Apex Trauma Centre
Sanjay Gandhi Post Graduate Institute of Medical Sciences Raebareli Road, Lucknow - U. P.

SGPGI/ATC/629/2026 **Date: 11-05-2026**

MINUTES OF MEETING

Sub.: Minutes of meeting regarding Digitalization of OPD services at ATC on 05-05-2026, reg.

With regard to the subject mentioned as above, a meeting was conducted under the Chairpersonship of the **Chief, ATC** along with **Medical Superintendent, ATC** on **05-05-2026** at **04:00 PM.**

Following members were present:

1. Prof. Arun Kr. Srivastava, Chief, ATC
2. Prof. R. Harsvardhan, Medical Superintendent
3. Shri. Prakash Singh, JD(MM),SGPGIMS
4. Dr. Romil Saini, Asst. Prof, Psychiatry
5. Dr. Jai kishun, Addl. Prof, BHI
6. Dr. Siddharth Rai, Addl. Prof, PMR
7. Dr. Kuldeep Vishwakarma, Addl. Prof, Oral & Maxillofacial Surgery
8. Dr. Anitta J. Ellenkil, SR I/c ATC, Hospital Administration

Objective of the meeting was:

1. Digitalization of OPD Services in the ATC

The following were the salient points discussed:

SL . No.	Issues Identified	Queries Raised/Discussion	Plan of Action
1.	**Requirement of Digital Tablets (Medical grade or Health grade tablets with stylus pen) for OPD Consultants in ATC**	• The requirement for digital tablets were deliberated upon in view of the proposed **OPD digitalization / Paperless OPD** initiative in ATC, with the objective of ensuring efficient clinical documentation and streamlined patient care services. • It was proposed that **digital tablets may be procured for all faculty members** providing consultation services in the OPD to facilitate smooth implementation of the digital workflow system. • Further, it was also suggested that an **additional**	• It was decided that the **Faculty In-Charge, OPD shall undertake an assessment regarding the requirement of digital tablets** for implementation of the OPD digitalization / Paperless OPD initiative in ATC. • The assessment shall include evaluation of the number of digital tablets required, technical specifications and functional requirements of the proposed devices, keeping in view the

		digital tablet may be provided for each specialty/department to ensure operational continuity, ease of accessibility, and uninterrupted functioning of OPD services in ATC. • The Committee observed that the above measures may significantly contribute towards effective adoption and implementation of the paperless OPD initiative in a phased and structured manner.	compatibility with the existing HIS infrastructure. • Further, the **Faculty In-Charge, OPD shall compile and submit a comprehensive specialty-wise and user-wise requirement list for procurement** and subsequent implementation of the digital OPD services in ATC.
2.	**Software Integration with HIS Portal**	• During the meeting, it was deliberated that documentation of OPD consultation findings through conventional typing by Consultants during peak OPD hours may pose operational challenges and could affect efficiency in patient management. • In view of the above, it was proposed that a digital documentation system, aligned with the existing OPD data entry workflow, may be explored to ensure ease of adoption and uniformity in clinical documentation practices. • **The use of stylus-enabled digital tablets for OPD data entry was suggested** as a potential mechanism to facilitate real-time clinical documentation by Consultants. • It was further discussed that the **proposed system may require integration through appropriate interface software to enable secure and accurate transfer of data entered via stylus-enabled tablets into**	• **JD (MM) expressed support for the proposed software integration initiative** aimed at strengthening the OPD digitalization / Paperless OPD framework in ATC. • It was discussed that **suitable service providers/vendors may be identified for the proposed hardware and software solutions, and demonstrations of the same may be arranged at the earliest before of 15th May**, either through offline or online mode, for technical and operational evaluation. • It was further proposed that such demonstrations may be conducted in the Director's Committee Room or alternatively in the 2nd Floor Telemedicine Committee Room, considering the availability of two-way

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		• The Committee emphasized that seamless integration with the HIS portal shall be essential to ensure continuity of records, efficient data management, interoperability, and maintenance of an uninterrupted digital workflow. • It was agreed that the proposed digital devices and **associated software solutions should be compatible with future technological advancements, including provision for integration of voice-to-text transcription** functionality and other emerging digital documentation features. • Accordingly, it was recommended that upgradeability, interoperability, scalability, and future compatibility requirements be appropriately incorporated within the technical specifications to ensure long-term usability and sustainability of the system. • It was further decided that **prospective vendors/service providers shall also be consulted regarding provisions for future software upgrades,** technical support, and compatibility enhancement with evolving HIS and digital healthcare requirements.	facilities and related technical infrastructure. • It was further discussed that, during the process of evaluation and selection, **due consideration may be accorded to vendors/service providers having prior experience in implementation and provision of similar services in Government institutions/agencies, particularly in healthcare settings,** subject to fulfillment of the prescribed technical and administrative requirements. • Further, **the nominee from BHI was requested to examine and assess the feasibility, compatibility, and applicability of integrating the proposed software solutions** with the existing HIS platform, and to provide necessary technical inputs in this regard.
3.	Concerns regarding the **management, documentation, and handling of medico-legal cases attending the OPD,** particularly with respect to maintenance of accurate	• It was suggested that the proposed **digital documentation system should function on a secure server-based architecture and shall comply with the applicable norms,**	• It was decided that the technical specifications designed by the Faculty incharge to be incorporated in the proposal document shall comprehensively

	clinical records, data security, legal admissibility of digital documentation, and compliance with applicable medico-legal and institutional protocols.	**standards**, and guidelines issued by the Government of India, Ministry of Health & Family Welfare (MoHFW), including the Electronic Medical Records (EMR) Guidelines, 2016, and other relevant data security and interoperability provisions as applicable. • It was further deliberated that, in situations involving network disruption, low bandwidth, or poor internet connectivity, the **system should have an inbuilt provision for temporary local storage of data within the digital tablets/devices to prevent interruption in clinical documentation and patient care services.** • Further, the **feasibility of incorporating an automated synchronization mechanism for transfer and integration of locally stored data into the HIS** server upon restoration of network connectivity was discussed and recommended for detailed technical assessment. • It was also decided that the above-mentioned functionalities and operational capabilities shall be specifically evaluated and demonstrated by the concerned vendors/service providers during the demonstration, technical assessment, and installation phases prior to implementation of the services in ATC.	include all the aforementioned functional, technical, interoperability, data security, upgradeability, and operational requirements to ensure seamless operability and effective implementation of the OPD Digitalisation/Paperless OPD initiative. • **The Committee further agreed that the proposed initiative may initially be implemented on a pilot basis in ATC,** subject to satisfactory technical evaluation, feasibility assessment, and successful demonstration of the proposed hardware and software solutions.

- The meeting ended with directions to ensure time bound compliance of the above decisions.

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(Dr. Anitta J. Ellenkil)
SR I/c ATC, Hospital Administration

(Dr. Romil Saini)
Asst. Prof, Psychiatry, Faculty In charge OPD, ATC

(Dr. Siddharth Rai)
Addl. Prof, PMR

(Dr. Kuldeep Vishwakarma)
Addl. Prof, Oral & Maxillofacial Surgery

(Dr. Jai kishun)
Addl. Prof, BHI

(Prof. Arun Kr. Srivastava)
Chief, ATC

(Shri. Prakash Singh)
JD(MM), SGPGIMS

(Dr. R. Harsvardhan)
MS, SGPGIMS

Copy: For Information

- Director, SGPGIMS
- CMS, SGPGIMS
- MS, SGPGIMS
- Chief, ATC
- All the signatories in the Meeting
- O/o Addl. M.S., ATC
- Guard File, Dispatch Section, ATC

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Raebareli Road, Lucknow - U. P.

SGPGI/ATC/526/2026 Date: 10 -04-2026

MINUTES OF MEETING

Sub.: Minutes of meeting for Expansion of Emergency Department at ATC on 04-04-2026, reg.

With regard to the subject mentioned as above, a meeting was convened under the chairmanship of **Dr. Amit Kumar Singh, Faculty I/c ED & Addl. Prof., Trauma surgery, ATC** on **04-04-2026** at **11:30 AM**, vide circular no. **Ref. No.: SGPGI/ATC/450/ 2026.**

Following members attended the meeting:

1. Dr. Amit Kumar Singh, Faculty I/c ED, ATC — Chairperson
2. Mr. P. K Agarwal, AE, Civil, ATC — Member
3. Er. Subhash Chandra, AE, Civil, ATC — Member
4. Er. Mohit Singh, JE, Civil — Member

Agenda of meeting:

1. To assess infrastructural expansion feasibility of Emergency Department for
   - increasing bed compliment to accommodate increasing patient load
   - improving patient flow and operational efficiency for quality care

The following were the salient points from the meeting:

Sl. No.	Issues Identified	Queries Raised / Discussion	Plan of Action
1	On assessment it was identified that expansion in area between ED and radiology services is not feasible as it requires NOC by fire department for installing false ceiling which may lead to compromising fire safety standards as discussed in previous site review by fire team in round with Director	Review of current available area adjacent to ED which can be used for expansion, required area and scope of expansion without compromising other services was done	• Review of existing ED and surrounding area was done on-site and the site map was analysed • The current payment/cash counters & investigation counter area (temporary structures) is feasible location for expansion which can accommodate 8 bed compliment if expanded as part of ED • A room for MLC for female patient can also be incorporated in this assessed and marked area
2	Need for relocation of current payment/cash counters & investigation counter along with plaster room	For fully functional infrastructural expansion of ED the payment/cash counters & investigation counter along with plaster room need to be relocated	• The stretcher zone is identified and marked by the Civil Engg. team for new payment/cash counters & investigation counter

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for maintaining unidirectional flow in ED services for better patient experience avoiding crowding

- Site identification needs to be done for relocation of plaster room along with the civil department as it requires water and sewage pipeline interconnections which was found to be absent in area in front lobby of ED

(Er. Mohit Singh)
JE, Civil, ATC

(Er. Subhash Chandra)
AE, Civil, ATC

(Mr. P. K Agarwal)
AE, Civil, ATC

(Dr. Amit Kumar Singh)
Faculty I/c ED &
Addl. Prof., Trauma surgery, ATC

Copy for Information

- members as mentioned as above
- Director, SGPGIMS, Lucknow
- Chief ATC
- AMS, ATC
- Dr. Kris Agarwal, Officiating SR Incharge, ATC
- Dr. Anitta Jose Ellenkil, SR Incharge, ATC
- Office copy

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Revisions

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A.E. (CIVIL)

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Department of Hospital Administration
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Department of Hospital Administration • DISPATCHED No. 683 Date 26/8/23 Initial • SGPGIMS, Lucknow •

Ref. No.: SGPGI/HA/ 683 / 2023 **Date: 26 -08-2023**

From : Dr. R. Harsvardhan, Member Secretary, S&BMWMC & HoD, Hospital Administration
To : Dr. R. S. K. Marak, Head, Deptt. of Microbiology • Dr. Rajesh Kashyap, HOD, Haem
Dr. Amita Aggarwal, Head, Deptt. of Clinical Immunology & Rheumatology
Dr. Seema Sharma, Head, Deptt. of Pathology • Dr Rupali, Lab Medicine, ATC

Sub. : **Enhancing Bio Medical Waste disinfection through dual use of Microwave for Pre-Treatment of Lab Waste, reg.**

With regard to the subject mentioned as above, the undersigned would like to bring to your kind notice the following points:

- The microwave is specifically designated for the pre-treatment of non-hazardous lab waste, which includes materials such as used disposable lab equipment, Blood bags, Laboratory cultures, stocks or specimens of microorganisms dishes and devices used for cultures and other non-hazardous items. The process involves subjecting the waste to heat, effectively reducing its volume and sterilizing it before further disposal
- Implementing microwave pre-treatment at the laboratory level allows for immediate disinfection of waste generated on-site. But, even if waste is pre-treated at the laboratory, certain residues or contaminants may persist.
- Therefore, in order to facilitate a positive impact on our waste management practices, a microwave is been installed at BMWM plant, so as to provide an extra layer of protection, ensuring that all waste is adequately disinfected before final disposal
- Further, Sanjay Gandhi Post Graduate Institute of Medical Sciences (SGPGIMS) is in an agreement with M/s Awadh Enterprises for operation, maintenance, fuel, monitoring, record maintenance of Biomedical Waste Management Services as per the guidelines of BMWM rules 2016 subsequently amended upto 2019
- Thus, the use of microwave for pre-treatment of lab waste twice, once at the laboratory and subsequently at the BMWM plant by the firm will offer a robust solution for enhancing waste disinfection and promoting sustainable waste management practices.

In view of the above, the undersigned would like to request your cooperation in ensuring that all laboratories/facilities within your purview embrace the dual use of microwave for pre-treatment of lab waste. and then Autoclave/Incineration as Planned

(Dr. R. Harsvardhan)
Member Secretary, S&BMWMC &
HoD, Hospital Administration

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Raebareli Road, Lucknow U.P.
Phone: 0522-2495365, 2495361

Ref. No.: SGPGI/HA/ 682 / 2023 **Date: 26-08-2023**

Department of Hospital Administration
DISPATCHED
No 682
Date 26/8/23
Initial
SGPGIMS, Lucknow

From : Dr. R. Harsvardhan, Member Secretary, S&BMWMC & HoD, Hospital Administration
To : Dr. R. K. Chaudhary, Head, Deptt. of Transfusion Medicine
Dr. ~~UC Ghoshal~~, Head, Deptt. of Gastroenterology - Dr. Pramod Rai
Dr. Amit Goel, Head, Deptt. of Hepatology
Dr. Rajesh Kashyap, Head, Deptt. of Hematology
Dr. Vijayalakshmi Bhatia, Head, Deptt. of Endocrinology
Dr. Prashant Agarwal, Nodal Officer, 24 hours Lab

Sub. : Enhancing Bio Medical Waste disinfection through dual use of Microwave for Pre-Treatment of Lab Waste, reg.

With regard to the subject mentioned as above, the undersigned would like to bring to your kind notice the following points:

- The microwave is specifically designated for the pre-treatment of non-hazardous lab waste, which includes materials such as used disposable lab equipment, Blood bags, Laboratory cultures, stocks or specimens of microorganisms dishes and devices used for cultures and other non-hazardous items. The process involves subjecting the waste to heat, effectively reducing its volume and sterilizing it before further disposal
- Implementing microwave pre-treatment at the laboratory level allows for immediate disinfection of waste generated on-site. But, even if waste is pre-treated at the laboratory, certain residues or contaminants may persist.
- Therefore, in order to facilitate a positive impact on our waste management practices, a microwave is been installed at BMWM plant, so as to provide an extra layer of protection, ensuring that all waste is adequately disinfected before final disposal
- Further, Sanjay Gandhi Post Graduate Institute of Medical Sciences (SGPGIMS) is in an agreement with M/s Awadh Enterprises for operation, maintenance, fuel, monitoring, record maintenance of Biomedical Waste Management Services as per the guidelines of BMWM rules 2016 subsequently amended upto 2019
- Thus, the use of microwave for pre-treatment of lab waste twice, once at the laboratory and subsequently at the BMWM plant by the firm will offer a robust solution for enhancing waste disinfection and promoting sustainable waste management practices.

In view of the above, the undersigned would like to request your cooperation in ensuring that all laboratories/facilities within your purview embrace the dual use of microwave for pre-treatment of lab waste. and thereafter autoclaving/incineration, as applicable

(Dr. R. Harsvardhan)
Member Secretary, S&BMWMC &
HoD, Hospital Administration

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Ref. No.: SGPGI/HA/ 679/ 2023 **Date: 26-08-2023**

From : Dr. R. Harsvardhan, Member Secretary, S&BMWMC & HoD, Hospital Administration
To : All HoDs
Sub. : **Use of Microwave for Pre-Treatment of Lab Waste at BMWM Plant as per BMWM rules 2016, reg.**

With regard to the subject mentioned as above, the undersigned would like to bring to your kind notice the following points:

- Schedule I of the Biomedical Waste Management Rules (BMWM) 2016 provides a comprehensive classification of biomedical waste based on its source and nature. The color coding system outlined in Schedule I helps in the proper segregation of waste, ensuring safe handling and appropriate disposal
- Further, Sanjay Gandhi Post Graduate Institute of Medical Sciences (SGPGIMS) is in an agreement with M/s Awadh Enterprises for operation, maintenance, fuel, monitoring, record maintenance of Biomedical Waste Management Services as per the guidelines of BMWM rules 2016 subsequently amended upto 2019
- In order to facilitate a positive impact on our waste management practices, a microwave has been installed at BMWM plant, so as to utilize it for the pre-treatment of laboratory waste
- The microwave is specifically designated for the pre-treatment of non-hazardous lab waste, which includes materials such as used disposable lab equipment, Blood bags, Laboratory cultures, stocks or specimens of microorganisms dishes and devices used for cultures and other non-hazardous items. The process involves subjecting the waste to heat, effectively reducing its volume and sterilizing it before further disposal
- Thus, the BMWM Rules emphasize the pre-treatment of certain categories of biomedical waste before final disposal. Pre-treatment of the lab waste through microwave at the BMWM plant, can significantly enhance our waste management practices, minimize environmental impact, and safeguard the well-being of our staff and the community

In view of the above, the undersigned would like to request your cooperation in ensuring that all departments/facilities within your purview adhere to the guidelines for the use of microwave and lab waste pre-treatment and compliance with Schedule I guidelines of BMWM rules, 2016.

(Dr. R. Harsvardhan)
Member Secretary, S&BMWMC &
HoD, Hospital Administration

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• Sister Zeeshi
• Geward File DOHA