F No. 20-2/2021-2021-CGHS/CZ/DIR/CGHS

(E-file number 8139325)

Government of India

Ministry of Health and Family Welfare

Office order

<u>Subject: Guidelines and Standard Operating Procedures for visiting doctors of different specialties, during their visit to CGHS Wellness</u> Centres

Computerization in CGHS started in 2006 and by 2008 all Wellness Centres had transitioned to working online while attending to patients. However, the visiting doctors from government hospitals like Dr Ram Manohar Lohia (RML) and Safdarjung Hospital continued working offline. With digitization being adopted in CGHS for providing more and more online services and data entry, it was decided to include the visiting doctors also in the ambit of online health data entry of beneficiaries, the purpose being as follows:

- The medicines to the maximum extent possible be prescribed from the available Wellness Centre stock (mainly generic medicines issued by MSD and Jan Aushadhi), the focus being on prescribing available generic medicines as per GoI policy, and reduce the dependence on Authorized Local Chemist.
- 2. Capture the credentials of all doctors (whether in-house or visiting) in the CGHS database for prescription audit purpose.
- 3. Reduce the waiting time of beneficiaries in the Wellness Centre by doing away with the need for beneficiary to wait in line again to get an online prescription.

In this regard, an OM on "Guidelines & Standard Operating Procedure for specialists and GDMOs with PG degree from Wellness Centres/ Government hospitals visiting CGHS Wellness Centres" was issued vide Office Order 20-2/2021-2021-CGHS/CZ/DIR/CGHS dated 23 May 2022. In continuation of the said office order and in order to further smoothen the process of visiting doctors from government hospitals working online while visiting CGHS Wellness Centres, the following guidelines and Standard Operating Procedures are issued:

- A. All visiting doctors of various specialities shall be issued Visiting Doctor ID (_VD) by Additional Directors of city/zone. This ID has the functionality of GDMO ID (doctor ID) i.e., medicines would be issued/indented from the visited Wellness Centre and not parent Wellness Centre. This _VD ID shall be transferred by CMO I/C to the next Wellness Centre to be visited by the visiting doctor and received by the next CMO I/C on the day of the visit. To a beneficiary, the _VD ID would be visible as a "specialist" in the online appointment system.
- B. As stated in the previous OM, it is reiterated that the existing "specialist ID" (which issues/indents medicines from parent rather than visited Wellness Centres) shall be done away with and _VD ID shall also be

created for all specialists of Wellness Centres/Polyclinics since Polyclinics are located in the vicinity of Wellness Centres and medicines can be issued /indented from the said Wellness Centre. This is to ensure that beneficiaries from outside the city are not issued/indented medicines from outside city parent Wellness Centre by default, which leads to grievances and complaints. In case a beneficiary insists for medicines to be issued/indented from parent Wellness Centre, the quantity shall be made zero by the visiting doctor/Polyclinic doctor and the beneficiary may visit his parent Wellness Centre for the required quantity of the medicines to be entered online by the GDMO.

- C. The following changes shall be brought in by NIC, in the Doctor's Module:
- i. The visiting doctor of different specialties may be given an option of **choosing the starting date** of the 30 day validity for investigations, while issuing online referral. Till this functionality is developed by NIC, as handwritten prescriptions of government specialists with stamp are honoured in NHA, the visiting specialists shall issue the required investigations that need to be done later, in a hand written format with the remark, "to be done after months".
- ii. A template to enter the reports of the patients which is also retrievable, shall be provided to make the process of entering investigation reports less time consuming.
- iii. In the doctor's module, drug regimen with the common abbreviations such as OD, BD etc. may be depicted by symbols such as 0-1-0, 1-0--1.
- D. A preliminary screening of patients may be done by the doctors posted in the Wellness Centre so that not every patient gets referred to the visiting doctor.
- E. Since the visiting doctors are required to report back to RML Hospital/Safdarjung Hospital by 2.00PM, for various other duties, they shall attend to patients in the visited WC, from 9.00AM to 1.00PM. Accordingly, the CMOs I/C shall adjust the timing of visiting doctors from RML and Safdarjung in "Appointment Slot Plan" in the left side menu under "Appointment" in the CMO I/C module. The ratio of online to walk-in appointment shall be initially kept at 3:1 for each half hour slot and after 02 months may be restored to 5:1 ratio, depending on total appointments. The other visiting doctors (Polyclinics/GDMOs with PG degree of WCs) shall continue working from 7.30AM to 2.00PM with 5:1 ratio of online to walk-in appointments and the Slot Plan may be made accordingly.
- F. It shall be mandatory for all the visiting doctors (whether from RML/Safdarjung/Polyclinic/GDMO with PG degree from another WC), to mark their attendance through the BAS in the Wellness Centres/Polyclinic visited.
- G. The current system being followed in Wellness Centres, of entry of visiting doctor (whether from RML/Safdarjung/Polyclinic/GDMO with PG degree) appointments in registers shall be done away with. There is provision in the Wellness Centre Registration Module to book online specialist appointment for a beneficiary, within the 30 day window period, using the "Walk-in Specialist Appointment" option seen in the left side menu under "Appointment". (This is in addition to the functionality whereby the beneficiary himself can book online appointment through "Beneficiary Login" or seek the assistance of CGHS Helpline 1800-208-8900 to book online appointment). In all these instances, the beneficiary is sent a system generated SMS confirming his appointment date, specialist name

- and allotted time and thus sparing him/her the hassle of waiting unnecessarily in the Wellness Centre.
- H. In those Wellness Centres being visited by doctors from RML/Safdrajung, CMOs I/C shall display prominently at the Registration Counter, on PVC signage, the visit timing of specialist, i.e., from 9.00AM to 1.00PM as follows:

"Visiting doctors(s) from RML Hospital/Safdarjung Hospital shall be available from 9.00AM to 1.00PM on the days of their visit".

- I. In case of short notice leave by visiting doctors, or they are assigned any other duty on the scheduled visit day, the beneficiaries would be informed about the leave of the doctor through system generated SMS sent through online appointment system. The beneficiaries in such instances shall be encouraged by Wellness Centre to use eSanjeevani teleconsultation, for consultation and renewal of their prescription. The MTS have been trained in eSanjeevani teleconsultation process and shall assist beneficiaries for the same.
- J. The dummy CGHS module and steps to be followed while working on it, have been shared with In-charge of CGHS Wing RML Hospital and Safdarjung Hospital, for onward sharing with their visiting doctors so that they can familiarize themselves with the module. It would be mandatory for the visiting specialist to prescribe medicines and referrals through the computer module while attending to patients in the Wellness Centre, but for the time being, the detailed history, symptoms and examination findings, etc. may be entered in ink on the online prescription print out issued. Two computer generated print outs may be given to the patient, one with the medicines and referral issued online as well as the details of history, symptoms etc. written in ink and the other for submission at pharmacy counter for dispensing medicines (a third maybe required in case a referral is also given). Later, once the computer module provision for entering and retrieving data related to history, symptoms, examination findings etc. is developed by NIC, the entire data entry may be shifted to online mode.
- K. The CMOs incharge of Wellness Centre may be accommodative regarding number of daily appointments allotted for visiting doctors, especially in the initial 02 months, since some time would be needed for visiting doctors to get familiar with the doctor's module and there were clear directions that no Data Entry Operator (DEO) is to be provided to the visiting doctors.
- L. Initially approximately 30 to 35 patients may be attended from 9.00AM to 1.00PM by visiting doctors from RML/Safdarjung Hospital. This number may be increased after 02 months, once the visiting doctors become familiar with working on the computer.
- M.CMOs I/C shall share (email/whatsapp) the list of medicines available in their Wellness Centre, and the CGHS rate list items with the visiting doctors of RML/Safdarjung, prior to their visit to that Wellness Centre, so that they familiarize themselves with the available drugs and listed investigations and less time would be required to prescribe the drugs and issue referrals.
- N. To the extent possible, only those Fixed Drug Combinations (FDCs) shall be indented by the visiting doctor, that are included in the CGHS formulary (available on the CGHS website cghs.gov.in using "search" option), and whose components are not available in the Wellness Centre.
- O. In situations where FDC are being split (privilege with CMO I/C of Wellness

- Centre to modify indented drugs in case components are available in WC), it shall be ensured that the dosage of each component remains the same as advised by the specialist and the salt composition is unchanged.
- P. MCTC shall hold Zone-wise VCs with all CMOs I/C of Delhi along with their respective ADs, to apprise them of the changes associated with the visiting doctors working online, availability of computers and peripherals & internet for visiting doctors, as well as 14 essential medical equipment approved earlier and readiness of trained MTS in handling patients and equipment.
- Q. MCTC shall also conduct a demonstration of the CGHS module for doctors of Safdarjung Hospital as well as hand-holding session, if required by Safdarjung doctors.

Director CGHS

To

- 1. Addl. Director, CGHS(HQ)/ Addl.DDG(HQ), CGHS
- **2.** Addl. Directors/Joint Directors of CGHS of all Cities and Zones Copy to:
- 1. PPS to Addl. Secretary & DG, CGHS
- 2. PPS to Director, CGHS