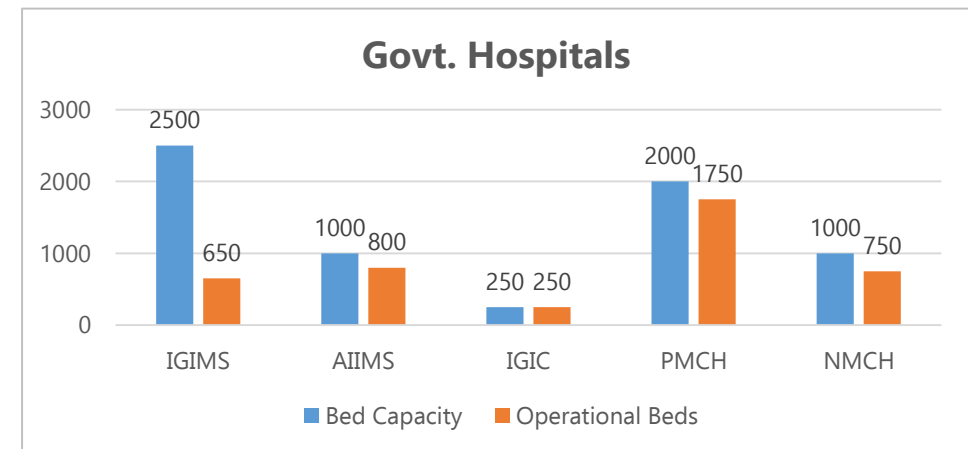
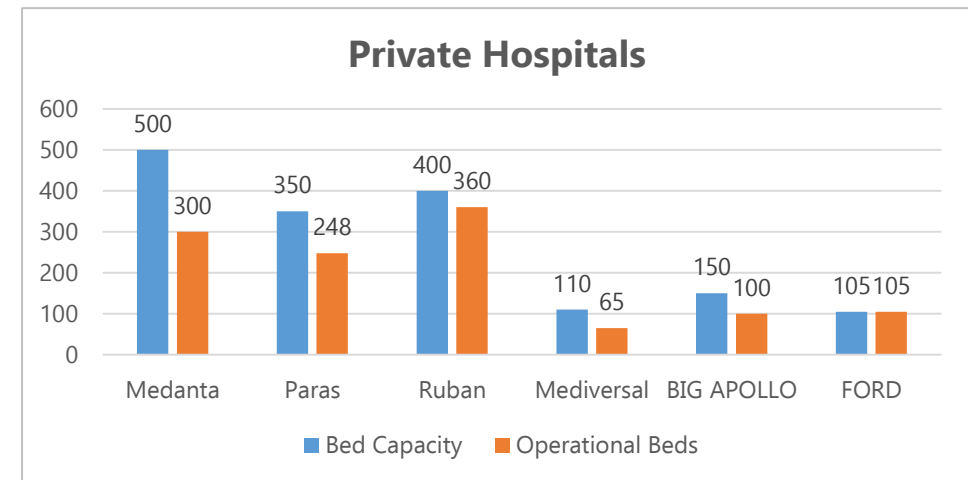
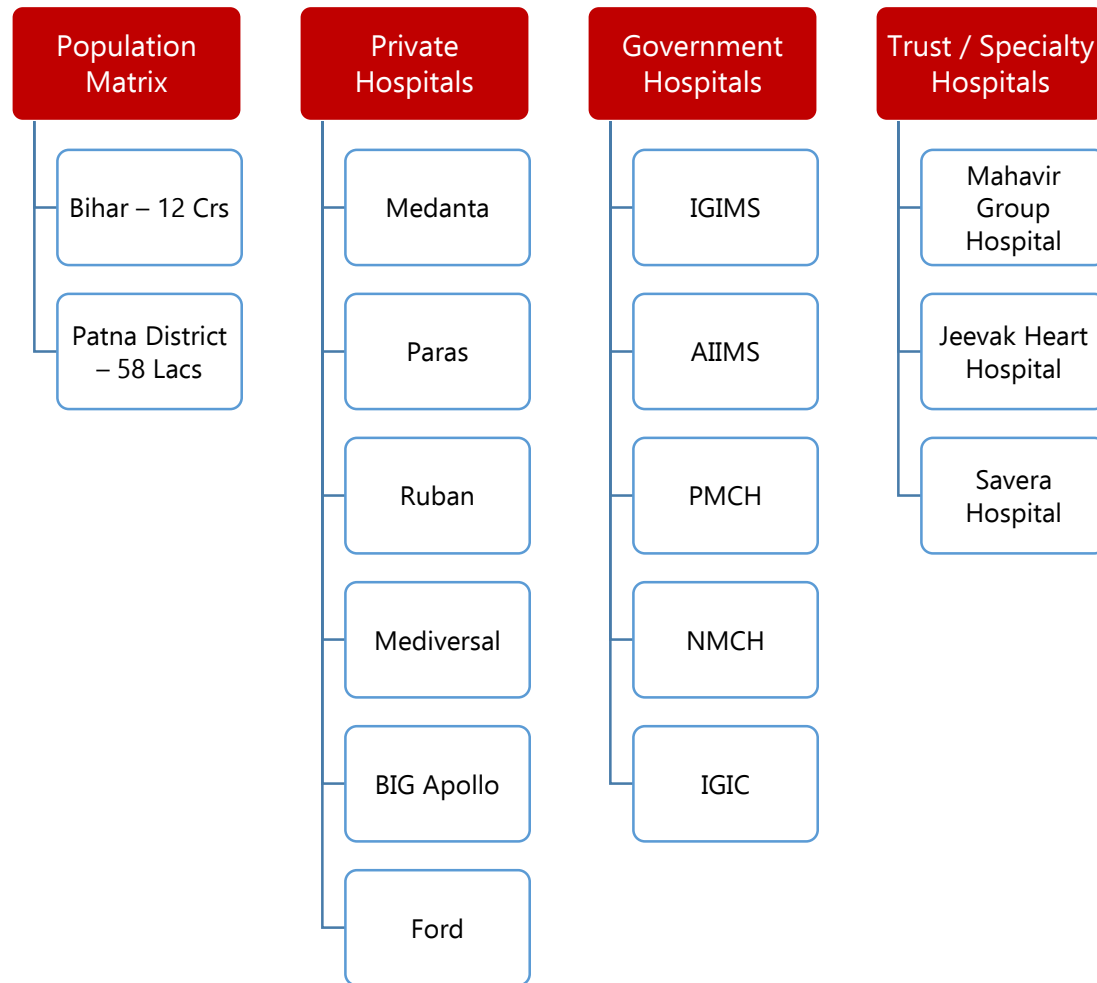
Grievance Committee

**As and when required**

Internal Complaint Committee

**As and when required**

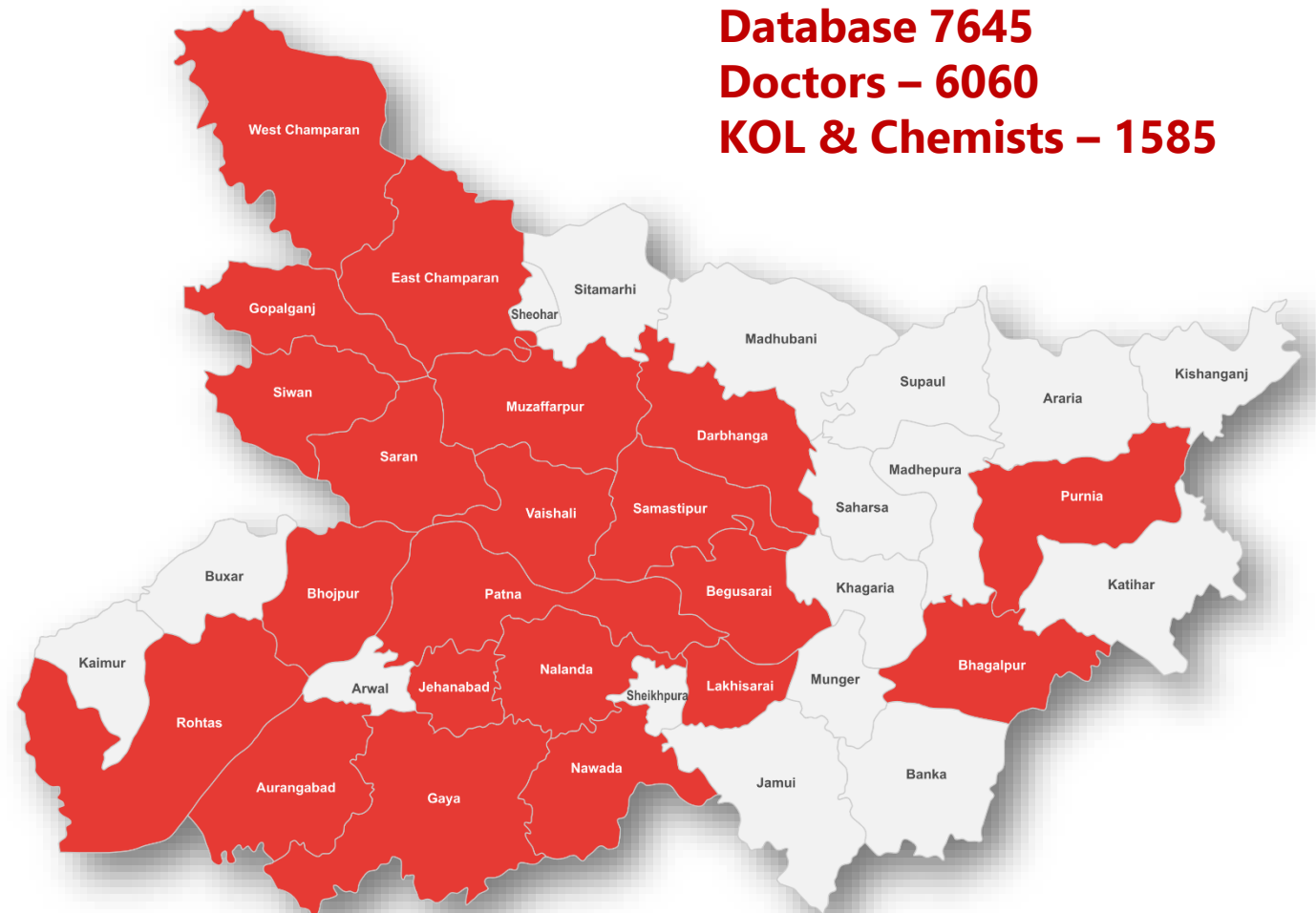
# Market - Segmentation



# Operation Flood

- Initiated to drive awareness & local connect of Medanta Patna across all districts of Bihar
- Covered 21 districts so far
- Database of **7153** doctors, KOLs & Chemist updated
- **100** plus New referral doctors engaged
- **5** associations empaneled

Data till 31<sup>st</sup> July 23



# OOPDs

## New OOPDs

### Gaya

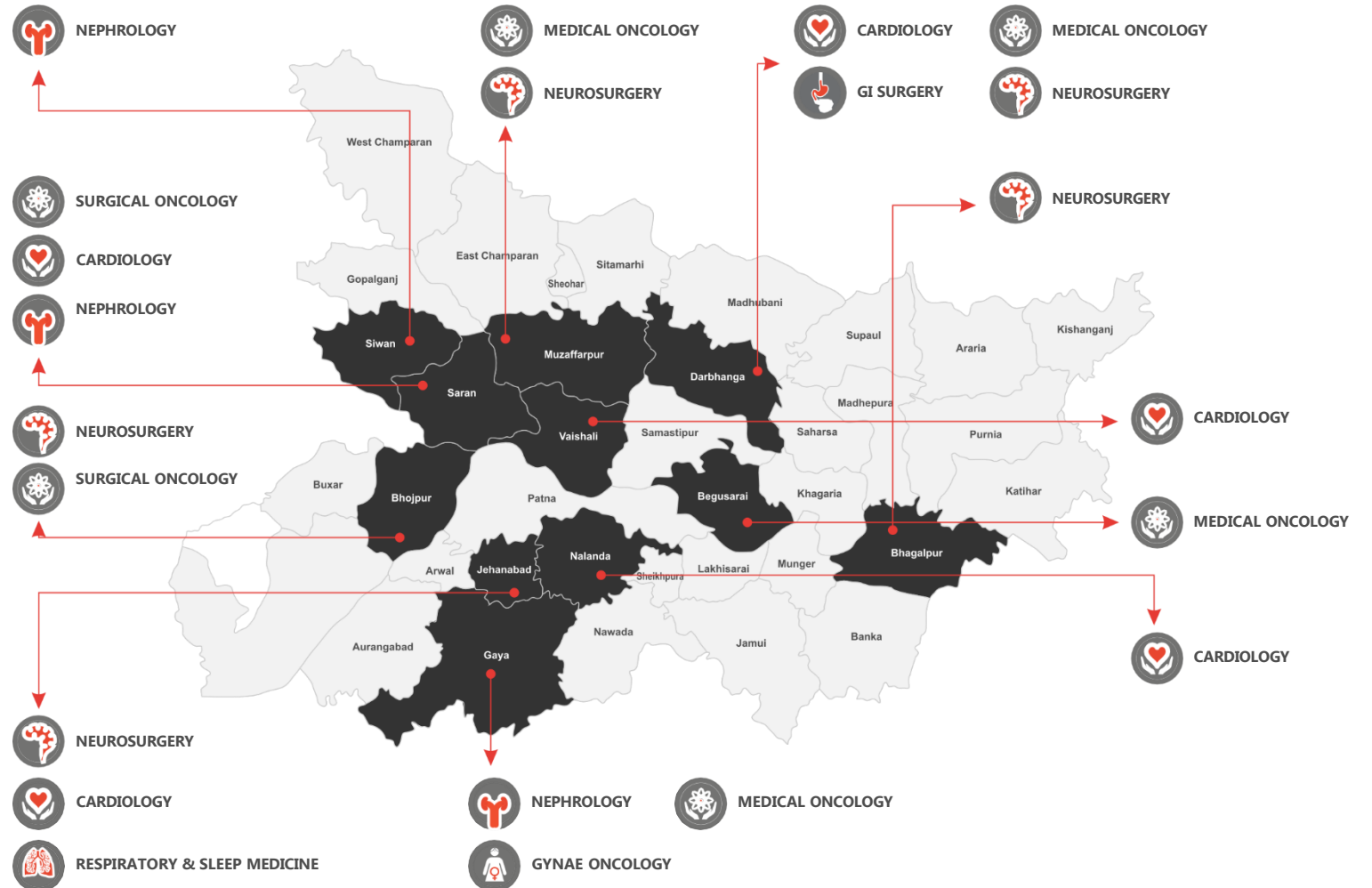
- Dr Neeraj Kumar (Orthopedics)
- Dr Pramod Kumar (Cardiology)
- Dr Sanjay Kumar (CTVS)

### Muzaffarpur

- Dr Anuj (Neurosurgery)
- Dr Sanjay Kumar (CTVS)

### Bhagalpur

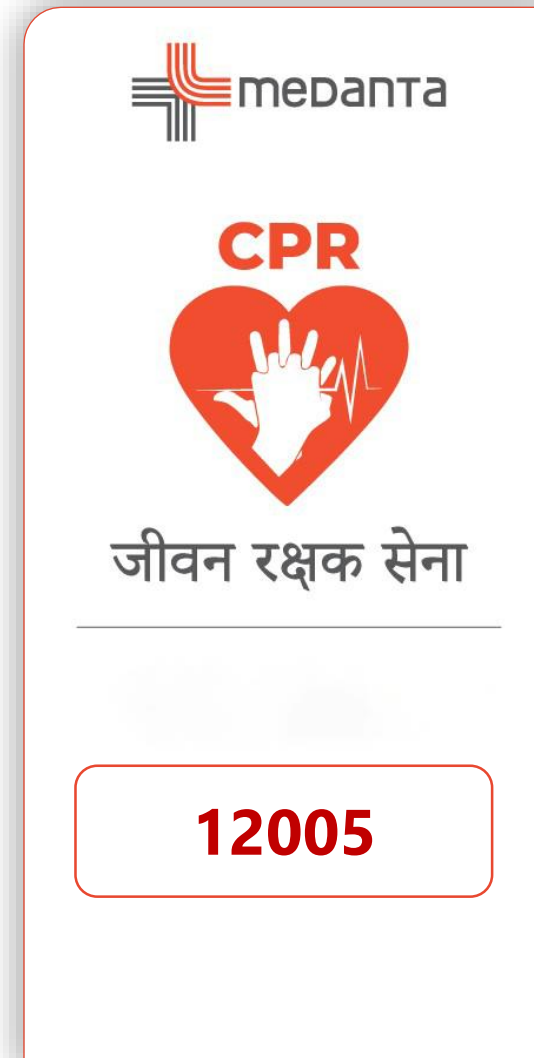
- Dr Rajiv Ranjan Prasad (Radiation Oncology)



# Thought Leadership through CPR Training Program

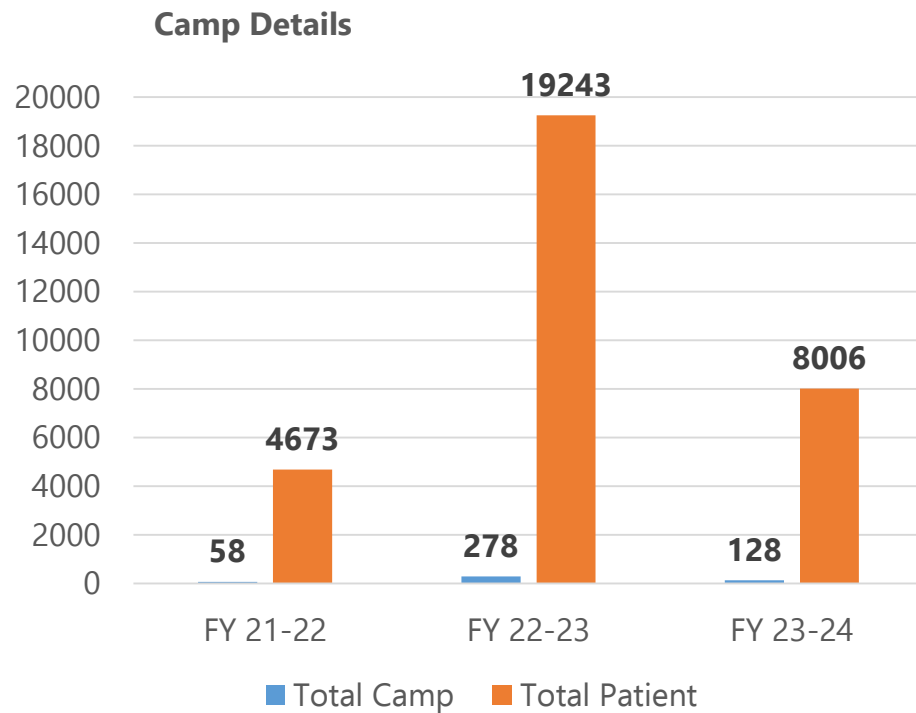
- Did **108** Training programs and trained **12005** individuals
- Trained every employees of Medanta Patna including off roll staff - ongoing
- Increase Brand Recall – Emergency They need to think “**Medanta**”
- Engaged Cardiologist & Critical Care team with Nursing Home, Medical Colleges, PSUs, District Administration & Civil Surgeons
- Involved many PSUs / Association / KOLs to join the initiative

Data till 31<sup>st</sup> July 23



The graphic features the Medanta logo at the top, followed by the text 'CPR' in red. Below this is a red heart icon containing a white hand and a white ECG line. Underneath the heart is the Hindi text 'जीवन रक्षक सेना' (Jeevan Rakshak Sena). At the bottom, the number '12005' is displayed in red within a rounded rectangular box.

# Community Outreach Program



Data till 31<sup>st</sup> July 23

Executed **464** camps and screened **31922** so far  
 Geography covered 18 districts of **Bihar, Uttar Pradesh & Jharkhand**

निःशुल्क स्वास्थ्य  
जांच शिविर

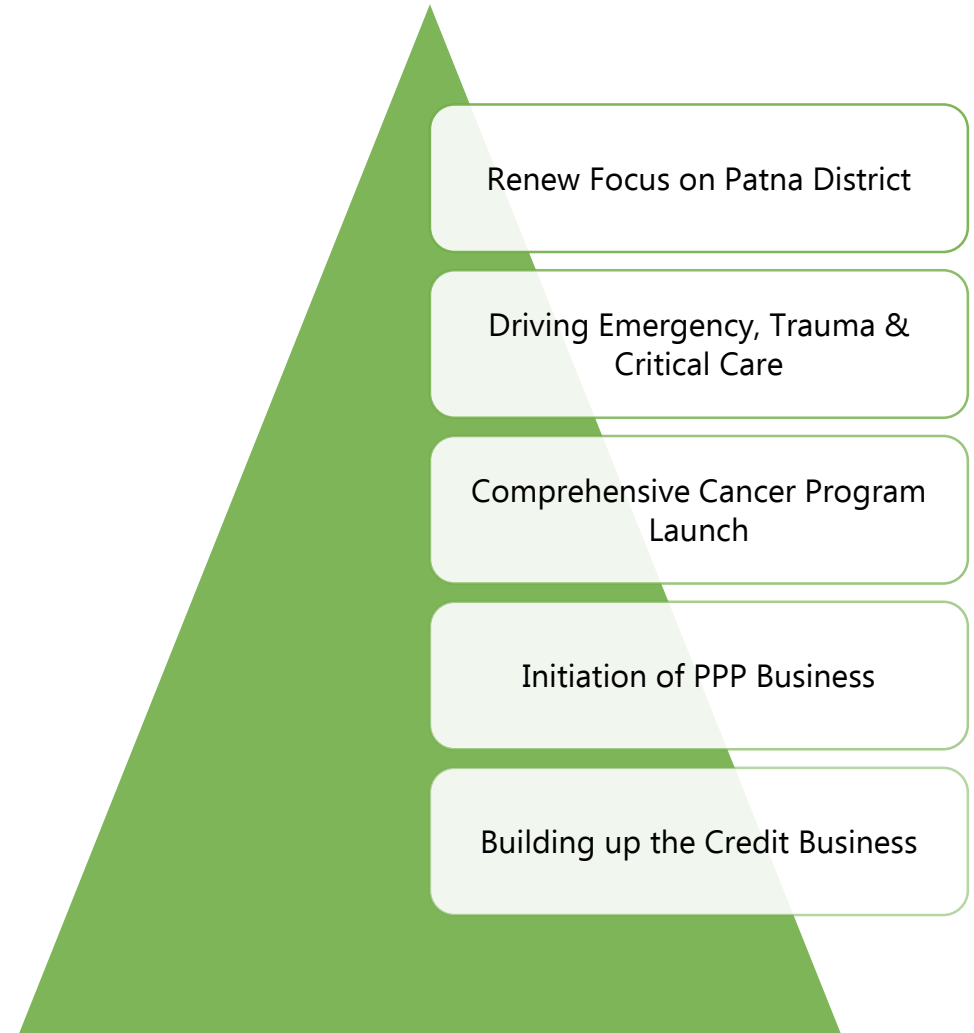
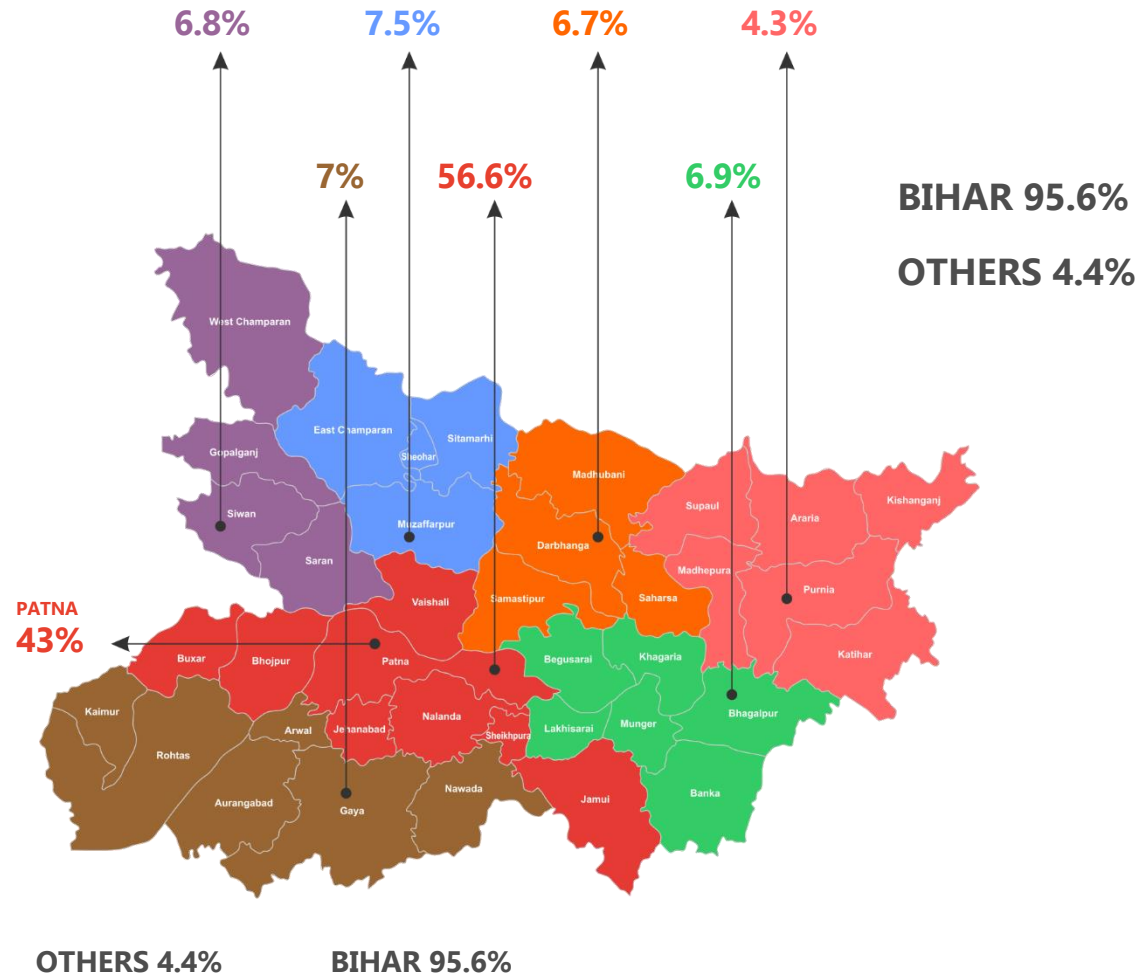




# Way Forward

Marketing Initiatives

# Driving IPD Volumes



# Renew Focus on Patna District



- Patna District comprises of around **43% of total business**
- Estimated catchment **population is ~60 lacs.**
- Initiation of 2 Mediclinic in Patna – Gola Road & Hajipur
- Organizing Walkthrough of Hospital for doctors, KOLs & Key associations
- In house CMEs / Workshops
- Organizing at least 15 General / Super Specialty camps in Patna Peripheries
- Nursing Home Connect - Engaging with Nursing Homes with different specialties in Patna & Peripheries.

# Driving Emergency, Trauma & Critical Care



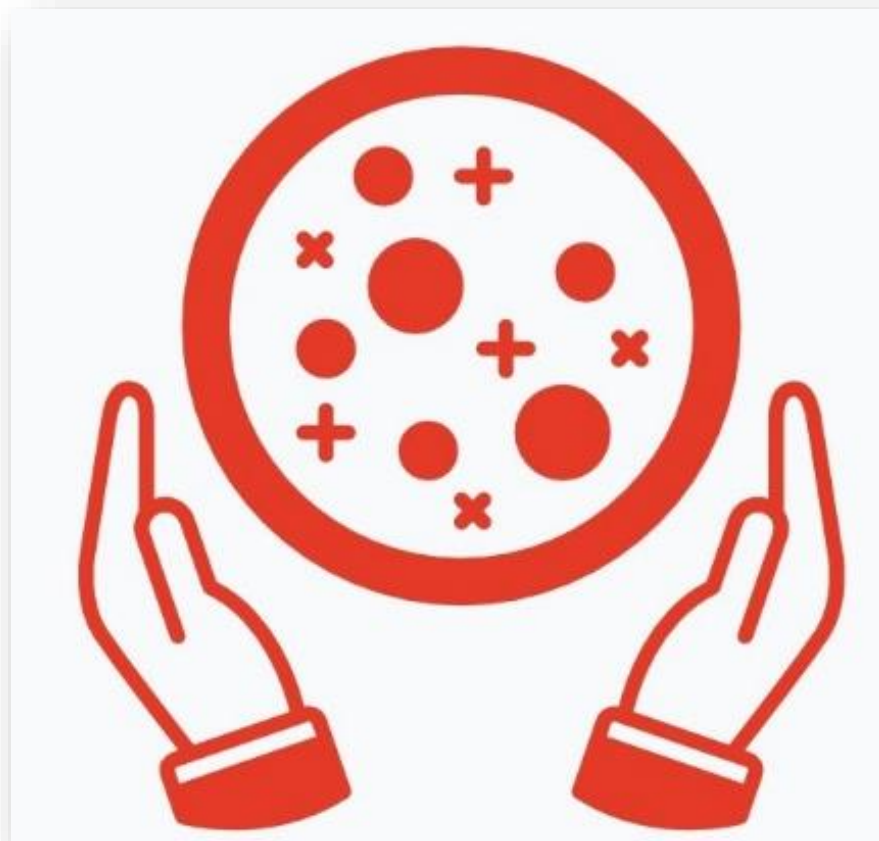
<https://www.youtube.com/watch?v=jm4PYMhpcpgI>




- **1068** number promotion in Electronic Media like Radio & TV
- 3 Workshop by Critical Care team
- Periodic insertion of Broadsheet
- FB promotion of 1068
- Chemist Pouch Distribution

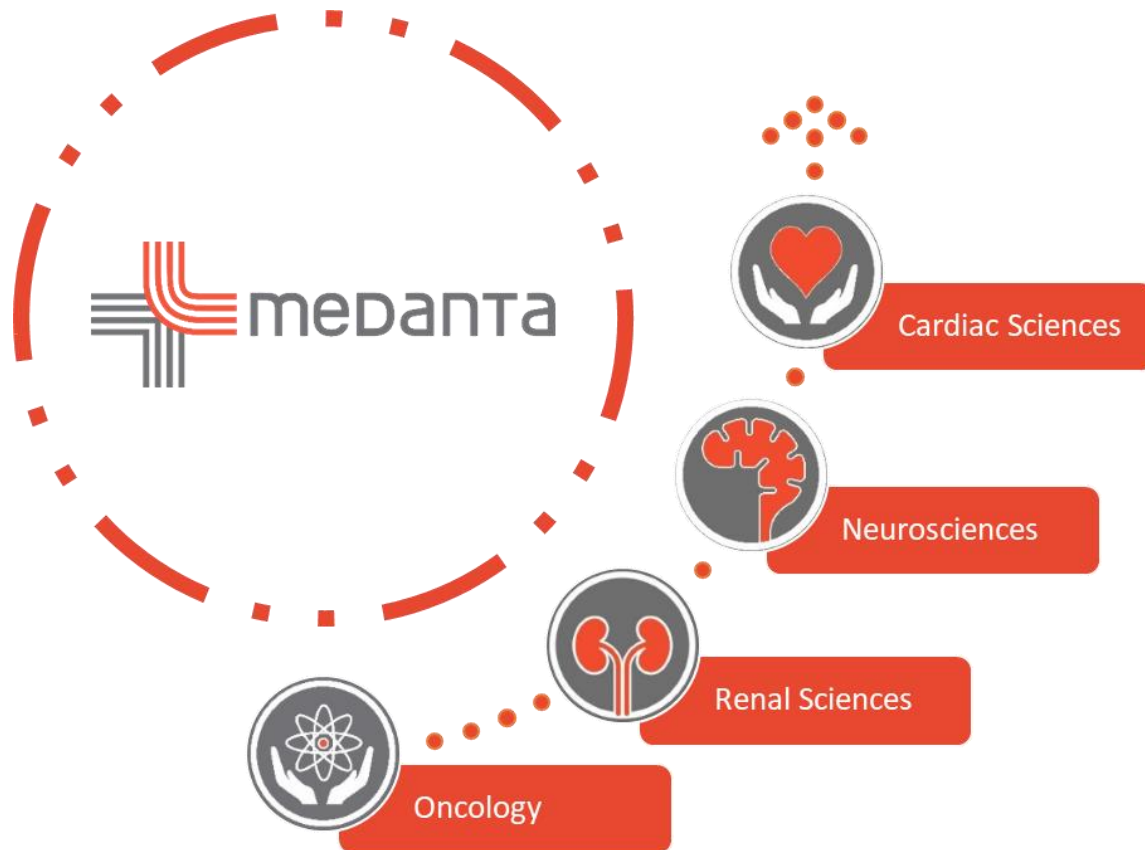
- Enhancement of Radio program to reach farthest areas of Bihar through Akashvani
- Digital promotions (Doctor videos & Patient testimonials)
- Brand hammering through pointer advertisements for 3 to 4 month
- No Parking boards / Society gates in Targeted Societies in Patna
- Ambulance networking
- Certified training module for Ambulance Drivers & EMTs
- Engagements with Police force

# Comprehensive Cancer Program Launch



- Dependency of volumes through Medical Oncology & Breast Services in FY 23
  - Surgical Oncology, Radiation Oncology & Gynea Oncology consultants joined in late H2 for FY23
- 
- Installation of Linac & Brachytherapy
  - Addition of Consultants
    - Hematology
    - Head & Neck Oncology
    - Radiation Oncology
  - Potential of existing team yet to utilize
  - Recognition for CM relief fund
  - Take maximum potential of PPP for this specialty
  - 360 degree promotion of comprehensive cancer program
  - Mega CME / Cancer Conclave in Aug
  - Road Show

# New Business (PPP Patients)



- Liaisoned with the State government to initiate patient referrals, set up the process & built the portal
- Government expected start the process from June onwards

- 
- Planned 13% of total volume
  - Planned 7% of total revenue
  - Engagement with MS of medical colleges
  - Periodic programs with respective departments at medical colleges
  - Organizing OPDs at important medical colleges
  - Organizing periodic activities with different government department / offices like Police, Irrigation, Education etc

# Building up the Credit Business



- Major focus was on empanelment and getting for income tax exemption certificate in **FY23**
  - Empaneled majority of Insurance Co, TPAs, PSUs in **FY23**
  - Majority of PSUs empaneled in **Q3**, still huge potential yet to utilize.
  - Empanelment with SBI in **Q3**
- 
- Focus in driving volumes from the empanelled companies in **FY24**
  - Health Check-up enrolment of PSUs, Corporate & Government Organisation
  - OOPDs in PSU Colony
  - Corporate CMO / Dignitary meet
  - Periodic camps in PSUs & corporate
  - Insurance meet



**Thank You**



# Awards & Recognitions

