

KERALA UNIVERSITY OF HEALTH SCIENCES

THRISSUR – 680 596, KERALA



REGULATIONS, CURRICULUM, AND SYLLABUS OF

MASTER OF HOSPITAL ADMINISTRATION (MHA)
(With effect from 2013-14 admission onwards)

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SECTION 1

Objectives:

1. To acquire knowledge in multi disciplinary and multi dimensional nature of health management, policies, rules regulations and scientific management approach in hospital Administration
2. To provide professional Hospital administration discipline for basic insight into the total health care delivery system
3. To provide knowledge in Hospital planning, human resource management, marketing and financing the hospital, managing material and quality focused health care services.
4. To mold the Administrators through practical training and skill development programme.
5. To Create the ability to identify the management issues ,analyze and overcome the health care challenges
6. To develop professional ethics and acquaint with the legislation pertaining to health care delivery system.

7. To create quality committed and patient centered administrators.

SECTION – 2

2.1 Minimum qualification for the admission of the course

Candidates for MHA course should be science graduate with a minimum of 50% marks in aggregate or in main subjects or a Commerce or Economics graduate with 50% marks in aggregate or main and has studied science subjects at plus two level. The degree should be recognized by any of the Universities approved by U.G.C. Candidates from statutory reservation categories are eligible for relaxation in percentage of marks as per government and university norms. (Since admission for 2013-2014 academic year is just completed, the above clause will be applicable for admissions from 2014- 2015 academic year onwards)

2.2 Selection of Students

The selection of students for the MHA course shall be made strictly on merit as decided by the Govt of Kerala/Kerala University of Health Sciences.

2.3 Registration

A candidate on admission to the MHA course shall apply to the University for Registration

- By making a formal application in the prescribed format.
- Original mark lists of the qualifying examination.
- Transfer certificate from the previous institution.
- Allotment letter from the competent authority who conducted the admission process
- Equivalency and migration certificate where ever needed.
- Original SSLC/Equivalent Certificate.
- The fees prescribed for the registration.

2.4 Duration of the Programme

The duration of the **MASTER OF HOSPITAL ADMINISTRATION (M.H.A.)** shall be for a period of two years on full time basis.

No candidate shall join any other course of study or appear for any other examination in this university or any other university during the period of study.

2.5 Medium of instruction and examinations

Medium of instruction and examinations shall be in English.

2.6 Attendance, progress and condonation

A candidate is required to put in at least 80% attendance in theory and practical subjects separately in a recognized institution approved by and affiliated to Kerala University of

					Uni. Exam)		
1	Paper I General Management	20	50	100	60	120	150
2	Paper II Hospital Administration Part I	20	50	100	60	120	150
3.	Paper III Research methodology & Biostatistics	20	50	100	60	120	150
4.	Paper IV Medical Records & Medical Equipment	20	50	100	60	120	150
5.	Paper V Organisational Behaviour & Managerial Communication	20	50	100	60	120	150
6.	Paper VI Operations Research	20	50	100	60	120	150
7.	Paper VII BMS & Epidemiology	20	50	100	60	120	150
9.	Paper IX Hospital Project	60	75	150	105	210	15days
10.	Paper X project		75	150	75	150	

	Defense & Viva Voce					
	TOTAL	200	1000		1200	

Second year

Sl. No.	No. And Name of papers component	Internal Assessment	University Examination		Minimum for pass (Internal uni. Exam)	Total	Contact Hours
			Min	Max			
1	Paper I Hospital Administration Part 2	20	50	100	60	120	150
2	Paper II Hospital Economics & Finance	20	50	100	60	120	150
3.	Paper III Management Accounting & Cost	20	50	100	60	120	150

	Accounting						
4.	Paper IV Materials Management & TQM	20	50	100	60	120	150
5.	Paper V Marketing for Health care Services & Strategic Management	20	50	100	60	120	150
6.	Paper VI Legal Framework for Hospitals	20	50	100	60	120	150
7.	Paper VII Skills Development in Hospital Administration (Internal)	80			40	80	200
8.	Paper VIII Hospital Project	100	100	200	150	300	45days
9.	Paper IX project Defense & Viva Voce		100	200	100	200	
	TOTAL	300		1000		1300	

2.9 Criteria for Pass

A candidate will be declared to have passed the whole examination, if he/she secures 50% marks in aggregate for all the written papers and project report and viva voce together of all

the semesters and with an individual minimum of 50% marks for each written paper (section wise minimum of 50% is not required for each section of the written paper for all papers where A & B sections are given i.e papers 3,4,5,&7 of first year and 2,3,4,&5 of second year), project report and viva voce, at the university examination .

2.10 Declaration of Class

Those candidates who secure more than 50% but below 60% will be placed in IInd class. Those candidates who secure more than 60% but below 75% marks in aggregate of all the semester examinations will be placed in 1st class. Candidate securing marks at the tune of 75% and above in aggregate will be declared as passed with distinction.

2.11 Award of rank

Ranks and medals shall be awarded on the basis of aggregate of the all university and internal examinations of the particular course. However a candidate who fails in one or more subject during the course shall not be eligible for the award of ranks and medals.

2. 12 Award of degree

A candidate who passes entire subjects of the course will be eligible for the award of degree during the ensuing convocation.

2. 13 Migration and transfer

Migration and transfer will not be permitted during the course of study.

- **Qualification and experience required for appointment as teacher on full time basis for MHA Course .**

Sl No	Designation	No Of Posts	Qualification	Experience
1.	Professor and HOD	1	MD (HHM) /DNB(HHA) /M. Phil (HHSM) / MHA/M.Sc. (HA)	10 years teaching experience at post graduate level in Hospital Administration with affiliation to a university established under law OR 15 years managerial experience in hospital after MD (HHM) /DNB(HHA) /M. Phil (HHSM) / MHA/M.Sc. (HA), of which at least 8

				years at senior level, comparable to that of an Administrator of 500 bedded multi specialty hospital and 7 years teaching experience at post graduate level in Hospital Administration with affiliation to a university established under law.
2.	Associate Professor	1	MD (HHM) / DNB(HHA)/M.Phil(HHSM) / MHA /M.Sc. (HA)	8 years teaching experience at post graduate level in Hospital Administration with affiliation to a university established under law OR 12 years managerial experience in hospital after MD (HHM) /DNB(HHA) /M. Phil (HHSM) / MHA/M.Sc. (HA), of which at least 7 years at senior level, comparable to that of an Administrator of 500 bedded multi specialty hospital and 5 years teaching experience at post graduate level in Hospital Administration with affiliation to a university established under law..
3.	Assistant Professor	2	MD (HHM) / DNB(HHA)/ M.Phil(HHSM) / MHA/M.Sc. (HA)	5 years teaching experience at post graduate level in Hospital Administration with affiliation to a university established under law OR 8 years managerial experience in hospital after MD (HHM) /DNB(HHA) /M. Phil (HHSM) / MHA/M.Sc. (HA), of which at least 5 years at senior level, comparable to that of an Administrator of 500

				bedded multi specialty hospital and 3 years teaching experience at post graduate level in Hospital Administration with affiliation to a university established under law.
4.	Lecturer	6	MD (HHM) / DNB(HHA)/M.Phil(HHSM) / MHA/M.Sc. (HA) / PG with LL.B / LL.M / MBA / MHRM / MA (PM&IR) / CA MSW / M.Com. M.Sc.(Anatomy) M.Sc.(Physiology)/MPT/M.Sc Microbiology)	1 year teaching experience at postgraduate level in hospital administration OR 3 years managerial experience in hospital.
5.	Asst. Lecturer/ Tutor	2	MD (HHM) / DNB(HHA)/M. Phil (HHSM) MHA / PG with LL.B / LL.M / MBA / MHRM / MA (PM&IR) / MCA /CA M.Com/M.Sc.(Med. Docu.) B.Tech. M.Sc.(Anatomy) M.Sc.(Physiology) M.Sc.(Microbiology)/MPT	

Core faculty should have MD (HHM) /DNB(HHA) /M. Phil (HHSM) / MHA/M.Sc. (HA) from an institution affiliated under law. The core faculty only can guide the students for the project work and shall be an examiner for the viva-voce. Faculty student ratio is limited to 1:5 per year.

Maximum number of students (including first year and second year MHA) a faculty could guide at a time is limited to five.

Qualifications of Staff

Teachers with the following qualifications can also handle various related theory papers.

- MBBS & MD (Hospital & Health Management)
- MBBS & DNB (Hospital & Health Administration)
- M. Phil (Hospital and Health Systems Management)
- Master of Hospital Administration (MHA)
 - M.Sc. Hospital Administration
- Postgraduate Degree with LL.B., or LL.M.,
- Master of Business Administration (MBA)
- Master of Human Resource Management (MHRM / MA (PM & IR)
- Master of Social Work (MSW)
- M.Com. (Master of Commerce)
- M.Sc.(Physiology) (Microbiology) (Anatomy)
- M. Sc.(Medical Documentation)
- M.C.A
- M.Sc. (Anatomy)
- MPT
 - MBA
 - MA Economics
- CA
- B.Tech (Bio medical)

2.15 Infrastructure Requirements and Intake criterion:

Instructional Area:-

Instructional area includes two classrooms with audiovisual including LCD projection facilities, library with online facility, seminar hall etc. The carpet area requirement of the classrooms depends upon the number and type of seating arrangements for the students with provision for a writing board, a table and a chair for faculty.

Type of Rooms	Carpet area requirements in Sq.m/ student		
	Minimum	Desirable	Suggested ranges in Sq.m
Classroom for 20 students	1.3	1.5	2026

•Basic Medical Sciences laboratory cum museum to display and teach various specimens,exhibits, charts, models etc.

Administrative area in Sq.m:- (When the centre is attached to a college)

Administrative area comprises of HOD's office of 10 sq. m, and staff room of 30 sq.m. and basicmedical sciences laboratory cum museum to display and teach various specimens, exhibits ,charts, models etc.

Administrative area in Sq.m:- (When the centre is a stand alone Institute and not attached to a college)

Principal's Room	20
Principal's Office	12
Conference Room	50
Main Office	25
HOD & Faculty room	30
Reception	10
Total	147 sq. m

Library

Library should have a space requirement of 20 Sq.M. The library should be linked to internet with all library software packages linking all major libraries to execute references, and research studies.

Once the programme is in full swing there should be minimum 1520 number of titles in each subject offered/taught and total minimum of 250 titles.

At the initial stage the institution need to have a minimum of 200 titles and to add up in the next three years.

Minimum 3 specific topic related magazines/journals/periodicals needs to be subscribed.

Intake

Yearly intake in a college is limited to a maximum of 20 students. For 20 intakes the college shall have own hospital with 500 bedded capacity with facilities mentioned underneath and the occupancy of the hospital should be 75% (i.e. the daily average should be more than 375 in patients).

Facilities required at the hospital are:

The institution must have its own hospital of the following specifications to conduct MHA course in order to give practical exposure to students in hospital management learning

- There should be a minimum of 500 beds in the hospital
- The hospital should be within 7 K.M. radius of the teaching institution.

Occupancy of the hospital should be 75% (i.e. the daily average should be more than 375 in patients).

- All main medical and surgical specialties including general medicine, general surgery, obstetrics, and gynecology, paediatrics, ENT, Ophthalmology, Orthopaedics, Dermatology, Causality, etc. should be there.
- At least five major super specialties like Cardiology, Neurology, Nephrology, Urology, Neurosurgery, Cardiothoracic surgery, etc should be there.
- All administrative, supportive and ancillary departments like Administration,- Materials Management, Stores, - Personnel – Public Relations – Finance – Accounts – Registration – Medical Records – Bio Medical – Radiology – CSSD – Corporate Relations – Insurance – Billing - Pharmacy – Canteen – Plumbing – Electrical – Civil – Laundry – Waste Management – ETP – Incinerator – Physiotherapy – Medical and Psychiatric Social Work – OPD– ICUS – Security – Casualty – Laboratory – Microbiology – Bio Chemistry – Blood Bank – Haematology – Histopathology, Pathology.etc should be there.

Teaching and training requirements

- Class Room Boards
- Class Room chairs with writing boards.
- Overhead Projector, screen and marker: Two Numbers
- Liquid Crystal Display: two Numbers with supportive facilities
- **Methodology to be followed for teaching and project placements:**

The proficient and lively theory classes shall be equally blended with various practical applications and group activities. Activities aimed at the overall development of the students shall be included. Hospital visits, regular visits to different administrative sections of the hospital, visits to various service organizations and community programme and camps and organizing seminars and conferences etc also shall be done to improve the overall capacity of the candidates.

Various practical training programmes have been keenly incorporated throughout the MHA course. In addition to the two major placements, students are exposed to the management of various public and private sector institutions as well as voluntary organizations and community Health programme.

In the first year students shall undertake a project for 15 days duration which shall be done in established hospitals with more than 300 beds within and outside the state. The students have to select any special department or management issue as the topic of work. The report is to be prepared as per research methods.

The final year placement extends over 45 days and is done in major hospitals with more than 300 beds. The student is expected to study a particular topic or issue relating to hospital administration. Satisfactory completion of project placement and presentation in the form of a project report as per the format given in annexure is mandatory for appearing the viva voce examination in each year. Weightage in marks will be given for project reports for appropriate application of the methods and techniques of statistics and operations research.

SECTION 3

Subject and Course Content

I Year

PAPER 1 : GENERAL MANAGEMENT

Objectives

Management

This module will introduce students to the field of management. It covers the historical emergence of management as a professional field and academic enterprise. Students will be confronted with the core competence areas of management.

Human Resource Management

This module enables the student to get a perspective on human resource. Further it familiarizes the students with various concepts, issues and practices in dealing with people in health sector organizations.

CONTENTS:

Management

Unit 1

History and growth of management concepts- Evaluations of management theories. Scientific management school - classical organization theory school - The behavioral school- Management science school - Systems approach - Contingency approach. Management Levels and Skills-Management- Organizational Effectiveness -

Unit 2

Planning- organizational planning- steps- Environment -Environmental factors Environmental Analysis -SWOT Analysis- objective setting – Types of plans – Forecasting – Barriers in effective planning- Management by objectives

Unit 3

Decision Making – Types of decisions – steps. Organizing – Process – Departmentalization – Delegation – Decentralization – span of control – formal and informal organization – line and staff functions – Authority – Power

Unit 4

Staffing – Manpower planning –recruitment– Selection – Training and Development Controlling – Organizational control – Control techniques

Unit 5

Directing –Orders- job satisfaction – morale- Coordinating- types-techniques-difficulties Time management Discipline -disciplinary proceedings. Case studies—Hospital visits.

Human Resource Management

Unit 1

Concepts : definition – Scope of human resource management – Role of personnel function – Objectives – Advisory function – Relation to other departments – Typical organization set up of a personnel department.

Unit 2

Manpower planning – Job Analysis - Job description – Placement – Source of labor supply – Methods of selection – Tests in selection – Induction.

Training and Development – Objectives – Types – Methods.

Unit 3

Management Development –Meaning – Scope – Methods.

Motivation

Performance appraisal

Counseling

Work environment – Fatigue – Safety and accident prevention – Accident records.

Unit 4

Morale – Employee attitudes- Behavior – Significance of employees productivity – Job satisfaction – Job change – Job rotation – Job enlargement – job enrichment.

Collective bargaining – Employee participation in management

Wage and salary administration – Principles and techniques of wage fixation – Job evaluation – Merit rating methods of wage payment – Incentive schemes.

Unit 5

Trade unions – Organization structure – Policies – Joint consultation

Grievances

Organizational disputes

Organizational exit – Planning for retirement

Industrial safety

Social Security

Case studies

References

Harold Koontz, Heinz, weimrich: Management

James A.F., Stones, R. Edward : Management

Rustom S. Daver : Priciples of Management

Tripathi P.C and Reddy P.N.: Principles of Management

James A Willian : Hospital Management., Mac Millan Education Ltd., New Delhi.

Rao U.S., Narayanan P.S.: Management Concepts and Thoughts

Basu C.R: Business Orgaisation & Management, Tata McGraw Hill

Ivancevich, Donnelly & Gibson: Management Principles & Functions, AITBS Publishers

Chattergee NN: Management of Personnel in India Enterprises, Allied Book Agency, Calcutta

Dale S. Beach : Personnel., Mac Millan Publishing Co.,

Finley RT: Personnel Manager and his job., American Management Association., New York.

Mammoria C.B.: Personnel Management, Himalaya Publishers

Tripathi P.C. : Personnel Management and Industrial Relations., Sultan Chand & Co.,

J.B. Miner and M.G.Miner: Personnel and Industrial Relations – A managerial Approach.

Southwick Arthur F: Law of Hospital and Health Care Administration.

Jyothi P & Venkatesh D.N: Human Resource Management, Oxford

I Year

PAPER II- HOSPITAL ADMINISTRATION -I

Objective

To enable the students gain insight in to various aspects like importance, functions, policies and procedures equipping, controlling, co-ordination, communication, staffing, reporting and documentation of both clinical and non clinical services in a hospital.

The course enables the students to plan in advance to face the various problems related to hospital administration and to take preventive actions accordingly. This also enables the students to acquire knowledge about the concepts for provision of good facilities for patient

care and to assure best possible return on investment in health facility through good planning.

Contents

UNIT 1:

Health : Definition and dimensions of Health, Evolution of Modern Medicine, Review of report on Health care, Bhore Committee, Mudaliar committee, Jain Committee, Chaddha Committee, Kartarsingh committee, Srivastava committee & committee on plan & projects, Bajja committee & Rao Committee. Elements and principles of Primary Health care, Organisation network of health & family welfare services the centre ,state ,district & block level, Indian Public Health Standards for PHC, Indian health care system.

UNIT 2

Hospital: Definition, History of hospitals, changing concept of Hospitals, Types and classification of hospitals, Hospitals in India-today, ownership, utilization

UNIT 3

Hospital as an Organisation: Uniqueness of Hospital Organisation, principal types of hospital organisation, general principles of hospital organisation, Hospital organisational Functions, Governing authority, organisation and functions of governing body, Hospital organisational structure- Hospital Committee, Medical staff Organisation and the objectives. **Hospital as system:** System approach to hospital administration, Hospital as a system, hospital as a part of social system , system approach to hospital administration, Hospital and Community.

UNIT 4

Hospital Utilisation and statistics: Indices of measurement of hospital utilization, indices relating to the Hospital, daily & monthly analysis, Census - indices relating to the population at risk, Factors influencing hospital utilization,

UNIT 5

Hospital Administration as a specialty: Role and function of hospital administrator, hospital as an organization, profile of hospital administrator, Role of hospital administration, Skill of Hospital Administrator, Education and research in Hospital Administration.

UNIT 6

Health care System in Developed and Developing countries: Developed & Developing reasons, Health Systems, Levels of health care, Health team concept, Millennium Development goal. International health: WHO, UNICEF, UNDP, ILO, SIDA, DANIDA, International Red Cross, CARE.

Hospital Planning

UNIT 7:

Introduction: Hospital planning, measuring community needs, Service required – services available, external internal factors.

Planning :Principles of planning – Regionalisation – Feasibility study - Hospital planning team , Hospital consultant , Hospital architect – Planning process – Size of the hospital – Securing fund –Site selection –site survey – land requirements – size of the site- land acquisition - Master Plan- planning for growth and change, consideration based on climate, — Hospital zone, Engineers – space requirements - Working drawings and documents - water requirements, electricity, sewage disposal, traction system, fire protection – approval of plan - tender –Circulation – Architect’s brief– Equipping a hospital –purchase of capital equipments - Interiors and Graphics –taking over and Commissioning - Shake down period

UNIT 8

Planning, designing, organization and management of:

Clinical services: Outpatient department- Accidents and Emergency service department, Inpatient department, Operation Theater – Intensive care unit – Physical medicine and rehabilitation services.

Diagnostic and therapeutic services: laboratory services – Radiology services – Transfusion services - Audiology and Speech pathology service – Pharmacy – Dialysis unit - Sleep laboratory, ECG, Echo & TMT, NCV, EEG,

Unit 9

Planning and designing of Supportive and utility services: Central sterile supply department (CSSD) – Linen and laundry services – Dietary services – hospital housekeeping – Hospital engineering services –

Hospital Transportation services – Mortuary services – Central store – Medical record department – Front office and Lobby – Administrative care Unit – Hospital Information system

UNIT 10

Standards for designing hospital facilities: General standards - Mechanical and Electrical standards – centralized medical gas system – disaster management – safety and security system – fire hazards – Occupational safety – Bio medical waste Management including radioactive & drug waste handling – Nosocomial Infections – Heating Ventilation and air conditioning - Lighting in Hospitals – Way finding in Hospitals

References:

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2. Desai VA: Hospital Administration Vol. 1, Madurai, 1989.
3. Goel SL & Kumar R: Hospital Administration and Management Vol. 2., New Delhi., Deeps. Hall
T.L. & Mejia A: Health Manpower planning – principles, methods and issues., WHO 1978.
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18. Sharma K R, SharmaYashpal (2003) – A handbook on hospital Administration, Durga Printers, Jammu.
19. Sharma, Madhurai (2003) – Essentials for Hospital Supportive Services, Jaypee Brothers, New Delhi
20. Tabish, Syed Amin – Hospital Planning, Organisation and Management.
21. John Rea., Jeffer J. Frommelt: Buildings a Hospital – A prime for administrators.
22. James Lifton., Ownen B. Hardy: Site Selection for health care facilities.

I Year

PAPER III – Research Methodology & Biostatistics

Objective

Research Methodology

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

Biostatistics

To assess health status and needs of the community, for planning, implementation and evaluation of health programme for hospital/health management. It also enables to analyse the performance of the hospital.

Contents

Research Methodology

Unit 1

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

Unit 2

Research design-types- explorative – descriptive – experimental

Unit 3

Sampling techniques: Criteria of a good sample – sampling designs – simple random sampling – stratified sampling – systematic sampling – multi phase & multi stage sampling – sample size – use of sampling – errors in sampling.

Unit - 4

Methods of data collection – classification of data – construction of frequency distribution table – tabulation of data – general rules of tabulation – types of tabulation.– source-methods-tools – observation – personal interviews-interview schedule - Presentation of data – diagrammatic – graphic – types – line-bar-pie-scatter-pictogram-spot map-histogram-frequency polygon-frequency curve - Ogive

Unit - 5

Hypothesis – testing of hypothesis(theory) – bias - Content analysis - Data processing and analysis-problems-types of analysis-inferences planning evaluation - Interpretation and report writing – meaning – techniques of report writing - Action research programmes – Practical: Project work and seminars

Bio Statistics

Unit - 1

Statistics – definition – meaning – branches – biostatistics – health statistics – vital statistics, Application and uses of biostatistics in health management and epidemiology. Presentation of data – diagrammatic – graphic – types – line-bar-pie-scatter-pictogram-spot map-histogram-frequency polygon-frequency curve – Ogive

Unit - 2

Measures of central tendency – mean (calculation for individual, discrete and continuous series) median (Calculation for individual, discrete and continuous series – mode (for individual series). - Empirical relation connecting mean, median and mode. Merits and demerits of each type.

Unit -3

Measures of dispersion: Range and Mean deviation (for individual series) – Standard deviation (Calculation for individual, discrete and continuous series.)

Unit - 4

Co-efficient of correlation – uses – different types of correlation – scatter diagram – correlation coefficient – rank correlation coefficient. Regression – basic concepts – linear regression – lines of regression – estimation using lines of regression.

Unit - 5

Probability – basic concepts. Normal distribution – binomial distribution – characteristics, importance, uses, merits & demerits – Tests of significance – uses – sampling distribution – standard error – null hypothesis – levels of significance – test for large sample – normal test – test for proportion – test for small sample – simple test – paired test – unpaired t test – chi-square test (for a 2 x 2 table) - Estimation – basic concepts – interval estimation – population mean and proportion.

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Festinger and Katz: Social Research., Longman., London

Jathoda Marie et al: Research Methods in Social Relations., Free Press., New York.

Kothari C.R.: Research Methodology – Methods and Techniques., Wiley Eastern Limited., Delhi.

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Rao NSN: Elements of Health Statistics., Text Book Agency, Varanasi

Mahajan B.K: Methods of Biostatistics. Kothari Book Depot, AD Marg., Bombay

Potti L.R: A Textbook of Statistics, Yamuna Publications. Sreekanteswaram, Trivandrum

Lancaster H.O: Introduction to Medical Statistics, John Wiley & Sons, New York

Leius A.E: Biostatistics in Medicine Little Brown & Co. Boston

Hill A.B. Principles of Medical Statistics, Oxford University Press., New York

Lwanga S.K & Cho-Yook-Tye: Teaching Health Statistics Twenty Lesson & Seminar Outlines., CBS Publisher

I YEAR

PAPER IV – MEDICAL RECORDS & MEDICAL EQUIPMENTS

Objective

Medical Records

The main objective of this course is to provide a through knowledge and familiarity on the importance of medical record sciences, medical terminology. Various theoretical and practical issues in the context of the above areas are covered here.

Medical Equipments

The main objective of this course is to provide a through knowledge and familiarity on the importance of equipment management and maintenance in hospital.

Contents

Medical Records

Unit - 1

Medical Terminology - Objectives - Basic concepts - Elements of medical terms - Root/stem - Prefixes - Suffixes - Colours - Numerals - Symbols - Abbreviation - General and special practices in medicine - Suffixes, words and phrases on operative terminology - Terms pertaining to body as a whole

Unit - 2

Health Information Management - Historical Development of Medical Record - Uses and values of medical record - Medical record forms – basic and special - Flow of medical record - Registration - Numbering – unit, serial, serial –unit -- Deficiency checking - Assembling

Unit - 3

Coding – ICD X, ICD 9-CM, CPT – 4, ICP, ICD - 10 - Indexing – master – patient ,disease index, physician, operative - Filing – alphabetic, terminal digit, middle digit, straight numeric.

Unit - 4

Format types – source oriented (SOMR), problem oriented (POMR) integrated - Mental health record - Analysis of medical record – Qualitative, Quantitative and statistical - Committees – executive; credential; safety; infection surveillance, prevention and control; medical record; audit

Unit - 5

Legal importance of medical record: Consent, release of information, legal cases, medical record as legal document - Electronic Medical Record (EMR)

Medical Equipments

Unit 1

Bio-medical equipments – requirements – function – allocation to various therapeutic and investigative departments.

Unit 2

Radiology: X-ray –fluoroscopy – CT – MRI-PET SCAN. /Biochemistry – Calorimeter – flame Photometer – Spectrometer – Coulter counter – Blood gas analyser – Auto analyser.

Physiotherapy: Muscle stimulator – short wave diathermy – ultrasonic and microwave diathermy.

Unit 3

Urology – haemodialysis – lithotripsy./ Cardiology – ultrasound scanner and Echocardiogram-Angiogram – Tread Mill –ECG monitor and recorder. /Neurology – EEG – EMG – VEP. /ENT: Audiometer. /Cardiac care Unit – pacemakers – defibrillator – ventilator – infusion pumps – patient monitoring system. /Ophthalmology: Fundus camera – Nd – YAG & argon lasers – perimeter.

Unit 4

Operation Theatre – ECG monitor – anaesthesia machine – pulse oxymeter suction apparatus – endoscopes – electrosurgical unit – heart lung machine – oxygenerators – autoclave – sterilisers.

Unit 5

Maintenance – preventive – breakdown. Electrical safety of medical equipments – accident prevention – psychological effects of electrical current – diagnosis – calibration – repair of equipments – radiation safety – effects of radiation – safety precaution – protection methods – hospital safety. Trouble shooting biomedical equipments.

References

Hogarth .P.: Glossary of Health care terminology., WHO Regional Office., Europe.

Edna Huffman : Medical records Management Record company, Illinois., USA

Park K: Park's Text Book of Preventive and Social Medicine., M/s Banaridas, Jabalpur.

Khandpur R.S. Hand Book of Biomedical instrumentation, Tata McGraw Hill Publishing co.,

Leslee Cromwell: Biomedical Instrumentation and Measurement

Park K: Park's Text Book of Preventive and Social Medicine.,M/s Banaridas, Jabalpur.

I YEAR

PAPER V – ORGANIZATIONAL BEHAVIOUR & MANAGERIAL COMMUNICATION

Objective:-

Organisational Behaviour:

To familiarize the students with the behavioral patterns in various context in an organization and to develop insight into ones own self and the functioning of others.

Managerial Communication:

The topic is intended to provide knowledge and skills about various communication proceedings involved in the management process and also to acquaint them the need of effective public relations.

Contents:-

Organisational Behaviour:

Unit 1

Organizational behaviour: nature – scope – meaning – significance – importance – classification.

Organizational Goal- importance – individual goals – group goals

Unit 2

Individual behaviour: Personality – learning – attitudes- perception – motivation – job satisfaction Motivation – theories – frustration – conflict management – stress management Job satisfaction – theories – promoting job satisfaction – problems of absenteeism and turnover

Unit 3

Group behaviors: Types – formal – informal – group process – characteristics- group culture – group formation – social influence – group dynamics – group conflict – interpersonal – inter group – sociometry – interaction analysis.

Leadership and supervision – concepts – theories – functions – models – factors influencing leadership role – essentials – styles – supervision – pattern of supervision.

Unit 4

Decision making – process – types – influencing factors – management techniques.

Division of labour – principles – group in organization – co-ordination – inter and intra coordination.

Team Building – need in health sector – team meeting.

Organizational dynamics and change – types – sources – change process – human elements in change.

Unit 5

Organizational development: Concept- objectives – goals – process – behavioral sciences approach to OD- power and politics – control – organizational effectiveness – organizational climate – organizational culture.

Industrial engineering – Ergonomics – Work simplification – Job enlargement – Job enrichment – Value analysis – time study- Motion study.

Mental and Health problems in organization.

Application and cases with special reference to hospital / health administration

Practical : OB lab experiments

Managerial Communication:

Unit - 1

Communication in management process – effectiveness – Communication opportunities – Choice of media – Formal – Informal – Types – techniques - Group communication – Methods – Problems – Solutions – Meetings – Committees – Conference responsibilities of chairman – Reporters – Participants – Reporters role - Speeches – Structure of speech – Drafting of speech – Speeches for different occasions -

Unit - 2

Report writing – Types of report – Structure – Methods of collecting and preparing material - Drafting of report – Preparing a press release – Press conference - Business correspondence – Drafting of letters – Circulars – Answering letters. Office orders – Office circulars – Office notes – Suggestions – Complaints – Office memorandums.Meeting of Board of Directors – Board report – Chairman’s speech - Meeting documentation – Notice of the meeting – Agenda – Chairman’s speech – Recording meetings – Writing minutes – Minute book – Writing meeting reports – Assignment – Writing annual report

Unit - 3

Organizational communication-its evaluation - Research communication - Electronic Media and communication - Public relations – Scope – Tools – Public relation as a catalyst for change - Public relations – With individual – Group organization – Press – Government departments - Press language – News – News writing – Publicity – Media planning

Unit - 4

Group process lab: Workshop – Seminar – Media and advertising lab Self development and assessment – Self assessment- self awareness – perception and attitudes – values and belief system – personal goal setting – career planning – self esteem – Building self confidence

Planning, preparation, delivery, feedback and assessment of – group discussion and oral presentations.

Unit - 5

Interview – Listening and observation skills – Body language - Managing time - Improving personal memory – rapid reading, notes taking – complex problem solving – creativity.

Case presentation and practical in the above areas.

References:

Fred Luthans: Organizational Behaviour McGraw Hills., New York

Robbins S.P.: Organizational Behaviour., Eaglewood Cliffs., New Jersey, Prentice Hall Inc.

Koreman: Organisational Behaviour at Work – Organizational Behaviour., McGraw Hill Publishing Co.,

Hilt, Miller, Colella: Organisational Behaviour (A strategic Approach)

Prasad L.M: Organisational Behaviour, Sultan Chand & Sons

Aswathappa K: Organisational Behaviour

Stephen M. Mitchell: Health Care Management – A text book in organization theory*
behaviours Colin Grant: Hospital Management

George F. Wieland: Improving health care management. Organizational development and change.

Cummings LL: Towards Organizational

Dwivedi: Human Relations and Organizational Behaviour., Macmillan India Ltd., Madras.

Dalmer Fisher: Communication in Organizations , Jaico Publishing Co., Bombay

Balan K.R. Prof: Corporate Public Relations, Sterling Publishers Pvt.Ltd., N. Delhi.

Krishna Mohan & Meera Banerji, Developing Business Communication., Mc Millan Education Ltd.

Rajendra Pai & Bhatnagar OP: Education and Communication for department

Raymond V Lesikar John., D. Pettit Jr & Lakshman C Arya: Business Communication, All India Traveller Book Seller., New Delhi.

Raman Meenakshi & Prakash Singh: Business Communication

Sharma R & Krishnamohan: Business Correspondance & Report Writing, Tata McGraw Hill

I YEAR

PAPER VI – OPERATIONS RESEARCH

Objective

The course is intended to guide students to understand the various OR techniques applicable to hospitals which helps to improve the effectiveness and efficiency of hospital services.

Contents

UNIT 1

Evolution of Operations Research - Models - Formulation of Models - Using models for problem solving -Techniques of Operations Research - Limitations of Operations Research - Latest advancement in O.R.- application of OR in the field of health care.

UNIT 2

Requirements of L.P. Applications of L.P. - Graphical methods and Simplex method of solving optimization problems - Duality and Sensitivity Analysis

UNIT 3

Transportation model - Balanced and Unbalanced problems - North-West Corner rule –Least cost entry method - Vogels Approximation method – Stepping stone Method- MODI method - Assignment model - Hungarian model – Routing problems.

UNIT 4

Inventory costs - cost of average inventory - Optimum Number of orders per year - Optimum days supply per order - Optimum rupee value per order - assumptions - Applications of EOQ in Production process - Reorder point - Lead Time - Safety Stock – News paperboy problem – ABC analysis.

UNIT 5

Waiting line models-Structure of a queuing system- Definitions of waiting lines –Queue models of(1) Single channel with infinite capacity (2)Arrival and departure following poisson distribution, and service rate following Exponential Distribution

UNIT 6

Decision Theory – Decision making under certainty - uncertainty - conditions of risk. Game theory - Two person Zero sum Games - Pure Strategy - Mixed Strategy - Dominance - Mix N Games - Graphical solution - Games and Linear Programming.

UNIT 7

Network models- PERT-CPM – Float and slack – Analysis of CPM and PERT network - Resource allocation - Float and slack - Other network models

UNIT 8

Capital equipment replacement - Replacement of terms that fail completely - Individual vs. Group replacement.

UNIT 9

Sequencing - Problems with 'n' jobs and 2 machines problems with 'n' jobs and 3 machines -

UNIT 10

Simulation – concepts and applications – Monte-carlo simulation – Simple problems in inventory and queuing.

Reference

Israel Brosh : Quantitative Techniques for Managerial Decision Making., Prentice Hall Co.,
Dharani Venkatakrishnan S. Operations Research., Keerthi Publishing House., Coimbatore
Kenneth S. Brown Jack B. Revelle: Quantitative Methods for Managerial decisions Addison's.
Srivasthava. U.K. Shenoy G. V, Sharma S.C: Quantitative Techniques for Managerial
Decisions.

Handy A Taha: Operations research , Sultan Chand & Sons.

Sharma S.D: Operations Research for Management Decisions, Kedar Nath Ram Nath & Co

Sharma J.K: Operations Research theory & applications Macmillan

I YEAR

PAPER VII – BASIC MEDICAL SCIENCES & EPIDEMIOLOGY

Objectives

Basic Medical Science

The course enables the students to get a general understanding of the biological structure and basis of human biology and pathogens and to understand the spectrum of health and disease to evolve health promotion strategies in health system management. The student is not expected to have a detailed study of the subjects.

Epidemiology

To apply the tools of epidemiology for the prevention of disease, the promotion of health and formation of national policies of social relevance. To use epidemiological research to detect association between modifiable, hereditary, social and Environmental factors and specific disease prevention.

Basic Medical Science

Unit I. General Anatomy (10hrs)

Terms and Subdivisions – Cell structure and Cell division - Epithelium and glandular tissue – Connective tissues – Cartilage – Lymphatic tissue – Nervous tissue – Vascular tissue – Muscular tissue – Skin and appendages – Identification of microscopic slides.

Unit II. Systemic Anatomy (20hrs)

Overview of Cardio Vascular System – Respiratory – Gastro Intestinal – Lymphatic – Endocrine – Central Nervous – Autonomic Nervous – Musculoskeletal – Excretory – Reproductive – Display anatomical systems.

Unit III – Physiology of Haematology, CVS and Respiratory System (10 hrs)

Introduction of Haematology – RBC – WBC – Platelets – Coagulation of Blood – Blood Groups – Blood Volume - Functional Anatomy of CVS – Conducting System – Properties – Cardiac Cycle – Cardiac output – Blood pressure – ECG – Special Circulation – Shock - Functional Anatomy of Respiratory System – Mechanism of respiration – Pressure changes – Transport of Gases – Regulation of respiration – Applied Physiology.

Unit IV – Physiology of GIT, Renal, Endocrine, Special Sense and CNS (15 hrs)

Functional Anatomy of GIT – Secretions – Movements – Disorders- Digestion and Absorption - Functional Anatomy of Renal Physiology – Filtration- Secretion – Reabsorption – Micturition – Body temperature regulation and skin - Functional Anatomy of CNS – Synapse – Receptor – Reflex – Spinal cord with tracts – Motor system – Higher functions and disorders -Special senses – Olfaction – Taste – Audition – Vision - Functional Anatomy of Endocrine System – Pituitary hormones – Thyroid hormones – endocrine Pancreas – Adrenal hormones – Calcium Metabolism and endocrine regulation – Other endocrine glands.

Unit V – Microbiology (20hrs)

Introduction to microbiology – History – Definitions – Classification of microbes – Parasites – Vectors – Disease causes and transmission – Common pathogenic bacteria – Viruses – Fungi – Parasites – Protozoa – Helminthes – Entomology – Vector of malaria – Filaria – Plague – Rodents – Sterilization – Methods – Applications – Home – Hospital – Community – Bacteriology of water – Milk – Food – Pasteurization – Chlorination – Water sanitation.

Epidemiology

Unit - 1

The scope and uses of health research, especially epidemiological research and its evolution to modern concepts and areas of application. Fundamental measures of disease frequency (prevalence, cumulative incidence, incidence density) and of risk factors – disease association (risk, relative risk, attributable risk, odds ratio) Applied measures of disease frequency.

Unit - 2

Guidelines for the development of a well conceived research question - Overview and detailed aspects of the most relevant types of epidemiological study design: ecological design, cross sectional design, case control design, prospective and retrospective cohort design, experimental design. - Core principles of health measurement and diagnosis (validity, reliability, sensitivity to change, feasibility). - Principles and applications of screening for disease. Source of bias in the interpretation of etiological, prognostic and diagnostic research

Unit - 3

Epidemiology of Communicable disease: Classification of communicable diseases – agents – vectors – disinfection – surveillance – investigation – containment – control – eradication.

Respiratory infections – chicken pox-measles – rubella – influenza – mumps – diphtheria – whooping cough – meningitis – tuberculosis

Intestinal infections – polio mellitus – viral hepatitis – cholera – acute diarrhea disease – typhoid fever – food poisoning – amoebiasis – ascariasis – hookworm – helminthic malaria – yellow fever – filaria – dracontiasis – dengue - encephalitis

Unit - 4

Zoonosis – Rabies – Japanese Encephalitis –KFD – Brucellosis – Plague – Human Salmonellosis – Teaniasis – Hydatid Disease – Leishmaniasis – Leptospirosis – Rickettiosis – Scurb Typhus – Murine Typhus – Tick Typhus

Surface Infections : Trachoma – Tetanus – Leprosy – STD – Yaws – Scabies – Ebola – HIV/AIDS.

Unit - 5

Epidemiology of Non communicable disease and conditions

Risk Factors – gap in natural history - Coronary heart diseases – Hypertension – stroke – rheumatic heart disease – cancer – diabetics – obesity – Blindness – Accidents – Peptic Ulcer – Arthritis - Nutrition – Nutrition intervention for health promotion - Lifestyle diseases – Geriatrics – Mental

References

Anatomy and Physiology for Nurses, - Physiologoy: K. Madhavan Kutty

Microbiology : Ananthanarayan, - Parasitology : Chatterjee

Entomology : Roy and Brown

Park L: Text book of preventive & Social Medicine : M/s Banarasidas. Jabalpur

Robert L. Heatal: Principles of Epidemiology – A self teaching guide. Academic Press London

Morris J.N. Uses of Epidemiology, Churchill. Livingstone London

Benean SMAS: Control of communicable disease to man American PH Association, New York

Holland W.W., Detels R, Oxford Text Book of Public Health: Method of Public Health. London

Kelsey J.L: Methods of Observational Research, Oxford University Press, London

Abeline T. Measurement in Health Promotion & Protection, WHO Regional Publications

Karis S. Lankimen et al; Health and Disease in Developing Countries, Macmillan press.

London

Manipal Manual of Anatomy for A.H.S courses – Dr. Sampath Madhyastha

Human anatomy – Prof.A.K.Dutta

Text Book of physiology – Vankatesh G

Manipal Manual of physiology – Dr. C N Chandrashekar

Text Book of Microbiology - Baveja

II YEAR

PAPER I – HOSPITAL ADMINISTRATION -II

Objectives

To give an idea about hospital, its role in healthcare delivery system, the changing requirements of health services vis-a vis hospital design, planning and operational aspects of Hospital organization. It will also throw knowledge on modern trends in hospital administration.

The course is also intended to provide an in-depth knowledge about hospital information system

Contents

Hospital Planning and Management

Unit 1 Planning and Management of Specialty Services

- Ophthalmology
- Urology
- Psychiatry
- Pediatric services
- Anesthesia services
- Obstetrics and gynecology services
- Plastic Surgery and burns unit , paraplegic and Malignant
- Dental Services
- Diabetology

Unit 2: Planning and Management of Super Specialty services:

- Cardiology and Thoracic surgery
- Neurology
- Neurosurgery
- Nephrology services, dialysis Unit, ESWL,
- Pulmonology
- Transplantation Services
- Oncology services, Nuclear medicine

Unit 3: Utility services

- Nursing Administration- Nursing organization- Staffing –Practices
- Ward Management
- Finance /Accounts department
- Purchase department

Unit 4: Changing health care scenario

- Modern Trends in Hospital Administration
- Medical Tourism
- Artificial Intelligence
- Outsourcing
- Telemedicine

Unit 5

Disaster management in hospitals – Component of disaster plan – Pre hospital and hospital – Disaster preparedness – Disaster plan formulation and implementation

Patient safety – Measures in assuring patient Safety – Factors affecting patients safety –

Hospital Information System

Unit 6

HIS and decision making – Information report system and Decision support system- Role of HIS in Decision making.

Information system Development – System Analyzing and Design- Planning of information systems – Strategic, tactics and operational planning.

Unit 7

Implementing Information systems – Data base management

Controlling Information systems – Input, Process, Output, Process, Process and physical facility Control – Privacy and security of systems.- Analyzing Information systems –Hospital Information system – Functions – Clinical Decision support systems – Diagnostic Decision support systems-

Unit 8

Hospital marketing Information systems – Human Resource information system – Accounting information systems – Financial information system. - Managing information system, Resource in Hospitals.

Unit 9

Basic concepts about computer hardware and software – Application of computer in hospitals – computer programme and operating systems – data based concepts (ER diagram) - Microsoft Office – SQL, VB, Power Point - ERP system with all modules

Unit 10

Office automation software – MS Office – MS Word – Spread Sheet software- MS Excel.

Data base management software MS Access

Computer network and internet.

References

Kunders, G D (2004) – Facilities Planning and Arrangement in Healthcare, Prism Books Pvt Ltd, bangalore.

Davies Llewellyn R & Macaulay H M C (1995) – Hospital Planning and Administration, Jaypee Brothers, New Delhi.

Sakharkar B M (198) - Principles of Hospital Administration & Planning – Jaypee Publishers New Delhi.

James A O'Brien - Management Information Systems Galgotia Publishers.

Bakkar A. R. & Mol. J.L.: Hospital Information System – Effective Health Care Vol. 1. Amsterdam.

Davis G B & H Margrethe: Management Information System (Conceptual Foundations, Structure & Development), Tata McGraw Hill

Griesser G. Et al Data Protection in Health Information System – Considerations and Guidelines.

Goyal D.P: Management Inforamtion System, McGraw Hill

Murdick G Robert, Ross E Joel Ross & Clagget R James: Information Systems for Modern Management

Jawadekar S Waman: Management Inforamtion System managerial perspectives, Macmillan

II YEAR

PAPER II – HOSPITAL ECONOMICS & FINANCE

Objectives

Hospital Economics

The course is intended to provide an in-depth knowledge about the sources of funds and its effective utilization to achieve a better quality of health care services within a reasonable cost.

Finance

The course is intended to help the students to acquaint themselves with the basic concepts of financial planning and control and its applications in the financial decision making.

Contents

Hospital Economics

Unit 1

Managerial economics – introduction – scope – relevance – hospital resource issues

Concept of resource allocation – cost analysis – concepts – classification – short run – long run cost functions. Economies of size – economies and diseconomies of scale

Unit 2

Demand Analysis – demand forecasting – purpose – methods – criteria for a good forecasting method – consumer durable goods – capital goods – determinants of market demand – law of demand – demand curve.

Unit 3

Input output analysis – capital budgeting – principles – monetary and fiscal policies – pay back period methods – NPV – IRR – risk, uncertainty and investment decisions – risk adjusted discount rate approach.

Public sector – role of national economy – Government's role in different socio – economic system. Budgets – central – state government – structure – five year plans.

Unit 4

Market structure – pricing policy – pricing under perfect competition – under pure monopoly.

Economic fluctuations and business – business cycle – business policy – inflation – deflation with reference to India – economic forecasting for business

Unit 5

International trade – rate of foreign exchange – spot and forward exchange markets – change in exchange rates – international monetary system – IMF – SDR – Case studies.

Finance

Unit 1

Financial Management – Concepts – Objectives – Scope – Functions.

Time value of money – Time preference rate – Compound value – Present value.

Forecasting of income statement – Fund flow – Cash flow statement – Interpretation and usage for future forecasts.

Unit 1

Working capital management – Concepts – Types – Factors affecting the determination of working capital – Theories of working capital.

Cash Management – Objectives – Minimum cash requirement – Different approaches for decision making – Formation of strategies.

Unit 2

Current asset management – Management of accounts receivable – Credit standards and policies – Evaluating the policy – Influence of inventory cost on current asset management – Stock valuation methods under inflation accounting and its effects.

Unit 3

Leverage – Financial – Operating – Applicability in decision making – Indifference point.

EBIT – EPS analysis for different sources of finance. Long and short term decisions on alternatives.

Capital budgeting – Principles – Data requirement – Methods of investment analysis – Payback period – NPV – IRR- Discounted cash flow – Risk and return decisions – Profitability index.

Unit 4

Theories of capital structure – NI – NOI – MM approach – Cost of Capital – Determination of cost of individual source of finance – Procedure to find out capital structure of a firm.

Dividend : Dividend – Types of dividends – Gordon – alter – MM models – Determinants of dividend policy.

Unit 5

Cost and Analysis – Cost benefit analysis – Cost effectiveness analysis – Ratio analysis – Types – Uses.

Value and rate of return calculations – Valuation of firm and shares – Different methods of determination of value of shares – Value of firm – Registration of firm in stock exchanges – Stock exchanges working procedure.

Reference

Even J. Douglas : Managerial Economics – Theory, Practice and Problems., Prentice Hall India.

Dufty N.F: Managerial Economics – Wesley Publishing House., New York

Stills E. Addison: Managerial Economics., Homewood, Illionois, Dersey Press Inc.

Spencer M.H: Managerial Economics, Homewood Illionois, Richard C. Irwin Inc.

Verma J.C: Managerial Economics – Concepts and Analysis for Business Decisions in Indian Environment, Lawrence Publishing House., New Delhi.

Varshey R.L & Maheswari K.L: Managerial Economics., Sultan Chand & Sons Publishers.

Thomas P.C: Managerial Economics.

Salratore Dominick : Managerial Economics in Global Economy, Thomson

Dean Joel: Managerial Economics, Prentice – Hall India, Eastern Economy Edition

Dwivedi D.N: Managerial Economics, Vikas

Khan M.Y. & Jain PK : Financial Management, Tata Mc Grew Hill Publishing Co.,

Kuchhal S.K.: Financial Management, Cheritarry Publishing House., Allahabad

Maheswari S.N.: Principles of Financial Management. Sulthan Chand & Sons., New Delhi

Pandey IM: Financial Management, Vikas Publishing House Pvt.Ltd., Bombay

Prasanna Chandra: Financial Management, Tata Mc Grew Hill., New Delhi.

John Thampton : Financial Decision Making – Concepts, problems & cases., Prentice Hall Co

II YEAR

PAPER III – MANAGEMENT ACCOUNTING & COST ACCOUNTANCY

Objective

Management Accounting

The topic helps the students to acquaint themselves with the basic concepts of cost and management accounting and the practical applications in decision making, supervision, management and control of a health system.

Cost Accountancy

To familiarize the students with the concepts, principles and techniques of financial, cost and management accounting branches and their application in managerial decision making in hospitals.

Contents

Management Accounting

Unit 1

Book Keeping – Definition – objects – advantages – term used in Book keeping – Business transactions – theory of Double Entry – kinds and transactions – process of recording – types of accounts – preparation of journal – preparation of Ledger – Trial Balance

Accounting principles: Accounting Concepts and Conventions

Unit 2 & 3

Financial Statement – Trading Account Profit and Loss Account and Balance Sheet

Trading Account: Meaning need and preparation – Profit and Loss Account – Meaning, need and preparation balance Sheet – Meaning need and preparation use of further adjustments in the preparation of final accounts:-

- Depreciation
- Provision for Doubtful Debts
- Outstanding Expenses
- Prepaid expenses
- Income received in Advance
- Accrued Income
- Closing Stock
- Provision for discount on debtors and creditors
- Petty Cash Book

Meaning – Advantages – Imprest system – Analytical petty cash book – form and preparation

Bank reconciliation statement – Meaning – Need – Preparation – Simple exercises

Depreciation -Meaning – Objects – methods (theory and problems)

Unit 4

Ratio Analysis.

Financial Analysis – Meaning and Significance of ratios – Gross Profit, Net Profit, ROI, Current ratio, quick ratio, debt equity, capital turnover, stock turn over ratios.

Unit 5

Accounts of Non- trading Concerns

Meaning – receipts and Payments Account – Income and Expenditure Account – Balance sheet – reparation of Income and Expenditure account and balance sheet from receipts and payment account and additional information

Case studies / Practices / Assignments

Cost Accountancy

Unit 1

Cost accounting-definition of cost – costing accounting – objectives – advantages – characteristic of ideal costing system.

Elements of cost – concepts – classification of cost – direct material – direct labour – overheads.

Direct material – material control – objectives – purchasing – storing – issuing methods

Unit 2

Inventory control- Break even analysis – techniques – applications- ABC – VED analysis – EOQ – Lead time – Safety stock – Quantity control over supplies – Just in time – Inventory models – Scientific technique – FIFO –LIFO – Average Cost.

Unit 3

Direct labour – remuneration of labour – time ratio system – piece rate system – premium bonus plans – measuring layout accounting performance – cost – idle time – overtime – holiday pay – labour turnover – calculation of gross wages and net wages .

Unit 4 & 5

Overhead – Classification – Allocation – Apportionment of overhead – Basis of apportionment

Cost of service department – Cost of Production department – Absorption of overhead – actual Pre-determined – Blanket rate – Multiple rate – Absorption of manufacturing

overhead – Direct material – Direct labour – Production cost – Contract costing – Process costing (normal and abnormal wastages) – Marginal costing.

Also control methods – Budgetary control (theory only) – Standard costing (simple illustration) - Case studies / practical / assignments

References

M.C. Shukla and T.S. Grewal Advanced Accounts; S. Chand & Co. Ltd., New delhi,

R.L. Gupta : Final Accounts

Gupta R.L & Radhaswamy M: Advanced Accountancy(Theory, Method & Application), Sultan Chand & Sons

S.P. Jain & K.L. Narang : Cost Accounting – Principles & Practice, Kalayani Publishers

Bhattacharya S.K.: Accounting for Management., Vikas Publishing House Pvt. Ltd., Bombay

Robert J. Thierauf & Robert Ckeikanp: Decision making through operations research.

Eck. R.D. introduction to Quantitative methods for business applications.

M.C. Shukla and T.S. Grewal & M.P Gupta Cost Accounting (Test & Problems); S. Chand & Co. Ltd., New delhi,

Jain S.P & Narang K.L: Advanced Accountancy _ VI

Jain S.P & Narang K.L : Advanced Accountancy II

II YEAR

PAPER IV – MATERIALS MANAGEMENT & TOTAL QUALITY MANAGEMENT

Objectives

Materials Management

The course is intended to provide an in-depth knowledge about the scientific methods of purchasing, storing and dispensing of materials in hospitals.

Total Quality Management

The course will orient the student about the quality to be maintained in hospital services and will help them to develop and control hospital programmes.

Contents

Materials Management

Unit 1

Materials Management – concepts – importance in organization – relation to other administrative functions – organization of materials management department – role and functions of materials managers.

Stores – Concepts of stores – Importance of stores in hospital settings – Types of stores in a hospital – Layout – Location – Stores routine – Supply and replacement of stock – Card system & use of bin cards – Stock verification – Control of pilferage.

Unit 2

Inventory control – Meaning – Scope – Definition of inventory – Advantages – Discounts – Stock out cost – P & Q System.

Purchase – Right quantity – Right quality – Right price – Right time (requirement planning) – Right source – Price forecasting methods.

Unit 3

Methods of purchasing –ABC – VED analysis in purchase controls – Purchase through rate contract – Tendering procedures – Purchase Vs leasing decision – Purchase of capital equipments and other major investments - purchase through e-commerce.

Unit 4

Information system development for Materials Management – Database of material (Vendor and stocks) – Usage for classification – Standardization of materials – Bar codes – Trends in material control – Computers role in development of information.

Unit 5

International purchasing -Import tariffs – Policies – Procedures – Customs and excise exemptions – Letter of Credit formalities relating to imports.

Legal aspects relating to purchases – carriage of Goods Act – Insurance – Damages Case Studies.

Total Quality Management

Unit 1

Quality: Concept of quality – Evolution of the concept of Quality- quality and productivity- quality in health care, structure, process, outcome- quality assessment-measuring quality care- concept of quality assurance, Service quality- models, quality management philosophies- steps in quality improvement- Quality management philosophy:- Deming, Juran, Crosby, Taguchi's principles, Fegenbaum's philosophy. Patients demand and feedback.

Unit 2:

Quality Control-Tools and techniques- total quality Models, quality standards, ISO and implementation process, Brainstorming, Benchmarking, Statistical process control, Fishbone Diagram, Six sigma Concept, Poka yoka, Statistics and quality control tools, quality circle. Total Quality Management: TQM team work, Employee involvement, TQM tools- Quality function deployment(QFD), concurrent engineering-FMEA, P-C-D-D-A cycle, JIT, Kaizen, Zero defect programme, control chart

Unit 3:

Evaluation of health care performance:- Evaluation through Medical audit, Nursing Audit, Equipment audit, Pharmacy Audit, Antibiotic audit, Clinical Audit, Defining audit protocol, Audit team- duties and responsibilities of audit team, Patient safety, Patient satisfaction Survey, Clinical practice guidelines and protocol.

Unit 4

Performance reviews and Survey:- Mortality review, concurrent process review, retrospective process review, Death (mortality) review, births, stillbirth, premature, underweight babies, post operative complication review, post delivery complication review, post anesthesia complication review, Infection review, Surgical review, Discharge:- Discharge status-cured, controlled, aggravated, death, Leave against medical advice, Agreement of Preliminary Diagnosis with final diagnosis, Investigation supplements preliminary and final diagnosis, Unusual incidents in hospital

Unit 5

Standards and Accreditations: Hospital accreditation, Models of accreditation, patient centered standards, Health care organization management standards NABH, JCAHO, JCI- ISO certification, process and steps to reach accreditation, overview of standards and benefits

Reference

Dutta A.K. Integrated Materials Management., S.Chand & Co. New Delhi 1989.

Dutta A.K. Materials Management Procedures, Text & Cases, Prentice Hall India
Starr & Miller : Inventory Control – Theory & Practice, Prentice Hall India.
Gopalakrishnan, P & Sandila M.S. Stores Management and Logistics.
Gopalakrishna P: Purchase & Materials Management, McGraw Hill
England W.B. & Leenders M.R. Purchasing & Materials Management Tarapore Vala & Sons.
Lal A.B.:Inventory Models and the problems of price fluctuations,sree Publishing ook House.
Peekhar H.H: Effective materials Management Taraporewala D.B & co. Bombay.
S.K. Joshi – Quality Management in Hospitals Jaypee Brothers.
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Kunders, G D (2002) – Designing for Total Quality in Healthcare, Prism BooksPvt Ltd,
Bangalore

M. Frank, Gryna Richard C.H, Defeo A Joseph; Jurans Quality Planning & Analysis for
Enterprise Qulaity

II YEAR

PAPER V – MARKETING & STRATEGIC MANAGEMENT

Objectives

Marketing Management

The course introduces the student to the concepts of marketing and its dimensions involving services, production, promotion and its application to health care delivery systems.

Strategic Management

The course enables the students to understand the different ways to utilize firm's resources within its environment to reach its objective .

Marketing Management

Unit 1

Marketing Concept – definition – Scope - Goods & Services – Marketing process – customer relationship management (CRM)

Marketing Environment- Market analysis – consumer buyer behavior- Health care needs – factors influencing patient behaviour

Market segmentation – Chief determining variables – Targeting and product positioning - STP for health care services.

Market Mix – 4Ps in goods marketing & 7 Ps in Services marketing

Unit 2

Market research and information: Steps – Market information – Market information system –

Market decision support systems – Demand forecasting – market research process - Public policy regulation and ethics in marketing research

Product/Service: Product line – Product mix – Product life cycle – Branding – Packaging – Product positioning – New product opportunities – Product development process – New product – Failure and success.

Unit 3

Promotion: Objectives – Promotion cost – Promotional budget – Determining promotional mix – Planning promotional campaigns. Advertising and publicity: Types – Levels of advertising – Advertising expenditure – Advertising decisions – Publicity - public relations- sales promotion- Direct marketing

Pricing – Meaning – Importance – factors determining prices – Objectives – Pricing policy and structure – Pricing procedure – New product pricing – pricing in health care

Unit 4

Marketing channel – Physical distribution – Channel design – Retailing – Wholesaling.

Social Marketing

Hospital Administrators and Marketing Environment – Opportunities and challenges

Marketing programme for hospital services : Market mix – Product decisions – Price decisions – Location of hospital services – Planning extension services.

Unit 5

Project planning – Project development cycle- Feasibility study – Financial institutions - Project clearance – Technology transfer – Foreign collaboration – grants – Social responsibility.

Camp organizing and planning: Community health care programmes – Medical camps – Awareness of the camps – Planning and organizing medical camps – Follow – up.

Strategic Management

Unit 1

Environmental appraisal : External environmental analysis – Dynamics of internal environment – Organizational capability factors – SWOT analysis.

Unit 2

Strategic alternatives – Grand strategies – Modernization – Diversification and integration – Merger, take over and joint ventures – Turn around, disinvestment and liquidation.

Unit 3

Strategic choice : Corporate port folio analysis – Industry competitor analysis. Strategic implementation : Issue in implementation – Resource allocation – Structural implementation – Organizational design and change.

Unit 4

Functional implementation – Financial, marketing, operations and personnel plans and policies.

Behavioural implementation – Leadership implementation – use of power.

Unit 5

Strategy evaluation – Strategic and operational control.

productivity in organizations, Management audit, Managerial performance

Strategic management in health care: strategic planning process – Human resource accounting- Sensitivity to patient's needs and expectation- Empowering hospital staff and improvement in involvement and participation- business process reengineering .

Reference

Kotler Philip : Marketing Management – Analysis, Planning, Implementation and Control;

Kotler Philip & Anderson : Strategic Management for Non – profit organizations.

Wheelen L Thomas, Hunger David, Rangarajan Krish: Concepts in Strategic Management & Business Policy

Kotler Philip : Readings in Marketing Management, Tata Mc graw Hill, New delhi, 1980.

Kotler Philip : Marketing for Health Care Organizations.

Kotler Philip & Lane Kevin: Marketing Management, Pearson

Lovelock : Services Marketing – text, cases and reading.

Kotler Philip : Principles of Marketing, Prentice Hall, Eaglewood, Cliffs, NJ, 1980.

Janet Reinestein Carpman., Myrona Gromt., Planning health facilities for patients and visitors.

Chari S.N.: Modern production and operations management, Wilsey Eastern Ltd.New Delhi.

Prasanna Chandra: Projects preparation, Appraisal, Budgeting and implementation, Tata Mac Grew HillsPublishing Co. Ltd., New Delhi

II YEAR

PAPER VI – LEGAL FRAME WORK FOR HOSPITALS & MEDICAL ETHICS

Objective

Legal frame work for hospitals

The course will orient the students about the legal frame work to be observed in hospital services and will help them to develop and control hospital programme. It will also help to provide a thorough knowledge and familiarity on the importance medical ethics.

Contents

Legal frame work for hospitals

Unit 1.

Legislation: Law, source of Law, interpretation of Law - Medico-legal problems: types - case handling procedures - police investigation - death certificates.

Medical negligence: – Ambit of negligence – Duty of care – Contractual duty – Tortious duty - Duty under Penal law - Duty under consumer law – Contributory negligence.

Unit 2

Consent to treatment – Types of consent – Types of common complaints – Burden of proof & 'Res Ipsa Loquitur'. Withholding of life support in the Critically Ill – Euthanasia – Dying declaration —Reasonable care

Unit 3

Medical ethics – introduction – person centered ethics – ethics and ethical codes – international code of medical ethics – code of medical council of India – services of life and death – duty of preserving life.

Unit 4

Medical experimentation in man – Drug Trial - Truth and professional secrecy.

Unit 5

Medical termination of Pregnancy Act – Birth and Death registration Act – Drugs and Cosmetics Act 1940. - Mental Health Act

Unit 6

The Transplantation of Human Organs Act 1994 –Prenatal Diagnostic Techniques (Regulation and Prevention of Misuse) Act 1994 - Consumer Protection Act 1986– Kerala shops and Commercial Establishments Act 1969 –

Unit 7

The Indian Medical Council Act 1956 – The Indian Nursing Council Act 1947 — The Pharmacy Act 1948 – The Environment Protection Act 1986 & Bio-medical Waste (Management and Handling Rules 1998)

Unit 8

Bonus Act 1965 – Employees Provident Fund Act 1952 – Employees State Insurance Act 1948

Unit 9

Factories Act 1948 – Gratuity Act 1972 – Industrial Dispute Act 1947

Unit 10

Minimum Wages Act 1948 – Trade Union Act 1926 – Maternity benefit Act 1961.

References

Kuchhal M C (2001) – Business Laws, Vikas Publishing House Pvt Ltd, Delhi

Goswami V G (1999) – Labour & Industrial Laws, Central Law Agency, Allahabad.

Rajkumar – Acts applicable to hospitals in India

Knight Bernard – Legal Aspects of Medical practice.

Bag R.K – Law of Medical Negligence and compensation

Cox H.W.V- Medical Jurisprudence and Toxicology , The Law Book Co.(p) Ltd

WHO : Bioethics

WHO : Genetic, Ethics and Human Values

Prabhakara G.N: Professional Medical Ethics

Siegerist Hentry : A history of Medicine – Vol. 1. Oxford University Press., London

Jagg O.P. Indian System of Medicine, Atma Ram and Sons, New Delhi.

Morely avid et al: Practising Health for all, Oxford University Press., London

Abraham Samuel D: Laws on Hosapital Administration

II YEAR

PAPER VII

Skill Development in Hospital Administration

Objective: This course helps the students with an opportunity to observe, apply & practice the theories & techniques they will learn as part of their MHA syllabus. This will act as an internship for the students, so that, through a set of programmes, they will be able to develop the skills necessary for an administrator in a hospital setting.

Pedagogical Approach:

In order to supplement & practice the theoretical knowledge gained through textbooks, & lectures, students will perform various tasks like “undergo practical training in various departments; organize seminars & workshop; present papers & case studies; perform role plays, management games & extempore sessions; undergo concurrent placements & field studies; attend training programmes on Transactional Analysis and the like; etc”.

Reports submitted by the students on practical training in various departments, concurrent placements & field studies etc will be evaluated by the faculty. All the programmes organized & performed by the students will be evaluated by the faculty.

As opportunity for development & training of skills is an important factor, these programmes will be there from first year onwards. The marks of all the programmes organized as part of skill development will be taken for the evaluation of this paper.

Programmes to be under taken:

A minimum of three hours visit to the following departments on rotation at the Hospital;

Personnel – Public Relations – Finance – Accounts – Ticket Room – Medical Records – Bio Medical – Radiology – CSSD – Corporate Relations – Insurance – Billing - Pharmacy – Canteen – Plumbing – Electrical – Civil – Laundry – Waste Management – ETP – Incinerator – Physiotherapy – Medical and Psychiatric Social Work – Counseling – Projects - EDP – Front Office – OPD – Library – ICUS – Wards – Security – Casualty – Laboratory – Microbiology – Bio Chemistry – Blood Bank – Haematology – Histopathology and Pathology.

- Organizing Seminars
- Presentation of papers, case studies etc
- Group Discussions
- Role play
- Assignments
- Management games
- Workshops
- Negotiations
- Transactional Analysis
- Field studies
- Extempore Sessions

(Annexure)

FORMAT OF MHA PROJECT REPORT

CHAPTER 1 : INTRODUCTION TO THE SUBJECT

CHAPTER 2: REVIEW OF LITERATURE

CHAPTER 3: METHODOLOGY

- Problem statement/ Scope of study
- Objective of study
- Research design
- Theoretical & operational definitions
- Research setting & Sources of data
- Sampling design
- Pilot study
- Validation/standardization
- Tools & techniques
- Method of data collection
- Proposal for processing & analysis of data
- Limitations of study
- Time budget

CHAPTER 4: ANALYSIS AND INTERPRETATIONS OF DATA

CHAPTER 5 : FINDINGS AND SUGGESTIONS

CHAPTER 6 : CONCLUSION

BIBLIOGRAPHY

APPENDIX

The details of the format to be followed for the Report is as follows:

1. PAPER

The Report shall be typed on white paper, size 210 X 297 mm, 7 Kg, bond, for the original typescript and others shall be photocopies.

2. TYPING

The typing shall be in standard letter size, double spaced on one side of the paper only, using black ribbon.

3. MARGIN

The typed sheet shall have the margins: Left 35 mm, Right 20 mm, Bottom 20 mm.

4. BINDING

The report shall be rexin bound.

5. LETTERING

The lettering shall be inscribed, on the bound back and the front cover.

The bound back shall contain the title and the name of the student in 3 mm size letters.

6. FRONT COVER

The front cover shall contain the following details:

- Top: The title in block capitals of 6 mm size letters, properly centered.
- Full name of the candidate in block capitals of 3 mm size letters, properly centered.
- Purpose of the work and University name in block letters properly centered
- Bottom: Name of the Institution, year of submission - all in block capitals of 3 mm size letters in separate lines with spacing and properly centered. (This is a standard format)

7. BLANK SHEET

At the beginning and the end of the report two white blank sheets of 7 kg. Bond paper shall be provided one for the purpose of binding and another to be left blank.

8. TITLE SHEET

The title sheet shall be the first typed sheet and shall follow immediately the blank sheet.

9. CONTENTS

The contents shall indicate the title of Chapters, Section and sub-sections etc., using the decimal notation with corresponding page numbers against them.

11. LIST OF TABLES

§ The 'contents' shall be followed by a 'List of Tables' indicating the Table number, Table title and the corresponding page number. The Table number shall be in decimal notation indicating the Chapter number and the Table number in that Chapter.

§ Any reference within the text shall be given by quoting the relevant number, e.g. Table 2.2.

12. LIST OF FIGURES

§ The 'List of Figures' shall follow the 'List of Tables' indicating the Figure numbers, Figure titles and the corresponding page numbers. The Figure shall be in decimal notation indicating the Chapter number and the figure number in that Chapter. For e.g., 6.4 refers to Fig.4 in Chapter 6.

§ Any reference within the text shall be given by quoting the relevant number, e.g. 'Fig. 6.4.'

13. ABBREVIATION / NOMENCLATURE

The 'Nomenclature' follows the 'List of Figures' and contains the list of symbols used. They shall be arranged alphabetically in order of Latin letters, Greek letters, superscripts and subscripts. As far as possible generally accepted symbols shall be used. Symbols not available in typewriters shall be written in permanent black ink.

15. CHAPTER NUMBERING

The Chapter shall be numbered in Arabic numerals, Section and sub-section of any chapter shall be in decimal notation. All chapters shall begin on a new page. The titles for chapters, sections, and sub-sections shall be in block capitals. The chapter number and title shall be properly centered at the top of the page and have three spaces between them.

16. INTRODUCTION TO THE PROJECT

The first chapter will be introductory Chapter. These chapter shall highlight the importance of the investigation and also define the topic and scope of the work envisaged.

17. REVIEW OF LITERATURE

It shall present a critical appraisal of the previous work done on the topic. The extend of an emphasis on this chapter shall depend on nature of Investigation.

18. WORK DONE

- The work carried out by the student shall be presented in one or more chapters depending on the type of work. A typical format will be a chapter each on Data Collection, Analysis of Data Formations
- Each chapter may have several sections and sub-sections with suitable titles.
- Important and short derivations, and representative data in tables and Figures, shall be presented in these chapters. Information such as lengthy derivations, voluminous tables and large number of figures shall be presented in the Appendix.
- Figures and tables shall be on separate sheets and not inserted on the papers with running text. Depending on the size, figures and table shall be accommodated on sheets of size 210 x 297 mm or 197 x 450 or 297 x 625 mm. If there are longer tables that cannot be accommodated on these sheets, there shall be a continuation table. Very large figures shall be placed in a pouch at end of the report. All figures and table included in the Appendices shall be accordingly mentioned in the text, Lettering on figures shall be uniform either in engineering letters or typed. Each figure should be self-sufficient to provide all the information. There must be a title for every figure and table.

- Mathematical portions of the text shall preferably be typed. Where it is not possible, ample space shall be left, and equations and symbols shall be inserted clearly in permanent black ink.
- **CONCLUDING CHAPTERS**

DISCUSSION AND CONCLUSION

This should include a thorough evaluation of the investigation carried out and shall bring out the contribution, if any. The discussion shall logically lead to certain conclusions and inferences. A suggested scheme of implementation should also be included.

20. REFERENCES

§ Bibliography shall follow the last chapter. It shall give a list of works (papers, books, etc.) referred to in the body of the text and they shall be arranged in the order they are first cited in the text.

The numbering shall be in an Arabic numeral indicated as superscript along with the author's name in the text.

For any paper in information shall contain the names of the authors the title of the journal, the volume number underscored, the page number and the year of publication in parenthesis.

In the case of references from journals and books in languages other than English the titles of the journals or books should be transliterated into Latin script and not translated.

For any book the information shall contain the names of the authors, the title of the book, the name of the publisher, the edition, and year of publication in the parenthesis.

For papers and books with joint authorship, the name of all the authors shall be reproduced in the same order. The author's name shall begin with the name followed by initials.

For example:

Journal:

Vyas A.L., 'Fuzzy Logic' – A New Vista for Industrial Engineering, S. & Industrial Engineering News, Vol.2(2), 1995, pp. 1-15.

Books:

Hedge, B.K. Copen, M.R., Production Management Text and Cases, Prentice Hall of India, New Delhi, 1972, pp. 101-105.

21. APPENDICES

Appendices will be numbered in Roman capitals. The appendices shall normally contain detailed or lengthy derivations, sample calculations, voluminous, large figures and calculations.

(Page 1)

A Study

On-----at

-----Hospital

Submitted to

KUHS University, Trissur

In partial fulfillment of the requirement for the

Award of the Degree of

MASTER OF HOSPITAL ADMINISTRATION

For the academic session 2012-2013

By

-----Year

Reg.No.-----

Under the Guidance of-----

Department of Hospital Administration

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(Page 2)

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-----, Kerala, S.India

Examiner I

Examiner II

DECLARATION

**I hereby declare that the project work entitled “ -----”,
is an authentic record of the original work done by me under the
guidance of -----and further that no part of this work has
been presented for any other degree or diploma earlier.**

Place:

Signature of the student

Name of the student

Date:

Regn.No.

CERTIFICATE

This is to certify that ----- is a student of this institute. She has successfully completed the -----
Year Project Work on “----- at ----- Hospital,” as partial fulfillment of the
course MASTER OF HOSPITAL ADMINISTRATION affiliated to KUHS University during the academic
year -----.

Head of the Department

Project Guide

Date:

Principal

Place:

**(Copy of the certificate of the Hospital where the student did
her/his project)**

(Page 6)

CopyRight

I hereby declare that Kerala University of Health Sciences, Thrissur, Kerala shall have the rights to preserve, use and disseminate this project work in print or electronic format for academic/ research purpose.

Date:

Signature of the Candidate,

Place:

Name of the Student

(Page 7)

ACKNOWLEDGEMENT

Name of the Student

(Page 8)

Preface

Place:

Name

Date:

Regn.No

(Page 9)

LIST OF ABBREVIATIONS USED

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EXECUTIVE SUMMARY (In 2 pages)

BACKGROUND OF THE STUDY

OBJECTIVE

METHODOLOGY

RESULT

INTERPRETATION & CONCLUSION

(Page 12)

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Figure

Page Number

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CHAPTER 1 Onwards