1. **COURSE TITLE:** Masters in Hospital Administration, hereafter referred as MHA.

2. **Objectives:** The main objective of MHA is to develop qualified managers for the health care industry.

3. **Description:** This is a full time Four-Semester Post-Graduate Masters Degree Course. Two years of four semesters with residency in a hospital.

4. **Admission:** Admission into MHA Courses will be made on the basis of an Admission Test/Group Discussion, as prescribed by Andhra University from time to time. The reservation policy of Andhra University will be applicable.

5. **Eligibility:** Any graduate with minimum 50 % marks by any recognized Indian University, In the case of SC/ST candidates the minimum marks shall be 45%

6. **Fee:** As prescribed by Andhra University from time to time.

7. **Medium of Instruction:** English

8. **Scheme of Instruction :** The Scheme of Instruction consists of six papers and ‘Residency in Hospital’ during Semesters 1 & 2; six papers and ‘Visits to Hospitals’ during 3rd Semesters while seven papers in the 4th Semester. Unless otherwise stated, each subject shall have 4 hours of class room instruction per week and carries 4 credits. Project Report and Viva voce will be conducted after the 4th semester examinations. Subjects with practical component shall have 3 hours of class room instruction and 2 hours of practicals per week. ( The Course Outline along with details of subjects, marks(Internal/Practicals/External), hours per week and credits is given in the Course Outline along with the detailed syllabus.

9. **Residency:** Candidates shall undergo Residency in Hospitals for a minimum of twelve Hours per week and submit a report thereon along with a certificate obtained from the concerned hospitals, at the end of each semester during first and second semesters. The Residency in Hospitals carries 100 marks each in each of the first and second semesters, to be awarded internally, by a committee consisting of the course coordinator and two senior faculty members of the Institution.

10. **Visits to Hospitals:** Candidates shall have to go for Hospital visits local and/or outstation, for a minimum of ten visits and submit a report thereon along with a certificate obtained from the concerned hospitals, at the end of Third semester. Visits to Hospitals carries 100 marks to be awarded internally, by a committee consisting of the course coordinator and two senior faculty members of the Institution.

11. **Project Report and Viva Voce:** The purpose of the project work is primarily to demonstrate the knowledge and skills in studying and analyzing a selected problem in the work situation, in a systematic manner while suggesting solution to the management of the hospital. It is desirable that the sponsoring organization has to identify the area of project work at the beginning of the project. Each student is required to study the problem under the guidance of a faculty member of the Institution for eight weeks, during the summer vacation after the second semester examinations. The completed project should be submitted to the University/College within 30 days before the commencement of IV semester examinations. The Project Report together with Viva Voce carries 200 marks.
12. **Evaluation:** Each paper is for 100 marks divided into External for 70 marks and Internal for 30 marks. In the case of subjects having practicals, semester-end exam carries 50 marks while internal and practical examination carry 30 marks and 20 marks respectively. The question papers shall be set on ‘**Unit System**’ pattern.

The question paper model consists of

- **Sec-A:** Five short questions carrying 4 marks each, with no choice [5*4=20 marks]
- **Sec-B:** Five sets of questions with internal choice, each set of questions being set from each of the five units of the syllabus, each question carries 10 marks [5*10=50].

For subjects having practicals i.e., HA-105 and HA-302, Sec-A carries 10 marks [5*2=10] and Sec-B carries 40 marks [5*8=40]

The answer scripts of all the courses shall be subject to double coded valuation. The variation between first and second valuation shall be dealt with as per the rules of the University.

The duration of written examination (semester-end) for each paper shall be three hours. Each Paper shall, unless otherwise prescribed, and carry 100 Marks consisting of Internal evaluation 30 marks and external examination for 70 marks. The Internal evaluation consists of one mid semester examination for 15 marks and an assignment for 15 marks. The Semester examination shall be based on the question paper set by the external examiner.

A candidate who fails in one semester examination or who is not able to take it shall be eligible to take the same examination at the end of the next semester.

Notwithstanding anything contained in the above regulations in the case of Project Report and Viva-Voce, a candidate shall obtain not less than 50% of marks to be declared to have passed in the examination.

13. **Attendance Requirement:** Candidates shall put in attendance at the College for not less than 75% of the total number of working days. If a student is short of attendance in any subjects he/she shall not be permitted to appear for the entire examination. Condonation of shortage of attendance may be granted on the recommendation of the Principal of the College concerned, subject to the rules of Andhra University from time to time. If a candidate represents the university in games, sports and other officially organized extra curricular activities, it will be deemed that he has attended the college on the days he is absent for this purpose. Candidates who have completed the course in each semester and have earned the necessary attendance and progress certificate shall be permitted to continue the next semester course irrespective of whether they have appeared or not at the previous examination(s). Such candidates may be permitted to appear for the examination of earlier semester along with the subsequent semester examinations simultaneously.
14. **Viva-Voce Examination**: Candidates who passed all the earlier three semesters examinations and appeared for all the papers in the fourth semester examination, have to appear for a Comprehensive Viva-voce examination after the fourth semester examination. Project Report and Viva Voce carry 200 marks. The Comprehensive Viva voce examinations will be on any/all the subjects of all the Four Semesters including Residency Reports, Report on Visits to Hospitals and Project Report. The Viva voce Committee shall be constituted by the University with the following members:

(i) Chairman, PG Board of Studies, DCMS, Andhra University - Chairman
(ii) Head, DCMS, Andhra University - Member
(iii) Two experts – one from DCMS and one from Health Care Industry - Member
(iv) Course Coordinator - Member

15. **No Ragging**: If any candidate is involved in any kind of ragging, he/she will be severely dealt as per law.

16. **Award of Results**: A candidate shall be declared to have passed the examination if he/she obtains a minimum of 5.0 SGPA in each semester. All other candidates shall be deemed to have failed in the examination. The names of the successful candidates at the examination shall be arranged in the order in which they are registered for the examination on the basis of total marks obtained by each candidate in all the semester examinations put together vide the following grades:

   Distinction: Those who obtain CGPA 8.0 or more
   I Class: Those who obtain 6.5 CGPA or more but less than 8.0,
   II class: Those who obtain CGPA 6.0 or more but less than 6.5.
   Pass: Those who obtain CGPA 5.0 or more but less than 6.0.

Only those candidates who appear and pass the examination in all papers of the four semesters, at first appearance are eligible to be placed in the first class with distinction. However, no candidate who has not passed all the papers relating to any semester at the first appearance shall be eligible for the award of any medals or prizes by the University and to receive certificates of rank obtained by them in the examination.

17. **Improvement Provision**: Candidates declared to have passed MHA under Semester System obtaining third or second class may reappear for the same examination to improve their class as per the University rules in force.

18. **Award of Degree**: A candidate who fulfills all the requirements as stipulated by Andhra University from time to time is eligible for the award of Master of Hospital Administration (MHA) Degree.

19. Andhra University reserves all rights relating to the modification/revision/change etc., of the regulations of MHA at any point of time.
<table>
<thead>
<tr>
<th>Code</th>
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<tr>
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<td>30</td>
<td>70</td>
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<td>Human Biology and Medical Terminology</td>
<td>30</td>
<td>70</td>
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<td>Organization and Management Process</td>
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<td>Information Technology for Hospitals</td>
<td>30+20</td>
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**SECOND SEMESTER**

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**THIRD SEMESTER**

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**FOURTH SEMESTER**

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<td>Legal and Ethical Issues for Hospitals</td>
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DETAILED SYLLABUS

FIRST SEMESTER

HA 101 HEALTH CARE MANAGEMENT AND HOSPITAL ENVIRONMENT

Objective: To make the student to understand Health Care Sector and Hospital set up in a larger perspective with an emphasis on the systems.

Unit I

Unit II

Unit III

Unit IV
Health Care Regulation – WHO, International Health regulations, IMA, MCI, State Medical Council Bodies, Health universities and Teaching Hospitals and other Health care Delivery Systems

Unit V
Epidemiology – Aims – Principles – Descriptive, Analytical and Experimental Epidemiology - Methods - Uses

Reference Books:
Paul’s, Readings in Economics, Tata McGraw Hill, New Delhi, 1992
Dwivedr D.N.Microeconomic Theory, Vikas Publications, New Delhi,1996
Varshey, R.L. & Maheshwari, K.L., Managerial Economics, Sultan Chand, Delhi,1996
Liz Haggard, Sarah Hosking, Healing the Hospital Environment: Design, Maintenance, and Management of Healthcare Premises
Objective: The student will get a familiarity with medical jargon and human body system so that he can effective member of the operational team.

Unit I
Human Anatomy and Physiology: Basic functions and importance of following system in Human body: Digestive System- Respiratory system- Circulatory system-Central Nervous system. Musculoskeletal system-Reproductive system-Excretory system-Endocrine Glands Special Senses.

Unit II
Medical Terminology-Reasons for using medical terms-Glossary of medical terms: major Diseases and medical specialties.

Unit III
Roots, Prefixes, Suffixes, Abbreviations and symbols-Common roots: element referring to, usage and definition-Common prefixes and suffixes-Common abbreviations: departments, time, general healthcare, routes of medication and laboratory-Symbols.

Unit IV
Illness-Defining illness: Direct and indirect causes - Classification and description of diseases. Infection Control: Medical asepsis, Nosocomial infection and communicable diseases, Reservoir, carrier and mode of transmission.

Unit V

Reference Books:
1. BM Sakharkar, Principles of Hospital Administration and planning – Jaypee brothers Publications.
2. Francis CM,Mario C de Souza ; Hospital Administration – Jaypee brothers Medical Publishers (P) Ltd., New Delhi,2000
4. Sakharkar BM: Principles of Hospital Administration and planning , Jaypee Brothers Medical Publishers (P) Ltd., New Delhi,1999
8. Roger Watson Anatomy and Physiology for Nurses
10. Stedman’s Medical Dictionary
Objective:
The Primary aim of this subject is to provide a clear, concise introduction to micro and macro economics in general and economics as applied to hospital and health care sector in specific. The student will be exposed to Indian health care policies and will also introduce to recent trends in health care sector.

Unit 1: Introduction of Economics

Unit 2: Demand Analysis

Unit III: Health Determinants

Unit IV: Market Analysis
Market Configuration – Price determination under different marker conditions – nature and Characteristics of Health care markets - Demand for and supply of Health care services- Market failures and Government intervention and control.

Unit V : Health care Finances and Trends


Reference:
UNDP : Human Development report, OUP, Newyork (recent three Years)
Objective: The objective of this paper is to teach the students the principles of management including group dynamics and organizational development.

Unit I

Unit II

Unit III

Unit IV

Unit V
Organizational Development – Interventions Techniques - Assessment – Organizational culture Creating and sustaining organizational culture – Organizational climate - Developing sound organizational climate – Organizational effectiveness.

Reference Books:
Objective: The Objective of this paper is to impart the fundamental skills of using Computers in Hospital Management.

Unit I
Introduction to Computers
Definition, data representation, hardware, software, generations of computers, Internal and external DOS commands

Unit II
MS-Word: Templates and wizards, editing, formatting text, drawing, paragraph, alignment, spell check, printing, views, index, table of contents, macro tables- generating reports for different levels of Hospital Management.

Unit III
MS-Excel: Data entry, editing, formatting, charting and mapping data, data handling, graphs, functions, formulas, goal seek, scenario, solver, filters.-Using spreadsheet for keeping and reporting data in Hospitals

Unit IV
MS-Access: Data in tables, using forms, queries, Reports, relational data base

Unit V
Power Point: Formats, animation, art and sound, templates, file management Introduction to statistical Tools and Analysis on MS Office- Preparing power point presentations relating to Hospitals.

Reference Books:
Lonnie Moseley and David Boodey : Mastering Ms Office 97,BPB Book centre
Rajaraman V. Fundamentals of Computers PHI, New Delhi,1996.
Objective: The objective of this paper is to make the students familiar with the statistical and mathematical techniques and their applications in business decision making.

Unit-I: Functions, Linear, Quadratic, Logarithmic and Exponential Functions- Permutations and Combinations – Matrices - Solving System of Equations with Matrix Methods – Differentiation and Integration of Simple Functions and their Applications.

Unit – II: Measures of Central Tendency – Measures of Dispersion – Simple Correlation and Regression Analysis – Concept and Applications of Multiple Regressions.


Unit-IV: Sampling and Sampling Distributions – Estimation – Point and Interval Estimates of Averages and proportions of small and Large Samples –Concepts of Testing Hypothesis –One Sample Test for Testing Mean and Proportion of Large and Small Samples.

Unit – V: Tests Two Samples –Tests of Difference between Mean and Proportions of Small and Large Samples – Chi-square Test of Independence and Goodness of Fitness- Analysis of Variance.

Suggested Books:

2. Nagar, Das – Basic Statistics, Oxford University press.
3. Levin, Krebiel and Berenson, Business: A first course, pearson Education Asia.
SECOND SEMESTER

HA 201 HUMAN RESOURCE MANAGEMENT

Objective: The objective of this paper is to teach the student about the Human Resource function relating to the organization of HR Department, recruitment, training and development and industrial relations

Unit I

Unit II
Acquisition of Human Resources / Planning – Forecasting and determination of current and Future Human Resource Requirements – Job Analysis and Job Design Recruitment - Selection, Orientation (Socialisation) and Placement.

Unit III

Unit IV

Unit V

Reference Books:
Akhilesh & Nagaraj.HRM 2000 Indian
K.N.Subrahmanian – Perspective Wages
HA 202 HOSPITAL SERVICE MARKETING

Objective: The objective of this course is to enhance the marketing skills of the student with special reference to Hospital Services marketing.

Unit I
Introduction: Introduction to marketing management. How marketing management is distinct in Health care industry
Marketing segmentation in Hospital marketing.

Unit II

Unit III

Unit IV
Internal marketing – Importance and objectives – Roles of a service employee – Internal marketing strategies; External marketing – Promotional mix – Promotional campaign design; Interactive marketing.

Unit V
Service distribution; Service Demand and Capacity Management; Physical evidence – Type of service scapes – Physical evidence strategy; Service recovery strategies.

Reference: Books:
Milica Z.Bookman, Karla R.Bookman; Medical Tourism in Developing Countries., Palgrave Macmillan. 2007
203. Communication and Report Writing For Health Care Managers

Objective:
To understand the importance of business communications and its role in organizations.

UNIT I: Business Communication:

UNIT II: Organizational Communication Process:

UNIT III: Channels of Communication:

UNIT IV: Business Correspondence:

UNIT V: Report Writing:

Reference:
Rajendra Paul & KorehalLI : Business Communication
Bovee et al : Business Communication Today - Pearson Education
ICFAI : Business Communication
**Objective:** The basic purpose of this course is to develop an insight of postulates, principles and techniques of accounting and utilisation of accounting information for decision-making.

**Unit-I:** Nature and Scope of Accounting – Financial Accounting Vs Cost Accounting Vs Accounting for Management – Financial Accounting System-Generally Accepted Accounting Principles - Elements of Profit and Loss Account – Balance Sheet (Theory only)


**Unit – V:** Budgeting – Types of Budgets – Financial Budgets – Operating Budgets – Cash Budget – Production Budget – Flexible Budget – Concepts of Performance Budgeting and Zero Based Budgeting.

**Suggested Books:**

2. N.M. Singhvi, Management Accounting: Text and Cases, Prentice Hall of India.
4. Ravi M. Kishore, Management Accounting, Taxman Publications.
10. Paresh P. Shah, Management Accounting, Wiley India, New Delhi.
HA 205 FINANCIAL MANAGEMENT

Objective: The objective of this paper is to impart the skills relating to the organization of the finance function in terms of fund mobilization and deployment and to equip the students with basic principals of Financial Management and Techniques.


Suggested Books:

Objective: to make the student to understand the concepts in biostatistics and to apply the techniques in decision making.

Unit I
Data and Information, Variables, Sampling, Data Collection Data and Information – Variables and Types of Variables – Sampling, Sample size and Sampling techniques - Data types – Primary and Secondary Data - data collection - Respondents, interviews, observation, questionnaire, survey, direct and indirect research techniques – Data Collection in Quantitative and Qualitative Research - Organizing the data.

Unit II
Data Analysis
Data Analysis – techniques and tools – manual and computerized – use of statistical software in data analysis - univariate, bivariate and multivariate analysis

Unit III
Data Presentation
Data Presentation - frequency distribution, charting of data – Bar Chart, Pie chart, Line Diagram, Tables, Histogram.

Unit IV
Demography and Vital Statistics
Mortality and Morbidity Rates, Birth Rates, Specific Death Rates, Fertility Rates, Abortion Rates etc

Unit V
Hospital Statistics
Application of statistics in healthcare and hospital settings - utilization of the basic data, sources of health statistics, problems in collection of sickness data, measurement of sickness, vital statistics.

References:
Mahajan B.K. Textbook of Biostatistics
Kirkwood and Sterne. Essential Medical Statistics
Dawson and Trapp. Basic and Clinical Biostatistics
THIRD SEMESTER

HA 301 Hospital Planning and Engineering

Objective: The Objective of this paper is to teach the student the skills of hospital planning including clinical and radiological service planning.

Unit I
Introduction to better patient care
Hospitals, beds, utilization, personnel, assets, finances

Unit II
Surveying the community
Area wide planning, planning for general Hospital service, determining the logical centers for hospital location, determining the area served by them, non acceptable hospitals, occupancy and bed ratios, determining the size and kind of hospital service, quality of facilities and services, evaluating the natural and human resource of each area in terms Sourcing finance, hospital constitution.

Unit III
Functional plans for hospital construction
Role of hospital consultant, planning stage: role of architect, working drawings, legal formalities, the hospital site, design considerations, environments regulations, equipment planning, bed distribution, space requirements, their relationships, construction costs.

Unit IV
Functional Hospital Organization
Hospital code of ethics, medical ethics, standards for hospitals, standards for hospital accreditation, accreditation standards for extended care facilities.
Medical Specialties
Overview of the functions and sphere of each specialty: oncology, general medicine, cardio thoracic gastroenterology, urology, radiology, psychiatry, endocrinology, neurology, ophthalmology, medical services, surgical services, operation theatre, maternity services, dental services.

Unit V
Supportive Services
Clinical Laboratories, radiological services, medical records, front office, billing, staffing, house keeping, transportation, dietary services, emergency services, infection control, and mortuary services.

Reference Books:
Srinivasan, A.V. (ed), Managing a Modern Hospital, Chapter 2, Response Books, New Delhi, 2000.
Objective: To make the student to understand MIS as a managerial decision making tool and to know the sources and compiling of MIS.

Unit I
Introduction to Management Information Systems

Unit II
Health Records

Unit III
TELEMEDICINE

Unit IV
Software Applications in Health Care
Awareness on the application of computer software packages in Various functions of Hospital.
Internet and Intranet and their application in healthcare.

Unit V
Practicals of Software Applications -

Reference Books:
Informatics for Healthcare professional - Kathleen M,
Management Information system - James O’Brien, Tate McGraw Hill
Objective: The objective of this course is to introduce basic concepts and process of Supply Chain Management.

Unit – I
Introduction to Supply Chain – Concept – Need and Evolution. Approaches, phases and processes of supply chain drivers and obstacles. SC strategies – strategic fit and scope.

Unit – II
Planning Demand and Supply in SCM – Demand forecasting, aggregate planning, managing predictable variability. Customer Service and Integration of Technology in SCM (IT & E business)

Unit – III
Inventory planning and managing inventory in SCM – Factors affecting inventory approaches and methods to manage inventory

Unit – IV

Unit – V

Suggested Books:
Sunil Chopra and Peter M, SCM-Strategy, Planning & Operation, PHI
Rahul V. Attekar, SCM – Concepts & Cases, PHI
Mohanty RP, & Deshmukh SG, Essentials of SCM, Jaico
Mentzer, John T., Fundamentals of SCM-Twelve Drivers of Competitive Advantage, Sage
Agarwal DK, Logistics & SCM, Macmillan India


Objective: to make the students familiar with principles and techniques of Operations Research and their applications in decision-making.


Unit – II: Transportation Problem – Assignment Problem – queuing Theory – M/M/I and M/M/C Models.


Suggested Books:

Objective: The objective is to make the student to understand the psycho social aspects of the patient and resulting behavior in a stressful condition.

Unit I

Unit -II
Policies and procedures of the hospitals for patients and personnel.

Unit -III
Patient care
Introduction, Importance of improving the quality care of patients, role of natural and human resources in patient care management, patient counseling: for surgical procedures, for treatment, grief counseling; protocols, medicare standards.

Unit -IV
Hospital Administration
Role of Medical Superintendent, Hospital Administrator, Resident Medical Officer, Night duty Executive; Public and guest relation: importance in patient care, information regarding patients, code of press relations, medical information, patient information booklets, attendants’ management.

Unit -V
Legal responsibilities
Essential documents, state licensure, civil rights, authority of examination, treatments, autopsy, responsibilities of medical staff, tort liability, insurance, use of investigational drugs.
General policies and procedures of the hospitals for patients and personnel.
Need, legal implications, Pollution Control Board act, safe collection, segregation, disposal, dumping, incineration and training.

Reference Books:
S.G.Kabra, Medical Audit.
Environment Management Systems, ISO 14000 Documents.
Objective: To familiarize the student with hospital operational activities. The student shall understand the process of purchase and inventory management in a health care establishment, apart from productivity aspects.

Unit I
Front Office-Admission – Billing – Medical Records – Ambulatory Care- Death in Hospital – Brought-in Dead.Maintenance and Repairs Bio Medical Equipment-

Unit II

Unit III
Supporting Services – House Keeping –Linen and Laundry, - Food Services -Central Sterile Supply Department (CSSD)-

Unit IV
Facility Location and Layout importance of location, factors, general steps in location and selection decision process, types of lay outs – product, process, service facility layout; Introduction, setting work standards, techniques of work measurement, time and motion study, standard time, PMT, work sampling, calibration of hospital equipments.
Productivity measures, value addition, capacity utilization, productivity – capital operations, HR, incentives calculation, applications in hospital

Unit V
Purchasing strategy process – organizing the purchasing function – financial aspects of purchasing – tactical and operational applications in purchasing management Inventory Management: valuation and accounting for inventory – physical location and control of inventory – planning and replenishment concepts – protecting inventory; Value Management, Value engineering, value analysis.

Reference Books:
Madhuri Sharma, Essentials for hospital support services and physical infrastructure, Jaypee Brothers Publications.
Sakharkar BM, Principles of hospitals administration and planning, Jaypee Brothers publications.
Francis CM, Mario C de Souza: Hospital Administration, New Delhi, 2000.
Reaction of patients towards evening OP services in Delhi Hospitals, Hospital Administration, 14 (13), 1977.
Prabhu KM, Sood SK: Hospital Laboratory Services Organization and Management, Journal of Academy of Hospital Administration, 2(1) 1990.
Srinivasan, A.V.(ed), Managing a Modern Hospital, Chapters 12, Response Books, New Delhi,2000.
Objective: The objective of this paper is to acquaint the student with the systems of management control and performance evaluation in Hospitals.


UNIT-II: Structure of Management Control: Responsibility Centers – Expense Centers -Revenue Centers – Profit Centers- Investment Centers, Research and Development Centers- Transfer Pricing – Objectives – Methods – Pricing Corporate Services and Administration of Transfer Prices.


Suggested Books:

Objective: The objective of this paper is to introduce the student to the concept and practice of Quality Management and Control.

UNIT I
Aspects of quality - Quality mission, policy and objectives; concepts, evolution and determinants of quality; interpretation and process of quality audits; cost of quality and economics of quality. Contribution of quality gurus. Shewhart, Juran, Figenbaum, Ishikawa, Deming and Taguchi; SQPC, SQC, CWQC, TPM, TQC.

UNIT II
Total Quality Management
Definition, underlying concepts, implementation and measurement of TQM, Internal Customer Supplier relationship, QFD, Quality Circles, Quality Improvement teams, team work and motivation in TQM implementation, training and education, role of communication in implementing TQM.

UNIT III
Management of Process I
Process in service organization and their control, simple seven tools of quality control: Check Sheet, Histogram, Scatter diagram, Process Mapping, Cause and Effect diagram, Pareto analysis, control charts and Advanced tools of quality.

UNIT IV
Management of Process II

UNIT V
Management of Quality
Facets of quality, quality planning, quality improvement methods. Kaizen, quality audits, medical audit, accreditation, nursing care standards, Six Sigma, JIT and NABI.

Reference Books:
Objective: The student is expected to understand the nuances of Insurance and in particular the Health Insurance.

Unit I
Introduction – Economics of Life and Health Insurance – Importance, sociopolitical realities
Insurance terminology

Unit II
Health Policy vis-à-vis Health Insurance Policies.- Indian scenario – different products – demand and scope - limitations

Unit III
Administration of health Insurance Schemes like CGHS & ESI and Social Security Measures.
TPAs, Governing mechanisms including IRDA

Unit IV
Health Insurance Taxation.
Standardization and grading of hospital services
Role of vigilance and real-time information about the services

Unit V
Health Insurance Providers – Government and Private - Microinsurance, The role and responsibilities of provider-insurer-patient and the regulatory agencies

Reference Books:
Objective: The Hospital being a part of the larger socio political set up the student will be exposed to the legal and ethical issues pertaining to the Hospitals.

UNIT I
Establishment, Registration and Regulation of Health care organization
Registration and regulation of health care organization under Andhra Pradesh Private medical Care Establishment Act 2002; formation of Health care organization under partnerships and corporate basis (private and public) and compliance with Medical Council of India act.

UNIT II
Hospitals and Labor enactments
Hospital as an industry – unrest in hospitals – Dispute Settlement mechanism Arbitration, conciliations and adjudication of disputes; Role of trade unions, unfair labor practices and victimization – disciplinary actions – requisitions of a valid disciplinary enquiry – Service conditions – Retrial benefits – Social security and Insurance.

UNIT III
Hospital Services and Law
Contractual obligations in hospital services – requisites of a valid contract – Hospital as a “bailee” – Physicians – patient relations – duties towards patients by medical and Para – medical staff – medical ethics and code of conduct to be observed in rendering hospital services.

UNIT IV

UNIT V
Liability of Hospitals
Contractual liability: Award of damages and principles relating thereto, criminal liability and defenses available to hospitals and medical staff. Tortuous liability and vicarious liability.
Legal remedies available to patients. Remedies under contract law, tort, criminal law and consumer protection Act.

Reference Books:
Indian Penal code, Indian Evidence Act, Criminal Procedure Code
Industrial Disputes Act, Indian Companies Act
Indian Medical Council Act.
Andhra Pradesh Private Medical care (Establishment, registration and regulation Act, 2002
Objective: To familiarize the students to identify the areas of safety and risk, and managing of the same, to familiarize the hospital administrators in the area of disaster management.

Unit I: Security Organization and Management:


Unit II: Hospital Acquired Infection (HAI):


Unit III: Fire Hazards:


Unit IV: Radiation Hazards:


Unit V: Disaster Management:


References:

Objectives: To familiarize the students in drug development process and Pharmacy, to familiarize the application of technology in health care.

UNIT I: Drug Development:

UNIT II: Pharmaceutical development Process:

UNIT III: Pharmacy Law:

UNIT IV: Concepts & Issues Related to Health care Technology:

UNIT IV: Application of Technology in Different Health care Units:
Application in Diagnostic Service Areas (Radiology, Lab Services Etc) - Clinical Services Areas (Nephrology, Urology, Cardiology Etc) – Therapeutic Services - Patient Support Areas - Telemedicine – PACS – RFID – paperless Hospitals - Biomedical Informatics – Artificial Intelligence and Robotics in Health care – Factors Affecting the Growth of New Medical Technology.

Reference:
407. Entrepreneurship & Consultancy in Health care

Objective:
To create interest in students to start a venture, learn the intricacies of starting as enterprise, identifying opportunities, incluating enterprising values with orientation towards setting up own enterprises and equip the student to take up consultancy work in various facets of hospital management.

UNIT I: Overview of Entrepreneurship:
Overview: Definition and Meaning of Entrepreneurship Characteristics and Function of Entrepreneur Importance and Limitations of Entrepreneurship: Entrepreneurial Laboratory: Types of Entrepreneurs Entrepreneurship Games Innovation and Entrepreneurship.
Idea Generation: Brain Storming in terms for Project Ideas, Normal Group Technique; Creativity. Lateral Thinking; Research &Development, Reverse Engineering IPR, Patenting; Environment Scanning Opportunities in Health care; NGO Collaboration.

UNIT II: Feasibility Study:
Support Systems for New Enterprise Creation, New Enterprise Identification and Selection Enterprise Establishment and Management.

UNIT III: Sources of Finance:

UNIT IV: Overview of Health care Consultancy:
Consulting industry with specific reference to hospital and Health care Consulting Perspective. Professionalism & Ethics in Consulting Consultant – Client Relation ship, Behavioral roles of consultants.

UNIT V: Consulting Process in Health care:

Reference:
11. Mick Cope : The Seven Cs of Consulting: Yours Complete Blue Print for any Consultancy Assignment, Prentice Hall Of India 2000