



NEW MANGALORE PORT AUTHORITY

Departmental
Procedure
Manual
Level III

Title: Cover Page

DOC. CODE: DPM-07
REF: SP-04 OF IPM

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Departmental Procedure Manual Medical Department



New Mangalore Port Authority,
Panambur,
Mangalore,
Karnataka – 575010

Shriker
28/3/24

28.3.2024



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SECTION C-APPROVER RECORD / DISTRIBUTION LIST

APPROVER LIST

The approver record for DPM shall hold the signatures of:

- Process Owner/HOD
- Departmental Representative/ISO Coordinator

DISTRIBUTION LIST

The document as read only mode is available to all users in the Google Drive. Access is freely available to all employees and adequate number of support hardware is also made available.



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SECTION D-CHANGE PROCEDURE & RECORD

DEPARTMENTAL MANUAL REVISION DETAILS:

Release No.	Release Date	Particulars
-----	01.07.2009	Up gradation for ISO 9001:2008 and merger of Quality and Environment manuals
-----	30-01-2017	Integrated Management System Manual- NMPT/IMS/APX/00
1.0	01-12-2019	Departmental Procedure Manual- with Process Approach; Revision of the document structure to 4 level documentation
2.0	01-11-2021	Departmental Procedure Manual- Integrated with ISO 45001:2018 – Occupational Health and Safety Management System
3.0	04.03.2022	Change of Organization name as "New Mangalore Port Authority" as per Major Port Authorities Act, 2021.

Change Record:

Sl. No	Revision Date	Rev No.	Page No.	Title	Clause No.	Section/Procedure Affected	Brief Description of Change



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SECTION E-LIST OF ABBREVIATIONS USED IN DEPARTMENT

Sl.No.	Abbreviation	Explanation
01	C.M.O	Chief Medical Officer
02	Dy.C.M.O	Deputy Chief Medical Officer
03	SMO	Senior Medical Officer
04	MO	Medical officer
05	Office Supdt	Office Superintendent
06	Asst. Supdt	Assistant Superintendent
07	DEO	Data Entry Operator
08	Asst.Matron	Assistant Matron
09	F.A. Supdt	First Aid Superintendent
10	Sr.Lab.Tech	Senior Laboratory Technician
11	OT	Operation Theatre
12	LAB	Clinical Laboratory
13	Esst.	Establishments
14	FAC	First Aid Center
15	IP	In-Patient
16	OP	Out-Patient
17	NMPA	New Mangalore Port Authority
18	PTH	Port Authority Hospital
19	HOD	Head of Department
20	RAO	Resident Audit Officer
21	RCHW	Registered Cargo Handling Workers
22	EMS	English Medium School
23	KVM	Kendriya Vidyalaya Mangalore
24	WI	Work Instructions
25	CA	Corrective Action
26	EMS	Environmental Management System
27	QMS	Quality Management System
28	GRN	Goods Receipt Note
29	PO	Purchase Order
30	IA	Internal Audit
31	IMS	Integrated Management System
32	ISO	International Standard Organization
33	MR	Management Representative
34	MRC	Management Review Committee
35	MRM	Management Review Meeting
36	DR	Departmental Representative
37	DC	Document Controller
38	NC	Non conformance



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39	DPM	Departmental Procedure Manual
40	IPM	Integrated Procedure Manual
41	RART	Risk Assessment & Risk Treatment
42	REC	Record
43	DOC	Document
44	SEA	Significant Environmental Aspects
45	SM	System Manual
46	SP	System Procedure
47	COTO	Context of the Organization
48	Gr.	Grade
49	IPOMIS	Integrated Port Operations Management Information Systems



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Title: DEPARTMENTAL ORGANIZATIONAL STRUCTURE

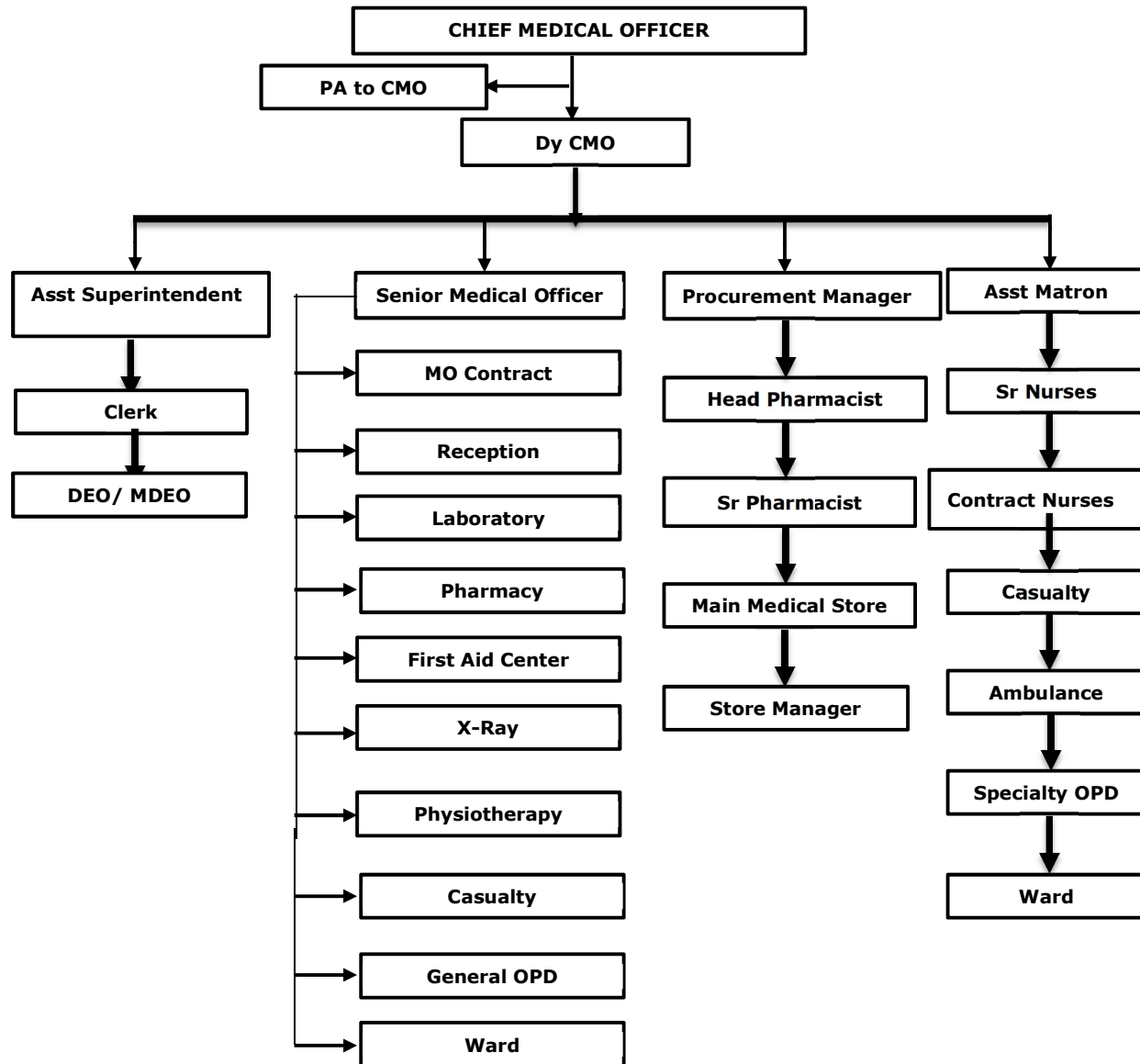
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SECTION F-DEPARTMENTAL ORGANIZATIONAL STRUCTURE



Note : All files for signature are routed through Sr MO and Dy. CMO through the section in charge.
All Bills of Patients received for reimbursement are forwarded through Sr. MO and Dy. CMO.
Dy. CMO is the nodal officer for Hospital PPP project.
The working arrangement as per order dated 13.09.2023 will continue to be followed till further orders.



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SECTION G-ROLES, RESPONSIBILITIES, AUTHORITIES AND ACCOUNTABILITY

ROLE	RESPONSIBILITY	AUTHORITY	ACCOUNTABILITY
CMO	<ul style="list-style-type: none"> Head of the Medical Department. Responsible for the following: Administration of the Medical Department Appointing authority for class III and class IV employees of the Medical department. Forwarding of Budget Estimates (BE) & Revised Estimates (RE) proposals of Medical Department every year for approval of the competent Authority. Final authority to approve to refer the eligible patient to any empanelled / referral hospitals / Diagnostic centres for further evaluation and treatment. Monitor the services of all sections of the Hospital 	<ul style="list-style-type: none"> Sanctioning of purchase proposals and work proposals within the delegated financial power. Providing adequate resources and trained personnel at respective work locations. Authorised to Provide adequate resources and trained personnel at respective work locations 	<ul style="list-style-type: none"> For lapses in the Department
Dy. CMO	<p>Deputy Head of the Medical Department Responsible for:</p> <ul style="list-style-type: none"> Assisting the works of Chief Medical Officer in Administration of Medical Department in the absence of CMO Implementation of ERP modules in Medical Department Maintenance of Birth & Death Registration at Port Authority Hospital. Submission of half-yearly Survey Reporting of unused / obsolete / unserviceable T & P items of Hospital. Correspondences related to implementation of Indoor & outdoor Medical Scheme to the Retirees of NMPA residing at other Port Cities and Retirees of other Major Ports residing at Mangalore city (Port city) Monitoring and controlling various hospital related registers, documents, files and formats and getting periodical reports/ statistics from various sections. Correspondences related to approved Referral Hospitals of NMPA Correspondences related to Medical Departments of other Major Port Authorities. Correspondences related to AMC/CMC of Hospital Medical Equipments. Maintaining the Jan Oushadhi Kendra at NMPA Market complex Monitor & control of the Tools & Plants (T&P) Any other duty assigned by CMO 	<ul style="list-style-type: none"> Monitor and Control of all works entrusted by CMO. 	<ul style="list-style-type: none"> For lapses in the work assigned



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ROLE	RESPONSIBILITY	AUTHORITY	ACCOUNTABILITY
SMO / MO	<p>Responsible for:</p> <ul style="list-style-type: none">Arranging for necessary discharge/referral service to required patients to recognized Specialty Hospitals through CMO.Implementation of QMS (ISO 9001:2015) & EMS (ISO 14001:2015).Work of Liaison officer for implementation of MOU between Ministry of Shipping and Department of AIDS for prevention of HIV/STI.Nodal Officer of Medical Department for Implementation of "Swatcha Bharath".Monitor & control of the Clinical Laboratory Management.Monitor & control of the Registration unit & OPD management.Monitor & control of the Ambulance Services.Monitor & control of the First Aid centres of Wharf.Monitor & control of the Physiotherapy Unit.Organizing & implementing Health Camps & Health awareness programmes.Monitor & control of the Biomedical waste disposal.Monitor & control of the Main Medical Store & Pharmacy.Monitor & control of the Ward Management.Monitor & control of the Casualty Management.Monitor & control of the Operation Theatre Management (OT)Monitor & control of the functions of the X-Ray Unit.Monitor & control of the Hospital Linen.Supervising each section of the Hospital on rotation basis.Monitor & control of Paramedical workers both Regular and ContractMonitor & control of Medical Officers on ContractMonitor & control of the services of Parttime visiting Consultant SpecialistsIn charge of the administration of the office of the office Superintendent.Implementation of National & State Health Programmes at Port Authority Hospital.Monitor the implementation of OLCMonitor and Control of National & State Health Programmes at Port Authority HospitalHandling the duties of CMO in addition to his own duties, in the absence of CMO. Work of Public Information Officer (PIO) for implementation of RTI Act. 2005.Any other duty assigned by CMO	<ul style="list-style-type: none">Providing outpatient treatment & inpatient treatment to all the patients registered in the registration counter of NMPA Hospital.Conducting Annual periodical & pre-employment Medical examination of RCHW workers / CISF / Canteen workers / Stevedores / Tug staffs / Fire service staffs.	<ul style="list-style-type: none">For lapses in the work assigned



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ROLE	RESPONSIBILITY	AUTHORITY	ACCOUNTABILITY
Assistant Matron	<p>Responsible for:</p> <ul style="list-style-type: none">In-charge of Nursing staff, Dressers, Hospital Attendants and Sanitary workers including all Para-Medical staff on contract basis. <p>Responsible for:</p> <ul style="list-style-type: none">Overall in-charge of all sections of three Floors of the HospitalMonitor & control of the sanitation & cleaning work of the HospitalWork related to Preparation & submission of Monthly census report of all Hospital services.Work related to Preparation & submission of consumption report of Water, Electricity & Paper.Monitor & Maintain Register on cleaning of Water Tanks of Hospital.Work related to arrangement of National and State Health Schemes implementation at Port Hospital in coordination of State Health Authorities.Work related to arrangement of Health Awareness programs at Port Hospital.Monitor & control of the proper disposal of Bio -Medical wastes in the prescribed methodWork related to maintenance of records/registers pertaining to birth and death Registration and submission of monthly/annual reports to concerned authorities through CMO.Supervises the Implementation of Quality Management System (QMS) & Environmental Management System (EMS).Any other duty assigned by CMO	<ul style="list-style-type: none">Work related to arrangement of National and State Health Schemes implementation at Port Hospital in coordination of State Health Authorities.Work related to periodical Inspection /Maintenance / countersigning of various records, registers, documents, files, formats and submissions of weekly/monthly reports to Dy.CMO /CMO through concerned MO's and maintenance of required statistics of related sections.	<ul style="list-style-type: none">For lapses in the work assigned
Senior Nurse / Nurse	<p>Responsible for:</p> <ul style="list-style-type: none">In charge of the Registration, Casualty, OPD Consultations of Doctors, X-Ray Unit, Ambulance, Physiotherapy, specialist Consultations including Eye, Dental, ENT, Homeopathy & Ayurveda, USG / Echocardiogram / Doppler Scan, CMO/Dy.CMO Rooms, private wards, special wards, operation theatre, post-operative ward & hospital linen.	<ul style="list-style-type: none">Checking and signing of Registers related to all sections under in charge.Preparation & Submission of weekly & Monthly census.	<ul style="list-style-type: none">For lapses in the work assigned



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ROLE	RESPONSIBILITY	AUTHORITY	ACCOUNTABILITY
	<ul style="list-style-type: none"> Provide Nursing care to the patients of PTH. Monitoring of Housekeeping of the Hospital. Stock indenting on every Tuesday of the week. Maintaining of T&P Registers of concerned sections. Maintain and Entry of Stocks in the ERP Module & HMS Module of the Hospital. Segregation of returned and waste Medicines from the Box in front of the Pharmacy for proper disposal through Bio Medical Waste Management of Hospital once in a month i.e. last day of every month. Supervising & Renewal of AMC Services of Hospital Equipments. Monitoring of the movements of the Contract Ambulance. Preparation & Submission of weekly & Monthly census. Maintain the Linen Movement Register. Maintaining Epidemic Disease Register and Informing to state Health Authorities in case of any epidemic outbreak. Maintain Operation Theatre in Sterile condition by proper sterilization and confirmation through Bacterial Culture & sensitivity test once in three months. Maintain the Linen Stock Register of the Hospital & to issue the required Linen Items to various sections of Hospital whenever required. Any other duty assigned by CMO 		<ul style="list-style-type: none">
Head Pharmacist	<p>Overall in charge of the Pharmacy section of the Hospital Responsible for:</p> <ul style="list-style-type: none"> Complete the Tender process of Annual procurement of Drugs and Consumables to NMPA Hospital within the time scheduled as per Drug Procurement policy of NMPA. Raising supply Order to the vendors as per requirement so that the stocks in the Main Medical stores should be maintained for a period of minimum three months. 	<ul style="list-style-type: none"> On receipt of the verified bills of the suppliers from the main Medical stores, prepare the bills in ERP and the same should be forwarded to Finance Department for payment within the benchmark period specified as per IMS Policy. 	<ul style="list-style-type: none"> For lapses in the work assigned.



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ROLE	RESPONSIBILITY	AUTHORITY	ACCOUNTABILITY
	<ul style="list-style-type: none">On receipt of the list of near expiring medicines within a month period from the Pharmacy and other user sections, action should be taken to return the medicines to the respective suppliers for replacement or making credit bills and maintain records of the same in full shape.Responsible to submit quarterly report on the stock value of such return of medicines including details of credit note towards the same to CMO.Processing for Procurement of Hospital Equipment's /other requirements of Medical Department through Central Stores.All correspondences related to AMC/CMC of Hospital equipment's and making bills for payment through Finance Department.Maintain the permanent imprest account of CMO/NMPA.Maintain all QMS/EMS related Registers/Records related to the Pharmacy Sections of Medical Department / NMPA.Correspondences related to the Audit observations etc.Submission of Main Medical Store Stock report once in a month, both system and physical stock to CMOOverall supervision and monitoring of the functions of Pharmacy & Main Medical Store.Any other works entrusted by the SMO i/c / Dy.CMO / CMO.Maintaining the Jan Oushadhi Kendra at NMPA Market complex.Any other duty assigned by CMO	<ul style="list-style-type: none">Maintain the stock of life saving essential medicines 100% at all times as per the IMS benchmark.	<ul style="list-style-type: none">



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Senior Pharmacist	<p>Responsible for: In charge of Main Medical Store/Pharmacy</p> <ul style="list-style-type: none"> Responsible for Receiving medicines and other consumables from the suppliers as per purchase order & physical verification of all received goods in the presence of Medical Officer in-charge of Main store and certify the bills and forward the same to Head Pharmacist for payment etc. Arrangements of all received goods in the respective racks / cupboards and stock in the required optimum temperature etc. & ensure to maintain the required room temperature. Issue indent to Pharmacy on every Monday and entry into the ERP System immediately. Issue indent to all other user sections of the Hospital on every Tuesday and entry into the ERP System immediately. Monthly monitoring the stock of main medical store and give feedback to Head Pharmacist for necessary action to place purchase orders as per requirements. Raising bill for the in-patient paying patients after discharge, receive the collected cash from the ward Nurse and handover the collected cash to the Finance department, and maintain the accounts etc. Submit the list of near expiring medicines within a month period to the Head Pharmacist to return the medicines to the respective suppliers for replacement or making credit bills Whenever there is shortage of Pharmacist due to weekly off/ leave in the Pharmacy, the Head Pharmacist will look after the duties of the Pharmacist in Pharmacy counter. Any other works entrusted by the Head Pharmacist / SMO /Dy.CMO / CMO. Maintaining the Jan Oushadhi Kendra at NMPA Market complex. 	<ul style="list-style-type: none"> Preparing ERP bills of empanelled Medical shops after verifications by following all required procedures / Formalities etc. and the same to be forwarded to Finance Department for payment within the benchmark period specified as per IMS Policy. 	<ul style="list-style-type: none"> For lapses in the work assigned
Pharmacist	<p>In charge of Pharmacy. Responsible for:</p> <ul style="list-style-type: none"> Dispensing of Medicine and entering in to ERP system immediately on daily 	<ul style="list-style-type: none"> Collecting the cash from various sections of Hospital / patients for 	<ul style="list-style-type: none"> For lapses in the work assigned



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	<p>basis.</p> <ul style="list-style-type: none">• Preparing email Indent for non-available Medicines at NMPA Pharmacy to the empanelled Medical shop twice i.e. 11am & 12.30 pm in the Morning and Twice i.e. 5pm & 6.30pm in the evening on daily basis and issue one copy to the Dispensing Pharmacist for verification etc.• Immediately on receipt of the Medicines from the empanelled Medical shops, the Pharmacist should verify the medicines along with the bills as per the list of indent statement and note down the supplied quantity, expiry date, MRP Rate as per the strips / Bottles / Tubes / Injections etc., in the copy of the intended statement itself and keep the supplied medicines ready in orderly manner for easy dispensing to the patients.• Setting up of the Medical Shop prescription along with the bill and forward to the senior pharmacist for further verification and payment of bills.• All Medicines supplied by the empanelled Medical shops should be accounted in a separate excel file in the system.• To ensure full supply of medicines without delay as per indent, on receipt of verification report, the duty Pharmacist should take daily follow up action by sending reminder email for the pending Medicines not supplied by the empanelled medical shops.• All unclaimed Medicines supplied by the empanel medical shops should be returned to the medical shops after one-month period in case of Serving employees and after two months' period in case of Retirees and make credit bill and handover to Senior pharmacist for deduction in future bills.• All correspondences related to the English Medium School Patients and prepare demand notice for collection of Dues once in a month.• Prepare online weekly indent and forward the same on every Monday morning to main medical store to supply medicines & all supplied medicines should be arranged in to the respective racks neatly.• Preparing a list of slow moving / non-moving / near expiry medicines and circulate to all doctors for information once in 30 days.• Submit the list of near expiring medicines within a month period to the	<p>private Paying Patients, maintains the account, and arranges to pay to Finance Department once in a week i.e. on every Monday.</p> <ul style="list-style-type: none">• Dispensing of Medicine and entering in to ERP system immediately on daily basis whenever there are more waiting patients or in times of need.	
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	<p>Main Medical store Pharmacist to return the medicines to the respective suppliers for replacement or making credit bills.</p> <ul style="list-style-type: none"> • Proper arrangement of Medicines by labelling in the racks of the cupboard for easy identification. • Periodical verification of Physical stock of Medicines with System Stock of Medicines and submission of monthly stock report to CMO • Any other works entrusted by the Head Pharmacist / SMO / Dy.CMO / CMO. 		
Pharmacy Assistant	<p>Responsible for:</p> <ul style="list-style-type: none"> • On receipt of the Medicines from the empanelled Medical Shops and to arrange the same in order for dispense to the patients and maintain a separate Register towards receipt of medicines by the patients. • Maintain the Pharmacy neat & clean. • Any other works in the Pharmacy. • Any other works entrusted by the Dy.CMO / CMO./SMO 	<ul style="list-style-type: none"> • Collecting Medicines from the Main Medical stores as per indent and hand over to the Pharmacist and assist for proper placement in the respective racks. • Setting of the Medical shops bills along with Prescription for quick verification of Medicines received from the empanelled medical shops. 	<ul style="list-style-type: none"> • For lapses in the work assigned
Senior Laboratory Technician/ Laboratory Technicians	<p>In charge of Computerized Clinical Laboratory of the Hospital Responsible for:</p> <ul style="list-style-type: none"> • Provides information for patient diagnosis and treatment by performing laboratory tests in toxicology, Biochemistry, haematology, immunology, and microbiology. • Collection of samples by drawing Blood from intravenous route from the patients for testing. • Organizes work by matching computer orders with specimen labelling; sorting specimens; checking labelling; logging specimens; arranging reports for delivery; keeping work surfaces clean and orderly. • Identifies and communicates abnormal clinical laboratory reports(patient condition) by alerting supervisory personnel, the pathologist, the patient physician, or nurse; reporting mandated information to the public health department or other designated officials. • Maintains patient confidence by keeping laboratory information confidential. • Documentation Skills, Analysing 	<ul style="list-style-type: none"> • Maintains quality results by running standards and controls, verifying equipment function through routine equipment maintenance and advanced trouble shooting; calibrating equipment utilizing approved testing procedures; monitoring quality control measures and protocols. • Estimation/preparation of list of Laboratory Reagents for annual procurement Chemicals/ Instruments on annual/need basis. • Performing the Calibration of Lab Equipment and its 	<ul style="list-style-type: none"> • For lapses in the work assigned



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	<p>Information. Chemistry Techniques, Informing Others, FDA Health Regulations, Creating a Safe, Effective Environment, Infection Control, Training Management, Lab Environment, Clinical Lab Testing, Thoroughness</p> <ul style="list-style-type: none"> Enhances laboratory services and hospital reputation. Contributes to a safe and secure environment for patients, visitors, physicians and co-workers by following established standards and procedures; complying with legal regulations. Provide guidelines regarding Lab Investigations and related Day-to-day operations/procedures to the Lab Technicians Supervise storage, Stock, expiry date check, segregation and arrange for replacement/disposal of lab chemicals. Supervise maintenance of registers, documents, files, and formats. Supervising the service and AMC of the Equipment. Submitting periodical statements/statistics to CMO/DY.CMO/SMO 	<p>related activity on daily and periodical basis for maintaining utmost accuracy in investigation reports</p>	
Radiographer (On Contract)	<p>Responsible for:</p> <ul style="list-style-type: none"> Preparing the patient, ensuring safety of self and the patients, taking x-ray and developing the x-rays and issue the x-ray film to the medical officer/consultants through patients/ attendant. Submission of X-Rays to the visiting Radiologist for report (Obtaining the reports of the x-rays from the help of visiting Radiologist.) Maintain stock, storage, observe quality of chemicals periodically. Works related to segregating the unusable chemicals and more than 5 years old X-ray films for disposal. Maintain register and submit periodical statements/ statistics to CMO/DY.C.M.O/SMO Supervising the service and AMC of the Equipment. 	<ul style="list-style-type: none"> Estimating and submitting the required quantity of X-ray films and Chemicals annually and as and when required for procurement. 	<ul style="list-style-type: none"> For lapses in the work assigned.
First Aid Superintendent	<p>Responsible for:</p> <ul style="list-style-type: none"> Provide First Aid Treatment to all the injured /Emergency patients at FAC. Supervising wharf First Aid Centres, Preparing duty roster / leave arrangement of LFA and FA. Maintaining various files documents and formats related to FAC. Segregating near expiry Drugs/Surgical items and arrange for replacement. Replenish First Aid Boxes installed in various locations of NMPA with drugs every month/as per need. 	<ul style="list-style-type: none"> Indenting, storing, stock maintaining and distributing medical and surgical items at wharf first aid centres. Monthly report of store stock, both physical & system stock. 	<ul style="list-style-type: none"> For lapses in the work assigned.



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	<ul style="list-style-type: none"> Informing higher authorities about major accidents/injuries. Sending periodical reports to CMO/ DY.CMO /SMO. 		
Office Superintendent	<p>Responsible for:</p> <ul style="list-style-type: none"> Office Superintendent is the overall in charge and responsible for effective functioning of the office of Medical Department. Guide/supervise/extract work from all the sub ordinate staffs working in the office. Preparation of Board Agenda, Reply to Ministry etc. Preparation of Annual budget estimate/Revised Budget Estimate and related correspondences. Issues related to service matters of all Class I to Class IV Employees and Officers up to the levels of Dy.HOD. Issue of NOC for higher studies, Issue of NOC's / NDC's / Service experience certificates, permission to leave the Headquarters to go abroad, Para wise comments for writ petitions, RTI replies are to be attended. Correspondence with Ministry and Other Department, Annual administrative Report / Press related issues. Tender Process for engagement of Paramedical Workers, Data Entry Operators Laundry for Hospital Linen, Agency for Biomedical Waste disposal, Xerox Machine and other correspondences related engagement of Medical Officers on contract, visiting consultants. Settlement of Firm bills, Contractors bills towards engagement of Paramedical Workers, Data Entry Operators, Hired Ambulance and bills related to Medical Officers on contract, visiting consultants within specified period through Data Entry Operators. Maintenance of Tools & Plants Register & Correspondence related to Survey Reporting of Unserviceable items. Correspondences related to Audit Observations. Any other work entrusted by CMO/ Dy.CMO/SMO. 	<ul style="list-style-type: none"> Matters related to Implementation of QMS/EMS/ERP 	<ul style="list-style-type: none"> For lapses in the work assigned



NEW MANGALORE PORT AUTHORITY

Title: SECTION G-ROLES, RESPONSIBILITIES, AUTHORITIES AND ACCOUNTABILITY

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Data Entry Operator	<p>Responsible for:</p> <ul style="list-style-type: none"> Correspondences and Settlement of Firm bills / Contract bills towards engagement of Paramedical Workers, Data Entry Operators, Hired Ambulance and bills related to Medical Officers on contract, visiting consultants within specified period. Processing of IP/OP Medical Reimbursement claims of the approved referral Hospitals/individual claim, Settlement of empanelled Medical Shop bills/ Medicine purchase bills, AMC/CMC of Hospital equipments & related correspondence. Any other duty assigned by CMO 	<ul style="list-style-type: none"> Correspondence and settlement of all bills 	<ul style="list-style-type: none"> For lapses in the work assigned
Dealing Assistant	<ul style="list-style-type: none"> Correspondences related to Medical Fitness Certificate to all regular appointments / Medical Board correspondence. Sanction of all kinds of leave, increment, leave encashment, Disciplinary Proceedings, forwarding of applications to outside organizations Pay & allowances correspondence Correspondence related to RFID. Correspondence related to LTC/Transfer TA. Forwarding of applications of Motor car/ Festival/Computer advance / GPF/HBA applications etc., and related correspondence. Issue of ID Cards/Preparation of Monthly reports of appointment & Promotions / Public Grievances / Strike /Disciplinary proceedings / Vigilance report / Accident Reports. Preparation of Quarterly reports of implementation of OLS/Contractual appointments. Half-yearly preparation of Recruitment of Minority Community. OTA / NWA correspondence Purchase & Maintenance of Postage Stamps through temporary Imprest. Registration of Receipt and Dispatch work of Office and Maintenance of Bill Register / File Movement Register/ Outward Tapal Register. Issue of Medical Eligibility card to the NMPA retired employees. Permission to acquire / dispose off immovable/movable property. Reimbursement of Tuition Fees, Merit scholarship, Grant of books and stationary allowance. Correspondence related to Trainings/Health awareness programmes. Correspondences related to approval of competent Authority to take 	<ul style="list-style-type: none"> Recruitment, Seniority, Promotions, Declaration of Probationary period, Confirmations, Resignation, Financial Up gradation under ACP/MACP Scheme, Retirement, Verification of services. 	



NEW MANGALORE PORT AUTHORITY

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	<p>medical treatment from Hospitals other than approved Hospitals for NMPA/RCHW Employees and Retirees.</p> <ul style="list-style-type: none"> • Maintenance of Temporary Imprests for celebration of National festivals and celebration of other functions of the Medical Department. • Any other work entrusted by Superiors/SMO/Dy.CMO/C MO. 		
Physiotherapist	<p>Responsible for:</p> <ul style="list-style-type: none"> • Maintaining the Registers of the patients treated. • Inform the in charge MO/Sr. Nurse/Asst. Matron in case of any deficiency regarding Equipment/ Infrastructure maintenance. • Any other work entrusted by the Superior/SMO/Dy.CMO/CMO. 	<ul style="list-style-type: none"> • Physiotherapist is responsible for providing physiotherapy treatment to the patients referred by Doctors. 	<ul style="list-style-type: none"> • For lapses in the work assigned
Receptionist	<p>Responsible for:</p> <ul style="list-style-type: none"> • Registration of outpatients within 5 minutes from time of reporting, raising of OP No for a consultant/ MO, whom the patient wants to consult. • Collection of Private Patient payment & handing over to pharmacy daily. • Preparation& submission of weekly / monthly census of OP/IP Referral patient details to the CMO through the Section Head. • Reconciliation of Medical Eligibility Cards (MEC) books daily. 	<ul style="list-style-type: none"> • Preparation of Referral letters approved by CMO/Dy.CMO on recommendation by MO/Consultant 	<ul style="list-style-type: none"> • For lapses in the work assigned
Daftry	<p>Responsible for:</p> <ul style="list-style-type: none"> • Maintaining the Office & Record room neat & Tidy • Collecting, Sorting & filing in orderly manner all the records and files and stored at Record Room. • Assisting the work in the Office. • Any other work entrusted by Superiors/SMO/Dy.CMO/C MO. 	<ul style="list-style-type: none"> • Dispatching and Receiving Tapals in and out of Medical Department. 	<ul style="list-style-type: none"> • For lapses in the work assigned
Departmental Representative & Document Controller	<ul style="list-style-type: none"> • Responsible for all ISO IMS related activities in the Department 	<ul style="list-style-type: none"> • To prepare ISO related Documents for the Department and maintaining the controls and records for ISO purpose 	<ul style="list-style-type: none"> • For lapses in the work assigned



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PA to CMO	<p>Responsible for:</p> <ul style="list-style-type: none">• The dictation work and maintenance of the confidential routine matters.• Assisting CMO for conducting regular meetings• For the important correspondence to Ministry /Chairperson etc., and keeping a track of action to be taken over various policy matters and inform regularly the position to the CMO.	<ul style="list-style-type: none">• Authorised to communicate with Ministry / Chairperson on administrative matters pertaining to PTH.	<ul style="list-style-type: none">• For lapses in the work and authorities assigned
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NEW MANGALORE PORT AUTHORITY

Title: LIST OF DEPARTMENTAL ACTIVITIES

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SECTION H-LIST OF DEPARTMENTAL ACTIVITIES

S.NO	KEY ACTIVITIES
1	Attending Patients at PTH
2	Procurement & Storage of Drugs & Consumables
3	Process at Radiology & Clinical Laboratory
4	Maintenance of Medical & Surgical Equipment
5	Sanitary Procedure at PTH
6	Outsourcing & Processing of Bills Received
7	Reimbursement of Medical Claims



NEW MANGALORE PORT AUTHORITY

Title: PLANNING FOR THE DEPARTMENT

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SECTION I- PLANNING FOR THE DEPARTMENT

S.NO	PLANNING
1	Annual budget estimates
2	Planning for waste management
3	Planning for Departmental Review Meetings with Agenda and Minutes
4	Planning for Emergency Preparedness
5	Planning for Meeting Corporate and Departmental Objectives & KPI
6	Planning for Annual Environmental Aspect Identification
7	Planning for Annual Identification of Hazards, Risks & Mitigation efforts
8	Planning for Delegation of Departmental Work and Deployment
9	Planning for Resources for the Department



NEW MANGALORE PORT AUTHORITY

Title: PROCEDURE FOR GENERAL SYSTEM COMPLIANCE FOR THE DEPARTMENT

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SECTIONJ-PROCEDURE FOR GENERAL SYSTEM COMPLIANCE FOR THE DEPARTMENT

CONTEXT OF THE ORGANIZATION:

- The Department monitors, reviews and provides information about the external and internal issues relevant to the Department during Departmental Review Meeting (DRM). The Department monitors, reviews and provides information about interested parties and their relevant requirements during DRM. The Department identifies, evaluates and addresses the risks and opportunities relevant to the process and ensures that it achieves the intended results, maintaining and retaining documented information to provide evidence that the process is being carried out as planned.

DOCUMENT CONTROL:

- Document control system as documented under IPM is to be adopted, including the codification of Departmental Manual and other documents in the Department. Master List of Documents and Master List of External Documents are to be maintained in the prescribed format by the ISO Coordinator. Documents Approver Record is also to be maintained in the prescribed format for all the Documents in use in the Department, by the ISO Coordinator, duly approved by the HOD/Process Owner.

RECORDS CONTROL:

- Records control system as documented under IPM is to be adopted, including the codification of Record Formats in the Department, generated within the Department.

MANAGEMENT CONTROL:

- Management controls as envisaged under IPM are to be exercised by HOD, providing inputs for the various Meetings and taking actions as required. Compliances to Quality/Environmental objectives and Key Performance Indicators, Targets, Management Programs (EMP etc.), Reviews, Monitoring and Continual Improvement are the responsibility of HOD. ISO Coordinator has to convene periodical ISO Departmental Meetings, prepare agenda and minutes and ensure compliance to actions proposed in these meetings. Inputs for Management Review Meetings are to be made available timely by the ISO Coordinator, and follow up actions taken based on the decision at MRM. ISO Coordinator is also responsible for obtaining Feedback from Internal Customers, wherever required, and for taking follow up actions on these feed backs.

INTERNAL AUDIT:

- Internal Audit is carried out as documented under IPM. It is the responsibility of HOD to be available for Internal Audits and provide necessary co-operation for the Auditors, making available the requisite data, records and information as required. ISO Coordinator is responsible for being in readiness for the audits and taking follow up action on audit findings.

RESOURCES:

- The Department reviews the availability of resources for maintenance and improvement of management system, reviews the persons necessary for the effective implementation & controls of management systems, determines and provides infrastructure necessary for operation of its process and achieve conformity of products, during every DRM. The Department determines the necessary competence of persons doing work under its control, ensures the competency of these persons and retains records as evidence of competence. The Department ensures that persons doing work under its control are made aware of policies, objectives, their contributions and implications of not Conforming with the management system requirements.



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NON- CONFORMANCE:

- Non Conformance control is carried out as per documented under IPM. It is the Responsibility of the concerned Department to identify, record, notify and take appropriate actions on nonconforming products in the Department. Failure to achieve targets for justifiable reasons will not be construed as Non Conformance. Failure to achieve service delivery conditions would be considered as NC for Department.

CORRECTIVE ACTIONS:

- Corrective actions, as documented under IPM are taken by the Department for non-conforming products/output. Procedural changes in the Document may be considered by the Department to comply with Corrective actions. Activities and systems may be reviewed periodically for taking corrective actions.

COMMUNICATIONS:

- Communications, both internal and external are carried out as per documented under IPM. Effective communication may be maintained within the Department and among other Departments and with external customer and interested parties also as required, maintaining records. Communication Matrix is as follows for the Department.

INTERNAL

SI. NO	WHAT TO BE COMMUNICATED	WHEN TO COMMUNICATE	WHOM TO COMMUNICATE	HOW TO COMMUNICATE	WHO SHALL COMMUNICATE
1	Policies & Procedure Changes	Daily Meeting/ When Required	Employees/Supplier & Customers	Verbal/ Display Board	HOD
2	Corporate and Departmental Objectives & KPI	Periodically	Departmental Employees	Verbal / Doc / Email	HOD
3	Customer feedback/incl uding complaints	When Required	Departmental Employees	Verbal/ Doc./Email	HOD
4	Safety Concerns and issues	When Required	Departmental Employees	Verbal/Email/	HOD

EXTERNAL

SI. NO	WHAT TO BE COMMUNICATED	WHEN TO COMMUNICATE	WHOM TO COMMUNICATE	HOW TO COMMUNICATE	WHO SHALL COMMUNICATE
1	Operational Issues	When Required	Contractors& Customers	Email / Display Board/Portal	HOD
2	Safe Practices in the Port	When Required	Contractors& Customers	Email / Portal/	HOD



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Title: PROCEDURE FOR GENERAL SYSTEM COMPLIANCE FOR THE DEPARTMENT

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3	Queries and Clarifications	When Required	Contractors & Customers	Email / Portal	HOD
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PURCHASE CONTROL:

- Purchase and Sub-contractor control are carried out as per the documented procedure, in IPM by the Department. Sub-contractors are evaluated before utilizing the services and rated as per the documented procedure.

MONITORING AND MEASURING RESOURCES:

- Control on Monitoring and Measuring Equipment is carried out as per the documented procedure, in IPM. It is ensured by the Department that measuring equipment used are identified and periodically calibrated and maintained as per the documented procedure. Software used for monitoring and measurement is periodically validated by the Department.

ORGANIZATIONAL KNOWLEDGE:

- The Department determines the knowledge necessary for the operation of its process and to achieve conformity of products. This knowledge is maintained and made available to the extent necessary, by sharing the experiences.
- Maintenance: It is ensured that the equipment and gadgets used in the Department are properly maintained as per the documented procedure, in IPM, with proper planning of spares.

ENVIRONMENT FOR THE OPERATION OF PROCESS:

- The Department determines, provides and maintains the environment necessary for the operation of its process. Safe work practices are adopted in the Department, as per Safety/Fire Manual, with proper safety precautions, and with proper personal protective equipment. Wherever required, Departmental Mock Drills are organized and employees are trained periodically on safety in the work area and surroundings. It is ensured that proper lighting, ventilation and environmental conditions conducive to the welfare of the employees are provided, apart from ergonomically positioned workplace. High noise areas are suitably identified.

PLANNING OF CHANGES:

- When a need for changes to management systems or for production is envisaged, the changes are carried out in a planned manner as per Change Management Procedure.

CONTROL OF NON-CONFORMING OUTPUTS:

- The Department ensures that outputs that do not conform to the requirements are identified and controlled to prevent their unintended use or delivery. Records for non-conforming outputs are maintained describing the non-conformity, actions taken and authority deciding the action.



NEW MANGALORE PORT AUTHORITY

Title: PROCEDURE FOR QUALITY MONITORING FOR THE DEPARTMENT

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SECTION K-PROCEDURE FOR QUALITY MONITORING FOR THE DEPARTMENT

- The Department identifies what needs to be monitored and measured, methods to be adopted, when the monitoring and measurement will be done and when these results will be analysed and evaluated, maintaining appropriate documented information. This is applicable for the bought out items, which are inspected/verified by the indenter and service deliver is also monitored.
- The Department monitors customer's perceptions of the degree to which their needs and expectations have been fulfilled, determining the methods for obtaining, monitoring, and reviewing this information. Feedback forms are available for this purpose and this activity is to be done six monthly, obtaining feedback from major customers,
- The Department analyses and evaluates appropriate data and information arising from monitoring and measurement, using statistical techniques, to know the trends.
- The Department ensures that externally provided processes, products and services conform to requirements, determining the controls to be applied and maintaining necessary records for the same.



NEW MANGALORE PORT AUTHORITY

Title: PROCEDURE FOR ENVIRONMENTAL MONITORING FOR THE DEPARTMENT

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SECTION L-PROCEDURE FOR ENVIRONMENTAL MONITORING FOR THE DEPARTMENT

ENVIRONMENTAL CONTROL:

- Environmental control system as documented under IPM is to be adopted. Department is responsible for identification of aspects, as documented under the above procedure, and for effective control of significant aspect for the Department with Operations Control Procedure or Work Instruction or with Check Lists and for containing the effects from significant aspects within the legal requirements. For every significant aspect, the Department has to identify Environmental objectives, targets and Management Programmers, and manage EMP with short and long term plans. Environmental objectives are followed up for compliance and EMPs are effectively monitored periodically. For this purpose, Departmental ISO Meetings are scheduled periodically for reviewing and monitoring the Environmental Objectives, Targets and Management programmers. Environmental records for compliances as required are maintained by the Department. In case resources from other Departments are required for progressing with Environmental Management Programmers, MR may be approached for coordination and redressal of connected issues.

WASTE CONTROL:

- Waste control as documented under IPM is to be adopted, including the classification of wastes. Waste segregation is done at the source itself and special attention is given to hazardous wastes/Bio-medical wastes. Waste control records as required are maintained. Wastes generated are periodically monitored and disposed of.

EMERGENCY CONTROL:

- Emergency control system as documented under IPM is to be adopted, including the emergency response procedures, with clear marking of escape routes where required and identifying Assembly Points for the Department. Based on incidents and accidents, corrective actions may be reviewed. Mock Drill is conducted periodically to review the preparedness for emergency situations. Emergency situations are properly recorded and intimation sent to concerned statutory bodies as documented, taking corrective actions.

LEGISLATIVE CONTROL:

- Legislative control system as documented under IPM is to be adopted, including statutory compliances as required in the Department. It is ensured that the legislative and other requirements to which the company subscribes are compiled within the Department and Compliance records are maintained. It is ensured by the Department that proper Personal Protective Equipment are used in places where they are required. Records for compliance for the above are maintained.



NEW MANGALORE PORT AUTHORITY

Title: PROCEDURE FOR DEPARTMENTAL TRAINING & COMPETENCY DEVELOPMENT

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SECTION M-PROCEDURE FOR DEPARTMENTAL TRAINING& COMPETENCY DEVELOPMENT

1. PURPOSE:

- 1.1 To provide training for the employees and service providers of the Department and develop competency of personnel in the Department.

2. SCOPE:

- 2.1 Subjects related to Departmental activities and applicable Management systems of the department.

3. PROCEDURE:

- 3.1 At the beginning of each financial year a training calendar is prepared by DR/Document Coordinator identifying the trainings on critical departmental activities, Departmental technical learning's that have to be updated, SEAs, controls related to all of them. HOD/Sectional Heads

SL. NO	DESCRIPTION	RESPONSIBILITY
1	It is ensured that employees joining the department on allotment or on transfer are provided with an induction training covering the activities, applicable documents, systems and "Do's and Don'ts" in the Department.	HOD/Sectional Heads
2	Critical departmental activities.	HOD/Sectional Heads
3	Departmental technical learning's that have been gained by experience and dealing with breakdowns, failures and forced shutdowns.	HOD/Sectional Heads
4	General awareness on the management systems as applicable, the objectives, KPIs, benefits and the systems in place to achieve them.	HOD/Sectional Heads
5	Applicable SEAs, Risks, the controls in place for mitigation and the effects of non-adherence to the controls.	HOD/Sectional Heads
6	Steps to be followed during actual "Emergency" and created "Emergency" for "Mock drill" related to EMS.	HOD/Sectional Heads



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Trainings which cannot be conducted due to lack of resources are taken up with HR

3.2 COMPETENCE DEVELOPMENT PROCEDURE:

3.2.1 Core activities of the Department are captured and plan for Training personnel for various operations are planned and training provided in specific areas to make personnel competent for taking various jobs in the Department.

3.2.2 DR/ISO Coordinator will identify the personnel to be trained based on the seniority/Skill and knowledge of the person and also trainer will be identified for the specified training in the Department.

3.2.3 Based on the above training competency matrix will be maintained by HOD/Section Heads for deployment of suitable personnel for various activities in the Department. Trainings which cannot be conducted due to lack of resources in the Department are taken up with HR or ISO cell and ensured provision of the same.

4. REFERENCE:

- 4.1 Training material as Power point presentation,
- 4.2 Documents and
- 4.3 Operational training manuals

5. FORMATS/RECORDS:

- 5.1 Training Register (Free Format)



NEW MANGALORE PORT AUTHORITY

Title: PROCEDURE FOR ATTENDING PATIENTS AT PTH

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SECTION N-PROCEDURE FOR ATTENDING PATIENTS AT PTH

1. PURPOSE

- 1.1 The purpose of this Procedure is to provide guidelines for attending patients at Port Authority Hospital. (PTH)

2. SCOPE

- 2.1 This Procedure is applicable to
- The NMPA recognized out patients
 - Any emergency patients at casualty and Outpatient clinic.
 - The NMPA recognized in-patients at PTH ward.

3. OBJECTIVE

- 3.1 Timely and Effective treatment of defined patients

4. DEFINITIONS

4.1 Visiting Consultants

- 4.1.1 Specialist doctors with Post Graduate qualification & Super specialty qualifications in their respective specialized fields who visit PTH as part-time consultants appointed by NMPA on contract basis.

4.2 Out patients (defined patients)

- 4.2.1 Employees and dependents of Port, RCHW, CISF, RAO Office, EMS, KVM, Radio wind Observatory, Customs, Coast Guards, Retired employees and their spouse of Port / RCHW, employees of NMPA Canteen and also other emergency patients.

4.3 In patients (defined patients)

- 4.3.1 Employees and dependents of Port and RCHW, CISF, RAO, Retired employees and their spouse of Port / RCHW

4.4 Para-Medical staff

- 4.4.1 Nurses, OT Nurse, Radiographer, Laboratory Technician, Pharmacist, Physiotherapist, Dental Technicians, Ophthalmology Technician, ECG/USG Technician, Operation Theatre Technician, First Aid Staff, Dresser and Hospital Attendant.

4.4.2 Referral hospitals /Diagnostic Centres (NMPA Approved):

1. A J Hospital, Mangalore,
2. Athena Hospital, Mangalore,
3. Chennai National hospital, Tamil Nadu
4. Father Mullers Hospital.
5. Indiana Hospital, Mangalore
6. Jayabharath Hospital, Nellore , Andhra Pradesh
7. Kasturba Hospital, Manipal,
8. KMC Hospital, Ambedker Circle, Mangalore,
9. KMC Hospital, Attavara, Mangalore
10. Mangalore Institute of Oncology, Mangalore,
11. Omega Hospital, Mangalore,
12. Prasad Nethralaya, Mangalore & Udupi
13. Shree Dharmastala Ayurvedic Hospital, Udupi (OPD & Day Care)
14. Shri Dharmastala Manjunatheshwara Eye Hospital, Lalbhag
15. Srinivas Hospital & Research Centre, Mangalore



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16. St. Martha's Hospital, Bangalore.
17. Unity Health Complex, Mangalore,

5. RESPONSIBILITY

- 5.1 Receptionist, Para-medical staff, Ambulance Drivers, Medical Officers, Senior Medical Officers, Specialists, Deputy CMO, CMO.

6. PROCEDURE

- 6.1 The receptionist shall register patients at registration counter through HMS, issue MEC books/OP slip/Paying Patient slip (as applicable) and shall guide patients to OP clinics /casualty after asking the condition of patient. Receive telephone calls and if necessary shall arrange for sending ambulance to the locality of patient.
- 6.2 Medical officer /Senior Medical Officer / visiting consultant shall take medical history; conduct clinical examination/ laboratory/radiology investigation, as required.
- 6.3 If required, the doctors shall take second opinion from other doctors / consultants, available.
- 6.4 The duty doctors/consultants can order the patients for further procedures at the Port Hospital vis :-
 - ECG – Available in the casualty. Will be carried out by the duty nurses.
 - X – Ray – Machine available at the hospital along with X Ray technician deployed on contract.
 - Lab – For carrying out various test vis. blood, urine etc
- 6.5 After conducting the clinical examination / investigation, the doctor shall prescribe drugs / order procedures, as required.
- 6.6 The prescribed drugs will be issued to the patients by the In house pharmacy available at the Port Authority Hospital.
- 6.7 Depending on the report of the above investigations the patients can be provided prescriptions or referred to visiting consultants/empanelment hospitals or can also be intimated for further follow ups after three days depending on the condition.
- 6.8 When required, he shall arrange for admission procedures and treatment at PAH referral hospitals / shift the needy patients by ambulances.
- 6.9 Ambulance service is available 24/7 round the clock for transferring patients to referred hospitals for admission and bringing patients from their home in case of any emergencies and transfer patients to their home after dialysis.
- 6.10 Doctor on duty shall issue Death Certificate for the patients who succumb to death in the hospital.

7. Procedure for empanelment of Hospitals.

- 7.1 Letter / Mail to confirm the willingness of the Hospitals to provide service at CGHS rates for NMPA beneficiaries.
- 7.2 After obtaining the willingness, approval of the Competent Authority is obtained to place the proposal in the Board. Approval of the Board is obtained.
- 7.3 Draft MoU is sent for Legal Vetting.
- 7.4 The legally vetted MoU will be signed by both the parties (NMPA & Empanelled Hospital) along with the two witness in a stamp paper of Rs. 100/- value.
- 7.5 Work Order is issued to the empaneled hospital and circular is issued informing the same to the NMPA Beneficiaries.



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Title: PROCEDURE FOR ATTENDING PATIENTS AT PTH

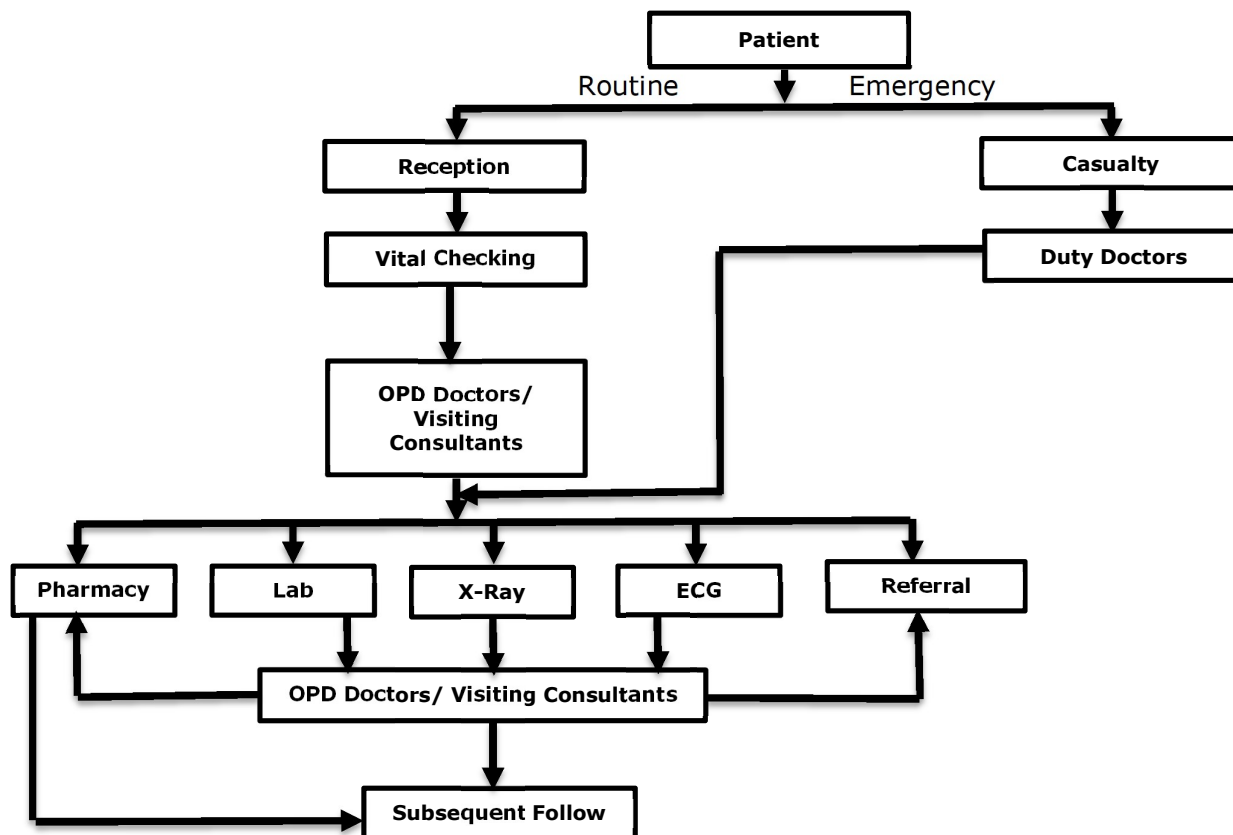
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Flow Chart :-





NEW MANGALORE PORT AUTHORITY

Title: PROCUREMENT AND STORAGE OF DRUGS & CONSUMABLES

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SECTION O-PROCUREMENT AND STORAGE OF DRUGS & CONSUMABLES and INVENTORY MAINTAINING PROCEDURE

1. PURPOSE

- 1.1 The purpose of this Procedure is to provide guidelines for procurement, supply and storage of Drugs & consumables to various user sections of PTH.

2. SCOPE

- 2.1 This Procedure is applicable to all drugs & consumables supplied to the required user sections at PTH

3. OBJECTIVE

- 3.1 To issue drugs & consumables to the required user section of PTH on time as per Drug Procurement Policy of NMPA.
- 3.2 To segregate the drugs & consumables those are nearing the date of expiry well in time so that they are not issued to the patients / various sections.

4. DEFINITIONS

- 4.1 **DRUG SELECTION COMMITTEE** (As per Drug Procurement Policy of NMPA)

- 4.1.1 There will be minimum of nine members in the Drug Selection Committee in the following disciplines

- | | |
|--|--------------------------------|
| 1. Chief Medical Officer | - Chairperson of the committee |
| 2. Deputy Chief Medical Officer | - Member |
| 3. Any one of the Senior Medical Officer | - Member |
| 4. In charge SMO/MO of Pharmacy | - Member |
| 5. Minimum Four Consultant Specialists | |
| • Consultant Physician / Cardiologist | - Member |
| • Consultant Surgeon / Orthopaedic Surgeon | - Member |
| • Consultant Gynaecologist / Paediatrician | - Member |
| • Consultant Ophthalmologist / Dentist | - Member |
| 6. FA & CAO or his nominee | - Member |
| 7. Deputy Controller of Stores | - Member |

- 4.2 TENDER COMMITTEE:

- 4.3 There will be minimum of five members in the Tender Committee in the following disciplines

- | | |
|--|--------------------------------|
| 1. Chief Medical Officer | - Chairperson of the committee |
| 2. FA & CAO | - Member |
| 3. Secretary | - Member |
| 4. Deputy Chief Medical Officer | - Member |
| 5. Deputy Controller of Stores/Procurement Manager | - Member |

- 4.3.1 Life Saving Essential Drugs: The group of Pharmaceutical preparations that are administered to cure diseases/disorders as direct therapeutic agents in life saving emergency conditions.

5. RESPONSIBILITY

- 5.1 Drug Selection Committee & Tender Committee Members, Senior Medical Officer in charge of Pharmacy section, Head Pharmacist, Senior Pharmacists, and Pharmacists.



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Title: PROCUREMENT AND STORAGE OF DRUGS & CONSUMABLES

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6. PROCEDURE

6.1 PREPARATION OF LIST OF ITEMS & PROCUREMENT

- 6.1.1 Drug Selection Committee shall prepare annual requirement of drugs & consumables based on the present stock, previous year consumption and current year estimation as per the requirement given by the Doctors & Visiting Consultants and all Heads of the user sections.
- 6.1.2 Drug Selection Committee shall finalize the list, presented by CMO and the finalized list shall be sent to the Competent Authority for approval.
- 6.1.3 After approval from Competent Authority, Tender notice shall be published in CPP Portal and websites of New Mangalore Port Authority, Govt of India inviting bids for Annual Rate Contract from the Manufacturers/Distributors. The details of vendors are uploaded in the ERP.
- 6.1.4 As per the schedule of the tender, the Technical bids will be opened and the Head Pharmacist/ Dealing Assistant shall prepare comparative statement and shall submit the proposal to the tender committee. Minutes of the meeting along with the Note file will be sent to the Finance Department for verification and concurrence and File will be sent for approval of the Competent Authority to open the price bids of qualifying bidders.
- 6.1.5 After the approval of the Competent Authority, the price bids will be opened and comparative statement will be prepared, the same shall be placed before the Tender committee for final Recommendations. The final Recommendations of the tender committee shall be sent for approval of the competent Authority.
- 6.1.6 After getting approval from the Competent Authority, L1 list will be prepared. The Rate Agreement with the L1 Bidder will be entered and performance Security in the form of Bank Guarantee will be obtained.
- 6.1.7 L1 list will be forwarded to Finance, RAO and CVO.
- 6.1.8 CMO shall place the purchase orders with the purchase information.

6.2 PERFORMANCE MONITORING OF SUPPLIERS:

- 6.2.1 The performance monitoring is made based on supply timings, supply quantity, supply quality, replacement, compliance with service/supply order and Overall services.

6.3 RECEIPT OF MATERIALS FROM SUPPLIER:

- 6.3.1 On receipt of supply, Verification of quality and quantity against the purchase order given ie., Batch Number, Date of expiry, Quantity and rates against the supply order & Invoices shall be carried out by the Pharmacist in charge of Main Medical Store in the presence of Senior Medical Officer in charge of Pharmacy Section. Purchase of all stocks received in Main Medical store thereafter all activities of Stocks in Main Medical store & Bill Payment is done through ERP Module, Further, issue of stock against indent to the user sections and dispense/Consumption is done through HMS Module.



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- 6.3.2 After approval of the CMO, the Pharmacist shall reject items that do not fulfil the terms and conditions of the order and the credit note for the same shall be taken from the Suppliers and the bills shall be forwarded to the Finance Dept. by him for the actual quantity received.
- 6.3.3 Head Pharmacist/ Dealing Assistant shall repeat Point 6.3.1 - 6.3.2 after receipt of replaced items.
- 6.3.4 The approved items shall be stored in identified locations after making entries in stock register in the ERP Module. The expiry date for the drugs & surgical items shall also be noted in the stock register in the ERP Module. List of medicines stocked in Main Medical Store will be communicated to all the Doctors and user section Heads for information. Periodical updation of the same will be done.
- 6.3.5 In general all Head of the user sections shall raise indent on every Tuesday (fixed day of the week) from Main Medical Stores and on receipt of the indented items from Main Medical Store necessary entries shall be made in user section stock register in the ERP Module.
- 6.4 MONITORING THE STORED MATERIALS / ITEMS:
- 6.4.1 Head Pharmacist/Pharmacist in charge of Main Medical Store shall store the product with proper coding in an identified location, for easy accessibility.
- 6.4.2 Reorder level is verified and the list of fast moving and slow moving medicines report is generated and submitted to store in charge pharmacist for further procurement.
- 6.4.3 User section is intimated on the newly procured /available at Main medical store on a continuous basis. Same is updated through ERP/manual entries and made available in HMS for preparation of the Indent by user section
- 6.4.4 Head Pharmacist / Pharmacist in charge of Main Medical store shall also conduct monthly verification of expiry date of drugs & consumables enlist, and segregate those, which are nearing expiry (1month). He shall arrange to send the enlisted items back to the supplier for replacement.
- 6.4.5 Inventory purchase details of Annual Rate Contract and received quantity against the invoices and pending items left in each purchase orders (firm wise) are updated including paid bill details are maintained in the ledger (excel).
- 6.4.6 The Main medical store physical stock position against HMS stock position is verified once in 15 days.
- 6.5 PROCUREMENT OF DRUGS THAT ARE NOT AVAILABLE AT NMPA HOSPITAL FROM APPROVED MEDICAL SHOPS:
- 6.5.1 Empanelment of Local Allopathic Medical Shops for the supply of Allopathic Medicines to Port Authority Hospital twice a day on credit basis at H1 discount percentage on MRP Rate based on the outcome of the Tender in two cover system once in two years.



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- 6.5.2 Indent & Delivery: The orders/ Indent for Items shall have to be collected by the Empanelled Medical Shops/ his representative every day and the delivery of the ordered Items shall have to be made compulsorily on same day & shall be F.O.R. Pharmacy Stores, NMPA Hospital, Panambur, Mangalore. Emergency Items shall have to be supplied immediately within an hour on the same day without any additional liability.
- 6.6 Morning OPD Indent & Delivery:
- 6.6.1 The authorized indenter will submit e-mail indent twice in the morning i.e. 11am & 12.30pm and twice in the Afternoon so that the Tenderer should supply the Medicines on the same day before 3pm for the Forenoon indented medicines. The indents and issue of medicines procured through empanelled Medical shop is entered in HMS for accounting through system.
- 6.6.2 Evening OPD Indent & Delivery: The authorized indenter will submit e-mail indent twice in the evening i.e. 5pm & 6.30pm so that the Tenderer should supply the Medicines before 8pm on the same day or not later than 8am next day for the evening indented medicines.
- 6.6.3 The supply of Medicines should be in a separate cover for individual patient wise, and it should be serially numbered as per the statement of the indent.
- 6.6.4 When the required medicines as per indent are not available in the medical store, the concerned Medical store should arrange to get the medicines from other stores and supply the same by applying the above rebate for such procurement of medicines from other Stores also.
- 6.6.5 The supply of medicines should be on credit basis.
- 6.6.6 The empanelled Medical Shops should take back the supplied Medicines if not utilized; the cost of the returned Medicines will be deducted from the pending bills payable to the Medical shops.
- 6.6.7 Immediately after receipt of the Medicines from the Medical stores, the duty pharmacist should verify and certify that all supplied medicines are as per the prescription of the Doctor i.e. the same brand name, manufacture & expiry date and MRP rate etc. The certified copy of the statement should be submitted along with the bills for verification and payment through Finance Department.

5. Role of Jan Aushadi –

- 5.1 The required medicines based on the movement will be selected from the Stock list of authorized Janaushadi Distributors i.e M/s Mahaveera Drug plus, Bengaluru and M/s jiva Raksha Surgicals and Pharmaceuticals Distributors, Mysuru. The firm will generate the Invoice as per the NMPA PMBJK Indent and send through mail for advance payment.
- 5.2 The proposal is sent for the approval of Competent Authority based on the delegation of powers.
- 5.3 After obtaining the approval, Debit advice cum payment Voucher will be generated for advance payment.
- 5.4 After receipt of payment the firm will supply the medicines to PMBJK.
- 5.5 The medicines will be issued to customer and daily cash collection will be remitted to Bank, UPI facilities also available in store. The total monthly collection will be calculated with GST and a letter of Authority will be generated and sent to finance with the approval of CMO.



NEW MANGALORE PORT AUTHORITY

Title: PROCESS AT RADIOLOGY AND CLINICAL LABORATORY

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5.6 The unutilized medicines will be sold to other Jan Oushadhi outlets. The expired medicines will be disposed through Bio medical waste with approval of Board.

6. Role of Branded Medicines

6.1 Drug selection Committee to select the Branded Medicines

6.2 Preparation of Drug selection committee report & estimation /Technical Specification of Tender

6.3 Estimation Approval by Competent Authority based on the Delegation of Power.

6.4 Publication of Tender for obtaining bids by the selected multiple manufacturer

6.5 Scrutiny of the tender and placing purchase order L1 Branded Medicines after the approval of the Competent Authority.

6.6 Receiving Medicines verify/ updation in ERP

6.7 Issue to the user section /Pharmacy through HMS system

6.8 List of available Brand circulated to the Medical officer



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SECTION P-PROCESS AT RADIOLOGY AND CLINICAL LABORATORY

1. PURPOSE

- 1.1 The purpose of this Procedure is to provide guidelines for conducting Radiological and Clinical Laboratory investigation at PTH.

2. SCOPE

- 2.1 This Procedure is applicable to all the Biochemistry, Haematology, Microbiology and Serology investigations at clinical laboratory and Radiological investigations at PTH for the NMPA recognized patients

3. OBJECTIVE

- 3.1 This Procedure Is to provide Radiological and Clinical Laboratory investigation facilities to the identified PTH patients for better & faster diagnosis and treatment.

4. DEFINITIONS

- 4.1 Consultants- Radiologist/Pathologist.
4.2 Chemicals - Chemicals used for Clinical Laboratory& Radiology.
4.3 NMPA recognized patients -Employees and dependents of Port and RCHW, CISF, RAO, EMS, KVM, Radio wind Observatory, Customs, Coast Guards, Retired employees and their spouse of Port / RCHW, employees of NMPA Canteen.

5. RESPONSIBILITY

- 5.1 MO's, SMO'S, Consultants, Radiologist, Pathologist, Radiographer, Senior Laboratory Technicians, Laboratory Technicians, CMO, Dy.CMO, Dy.MM.

6. PROCEDURE

- 6.1 The Lab Technician shall run Quality Control on daily basis
6.2 The lab Technician shall collect the specimen sample from the patient to be tested and label them.
6.3 Process the sample for required investigation
6.4 Generate report. All the laboratory reports must be signed by the concerned Laboratory Technicians after verifying the patient details and the report values etc. Counter signed by Senior Laboratory Technicians, and approved by pathologists if available.
Hand over the reports to the concerned patients.
6.5 Routine laboratory investigations, all reports of the samples tested at Port Authority Laboratory should be issued to the patients within 2.30 hours from the time of collection of samples.
6.6 In case of emergency, ordered by the concerned treating doctors, the reports should be made available within one hour from the time of collection of samples.
6.7 Immediate report of Blood sugar can be made available using Glucometer from Casualty/Laboratory/Wards.
6.8 Whenever blood and urine samples are sent to empanelled Diagnostic centre, all the required information like date and time of report collection should be given to the patients at the time of sample collection.
6.9 A main master register should be maintained to enter the name and other details of.



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the patients and sub registers should be maintained for each equipment separately

- 6.10 Any critical abnormal reports should be brought to the knowledge of pathologist, a separate register must be maintained for the same, and the same sample should be preserved for 3 days
- 6.11 Whenever required the abnormal reports to be brought to the notice of any one of the Medical officers on duty for correlation before dispatching to the patients.
- 6.12 Whenever the reports are found to be abnormal or the quality controls are not within the limits, pathologists must be informed. Necessary action must be taken after informing the Chief Medical Officer.
- 6.13 Quality Control reports must be signed by the pathologists and monthly QC Graph must be shown to the Chief Medical Officer

6.14 X-RAY & RADIOLOGY:

6.14.1 Registration at Radiology Section Issue filled investigation forms to required patients and guiding them to Radiology section.

6.14.2 Issuing USG / Echocardiogram / Colour Doppler Reports / Exposed X-Ray films / ECG

6.15 Preparation of patients

6.15.1 Conducting X-Ray / Ultra Sound Scan / ECG / Echocardiogram / Colour Doppler Study.

6.15.2 Preserving exposed X-Ray films up to 3 years

6.15.3 After the expiry of the X-Ray films and Chemicals the same shall be disposed through Central stores after Survey Reporting .

7. FUNCTIONING OF LABORATORY & RADIOLOGY

7.1 The Clinical Laboratory functions from 7.00 am to 7.00 pm. Sunday 7:00am to 3:00pm.



NEW MANGALORE PORT AUTHORITY

Title: PROCESS AT MAINTENANCE OF MEDICAL / SURGICAL EQUIPMENT

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SECTION Q-PROCESS AT MAINTENANCE OF MEDICAL/SURGICAL EQUIPMENT

1. PURPOSE

- 1.1 To establish a procedure for providing guidelines for maintenance of medical/surgical equipment and the infrastructure at PTH

2. SCOPE

- 2.1 This Procedure is applicable to all medical/surgical equipment and the entire Infrastructure in all sections of PTH.

3. OBJECTIVE

- 3.1 To keep the medical/surgical equipment/Infrastructure in good working conditions for better performance and to be able to provide better facilities to the patients as per the PTH norms.

4. DEFINITIONS

- 4.1 Medical/Surgical Equipment: Any equipment that is used for diagnostic/therapeutic purposes.
4.2 Infrastructure: Hospital Cots, Wheel Chairs, Trolleys etc.

5. RESPONSIBILITY

- 5.1 C.M.O., Dy.CMO, SMO, MO, Head of user sections of PTH

6. PROCEDURE

6.1 MAINTENANCE OF THE MEDICAL EQUIPMENTS AT PTH:

- 6.1.1 The Head of concerned user section shall report of any expiry of AMC/mal-functioning / under performance of the equipment to the CMO / DY.CMO
6.1.2 CMO /DY.CMO shall then intimate the service Engineer about the problem
6.1.3 The Head of user Section shall verify the contracts well in advance (3 months) before their expiry and notify CMO/DY.CMO of the same.
6.1.4 For the AMCs that are about to expire, CMO/ DY.CMO shall call quotations for A.M.C. from Supplier/Contractor.
6.1.5 After processing, the approved contractor shall be intimated and the confirmation of the functioning of the equipment in the form of Performance Certificate shall be taken.

6.2 MAINTENANCE OF INFRASTRUCTURE AT PTH:

- 6.2.1 If any defect / damage is observed by the staff, the same shall be entered in the defect register and DY.CMO shall be notified about the same.
6.2.2 The defect list shall be forwarded to the engineering dept. (Civil Mechanical) for rectification of the problem. In case, the problem does not get rectified, they shall intimate DY.CMO about the same, for getting the work done by an outside agency
6.2.3 CMO shall then award work / contract to the suitable agency as per procedure.
6.2.4 The Head of user Section shall monitor the quality of work executed.



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Title: PROCEDURE FOR SANITARY PRACTICES AT PTH

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SECTION R-PROCEDURE FOR SANITARY PRACTICES AT PTH

1. PURPOSE

- 1.1 The purpose of this Procedure is to provide guidelines for carrying out the sanitary procedures at PTH

2. SCOPE

- 2.1 This Procedure is applicable to housekeeping and bio medical waste disposal at Medical Department.

3. OBJECTIVE

- 3.1 This Procedure Is to maintain hygienic sanitary conditions at Medical Department, as per the regulatory requirements (Environment Protection) Act-1986, Proper disposal of Bio-medical wastes according to Bio-medical waste (Management and handling) Rule-1998.

4. DEFINITIONS

- 4.1 "Bio-medical Waste" means any waste which is generated during the diagnosis, treatment or immunization of human beings or animals or in research activities pertaining there to or in the production or testing biological and including categories mentioned in schedule I in table 4 (1).
- 4.2 'Sanitary procedures' :Means maintaining clean, Hygienic and neat hospital premises round the clock.

5. RESPONSIBILITY

- 5.1 House Keeping & Bio-medical Waste Disposal in PTH:
- CMO, DY.CMO, SMO, Civil Dept., Outsourced Agency, Authorized agency, Assistant Matron, Respective floor in charge, Senior Nurse/Nurse/ OT in charge Senior Nurse/Nurse.

6. PROCEDURE

6.1 HOUSE KEEPING AT PTH:

- 6.1.1 Assistant Matron and Head of the User Sections shall identify the prevalent sanitary requirements in the hospital and shall bring it to the notice of CMO/DY.CMO.
- 6.1.2 CMO/ DY.CMO shall intimate the requirement of sanitary service, with terms and conditions, to Civil Dept., which would outsource the same.
- 6.1.3 Assistant Matron shall assign the sanitary works to workers and shall assess their working on day-to-day basis. Based on the compliance with the sanitary requirements, they shall give the feedback to CMO/DY.CMO
- 6.1.4 In case of non-compliances, DY.CMO shall arrange for required modification of sanitary services.

6.2 BIO-MEDICAL WASTE DISPOSAL

- 6.2.1 DY.CMO through Assistant Matron shall identify the locations of Bio-medical waste generation.
- 6.2.2 CMO shall award the annual contract for collection of Bio-Medical wastes to the KSPCB approved agency.



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Title: PROCEDURE FOR SANITARY PRACTICES AT PTH

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- 6.2.3 The work of supplying the waste collection materials (as per the regulatory requirements) shall also be done by the stores/Regulatory Agency. (Central Stores and Medical Stores).
- 6.2.4 The user sections shall collect the Bio-medical wastes in the colour coded bags / containers, on daily basis. As per the regulations, the Asst. Matron /Floor in charge Senior Nurses /Nurse shall ensure this.
- 6.2.5 The Nurse in charge shall ensure to shift the filled colour coded bags from the identified user sections to identified main collection point on daily basis as per the regulatory requirements.
- 6.2.6 The Nurse in charge shall ensure to weigh the bags and hand them over to the authorized agency coming for collection on daily morning between 6.00am. to 8:00 am
- 6.2.7 Floor in charge Senior Nurses /Nurse and Asst. Matron shall maintain the records of acknowledgements received from the collecting agency.



NEW MANGALORE PORT AUTHORITY

Title: PROCEDURE FOR OUT SOURCING & PROCESSING OF BILLS RECEIVED

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SECTION S-PROCEDURE FOR OUT SOURCING & PROCESSING OF BILLS RECEIVED

1. PURPOSE

- 1.1 The purpose of this Procedure is to provide guidelines for arranging for out sourcing the required hospital services and their billing.

2. SCOPE

- 2.1 This Procedure is applicable to out sourcing of required Nursing, Para-medical, Ambulance services, Medical/Surgical/Other items and maintenance activities of PTH and the bills produced due to the same.

3. OBJECTIVE

- 3.1 To ensure that efficient services at PTH are availed from competent agencies at competitive rates & Timely payment of correct bills

4. DEFINITIONS

- 4.1 Para-Medical service - Service which is supportive to medical service Ex: Laboratory, Radiology and Nursing assistance (Attendants).

5. RESPONSIBILITY

- 5.1 CMO, Dy.CMO, SMO, FA & CAO, Secretary, Asst.Matron, Asst. Supdt. / DA/DEO and Heads of user sections

6. PROCEDURE

6.1 OUTSOURCING

- 6.1.1 Heads of each user section shall identify the prevailing work shortage; determine estimates involved for the annual requirement.
- 6.1.2 They shall intimate the same to CMO/Dy.CMO and who will get the approval from the competent authority.
- 6.1.3 CMO shall call for quotations by floating open tender in two cover system by publishing in NIT in CPPP and host the tender in NMPA website.
- 6.1.4 The Office.Suptd / DA shall prepare the comparative statements of the received bid with L1 and submit the same to the competent authority for approval.
- 6.1.5 CMO shall award the work to the approved contractor / agency.
- 6.1.6 The out-sourced staff shall be posted to the required user sections.
- 6.1.7 The Heads of user sections, Asst. Matron, Asst. Supdt., and SMO shall supervise the outsourced service as per the Terms and Conditions/Agreement.

6.2 BILLING

- 6.2.1 Asst.Suptd. / DA shall receive the bills sent by the agencies / contractors/ consultants and verify them for their compliance
- 6.2.2 He shall get the complying bills approved from CMO and forward the same to Finance Dept. for sanction & payment.
- 6.2.3 He shall forward the payment online in the form of RTGS/NEFT received from Finance Dept. to the concerned party.



NEW MANGALORE PORT AUTHORITY

Title: PROCEDURE FOR REIMBURSEMENT OF MEDICAL CLAIMS

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SECTION T-PROCEDURE FOR REIMBURSEMENT OF MEDICAL CLAIMS

1. PURPOSE

- 1.1 The purpose of this Procedure is to provide guidelines for processing of Medical Claims of eligible employees at CMR Cell

2. SCOPE

- 2.1 This Procedure is applicable to all Medical Claims i.e. In-patient and Out-Patient of NMPA serving employees of NMPA, RCHW, Retired Employees, Family Pensioners and CISF Personals.

3. OBJECTIVE

- 3.1 To process the Medical Claims for reimbursement within the stipulated time.

4. DEFINITIONS

- 4.1 NIL

5. RESPONSIBILITY

- 5.1 Data Entry Operators, Asst. Supdt., Office Supdt., Sr MO Dy. CMO, CMO

6. PROCEDURE

6.1 OUT- PATIENT CLAIMS

- 6.1.1 Reimbursement of outpatient medical bill system towards purchase of medicine was withdrawn. Instead, all medicines prescribed by doctors/visiting consultants are issued at PTH Pharmacy through annual procurement and procurement from authorized medical shops.

6.2 Special Investigation Bills:

- 6.2.1 As per Doctor's Advice patient is referred to designated Referral hospital with a referral note. Then Receptionist shall prepare the referral note and get approved by the CMO/Dy.CMO and hand over it to the patient or patient's care taker with instruction to hand over the same to the referral hospital.

- 6.2.2 The investigation bill is received from the approved referral hospital once in a month during the First Week of every month to CMR Cell through post or in hand.

- 6.2.3 The Dispatch Assistant shall enter the bill in the Tappal Register maintained with relevant details and hand over to DEO for further processing (Ref: Investigation Tappal Register, Referral Hospital Bill)

- 6.2.4 Concerned DEO shall scrutinize the bill for admissibility as per CGHS rate, prepare note sheet and AS/OS/Dy.CMO shall verify the case file, and forward to Finance Department through dispatcher for pre-audit after approval of CMO.

- 6.2.5 Finance Department shall scrutinize and re-assess the admissibility and return to CMR Cell.

- 6.2.6 Concerned DEO shall prepare a bill in contingent bill form and enter the bill in ERP Mode and prepare Debit Advice Cum payment voucher and put the signature at appropriate places.



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- 6.2.7 DEO shall enter the relevant details for the completed bill in their personal case dairy register (Ref. Case Workers Bill Register). AS/OS shall scrutinize the processed bills and forward to Dy.CMO/ Sr. MO / CMR Section Controller for Check and affixing the signature.
- 6.2.8 Dy. CMO/Sr. MO shall verify and validate by signing the bills and forward to CMO.
- 6.2.9 CMO shall verify and sign as Head of Department.
- 6.2.10 Dispatch Asst. shall enter the final approved claims in outward bill Register and Forward it to Finance Department for payment.
- 6.3 CLINICAL LABORATORY INVESTIGATIONS WHICH ARE NOT AVAILABLE AT PTH LABORATORY:
- 6.3.1 As per Doctor's Advice patient is referred to designated Referral hospital with a referral note. Then Receptionist shall prepare the referral note and get approved by the CMO/Dy.CMO and hand over to the patient or patient's care taker with instruction to hand over the same to the referral hospital.
- 6.3.2 The investigation bill is received from the referral hospital once a month to CMR Cell through post or in hand.
- 6.3.3 The Dispatch Assistant shall enter the bill in the Tappal Register maintained with relevant details and hand over to DEO for further processing (Ref: Investigation Tappal Register, Referral Hospital Bill)
- 6.3.4 Concerned DEO shall scrutinize the bill for admissibility as per CGHS rate, prepare note sheet and AS/OS/Dy.CMO/ Sr. MO shall verify the case file, and forward to FinanceDepartment through dispatcher for pre-audit after approval of CMO.
- 6.3.5 Finance Department shall scrutinize and re-assess the admissibility and return to CMR Cell.
- 6.3.6 Concerned DEO shall prepare a bill in contingent bill form and enter the bill in ERP Mode and prepare Debit Advice cum payment voucher and put signature at appropriate places.
- 6.3.7 Case worker shall enter the relevant details for the completed bill in their personal case dairy register (Ref. Case Workers Bill Register).
- 6.3.8 AS/OS shall scrutinize the processed bills and forward to Dy.CMO/ Sr. MO / CMR Section Controller for Check and affixing the signature.
- 6.3.9 Dy. CMO/ Sr. MO shall verify and validate by signing the bills and forward to CMO.
- 6.3.10 CMO shall verify and sign as Head of Department.
- 6.3.11 Dispatch Asst. shall enter the final approved claims in outward bill Register and Forward it to Finance Department for payment.



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6.4 IN PATIENT CLAIMS

- 6.4.1 As per Doctor's Advice, patient is referred to designated Referral hospital with a referral note. Then Receptionist shall prepare the referral note of two copies considering claimant's eligibility and get approved by CMO and hand over one copy to patient or patient's care taker with instructions to hand over the same to Referral hospital and the other copy referred for file reference (Ref. Eligibility guidelines, Referral Note).
- 6.4.2 In patient bill is received from the referral hospital to CMR Cell through post/ in hand within few days after discharge of the patient from the hospital. (Ref. In Patient Bills)
- 6.4.3 Dispatch Asst. shall enter the bill in the in-patient Register with relevant details and hand over to DEO for further processing (Ref. In-Patient Register, Referral Hospital Bill.)
- 6.4.4 Concerned DEO shall scrutinize the bill, as per agreed tariff rate with the approved hospital and prepare note sheet indicating the admissibility or inadmissibility amount against each item/package. He shall maintain the claim details in relevant register and AS/OS/ Sr. MO /Dy.CMO/CMO shall scrutinize the proposed Note File. In order to ease the work of settlement of similar IP/OP MR claims, 5-7 bills of same hospital/ same category of employees in any order of preference are put up together in tabulation instead of individual bills
- 6.4.5 Finance Department shall scrutinize and re-assess the admissibility and return to CMR Cell
- 6.4.6 The concerned DEO will prepare the bill in TR.27 draft order for payment of The admissible amount as per the agreed tariff rate with the approved hospital & debit come advice voucher & process in ERP mode. One-time final settlement of the bill will be made within 15 days after the receipt of bill as per the agreed rates along with all relevant documents from the concerned hospital & the excess amount charged will be disallowed while making payment to the hospital. All inpatient bills will be scrutinized and the payments shall be settled within 15 days in full shape. However, there is any clarification/ insufficient documents required it should be intimated to the hospital within 15 days on receipt of the bill. As soon as the clarification is sought the bill will be settled within 15 days on receipt of clarification/ required documents.
- 6.4.7 The IP/OP in respect to NMP/RCH pensioners are reimbursed restricting to CGHS. Further any IP/OP MR claim received for having availed treatment in private hospital on emergency are processed restricting to CGHS rates based on the merits of the case.
- 6.4.8 The AS/OS shall scrutinize the processed bills and forward to Dy.CMO/ Sr. MO / CMR Cell Controller for check and affixing the Signature
- 6.4.9 CMO shall verify and sign as Head of Department.
- 6.4.10 Dispatch Asst. shall enter the final approved claims in outward bill Register and forward it to Finance Department for payment. DA (Dispatcher) shall also enter the "Dispatch Data" in Receipt and Dispatch Register (Ref: Dispatch Register)



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Title: PROCEDURE FOR REIMBURSEMENT OF MEDICAL CLAIMS

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6.4.11 After payment is made to the concerned referral hospital through ECS, the voucher sent by the Finance Department is recorded in the concerned medical inpatient register for further action.

7. Frequency and SOP on which CGHS rates are updated.

- 7.1 CGHS rates will be revised / updated by the Ministry of Health and Family Welfare, Govt. of India from time to time. Same will be informed to the Port through various circulars.
- 7.2 These revised rates as intimated by the Ministry will be put-up for approval of the Competent Authority to implement the same at NMPA. These revised rates will also be intimated to the Board.
- 7.3 These revised rates will be implemented and circulated among the NMPA Beneficiaries for information.
- 7.4 The circular will come into effect from the date of approval of Competent Authority.

8. Utilisation of Pension portal with regard to medical claim of retired employees.

- 8.1 Reimbursement form is available on the portal.
- 8.2 The form downloaded can be filled up and submitted for reimbursement.



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SECTION U – OCP FOR EMS

OCP/01 - HANDLING, STORAGE, COLLECTION OF SOLID BIO MEDICAL WASTE

1. PURPOSE

- 1.1 To define the procedure to ensure the proper collection, storage & Handing over of Solid Biomedical Wastes as per the stipulated legal norms defined in the Bio-Medical Waste Management Rules 2011.

2. SCOPE

- 2.1 The procedure applies for the solid Biomedical Waste generated in the Medical Department while collecting, storage & handing over to the KSPCB certified disposing agency.

3. RESPONSIBILITY:

- 3.1 Section-in charges namely, Assistant Matron, Senior Laboratory Technician, Head Pharmacist & Nurses in charge of Casualty, Operation Theatre & Hospital Ward shall ensure the collection, storage & handing over of the Solid Bio-Medical Waste generated in the Medical Department in color-coded bags taking the required measures to prevent the spillage of the same.

4. PROCEDURE:

- 4.1 Collection, Storage and handing over of Solid Bio-Medical Wastes generated from the Medical Department.
- 4.2 Assistant Matron shall identify the locations of Solid Bio-Medical Wastes generation within the Medical Department.
- 4.3 Chief Medical Officer shall award the annual contract for the collection of Solid Bio-Medical Wastes to the KSPCB approved agency. The work of supplying the materials for the Waste collection (as per the regulatory requirements) shall also be done by the stores (Central Stores & Medical Stores).
- 4.4 The user sections of the Medical Department shall collect the Solid Bio-Medical Wastes in the colour coded bags / containers on daily basis as per the regulations. This shall be monitored by the Assistant Matron and the Casualty Nurse in charge.
- 4.5 The user section-in-charge shall shift the colour coded bags filled with the wastes from the user sections to the identified main collection point on daily basis.
- 4.6 The Casualty Nurse in charge shall weigh the bags and hand them over to the authorized representative of the collecting agency who comes for collection of the same on every morning between 5:00am to 8:00am except on Wednesdays where collection is done before 1:00pm.

5. RECORDS:

- 5.1 The record namely Bio-Medical Waste Register is maintained



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OCP/2 - HANDLING, STORAGE AND DISPOSAL OF LIQUID BIO-MEDICAL WASTE

1. PURPOSE

- 1.1 To define the procedure to ensure the environmental aspect / impact arising due to controlled Handling, Storage and Disposal of Liquid Bio-Medical Waste.

2. SCOPE

- 2.1 The procedure shall be used while Handling, Storage and Disposal of Liquid Bio-Medical Waste generated from the Medical Department.

3. RESPONSIBILITY

- 3.1 Sections in charge namely, Senior Laboratory Technician, Nurses in charge of Casualty, Operation Theatre, Dental clinic and Wards shall ensure the controlled handling, storage and disposal of Liquid Bio-Medical Waste generated from the Medical Department taking all the necessary measures prevent the possibilities of environmental pollution.

4. PROCEDURE

- 4.1 Handling, storage and disposal of Liquid Bio-Medical Waste generated from the Medical Department.
- 4.1.1 The instruments stained with human body fluids are initially washed with water and then with detergent. The liquid Bio-Medical Waste produced as a result of this process is drained into the wash basin exclusively meant for this process which is fixed separately in the locations namely Clinical Laboratory, Casualty, Dental clinic, Operation Theatre and Wards.
- 4.1.2 The Liquid Bio-Medical Waste drained from these locations is collected commonly through a separate pipeline into a common tank located within the hospital premise.
- 4.1.3 The Liquid Bio-Medical Waste collected in the storage tank is pumped into the Sodium Hypochlorite Treatment Unit which is connected to the Sodium Hypochlorite dispensing machine which releases proportional quantity of 2% Sodium Hypochlorite solution to the flow of Liquid Bio-Medical Waste into the Treatment Unit where it is left to be treated for 24 hours and drained later into the pipeline which drains away the treated Liquid Bio-Medical Waste finally to the Sewage Treatment Plant (STP). The entire process is monitored on daily basis taking adequate precautions to ensure that the Liquid Bio-Medical Waste doesn't cause any environmental pollution.
- 4.2 The process is recorded.



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1. Dress code of doctors.

All doctors will be dressed in formals and wear a white apron along with the name and designation tag.

2. Procedure for selecting visiting consultants

- 2.1 The rates/visit for the doctors are fixed based on their doctor's qualification.
- 2.2 Once the approval is obtained for the proposal for engaging the consultants, Advertisement will be published NMPA website mentioning the terms and condition and last date for submission of the applications. Also consultants from empanelled hospitals can be selected based on mutual acceptance.
- 2.3 Applications received on the until the last date of submission will be verified and scrutinized as per the terms and conditions.
- 2.4 Interview for the doctors will be conducted by the Selection Committee of the NMPA and final list of consultants are shortlisted.
- 2.5 Work Order will be issued to the selected candidates and agreement will be signed between the doctors and NMPA.

3 SOP for Ambulance for Staff & Retired employees.

- 3.1 24 X 7 round the clock Ambulance service is available at the Port hospital and First aid center at Wharf.
- 3.2 In case of emergencies, on call facility is available for the patients to avail the services of Ambulance to shift them to the Hospital from their Home.
- 3.3 The facility is also available for shifting patients from NMPA hospital to referral hospitals.
- 3.4 Post dialysis shifting of patients to their home is by Ambulance.

4 Code of conduct for doctors and Paramedical staff.

- 4.1 The doctors and Paramedical staffs shall report to the Chief Medical Officer, New Mangalore Port Authority and shall work in accordance with the instructions and directions of Chief Medical Officer. The working hours will be decided by the Chief Medical Officer.
- 4.2 They leave the place of duty only after the reliever Doctor reports and takes over the charge from her.



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5 SOP for Casualty.

5.1 Casualty/Emergency in the Port hospital offers comprehensive emergency care 24 hours a day & 7 days a week. An attending Medical officer along with paramedical staffs in casualty 24 /7.

5.2 Ambulance services are available 24*7 for transfer of patients.

5.3 Ramps are provided for patients. Stretchers and wheelchairs for shifting patients are available. A waiting area, with sufficient amount of chairs lavatories; drinking water and telephones (on need basis) are provided for patients, families and individuals accompanying them. Unauthorized individuals are prohibited from entering the Casualty. The casualty maintains patient privacy without compromising patient care.

5.4 Patient is received by the staff or patient's un-holding is brought by ambulance and shifting to casualty is done accompanied by the ward boy, casualty in-charge, doctor. Service / support of wheel chair, stretcher etc shall be provided, as needed.

5.5 The attending doctor / paramedical staff quickly attend to the patient without loss of time to assess the patient and provide initial treatment. Initial treatment includes Evidence Based Medicine depending upon on the ABCDE

- i. A: Airway
- ii. B: Breath
- iii. C: Circulation
- iv. D: Drug/Disability/Deformity/Deficiency
- v. E: Environment of the patient's visible symptoms.

5.6 The Casualty/emergency will provide, upon the request of the patient and within the capabilities of the hospital, an appropriate medical screening examination like ECG, Lab, X-ray/USG, stabilizing treatment and/or an appropriate refer, in case of an emergency medical condition.

5.7 The patient in the Casualty is provided treatment by the doctor on duty as per the prevailing condition. When needed, dressing stitching is undertaken for treating the wound.

5.8 After initial assessment/treatment and based on condition of the patient the medical officer on duty will refer the patient for specialist consultation in NMPA or to empanelled Hospital for further management.

5.9 Patient Not willing for initial assessment/ treatment at Port Hospital Casualty requesting/demanding immediate referral to empanelled referral hospitals to be referred after entry of patient details, diagnosis and consent in emergency register.

5.10 The Hospital requires consent for all invasive or therapeutic procedures. The general consent form is filled and signed either by the patient if possible or the patient representative if the patient is not in a state to give his consent. In case of a patient incapable of giving consent, it is taken from the patient representative or guardian.

5.11 Life-sustaining measures are not withheld for lack of formal consent if there is no time to obtain the consent for urgent procedures. The treatment is started immediately in such Consent is required for elective blood transfusions that are not life threatening.



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5.12 The patient is discharged once their conditions stabilises after initial assessment work up like Lab, ECG, X-ray and treatment provided at casualty.

5.13 At times patient is not keen for further treatment. The patient/attendants shall be fully explained the consequences and their consent recorded before discharging. Entry shall be made as LAMA

6 HANDLING OF MEDICO LEGAL CASES:

6.1 For MLC cases (such as assault, RTA, violence, accident poisoning, criminal abortion, industrial violence etc), police is informed after starting the treatment & entry is made in Police information book. Medico-legal record is maintained for cases under that category.

6.2 Death of Patient

In case a critically ill patient dies during the course of life supportive treatment, the relatives are explained the about the death, Police is informed and appropriate action is initiated towards handing over the body to police for conducting the autopsy after necessary documentation.

6.3 Handling Brought Dead Patient: The Casualty Medical Officer examines the patient thoroughly and declares the patient dead. The details are entered as Medico Legal case. The relatives are explained and brought dead information is given to relatives. The Local police station is to be informed immediately for further procedure. The evidence so available such as blood stained clothes foreign bodies, gastric lavage etc shall be preserved in a cover and handed over to police through a document. In addition, a medical report be prepared giving complete details of the patient, nature & type of injury, death date, time. The document and report shall be prepared in duplicate and one copy retained in records of the Hospital. All Such documents shall be duly Signed by the attending doctor.

7 SOP of Medical Records of Patients, Working employees & Pensioners

7.1 On receipt of OM from Admin regarding new employee medical record creation, a medical record book will be opened based on their category.

7.2 Record will be created in the ERP system by the EDP which will be automatically displayed in the Hospital Management system (HMS).

7.3 In case retired employees, medical record will be created by the reception staffs in HMS.

7.4 During the consultation process, MR number will automatically be created in the HMS system which then manually entered onto the medical record of the employee.

7.5 Time to time updation of the photos of the beneficiaries in the HMS system and medical record.

7.6 Referrals are also updated in the HMS system.



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Apart from the above, the following record are maintained in the Casualty

- a. List of doctors on duty
- b. Emergency Register
- c. Case files of patients attended in the casualty
- d. MLC register for medico legal cases
- e. Drug Entry Register
- f. Brought Dead form
- g. Death form
- h. Death Register

8 SOP for issuance of medicines from Port Hospital.

- 8.1 Indents by the user section shall be approved by the CMO same will be forwarded to MMS.
- 8.2 Online approval indents will be issued as per requirement through HMS systems by MMS.
- 8.3 Issued indent will be accepted by the user section.
- 8.4 After acceptance the same stocks will be reflected in pharmacy & user Section.
- 8.5 Based on the prescription the medicines will be issued in HMS & dispensed to the patients.

9 Code of conduct for patients (Karnataka prohibition of violence against medicare service personel and damage to property in medicare service institutions act 2009):-

- 9.1 Any person who causes any harm to the doctors or staffs of the hospitals , threatens , obstructs their work or damages any property of the hospital can be punished for imprisonment upto 3 years and fined upto Rs 50000/-
- 9.2 This offence is non bailable. 2 times penalty shall be paid for any loss caused to any property and equipment of the hospital.



NEW MANGALORE PORT AUTHORITY

Title: LIST OF MACHINES & UTILITIES

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SECTION V – LIST OF MACHINES & UTILITIES

LIST OF MACHINES & UTILITIES (OUTSOURCED)						
SL NO.	SUPPLIER NAME	DESCRIPTION	MACHINE ID	MAKE	QTTY	REMARKS / MAINTAINED
1	SRI DURGA TOUR & TRAVELS	AMBULANCE	KA19-AD1725	TRAX CRUISER	1	SRI DURGA TOUR & TRAVELS
2	SRI DURGA TOUR & TRAVELS	AMBULANCE	KA19-AD1726	TRAX CRUISER	1	SRI DURGA TOUR & TRAVELS



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LIST OF MACHINES & UTILITIES (NMPA)

S.NO	SUPPLIER NAME	DESCRIPTION	MACHINE ID	MAKE	QTY	DATE OF INSTALLATION	AMC APPLICABLE (YES / NO)	REMARKS / MAINTAINED
1	TRANSASIA (ERBA)	Fully Automated Biochemistry Analyser	B100084	TRANSASIA (ERBA)	1	20-12-2013	CMC	NMPA
2	TRANSASIA (ERBA)	5 PARTS CELL COUNTER	70424	TRANSASIA (ERBA)	1	20-12-2013	CMC	NMPA
3	HIGH TECH BIOMEDICAL	NYCOCARD	86478	AXIS SHIELD PoC	1	20-12-2013	NO	NMPA
4	HIGH TECH BIOMEDICAL	ESR READER	B12150A00	ASPEN DIAGNOSTIC	1	20-12-2013	NO	NMPA
5	HIGH TECH BIOMEDICAL	QBC MICROSCOPE WITH CENTRIFUGE	131063866	LABO MED	1	20-12-2013	NO	NMPA
6	WIPRO GE Health Care	GE LOGIQ P5 Premium High End Echo/USG Color Doppler Machine	8.30378E+13	WIPRO GE Health Care	1	21-03-2014	CMC	NMPA
7	SHADDAI	300 MA X-Ray Machine (GE)	DRA 1-125/20/40 C 97/56	SHADDAI	1	29-09-1998	YES	NMPA
8	RATHNA	70 KV (Mobile Dental X-Ray Unit)	QOTT.12647	THOSHIBA(TU BE) D082B 3H59202	1	16-02-2004	YES	NMPA
9	SHADDAI	ECG Machine	CARDIOVIT-AT 190--13911,AT 10050696	SCHILLER AG	2	19-05-1999	YES	NMPA



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10	VOLGA	CENTRAL OXIGEN UNIT SYSTEM		SPAN	1	10-08-2009	YES	NMPA
11	MEHRA EYE TECH	TOPCON AUTO REFRACTO METER WITH LCD MONITER WITH SLIT LAMP	1113503	PLANTECH	1	20-12-2007	YES	NMPA
12	SURAJ	KERATOMETER B & L MODEL	121080016	SURAJ HITECH	1	20-12-2007	NO	NMPA
13	SURAJ HITECH	A SCAN MODEL 300A	0300-0308	SONOMED	1		NO	NMPA
14	RATHNA	DENTAL CHAIR WITH ACCESSORIES	990204	CONFIDENT DENTAL EQUIPMENT	1	16-02-2004	YES	NMPA
15	PIKA MEDICALS LTD	KARL STORZ LAPROSCOPE	STORZ SN AF 7052	PIKA MEDICALS LTD	1	16-03-2004	NO	NMPA
16	L & T BIPOLAR SURGICAL	OCTAVE DIATHERMY	E15CB1610, E15CB1611	SKAN RAY	2	04-11-2015	YES	NMPA
17	INDIAN OXYGEN LTD	BOYLE'S APPARATUS	0518/87	BOYLE MK-IIIS	1	18-12-1990	YES	NMPA
18	PRECISION ELECTRONICS INSTRUMENTS & COMPONENTS	HORIZONTAL AUTOCLAVE	KW18 SR 804-PE16	PRECISION ELECTRONICS INSTRUMENTS & COMPONENTS	1	23-03-2016	YES	NMPA
19	ALPHA MEDITECH APPLIANCES	VERTICAL AUTOCLAVE	530KW4-MEV24	ALPHA MEDITECH APPLIANCES	1	17-10-2007	YES	NMPA
20	ALPHA MEDITECH	CARDIAC MONITOR WITH PULSE OXYMETER	C10705 W	INNOVA	1	22-08-2005	YES	NMPA
21	TECHNOMED ELECTRONIC	ULTROSOUND THERAPHY	TUB-1842-709	TECHNOMED	1	13-08-2013	YES	NMPA



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22	TECHNOMED ELECTRONIC	VECTROSTIM	IFT-011	TECHNOMED	1	13-08-2013	YES	NMPA
23	SHADDAI	PULSE OXYMETER	BO667260	SCHILLER	1	13-03-2009	YES	NMPA
24	PLANTECH OPHTHALMIC UNIT	OPHTHALMIC MICROSCOPE	18093	PLANTECH OPHTHALMIC UNIT	1	11-12-2007	YES	NMPA



NEW MANGALORE PORT AUTHORITY

Title: LIST OF MEASURING & MONITORING INSTRUMENT / EQUIPMENT

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SECTION W – LIST OF MEASURING & MONITORING INSTRUMENT / EQUIPMENT

S.No	Description	Calibration Frequency
1	FULLY AUTOMATED BIOCHEMISTRY ANALYZER EM 100	Annually
2	FULLY AUTOMATED 5 PARTS HEMATOLOGY ANALYZER (XS1000i)	Annually
3	HORIZONTAL AUTOCLAVE	Annually
4	CENTRALIZED OXYGEN SYSTEM	Annually
5	NON AUTOMETIC WEIGHING INSTRUMENT-ELECTRONICS	Annually



NEW MANGALORE PORT AUTHORITY

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SECTION X - LIST OF FORMATS

SL. NO	NAME OF THE FORMAT	FORMAT NO
01	Discharge Card	MED/WARD/DISCHARGE.CARD/F
02	Graphic TPR Chart	MED/WARD/TPR/F
03	Intake- Out put Chart	MED/WARD/I&O/F
04	Laboratory Investigation Requisition form	MED/LAB/INV.Reqn
05	Medical leave form	MED/CSLT/ML/F
06	Nurses Record Sheet	MED/WARD/NURSES.RECORD/F
07	Physical Fitness Form	MED/CSLT/PF/F
08	Physiotherapy Order Card	MED/CSLT/PTT/F
09	Prescription Slip	MED/CSLT/PS/F
10	PTH Letter Pad	MED/LP/F
11	Reference Letter for Credit Facilities	MED/EST/RL.CF/F
12	Admission & Discharge Record	MED/WARD/ADMISSION.SHEET/F
13	ECG, ECHO, USG, X-RAY Requisition form	MED/CSLT/INV/F
14	Check list	MED/WARD/CHECK.LIST/F
15	Medico Legal Case(MLC) Intimation Record	MED/CSLT/MLC IR/F
16	E-Payment Form For Suppliers	NMPA/E-PAYMENT/F
17	Expiry Drugs Return Form	MED/MS/EXP.DRG.RTN/F
18	Imprest Cash Account Form	NMPA/IMPREST.C.A/F
19	Supply Order Form	MED/MS/SO/F
20	Echocardiogram Report Form	MED/RAD/ECHO.REPORT/F
21	Consent Form	MED/WARD/AUTH.MED.SURG/F
22	Obstetric USG Report Form	MED/RAD/O.USG.R/F
23	USG Report Form	MED/RAD/USG-R/F
24	AMC Intimation Requisition Form	MED/CSLT/AMC.IR/F
25	Contingent Bill Form	NMPA/Contingent (F)
26	LTC/HTC Bill Form	NMPA/LTC(F)
27	Medical Bill Reimbursement Form	NMPA/MR.BILL/F
28	Pay bill Form	NMPA/PAY.BILL/F
29	Private Paying Patient Form	NMPA/PP/F
30	Anaesthesia Record	MED/WARD/AR/F



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SECTION Y - LIST OF RECORDS

SL. NO.	DESCRIPTION OF THE RECORD	RECORD NO.	LOCATION	RETENTION PERIOD (Years)
01	Daily Drug/Injection Entering Register	MED/###/DRG-ENTRY/R	User Section	2
02	AMC Register	MED/###/AMC/R	User Section	2
03	Bio-Medical Waste Register	MED/CSLT/BIO-WASTE/R	Casualty	3
04	Consultants Register	MED/CONSULTANT/OPD/###/R	Casualty	2
05	Death/Birth Certificate Register	MED/CSLT/DTH.CRFTE/R	Casualty	Permanent
06	Defect Register	MED/CSLT/DEFECT/R	Casualty	3
07	Disaster Management Register	MED/CSLT/DISA/MNG/MT/R	Casualty	5
08	Emergency Patients Register	MED/CSLT/EMRGNCY-PTS/R	Casualty	3
09	Housekeeping Register	MED/CSLT/H.K/R	Casualty	2
10	Laundry Register	MED/CSLT/LAUNDRY/R	Casualty	3
11	MLC Register	MED/CSLT/MLC/R	Casualty	5
12	Monthly Census Register	MED/CONSULTANT/OPD/MONT HLY.CENSUS/R	Casualty	2
13	On Duty Accident Register	MED/CSLT/DUTY.ACCIDENT/R	Casualty	3
14	Reminder Book	MED/CSLT/RMNR/R	Casualty	2
15	Sanitary Material Register	MED/PTH/STOCK-SANMTRLS/R	Casualty	3
16	Special Visit Register	MED/WARD/SPL.VISIT/R	Casualty	5
17	Information Register	MED/CSLT/INFORM/R	Casualty	5
18	Mosquito Control Register	MED/CSLT/MCR/R	Casualty	5
19	Other Procedure Register	MED/CSLT/OPR/R	Casualty	5
20	Autoclave Register	MED/OT/AUTOCLAVE/R	OT	2
21	Medical Eligibility Card	NMPA/REG/MEC/R	Registration Counter	Till Death
22	Assistant Diary	MED/EST/ASST.DIARY/R	Establishment	3
23	Customer Complaint Register	MED/EST/CCR/R	Establishment	5
24	File Movement Register	MED/EST/FILE.MVMNT/R	Establishment	5
25	Increment Register	MED/EST/INCREMENT/R	Establishment	5
26	In-Patient Bill Register	MED/EST/IP.BILL/R	Establishment	5
27	Medical Bill Reimbursement Register	MED/EST/MR.BILL/R	Establishment	5
28	Petty Items Register	MED/EST/T&P.PETTY/R	Establishment	5



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29	Post-Dispatch Register	MED/EST/POST.DISPATCH/R	Establishment	5
30	Public Grievance Register	MED/EST/PBLC.GRVNC/R	Establishment	5
31	Quotation Calling Register	MED/EST/QTN.CALL/R	Establishment	5
32	Retired Employees MEC Card Issue Register	MED/EST/MEC-RTD /R	Establishment	5
33	Stationery Register	MED/EST/STATIONERY/R	Establishment	5
34	Supplementary Bill Register	MED/EST/SPLMNTRY.BILL/R	Establishment	5
35	Tappal Register	MED/EST/TAPPAL/R	Establishment	5
36	Temporary Imprest Adjustment Register	MED/EST/TMP.IMPR.ADJ/R	Establishment	5
37	Temporary Imprest Register	MED/EST/TMP.IMP/R	Establishment	5
38	Tools & Plants	MED/EST/T&P/R	Establishment	5
39	Training Record Register	MED/EST/TRAINING/R	Establishment	5
40	Uniform Issue Register	MED/EST/UNIFORM/R	Establishment	5
41	First Aid Treatment Register	MED/FAC/FIRST.AID/R	First Aid Center	2
42	First Aid Bio-Waste Register	MED/FAC(W) BIO-WASTE/R	First Aid Center	2
43	First Aid Stock Register	MED/FIRST AID/STOCK/R	First Aid Center	2
44	Laboratory Report Dispatch Register.	MED/LAB/LRDR/R	Laboratory	2
45	Calibration Register	MED/LAB/CAL R	Laboratory	5
46	Special Investigation Referral Register	MED/LAB/SIR/R	Laboratory	5
47	Oxygen Filling Register	MED/MS/OXYGEN.FILL/R	Medical Store	2
48	Permanent Imprest Register	MED/MS/PRMNT.IMPREST/R	Medical Store	2
49	EMD Bid Security Register	MED/MS/EMD/R	Medical Store	5
50	Tender quotation/Opening Register	MED/PTH/TENDER/R	Medical Store	5
51	Paying Patients Register of Retired Persons (Of Other Ports)	MED//MED.STORE/PAYING PATIENT/RETD/OTHER PORTS/R	Medical Stores	3
52	O.T. Schedule Register&	MED/SPLWARD-OT/SCHEDULE/R	O.T.	5
53	Generator Room Information Register	MED/OT/GENERATOR ROOM/R	O.T.	2
54	O.T. Sanitation Register	MED/OT/SANITATION/R	O.T.	2
55	E-Waste Management Register	MED/CSLT/E-WASTE MGMT/R	Establishment.	5



NEW MANGALORE PORT AUTHORITY

Departmental
Procedure
Manual
Level III

Title: LIST OF RECORDS

DOC. CODE: DPM-07
REF: SP-04 OF IPM

RELEASE NO:3.0
DATE: 04-03-2022

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56	Culture Swab Register	MED/OT/CULTURE/R	O.T.	2
57	Operation Intimation Register	MED/OT/INTIMATION/R	O.T.	2
58	Operation Theatre Procedure Register	MED/OT/PROCEDURE/R	O.T.	2
59	Echocardiography Register	MED/RADIO/ECHO/R	Radiology	5
60	Obstetric Antenatal Register	MED/RAD/OB.ANTENATAL/R	Radiology	2
61	Daily X-Ray Entering Register	MED/RADIO/X-RAYREPORT/R	Radiology	5
62	X-Ray Report Register	MED/RADIO/X-RAYREPORT/R	Radiology	3
63	Referral Register	MED/REGN/REFER/R	Registration Counter	2
64	Out Patient Register	MED/RGN/OP/R	Registration Counter	2
65	Health Program Register	MED/S&PH/H.P/R	PTH	2
66	Bill Register	MED/###/BILL/R	User Section	5
67	Daily Watch Register	MED/###/DAILY.WATCH/R	User Section	2
68	Movement Register	MED/EST/MOVEMENT/R	User Section	5
69	Paying Patient Register	MED/###/PP/R	User Section	3
70	Life Saving Drug Register	MED/###/LIFESAVING/DRUG/R	User Section	3
71	Private Patient Register	MED/###/PP/R	User Section	3
72	Drug Expiry Monitoring Register	MED/###/DRUG EXPIRY/R	User Section	5
73	Epidemic Disease Register	MED/###/EPIDMC.DISEASE/R	User Section	5
74	Linen Stock Register	MED/CSLTY/LINEN.STOCK/R	Ward	5
75	Admission & Discharge Register	MED/WARD/A&D.%%/R	Wards	5
76	Day & night Report Register	MED/GEN WARD/DAY-NIGHT RPT/R	Wards	2

Shukla
28/3/24

[Signature]

28.3.2024