

## Departmental Information- Paediatrics

### 1. General Departmental facilities:

- Total number of beds in the department :.....**90**.....
- Number of Units in the department :.....**03**.....

### 2 Intensive Care facilities

#### I. PICU

- No. of beds: .....**10**.....
- Available equipment :.....

#### PEADIATRIC PICU

S. No	Name of Equipments	Quantity
1	Refrigerator	1
2	Infusion pump	3
3	Syringe Pump	2
4	Ventilator	1
5	Multi Para monitor	10
6	Infant meter	1
7	Bathroom Weighing machine	1
8	X ray view box	1
9	Mobile ( ambulatory ) suction machine	1
10	Central oxygen supply and suction ( on each bed)	Yes
11	Nebulizer	1
12	Pulse oxy meter	1

#### II. NICU

- No. of beds: .....**06+04Nursery**.....

#### III. Dialysis section : No. of Beds

**05 Clean Cases + 01 Infected Cases=06**

No. of Dialysis Machines

.....**06**.....

### 3. Specialty clinics being run by the department and number of patients in each

S.No.	Name of the Clinic	Days on which held	Timings
1	Paed.Cardiology	<b>Saturday</b>	<b>10 AM-01 AM</b>
2	Paed. Nephrology	<b>Wednesday</b>	<b>10 AM-01 AM</b>
3	Paed. Endocrine	<b>Once in a month (Last Monday)</b>	<b>10 AM-01 AM</b>
4	Paed. Haematology	<b>Once in a month (Last Mondays)</b>	<b>10 AM-01 AM</b>
5	Paed.Gastro(Diarrohea)	<b>Every Monday</b>	<b>10 AM-01 AM</b>
6	Paed.Neurology	<b>Once in a month (Last Monday)</b>	<b>10 AM-01 AM</b>
7.	Neonatology (i) High Risk Newborn (ii) Well baby clinic	<b>Every Thursday</b>	<b>10 AM-01 AM</b>
8	Immunisation	<b>Every Tuesday</b>	<b>10 AM-01 AM</b>
9	Paed. Asthma	<b>Every Friday</b>	<b>10 AM-</b>

			<b>01 AM</b>
10	Thalassemia	<b>Once in a month (Saturday)</b>	<b>10 AM- 01 AM</b>

#### 4 Services provided by the Department.

##### (a) Neonatal services

NICU	<b>Yes</b>
Neonatal Ventilation	<b>Yes</b>
Exchange transfusion	<b>Yes</b>
Phototherapy	<b>Yes</b>
Parenteral Nutrition	<b>Yes</b>

(b) Endoscopy **Yes**

(c) Dialysis **Yes**

(d) Paediatric Ventilation **Yes**

(e) Thalassaemia day care centre **Yes**

(f) Physiotherapy section. **Yes**

(g) Child counseling services **Yes**

(h) HIV **Yes**

(i) Delivery room services **Yes**

(j) Investigative facilities **Yes**

Paediatric endoscopy **Yes**

Paediatric Bronchoscopy **Yes**

PFT **Yes**

ABG **Yes**

#### 5. Departmental Library:

- Total No. of Books. **136**
- Purchase of latest editions in last 3 years. **136**
- No. of Journals **08**

#### 6. Departmental Research Lab.

- Space **13 sq.m.**
- Equipment **Available**
- Research projects utilizing Deptt research lab. **Available**

#### 7. Departmental Museum

- Space: **33 sq.m.**
- No. of specimens **16**
- Charts/ Diagrams. **29**

8. Space: OPD IPD

- No. of rooms **08** **17**

04 Patient Examination Chambers  
 01 Demo Room  
 01 Pay Room  
 01 Immunization Room  
 01 Child Rehabilitation/ Guidelines Clinic

03 Wards includes-  
 03 Treatment Rooms  
 03 Student/Doctors Duty Room  
 03 Demo Room  
 03 Store  
 03 Nurses Duty Room  
 01 Ward Pantry  
 01 Ward Side Lab.

- Patient Exam. arrangement: **Available**
- Equipments **Available**
- Teaching Space **Available**
- Waiting area for patients. **Available**

9. Office space:

Department Office		Office Space for Teaching Faculty	
Space (Adequate)	<b>Yes</b>	HOD	<b>18 sq.m.</b>
Staff (Steno /Clerk).	<b>Yes</b>	Professors	<b>18 sq.m.</b>
Computer/ Typewriter	<b>Yes</b>	Associate Professors	<b>16 sq.m.</b>
Storage space for files	<b>Yes</b>	Assistant Professor	<b>12 sq.m.</b>
		Residents	<b>14 sq.m.</b>

10. Clinico- Pathological conference **Once in a Month**

11. Death Review Meetings **Once in a Month**

12. Submission of data to national authorities if any –**Integrated Communicable Disease Surveillance, Vaccination.**

13. **Equipments: List of important equipments available and their functional status**  
*(List here only – NO annexure to be attached)*

Multipara Monitors	<b>Available</b>	Pulse Oxymeters	<b>Available</b>	Syringe pump	<b>Available</b>
Upper GI endoscope	<b>Available</b>	Ventilator	<b>Available</b>	Bronchoscope	<b>Available</b>
Dialysis machines	<b>Available</b>	ECG	<b>Available</b>	USG	<b>Available</b>
Echo – color Doppler	<b>Available</b>	CPAP	<b>Available</b>	Defibrillator	<b>Available</b>
Resuscitation kit	<b>Available</b>	Crash cart	<b>Available</b>	Transport Incubator	<b>Available</b>
Phototherapy Units (CFL & LED)	<b>Available</b>	Computerized PFT equipment	<b>Available</b>	Stadiometer/weighing scale	<b>Available</b>
Radiant warmer	<b>Available</b>	ABG machine	<b>Available</b>	Laminer Flow (desirable)	<b>Available</b>