# SPH/MDP/FOR /43(A)

# Provincially managed health facilities with ETUs for that level of facility based on standard guidelines

# CARE MODEL

Level 3- A & E Departments developed in Base Hospitals

**District:- Institution:- Year/Month:-**

|  |  |  |
| --- | --- | --- |
| **Requirment** | Achieved or not | If not measures taken |
| Pre Hospital Care |  |  |
| Surface Area |  |  |
| Bed capacity\* 4 Resuscitation Beds  10 Treatment Area: observation beds- acute/sub acute area  5 Reclining Chairs Treatment Area  20 Short Stay Ward |  |  |
|  |  |
|  |  |
|  |  |
| Surface Area 12 500 sqm |  |  |
| Ambulance Bay & Reception (for 2 Ambulances) |  |  |
| Trolley Bay |  |  |
| Area for Admission & Registration |  |  |
| Triage Area  Area / space for Disaster event  Visitors’ area  Resuscitation area  Treatment area |  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| Paediatric Area  Observation area  Short stay ward |  |  |
|  |  |
|  |  |
| Administration area- clinical director & Matron - Facilities + |  |  |
| Examination Room |  |  |
| Procedure Room - Facilities + |  |  |
| Operation Theatres 1 General casualty |  |  |
| Room for on call Anaesthetist -Facilities + |  |  |
| Poison treatment area |  |  |
| Family conference ( breaking bad news) room Facilities + |  |  |
| Area to keep a dead body for 2hrs - Facilities + |  |  |
| Laboratory |  |  |
| Police post |  |  |
| Radiology  (Separate USS & X-ray Room) |  |  |
| Room for paramedical staff |  |  |
| Drug Store |  |  |
| Storage area for consumables & equipments |  |  |
| Linen store |  |  |
| Rest Rooms/ Changing Rooms - Facilities +  (Separate Male & Female rooms) for Doctors,  Nurses,  Junior staff |  |  |
|  |  |
|  |  |
| **STANDARD HUMAN RESOURCES** |  |  |
| Emergency Physicians (Consultant In charge) - 4 |  |  |
| GenaralSurgeons -service |  |  |
| General Physician- service |  |  |
| Aneasthesiologists- service |  |  |
| Radiologists- service |  |  |
| Pediatrician- service |  |  |
| Orthopeadic surgeon- service |  |  |
| Neuro surgeon service- service |  |  |
| Vascular Surgeon service- service |  |  |
| **Other staff** |  |  |
| Deputy Director- Service |  |  |
| Medical officers (To be assessed) (20 + interns) |  |  |
| Nursing Sister |  |  |
| Nurses |  |  |
| Supportive staff |  |  |
| MLT |  |  |
| Radiographers- |  |  |
| Physiotherapist- Service |  |  |
| ECG Technician - Service |  |  |
| **STANDARD EQUIPMENT** |  |  |
| Theater Tables |  |  |
| Anesthetic Machine |  |  |
| Blood Gas Analyzer |  |  |
| Multipara Monitors  5 channels for resuscitation &  3 channels for observation area |  |  |
|  |  |
| Nebulizers |  |  |
| Defibrillators with Pacing facilities |  |  |
| Ventilator |  |  |
| NIV / CPAP |  |  |
| Portable X ray machines |  |  |
| USS machines |  |  |
| Hand-held Doppler scans |  |  |
| ECG Machines |  |  |
| Resucitation Beds |  |  |
| Reclining chairs |  |  |
| Beds |  |  |
| Trolleys |  |  |
| IVcanula/Infusion set |  |  |
| Suction Device |  |  |
| Oral.Nasal Airways/ET tubes |  |  |
| Cricothyroidotomy insertion sets |  |  |
| Cervical collar |  |  |
| Sterile dressings |  |  |
| Splinting meterials |  |  |
| NG tubes |  |  |
| IC tubes |  |  |
| Pulse oxymeters |  |  |
| CVP lines |  |  |
| Spinal Boards |  |  |
| Endo: Tracheal Sets |  |  |
| Laryngoscope |  |  |
| Rapid Infusion Sets with blood Warmer |  |  |
| Ambu with Masks - Adult  Paediatric |  |  |
|  |  |
| Venturi Masks |  |  |
| B.P. Apparatus (Non invasive) |  |  |
| Venus cut down set |  |  |
| Oxygen Cylinder with regulator |  |  |
| ET Tubes |  |  |
| Non Rebreathing Masks |  |  |
| Peak flow meter |  |  |
| **STANDARD DRUGS** |  |  |
| **Drugs for Pain Management** |  |  |
| 1. Morphine IV , Tab |  |  |
| 1. Pethidine |  |  |
| 1. Codeine |  |  |
| 1. Tramadol |  |  |
| 1. Fentanyl IV |  |  |
| **Antiemetics** |  |  |
| 1. Promethazine |  |  |
| 1. Metachlopramide |  |  |
| **Non Opioid agents** |  |  |
| 1. Paracetamol |  |  |
| 1. Ibuprofen |  |  |
| 1. Indomethacine |  |  |
| 1. Diclofenac Sodium ( Tab, Suppository) |  |  |
| **Drugs for Neuropathic pain** |  |  |
| 1. Amytryptalin |  |  |
| 1. Carbemezapine |  |  |
| **Anxiolytics** |  |  |
| 1. Midazolam |  |  |
| 1. Diazepam |  |  |
| Anaesthetic Agents |  |  |
| 1. Midazolam |  |  |
| 1. Propofol |  |  |
| 1. Thiopentone Sodium |  |  |
| 1. Atracurium |  |  |
| 1. Suxamethonium |  |  |
| 1. Lignocaine |  |  |
| 1. Bupivacaine |  |  |
| 1. Ketamine |  |  |
| 1. Nitrous Oxoide |  |  |
| 1. Flumazanil |  |  |
| 1. Naloxone |  |  |
| **Haemostatic & Anticoagulants & Thrombolytic Agents** |  |  |
| 1. Heparine |  |  |
| 1. Enoxaparin |  |  |
| 1. Protamine Sulphate |  |  |
| 1. Streptokinase |  |  |
| 1. Tranexamic Acid |  |  |
| 1. Warfarin |  |  |
| 1. Vitamin K |  |  |
| **Hemodynamic Drugs** |  |  |
| 1. IV Dobatamine |  |  |
| 1. IV Dopamine |  |  |
| 1. IV Nitroglycerine |  |  |
| 1. IV Noradrenalene |  |  |
| 1. IV Adrenalene |  |  |
| 1. Vasopressin |  |  |
| 1. IV Verapamil |  |  |
| 1. IV Adenosine |  |  |
| **Anti hypertensive** |  |  |
| 1. Propanalol |  |  |
| 1. Atenalol |  |  |
| 1. Captopril |  |  |
| 1. Losarten Potassium |  |  |
| 1. Prasocin |  |  |
| 1. Nifidepine SR |  |  |
| **Hypoglycaemic Agents** |  |  |
| 1. Insulin Short acting |  |  |
| 1. Long acting Insulin |  |  |
| 1. Metformin |  |  |
| 1. Glibenclamide |  |  |
| **Steroids** |  |  |
| 1. Prednisolone |  |  |
| 1. Dexamethasone |  |  |
| 1. Hydrocortisone |  |  |
| **Other IV Preparations** |  |  |
| 1. N Acetyl cysteine |  |  |
| 1. Glucagon |  |  |
| 1. Ca glucanate |  |  |
| 1. Sodium Bicarbonate |  |  |
| 1. Mg So4 |  |  |
| 1. Manitol |  |  |
| 1. Hetastarch |  |  |
| 1. Dextran |  |  |
| 1. 5%, 25% & 50 % Dextrose |  |  |
| 1. Normal Saline |  |  |
| 1. Hartmans Solution |  |  |
| **Respiratory Drugs** |  |  |
| 1. Salbutamol |  |  |
| 1. Ipravent |  |  |
| 1. Theophyline(Tab) |  |  |
| **Antiepileptics** |  |  |
| 1. Phenytoin IV oral |  |  |
| 1. Carbamazepine |  |  |
| 1. Sodium Valproate |  |  |

Officer In Charge- Name: -

Contact No: -

Signature:-

Date:-

* **To be filled in triplicate and send one copy to relevant RDHS. One copy to PDHS on or before 10th of next month. Other copy remain in the office.**