



HOSPITAL - BATHALAPALLI

# Centre for General & Secondary Level Healthcare



VicenteFerrer

Rural Development Trust

MESSAGE FROM THE  
**Executive Director**



In the late 90's, Vicente Ferrer took a decision to have good hospitals in rural areas, so that people could access good healthcare like people in the cities.

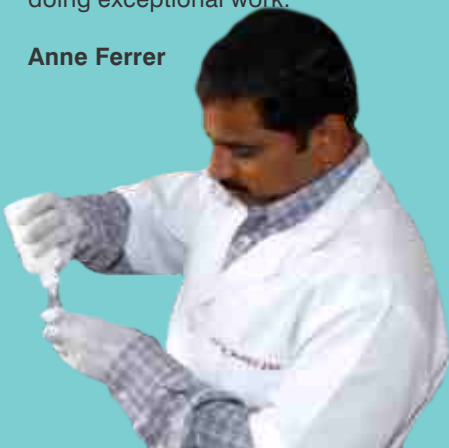
70% of India's population lives in the rural areas, but 70% of its health professionals and good health facilities are in India's cities. Transport is scarce in rural areas, and the majority of poor people live on daily wages and do not have enough resources to access distant services.

So, when any family member is sick, they wait in their village as long as possible to see if the sickness cures itself, to avoid losing their income or travel far to reach a hospital and meet a doctor.

In the year 2000, the Bathalapalli hospital came into being, which is now RDT's main referral hospital with the important departments of Surgery, Gynaecology & Obstetrics, Paediatrics, Medicine, Traumatology, Anaesthesia and Pain & Palliative care.

It also has all the supporting departments of Lab, X-ray, Microbiology and Blood Bank. Bathalapalli Hospital today is at the forefront of our hospitals network doing exceptional work.

**Anne Ferrer**



**Impact**

Medical care provided to

**3,46,052** & **6,70,754**  
in-patients out-patients



**56,990**  
surgeries performed  
as of March 2015

**56,927**  
deliveries carried out  
as of July 2016

**24,462**  
babies cared for  
at the NICU

**Demographic Reach**

**13,77,895**  
villagers registered so far with RDT Hospitals

**Geographic Reach**

**1,280**

villages covered through RDT  
Bathalapalli Hospital services



**2000**

Bathalapalli  
Hospital  
established

**2003**

Blood Bank  
started with  
component  
separation facility

Fully-equipped  
I.C.U. founded

**2004**

School of  
Nursing  
inaugurated

**2006**

Post graduate  
training  
Department of  
Infectious  
diseases



# About the Hospital

RDT extends quality medical care to the poor and needy by making its services affordable and easily accessible.

Before Father Vicente Ferrer started the Bathalapalli hospital in 2000, public health infrastructure was of a very basic nature in the nearby areas. Poor transport facilities, and subsistence level daily wages meant that tending to a sick or injured family member was withheld till it absolutely could not be avoided. By which time the illness or condition of the person would have worsened to a quite advanced level. In a short span of 16 years, the hospital has grown dramatically to its present standing as a 325-bedded medical facility, letting people in rural areas benefit from healthcare services on par with the vastly more expensive private health sector.

Of all RDT hospitals, Bathalapalli is the biggest in terms of comprehensive medical facilities and services. These have been expanded greatly to provide treatment in General Medicine, Paediatrics, General Surgery, Traumatology and Obstetrics and Gynaecology.

Bathalapalli hospital has an Ambulance Service to transport more complicated cases to the other centres in Bangalore, Hyderabad and Vellore, and to receive referrals cases from other hospitals and clinics in its own network, or from outside. The hospital also has robust processes in place for timely and routine follow-up with discharged patients.

To ensure its service levels are on par with those enjoyed by better off or urban Indians, RDT enriches its medical personnel on a continuous basis by providing them opportunities for attending various training sessions and workshops.

“If we join hands, we will transform this world.”

Vicente Ferrer, *Founder - RDT*



## MESSAGE FROM THE Hospital Director



RDT follows an approach of not turning away any patient or family that comes to it for help. A situation that was all too common for rural poor people when they reached out for medical care.

Over 4 decades ago, RDT started working to provide medical support and healthcare services at affordable rates to the rural poor of Ananthapuram, through community health programme thereby supplementing the existing government healthcare infrastructure.

Today, Bathalapalli Hospital being the high quality referral centre, many diseases related to non-immunisation, unsafe living conditions, lack of nutritious food and safe potable water are taken care of.

We not only provide quality health care but we are also a “Temple of Medical Training”. Training Nurses and post graduates is a feather in the cap of our hospital.

Unfortunately, there has also been an increase in the emergence of new diseases, and increase in the incidence of chronic diseases, HIV/AIDS, asthma, hypertension, Coronary artery disease, obesity and cancer. Bathalapalli hospital has greatly extended its medical services over the years to administer to a wide range of needs of its many patients.

Dr. Sudheer Kumar

2010

New Paediatric Care Block inaugurated with well-equipped NICU

2012

Trauma cases & Ortho surgeries started in Orthopaedics department

2014

Cancer Screening

2015

Pain and Palliative Care department founded



# Internal Medicine

The Department of Internal Medicine at RDT Hospital, Bathalapalli started in 2000, deals with the prevention, diagnosis and treatment of adult diseases. Common ailments like Diabetes, Hypertension, TB, Respiratory Infections, Pancreatitis, Myocardial Infarction (MI), Chronic Obstructive Pulmonary Disease (COPD), Acid Peptic Diseases, Malaria, Dengue, Fevers, Liver complications brought on by alcohol consumption or Hepatitis etc. are treated before these diseases reach advanced stages. The focus is to provide comprehensive care to patients with complex diagnoses, as well as patients with the most commonly occurring ones.

Malaria is among the more frequently, all year-round presented cases in the department, as it is endemic to Ananthapuram. The hospital treats 4 to 5 new cases of confirmed Malaria, and 4 to 5 cases of suspected Dengue on an average daily. Aside from these common ailments, the general conditions of poverty and poor nutrition necessitates many patients receive intra-muscular Vitamin B12 injections to treat deficiency, and also receive blood transfusions for low haemoglobin levels. Anaemia is quite common, especially in young women and girls and the hospital averages 2 to 3 transfusions daily.

With its robust exchange and volunteer programmes, Spanish physicians also routinely visit the department and assist the doctors in their work. The hospital has well-equipped and continually upgraded Clinical Biochemistry labs where all diagnostic tests are done.

## Diabetic Clinic

As with the rest of the world, India has seen a dramatic increase in diabetes due to sedentary lifestyles, increasing stress and genetic factors. Rural areas are also being affected by this disease in growing numbers. The hospital registers a mix of patients, ranging from cases of early onset of the disease, to those with commonly associated complications such as Diabetic Foot, Vision Problems, and Chronic Kidney Disease.

All patients are counselled regarding management of the disease and treated in keeping with their symptoms and requirements by trained Diabetic educators in this special clinic.

## Highlights

- 4,483 patients registered for Diabetes in 2015-16
- Outpatient clinic handles a daily average of 250-270 patients
- 70 Malaria patients treated on average every month
- 1 to 2 cases of Meningitis are treated monthly

## Procedures

- Pleural tap to test / draw out collected lung fluid in TB cases
- Ascitic tap to test / draw out collected abdominal fluid
- Lumbar puncture
- Bone marrow aspirates/biopsies lumbar puncture for neuroinfection
- Chest drain insertion

## Infrastructure

- 26 bedded ward
- 2 Isolation beds
- Infusion pumps
- NIBP Monitors

## Staff

- Medical Officers - 6
- Consultants - 1
- Nurses - 5

## We are looking for...

- 2 Medical Officers with MBBS degree
- 1 consultants with MD/DNB/Diploma in General Medicine/Pulmonology/Family Medicine
- Nurses with B.Sc. or GNM nursing degree





# General Surgery

As the residents of this largely poor and socially backward district could not access good surgical facilities because of financial constraints and non-availability of specialists locally, the Department of General Surgery was started in 2000 to treat general surgical problems. Over time though, the department has broadened its scope to performing endoscopic and laparoscopic surgeries too.

Laparoscopic surgery in particular, has proved to be a boon for rural people as it greatly reduces the morbidity and mortality rates compared to open surgery. Patients can be discharged earlier and can resume their normal life easily.

As disease patterns are changing slowly from communicable to non-communicable ones due to changes in lifestyle and stress, cancer care has become a vital part of the general surgery department. The department mainly treats breast cancers in women, and stomach, rectal, and oesophageal cancers in men. When patients were being referred to tertiary care centres for chemotherapy by their doctors, they would not go for a range of reasons, and would eventually come to Bathalapalli with badly disseminated advanced stage cancers. Chemotherapy was therefore started at the hospital under the guidance and expert advice of Oncologists from Christian Medical College Hospital, Vellore, which is a premium referral centre. Constant recommendations and treatment updates are exchanged between the departments via teleconferencing and email correspondence with CMC doctors to ensure diligent cancer care to the poor and uneducated patients. Patients who need radiotherapy are referred by the hospital to other referral centres, usually sponsored by RDT.

Today, Bathalapalli Hospital maintains a full-fledged registry affiliated to the Indian Council of Medical Research (ICMR).

RDT has trained its own staff and doctors to provide the services of endoscopy, colonoscopy and ultra-sonograms to the rural community. Four volunteer surgeons from Spain visit the hospital bi-annually and guide the doctors in performing colorectal and elective surgeries in the workshops conducted for 3-4 days. They are also involved in the Basic Intensive Care and BLS/ALS workshops conducted by Intensive Care department every year. Affiliated to National Board of Examinations to train 2 Residents every year.

## Highlights

- Around 170 patients are seen every day
- About 180 to 200 surgeries are performed every month
- More than 100 delegates from all across India participate in surgical workshops conducted in June and October every year

## Procedures

- Head and Neck Surgeries
- Laparoscopic Surgeries
- Onco surgeries like Breast, Stomach, Rectal, Colon Oesophageal Cancer etc Surgeries
- Open General Surgeries
- Urological Surgeries

## Infrastructure

- Two 12-bedded wards
- Two 3-bedded isolation wards
- 7-bedded Paediatric Surgery ward
- 5 Consultation rooms
- Endoscopy room
- Scan room
- Dirty and clean minor OT rooms

## Staff

- Consultants - 5
- Staff nurses - 26
- Support staff- 3
- DNB residents - 4

## We are looking for...

- 2 Consultants with at least 5 years of experience and 3 freshers with M.S. in General Surgery



# Orthopaedics & Traumatology

The Orthopaedics Department was started in 2003 to partner the Community-Based Rehabilitation (CBR) efforts of RDT. In its early days, a team of volunteer Spanish Orthopaedic Surgeons and RDT's Orthopaedic Technicians conducted field camps to identify congenital deformities, polio cases, cerebral palsy, and other disabilities. They performed surgeries and carried out rehabilitative therapy to improve the quality of life of people with disabilities. Patients in need of Orthopaedic Aid and Appliances were supplied with in the workshops located at four centres within RDT's project area. Spanish volunteers still continue to provide their services in the hospital.

In July 2012, this unit was converted into a full-fledged Orthopaedics & Traumatology Department. HIV-positive patients who sustain fractures and are not operated by other centres are also admitted in the trauma unit. Patients with spinal or head trauma are referred to other Ananthapuram hospitals or hospitals further away on a case-to-case basis.

Surgeries are planned and executed on the basis of the severity of the fracture. All closed fractures, open fractures, paediatric fractures, trauma surgeries, reconstructive surgery cases are managed in the in-patient and out-patient clinics. Adjunct rehabilitation and counselling services help in enabling patients and their families go on to lead well-adjusted lives.

## Highlights

- 7,830 people have been screened via CBR camps and 2,250 surgeries of various kinds were performed until September 2016.
- In 2014, RDT started ligament reconstructions (Arthroscopic ACL Reconstructions) and external fixations (Ilizarov method).
- 18,000 patients have been seen in the OPD and 1,800 surgeries performed as of September 2016
- 1,500 to 1,600 patients are seen and 40 to 50 surgeries carried out on an average every month

## We are looking for...

- 1 consultant with MS/ DNB/ Dip in Orthopaedic surgery

## Procedures

- Treating clubfoot by Ponseti Technique
- Application of cast for undisplaced fractures
- Surgical interventions
- Cast application under C-arm
- External and internal fixation for all types of fractures
- Ilizarov fixation for infected non-unions
- Arthroscopic ACL reconstruction
- Reconstructive Surgeries
- Shoulder and Knee Arthroscopy
- Limb amputations

## Infrastructure

- 14-bedded ward
- 6-bedded isolation room
- Image intensifier (C-arm)
- Arthroscopy unit

## Staff

- Medical Officers - 2
- Consultant Orthopaedic Surgeons - 2
- C-arm Technician - 1
- Nurses in-charge - 2
- Staff Nurses - 10





# Neonatology & Paediatrics

The Paediatrics Department, founded in 2002, was started as families had little or no access to good quality specialised healthcare services for their children. Both general and intensive care is offered for sick new-borns and children across its well-equipped Paediatrics, Neonatal ICU (NICU) and Paediatrics ICU (PICU) wards.

The 92-bedded paediatrics speciality caters to children up to the age of 14 years presenting with a wide range of acute and chronic conditions. The most common paediatrics admissions are for Viral Fevers, Gastroenteritis, Malaria, Dengue, Respiratory Infections and tropical diseases such as Diphtheria, Whooping Cough, Measles, Chicken Pox, Viral Hepatitis, etc. About 108 Thalassemia children are getting treated and the hospital's registry of affected children is the largest in the district. The department offers them the crucial lifelong care they need, free-of-cost transfusions, chelation and regular monitoring. Every year 1-2 children are sent for bone marrow transplantation.

The hospital's Neonatal ICU (NICU) has beds catering to 3 levels of neonatal care. Most babies admitted to the NICU are premature, have low birth weight or with medical conditions like Respiratory Distress Syndrome, Meconium Aspiration Syndrome, Sepsis, Birth Asphyxia and Jaundice. All very low weight babies are fed and monitored till they reach their target weight (at least 1,500 grams). Even after their discharge from the NICU, the babies' families are followed up to monitor for detection of any growth issues, and application of stimulation therapy as needed.

Bathalapalli hospital also has a dedicated 5-bedded Paediatrics ICU (PICU) that offers ventilated and non-ventilated support to children. The PICU is a one-of-its kind unit in the district that is well-equipped with facilities for bedside Testing, Imaging and procedures such as Rapid Sequence Intubation, Central Venous Access, Intra-arterial BP Monitoring, Conventional and Hybrid mode Mechanical Ventilation, Peritoneal Dialysis, etc. The department is equipped to carry out all the required investigations like Imaging, X-Rays, Blood Chemistry Tests. Any child needing speciality services beyond RDT's hospital network's capability is referred to tertiary-care centres for super-speciality services like Paediatric Surgery, Endocrinology, Nephrology, Haematic-oncology, etc. where RDT sponsors the cost of treatment.

## We are looking for...

- Consultants with MD/DNB/Diploma in Paediatrics
- Nursing staff with BSc or GNM nursing degree

## Highlights

- Around 4-5 Thalassemia children undergo blood transfusions every day
- Around 3,200 neonates and around 1,000 children per year are treated in the NICU and PICU, respectively

## Procedures

- Mechanical ventilation (conventional and high-frequency oscillation)
- Central venous & arterial line insertions/ UAC & UVC insertions/ PICC line insertions
- Intercostal & Peritoneal drain insertions
- Surfactant replacement therapy
- Tracheotomy
- Total parenteral nutrition
- Therapeutic treatment of Hypothermia

## Infrastructure

- 30-bedded general Paediatric wards
- 13-bedded High Dependency Unit
- 6 Isolation beds
- 5 bedded PICU
- 38 bedded NICU
  - 8 Level II B ventilation care beds
  - 20 Level II A non-ventilated care beds
  - 10 Level I A Transitional care beds
- Maquet, Engstrom, SLE HFO, and Bearcub Ventilators
- 1 AIRVO High flow
- 4 CPAP machines
- 15 Phototherapy Units
- Transcutaneous Bilirubin-meter
- OAE Audiometry device



# Obstetrics & Gynaecology

The history of Obstetrics has always been closely associated with that of midwifery. For many years, regular antenatal check-ups and scans were not considered important during pregnancy. The need to see a doctor arose only if there was a problem. But as the practice of obstetrics and gynaecology progressed, so did women to keep pace with the rising health needs. After many years of motivation and awareness, the couples now understand that women's health is more than health during childbearing, and it means more than the absence of obstetrics or gynaecological disease.

In any society, education makes women more aware. Some common problems experienced by most women during pregnancy are lack of nutrition in diet and chronic anaemia, which might create problems during delivery. Expectant mothers need to be sensitised early-on about the significance of nutritious diet for them and the child. To achieve this, the Bathalapalli hospital conducts antenatal health education programmes with the help of audio-visual aids for women as well as men to have a better understanding of pregnancy and related complications. Around 10-12 couple counselling sessions are held for expecting mothers at a time.

All women in their reproductive years are encouraged to undergo screening for Cervical Carcinoma during pregnancy. Abnormal uterine bleeding examination and treatment, infertility work up till Intrauterine Insemination (IUI), evaluation of primary Amenorrhea cases, advanced Laparoscopic Procedures, Family Planning Counselling, High-risk Pregnancies, Obstetric Emergencies like Postpartum Haemorrhage, and Postnatal follow-up care, are all handled in the hospital. The hospital is well-equipped to manage obstetric emergencies, from early diagnosis of complications and timely treatment to methodical follow-up, thereby resulting in decreased maternal and neonatal morbidity and mortality.

## We are looking for...

- Experienced Obstetrician and Gynaecologist with a PG degree or Diploma who can handle high-risk deliveries
- Senior Gynaecologist well versed in Laparoscopic Surgeries
- Trained nurses mainly in midwifery

## Highlights

- 56,927 deliveries carried out as of July 2016
- Around 5,000 deliveries take place every year
- Around 2,000 Gynaecological Surgeries performed every year
- A daily average of 200-250 Antenatal and 100 Gynaecological Patients are seen daily in the OPD
- An average of 400 deliveries conducted every month

## Procedures

- Minor OT
  - Colposcopies, Hysteroscopies, Biopsies and Dilation & Curettage (D&C) ultrasound
- Major OT
  - All types of open and vaginal surgeries (including Lap hysterectomy)
  - Gynaecological Endoscopies
  - Gynaecological Onco-surgeries
  - Lap Myomectomy Tubal recanalization
  - Reconstructive surgeries

## Infrastructure

- 13-bedded Antenatal ward
- 13-bedded Postnatal ward
- 13-bedded high-risk pregnancy ward
- 13-bedded Gynaecology ward
- Baby care and observation room equipped with baby-warmers and Neopuff and pulse oxymeters and a transport incubator
- 10-bedded OB/GYN casualty and labour room
- Well-equipped facilities with an emergency lifesaving cart with a defibrillator, CTG machines, infusion pumps, syringe pumps and ultrasound scan machines.





# Critical Care (ICU)

Critical care services in Bathalapalli hospital were initially started in 2002 as part of Department of Anaesthesiology. The addition of state-of-the-art infrastructure, improved decision-making and an increased depth of knowledge and technical skills in understanding and managing critically ill patients led to it being delineated as a separate department later. The ICU provides effective, quality-intensive care to extremely poor and underprivileged patients with life-threatening injuries and illnesses in and around Ananthapuram.

Some of the regular conditions treated here include:

- Deliberate self-harm attempts: This is a common occurrence particularly among young adults; admissions of attempted suicide cases are fairly regular at Bathalapalli hospital e.g. deliberately swallowing Pesticides or Hair-Dye with suicidal intention.
- Bites and stings: This being a rural agricultural community, many people get bitten/stung regularly, and quite a few develop complications, enough to require specialised care and hospitalisation e.g. various snake bite envenomation and scorpion stings.
- Pregnancy-related complications: Lack of proper Antenatal care Poor Nutrition, Anaemia lead to various Gestational and Delivery issues or even Septic Abortions. Many deliveries also involve complications such as Eclampsia, major Haemorrhages, Cardiomyopathy, etc.
- Post-operative care: Major surgeries which require Post-operative Ventilation, Total Parenteral Nutrition, Haemodynamic Monitoring etc.
- Tropical Fevers: Particularly mosquito borne diseases among rural poor, e.g. Malaria and Dengue Fevers

There is a separate counselling room for patients' families where doctors explain them about how to cope with stress effectively. Clinical progress & the disease prognosis are also explained to them in detail. All the ICU management protocols are constantly reviewed and revised based on National & International Guidelines and patients' needs, which helps in reducing the ICU mortality rate. There is a separate Code Blue, Rapid Response team of 1 Doctor and 1 Nurse which responds to critical events (Cardiac Arrest, etc.) in any part of the hospital 24/7. The team also runs periodic checks (monthly) of the emergency equipment (Airway Management Set/Resuscitation Drugs, etc.) in various wards.

## We are looking for...

- **Consultants with MD, DNB or Diploma in Anaesthesiology, General Medicine or Pulmonology and intensivists with critical care degree**
- **Nursing staff with B.Sc. degree or GNM (General Nursing and Midwifery) diploma**

## Highlights

- **Standardised mortality ratio of 0.45 to 0.58 achieved**
- **Yearly Average of 300 patients ICU admissions registered**
- **25-30 cases admitted on an average per month**
- **4 Research papers published in indexed journals in the last 2 years**

## Procedures

- **Advanced Airway Management (including fibre-optic Intubations)**
- **Mechanical Ventilation (including Prone Position Ventilation)**
- **Central Venous and Arterial line insertions (including USG guided CVC placements)**
- **Critical care Haemodialysis (including SLED)**
- **Intercostal drainage insertion**
- **2D echo (FATE) for Diagnosing clinical conditions and also Hemodynamic monitoring**
- **Total Parenteral Nutrition**
- **Tracheostomy (including Percutaneous)**

## Infrastructure

- **Central Air-conditioning and 2 Isolation rooms**
- **For each Bed Multi-parameter patient monitors (both invasive and non-invasive)**
- **Total of 5 Mechanical Ventilators**
- **20 Controlled drug delivery systems**
- **Crash trolley with defibrillator**
- **ICU Haemodialysis unit**



# Anaesthesiology

The Department of Anaesthesiology was started in 2001. From 2002 to 2015, it extended into Critical Care, and since 2011, it has been actively involved in managing patients with chronic pain. Anaesthesiology is concerned with the Pharmacologic, Physiologic, and clinical bases of Anaesthesia and related fields, including Resuscitation, Intensive Care, Acute and Chronic pain. This includes Pre-anaesthetic Evaluation (Pre-operative), Consulting with the Surgical Team, Providing Pain Control and Supporting Life Functions During Surgery (Intra-operative), Supervising Care after Surgery and Pain Management (Post-operative).

This department provides Spinal Anaesthesia, General Anaesthesia, Epidural Analgesia, Combined Epidural and Spinal Analgesia, Short General Anaesthesia, Local Anaesthesia, Labour Analgesia during Labour if requested, Pain Interventions in the Pain Clinic, basic life support and advanced Cardiac Life Support in other departments.

RDT has a collaboration with Bellritge University, Barcelona, Spain and Dr. Victor Mayoral and his team visits the department once in 6 months to train the team in Anaesthesia and Pain Medicine.

## Pain Clinic

The hospital has recently started a pain clinic having a separate pain management team to manage chronic pain (conservative and interventional) and alleviate the suffering of patients referred mainly by Orthopaedic and Palliative Care departments. An average of 70-100 procedures like Ultrasound Guided Facet Block, Caudal Block, Trigger Point Injections, Supra Scapular Nerve Block, etc. are done in the clinic. The doctors also have expertise in managing difficult Airway Situations and Peripheral Nerve Blocks.

Under the guidance of Spanish experts, camps for Colorectal Surgery, Head and Neck, GI And Biliary Tract and Laparoscopic Hysterectomy are conducted. They are also involved in the Basic Intensive Care and BLS/ALS workshops conducted by Intensive Care department every year.

## Highlights

- **An average of 400-450 surgical procedures under Anaesthesia carried out every month**

## We are looking for...

- **2 Anaesthetists with Master's degree either with a background of working in freshers**

## Procedures

- **Central Venous Line Insertion**
- **Arterial Cannulation**

## Infrastructure

- **4 Fully equipped modern OTs**
- **Well-equipped recovery room**
- **Modern Anaesthesia Datex Ohmeda work stations - Astiva and Aspire**
- **Multi-parameter patient monitors with both invasive and non-invasive pressure monitoring facility with airway gas analysers**
- **Controlled drug delivery systems**
- **Defibrillator**
- **Fluid warmers and body warmers**
- **Fibre-optic Intubation units**
- **Emergency Tracheostomy and difficult airway cart**
- **Crash trolley with Defibrillator to manage emergencies**
- **SonoSite ultrasound scan unit for nerve blocks and vascular access**

## Staff

- **Consultants - 4**
- **DNB residents - 6**
- **Anaesthesia Technicians - 5**





# Pain & Palliative Care

Palliative care is a multi-disciplinary approach to specialised medical care for people with serious illnesses. It focuses on providing patients with relief from their symptoms, pain, physical stress and the mental stress of a chronic illness which is not responsive to curative treatment. The purpose behind palliative care is to make patients affirm life and regard dying as a normal process.

In the past few years, in addition to old-age related illnesses, there has been a sizeable increase in cases of Incurable Cancers, Chronic Neurological Problems, End Stage Liver Disease, Terminal Renal Disease, etc. in rural areas. These are compounded, due to poverty, by the lack of timely care and regular check-ups or treatment. In such a scenario, palliative care becomes of vital importance.

In India, a huge majority of those in need do not have access to palliative care. Non-availability of proper advice or avenues for pain-management makes many people's end-of-life miserable. Caregivers also have to endure their loved ones' suffering in spite of the treatments and expenses already undertaken till that point.

RDT's Pain & Palliative Care unit started in June 2015 for patients with Chronic Incurable Diseases and their end-of-life pain management. This unit is more patient-centred rather than disease-centred. The focus is on building a partnership between the patients and the caregivers for achieving the best possible outcome. Patients and their families are made aware about the illness and its course, and psycho-social support in the form of counselling is provided to them.

Family members are motivated to take care of patients at home and trained to manage the day-to-day hygiene and sanitation activities, e.g. operating a urinary catheter, diaper management, simple dressing methods, etc., to make the patient comfortable and better their quality of life.

The unit follows WHO's guidelines for pain management, which include respect for patients' choice of treatment, doing good (beneficence), minimising harm (non-maleficence) and fair use of available resources (justice). The unit also provides medication and assists in wound management. Our team also runs the Pain and Palliative care OPD in the Cancer Unit / Radiotherapy Unit at Ananthapuram Government Hospital on every Thursday.

RDT believes that it is important to build awareness among public and invite volunteers to extend help in palliative care.

## Highlights

- 80-90 Out-patients are seen per month
- Every month 20 to 25 patients are getting admitted
- 449 patients have been registered in our pain and palliative care unit

## Infrastructure

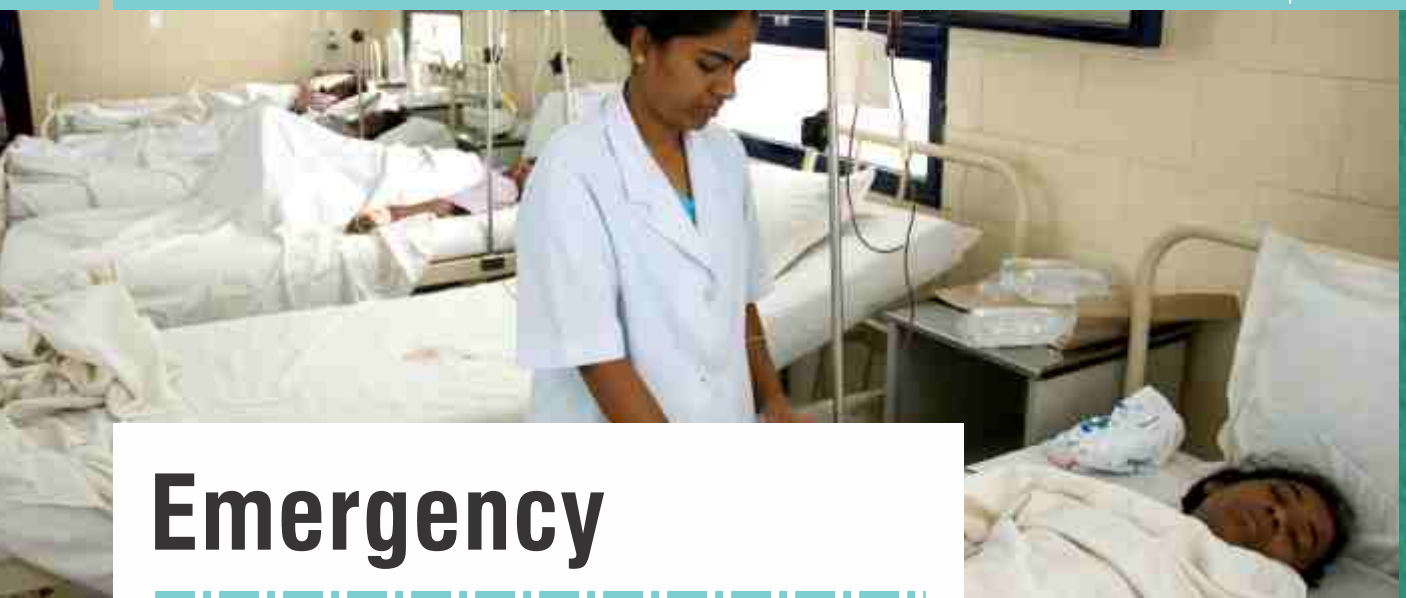
- 6-bedded IPD ward
- 2-bedded day care facility

## Staff

- Medical Officer - 1
- Trained palliative care Nurses - 5
- Support staff - 1

## We are looking for...

- 1 Medical Officer



# Emergency

As Bathalapalli and nearby rural areas did not have any medical centres where people can visit any time, the Emergency department at the hospital was started in 2000, well-equipped to provide patient stabilisation aid in critical conditions. In 2012, an emergency observation room and a separate emergency medicine department were formed with a dedicated team of doctors and nurses.

By 2013, the department was fully capable of on-site admissions, intermediate care, and short stays. Due to uncertainty of the nature of medical emergency, the requirement is to provide initial treatment for a broad spectrum of illnesses and injuries, some of which may be life-threatening and require immediate attention. The department offers 24x7 medical care and doctors and nurses are continually trained and kept updated as per the latest protocols to provide the best possible emergency care to patients.

Cases of Hair-dye Poisoning and Other Poisonings, Suicide Attempt Cases, Snake Bites and Scorpion Stings, Road Accident Victims, Respiratory and Cardiac Emergencies, Hypertension and Diabetics Emergencies, etc. are all attended in the Emergency Department.



## Highlights

- A daily average of 25 to 30 cases treated
- A monthly average of 750 patients treated with 110 cases of multiple injuries

## Procedures

- Clinical evaluation & Triage
- Emergency Echography Life Support and Mechanical Ventilation

## Infrastructure

- 7-bedded Emergency Department
- 6-bedded Intermediate Treatment Unit
- Observation room

## Staff

- Family Medicine Plus Fellowship In Emergency Medicine -1
- Doctors - 4
- Nurses - 16
- Incharge Nurse - 1
- Social Worker - 1

## We are looking for...

- We need MBBS / Emergency Doctors who have experience and knowledge in emergency protocols





# Family Planning Centre

The Government of India has a robust Family Planning programme with which RDT has been associated since June 1988. In 2002, an exclusive facility was set up at Ananthapuram in association with the Government of Andhra Pradesh, with a vision to promote family planning measures.

In the beginning, only conventional sterilisations were done, but over time RDT felt the need to switch to modern and advanced sterilisation methods in order to provide best quality medical care to the needy. Doctors also started performing Laparoscopic Tubectomies in the clinics, which is a permanent birth control solution for women.

Couple counselling sessions are held in the hospital for educating the rural people about the advantages of having a small and healthy family. CHWs and HOs visit the villagers for counselling them about family planning measures.

## Highlights

- **63,752 Conventional Sterilisations and 17,000 Laparoscopic Sterilisations done**
- **13 times award-winner for its Family Control Programme**

## Infrastructure

- **30 bedded ward**
- **Laboratory facility**
- **2 Operation Theatres**
- **Central sterilisation supply**





# Physiotherapy

Physiotherapy is a rehabilitative specialty that remediates impairments and promotes mobility through expert examination, and physical intervention (therapy using mechanical force and movements).

The Physiotherapy Department at Bathalapalli started in 2015 to extend its services to the Orthopaedics, General Surgery, Critical Care (ICU), Internal Medicine, Pain & Palliative Care and Paediatrics departments of the hospital.

Cases of Osteoarthritis, Rheumatoid Arthritis, Cerebral Palsy, Bells Palsy and Facial Palsy, Asthma and Respiratory Problems, Fractures, Back Pain, Cervical Spondylosis, Sciatica, Ligament Injuries, Joint Stiffness, Head Injuries, Paralysees, Spinal Cord Injuries, Debridement, Amputations, Muscle Strain And Pains, etc. are treated in the department.

## We are looking for...

- 1 Nurse to assist the procedures in OPD

## Highlights

- 5,030 cases including those of other departments treated till February 2016
- Approximately 1,500 patients were examined in the out-patient department

## Procedures

- Interferential Therapy
- Ultrasound Therapy
- Wax Therapy
- Transcutaneous Electrical Nerve Stimulation (TENS)
- Lumbar and Cervical Traction
- Muscle Strengthening Exercises
- Range of Motion Exercises
- Pelvic Floor Exercises
- Chest Physiotherapy
- Gait Training Programme

# Medical Education

## DNB Postgraduate programme

Bathalapalli hospital is authorised to run DNB (Diplomate of National Board) post-graduation courses. The hospital has received accreditation by the National Board of Examinations (NBE), Ministry of Health and Family Welfare, Govt. of India, New Delhi, to train 2 Residents in General Surgery (since 2006), 4 Residents (2 primary and 2 secondary) in the discipline of Obstetrics, Gynaecology (since 2009) and 2 Residents in Anaesthesia (since 2014) and 4 Residents in Paediatric (2016). DNB is a 3-year course for the primary candidates (MBBS holders) and a 2-year course for secondary candidates (Medical Diploma holders). These are recognised by the Indian Medical Council. Every year, the faculty assists DNB students in conducting research on various topics, which helps in evidence-based management and continuous specialist care for its patients. The residency is called Diplomate of National Board.

## Rural Placement Centre

Bathalapalli has also been recognised as a rural placement location for doctors by the reputed Mahatma Gandhi Institute of Medical Science (MGIMS) located in Sevagram in the Wardha district of Maharashtra.



# Dentistry

Initially, before a full-fledged Dentistry Department was begun, only Dental Camps were conducted in surrounding rural areas to check villagers' oral health problems. RDT's doctors felt the need to centrally treat dental issues owing to the general low levels of awareness regarding dental health, giving rise to huge number of dental issues. In answer to which RDT added a Dental Department in Bathalapalli hospital in September 2015.

Treatment for Orthodontic Procedures is sponsored by the organisation. Free Dental Camps are conducted every August with the help of Spanish volunteers and almost 200 patients are treated in a day.

## Highlights

- A daily average of 20-23 out-patients treated



## Procedures

- Extractions, Scaling, Fillings, Root Canal Treatments
- Treating Various Oral Infections
- Replacing Fixed & Removable Prostheses, and Complete Dentures

## Infrastructure

- Dental Chair
- Digital Intraoral X-ray Facility
- Standard Air Compressor
- High Vacuum Suction for Surgeries
- Endomotor with Apex Locator for Root Canal Treatments
- Standard Autoclave for Proper Sterilisation of Instruments
- Led Scalar and all other accessories

## RDT Nursing School

With the vision to educate rural women and empower them for becoming self-sustainable, the organisation started RDT Nursing School in Ananthapuram in 2004. The nursing course is for the duration of 3 years. Few students who pass out from the school after completing their course are absorbed by RDT in its hospitals in order to develop the required manpower in nursing and to address the rate of attrition. This also allows nurses to get first hand work experience and exposure at the hospitals and guarantees job placement for them. A certain percentage of SC/ST/OBC/OC category students are also included for scholarship and fee concession by RDT. The ultimate aim of the school is to prepare good nurses who care for patients with a good heart and compassion.

## CME (Continuing Medical Education) Workshops

RDT conducts regular CME workshops with the help of eminent speakers from various hospitals in South India to deliver lectures and hold demonstrative surgeries to its doctors, nurses and technicians. These workshops are based on different themes every year and cover topics important for enhancing skills of doctors. In turn, they can cater to the health needs of society much more efficiently and can handle individual cases with precision. On an average 10 to 12 CME programs are carried out yearly at Bathalapalli Hospital across all departments. The objective behind conducting such workshops is to encourage doctors to gain hands-on experience on diverse cases.

# Support Services

Much of the RDT's ground work is carried out by support services that facilitate better overall functioning and offer best possible health care services to the patients.

## Pharmacy

A 24-hour Pharmacy is available for the convenience of patients and their families. All the common and useful Medical and Surgical Consumables are available at the store.

## Radio Diagnosis & Imaging

The Department of Radiology was started in 2002. With the help of imaging techniques, physicians are able to provide early and reliable consultation to the patients, increasing the chances and rate of recovery. It helps in better diagnosis, management, and follow-up of patients. Abdominal and Pelvic ultrasounds are extensively carried out as a subset of the Obstetrics & Gynaecology department. As a part of its Cancer Screening Project, a Mammogram Machine has been recently added at Bathalapalli hospital to diagnose breast cancers at an early stage. Computer Radiography facility is available.

## Nutrition & Dietetics

The Bathalapalli hospital offers nutritious and ailment-specific diets to its patients, e.g. high protein diets, Jejunostomy feeds, Ryles Tube feeds, and diabetic and renal diets are also provided as per the advice of the nutritionist. The food is provided free of cost to its patients.

## Blood Bank

Blood bank with the facility of full blood transfusion services was started in 2003 at Bathalapalli hospital. Now, the blood bank is equipped with component separation facility to separate blood into Platelets, Fresh Frozen Plasma (FFP), Packed Cells and Cryoprecipitate (Cryo). The facility is also planning an upgrade to include Plateletpheresis in the near future which will facilitate further the effective use of platelets. With this facility, people have realised the importance of blood donation and saving lives in time.

## Clinical Biochemistry and Histopathology Laboratory

The laboratory with clinical biochemistry and histopathology services was started in Bathalapalli hospital in 2001. In 2009, the histopathology services were separated from clinical biochemistry. Nearly 6,000 biopsies, cytology and FNAC and 1,50,000 clinical chemistry tests conducted together enable the hospital in confirming its diagnoses of TB, benign and cancerous tumours, infectious diseases detected via lesions and many more ailments. There are plans to add new instruments in the clinical chemistry lab and immunohistochemistry and liquid-based cytology in pathology services.

## Microbiology

In 2008, the lab started automated blood cultures system which helps in diagnosis of sepsis and fever. Soon, TB diagnosis with microscopy were carried with Auramine staining technique and GeneXpert. Molecular Line Probe Assays help to find out which drugs the TB bacteria in a person are sensitive so new technologies like LPA- GT 48 and Mycobacteria Growth Indicator Tube ( MGIT 960) have been added to identify TB MDR cases from 2015. This is the only lab having liquid culture system for patient follow-up in the Rayalaseema zone.

## Hospital Information System (HIS)

In 2009, RDT brought into use the in-house HIS software. Since then, maintaining patient data has become very convenient. The organised format also helps in fast retrieval of patients' medical history for better treatment. The software is continually being upgraded for future enhancements and better performance.

## Biomedical Waste Management

It is indispensable to dispose of biomedical waste from hospital in a stipulated manner, as it can be extremely dangerous for the health of people. The waste is collected thrice a day from the hospital in collection bins that are color-coded in accordance with WHO guidelines. To cause minimum environmental pollution, bio-waste is disposed of by in-house incineration. Kitchen waste and glasses are buried deep in the ground, and plastics are shredded.

## Ambulance

To ensure that medical care is swiftly provided to patients during emergencies, Bathalapalli hospital has 4 ambulances that are available round-the-clock for transferring critical patients or patients who need to undergo special investigations like CT scan, MRI, etc. to other/higher centres.



# Govt. Tie-ups

- **HIV/AIDS** - Recognised by NACO and APSACS, the hospital is an accredited Integrated[D1] Counselling and Testing Centre (ICTC), ART plus centre with first and second line antiretroviral therapy, and has a robust Prevention of Mother to Child Transmission (PMTCT) programme, which achieves less than 2% HIV transmission from mother to child.
- **Tuberculosis** - Bathalapalli Hospital is recognised by the Government of India's Revised National Tuberculosis Control Programme (RNTCP) as a designated microscopy centre for Tuberculosis and DOTS plus centre for MDR and XDR tuberculosis.
- **Cancer** - Accreditation of Hospital Cancer Registry by National Cancer Registry Programme by National Centre for Disease Informatics and Research – Indian Counselling of Medical Research (ICMR)

## District-level affiliations

RDT works closely with Ananthapuram's District Medical & Health Officer (DMHO) and it's doctors participate in the following programmes:

- Flaccid Paralysis and Polio eradication programme
- Malarial eradication programme
- District Maternal Mortality meeting member
- District Blood Banks and Blood Components programme



# Referral Services

As RDT believes in treating every single patient that comes to the hospital, based on the severity of the condition, the organisation refers sick patients requiring tertiary level care to tertiary hospitals for better medical treatment and for speedy recovery. Approximately 1,839 patients with various health disorders were referred by the organisation to various medical institutions. Treatment expenditure is completely borne by the organisation.

Patients suffering from chronic or acute diseases are referred for in-patient treatment in tertiary care centres mostly located in Bangalore, Hyderabad and Vellore. These hospitals are well-equipped with specialised departments to provide treatment and care. Selection of hospitals is done based on nature of disease, convenience to patients and quality of specialisation in the



## Achievements & Awards

- 5 time-awardee for the highest number of cases for Family Planning in Andhra Pradesh from Chief Minister of Andhra Pradesh
- Two-time awardee for Best Hospital for waste management, segregation and disposal in conjunction with Pollution Control Board from the Chief Minister of Andhra Pradesh (2001 and 2011)

the  
only  
available  
hospital.



# Why RDT?

- The exposure to a mix of high-risk patients under different categories adds to their professional knowledge.
- Doctors who associate with RDT get an exposure to international medical practices, as RDT attracts a host of high-calibre Spanish medical professionals and paramedical staff and other specialist faculty who visit the hospitals regularly.
- Selected medical and paramedical staff who are committed and want to study further are sponsored by RDT for their higher education. After completion of their studies, they should join the organisation for long term, under a mutually beneficial programme.
- The doctors and their families are provided residential quarters in eco-friendly campus along with free water and electricity.
- They get an employee-friendly work atmosphere with flexibility.
- They have access to sports facilities to help maintain a healthy work-life balance.

A chance to serve people in the rural areas with a well-equipped hospital and experienced staff.

## Building your career with RDT Hospitals

We are always keen to partner with talented and impassioned healthcare professionals across a range of functions. We are as committed to our employees as they are to our patients and their families – you can be assured of competitive compensation and benefits to help you secure your future, and safeguard you and your family's healthcare needs.

**The eligible candidates can send in their application, duly-filled in the prescribed format along with the essential documents, i.e. Mark Sheets, Education Certificates, Experience Certificate, Date of Birth Certificate, etc. to**

**You can also apply through our website [www.rdtvf.org](http://www.rdtvf.org)**





# Way Forward

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For many years, lack of medical infrastructure-clinics, hospitals etc. and resources-monetary and personnel have always kept diseases one step ahead of us. RDT has taken various measures to bridge the gap between affordable hospital treatment and the increasing number of people requiring it on a daily basis.

Across India, the effective running of many hospitals is hindered due to the lack of qualified specialists. Therefore, RDT has developed Postgraduate Residency programmes (DNB) in as many disciplines as possible to have a sustained uninterrupted workforce in all departments and to improve the quality of services.

RDT is also working towards improving Hospital Information Systems which will negate human errors and provide quality services in a fast and patient-friendly manner. These secure systems will not only decrease work for the health personnel, but by storing and analyzing medical data, can also help in providing patient specific medical care, optimise resource utilisation, and being better prepared for the prevention and treatment of epidemics and diseases affecting large groups of people.

Many people in rural areas still cannot travel long distances for quality treatment. Therefore, RDT's ultimate aim is to reach out to the community with the services available at the hospital which can be achieved by having a good referral system from the community, and a good follow-up of patients treated there. RDT hospitals also maintain strong relations with the community health teams that reach out to people by working at the grass root level.

For a healthy and happy society, we all need to come together and without underestimating even our smallest efforts, do whatever little that we can to eliminate the barriers that come in the way of quality healthcare and top notch medical facilities.





**VicenteFerrer**

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