

## **B.Sc. HOSPITAL ADMINISTRATION**

### **CHOICE BASED CREDIT SYSTEM -**

## LEARNINIG OUTCOMES BASED CURRICULUM FRAMEWORK (CBCS - LOCF)

(Applicable to the candidates admitted form the academic year 2022-2023 onwards)

## (NAAN MUDHALVAN SCHEME was implemented from 2<sup>nd</sup> to 6<sup>th</sup> Semester)

Sem.	Part	Course	Title Ins. Hrs	Ins.	Credit		Marks		Total
				Hrs	crean	Hours	Int.	Ext. 10	rotur
	Ι	Language Course – I Tamil \$ / Other Languages + #		6	3	3	25	75	100
	II	English Course - I		6	3	3	25	75	100
		Core Course – I (CC)	Introduction to Hospital Services	5	5	3	25	75	100
I	III	Core Practical – I (CP)	Hospital visit	4	4	-	40	60	100
	111	First Allied Course – I (AC)	Basic Biological Science I	4	4	3	25	75	100
		First Allied Practical (AP)	Radiology Department. (Lab, Scan, X- ray, CT, MRI)	3	-	-	-	-	-
	IV	Value Education	Value Education	2	2	3	25	75	100
		TOTAL		30	21	-	-	-	600
	Ι	Language Course - II Tamil \$ / Other Languages + #		6	3	3	25	75	100
	II	English Course - II		4	3	3	25	75	100
		Core Course – II (CC)	Principles of Hospital Administration I	5	5	3	25	75	100
	III	Core Practical - II(CP)	Patient Satisfaction (Inpatient, Outpatient, OT, Overall)	4	4	-	40	60	100
II		First Allied Practical (AP)	Radiology Department (Lab, Scan, X- ray, CT, MRI)	3	2	-	40	60	100
		First Allied Course – II (AC)	Basic Biological Science II	4	4	3	25	75	100
		Add on Course – I ##	Professional English – I	6*	4	3	25	75	100
	IV	Environmental Studies	Environmental Studies	2	2	3	25	75	100
	VI	Naan Mudhalvan Scheme (NMS) @@	Language Proficiency for Employability - Effective English	2	2	3	25	75	100
		TOTAL		30	29	-	-	-	900

III         English Course - III         Principles of Hospital         6         3         3         25         75         100           Core Course - III (CC)         Principles of Hospital         5         5         3         25         75         100           III         Core Practical - III (CP)         Statistics (Disease, Mortality, Morbitity)         4         4         -         40         60         100           Second Allied Course - I (AC)         Epidemiology and Community Health         4         4         3         25         75         100           Second Allied Practical (AP)         Waste Disposal Management         3         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         <		Ι	Language Course – III Tamil \$ / Other Languages + #		6	3	3	25	75	100
Image: Core Course - III (CC)         Principles of Hospital Administration II         5         5         3         25         75         100           III         Core Practical - III (CP)         Statistics (Disease, Mortality, Morbitity)         4         4         -         40         60         100           Second Allied Practical (AP)         Waste Disposal Management         3         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -		II			6	3	3	25	75	100
III         Core Practical - III (CP)         Statistics (Discase, Mortality, Morbitity)         4         4         -         40         60         100           Second Allied Course - I (AC)         Epidemiology and Community Health         4         4         3         25         75         100           Second Allied Practical (AP)         Waste Disposal Management         3         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -										
Second Allied Course - 1 (AC)         Epidemiology and Community Health         4         4         3         25         75         100           Second Allied Practical (AP)         Waste Disposal Management         3         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -         -		Ш	Core Practical - III (CP)	Statistics (Disease, Mortality,	4	4	-	40	60	100
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$			Second Allied Course – I (AC)	Epidemiology and Community	4	4	3	25	75	100
IIINon-Major Elective I @ - Those who choose a non-major elective course offered by other departments. Those who do not choose Tamil in Part I must choose either a) Basic Tamil if Tamil language was studied upto 10 <sup>th</sup> & 12 <sup>th</sup> std.Personnel Hygiene Personnel Hygiene2232575100IVin Part I must choose either a) Basic Tamil if Tamil language was studied upto 10 <sup>th</sup> & 12 <sup>th</sup> std.Personnel Hygiene2232575100VINaan Mudhalvan Scheme (NMS) @@Digital Skills for Employability- Microsoft Digital Skills-232575100ILanguage was studied upto 10 <sup>th</sup> & 12 <sup>th</sup> std.Microsoft Digital Skills-232575100ILanguage Course -IV Tamil S / Other Language Course -IV Tamil S / Other Language S + #6332575100IIEnglish Course - IV Second Allied Practical (AP)Medical Records Department Waste Disposal Management44-4060100Second Allied Course - III (AC)Financial Management32-4060100Second Allied Course - III (AC)Financial Management4432575100IVNon-Major Elective II @ - Those who choose Tamil in Part I can choose a non-major elective course offered by other departments.Role of Hospital Services2232575100IVNon-Major Elective III @ - Those was not studied in school			Second Allied Practical (AP)	Waste Disposal Management	3	-	-	-	-	-
IIIwho choose Tamil in Part I can choose a non-major elective course offered by other departments. Those who do not choose Tamil in Part I must choose e tither a)Basic Tamil if Tamil language was studied in school level or b)Special Tamil if Tamil language was studied upto 10th & 12th studied in school level or b)Special Tamil if Tamil language was studied upto 10th & 12th studied in school level or b)Special Tamil if Tamil language was studied upto 10th & 12th studied in school level or b)Special Tamil if Tamil language was studied upto 10th & 12th studied in school level or b)Special Tamil if Tamil language was studied upto 10th were studied upto 10th were			Add on Course – II ##	Professional English - II	6*	4	3	25	75	100
$\begin{tabular}{ c c c c c c c c c c c c c c c c c c c$	ш	IV	<ul> <li>who choose Tamil in Part I can choose a non-major elective course offered by other departments.</li> <li>Those who do not choose Tamil in Part I must choose either</li> <li>a) Basic Tamil if Tamil language was not studied in school level or</li> <li>b) Special Tamil if Tamil language was studied upto 10<sup>th</sup></li> </ul>	Personnel Hygiene	2	2	3	25	75	100
$\begin{tabular}{ c c c c c c c c c c c c c c c c c c c$		VI			-	2	3	25	75	100
$\frac{1}{ V } = \frac{1}{ Tamil    S  / Other Languages + \#} = \frac{1}{ V } = \frac{1}{ V }$				<u> </u>	30	27	-	-	-	800
UUPrinciples of Economics and its Application to Hospital services5532575100Core Course - IV (CC)Medical Records Department44-4060100Second Allied Practical (AP)Waste Disposal Management32-4060100Second Allied Practical (AP)Waste Disposal Management32-4060100Second Allied Course – III (AC)Financial Management4432575100Non-Major Elective II @ - Those who choose Tamil in Part I can choose a non-major elective course offered by other departments.Nole of Hospital Services2232575100IVIVThose who do not choose Tamil in Part I must choose either Basic Tamil if Tamil language was not studied in school level or Special Tamil if Tamil language was studied upto 10 <sup>th</sup> & 12 <sup>th</sup> std.Role of Hospital Services2232575100VINaan Mudhalvan Scheme (NM) @@Employability Skills - Employability Skills-232575100		Ι			6	3	3	25	75	100
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IIISecond Allied Practical (AP)Waste Disposal Management32-4060100Second Allied Course – III (AC)Financial Management4432575100IVNon-Major Elective II @ - Those who choose Tamil in Part I can choose a non-major elective course offered by other departments4432575100IVNose who do not choose Tamil in Part I must choose either Basic Tamil if Tamil language was not studied in school level or Special Tamil if Tamil language was studied upto 10 <sup>th</sup> & 12 <sup>th</sup> std.Role of Hospital Services2232575100VINaan Mudhalvan Scheme (NM) @@Employability Skills - Employability Skills-232575100			Core Course - IV (CC)		5	5	3	25	75	100
IVSecond Allied Practical (AP)Waste Disposal Management32-4060100Second Allied Course – III (AC)Financial Management4432575100IVNon-Major Elective II @ - Those who choose Tamil in Part I can choose a non-major elective course offered by other departments. Those who do not choose Tamil in Part I must choose either Basic Tamil if Tamil language was not studied in school level or Special Tamil if Tamil language was studied upto 10 <sup>th</sup> & 12 <sup>th</sup> std.Role of Hospital Services2232575100VINaan Mudhalvan Scheme (NM) @@Employability Skills - Employability Skills-232575100		ш	Core Practical - IV (CP)	Medical Records Department	4	4	-	40	60	100
IVNon-Major Elective II @ - Those who choose Tamil in Part I can choose a non-major elective course offered by other departments.IVNon-Major Elective II @ - Those who choose Tamil in Part I can choose a non-major elective course offered by other departments.Role of Hospital Services2232575100IVIVThose who do not choose Tamil in Part I must choose either Basic Tamil if Tamil language was not studied in school level or Special Tamil if Tamil language was studied upto 10 <sup>th</sup> & 12 <sup>th</sup> std.Role of Hospital Services2232575100VINaan Mudhalvan Scheme (NM) @@Employability Skills - Employability Skills-232575100		111	Second Allied Practical (AP)	Waste Disposal Management	3	2	-	40	60	100
IVwho choose Tamil in Part I can choose a non-major elective course offered by other departments.Role of Hospital Services2232575100IVThose who do not choose Tamil in Part I must choose either Basic Tamil if Tamil language was not studied in school level or Special Tamil if Tamil language was studied upto 10 <sup>th</sup> & 12 <sup>th</sup> std.Role of Hospital Services2232575100VINaan Mudhalvan Scheme (NM) @@Employability Skills - Employability Skills-232575100			Second Allied Course – III (AC)	Financial Management	4	4	3	25	75	100
VI         (NM) @@         Employability Skills         -         2         3         25         75         100	IV	IV	who choose Tamil in Part I can choose a non-major elective course offered by other departments. Those who do not choose Tamil in Part I must choose either Basic Tamil if Tamil language was not studied in school level <b>or</b> Special Tamil if Tamil language was studied upto 10 <sup>th</sup> & 12 <sup>th</sup> std.	Role of Hospital Services	2	2	3	25	75	100
		VI		· · ·	-	2	3	25	75	100
			TOTA		30	25	_	-	_	800

		Core Course - V (CC)	Human Resource Management	5	5	3	25	75	100	
		Core Course – VI (CC)	Legal Aspects in Hospital Management	5	5	3	25	75	100	
	III	Core Course – VII (CC)	Hospital Organisation and Research Methodology	5	5	3	25	75	100	
		Core Practical -V (CP)	Legal Aspects in Hospital	4	4	-	40	60	100	
V		Major Based Elective – I (Any one)	<ol> <li>Quality Assurance</li> <li>Biostatistics</li> </ol>	5	4	3	25	75	100	
	IV	Skill Based Elective I	Infection Control	4	2	3	25	75	100	
	IV	Soft Skills Development	Soft Skills Development	2	2	3	25	75	100	
	VI	Naan Mudhalvan Scheme (NMS) @@	Marketing & Design Tools – Digital Marketing	-	2	3	25	75	100	
		ΤΟΤΑ	30	29	-	-	-	800		
		Core Course - VIII (CC)	Material Management	6	5	3	25	75	100	
		Core Course - IX (CC)	Communication in Public Relations	6	5	3	25	75	100	
	III	Core Practical – VI (CP)	Medical Equipment's	4	4	-	40	60	100	
		Major Based Elective – II (Any one)	<ol> <li>Ward Administration</li> <li>Operation Research for Hospital Administration</li> </ol>	5	4	3	25	75	100	
VI		Project	Project	4	3	-	20	80	100	
	IV	Skill Based Elective – II	Hospital Dietary Services Management	4	2	3	25	75	100	
	N/	V	Gender Studies		1	1	3	25	75	100
		Extension Activities		-	1	-	-	-	-	
	VI	Naan Mudhalvan Scheme (NMS) @@	Career Readiness Programme	-	2	3	25	75	100	
		TOTAL		30	27	-	-	-	800	
		GRAND TO	ΓΑL	180	158	-	-	-	4700	

\$ For those who studied Tamil upto  $10^{\text{th}} + 2$  (Regular Stream).

- + Syllabus for other Languages should be on par with Tamil at degree level.
- # Those who studied Tamil upto 10<sup>th</sup> +2 but opt for other languages in degree level under Part- I should study special Tamil in Part – IV.
- ## The Professional English Four Streams Course is offered in the 2<sup>nd</sup> and 3<sup>rd</sup> Semester (only for 2022-2023 Batch) in all UG Courses. It will be taught apart from the Existing hours of teaching / additional hours of teaching (1 hour /day) as a 4 credit paper as an add on course on par with Major Paper and completion of the paper is must to continue his / her studies further. (As per G.O. No. 76, Higher Education (K2) Department dated: 18.07.2020).
- \* The Extra 6 hrs / cycle as per the G.O. 76/2020 will be utilized for the Add on Professional English Course.
- @ NCC Course is one of the Choices in Non-Major Elective Course. Only the NCC cadets are eligible to choose this course. However, NCC Course is not a Compulsory Course for the NCC Cadets.

\*\* Extension Activities shall be outside instruction hours.

@@ Naan Mudhalvan Scheme.

S1. No.	Part	Types of the Courses	No. of Courses	No. of Credits	Marks
1.	Ι	Language Courses	4	12	400
2.	II	English Courses	4	12	400
3.		Core Courses	9	45	900
4.		Core Practical	6	24	600
5.		Allied Courses I & II	4	16	400
6.	III	Allied Practical	2	4	200
7.		Major Based Elective Courses	2	8	200
8.		Add on Courses	2	8	200
9.		Project	1	3	100
10.		Non-Major Elective Courses (Practical)	2	4	200
11.		Skill Based Elective Courses	2	4	200
12.	IV	Soft Skills Development	1	2	100
13.		Value Education	1	2	100
14.		Environmental Studies	1	2	100
15.	V	Gender Studies	1	1	100
16.	v	Extension Activities	1	1	
17.	VI	Naan Mudhalvan Scheme	5	10	500
		Total	48	158	<b>4700</b>

## SUMMARY OF CURRICULUM STRUCTURE OF UG PROGRAMMES

### **PROGRAMME OBJECTIVES:**

- Hospital Personnel's like HR Manager, Asst. Administrative Officer, PRO, PSO,
- Front Office Executives, Billing Executives, Marketing Manager, Stores and Purchase
- Coordinator, MRD Coordinator, Claim Department Coordinator, Ward Secretary, Floor
- Manager, House Keeping Manager, etc.

## **PROGRAMME OUTCOMES:**

- Students will possess the knowledge and ability to apply current business and financial principles, including theory and techniques, to the health care environment.
- Students will demonstrate the ability to communicate clearly and concisely within context of professional heath care environments.
- Students will exhibit the knowledge regarding various attributes of leadership and demonstrate the capacity for leadership roles in health care organizations.
- Students will understand the ethical implications of decision-making and recognize ethical dilemmas.
- Students will have an understanding of health care issues, trends and perspectives related to diversity, e.g. aging, underserved populations, health disparities, etc.
- Students will understand the regulatory environment and apply skills that improve patient safety and the quality of care.

## CORE COURSE I INTRODUCTION TO HOSPITAL SERVICES (Theory)

Semester I

Credit: 5

### Code:

### **COURSE OBJECTIVES:**

To provide in this aim is the quality of their hospital

### UNIT – I:

- Concepts of Hospital
- Changing concepts of Hospital
- Philosophies of Hospital

#### UNIT – II:

- Definition
- Types of Hospital
- Role perception of Hospital
- Hospital as a system

### UNIT – III:

- Role of Hospital
- Levels of care
- Health care, delivery system and Hospital
- Changing roles of Hospital

#### UNIT - IV:

- Factors Influencing Hospital utilization
- Hospital Environment
- Hospital Physical facilities
- Hospital Design
- Types of services

#### UNIT – V:

- Health team and role of
- Doctors
- Nurses
- Pharmacists
- Ancillary Health personnels

#### **REFERENCES:**

- Francis cm et al, (2004), "Hospital administration 3<sup>rd</sup> edition, Jayper Publishers (p) Ltd., New Delhi
- 2. Sakharkar B.M. (1998), "
- 3. Principles of Hospital Administration and Planning' Jayper Publication (P) Ltd., New DelhiCORE COURSE II.

## **COURSES OUTCOME:**

- To Identify health care costs and processes,
- To evaluate the health services for individuals and populations.

Code:

## CORE PRACTICAL I HOSPITAL VISIT (Practical)

Semester I

Credit: 4

# INTRODUCTION TO HOSPITAL SERVICES

**Note:** Hospital Visit Students shall be taken on a visit to a minimum of 2 hospital of different category hospital. Spend around 60 hours which included the visit time and the representative should be one the examiners for evaluation. (viva-voce)

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6

Credit: 4

Code:

## **COURSE OBJECTIVE:**

To Provide basic knowledge about the human body, its functions and its physiological activities.

# UNIT - I ANATOMY:

Structures and sub-divisions of human body, Terms in Anatomy.

**Muscles, Bones & Joints:** Types, structure, functions and its distribution in various parts of the body.

Surface making of some structure and clinical correlations of upper, limb lower limb, thorax, abdomen, Head & neck.

# UNIT - II PHYSIOLOGY:

**Blood**: Functions and composition of blood cells –Haemoglobin, clotting of blood. Thrombosis, Immunity – Natural and acquired, Immune response - Primary, secondary response, Antigen – Antibody Reaction, Blood Group and transfusion of blood, ABO system, Rh factor.

**Circulation:** Structure and function of Heart; Types of blood vessels and blood flow, Heart Beat, Blood pressure – measuring B.P. systolic and diastolic pressure. Circulation of blood through artery, veins and capillaries.

**Respiration:** Breathing and respiration, respiratory organs, gaseous exchange and transport, factor influencing breathing rate, control of breathing – nervous and chemical control.

**Excretion:** Structure of kidney, mechanism of urine formation, Glomerular filtration urine formation, tubular function, composition of urine; principle of dialysis and haemodialysis, skin – its structure of function.

**Digestion:** Digestion in mouth, Digestion in stomach, enzymes – functions of enzymes in digestions. Digestion and absorption. Nervous system – Introduction to nervous system, Neuron, Nerve fiber function and properties, central nervous system Autonomic nervous system. Spinal cord cranial nerves, Receptors and sensations.

# UNIT - III BIO CHEMISTRY:

Structure and properties of Molecules. Electronic configuration of an atom, association of atoms into molecules; physical properties of molecules.

Protein Metabolism with brief description of immunoglobulins and their diagnostic significance in modern medicine. Amino acid, metabolism – mechanism; biosynthesis and detection of basic errors in laboratory.

Fat metabolism with special emphasis on the role of lipids in heart diseases – diagnostic methodologies. Carbohydrate metabolism in brief – explaining the mechanisms of glycogens, Neoglucogenesis and glycogenolysis with special reference to diabetes mellitus and its laboratory investigations.

Importance enzymes and co-enzymes – their supportive role in brief - their diagnostic values in health and disease. Vitamins and Hormones – source, utilization, excretion, diseases associated with their abnormal levels in the human body – diagnostic methods.

Blood chemistry; brief description of various blood forming elements; their normal and abnormal levels – Laboratory investigations. Some recent Laboratory techniques - chromatography; calorimetry and spectrophotometry; Electrophoresis; Immuno Electrophoresis; Radiation techniques; Radio immunoassay:

# UNIT - IV MICROBIOLOGY:

Microbiology: General Introduction. Brief Historical Reviews; value of knowledge of Microbiology. Micro – organism: Classification, General Characteristics – Size, Structure methods and rate of reproduction, nutrition and respiration, factors influencing growth, pathogenic and non – pathogenic organisms; common diseases caused by different types of organisms – Bacteria, Virus, Covid- 19 Moulds and protozoa. Microbiology of food borne diseases; food poisoning principles and food preservation.

# UNIT – V PARASITOLOGY:

Introduction to parasitology. Introduction to protozoan parasites. Common prevailing parasites - identifications and treatment of – Amoebiasis. Nematodes – identification and treatment of :Helminthiasis, Filariasis, Hookworms, Ascariasis and trichuriasis, Trichomoniasis, Enterobius Vermicularis & Dracunculiasis.

# **REFERENCES:**

- 1. Rao NSn: Elements of Health Statistics, Tat Book Agency, Varanasi.
- 2. Mahajan B.K.:Metheds of Biostatitics, kothari Book Depot., AD Marg., Bombay.
- 3. Potti L.R.: A test book of statistics, Yamuna Publications, Thrivandram.
- 4. Lancaster H.O.: Introduction to Medical Statistics, Johnwiley & Sons., New York.
- 5. Leius A.E.: Biostastitics in Medicine Little Brown & Co. Boston.

# COURSE OUTCOME:

- Provide basic knowledge about human anatomy and physiology
- Study the various systems in human body and its functions
- Integrate various aspects of metabolism and their regulatory pathways

## Code:

## FIRST ALLIED PRACTICAL RADIOLOGY DEPARTMENT (LAB, SCAN, X- RAY, CT, MRI) (Practical)

Credit: 2

**Note:** The Project Should Contain Objective and Organisation Chart, Function, Register and Records with their formative for each department. (viva-voce)

#### CORE COURSE II PRINCIPLES OF HOSPITAL ADMINISTRATION I (Theory)

Semester II

#### Credit: 5

#### Code:

#### **COURSE OBJECTIVE:**

To give a proper understanding of the management concepts and techniques as a first step towards developing executives.

#### UNIT – I:

Definition of Management – Functions of Management - Schools of Management thought – Principle of Management - contribution of F.W. Taylor, Henry Fayol, Elton Mayo, McGregor rand Peter F. Drucker - Function of Manager – Delegation.

#### UNIT – II:

Planning:- Objectives – Strategies – Programmes – Policies, Long range and short range plans – strategic considerations in planning.

#### UNIT – III:

Need for organizational hierarchy in large organizations – Principles of sound organization – organization structure - span of control – organization chart.

#### UNIT – IV:

Authority – Power – Responsibility – Line and staff authority – Principles of Directing Authority CVSDV of authority - committees. Meaning of communication – Types of communication formal and informal channels – barriers to effective communication. Motivation – importance and characteristics - Positive and negative Motivation theories of motivation.

#### $\mathbf{UNIT} - \mathbf{V}$ :

Controlling - functions - Steps - Budgeting - Personal observation - The concept of MBO as a Means of control

#### **REFERENCES:**

- 1. L.M Prasad –Principles of management
- 2. Drinkar & Tagor –Business management
- 3. Koontz & O Donnel –Essencial of Management
- 4. Tripati & Reddy- Principles of management.
- 5. L.M Prasad- Organisation Behaviour
- 6. Stephen Robbins Organisation Behaviour
- 7. Fed Luthens Organisation Behaviour

#### **COURSE OUTCOME:**

- Identify and demonstrate the dynamic nature of the environment.
- Apply conceptual frameworks,
- theory and techniques to lead the organization in achieving its goals
  - Understand the roles of managers and administrators

## CORE PRACTICAL II PATIENT SATISFACTION (INPATIENT, OUT PATIENT, OT OVERALL) (Practical)

Semester II

Credit: 4

## Code:

**Note:** The Project Should Contain Objective and Organisation Chart, Function, Patient Satisfaction Register and Records with their formative for Specific department. (Viva-voce)

Credit: 4

Code:

## **COURSE OBJECTIVE:**

To provide elementary knowledge of the various systems of the human body and the diseases affecting them.

## UNIT - I:

Disease of Heart, Cardiac arrest, Heart Block, pericarditis, Valvulardiseases – Congestive heart failure, hypertension congestive heart diseases, Angina Pectoris – Myocardial infarction - Pectoralis : major & minor.

Blood Diseases :Anaemia – Leukaemia; Agranulosis; Haemophilia.

Vascular Disease :Arteriosclerosis, Thrombophlebitis, Embolism; Vericose Veins, Aneurysm.Blood Transfusion : Indicators - grouping & matching RH Factor, Plasma – Precautions in blood transfusion– Blood banks.

## UNIT – II:

Gastro -Intestinal System: Diseases of the mouth and Oesophagus - stomatitis, gingivitis, parotids; dental care.Disease of stomach and intestinal tract:Gastritis, peptic ulcer. Appendicitis, Hernia and fissure, fistula and haemorrhoids.

Urinary And Reproductive System: Diseases of kidney ureter, bladder & urethra, cystitis, phlebitis, Nephritis, tumour, uraemia, injury.

Disease and disorders of female reproductive system and mammary glands - Infections, cysts, fibroids, abortion and ectopic pregnancy; vaginal fistula;mastitis.

## UNIT – III:

Musculo Skeletal System: Disorders and diseases of bones and joints, sprains - Dislocation and fracture – Arthritis, osteomyelitis and osteoporosis.

*Nervous* System : Migraine Headache, Coma, Epilepsy-seizures, neuritis, Sciatica, Paralysis, cerebral embolism, thrombosis, meningitis, abscess and tumours, spinal cord injury, sun stroke, heat exhaustion.

## UNIT – IV:

Disease of the Ear and Eye: Ears: Wax formation, foreign bodies, Otitismedia, mastoditis; Eyes: Conjunctivitis, hypermetropia, hypermyopia, nightblindness, cataract, glaucoma. Disease Of the Nose And Throat: Sinusitis, Tonsillitis, Laryngitis.

# UNIT – V:

Endocrine System: Metabolic disorders – Deficiency diseases. Diseases of thyroid, parathyroid – hyper and hypo secretions - metabolic disorders - Diabetes mellitus, obesity.

Disease of the Skin: Burns, Radiation induced burns and scars, plastic surgery, allergy conditions, urticaria, psoriasis, Eczema.

## **REFERENCES:**

- 1. T.S Renganathan- A Text book of Human Anatomy- S.Chand
- 2. Sarada Subramanian- Human Pysiology- S.Chand
- 3. Ganaa-Pysiology-Mc Graw Hill
- 4. Harper-Bio- Chemistry-Mc Graw Hill
- 5. Chateriee-Bio-Chemistry- Japee
- 6. Pnikar-Micro Biology-LM
- 7. I.B. Singh :Essentials of Anatomy Jaypee
- 8. I.B. Singh :Text book of Anatomy Jaypee Volume 1,2,3
- 9. Basmajian :Grants Method of Anatomy B.I. Waverly
- 10. Vasudevan :Bio Chemistry Jaypee
- 11. Sathya Narayana : Bio Chemistry Central
- 12. Grays :Grays Anatomy CL
- 13. Burton :Micro Biology for Health science LIPWW
- 14. Brooks :Medical Micro Biology MC Graw Hill
- 15. Green Wood :Medical Micro Biological 15th Edition CLISIC
- 16. Ross & Wilson :Anatomy and Physiology in Health and Illness
- 17. Panikar :Text book of Medical Parasitology Jaypee
- 18. Zeivia :Clinical Parasitology W.B.S.
- 19. Ramik Suid :Colour Atlas of Pathology Jaypee
- 20. Braunsli :Outlines And Review Pathology Jaypee
- 21. Seth :Pharmacology Bill

# **COURSE OUTCOME:**

- Identify a range of drugs used in medicine and discuss their mechanisms of action.
- Report the clinical applications, side effects and toxicities of drugs.
- Mechanisms of action, pathology and drugs of abuse.
- Translate pharmacological principles into clinical decision-making.

### CORE COURSE III PRINCIPLES OF HOSPITAL ADMINISTRATION II (Theory)

## Credit: 4

## Code:

## **COURSE OBJECTIVE:**

To provide fundamentals of organizational Behaviour, Communication and provide an idea about Group behaviour.

## UNIT – I:

Interpersonal relations; group dynamics and group behaviour, formal & informal groups and Organizational climate; Motivation – Motivation theories by Herzberg. McGregor and Maslow's need Hierarchy – the different types of leadership models and styles of the managerial grid.

## UNIT – II:

Importance of effective communication in organization - Congruity ; authenticity, clarity; role of perception; Importance of two way communication; Principles of effective listening - telex, fascimail (fax), tele conferencing. Intercom apparatus – Modern means of communication – Internet, E-mail communication network.

## UNIT – III:

The individual: Foundation of individual Behavior, Biographical characteristics, Ability learning. Value, Values attitudes and job satisfaction. Personality and Emotions.

# UNIT – IV:

The Group: Foundations of Group behaviour - defining and classifying groups, stages of group development toward external conditions imposed on the group, Group member resources, Group structures, Group processes Groups tasks, Group decision making - Understanding work teams. Popularity of teams; teams versus groups – differences; Types of teams; creating effective teams; turning individuals into team players contemporary issues in managing teams.

## UNIT – V:

Basic approaches to leadership, What is leadership? Trait theories, Behavioural theories, contingency theories, summary and implications for managers. Contemporary Issues in Leadership - Trust; The foundation of Leadership, Leaders as shapers meaning, emotional intelligence and leadership effectiveness, contemporary leadership roles, moral leadership.

# UNIT - VI CORRENT CONTOURS (for continuous internal assessment only);

Leadership Role (presentation, seminar assignment)

## **REFERENCES:**

- 1. Ronathan S Rekich-Management Organisation Health Care Administration.
- 2. S.L. Goal- Health Care Administrtion
- 3. Srinivasan- Management Procees in Health Care

# COURSE OUTCOME:

- Understanding the role and functions of hospitals and their health care context and prepare to handle the management and development issues faced by a hospital manager,
- To study planning and managing resources evaluating services.
- How operational problems and situations are handled in practice by undertaking and reporting at a hospital attachment 4)
- Formulate ideas and develop and participate in implementation of plans

## CORE PRACTICAL III STATISTICS (DISEASE, MORTALITY AND MORBITITY) (Practical)

Semester III

Credit: 4

# Code:

# NOTE;

The Project Should Contain Objective and Organisation chart, Function, birth and death Register and Records with their formative each departments. (viva-voce)

Credit: 4

Code:

### **COURSE OBJECTIVE:**

Various aspects of Epidemiology and Community Health.

## UNIT - I EPIDEMIOLOGY:

History; definition; Epidemiological approach. Investigation of an epidemic out break of disease. Basic measures in epidemiology; measurement of mortality , morbidity, disability, natality; characteristics of diseases and Health care facilities of an epidemic out

## UNIT - II SOCIETY AND HEALTH:

Community and Health, Concept, definition, Determinants, Sociology of health in developing countries, Health transition & Health seeking Behaviour, Health information & Communication, Health and environment: Sanitation and Pollution, Health economics " ways of measuring health";.

## UNIT - III HEALTH CARE DELIVERY SYSTEM:

At National and State levels; comprehensive health care models of community health; Mental hygiene movement; Assessing community Health needs; Health Delivery system, Primary Health Care

## UNIT - IV STRUCTURE OF HEALTH SERVICE :

Evolution of health care system – five year plans - recommendation of committees (Bhore, Muda liar, Chadha, Mukherjee, Kantar Singh, Tongawalla Committee) – development of rural health service in India – Administration of health care service In India – Administration of health care service at central, state and municipal level – decentralized block level institutes - Primary health centres – Changing concepts and phases in health care.

## UNIT – V:

National Health Programmes: Organisation and function of various National Health Programmes like.

National Malaria Eradication Programme. National Leprosy Eradication Programme. National TB control Programme. National filariasis control programme. National Diarrhoeadisease control programme. National STD control Programme Small pox, Chickenpox and Measles control programme Expanded ImmunisationProgramme National Family Welfare programme National mental healthprogramme.

**Health planning in India :** Introduction – Development planning in India - National Health Services - UK - a model study.

**Health Care Expenditure in India :** Why we need to invest in Health, five year plans in health, Health financing, Health expenditure.

**Health policies:** Introduction – Health policies in India - a comparative study of china, srilanka, Africa; Indian Health policy – an overview.

Assessment of Indian MCH related programmes, CSSM, RCH nutrition. Health Insurance – An introduction Public and private mix. Managed care, Health intervention – Some case studies for India & developing countries.

# UNIT - VI CORRENT CONTOURS (for continuous internal assessment only):

Health care expenditure, health policies, Assessment of Indian MCH related programmes, seminar

# **REFERENCES:**

- 1. Lilien Field: Foundation Of Epidemiology New Yard Oxford. University Press 1980
- 2. Hennekena Buring: Epidemology In Medicine Little Brown And Company Boston Toronto 1987.
- 3. J.E. Park: Preventive And Social Medicine Brown And Io.1978.
- 4. Brian Macmahon Thomas F. Pugh: Epidemiology Principles And Methods, Boston Brown And Io.1978.
- 5. W.B. Saunders : Epidemiology , Biostatistics And Preventive Medicine 1996
- 6. Sathe & Sathe :Popular Books Epidemiology And Management For Health Care For All (1997)
- 7. Stephen E Gray :Community Health
- 8. Gill Watt :Health Policy
- 9. J.E. Park & K. Park :Textbook Of Preventive And Social Medical
- 10. J.H. Helberg :Community Health
- 11. Mahjan B.K. :Health service in India Jam nagar, Aruna R. Mahajan 1969
- 12. 10.Naick J.P.: An alternative system of health care services in India Some proposals Allaied Pub 1982
- 13. Rao K.N.:Health services, public health in Encyclopaediapeadio of social work in India Vol. Pub Division, 1968
- 14. Bartlell, Harriet M :Social work practice in health field New York National asson of social workers 1961

# COURSE OUTCOME:

- Understanding the healthcare scenario in a population
- Demonstrate the necessary knowledge, skill and competencies required
- Diseases affecting the different systems.
- Handle various data related to healthcare.

Code:

## SECOND ALLIED PRACTICAL WASTE DISPOSAL MANAGEMENT (Practical)

Semester III

Credit: 2

# NOTE:

The Project Should Contain Objective and Organisation Chart, Function, Register and Records with their formative in particular department. (viva-voce)

#### Code:

#### NON MAJOR ELECTIVE I PERSONAL HYGIENE (Theory)

### **COURSE OBJECTIVE:**

• To create an awareness about health care and the various health programmes.

### UNIT – I:

Health Education: Definition – Importance - Principles of Health education – content of health education. Health education – planning – methods of teaching - recognition of opportunity for teaching – preparation of low-cost aids for teaching – audio visual aids.

#### UNIT – II:

Personal health – Factors contributing to relationship between health and disease – healthy habits, Oral Hygiene

### UNIT – III:

Physical health – Care of skin, ear, eyes, teeth, hands and feet, recreation and posture, menstrual hygiene, care of the sick and disabled, care of old people (geriatrics)

#### UNIT – IV:

Mental health – Definition –Causes and Types - Characteristics of a mentally healthy person – Factors contributing to mental health

### UNIT – V:

Environmental health – Relation of environment to health - health hazards – purification of water - efficient disposal (different methods like bore - hole latrine) - Solid waste disposal and control - food and milk sanitation – pest and rodent control

#### UNIT - VI CORRENT CONTOURS (for continuous internal assessment only):

Physical care -mental health- importance (presentation)

Reference

- 1. J.H. Helberg :Community Health
- 2. David morley and others: Practicing health for all
- 3. Gill Watt :Health Policy
- 4. W.B. Saunders :Epidemology, Biostatistics and Preventive medicine, 1996
- 5. J.E.Park & K. Park: Preventive And Social MedicineBrown And Io. 1978

#### **COURSE OUTCOME:**

- Identify the importance of Health Education
- Understand the importance and benefits of physical health
- Understand better care for eyes, hands, feet, hair, skin etc.
- Know about the Mental Health and Environment Health

#### CORE COURSE IV PRINCIPLES OF ECONOMICS AND ITS APPLICATION TO HOSPITAL SERVICES (Theory)

#### Credit: 5

#### Code:

#### **COURSE OBJECTIVE:**

• To understand the basic economic theories and thoughts, nature and significance of fundamental macro-economics, and micro - economic principles and its application to health care.

#### UNIT – I:

Analysis of Demand and Supply; Diminishing Marginal Utility; Equi-marginal Utility; Indifference Curve; Elasticity of Demand; Marginal Principle in Economic Action; Cost; Increasing Returns; Elasticity of Supply; Forces Governing the supply of Factors of Production – Land, Labour, Capital and Enterprise.

#### UNIT – II:

Theory of the Firm; Price Fixation; Role of Supply and Demand. The time element in economic theory; Concept of normal profit; Market -Perfect Competition; Imperfect Competition; Monopoly; Duopoly; Oligopoly; Monopolistic Competition, Economics of bulk purchase.

#### UNIT – III:

National Income; Circular Flow, Measurement; Difficulties in measurement; Uses.

#### UNIT – IV:

Theory of Distribution, Principle of substitution, Marginal Productivity, Wages; Rent, Interest Profit.

#### UNIT – V:

Business economics and Health Economics.

#### UNIT - VI CORRENT CONTOURS (for continuous internal assessment only):

National income - Health economics (seminar, assignment)

#### **REFERENCES:**

- 1. D.N. Dwivedi
- : Principles of Economics : Principles of Economics
- 2. Paul A. Samuelson
- 3. Ronathan S. Rakich
- 4. S.L. Goel

- : Management Health care organization
- : Health care administration
- 5. Srinivasan

: Management process in Health care.

# COURSE OUTCOME:

- Identify and demonstrate the dynamic nature of the environment.
- Apply conceptual frameworks, theory and techniques to lead the organization in achieving its goal
- Understand the roles of managers and administrators

Code:

#### CORE PRACTICAL IV MEDICAL RECORDS DEPRTMENT (Practical)

Semester IV

Credit: 4

## NOTE:

The Project Should Contain Objective and Organisation: Chart, Function, Register and Records with their formative in particular department. (viva-voce)

### SECOND ALLIED COURSE II FINANCIAL MANAGEMENT (Theory)

Credit: 4

Code:

## **COURSE OBJECTIVES:**

• Similar to goals, but often have success/failure rather then gualitable metrics.

## UNIT – I:

Nature of financial management - meaning and scope of finance function - financial management and its functions - goals of financial management profit. Maximization - wealth maximization - importance of financial management - Organization of financial department.

## UNIT – II:

Cost of capital - concept - importance and types of cost of capital - measurement of cost of capital - weighted average cost of capital - operating and financial leverages.

## UNIT – III:

Principles of costing - standard costing - marginal costing diagnostic related groups and cost centers in Hospital Allocating over head expenses to cost centers.

## UNIT – IV:

Allocating expense to various DRG. Finding cost per unit in DRG - Comparing of cost - Analysis of Variance – price etc. Purchase of Capital equipment's - norms, payback period return on investment, Net Present Value Method.

## UNIT – V:

Financial planning and forecasting: Concept – characteristics and factors affecting financial planning – necessity and limitations – cash forecasting.

# UNIT – VI CORRENT CONTOURS (for continuous internal assessment only):

Resend trends financial data seminar, assignment

## **REFERENCES:**

- 1. Kuchal: Financial Management Chatyana Publishing House.
- 2. M.Y. Khan, P.K. Jain: Financial Management TMH
- 3. Chandra: Financial Management theory and Practice Tata Mc Graw Hill
- 4. Van Horne: Financial Management and Policy Prentice Hall of India

- 5. Brealey, Mysers: Principles of Corporate finance Tata Mc Graw Hill
- 6. M.Y. Khan, P.K. Jain: Financial Management Tata Mc Graw Hill
- 7. Pondy: Financial Management Vani Educational Books
- 8. Kuchal: Financial Management Chatyana Publishing House.

## **COURSE OUTCOME:**

- To find out the finance and investment opportunities and their suitability in particular circumstances
- To Apply capital budget project using traditional methods.
- Analyze the main ways of raising capital and their respective advantages and disadvantages
- To apply their financial concepts to calculate ratio and the capital budget.

### NON MAJOR ELECTIVE II ROLE OF HOSPITAL SERVICES (Theory)

**Semester IV** 

Credit: 2

Code:

### **COURSE OBJECTIVE:**

Hospitality is known as the act of generously providing care and kindness of whom ever in need

### UNIT – I:

Hospital – Definition – Hospital as teaching centre – General Hospital in National Health programmes and Public Health services: Types of Services

### UNIT – II:

General Medical Services Outpatient Services Inpatient Services Facilities for Research

### UNIT – III:

Special Medical Services Accident & Emergency Services Hand injuries, Features, Burns, poisoning Tetanus Pediatric Services – Functions Antenatal Clinics – Location & Facilities Physiotherapy & Occupational Therapy

## UNIT – IV:

Technical Medical Services Radiodiagnosis Radiotherapy Laboratory Role of RMP

## UNIT – V:

Non-Medical Services & Facilities Stores Catering Records Room Maintenance Services: Laundry, Mortuary

## UNIT - VI CORRENT CONTOURS (for continuous internal assessment only):

Type of services (group discussion, seminar, assignment)

### **REFERENCES:**

- 1. Hospital Management Nalini V. Dave, Deep & Deep Publications, New Delhi 1997
- 2. Hospital Organization & Administration M. Sankara Rao D & D Publications, New Delhi 1995
- 3. Hospital Planning & Administration R. L. Lewellyn Davies and HMC acaulay WHO Jaypee Brothers 1995

## **COURSE OUTCOME:**

- Identify various components of hospital
- Describe the role of hospital environment
- Role of administrators in smooth functioning of hospital.
- Identify various support and utility services
- Articulate the functional requirements

### CORE COURSE V HUMAN RESOURCE MANAGEMENT (Theory)

Semester V

Code:

Credit: 5

### **COURSE OBJECTIVE:**

To provide knowledge about the tools and techniques in the management of Human Resource.

### UNIT – I:

Concepts of HRM, HRD and HRM in health care services, Manpower planning, Job analysis, Job specification.

### UNIT – II:

Recruitment and selection, placement, Job enrichment, job rotation.

### UNIT – III:

Training and Development Methods of training - Training need, Training programme designing. Evaluation of training, Performance appraisal.

### UNIT – IV:

Wage and salary administration, Motivation of hospital employees, employees welfare occupational safety. Collective bargaining, counseling, participative management, Medical insurance.

## UNIT – V:

Discipline and Disciplinary Action.

## UNIT - VI CORRENT CONTOURS (for continuous internal assessment only):

HR Role, Importance (group discussion)

#### **REFERENCES:**

- 1. H.L. Kumar: Labour Problems And Remedies Universal Law
- 2. H. Kumar What Everbody Should Know About Labour Laws Universal Law Publishing Co. Pvt. Ltd
- 3. Frank Ruchill: Management Human Resource Management
- 4. R.C. Goyal: Human Resource Management In Hospitals(3<sup>rd</sup> Ed) Prentice Hall Of India Private Limited
- 5. Edwin B.Flippo: Personnel Management Tata MC Graw
- 6. G.D. Kunders, S.Gopinath A. Katakam :Hospitals Planning Design And Management Tata MC Graw Hill Publishing Co Ltd.
- 7. H.L. Kumar Practical Guide To Labour Management 3<sup>rd</sup> Edition Universal Publication Universal Law

8. H.L. Kumar Law Relating To Dismissel Discharge And Retrenchment Under Labour Laws Universal Publishing Co. Pvt. Ltd

# COURSE OUTCOME:

- Use the different methods of recruitment in procuring human resource
- Design relevant appraisal methods for employee compensation, rewards and benefits.
- Organize training and development activities to enhance the knowledge, skill and abilities
- Apply modern trends in human resource management

#### CORE COURSE VI LEGAL ASPECTS IN HOSPITAL MANAGEMENT (Theory)

Semester V

Credit: 5

#### Code:

### **COURSE OBJECTIVE:**

To create knowledge about legal obligation and responsibility in hospital management.

### UNIT – I:

Labour laws. Industrial disputes Act, Trade union Act, factories Act, shops and Establishment act, Minimum wages act, ESI Act Provident fund act. Consumer protection Act.

#### UNIT – II:

Legal compliances for hospitals.

### UNIT – III:

Kind and formation of contracts. Breach of contracts, remedies and Damages, law of Torts, sales of goods Act, Negotiable instruments Act, Evidence Act.

#### UNIT – IV:

Medical Licensure law, the doctor patient relationship, medical malpractices, Quality and standard of medical care, Medical negligence.

#### UNIT – V:

Legal issue in death cases. Drugs and cosmetic Act, Drug control policy, Narcotic laws.

#### UNIT – VI CORRENT CONTOURS (for continuous internal assessment only):

Consumer protection Act- Medical profession(doctor -patient relationship) presentation ,seminar

#### **REFERENCES:**

- 1. H.L.Kumar:Labour Problems And Remedies Universal Law
- 2. H.Kumar:WhatEverbody Should Know About Labour Laws Universal Law Publishing Co. Pvt. Ltd
- 3. Raj Kumar: Acts applicable to hospital in India
- 4. Raj Kumar:Consumer protection Act 1986
- 5. Knight Bernard:Legal aspects of medical practice

#### **COURSE OUTCOME:**

- Knowledge of ethics in functioning of hospital.
- Handle various issues related to healthcare setup
- Recognize and train the workforce to meet the challenges of changing dynamics
- Demonstrate the necessary knowledge, skill and competencies required for good administrator

### CORE COURSE VII HOSPITAL ORGANISATION AND RESEARCH METHODOLOGY (Theory)

Semester V

Credit: 5

## Code:

### **COURSE OBJECTIVES:**

The topic is intended to provide an adequate knowledge about research methods to help them in research work settings whenever survey design and secondary data analysis is involved in the health system.

## UNIT – I:

Research methods - meaning - types - objectives - nature - scope .Scientific research - role of theory in research - research problem - concepts - formulation - identification - selection of research problems in management.

### UNIT – II:

Hypothesis - testing of hypothesis bias .Research design in medical research - types - descriptive - experimental – exploratory .ecological - cohort - action research - case control.

### UNIT – III:

Methods of data collection - source - methods - tools - observation - personal interviews - interview schedule. Sampling - concepts - advantages - limitations - types.

## UNIT – IV:

Data processing and analysis - problems - types of analysis - inference - planning - evolution.

## UNIT – V:

Research report – introduction – types – contents of report – steps in drafting reports

## UNIT – VI CORRENT CONTOURS (for continuous internal assessment only):

Case control study- type of research – matching cases and controls (presentation)

#### **REFERENCES:**

- 1. Sarantakos: Social Research, Macmillan Press., Australia.
- 2. Festinger and Katz: Social Research., Long man., London
- 3. Jathoda Marie et al: Research methods in Social Relations., Free Press., New York.
- 4. Kothari C.R.: Research methodology Methods and techniques. Wiley Eastern Limited., Delhi.

5. Goode and Hatt: Research Methods in Social Sciences.

# COURSE OUTCOME:

- Skills to build their own formulations, to expand existing formulations
- Evaluate the impact of model assumptions and to choose an appropriate solution technique
- Distinguish purpose statement, hypothesis and research objective
- Explain about sampling design and types of sampling
- Overall process of designing a research study.

Code:

## CORE PRACTICAL V LEGAL ASPECTS IN HOSITAL (Practical)

Semester V

Credit: 4

### NOTE:

The Project Should Contain Objective and Organisation Chart, Function, medico legal cases Register and Records with their formative in each department. (viva-voce)

### MAJOR BASED ELECTIVE I 1. QUALITY ASSURANCE (Theory)

Code:

Credit: 4

## **COURSE OBJECTIVE:**

• Various aspects of medical audit of quality assurance

## UNIT – I:

Medical audit – need for medical Audit – Medical Audit for better patient care – aims - objectives of medical audit. Medical Care – objectives and subjective examinations.

## UNIT – II:

Objective elements required qualitative judgment through clinical evaluation. Continuous evaluation to improve clinical services, professional education, Hospital administration and better patient care.

## UNIT – III:

Medical audit committee – constitution, functions and limitation. Service by service discussion in Medical Audit.

### UNIT – IV:

Administrative Aspects: Community Relationship, Personnel Funds, Physical facilities Role of Hospital Administrator in Medical Audit: Organizing, Review Problems Solving

## UNIT – V:

Quality Assurance: Quality as a concept – why we need quality – why we need to evaluate quality – determinants of quality in medical care - Norms for Medical staff. Quality assurance in hospitals – major functions of quality assurance patient care evaluation – utilization review – continuous monitor – Continuing medical education – How to integrate the above function of the Medical staff. Tools of evaluating quality in medical care – aspects of medical care that need evaluation - Barriers in QA – Quality and customer orientation – TQM Concept. ISO 9000 Series - its implication on hospitals – Implementation of quality system.

## UNIT – VI CORRENT CONTOURS (for continuous internal assessment only):

Group discussion (patient care evaluation - Continuous monitor in quality medical care)

## **REFERENCES:**

- 1. Tito Coti: Building Total Quality A Guide For Management Chagmane Hall.
- 2. P.L.Jain: Quality Control And Total Quality Management Tata MC Graw Hill

- 3. Edby Dennip Lock: Hand book Of Quality Management Jaico Publication
- 4. Albeto Salgano : Company Wide Quality Management Productivity Press.
- 5. Suresh Dabla And Saurebh : ISO 9000 a Manual For Total Management S.Chand
- 6. Bertrand L.Hansen And Prabhar M.Charge: Quality Control And Application -Tata MC Graw Hill
- 7. Pena Jesus :Hospital Quality Assurance
- 8. Hugh C.H.Koch : Total Quality Management In Health Care
- 9. Ali Azzam : Concept Of Total Quality Management in Health Care
- 10. Charles Shaw : Medical Audit A Hospital Hand Book
- 11. Charles Biker : Standards Of Care And Practice Audit Nursing Quality

## **COURSE OUTCOME:**

- Know the principles of total quality management and peculiarities of implementation
- Understand and implement quality improvement techniques according to situations
- Significance of quality gurus' works to the management of modern organizations.

Credit: 4

Code:

## **COURSE OBJECTIVE:**

To equip the students with the relevant aspects of Bio –Statistics

# UNIT - I STATISTICS:

Mean, Median, Mode, Standard Deviation, Normal Distribution.

## UNIT - II BIO STATISTICS:

Definition & scope – Birth & Death Registration – Functions & uses - record keeping Methodologies; efficiency, barriers – essential health data with special reference to demography of population dynamic

## UNIT - III FERTILITY RELATED STATISTICS:

Birth rate, General fertility rate, general material fertility rate, age specific fertility rate, age specific material fertility rate, child - women ratio - marriage rate, pregnancy rate, abortion rate.

# UNIT – IV MEASUREMENT OF MORTALITY RATE:

Death rate, crude death rate, specific death rates, case fatality rate, proportional mortality rate, standardized mortality rate, infant mortality rates, maternal mortality rate, foetal death. Measurement of morbidity Incidence rates, prevalence rates.

# UNIT - V HOSPITAL STATISTICS:

Outpatient statistics - daily average outpatient attendance, average out patient attendance etc.In patient statistics - Bed occupancy rate, bed turnover rate. Hospital morbidity mortality - gross & net death rate, Institutional death rate, anaesthesia death rate, post operative death rate, MMR, IMR

# UNIT – VI CORRENT CONTOURS (for continuous internal assessment only):

Fertility related statistics in particular areas (comparison of study)

# **REFERENCES:**

- 1. D.N.Eihance / VeenaEihance, B.M.Agarwal : Fundamentals Of Statistics Kitab Mahal
- 2. Richard I.Levin David S.Rubin :Statistics For Management T.M.Publication
- 3. Mendel Hall.W : Introduction To Probability And Statistics (7<sup>th</sup> Ed) M.Publication
- 4. P.S.S.Sundar Rao G.Jesudian & J.Richard : An Introduction To Biostatistics

# COURSE OUTCOME:

- Analyze concepts and statistical techniques used in hospital.
- Find the variance and standard deviation of discrete and continuous frequency distribution
- Distinguish between coefficient and correlation
- Understand the complex, dynamic, and multidimensional issues and perspectives
- Involved in statistical analyses of hospital situations.

## SKILL BASED ELECTIVE I INFECTION CONTROL (Theory)

Credit: 4

Code:

## **COURSE OBJECTIVE:**

To enable the students to gain skills in various infection control mechanisms and authorities in a hospital.

## UNIT – I:

Hospital Infection Control Committees – Infrastructure Facilities, & Types of Hospital Infections

## UNIT – II:

Identification of High-Risk Areas Of Infection

## UNIT – III:

Modalities of Cross-Infection [OPD, Wards ICU, OT, Labour Wards & Kitchen]

## UNIT – IV:

Infection Control Committee – Formation, Involving Different Departments & Hospital Supporting Systems

## UNIT – V:

Waste Management – With Specific Emphasis on Bio-Medical Waste & Disposal of Dead Bodies.

# UNIT - VI CORRENT CONTOURS (for continuous internal assessment only):

CROSS INFECTION (ASSIGNMENT-SEMINAR)

## **REFERENCES:**

Mr. K. Park - Preventive & Social Medicine

# COURSE OUTCOME;

- Summarize the engineering, work practice, and environmental controls that protect against healthcare-associated infections.
- Identify barriers and personal protective equipment for protection from exposure to potentially infectious material.
- Discuss efforts designed to minimize the risk of occupational exposures to infectious diseases.
- Recognize suspected sepsis and methods to prevent it.

### CORE COURSE VIII MATERIAL MANAGEMENT (Theory)

**Semester VI** 

Credit: 5

Code:

## **COURSE OBJECTIVE:**

Explaining various, purchase procedures, methods of inventory control and other inventory systems. So that the inventories in a hospital can be managed effectively.

### UNIT – I:

Introduction to material management – materials requirement, planning, classification of materials – Need for integrate – concept, definition and scope - Advantages of integrated material management concept.

### UNIT – II:

Organisation - Based on commodities - based on function. Inter- departmental Relationships - Material planning and Budgeting. ABC Analysis – codification and standardization – source selection – vendor rating – make or buy decision - Lease against buying.

### UNIT – III:

Purchase Management – Negotiations - Purchase systems material requisition. Purchase order – limited tender - open tenders - comparative statement - follow up, purchase orders, purchase of capital items - pay back period approach – Return on Investment– Internal rate of return - discounted cash flow method.

## UNIT – IV:

Import procedures – letter of credit -bill of lading import substitution – public buying – Rate and running contracts, Buyer seller Relations and ethics. Import procedure - Letter of credit - bill of lading - impart substitution - public buying -Rate and running contracts. Buyer sellerrelation and ethics.

#### UNIT – V:

Stores Management – functions of stores – Location and layout - Definition of inventory - need for inventory – store systems & procedure -goods received note. Store Receipt voucher, Bincard - stores issue voucher discrepancy. Stores Accounting and stock verification – LIFO – FIFI Average price method obsolescence, surplus and scrap management – EOQ – Practical inventory systems - safety stock P system and Q system &IT.computers in Material Management Application of Material Management An Integrated Approach.

## UNIT – VI CORRENT CONTOURS (for continuous internal assessment only):

Store management -purchasing management - assignment, seminar

### **REFERENCES:**

- 1. Gopalakrishnan Sundaresan: Material Management And Integrated Approach Prentice Hall, India.
- 2. A.K. Dutta: Integreted Materials Management Prentice Hall, India.
- 3. Shakia Gupta: Hospital Stores Management (An Integrated Approach) MC Graw Hill.
- 4. Starr & Mill: Inventory Control Theory and Practice Prentice Hall, India.
- 5. P. Gopalakrishnan and M.S. Sandilya: Stores Management And Logistics Prentice Hall, India

## **COURSE OUTCOME:**

- Analyse the objectives, design structure, and organize the materials purchasing activities
- Ensure purchasing decisions meet the basic requirements to right quality, right quantity, right time, right price, and right source.

### CORE COURSE IX COMMUNICATION IN PUBLIC RELATIONS (Theory)

**Semester VI** 

Code:

Credit: 5

## **COURSE OBJECTIVE:**

To provide understanding on basic principles of public relations & Communication.

# UNIT - I PUBLIC RELATIONS:

Definitions, Nature, Scope, objectives, History and development, public in PR, PR in management organization of PR Department, Theory and practice in PR processors – fact finding, planning, communicating, evaluation. Staff & budget making of the PR man, code of ethics, PR association.

# UNIT - II TOOLS AND MEDIA OF PUBLIC RELATIONS:

Press in India, readership, impact of press. appeal of radio and press writing for radio, preparing news and features, for radio, SITE programmes features & documentary on TV – features films slider, campaigns, lobbying, company literature, annual report, manuals, brochure, information bulletins.

## UNIT - III CORPORATE PUBLIC RELATIONS:

Internal public, employee orientation, employee communication, employee survey. Suggestion programmes, employee newspapers. liaison with the newspapers – participating in Government programmes – Civic amenities, customer relations complaints of customers, PR in Marketing Sales.

## UNIT - IV MARKETING:

Functions – modern consumer oriented marketing concept, social marketing concepts, Defining and analysis of service markets, Analysis market opportunity, consumer markets and buyer behaviour, Market forecasting, promotion & post pricing techniques.

## UNIT – V ADVERTISING:

Advertising as a medium of PR advertising for marketing institutional advertising media – marketing characteristics a functions of media - papers radio, television of media – films, posters, hoarding, kiosk, neon signs, city transport, & effectiveness of different media, selection of media planning.

# UNIT - VI CORRENT CONTOURS (for continuous internal assessment only):

Resend trend (tools and media of public relation) presentation

## **REFERENCES:**

- 1. Urmila Rai Business Communication
- 2. M.Balasubramanyam Business Communication
- 3. P.Little Communication in Business
- 4. Ron Indlow Essence Of Effective Communication
- 5. D.S.Mehta Hand Book of Public Relation
- 6. James E.Gowing Managing Public Relations
- 7. Rogen Leywood All About P.R

## **COURSE OUTCOME:**

- Understand the scope and importance of communication
- Enhance oral and written communication skills and use different forms of written communication techniques.
- Understand the importance of listening and speaking.
- To understand the importance of public relations

# Code:

## CORE PRACTICAL VI MEDICAL EQUIPMENT'S (Practical)

Credit: 4

Note:

The Records Should Contain Objective and Organisation Chart, Function, What are the equipment used in health care system, The maintained of Register and Records with their formative in each department. (viva-voce).

Code:

### MAJOR BASED ELECTIVE II 1. WARD ADMINISTRATION (Theory)

Semester VI

## **COURSE OBJECTIVE:**

To highlight the various aspects of Ward Management

## UNIT – I:

Introduction: – Definition, History, Need for ward management – Principles of Ward management, factors involved in good ward management.

## UNIT – II:

Human Resource Management Of Wards : Hierarchical structure in wards, Role of medical and para medical, Administrative and Nursing personnel's, their power and authority, job functions, job description & responsibilities; Role of ward secretary as a key person in ward management, supervisory role of hospital personnel development's activities.

### UNIT – III:

Location, types, design, physical facilities & equipment required for emergency & casualty ward, Intensive care units, Post operative ward, Neonatal intensive Care and inpatient ward. Speciality Wards: Maternity ward, orthopaedic ward, physiotherapy, Cardiac, Nephrology, Neurology, Isolation, general medical & surgical wards; autopsies and mortuary location & functions. Care & use of equipment's; Relationship with other departments.

**Supportive Services:** Dietary, Lab, Radiology, Nursing, General Store, Pharmacy, physiotherapy etc. Auxiliary Service. Housekeeping, Linen &Laundry, CSSD

## UNIT – IV:

Ward environment, Ventilation, heating, lighting, elimination of noise, drinking water facilities, safe drinking water - Safety measures. Fire lighting equipment's, Prevention of cross infection, Emergency drug stock, and maintenance – waste disposal (sterilization) Housekeeping – Linen &laundry

## UNIT – V:

Daily ward routines, ward procedure, admission and discharge and transfers, care of critically ill patients, record maintenance – preparation of Reports and presentation of reports (Hospital statistics), Inventory maintenance, Risk management in ward, ward level intending, Billing procedure.

# UNIT - VI CORRENT CONTOURS (for continuous internal assessment only):

Group discussion (Ward procedure, record maintenance, preparation of reports), assignment

## **REFERENCES:**

- 1. Janet ReiensteinCarpmanMyronA Gromt: Planning Health Facilities For Patients and Visitors Tata MC Graw Hill.
- 2. John Rea, Jaffrey J. Eromeit and Malcom D. Maccoun :Building a Hospital a Prime For Administrators - Tata MC Graw Hill.
- 3. John S.Brason : Hospital And Hospital House Keeping
- 4. John Blackman :Hospital Waste Management Tata MC Graw Hill
- 5. Charles B.Miller : How to Organize And Maintain An Efficient Hospital Department Tata MC Graw Hill
- 6. James Lifton And Owen B.Hardy :Site Selection For Health Care Facilities -Tata MC Graw Hill

## **COURSE OUTCOME:**

- Ability to analyze and interpret financial information specific to the healthcare setting.
- Develop appropriate professional behaviors and leadership skills for careers in health care.
- Display effective professional communication skills.
- Develop skills to collaborate and consult as a strategic member of the healthcare team.

#### MAJOR BASED ELECTIVE II 2. OPERATION RESEARCH FOR HOSPITAL ADMINISTRATION (Theory)

Credit: 4

#### Code:

#### **COURSE OBJECTIVE:**

To provide knowledge on the different methods involved in operation research of Hospitals.

#### UNIT – I:

Operation Research - An introduction - Mathematical formulation of L.P.P.

#### UNIT – II:

Simplex method – Big M Method, Two phase method – Duality problem

#### UNIT – III:

Assignment models – Queueing models – Single channel and multi channel model (M/M/I & M / M/C) models.

#### UNIT – IV:

Simulation – Event type simulation, Transportation model

#### UNIT – V:

Gnatt chart, PERT/ Time and PERT / Cost CPM Techniques

#### UNIT - VI CORRENT CONTOURS (for continuous internal assessment only):

Resend Trends, assignment and seminar

#### **REFERENCES:**

- 1. HamdyA.Taha: Operation Research An Introduction- McMillan Publishing Co.Inc.
- 2. Kanti Swarup & Gupta: Operation Research S.Chand
- 3. Shiv K.Gupta and John M.Cozzolino: Fundamentals of Operations Research For Management Holden Day Inc.
- 4. Kanti Swarup P.K. Gupta& Man Mohan: Operation Research Chand & Sons
- 5. Hamdy A. Taha: Operation Research Prentice Hall Of India Pvt. Ltd.
- 6. S.K.Mittal Pvagati Prakashan: Operation Research Pragati Prakasan
- 7. Frank S. Budnick Dennis Mcleavy Richard Mojena: Principles of Operation Research For Management -All India Traveller Book Seller.

#### **COURSE OUTCOMES:**

- Identify and develop operational research models from the verbal description of the real system.
- Understand the mathematical tools that are needed to solve optimisation problems

#### PROJECT

# Semester VI

## Code:

Third Year

The candidate shall be required to take up a Project Work by group or individual and submit it at the end of the final year. The Head of the Department shall assign the Guide who, in turn, will suggest the Project Work to the students in the beginning of the final year. A copy of the Project Report will be submitted to the University through the Head of the Department on or before the date fixed by the University.

The Project will be evaluated by an internal and an external examiner nominated by the University. The candidate concerned will have to defend his/her Project through a Viva-voce.

## ASSESSMENT/EVALUATION/VIVA VOCE:

1. PROJECT REPORT EVALUATION (Both Internal & External)

TOTAL	- 100 marks
2. Viva-Voce / Internal & External	- 20 marks
III. Individual initiative	- 15 marks
<ul> <li>II. Execution of the Plan/collection of Data / Organisation of Materials / Hypothesis, Testing etc. and presentation of the report.</li> </ul>	- 45 marks
I. Plan of the Project	- 20 marks

# **PASSING MINIMUM:**

	Vivo-Voce 20 Marks	Dissertation 80 Marks
Project	40% out of 20 Marks	40% out of 80 marks
	(i.e. 8 Marks)	(i.e. 32 marks)

A candidate who gets less than 40% in the Project must resubmit the Project Report. Such candidates need to defend the resubmitted Project at the Viva-voce within a month. A maximum of 2 chances will be given to the candidate.

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# Credit: 3

### SKILL BASED ELECTIVE II HOSPITAL DIETARY SERVICES MANAGEMENT (Theory)

Credit: 4

# Code:

## **COURSE OBJECTIVES:**

To provides for the purpose of the guide on the types the estimated food require.

## UNIT – I:

Food – meaning, concept and types. Nutrition – definition, role of nutrition in growth & development, Food pyramid, Energy suppliers of nutrition with caloric value.

## UNIT – II:

Food Hygiene: Hygienic practices to be followed by food handlers & suppliers.

## UNIT – III:

Dietary Dept. - Location, Layout, role of dietary department in diseases & treatment facilities,

## UNIT – IV:

Supply Services: Role & responsibilities of dietician, Dietary officer, centralized & decentralized system of supply, Different types of diet – cardiac, diabetes, ECU patients.

# UNIT – V:

Inventory control of Dietary department, purchase procedure, stock verification, stocking, wastage, Management in kitchen role of store keeper.

# UNIT VI CORRENT CONTOURS (for continuous internal assessment only):

Dietary department principles and Role (seminar- presentation)

## **REFERENCES:**

- 1. Dr. B. Srilakshmi-FOOD SCIENCE-New Age International Publishers
- 2. A.M. Chalkley A Textbook for the Health Worket Vol. 1 New Age International
- 3. G. D. Kunders-Hospital Facilities Planning and Management-Tata MCGraw-Hill

# **COURSE OUTCOMES:**

- Understanding Indian Diet as mentioned in Ayurveda with nutritional values and clinical biochemistry.
- Understanding Indian, Western, Continental, Fast food diet with advantages and disadvantages to health.