

Vol. 7 | No. 4 July -August -2009

# Hospital Management System

- Introduction
- Vision
- Situation before initiative
- Objectives
- Advantages
- Technology
- Process
- Services
- Impact of Project
- Road Ahead
- Screenshots
- eGovernance News eIndia Awards 2009

#### Courtesy By

Dr Hargovind L Trivedi Director, IKDRC-ITS, Civil Hospital Campus, Asarwa, Ahmedabad

#### **Editorial Team**

Dr. Neeta Shah Ms. Monali Shah

#### - An e-Governance Bulletin from Gujarat Informatics Ltd.



(Application of Institute of Kidney Diseases and Research Centre and Institute of transplantation Sciences)



# Introduction

Institute of Kidney Diseases and Research Centre and Institute of transplantation Sciences (IKDRC-ITS) is a charitable institute located at Civil Hospital Ahmedabad.

IKDRC-ITS is a tertiary care twin institute of public sector rendering state-of-art services like dialysis, kidney/ liver transplantation, lithotripsy, etc to patients from all over the country, suffering from kidney and urological ailments. The three pillars of education, service and research on which this institute functions, are equally well developed, inter-dependent and strong. To make these areas more proficient, computerization was installed in 1998 first for transplant patient related services and research.



# Vision

Provision of quality healthcare for all sections of the society by making management of the public sector hospital efficient and paperless with effective through specially designed Information Technology solution capable of providing online data analysis, health indicators, policy making and management tools at every level.

## Situation before initiative

In older version of software, proper patient management and medical data management facilities was not co-ordinated with each other and single accounting for all patients and government scheme was not established at root level (Right from new patient registration to his entire hospital stay). This hospital gives a concession to economically poor patients, the procedure which patients has to follow was tedious and time consuming, medical records and laboratory machine integration was not possible with older software which was worked in fragmented module and not able to integrate with each other. In a final stage, to outcome from such a limitation in working area in administration and medical procedure," Hospital Management System" application has been designed to give more integrated patient services and administrative control and monitoring over the system, with the help of integration this software is cost and time saving. Each level of working environment is benefited with this system.

## **Objectives**

- Streamline the medical / administration work flow
- Reduction / Elimination of duplicate works
- Increased productivity
- Prevent Inventory Loss
- Patient tracking to increase productivity of inpatient allocation
- Instant Patient Billing (Accounting for various cashless tariff)
- Real-time management and accounting report.
- Creating templates for data archiving like investigation, treatment and prescription for ease-of-use by doctors
- Seamless integration between functions for smooth patient movement within various services
- Effective Administration and Control



Hospital Management System (HMS) has been upgraded to provide umbrella of services to all three areas viz services, research and education; and for administration. The aims were:

- 1. Streamlining the operations
- 2. a. Updated information for administration, on every OPD patient visiting the institute b. Updated information for treating doctors on every OPD/ IPD patient
- 3. Online and updated information on every procedure including surgeries performed on every patient
- 4. Discharge information
- 5. Complete records of all patients, which will help in generating statistical information as well as for research studies
- 6. Try to move towards paperless stage
- 7. Ensure smooth operations and user-friendly environment.

This has led to efficient data entry management, catering of services, identifying the problem areas and strategies to solve them. In addition to these it has led to transparency of the system with immediate availability of any kind of information related to the institute. Regular updating of the website of institute at 3 monthly intervals is also a task for this system.

HMS provides very effective policy decision making tools for middle & top level management. HMS provides strong front-end for hospital user for the customized and reengineered processes to ensure optimum utilization of equipment and man power. The HMS monitors pre-defined health indicators and the embedded reporting facilitates decision making by the hospital management and state level administrators for policy and strategic decisions. The patient benefits the most by getting well managed hospital services, health care details and other related services. HMS system supports electronic workflow management.

### Advantages

#### The major advantages of a workflow system are as follows:

- Sharing of critical patient information among users of different modules with secure rights management
- Enhanced process quality and patient service mainly due to managed circulation of patient information across departments and greater control over decision-making
- Traceability of actions for a critical patient condition.
- Improved efficiency of hospital staff



- Elimination of unnecessary steps and self awareness amongst hospital users about his/her roles and responsibilities
- Hospital Staff feels completely involved in the entire process and capable of getting answers to important questions in a timely fashion
- Streamlines responsibilities of user and clarifies roles of every employee
- Provides optimized patient flow leading to improved treatment outcomes
- Saves time and keeps staff and patient connected with each other.

# Technology

System is built on end to end Microsoft architecture and satisfies the technical requirements of Digitalization of IKDRC -ITS

The following are major advantages of the proposed architecture

- Lower cost for training, upgrades, downtime, installation, operation, maintenance and skill building.
- Development, Maintenance, Administration features are richer then other RDBMS with better cost benefit.
- Other utility features like Analysis Services and Reporting Services which are inbuilt in SQL Server 2005 helps in reducing the cost.
- Inbuilt support for Network Load Balancing.

eGov@Gujarat

Specific data can be generated as per requirement.

### The following are goals for technical architecture to be achieved.

Criterion	Description
Scalable	The architecture should take care of high volume growth.
Flexible	The processing must be easy to adapt to different kinds of users
	or requirements
Manageable	The services provided at each layer must be easy to manage
	(with a clear interface for administration).
Extensible	It should allow easier development of new applications based
	on the existing components.
Interoperability	To be able to communicate with different systems that is
	currently in use.
Security	Minimizing the possibility of adulteration of data or
	unauthorized access. To maintain data confidentiality and
	integrality.





# Process reengineering & legal reforms

### a. Major front end process changes

- 1. Each patient is assigned a unique identity number. This number enables user-friendly maintenance and retrieval of electronic medical records during life-time follow-up visits.
- 2. Easy access to reference records.
- 3. Online medical procedures for effective and timely patient care.
- 4. Faster information flow between various specialties.
- 5. Online patient monitoring based on threshold values supporting alarms and triggers to doctors.
- 6. Hardcopy discharge summary by option, patient-wise, for future references.

### b. Major back end process changes

- 1. Monitoring cost of per-patient quality services, rate of bed occupancy, doctor's efficiency and performance, lab technician and equipment performance, average time spent to get health service patient-wise and so on.
- 2. Issue of pharmacy patient-wise, stock status and re-ordering of medicines, inventory carrying cost and expiry date monitoring.

- eGov@Gujarat
  - 3. Pro-active monitoring of quality health service indicators for decision support.
  - 4. Availability of timely and accurate information.
  - 5. Access to updated Management Information.
  - 6. Controlled administration using features such as communiqué, centralized purchases, holding/ withdrawing sub-standard medicines from issuance, camp management and epidemic controls and so on.

# Services

<b>I</b>	<b>I</b>	<b>I</b>	1
Patient Care Services	Clinical Services	Hospital Admin	Ancillary Services
<ul> <li>Registration</li> </ul>	<ul> <li>Clinical/EMR</li> </ul>	<ul> <li>Hospital Admin</li> </ul>	<ul> <li>Linen Management</li> </ul>
	(Nephrology, Urology,		
• Wards	Gynecology,	<ul> <li>Human Resource</li> </ul>	• Equipment
	Gastroenterology,		Maintenance
• Pharmacy	Neurology, Pediatric)	<ul> <li>Payroll/ Financial</li> </ul>	
		Accounting	<ul> <li>Resource Scheduling</li> </ul>
• Billing	<ul> <li>Laboratory</li> </ul>		
	(Bio Chemistry,	<ul> <li>Stores/Inventory</li> </ul>	<ul> <li>Special Camp &amp;</li> </ul>
<ul> <li>Patient Education</li> </ul>	Hematology, Virology,	/Purchase	Training
	Bacteriology, Clinical,		
<ul> <li>Information Kiosk</li> </ul>	Histopathology) &	<ul> <li>Complaints &amp;</li> </ul>	<ul> <li>Bio Medical Waste</li> </ul>
(future)	Blood Bank	Redresses	
			<ul> <li>Application Security</li> </ul>
<ul> <li>Nursing Care</li> </ul>	• Imaging	<ul> <li>Transportation</li> </ul>	
	(X-ray, USG, Color		
	Doppler, CT Scan)	<ul> <li>MIS / EIS Reports</li> </ul>	

### The Coverage and Usage for HMS is as follows:

No. of System Users	150
No. of Permanent Doctor	91
No. of Module	18
No. of dept. specific modules	3
Size of Database	2.5 GB
No of Employees	458
Max Number of Simultaneous Users	93
No of Node/ Computers On Network	112



No. of Departments covered	17
Average No. of Transactions(Daily)	
Outdoor patients New/ followup Case	500
Pharmacy	450
Pathology	3000
Radiology	1100
Procedure	250
Operations	30
Indoor patients	300

## Impact of the Project

#### a. Hospital

- Reduced repetitive paper work for doctors as well as other staff.
- Faster Access to more information as required.
- Good data for research and development on diseases and their cures.
- Better HRD management of employee data like payroll, insurance details, Leaves, transfer, allocation etc.
- Internal communication made easy with the help of worklist in place.

#### b. Citizen / Patient

- Significant improvement in health care service by saving average waiting time for the out-patients; reducing the Average Length of Stay.
- E-database for every patient ensured organized record keeping and referral services for all the patients and effective patient care which has increased clarity and legibility of handwriting.
- Access to patient data at any time. E.g. Case papers and other diagnosis details made available as and when required.
- Information kiosk to provide hospital related and health promotion preventive care related information.



## Road Ahead

#### Following modules are to be included in HMS Application:

- SMS/E-mail alerts to patient/staff.
- RFID for capturing patient and doctor's data.
- Bar Code for inventory management.
- Management is planning to invite NABH & ISO certification Companies like KPMG, DNV for assessing computerized process at various levels.
- Online Appointments.
- Tele Medicine.

### **Screen Shots**





### Pharmacy Module

S	ale	s In	voice Type : IPD	Class : Non-re	imbursable	i .	Profile 🔽 🤇
V	ouch	er No	: Vou. Type: Cash Memo	Class : Patient	▼ Vo	oucher <u>D</u> ate :	15/Sep/2009 🔽
Par	rty Le	edger	Pharmacy Cash Receipt	CR No : 0154221	Zakirhu:	sen Nanamiya	a Malek
Doc	tor <b>r</b>	Vame	Ajay L. Nimavat	Address1 : MA	AILED		]
Goo	dowr	n Nam	Main Drug	Address2 : MA	TAR		
	Del	B/M	Description	Quantity	Rate	Disc.(%)	Amount
		м	Vivem 500 mg (Injection)	4	377.86	100	0
		м	NS 100Ml (Glass) (Injection)	2	9.78	100	O
		м	Vasofix No-22 (Surgicals)	1	31.63	100	0
		м	I.V Set (Infusion Set) (Surgicals)	1	4.31	100	0
		м	5 M L (Syringe)	5	2.50	100	0
		м	1				
							-
					To	təl Amt i	00.00
						AT Amt	00.00
		٥dvər	oce Amount : 0.00		Round		0.00
		Auva			Round		0.00

### <u>OPD</u>

0 P D Reports
Other Links — CR Number : 0186641 OPD no.: 200909150054 Date: 15/Sep/2009
Do s and don't s Patient name : Davaram Chhaganlal Bhilale
Eamily history Date of hirth : 15/Sen/1969 Gender: Male Age: 40 yrs
Follow ups Patient Class : Non-reimhursable
Diagnosis(ICD Code) Occupation : General
Clinical Brief Permanent Current Transfer Patient
Prescription 🚱 Adr (1): Piprad
Ireatment advised         (2): Bhikangav
City: Khargon District: Khargon
Procedure 🚱 State: M.p. Country: India
Pathology 🚱 Pincode: Fax:
Radiology 🚱 Tel (1): 09617170429 Tel (2):
Mobile: Pager:
Email: Web:
Nature Renal Tx Total Test Amount : 460



#### **IPD Doctor Visit**

20010	► Lasters			Save	
		Doctor Visit	Discount View Report		
		In - patient details			
		Registration no. :	20090907010	Currer	nt OutStanding: 10
		P <u>a</u> tient:	Tarachand Radheshyam Agrawal		
		<u>A</u> dmission date:	07/Sep/2009		
		<u>B</u> lock:	Main Block		
		Eloor:	Forth Floor	Ward: C.C	1.0
		<u>C</u> onsulting doctor:	Hargovind Laxmishankar Trivedi(Doctors)	Bed: CC	CU-4
		Doctor visit details			
		Doctor:	Hargovind Laxmishankar Trivedi	(	Blood Bank
		<u>N</u> o.:	Test Priority: Normal	•	Diet & Food
		Туре:	Consultant 🔽 🛛		Service / Item
		Date:	15/Sep/2009 Time: 10:59 AM	. (	Medical Record
		Diet/other instructions:			Patho <u>t</u> ests
					Radio t <u>e</u> sts
		Conclusion:			Prescription
					Procedure
				<b>V</b>	Instruction for nurse

**IPD Nurse Visit** 

Nurse Visit       Discount       View Report       Current OutStanding : 10         Registration No:       20090907010       Admission date:       [07/Sep/2009]       Type:       General       Image: Pathon tests         Patient:       Tarachand Radheshyam Agrawal       On       15/Sep/2009       [06:55 PM]       Image: Pathon tests         Last visit by doctor:       Amit Trivedi       On       15/Sep/2009       [06:55 PM]       Image: Procedure         Visit by nurse:       Renuka Pankajbhai Shah       On       15/Sep/2009       [07:00 PM]       Service / Item         Prescribed drug brand       Drug dose       Action taken or value       Fluzet 60Ml       0-1/2-0       Given       Image: Pathon tests         Fluzet 60Ml       0-1/2-1/2       Given       Image: Pathon tests       Image: Pathon tests       Image: Pathon tests         Abdominal Girth Chart       Ok       Image: Pathon tests       Image: Pathon tests       Image: Pathon tests       Image: Pathon tests         Diet_Other Instruction:       Remarks:       Image: Pathon tests       Image: Pathon tests       Image: Pathon tests       Image: Pathon tests         Diet_Other Instruction:       Remarks:       Image: Pathon tests       <	Module 🔽 🔂	Masters V IF Trans	actions V 🛄 Reports	V 🗳 Utilities	✓ Save		1
Rggistration No: 20090907010 Admission date: 07/Sep/2009 Type: General Patho tests   Patient: Tarachand Racheshyam Agrawal Image: Construction on 15/Sep/2009 06:55 PM Procedure   Visit by doctor: Amit Trivedi On 15/Sep/2009 06:55 PM Procedure   Visit by nurse: Renuka Pankajbhai Shah On 15/Sep/2009 06:55 PM Procedure   Visit by nurse: Renuka Pankajbhai Shah On 15/Sep/2009 07:00 PM Service / Item   Prescribed drug brand Drug dose Action taken or value Service / Item   Fluzet 60Ml 0-1/2-0 Given Image: Construction / advice Advice details   Candid-V3 Vaginal 0-1/2-1/2 Given Image: Construction / advice Advice details   Abdominal Girth Chart Ok Image: Construction / advice Action taken or value Image: Construction / advice   Drainage Out Put Chart 500 Ml Image: Construction / Const		Nurse Visit	Discount	View Report	Current OutStan	ding: 10	
Pgtient: Tarachand Radheshyam Agrawal   Last visit by doctor: Amit Trivedi   On 15/Sep/2009   Visit by nurse: Renuka Pankajbhai Shah   On 15/Sep/2009   Of 15/Sep/2009 07:00 PM   Prescribed drug brand Drug dose   Action taken or value   Fluzet 60Ml   Candid-V3 Vaginal   O-1/2-1/2   Given   Instruction / advice   Action taken or value   Abdominal Girth Chart   Ok   Drainage Out Put Chart   500 Ml   In Take Out Put Chart   S00 /210ml     Diet_Other Instruction:     Remarks:		Registration No: 20	0090907010 <u>A</u> dmiss	ion date: 07/Sep/2009	Type: General	Path	no <u>t</u> ests
Last visit by doctor: Amit Trivedi On 15/Sep/2009 06:55 PM Procedure   Visit by nurse: Renuka Pankajbhai Shah On 15/Sep/2009 07:00 PM Service / Item     Prescribed drug brand Drug dose Action taken or value   Fluzet 60Ml 0-1/2-0 Given Given   Candid-V3 Vaginal 0-1/2-1/2 Given Image: Comparison of the second		P <u>a</u> tient: Ta	arachand Radheshyam A	grawal		Radi	io t <u>e</u> sts
Visit by nurse:       Renuka Pankajbhai Shah       On       15/Sep/2009       07:00 PM       Service / Item         Prescribed drug brand       Drug dose       Action taken or value       Given       Given       Image: Comparison of the service / Item         Fluzet 60Ml       0-1/2-0       Given       Given       Image: Comparison of the service / Item       Image: Comparison of the service / Item         Candid-V3 Vaginal       0-1/2-1/2       Given       Image: Comparison of the service / Item       Image: Comparison of the service / Item       Image: Comparison of the service / Item         Abdominal Girth Chart       Ok       Image: Comparison of the service / Item       Image: Comparison of the service / Item       Image: Comparison of the service / Item         Drainage Out Put Chart       500 / 210ml       Image: Comparison of the service / Item       Image: Comparison of the service / Item       Image: Comparison of the service / Item         Diet_Other Instruction:       Remarks:       Image: Comparison of the service / Item       Image: Comparison of the service / Item       Image: Comparison of the service / Item         Diet_Other Instruction:       Remarks:       Image: Comparison of the service / Item       Image: Comparison of the service / Item       Image: Comparison of the service / Item		Last visit by doctor: A	mit Trivedi		On 15/Sep/2009 06	:55 PM 🏈 🛛 Pro	ocedure
Prescribed drug brand       Drug dose       Action taken or value         Fluzet 60Ml       0-1/2-0       Given       Given         Candid-V3 Vaginal       0-1/2-1/2       Given       Image: Comparison of Compar		⊻isit by nurse: Re	enuka Pankajbhai Shah		On 15/Sep/2009 07	:00 PM Service /	Item
Fluzet 60Ml       0-1/2-0       Given         Candid-V3 Vaginal       0-1/2-1/2       Given         Instruction / advice       Action taken or value       Advice details         Abdominal Girth Chart       Ok       12 Hrly         Drainage Out Put Chart       500 Ml       12 Hrly         In Take Out Put Chart       500/210ml       Image: Context of the second seco		Prescribed drug brand	Drug d	ose	Action taken or val	ue	
Candid-V3 Vaginal       D-1/2-1/2       Given         Instruction / advice       Action taken or value       Advice details         Abdominal Girth Chart       Ok       12 Hrly         Drainage Out Put Chart       500 MI       12 Hrly         In Take Out Put Chart       500/210ml       Image Out Put Chart         Diet_Other Instruction:       Remarks:       Image Out Put Chart		Fluzet 60Ml	0-1/2-0		Given		•
Instruction / advice       Action taken or value       Advice details         Abdominal Girth Chart       Ok       Image 2000 Put Chart       500 MI         In Take Out Put Chart       500/210ml       Image 2000 Put Chart       Image 2000 Put Chart         Diet _Other Instruction:       Remarks:       Image 2000 Put Chart       Image 2000 Put Chart         Diet _Other Instruction:       Remarks:       Image 2000 Put Chart       Image 2000 Put Chart		Candid-V3 Vaginal	0-1/2-1	/2	Given		•
Abdominal Girth Chart     Ok       Drainage Out Put Chart     500 MI       In Take Out Put Chart     500/210mI		Instruction / advice	Action	taken or value		Advice details	
Drainage Out Put Chart 500 MI In Take Out Put Chart 500/210ml		Abdominal Girth Chart	Ok		<b></b>	12 Hrly	
Diet _Other Instruction:		Drainage Out Put Chart	: 500 MI				
Diet_Other Instruction:  Remarks:  Ught Diet		In Take Out Put Ch	art 500/21	Oml	-		
		Diet_Other Instruction:		R <u>e</u> marks:			
				Light Diet			*





### eIndia 2009 Awards

**eINDIA Awards 2009** Programme is held annually alongside the eINDIA conference proceedings. The Awards are open for all national and international government organizations, civil society organizations, bi-lateral, multi-lateral developmental organizations and enterprises who have transformed social development opportunities into a sustainable social enterprise through innovative use of ICTs.

The 5th e-INDIA 2009 Event was held on 25-27 August, 2009 at International Convention Centre, Hyderabad. The award ceremony was held on 26<sup>th</sup> August, 2009 evening. Following two projects of Gujarat had won the awards:

1. **Gujarat Technological University** in the category of Digital Learning- ICT Enabled University of the year





2. **Ahmedabad Municipal Corporation** in the category of Municipal IT- ICT Enabled Municipal Initiative of the year





# Web Corner

Institute of Kidney Diseases and Research Centre and Institute of transplantation Sciences (www.ikdrc-its.org)

> Website for 5th eIndia 2009 India's Largest ICT Event

http://www.eindia.net.in

For electronic subscription to the bulletin, please email us with your email address at:

webmaster@gujaratinformatics.com

or visit us at:

www.gujaratinformatics.com

Contact Address:

Gujarat Informatics Ltd. Block No. 1, 8<sup>th</sup> Floor, Udyog Bhavan, Gandhinagar – 382017 Phone: 079 – 23256022 Fax: 079 – 23238925