

Standard Operating Procedure For Annual Health Checkup	
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# **Standard Operating Procedure for Annual Health Checkup**

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### APPROVALS

By signing the below section digitally, the individuals listed below have reviewed and approved this document:

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## REVISION HISTORY

This document has been revised as follows:

Document Version	Effective Date (Date of final Approval)	Revised By	Description/Reason for Revision

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## 1.0 Objective

The objective of this Standard Operating Procedure (SOP) is to outline the process and responsibilities for conducting an Annual Health Checkup (AHC) for employees. This SOP ensures a systematic and efficient approach to employee health monitoring and reporting.

## 2.0 Scope

This SOP applies to all employees within the organization who are required to undergo an Annual Health Checkup.

## 3.0 Responsibility

1. OHC Department: Responsible for scheduling and coordinating the AHC.
2. Nursing Staff: Responsible for recording and uploading health-related data.
3. Medical Officers: Responsible for assessing employee health and providing medical certification.
4. Employees: Responsible for attending the AHC and complying with medical recommendations.
5. Site Admin (OHC): Responsible for system administration and data management.

## 4.0 Frequency

The AHC shall be conducted annually for all employees.

## 5.0 General Information/Definition

Annual Health Checkup (AHC) is a comprehensive medical examination designed to assess the health status of employees. It includes various medical tests, measurements, and assessments to ensure early detection of health issues.

### Local Version Control System:

The organization shall maintain a local version control system for this SOP to track revisions, updates, and changes.

### Centralized Version Control Systems

The OHC system will have centralized version control, allowing for consistent and controlled management of maintenance records across the organization.

### Distributed Version Control System:

A distributed version control system shall be implemented for regional offices to ensure alignment with the central SOP.

**Bug fixes** Any issues or discrepancies in the AHC process shall be addressed promptly and documented for improvement.

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## 6.0 Procedure:

1. Scheduling:
  - The OHC department shall prepare the AHC schedule.
  - Automated emails shall be triggered to employees, section in charge, and HODs with details of the AHC, including date, time, venue, and respective employee ID.
2. Data Entry:
  - Nursing staff shall log into the system and input employee history, BMI, vision test results, blood reports, etc.
  - Scan copies of other medical reports shall be uploaded for each employee.
3. Data Integration:
  - The system shall fetch blood test report data from hospital software or external software.
  - The system allows for the addition or deletion of medical tests.
4. Medical Examination:
  - Employees shall complete the AHC at the Medical Officer's cabin and mark attendance with a card punch.
  - Up to 10-15 Medical Officers can simultaneously perform AHC at different locations/cabins.
  - Predefined options shall be available for Medical Officer's remarks.
5. Certification:
  - Medical Officers shall fill in pulse, BP records, check blood reports, and certify the health status.
  - If an employee is certified as "Physically Fit," relevant observations shall be marked as "Normal," "Not palpable," "Bilaterally Symmetrical," "Not applicable," etc.
6. Unfit Employees:
  - If an employee is certified as "Unfit" and requires treatment or additional investigations, comments or prescriptions shall be recorded, along with a follow-up date.
7. Escalation and Reminders:
  - An escalation matrix through email shall be implemented for additional investigations or follow-ups.
  - Reminder emails shall be sent to employees with incomplete or pending activities.
8. Report Access:
  - Employees can view their reports in their login, with confidential data blocked from other employees.
  - Medical officers and nursing staff can view lists of absent employees and those with pending investigations.

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9. Reporting and Analysis:

- AHC reports can be generated with filters for specific health conditions and employee statuses.
- Access to medical reports is restricted to individual employees and authorized personnel.

10. Flexibility and Amendments:

- Employees have the flexibility to change their AHC schedule without formal deviation.
- The system allows for the upload of scan copies of reports.

11. Employee Management:

- Provision for adding new employees and deleting employees with reasons in the system.
- Medical data of exiting employees shall be recorded.

12. Documentation:

- The system provides the option to generate printed reports with essential details.
- Advised tests and positive findings shall be highlighted.
- Pending tasks, such as additional investigations, shall be tracked in the system.

13. Revision and Compliance:

- Health card and comments can be revised or updated to address audit observations or deviations.
- Closure and completion of pending tasks with comments are available in the system.

14. Data Security:

- All health data shall be securely stored in accordance with the organization's retention of records policy.
- Exit medical data shall be recorded.

Abbreviations:

- OHC: Occupational Health Center
- BMI: Body Mass Index
- BP: Blood Pressure
- DM: Diabetes Mellitus
- 2DECHO: Two-Dimensional Echocardiogram
- TMT: Treadmill Test
- BSL: Blood Sugar Level

REFERENCES:

- Relevant organizational policies and guidelines.
- Applicable laws and regulations.

\*This SOP ensures a systematic, efficient, and compliant approach to conducting Annual Health Checkups for employees in the organization

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