

MINUTES OF THE 358th MCR MEETING

358th Medical Care Review Meeting was held on 13-01-2020 (Monday) at 3.00 P.M in SSB Auditorium under the chairmanship of Medical Superintendent Dr. Ashok Shankar Rao Badhe.

At the outset Medical Superintendent welcomed Head of the departments, faculties, Residents and staff.

1. One Minute Silence was observed for Dr.Sajini Elizabeth Jacob, Additional professor of pathology who passed on 07-12-2019.
2. Medical Superintendent appreciated the rotation basis outgoing HOD's for their excellent service rendered. He also welcomed all the incoming HOD's by reading out their names and their respective departments. He also wished that it is expected from the incoming HOD's to carry on their work smoothly in a better way with co-operation from all of us.
3. Medical Superintendent brought up discussion regarding issue faced by Clinical Biochemistry department that test request forms are arriving at labs without mentioning the diagnosis, what test requested etc.,
4. Medical Superintendent requested all the HOD's to look into it so that lab test request forms are filled properly by the interns/residents. Few forms lack information as to what test is to be done.
5. Medical Superintendent said that this issue prevails in many departments, similarly another issue is non submission of statistics by these department.
6. Medical Superintendent read out the department names to know reason for Non submission of statistics by them for October and November 2019 but there was no representation from many departments in the MCR meeting to clarify these points.
7. Dr.Ramesh HOD of Ophthalmology shared that it is observed that every year during internship, the beginners do mistakes during initial phase in January.
8. Director suggested that senior residents or somebody assigned by HOD can pay attention towards supervision of interns activities and he also insisted that it is mandatory to give priority to statistics preparation and submission by each department.

9. Dr. Anita Rustagi, AMS suggested that proper form filling can be emphasized in intern's orientation program. Regarding statistics submission to office of the Medical superintendent and MRD, the request and importance of it is often minuted in MCR meeting and circulated to all.
10. Medical Superintendent expressed his observation that many things taught in intern's orientation are not put into implementation and adopted by the interns. If improper filled test request forms are sent back by the labs then the Patients are the one who suffers as they are forced to take sample for the same test next day. Similar to that another issue is, in case sheets diagnoses are not written properly.
11. Dr. Ramesh, HOD of ophthalmology recalled that in yester years i.e., around five years ago, team accompanied by senior faculties of the departments do visit to MRD periodically, to fill the deficiencies in case sheets, to ensure conversion of incomplete records to complete one.
12. Dr. Kadhiravan, Medicine professor thrown light on thin attendance of the resident doctors, to MCR meeting now a days. For which he expressed his opinion that simplest reason could be unlike earlier, now a days residents are not asked to present cases from Death bulletin in the MCR meeting. For which Medical Superintendent replied that we can go back to earlier system if all the faculties are willing, Director told as it is difficult to call all the faculties for the meeting to take decision regarding cases presentation from death bulletin, it would be better to call one or two representatives from surgical departments, Medical departments and lab departments to meet, discuss and decide and he also told that apart from selected cases, the rest of the cases from death bulletin are to be discussed within the department.
13. Dr. Narayanan, Pediatrics shared information that pediatric department death cases are discussed periodically within the department.
14. Medical superintendent shared the info with regard to undesirable happening that only couple of departments are submitting monthly intra departmental death audit summaries to MS office regularly, although it is to be submitted by all the concerned departments, timely every month.

15. Dr.Ramesh, Professor of Ophthalmology raised query "*what is midnight census*" for which, Dr.Anita Rustagi, AMS clarified that it is In-patient head count done everyday midnight.
16. Dr.Narayanan, Professor of Paediatrics wondered about low Bed Occupancy Rate (BOR) mentioned as only 54% for pediatrics emergency ward in statistics presentation, for the month of October 2019, for which Dr.Nishad Plakkal clarified the practical reason for it.
17. Director suggested if bench mark is kept as admission to be given for cases staying more than 12 hours, then data of admission would be more.
18. Dr.Dourairajan, HOD of urology explained concept of midnight census is to preserve data of actual number of patients counted in the hospital midnight and regarding low Bed occupy rate in pediatric emergency cases, department can consider admitting cases staying more than 3 hours and in order to know more details, he also asked HOD pediatrics whether they deserve admission. For which Dr.Narayanan answered that, he will work it out on it and show as admissions.
19. Director explained regarding gross death and net death rate.
 - He suggested to start marking value as zero in the vertical axis for the bar diagram representation of total deaths of the month.
 - He also invited suggestions to think of whether statewide attendance is necessarily to be presented in the MCR meeting.
 - Regarding presentation of data of number of surgeries done and Numerical values mentioned as total number of investigation done by major lab departments for the month needs revision of format for better way of presentation of statistics.
 - He appreciated the department of neonatology for bringing down the neonatal mortality rate from 29 for 1000 live births in April 2019 to 10 for 1000 live births in October 2019.
20. KPI of Department of Urology was presented by Dr.Praanjal gupta and Dr.Manjunath Metri, Senior Resident.

- The following cases were presented by them.

S.no	Age/Sex of the Patient	Cause of Death/Interesting
1.	55 years/Female	K/C/O Ca Bladder S/P Open Anterior Exenteration with ileal conduit.
2.	45 Years/Female	Left Renal Mass With Level Ii Ivc Thrombus And Retroperitoneal Lymphadenopathy.

21. Dr.Saichandran, HOD of CTVS, While discussing renal mass with inferior vena cava thrombosis presented by Dr.Manjunath, SR, Urology, he requested that whenever such cases operated obtaining CTVS opinion preoperatively could be considered.

With this the meeting came to an end and Medical Superintendent thanked everyone.

3/2/2020
Additional Medical Superintendent
JIPMER

ADDITIONAL MEDICAL SUPERINTENDENT
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Agree
4/2/2020
Medical Superintendent
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