

**Dr. NTR UNIVERSITY OF HEALTH SCIENCES**  
**VIJAYAWADA – 520 008.**

**Application format for the course of**  
**Post Doctoral Fellowship in**  
**Neonatology**  
**for the academic year 2018-19**

**PART – B**  
**Specialty specific information**  
**(Pediatrics)**

**General departmental facilities:**

- Total no. of beds in the department. ....
- No. of Units in the department. ....
- Unit wise teaching Resident staff (Annexed) ..... ..

Note: Unit wise teaching Resident Staff should be shown separately for each unit on a separate page.

## Unit wise teaching Staff:

Unit \_\_\_\_\_

Bed strength \_\_\_\_\_

S. No.	Designation	Name with Date of Birth	Nature of employment Full time/part time/Hon.	PG QUALIFICATION			<u>Experience</u> Date wise teaching experience with designation & Institution				
				Subject with Year of passing	Institution	University	Designation	Institution	From	To	Period

\* List of teaching staff with additional qualification post MD/DNB: - (DM/Diploma or Fellowship in Neonatology)

Sl.No	Name	Additional Qualification
1.		
2.		
3.		

1. List of Non-teaching staff: -

S.No.	Name	Designation

2. Staff Nurses:

- Total no of nurses
- Number of nurses trained in neonatal care
- Number of public health nurses
- Nurse: Patient Ratio: (total cots/total nurses)

3. Available Clinical Material:

- Average daily OPD.
- Average daily IPD.
- Average daily OPD of neonatal cases
- Average daily IPD of neonatal cases
- Average daily bed occupancy of neonatal cases

4. Intensive Care facilities:

I. ICU

- No. of beds
- Equipment
- Average bed occupancy

II. NICU

- No. of Beds
- Equipment
- Average bed occupancy
- Neonatal resuscitation & labour room care

III. PICU

1. No. of beds

2. Equipments:

- Stethoscopes with neonatal chest piece
- Oxygen hoods
- Phototherapy units
- Non invasive BP monitors
- Neonatal pulse oxy meters
- Transport incubator

3. Staff

IV. Blood bank

- Qualified and trained pathologist: Available/Not available
- Round the clock availability of blood / components: Available/Not available
- Average no of blood units collected per month
- Average no. of blood units issued per month
- Facilities for component separation: Available/Not available
- Round the clock availability of trained nurse: Available/Not available
- Valid License : Yes/No

- Average blood units consumed daily:
- Facilities of blood components available: Yes/No
- Nature of Blood storage facilities (Whether as per specifications). Yes/No
- All blood Units tested for Hepatitis C,B,HIV: Yes/No

5. Specialty clinics and services being provided by the department.

.....  
 .....  
 .....

6. Teaching facilities:

	Number	Size	Sitting capacity	LCD Projector
Seminar Rooms				
Demonstration Rooms				

Audiovisual Aids: Adequate / Inadequate.

7. Departmental Library:

- Total No. of Books.
- Purchase of latest editions in last 3 years.

8. Departmental Museum (Wherever applicable).

- Space:
- No. of specimens
- Charts/ Diagrams.

9. Departmental Research Lab.

- Space
- Equipment

10. Working Ward Side lab:

- Space
- Facilities
- Departmental Technicians

11. OPD Space:

- No. of rooms
- Patient Exam. arrangement:
- Equipments
- Teaching Space
- Waiting area for patients.
- Indoor Space:

12. Office Accommodation:

- Departmental Office
- Space
- Staff (Steno /Clerk).
- Computer/ Typewriter:

Office Space for Teaching Faculty:

- HOD /senior consultant
- Professor / senior consultant
- Assoc. Prof./ Reader / junior consultant
- Lecturer/ Asst. Professor / junior consultant
- Resident duty room

13. Equipments:

List of important equipments available and their functional status. Enclose separate list

.....

.....

.....

.....

.....

.....

14. Specialized services being provided by the department.

- General Pediatric care.
- Exchange Transfusion
- Phototherapy
- Paediatric gastroenterology (endoscopy)
- Paediatric Haematology
- Paediatric Nephrology (Dialysis)
- Paediatric Haematology
- Paediatric Cardiology (Echocardiography)
- Paediatric Neurology
- Any other

15. Specialized investigative procedures being done in the department.

- |                        | Functional/ Non-functional |
|------------------------|----------------------------|
| • Bronchoscopy         |                            |
| • G.I. Endoscopy       | --do--                     |
| • Ventilation:         | --do--                     |
| • Exchange transfusion | --do--                     |
| • Phototherapy         | --do--                     |
| • Echocardiography     | --do--                     |

16. Specialty clinics being run by the department:

- Immunization and Preventive Paediatrics.
- Community Paediatrics
- Thalassaemia management clinic
- Diarrhoea Clinic

17. List of publications from the department during the last 3 years in indexed and non-indexed journals.

<b>Sl.No</b>	<b>Article title</b>	<b>Author</b>	<b>Journal</b>	<b>Year of publication</b>	<b>Indexed/ Non indexed</b>

18. Any other information.

**Signature of the Head of the Department**

**Signature of the Head of the Institution**



**Part- C**  
**Information about the fellowship specialty**

**Neonatology**

**A. Statistical Data:**

1. Patient care load
  - a. No. of Neonatal special care Beds (excluding room in-in beds)
  - b. Annual admission to neonatal care unit
  - c. Facilities for out born babies (Yes/ No)
2. Annual deliveries in your hospital
3. Working age of unit (in years)  
Provide following statistical information of your unit for preceding 3 years:

	<u>20</u>	<u>20</u>	<u>20</u>
a. Live Births :Total	_____	_____	_____
<1000 g	_____	_____	_____
≥1000 g	_____	_____	_____
b. Still Births :Total	_____	_____	_____
<1000 g	_____	_____	_____
≥1000 g	_____	_____	_____
c. LBW incidence	_____	_____	_____
- %<2500 g	_____	_____	_____
- %<2000 g	_____	_____	_____
- %<1500 g	_____	_____	_____
d. Survival data for	_____	_____	_____
- <2500 g(%)	_____	_____	_____
- <2000 g(%)	_____	_____	_____
- <1500 g(%)	_____	_____	_____
e. Caesarian section rate (%)	_____	_____	_____
f. % un booked mothers delivering	_____	_____	_____

- |    |  |       |       |       |
|----|--|-------|-------|-------|
| g. | Perinatal mortality rate (per 1000 births)               | _____ | _____ | _____ |
| h. | Neonatal mortality rate (per 1000 live birth)            | _____ | _____ | _____ |
| i. | Neonatal mortality rate (<2000 g) (per 1000 live births) | _____ | _____ | _____ |

**B. Essential Requirements:**

**1. Physical Facilities:-**

- 1.1 Space per neonatal cot/bed
- 1.2 Separate room for (Yes/No)
  - Hand wash / gowning
  - Formula preparation
  - Store
  - Side laboratory
  - Doctor duty room
- 1.3 Uninterrupted generator power supply (Yes/No)
- 1.4 Adequate lighting in unit (Yes/ No)
- 1.5 Separate room for (Yes/No)
  - Mother's to express Breast milk
  - Procedures
  - Rooming – in high risk babies
- 1.6 Proximity to delivery room (Mention distance) - \_\_\_\_\_

**2. Staffing:-**

- 2.1 Head Nurse (ward sister) trained for 3 Months in accreditable neonatal unit (Yes/ No)
- 2.2 Give Nurse: patient ratio (Total cots/Total Nurses)
- 2.3 Medical Staff in unit
  - a. No. of senior resident/registrar
  - b. No. of Postgraduate students
  - c. No. of house-physician / junior resident
  - d. No. of Medical officers

- 2.4 Availability of resident doctor in unit all 24 hrs/specialist on call (Yes/ No)
- 2.5 Other staff
- a) *Public Health Nurse for unit*
  - b) *Ward clerk*
  - c) *Biomedical engineer*
  - d) *Technician for side laboratory*
  - e) *Labour room nurse trained in neonatal care in each shift*

**3. Facilities for Neonatal Resuscitation in Labour Room:-**  
(Yes/ No)

- 3.1 A wall clock with second's arm or Apgar timer
- 3.2 Radiant warming equipment
- 3.3 Suction facility (mucus extractor or pressure controlled Suction machine)
- 3.4 Two working infant laryngoscopes and endotracheal Tubes (2.5, 3.0, 3.5 mm) with adapters
- 3.5 Self inflating resuscitation bag and well fitting Neonatal face masks
- 3.6 Uninterrupted oxygen supply (with flowmeter)
- 3.7 Umbilical vein cannulation set
- 3.8 Essential drugs for resuscitation e.g. Adrenaline, sodabarbonate, saline, nalorphine etc.
- 3.9 baby warmer for post-resuscitation phase
- 3.10 Separate resuscitation room or extrawarm cabin with room thermometer

**4. Neonatal transport:-**  
(Yes/ No)

- 4.1 Warming during transport (Hot water bottle, transport incubator)
- 4.2 Oxygenation
- Uninterrupted oxygen supply from cylinders
  - FiO<sub>2</sub> monitoring
- 4.3 Resuscitation (self inflating resuscitation bag and mucus extractor)

**5. Thermoregulation:-**

- 5.1 No. of radiant warmers
- 5.2 Low reading thermometer (number available)
- 5.3 Room thermometers (number available)
- 5.4 No. of patient care rooms in unit

**6. Nutrition (Yes/ No):-**

- 6.1 Weighing scales
  - in labour room
  - in Nursery
  - in Lying – in ward
- 6.2 Written policy on breast feeding
- 6.3 Refrigerator (exclusively for nursery)
- 6.4 Microdrip sets
- 6.5 Availability of special intravenous fluids
- 6.6 Asepsis in formula preparation
- 6.7 Asepsis in IV fluid preparation
- 6.8 Other Equipment/facilities
  - a) *Electronic weighing scale*
  - b) *Electronic breast pump*
  - c) *Infusion pump*
  - d) *Laminar flow system*
  - e) *Urine bags*

**7. Infection Control (Yes/ No):-**

- 7.1 Uninterrupted water supply
- 7.2 a) One wash basin for 5 babies
  - b) Elbow operated
- 7.3 Availability of disposable hand wipes
- 7.4 Adequate disinfections
- 7.5 Adequate and regular supply of disposable equipment's  
i.e. needles, syringes, intracaths, etc

- 7.6 Written instructions for isolation of infected babies
- 7.7 Disposal of soiled linen in separate bins and counted outside nursery
- 7.8 Written instructions for –
  - a) Equipment disinfection
  - b) Room disinfection / epidemic control
- 7.9 Availability of sterile gowns and slippers
- 7.10 Maintenance of infection register

**8. Special monitoring and therapeutic procedures:-**

- 8.1 No. of stethoscopes with neonatal chest piece
- 8.2 No. of oxygen hoods
- 8.3 No. of phototherapy units
- 8.4 Uninterrupted supply of (Yes/ No)
  - a) Oxygen
  - b) Compressed air
- 8.5 No. of oxygen analyzers
- 8.6 Non-invasive BP monitor (Yes/ No)
  - a) Flush method
  - b) Electronic
- 8.7 No. of heart rate/ apnea monitors
- 8.8 Portable 24 – hr X – Ray facilities (Yes/ No)
- 8.9 Facilities for exchange transfusion (Yes/ No)
- 8.10 Other facilities:-
  - a) *Central oxygen & suction facility*
  - b) *Central supply of compressed air*
  - c) *Pulse oxymeter*
  - d) *Facilities for CPAP and ventilation*
  - e) *Flux meter*
  - f) *Peritoneal dialysis*
  - g) *Foot operated suction machine*

## 9. Investigation Facilities:-

### 9.1 Side laboratory facilities (Yes/ No)

1. Hemoglobin
2. Hematocrit
3. Dextrostix
4. Glucometer
5. Multistix
6. Microscope

### 9.2 Central laboratory

1. Serum bilirubin
2. Plasma blood glucose
3. Microbiology cultures
4. Serum calcium
5. Urine specific gravity
6. Serum electrolytes
7. Serum creatinine & Urea
8. Coagulogram
9. Blood counts (includes total & differential counts),  
Platelet count
10. CRP

### 9.3 Other laboratory services (Yes/ No):-

- a) *Microchemistry*
- b) *Blood gases*
- c) *Ultrasound*
- d) *Echocardiography*
- e) *CT scan*
- f) *Neonatal surgery*
- g) *Neonatal autopsies*
- h) *Urine/Serum osmolality*

## 10. Mother's Education and follow up (Yes/ No):-

### 10.1 Education of mothers of

- a) Low birth weight babies
- b) Normal weight babies

### 10.2 Follow up of high risk babies

- a) Neuromotor development testing
- b) Hearing testing
- c) Vision testing

### 10.3 Other facilities (Yes/ No)

- a) *Printed instructions in local language for mothers*
- b) *Home visit of high risk babies*

**11. Teaching program:-**

- 11.1 Events:
  - a) Clinical meeting
  - b) Seminars
  - c) Journal club
  - d) Perinatal mortality conference
  
- 11.2 Library well stocked (Give number)
  - a) Pediatrics books .....
  - b) Neonatology books .....
  - c) Indian Journals .....
  - d) Foreign journals .....
  
- 11.3 Seminar room (Yes/ No)
  - a) Epidiascope
  - b) Overhead projector
  - c) Slide projector
  - d) Photocopier

**12. Administration (Yes/ No):-**

- 12.1 Admission and discharge policies
  
- 12.2 Orientation of nurses
  
- 12.3 Orientation of doctors
  
- 12.4 Protocols on procedures
  
- 12.5 Guidelines for handling following equipment
  - a) Phototherapy unit
  - b) Oxygen analyzer
  - c) BP monitor
  - d) Apnea monitor
  
- 12.6 Proforma for normal and high risk neonate
  
- 12.7 Statistics
  - a) Monthly
  - b) Annual

**Signature of the Head of the Department**

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