



Jagjivanram Hospital Western Railway Mumbai

BROCHURE





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National Accreditation Board for Hospitals & Healthcare Providers

(Constituent Board of Quality Council of India)

CERTIFICATION

Jagjivan Ram Hospital Western Railway

Maratha Mandir Marg, Mumbai Central
Mumbai City - 400601, Maharashtra

has been assessed and found to comply with NABH
Entry Level -Hospital requirements.

This certificate is valid for the Scope as specified in the
annexure subject to continued compliance with the
Entry Level requirements.

Valid from : February 06, 2024

Valid thru : February 05, 2026



Certificate No.
PEH-2024-2474

Dr. Atul Mohan Kochhar
Chief Executive Officer

National Accreditation Board for Hospitals & Healthcare Providers, 5th Floor, ITPI Building, 4A, Ring Road, IP Estate, New Delhi 110 002, India
Phone: +91-11-42600600, Fax: +91-11-2332 3415 • Email: helpdesk@nabh.co • Website: www.nabh.co



SI No. 017982



NABH as an organisation is ISQua Accredited



SI No. 019490



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SCOPE OF SERVICES

ENTRY LEVEL - HOSPITAL

Jagjivan Ram Hospital Western Railway

Maratha Mandir Marg, Mumbai Central
Mumbai - 400601, Maharashtra

Certificate No. PEH-2024-2474

Valid from : February 06, 2024

Valid thru : February 05, 2026

Clinical Services

- Anaesthesiology
- Cardio Thoracic Vascular Surgery
- Cardiology (Interventional)
- Dentistry
- Dermatology and Venerology
- General Medicine
- General Surgery
(Including Laparoscopic Surgery)
- Nephrology (Including Dialysis)
- Neurology
- Neurosurgery
- Obstetrics and Gynaecology
(Including High-Risk Pregnancy)
- Ophthalmology
- Orthopaedics (Including Joint Replacement)
- Otorhinolaryngology
- Paediatrics
- Psychiatry (Only OPD)
- Surgical Gastroenterology
- Urology

Diagnostic Services

- 2D Echo
- DSA Lab

- EMG/EP
- Holter Monitoring
- Spirometry
- Tread Mill Testing
- Ultrasound
- X-Ray

Laboratory Services

- Clinical Bio-Chemistry
- Clinical Microbiology and Serology
- Clinical Pathology
- Cytopathology
- Haematology
- Histopathology

Pharmacy

Transfusions Services

- Blood Transfusions Services
- Blood Bank

Professions Allied to Medicine

- Ambulance
- Audiometry
- Dietetics
- Occupational Therapy
- Physiotherapy
- Psychology



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Chief Executive Officer

THE JAGJIVANRAM HOSPITAL

"First NABH accredited Hospital in Indian Railway"

The Jagjivan Ram Hospital was opened on 24th June 1960 by then Maharashtra Honourable Governor Shri Shriprakash as a modern referral centre, where the employees of the Western Railway and their families would receive the benefit of advanced medical care and advice. It caters to the needs of Railway employee, and families in Bombay (Mumbai) and in Mumbai Division.

It was built at a cost of Rs. 58.91 lakhs with basement plus 3 story. The hospital was built purely as a reference hospital and to start with, had bed strength of 150 beds. Over the years the hospital has grown into 5 story building with bed strength of 361. This institution has added renewed skills to its diagnostic and therapeutic techniques and maintained its purpose of providing modern and advanced health facilities. New Annex building with G + 7 story is completed and functioning from 2019.

Jagjivan Ram Hospital currently has bed strength of 361 with 32 ICU beds. The Hospital now has a reputation of one of the premium institutes of Indian Railways providing all basic specialties services with super specialties in Cardiology, Cardio vascular thoracic Surgery, Neurosurgery, Joint Replacement Surgery, Gastro-intestinal Surgery, Gastroenterology Medicine, Cardiology and Cardiothoracic Vascular Surgery, Urology, Renal dialysis Neurosurgery, Onco-surgery, Advanced Pain Clinic & Corneal Transplantation etc. It is equipped with best gadgets available to provide best of the medical services to railway beneficiaries,

JRH caters not only to patients from Western Railway but patients from all over Indian Railways are referred to JRH for treatment in various specialties. Annually around 2,55,000 patients are given treatment in OPD and 15,000 patients are managed in Indoor wards. Around 5 lakh diagnostic and 8,000 surgical procedures are carried out in an year in JRH.

Jagjivanram Hospital, Mumbai, a 60-year-old building has been awarded the IGBC Green Council "PLATINUM" rating. The Hospital is recognized by the National Board of Examinations in Medical Sciences, New Delhi (NBEMS) for imparting Post Graduate and Post-Doctoral Training Courses in almost all specialties. It is approved as a center for FAT & Final Exams for DNB among a few centers in Mumbai. It is also recognized by the various teaching Institutes for internships/training of courses like MBBS, Nursing, Lab Technician, X-ray technician, and Hospital Management.

**SCOPE OF SERVICES
WITH DISTRIBUTION OF INDOOR BEDS**

Sr. No.	Specialty	No. of Beds
1	GENERAL MEDICINE INCLUDING NEUROLOGY, PSYCHIATRY & DERMATOLOGY	65
2	MICU	10
3	HDU	15
4	SICU	10
5	CARDIOLOGY & CVTS	20
6	CVTS & CARDIOLOGY ICU	12
7	GENERAL SURGERY INCLUDING UROLOGY & NEUROSURGERY	46
8	SURGICAL GASTROENTEROLOGY	20
9	ORTHOPAEDICS	30
10	OPHTHALMOLOGY	12
11	E.N.T.	20
12	GASTROENTEROLOGY	20
13	PAIN MEDICINE	10
14	OBSTETRICS & GYNAECOLOGY	33
15	PAEDIATRICS	30
16	NEONATAL ICU (NICU)	2
17	PEDIATRIC ICU (PICU)	2
18	EMERGENCY ROOM (Casualty)	4
	TOTAL	361
	CABINS	20

PERFORMANCE OVERALL

	2022	2023	2024
1. Quantitative Performance			
i) No. of patients treated in OPD	180043	252405	295688
ii) No. of patients treated in IPD	7258	9580	10472
iii) Diagnostic investigations Outside	29643	39510	36428
iv) No. of CT Scans & MRIs	4591	6167	5748
v) No. of Operations:-			
(a) Special operations & operations taken > than 4 hrs	493	455	449
(b) Major Operations	3090	3046	2858
(c) Minor Operations	3082	3116	2747
(d) Cataract Operations without IOL	1	2	0
(e) Cataract Operations with IOL	647	671	835
(f) Grand Total (Excluding Cataract Operation)	6634	8874	7071
vi) No of Pathological Investigation	1034729	1290991	124345
vii) No of Radiological Investigation	29643	39510	36428
2. Qualitative Performance			
i) Bed Occupancy Rate (BOR)	54	69	85
ii) Average Length of stay (ALS)	9.3	9.2	10.6
iii) No. of patients referred to other hospital for treatment	-	5	4
iv) Local Purchases (in Rs)	19476652	22903914	112115510
v) Bills passed during the yr on account of investigation, treatment etc. (in Rs)	29601933	39833605	59993371
(a) Private Hospitals	4658974	7996903	30219899
(b) Government Hospitals	850000	0	875780
3. Industrial Health			
i) Man-days loss due to RMC	3053	2257	1945
4. Deliveries (Confinements)	196	177	170
5. Health services			
(i) Water Samples tested:-			
(a) No. of Samples tested (bacteriological / Chlorine)	303/1725	324/1898	156/1060
(b) No. of Samples Fit (bacteriological / Chlorine)	303/1725	324/1898	165/1060
(ii) Number of Medical paper Audits (Indoor/OPD)	200/1000	200/1000	200/1000
5. NON RAILWAY EARNINGS (in Rs)	2587470	3152292	1956509

MEDICAL OFFICERS OF JRH

S No	Name	Design	Grade	Department	CUG
1	Dr Mamta Sharma	MD	NFHAG	Admin & Obgy	9004490520
2	Dr Atul Sharma	CSS I	NFHAG	Admin & Anaesth	9004490522
3	Dr Mahendra L	CSS II	NFHAG	Adm & Surgery/Obgy	9004490531
4	Dr JP Rawat	Ch Consl	HAG	Psychiatry	9004490550
5	Dr Praveen Chopra	Sr Consl	NFHAG	Dentistry	9324946972
6	Dr B Nataraj	ACHD	NFHAG	Orthopaedics	9004490570
7	Dr Uma Nataraj	ACHD	NFHAG	ENT	9004490545
8	Dr Sushama Rahate	ACHD	NFHAG	Ophthalmology	9004490541
9	Dr Poonam Sharma	ACHD	NFHAG	Public Health	9004499512
10	Dr C P Khatawkar	ACHD	NFHAG	Admin	9004490556
11	Dr Dinesh Kumar Sahu	ACHD	NFHAG	Anaesthesiology	9004490532
12	Dr Pradeep Ranabijuli	ACHD	NFHAG	Paediatrics	9004490565
13	Dr Ajit Kumar Mehta	ACHD	NFHAG	Orthopaedics	9004490571
14	Dr Arun Kumar	CDS	SAG	Dentistry	9004490535
15	Dr Savita Gangurde	ACHD	SAG	Medicine	9004499513
16	Dr Ashok Kumar Sharma	ACHD	SAG	Surgery	9004490580
17	Dr Shishir Kumar Roul	ACHD	SAG	Cardiology	9004490572
18	Dr Yoganand Patil	ACHD	SAG	Pathology	9004490576
19	Dr Indu Pandey	ACHD	SAG	Ophthalmology	9004490587
20	Dr Ajay Khobragade	Sr DMO	SG	Medicine	9004449710
21	Dr Anuja Kulkarni	Sr DMO	SG	ENT	9004490563
22	Dr Prashant Rishi	Sr DMO	SG	Urology Surgery	9176456479
23	Dr Sharan	Sr DMO	JAG	GE Medicine	9004490562
24	Dr Kishor Jain	Sr DMO	JAG	GI Surg	9004490588
25	Dr Avinash Arke	Sr DMO	JAG	Cardiology	9004490534
26	Dr Shramishtha Thulkar	Sr DMO	JAG	Radiology	9004490551
27	Dr Alpa Sonawane	Sr DMO	JAG	Anaesthesiology	9004449712
28	Dr Shubhramshu Kumar	Sr DMO	JAG	Critical Care Medicine	9004449464
29	Dr Yogesh Sawakare	Sr DMO	JAG	Neurosurgery	9004355624
30	Dr Ajaykumar Pandey	Sr DMO	JAG	CVTS	9004490529
31	Dr Harshvardhan Bhamare	Sr DMO	JAG	Medicine	9324946968
32	Dr Preeti Gupta	Sr DMO	JAG	Medicine	9004473993
33	Dr Trupti Pisal	Sr DMO	JAG	Medicine	9004449711
34	Dr Sunayana Sirivolu	DMO	SS	Radiology	9989498268
35	Dr Mrunal Kesari	DMO	SS	Pathology	9004490521
36	Dr Nazparveen	DMO	SS	Paediatrics	9004471360
37	Dr Rohini Kashide	DMO	SS	ENT	9004490547
38	Dr Swati Meena	DMO	SS	OBGY	9004490561
39	Dr Chilveri Sireesha	DMO	SS	Medicine	9004490575
40	Dr Tiruchala Rajesh	DMO	SS	Cardiology	8897933435
41	Dr Suvendu Panda	DMO	SS	Anaesthesiology	9004499567
42	Dr Haricharan B	DMO	SS	Gen Surgery	9004490586
43	Dr Chandini Daniel	DMO	SS	Anaesthesiology	9004490530
44	Dr Saurabh Bhangale	DMO	SS	Obst & Gyn	9004490533
45	Dr Anukool Deshpande	ADMO	JS	Ophthalmology	9004490540
46	Dr Kareena Xavier	ADMO	JS	Psychiatry	9048397571
47	Dr Prashant Bhingradiya	ADMO	JS	Orthopaedics	9409481935
48	Dr Silky Priya	ADMO	JS	Dermatology	9004499563
49	Dr Maten Shaikh	CMP/FT	7th term	Family Medicine	9833350335

TOTAL CADRE POSITION OF JRH

SN	Category	Sanctioned	On Roll	Vacancy	Remarks
1	IRHS	53 (50 + 03 Pin point)	50 + 3 + 1 CDS	0	2 CMP
2	Group B	4 (ANO- 2, APHO- 1, APO- 1)	4	0	
3.	Group C (Medical)	258	191	67	
4.	Group C (Personal)	22	16	06	
5.	Group D	229	142	87	
6	Junior Residents	76	52	24	(DNB & HS trainees)
7	Senior Residents	23	10	13	
8.	House surgeon	16	2	14	
9.	HVS consultants	15	4	11	

	Grand Total (Class C Staff) (Medical + Admn.)	280	207	73
	Grand Total (Class D Staff) (Medical + Admn.)	229	142	87
	Net Total (Class C & D)	509	349	160

GROUP - C STAFF

(as on 01.03.2025)

Sr No	Medical Category	Sanctioned Cadre	On Roll	Vacancy/ Contractual
1	Nursing Staff	152	106	46
2	Lab Staff/Chemist	16	12	4
3	Cath Lab Tech.	3	1	2
4	Pharmacist	16	15	1
5	Radiographer (4200 GP)	4	4	0
6	Xray Technician (2800 GP)	3	1	2
7	Ambulance Driver	8	6	2
8	Dresser	31	28	3
9	Cook	8	8	0
10	Dental/Oral Hygienist	1	0	1
11	Dietician	1	1	0
12	ECG Tech.	2	1	1
13	Lady Health Visitor	1	1	0
14	Health Inspector	1	1	0
15	Physiotherapist	1	1	0
16	Occupational Therapist	1	0	1
17	Haemodialysis Tech.	2	2	0
18	Receptionist	1	1	0
19	Sewing Machine Operator	1	1	0
20	Janitor	1	1	0
21	Dental Tech.	1	0	1
22	Ophthalmic Asst.	1	0	1
	Total (Medical)	258	191	67
	Category Personal			
1	Ch.OS/OS	15	10	5
2	Sr.CK	2	1	1
3	Jr.CK	1	4	+3
4	P.A.	1	0	1
5	C.A.	1	1	0
6	Steno	2	0	2
	Total (Personal)	22	16	6
	Grand Total	280	207	73

Group D Staff

Sr No	Category	Sanctioned Cadre	On Roll	Vacancy/ Contractual
1	Hospital Assistant	177	122	55
2	Lab Attendent	06	05	01
3	X Ray Attendent	05	04	01
4	Asstt.Cook	12	02	10
5	House Keeping Assistant	0	04	+4
6	TADK Peon	21	1	20
	Total (Medical)	221	138	83
1	Daftry	3	0	3
2	Record sorter	1	0	1
3	Office Peon	4	4	0
	Total (Personal)	8	4	4
	Grand Total	229	142	87

DEPARTMENT OF MEDICINE & FAMILY MEDICINE

IRHS

Dr. Savita Gangurde, ACHD
Dr. Ajay Khobragade, Sr DMO
Dr. Harshvardhan, Sr DMO (Neurology)
Dr. Preeti Gupta, Sr DMO
Dr. Trupti Pisal, Sr DMO
Dr Sireesha C. ADMO
Dr Silky Priya, ADMO
Dr Maten Shaikh CMP

DNB- 4 seats per year

NB Diploma Family Med- 2 seats/yr

Senior Residents- 02 Nos.

House Surgeons-04 Nos.

Honorary Visiting Consultants:

Dr Sudhiranjan Dash Chaudhary (Nephrology)
Dr Harish Chafle (Chest medicine)
Dr Malay Dave (Psychiatry)
Dr Pritam Jain (Hemato,oncology)
Dr Sonam Solanki (Chest physician)
Dr Syed Jaffer (Neurology)
Dr Sheetal (Neurology)
Dr Sameer Rajyadhaksha (Rheumatology)
Dr Shwetha Jain (Dermatology)

WORKLOAD

- OPD - Average 95000 per year
- Indoor - Average 8000 per year
- RELHS OPD- Average 18000 per yr
- MICU - Average 1000 per year

Services Offered

OPD:

- General Medicine OPD- Daily
- Neurology–Monday/Tuesday/ Friday
- Diabetology- Daily
- Chest clinic –Thursday
- Nephrology– Tue /Friday
- Rheumatology–Tuesday
- HIV clinic - Wednesday.
- RELHS OPD – Daily

- Executive health checkup - Saturday.

IPD

- Medical ward – 80 bedded with Average Occupancy- 70%
- Modern MICU -10 bedded average occupancy- 70%

ADVANCED EQUIPMENTS

- Bedside PCT, Hs CRP, trop T, BNP, D dimer HbA1c testing in MICU.
- Temporary pacemakers, Ventilators
- Haemodialysis machines
- Central Monitoring Station
- ABG analyser, spirometer
- Sleep Apnoea study
- Video Laryngoscope
- Bedside Ultrasound machine



Medical ICU



Nursing Station, Medical ICU

DEPARTMENT OF CRITICAL CARE MEDICINE

IRHS

Dr. Shubhranshu Kumar, Sr DMO

(DrNB, Critical Care Medicine)

Dr. Ajay Khobragade, Sr DMO

(MD, IDCCM)

Key Highlight:

A state-of-the-art Critical Care Department with 32 ICU beds across two specialized units, combining advanced expertise, cutting-edge technology, and compassionate care.

Advanced CVTS ICU (12 Beds):

Header: Specialized Cardiovascular & Thoracic Care

Key Features:

- **Closed-unit model** with advanced hemodynamic monitoring.
- **Life-support systems:** IABP, LVAD, ECMO.
- **Diagnostic tools:** Portable 2D-ECHO, TEG, EEG.
- **Expert team:** Cardiothoracic surgeons, intensivists, specialized nurses.

Medical & Surgical ICUs (20 Beds Total):

- **Open units** for sepsis, trauma, multi-organ failure.
- **24/7 support:** Invasive ventilation, renal replacement therapy, rapid-response teams.
- **Family-centered care** with transparent communication.

Our Commitment:

- **Technology + Compassion:** Tailored, evidence-based protocols.
- **Outcomes:** Faster recovery, reduced mortality, innovation in critical care.
- **Jagjivan Ram Hospital – Where Expertise Meets Compassion.**

Workload:

- MICU - Average 650 per year
- SICU - Average 1400 per year
- CVTS ICU- Average 200 per year
- CATH ICU - Average 1000 per year

Advanced Equipments:

- CIPPOINT Point of care testing (CRP, PCT, NTProBNP, TROP-I etc.
- ECMO, IABP
- Temporary pacemakers, Advanced Ventilators, ECG
- RRT (HD, SLEDD, CRRT) & Plasmapheresis.
- Multipara monitors with Central Monitoring Station
- ABG analyzer, Video Laryngoscope
- Bedside portable Ultrasound machine



Medical ICU



DEPARTMENT OF SURGERY

IRHS

Dr A.K. Sharma – ACHD/Gen.Surgery
Dr Prashant Rishi – Sr DMO(SG)/Urology
Dr Kishor Jain – Sr DMO/ G.I Surgery
Dr Yogesh S - Sr DMO/Neurosurgery
Dr Haricharan – DMO/Gen.Surgery

DNB- General Surgery- 2 Seats per year

Senior Residents- 02 Nos

House Surgeons- 04 Nos

GI Surgery:- 2 Senior Resident

ANNUAL WORK LOAD

OPD – Average 32000 per year

Indoor - Average 5000 per year

Surgery – Average 1000 per year

EQUIPMENTS.

- Laparoscopic Surgery set,
- Harmonic scalpel,
- Electrosurgical units,
- Multi - parameter monitoring system with Central Nursing station of SICU
- Advanced OT overhead light with video capturing facilities.

SERVICES OFFERED

General Surgery:

- All types of Special, Major and Minor operations are performed –
- Urology, Oncology and Neurosurgery.

Gastro -Intestinal:

- All types of operations relating to Surgical Gastroenterology – Upper GI, Lower GI, Hepato-Biliary and Pancreatic Surgery.

- Both Open and Laparoscopic operations are carried out by Railway Surgeon.

Urosurgery

Advanced urological operation like Radical Nephrectomy, TURP, URSL, and RIRS etc.

Neurosurgery

Dept started in March' 2022

All type of Brain & Spine surgeries are performed.



Surgical ICU

ACADEMICS

- 38 Trainees passed out from this Institution, 11 in G.I Surgery
- Completed more than 25 years of DNB accreditation.

CARDIOLOGY (CATHLAB)

MAN POWER

IRHS

Dr Shishir Kumar Roul. Cardiologist

Dr Avinash Arke, Cardiologist

Dr T Rajesh, Cardiologist

Visiting Consultants:12

DrNB (Cardiology) residents – 3

Sr.Residents:

Medicine- 3, Anaesthesia-3, Surgery- 3

Work load /Annum

OPD 18000/

Non invasive investigations-12000

Coronary and other interventions-2000

EVLT/ Sclerotherapy – 200

Cardiac Surgery-220

Services offered

Cardiology: Coronary Angiography, Angioplasty, IVUS/FFR, EPS/RFA, Pacemaker, ICD, CRTD, CRTP, TAVR, TEVAR, Peripheral, Angiography and Angioplasty, (renal, mesenteric upper and lower limb vessels), IVC filter insertion, Cerebral DSA, ASD/PDA device closure, EVLT, cerebral Aneurysm Coiling, local Thrombolysis, Perma Catheter, Embolization, Sclerotherapy, Pericardiocentesis, Trans jugular Biops

Some of our Achievements

- **First** center in Indian Railway to perform Transcatheter Aortic Valve replacement.
- We are **First** in Indian railway to perform ROTA TRIPSY procedure to treat a severely calcified lesion.
- We performed two **Hybrid TEVAR** in a patient who was suffering from huge thoracic aortic aneurysm impending to rupture. First in Indian Railway.
- During Indo Japanese CTO conference, we performed 4 LIVE cases, which is **FIRST** such in country having so many cases from a single center.
- First Center in Indian Railway performing structural interventions like device closure of VSD, Coronary AV fistula, Ruptured sinus of Valsalva.
- We performed conduction system pacing, which is First in Indian Railway.
- The dept is accredited for DrNB (Cardiology) superspecialty course.



CARDIOLOGY (CATHLAB)



Cath staffs after **FIRST TAVR**



WR'S JAGJIVAN RAM HOSPITAL SUCCESSFULLY PERFORMS THE FIRST ROTATRIPTY PROCEDURE

The procedure was performed for the first time at Jagjivan Ram Hospital (JRH) and also over the entire Indian Railways

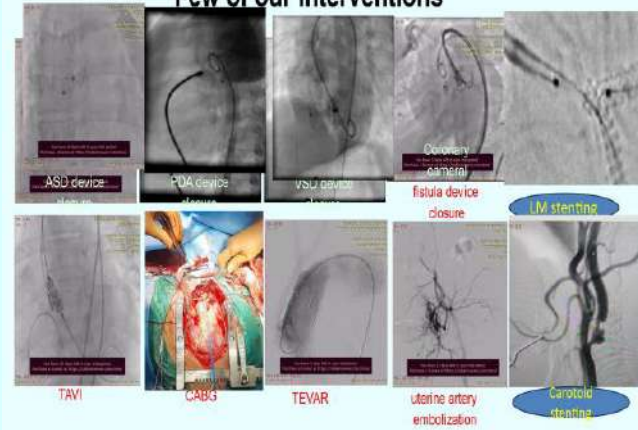


Photo caption: The Cardiology Team of WR's Jagjivan Ram Hospital is seen performing the ROTATRIPTY procedure on the patient.

Western Railway's Jagjivan Ram Hospital (JRH) at Mumbai Central has added yet another feather to its hat in the field of medical specialties. The Cardiology team at JRH successfully conducted the first ever ROTATRIPTY procedure (use of Rotational Atherectomy and Lithotripsy balloon) not only at JRH but also over the entire Indian Railways.



Few of our interventions



Our work being recognized nationally /internationally



CARDIO THORACIC AND VASCULAR SURGERY (CVTS)

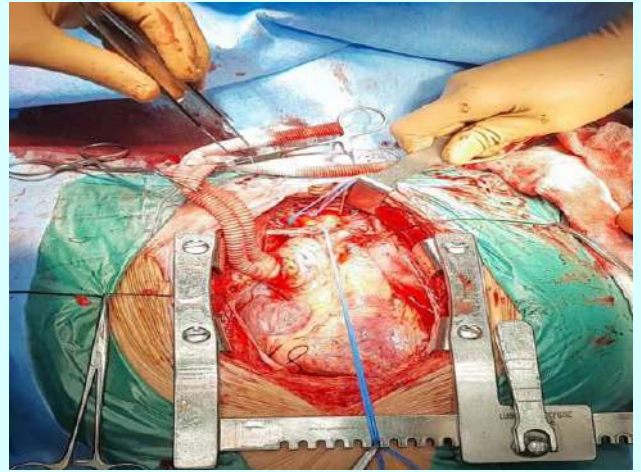
IRHS

Dr Ajaykumar R Pandey (Sr DMO)

Cardiac Surgeon

Dr Suwendu Panda (ADMO)

Cardiac Anaesthesiologist



Aortic Aneurysm Surgery

First VATS case (VATS Thymectomy) in JRH

Visiting Consultants: 04

Sr.Residents:

Medicine- 3, Anaesthesia-3,Surgery- 3

Work load /Annum

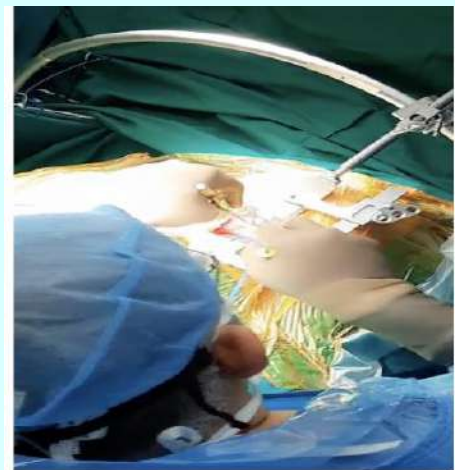
Cardiac Surgeries –Avg 300

Thoracic and Vascular Surgeries – Avg 100.

Services offered: Coronary artery bypass grafting, valve repair and replacement, AV fistula creation and repair, aortic aneurysm repair and grafting, pericardiectomy myomectomy, peripheral vascular bypass grafting, surgical removal of intra cardiac tumor, surgical correction of ASD/VSD/PDA, epicardial pace maker insertion.

New Additions (Recent):

1. Paediatric Cardiac Surgery Program.
2. MICS (Minimally Invasive Cardiac Surgery)
3. VATS (Video Assisted Thoracoscopic Surgery).



MICS CABG being performed

FUTURE PLAN:

1. Heart Failure program (VAD surgeries).
2. Thoracic Organ Transplant.
3. Robotic Cardiac Surgery.

DEPARTMENT OF NEUROSURGERY

The Department of NEUROSURGERY in Jagjivanram hospital is under development. Dr Yogesh M Sawakare SR DMO, is appointed by Railways through UPSC joined Jagjivan Ram Hospital on 21/2/2022. Previously majority of patients were referred to other empaneled hospitals outside. Both Brain and Spine patients are now being treated in our hospital.

IRHS

Dr. Yogesh M Sawakare, SR DMO
Neurosurgery.
MBBS,MS,FMAS,FIAGES(Minimal Access Surgery),
FINR(Fellow in Neurointervention),
MCh(Neurosurgery)

Honorary visiting consultant

Dr Deepu Baneerji (Neurosurgeon)
Dr Devesh Dholakia (Spine Surgeon)
Dr Avinash Gutte (Neurointervention Specialist)
Dr Syed Jaffar (Neurologist)

SERVICES

OPD on Monday & Thursday Neurosurgery OPD.

Wednesday OPD is Special Spine OPD.

Operations done in JRH

BRAIN

Decompressive craniectomy for intracerebral bleed.
Burr hole and evacuation of chronic SDH.
Cranioplasty.

SPINE

Micro-discectomy.
Cervical fixation for degenerative cervical spine disease.
Thoracic spine fixation for fractures.
Lumbar spine fixation for fractures.
Lumbar spine fixation for degenerative disc disease.

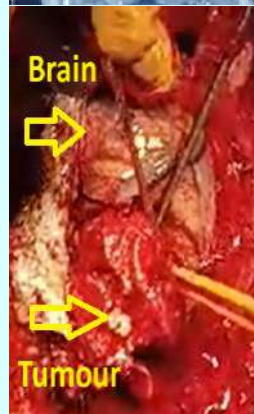
ENDOVASCULAR

Diagnostic Digital Subtraction Angiography
Coiling of ruptured aneurysm.
Flow diverter for fusiform and saccular aneurysm.

26th surviving case in the world of Ruptured brain abscess



First awake craniotomy in Indian Railways for Brain Tumour



DEPARTMENT OF UROLOGY & GENITO-URINARY SURGERY

IRHS

Dr. Prashant Rishi – Sr. DMO

- MBBS, MS (General Surgery)
- MCh(Urology), DrNB(Urology)
- Sr. DMO (Urologist, Andrologist, Genito-Urinary Surgeon & Renal Transplant Surgeon)

Case to Case Super Specialists–

Dr Alap Mehendale

Dr Malav Modi

ANNUAL WORK LOAD

OPD - Average 4000 per year

Indoor - Average 400 per year

OT- App. 500 cases (including special, major & minor cases)

EQUIPMENTS.

GENERAL EQUIPMENTS:

Laparoscopic Surgery set, Harmonic scalpel, Electrosurgical units, Multi - parameter monitoring system with Central Nursing station of SICU

Advanced OT overhead light with video capturing facilities.

SERVICES OFFERED BY THE DEPARTMENT:

All types of Special, Major and Minor operations are being performed including :

UROLOGY SPECIFIC EQUIPMENTS

Resectoscope (TURP SET) Richard Wolf monopolar

Wolf Cystoscope Set

Wolf Nephroscope 19.5

Wolf Ureteroscope - 6 - 7.5

Olympus Ureteroscope- 8.6-9.8

Wolf Pediatric Ureteroscope- 4-5.5

HOLMIUM 35 WATT LASER

BIORAD FLEXIBLE URETERO-RENOSCOPE WITH MONITOR-PROCESSOR HAVING VIDEO

RECORDING FACILITY

UROFLOMETER MACHINE

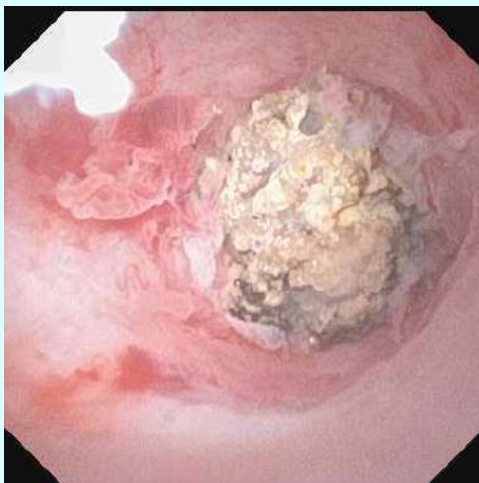
C ARM machine

- Endourological procedures : TURP, TURBT, PCNL, RIRS, URSL, Cystolithotripsy, DJ stenting, Botox Injection of the Urinary Bladder
- Open Urological surgeries: Nephrectomy, Pyeloplasty, Ureteric reimplantation, Open Prostatectomy
- Female urology & Genito-urinary Surgeries: VVF repair, Cystocele Repair, Incontinence surgeries(Sling & Suspension surgeries)
- Uro-oncology: Lap and open radical and partial nephrectomy, Radical cystectomy and ileal conduit, surgery for CARCINOMA testis, CARCINOMA Penis, etc.
- Laparoscopic Urological Surgeries: Lap Nephrectomy, Pyeloplasty, etc

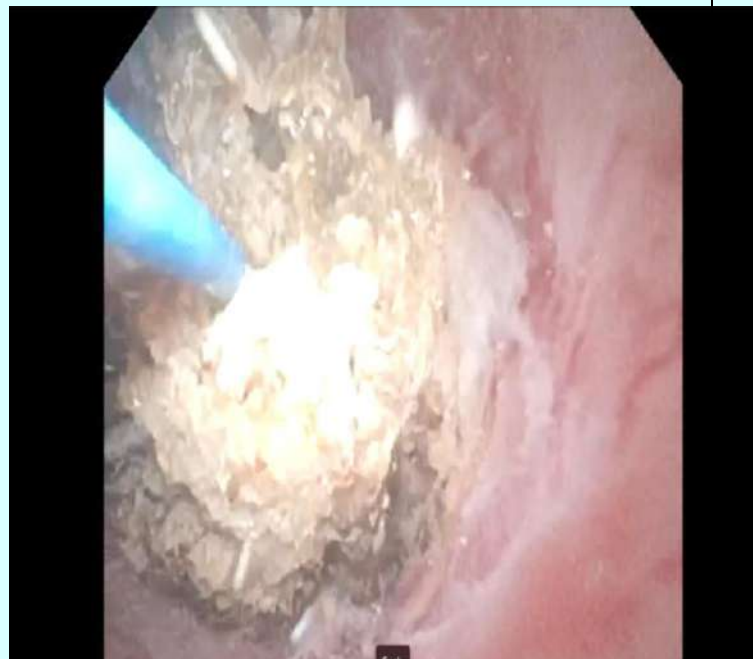
- f) Hemodialysis access surgeries: A-V Fistula, CAPD Insertion
- g) Pediatric Urology: Circumcision, Hypospadias Surgery, Undescended Testes
- h) Male infertility : varicocele, surgeries of vas (vaso-vaso /epididymo-stomy , vas-recanalisation Surgery)
- i) Urological emergencies: USG guided PCN, DJ Stenting, Suprapubic Cystostomy,Urological trauma
- j) Stapler Circumcision
- k) Penile Curvature Surgeries
- l) Urethral reconstructive surgeries



GIANT STAGHORN RIGHT RENAL CALCULUS



BADLY IMPACTED STONE AT THE PELVI URETERIC JUNCTION OF THE KIDNEY



STONE BEING BROKEN USING HOLMIUM LASER

DEPARTMENT OF OBSTETRICS AND GYNECOLOGY

IRHS

Dr Mamta Sharma MS (OB &GY) **MD/JRH**

Dr Mahendra L, CSS, MD(OBGY)

Dr Swati Meena (DGO) DMO

Dr Saurabh Bhangale (DNB/OB&GY) DMO

Honorary Visiting Specialist –

Dr. Sujata Dalvi MS (OB &GY),FCPS

Post Graduate Residents: 2 per year

NBEMS DGO 2 Seats under process of approval.

Accredited for CPS since 1994.

CPS & DNB Students cleared exam

Senior Residents : 2 posts

Annual Work Load

OPD: 10,000 + per year

IPD: 650 + per year

Surgery & Procedures: 600 + per year

Confinement: 200 + per year

Services Available:

Obstetrics

- Pre-Pregnancy Counselling
- Routine AnteNatal Care including Aneuploidy Screening (NT/NB Scan & Dual Marker or Anomaly Scan & Quadruple Marker, Fetal 2D Echo etc) and Fetal Surveillance (USG with Color Doppler, Non Stress Test-NST etc)
- High Risk Pregnancy Clinic (Early Detection & Management of Preeclampsia, Gestational Diabetes Mellitus, Fetal Growth Restriction, Twin Pregnancy, Cholestasis of Pregnancy etc)
- Emergency Obstetric Care including Laparoscopic Management of Ectopic Pregnancy, Management of Threatened Abortion, Molar Pregnancy & Third Trimester Bleeding-Placental Abruptio etc
- Continuous Intrapartum Fetal Surveillance with Fetal Doppler & CardioTocography Machine-CTG.

- Normal Vaginal Delivery, Instrumental (Vaccum/Forceps) Delivery, Caesarean Delivery

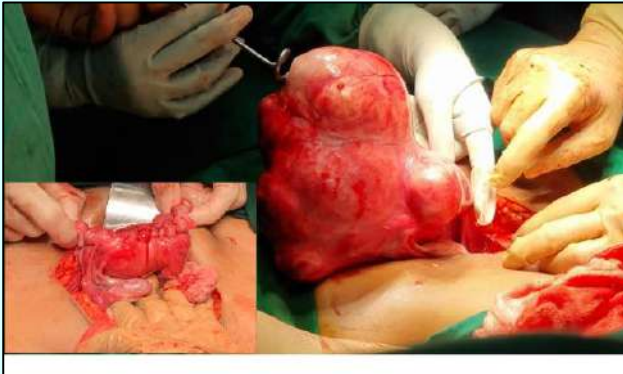
- Family Welfare Services: Contraception Services, Abortion Services and Family Planning Operations



New born with 6 loops of cord around neck

Gynaecology

- Genital Cancer Screening including PAP Smear Cytology & HPV Screening, Tumor Markers etc
- Adolescent Gynaecology including PCOS management, Menstrual Hygiene etc.
- Infertility Management including Hormone Profile, HSG, SSG, Ovulation Induction , Follicular Monitoring and Intra Uterine Insemination (IUI) etc.
- Non-surgical & Surgical Management of Abnormal Uterine Bleeding, Uterine Fibroids, Adenomyosis, Endometriosis, Ovarian Cysts, Uterine Prolapse, Urinary Incontinence etc)
- Perimenopausal Counseling & HRT
- Gynaecologic endocrinology, Uro-gynaecology
- Open Gynecological Surgery (Total Abdominal Hysterectomy, Vaginal Hysterectomy, Myomectomy, Ovarian Cystectomy etc)
- Advanced Endoscopic Gynecological Surgery (Total Laparoscopic Hysterectomies, Laparoscopic Myomectomy, Laparoscopic Ovarian cystectomy, Diagnostic & Operative Hysteroscopy & Laparoscopy etc)



Removal of Multiple Fibroids in Patient with Primary Infertility

Special gynecological Procedures

Non Descent Vaginal Hysterectomy

Tubal Recanalisation

Sling Surgery

Fertility enhancing Surgeries (Laparoscopic Adhesiolysis & Ovarian Drilling Hysteroscopic Septal Resection & Metroplasty, Hysteroscopic Tubal Recanalisation etc.)

TVT & TOT for Stress Urinary Incontinence

Equipments

* 2 D Color Doppler ultrasound for the dept of OB &GY

*New fetal cardio tocography machine.

*Medisil, Vacuum System for difficult Deliveries

*Multipara Monitor for monitoring of critical patients in obstetrics and Gynecology wards

*Fetal Cardio- tocography machines -3

*New State of Art, electronic Delivery table

USG+ CD Machine under Procurement Process in M & P Programme

Future Plan-Setting up of a state of art IVF/ICSI center, First in Indian Railways

Images of Interesting cases



Left Bilobed Broad Ligament Fibroid



Hysteroscopic picture of Fibroid polyp

DEPARTMENT OF ORTHOPAEDICS & JOINT REPLACEMENT CENTER

MANPOWER

IRHS: Dr B Nataraj (ACHD)

Dr A K Mehta (ACHD)

Dr Prashant Bhingradiya
(ADMO)

Honorary Visiting Specialist: 1

Visiting Specialist (Case to Case): 5

Resident Doctors (House Surgeon): 1

DNB Resident: 01 per yr

Annual Work Load:

OPD – Average 14,000

Indoor - 600

Total Operations approx. - 500

Bed Strength: 38

Services Offered

- Total Knee Replacement (TKR)
- Total Hip Replacement (THR)
- Revision Joint Replacement
- AO Technique for Fracture cases
- Arthroscopic surgeries
- High Tibial Osteotomy
- Paediatric Orthopaedic surgery
- Limb reconstruction & other orthopedic surgeries.

OPD days: Tuesday, Friday & Saturday

Physiotherapy Unit-Well equipped

Infrastructure of the Dept:

Most advanced Joint Replacement Centre, first of its kind in the country

with the State of Art Operation Theatres.

Modern Equipment

- AO Power equipment
- Arthroscope
- Highest quality of Implants,
- Image Intensifier,
- Navigation system for TKR
- Oscar System for Revision surgery
- Electronic tourniquet system
- CPM Machine

Learning centre for Ortho. Surgeons.



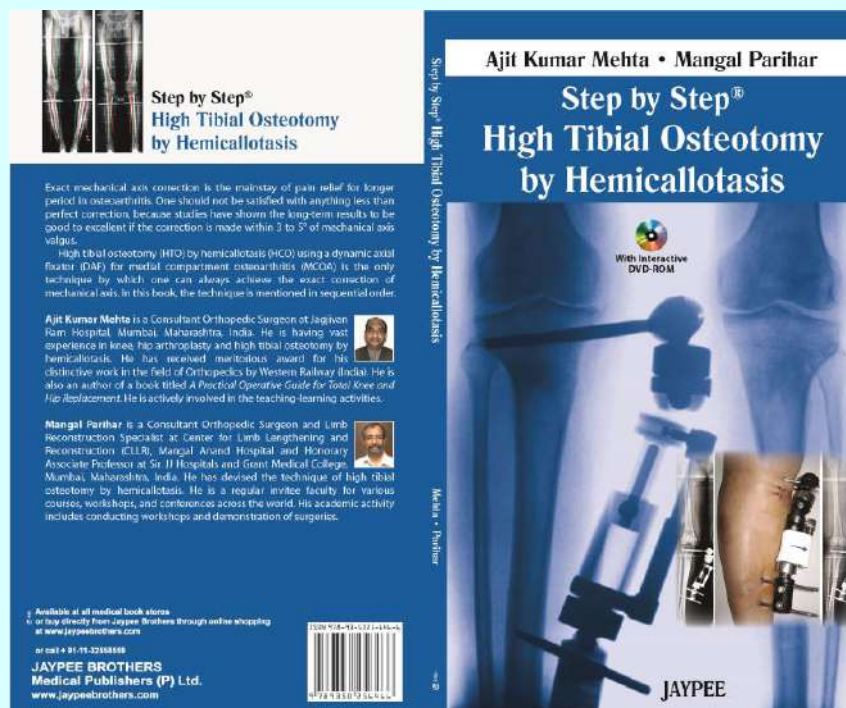
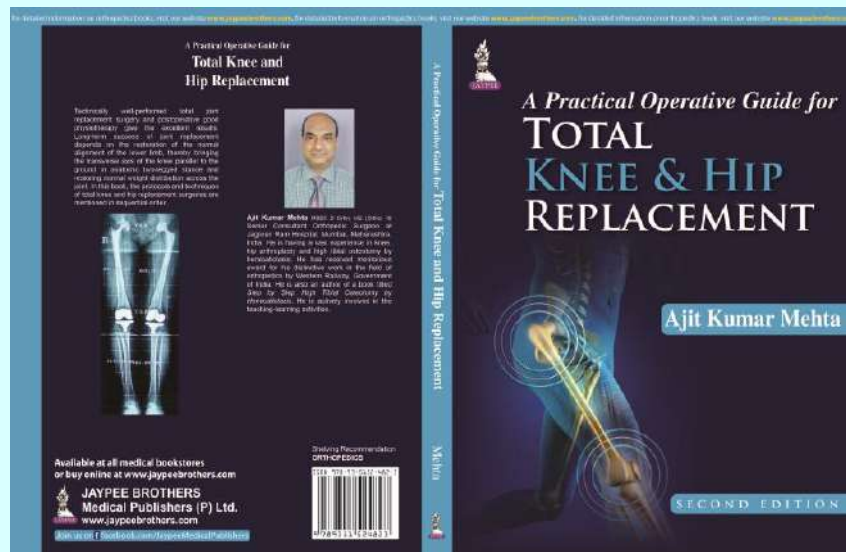
Navigation assisted Joint Replacement



Pre and post Total knee replacement

PUBLICATION OF ORTHOPAEDIC TEXTBOOKS FROM THE DEPARTMENT OF ORTHOPAEDICS:

1. **A Practical Operative Guide for Total Knee and Hip Replacement (Second edition, 2015)** – Published by Jaypee Brothers Medical Publishers (P) Ltd., New Delhi, London, Philadelphia, Panama. Authored by Dr. Ajit Kumar Mehta, ACHD (Ortho)/JRH/BCT/W. Rly.
2. **Step by Step High Tibial Osteotomy by Hemicallotasis (First edition, 2012)** - Published by Jaypee Brothers Medical publishers (P) Ltd., New Delhi, Panama City, London. Authored by Dr. Ajit Kumar Mehta, ACHD (Ortho)/JRH/BCT/W. Rly.



DEPARTMENT OF ANAESTHESIA & PAIN MEDICINE

IRHS

Dr Atul Sharma, CSS I

Dr Dinesh Kumar Sahu, ACHD

Dr Alpa Sonawane, Sr DMO

Dr Subhranshu Kumar, Sr DMO

Dr Chandini Daniel, DMO

Dr Suvendu Panda, ADMO

Jr Resident: DNB - 2 seats / year

NB Diploma – 2 Seats /yr

Sr Residents: 2 posts

Case to Case Consultants:

Dr Reena Parampill

Dr.Kailash Kothari

ANNUAL WORK LOAD OF OT

Special Surgeries –Avg. 670 +

Major Surgeries – Avg.2000 +

Minor Surgeries – 3800 +

Pain OPD – Average 3000

Pain Clinic procedures - Average 550/yr

Services Offered

Anaesthesia Services:

Anesthetic management of General Surgery, ENT, Ophthalmic, G.I Surgery, Urology, Gynae&Obst., Vascular, Laparoscopic Surgery, Orthopaedics, Gastro Enterology and Cardiac & peripheral interventional procedures.

Advanced Pain Clinic: First pain clinic of Indian Railway since 2006. Management of Patients with Chronic pain like Spinal Pain, Cancer Pain, Neuralgic Pain etc are being managed with minimal invasive treatment for those who don't want are cant undergo major surgery. Xray/USG guided blocks for full safety. Advance procedures like cooled RF, Spinal Cord Stimulator implant also done.

Cardio- pulmonary Resuscitation: CPR training to staff of all western railways department on rotation basis regularly conducted.

Hospital has Liquid Oxygen & Vacuum Station, Centralized sterile supply department -

All type of sterilizers including Plasma sterilizer, ETO etc



Day Care Interventional Pain Management Procedure Suit

EQUIPMENTS

High end anesthesia work stations (Dragger, Datex Ohmeda), Fiber optic flexible laryngoscope C-Arm, Cooled RF Machine, USG Machine



Anaesthesia Work Station

Vigileo Continuous Cardiac Output monitor. BIS Monitor (Astra Zeneca), Patient controlled Analgesia pump. ABG Machine, Ultrasound machine. Fluoroscope, Cooled RF Machine, Centrifugal Machine, Ozone generator machine etc. for day care pain procedure.

DEPARTMENT OF OPHTHALMOLOGY

MANPOWER RESOURCES

IRMS ophthalmologists:

Dr Sushama Rahate, ACHD

Dr Indu Pandey, ACHD

Dr Anukool Deshpande ADMO

DNB trainees: Department is recognized for DNB Degree.

Optometrist

Special Clinics: Retina Clinic, Cornea clinic, Oculoplasty clinic, Pediatric ophthalmology and squint, Glaucoma clinic.

EQUIPMENTS

- Slit lamp: Haag-Streit high-end model
- Slit lamp-Ziess
- Slit lamp Huvitz with attached Applanation Tonometer with digital imaging system
- AutoKeratoRefractometer Topcon KR-1.
- Autolensometer Rexam.
- Fundus camera Remidio.
- Non contact tonometer Reichert.
- A-scan Biometer.
- Synoptophore.
- Automated Perimeter zeiss
- Operating microscope:
 - 1. Carl Zeiss economy model
 - 2. High end model lumerai with Sterio co-observation tube.
- Phacoemulsification machine:
 - 1. AMO compact & 2. Signature Pro.
- Cryotherapy Machine.
- Automated Perimeter
- Optical Biometer: Zeiss IOL Master 700 Stereo co-observation tube with beam splitter
- Operating Microscope Imaging System



RECENT ACHIEVEMENTS

- Doing extra skill demanding surgeries like toric IOLs, iris claw IOL, small pupil phacoemulsification using iris retractors, Malyugin ring/capsular tension ring implant in subluxated cataracts.
- IOL exchange surgery
- Iridodialysis repair & Pupilloplasty
- Intravitreal injections & Botox Injections
- Glaucoma shunt surgery for neovascular glaucoma,
- Minimally invasive glaucoma surgery by bent needle goniotomy using Gonioprism
- Department is registered under the Human Organ Transplant Act, for cornea.
- Lamellar (minimally invasive) keratoplasty, Penetrating keratoplasty along with cataract surgery and IOL implantation
- Intravitreal Implants
- Retinal Detachment Surgery with Scleral Buckling
- Lid surgeries like Modified Bick's procedure for ectropion, Levator Advancement surgery, Blepharoplasty with Brow lift, Lateral tarsal strip procedure





DEPARTMENT OF ENT

STAFF:

IRHS

Dr Uma Nataraj, ACHD

Dr Anuja Kulkarni, Sr DMO SG

Dr Rohini Kashide, DMO

Honorary Consultants:

Dr Prabodh Karnik

DNB Residents: 2 per yr

Annual Work Load

OPD - Average 11000

Surgeries: 250

SERVICES OFFERED

OPD- All Days of Week

OT/ Surgery - 2 days

Surgeries

Regulars-

- Tympanoplasty including ossiculoplasty with titanium implants
- Stapedioplasty
- Modified Radical Mastoidectomy with reconstruction

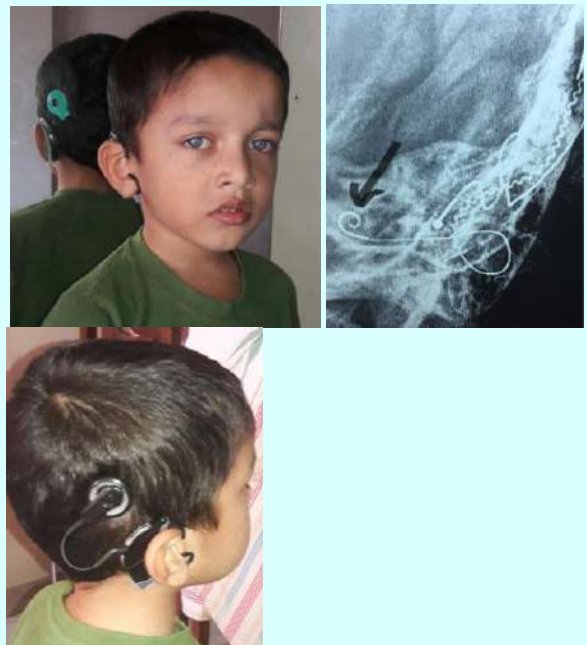
Special -

- Cochlear Implant surgery
- Micro Laryngoscopy with phonosurgery
- **Laser** surgeries
- Micro Laryngoscopy with phonosurgery
- **Coablation adenoidectomy and tonsillectomy**
- **Coablation excision of angiofibroma**
- Tracheal Balloon dilatation by airway balloon for recurrent subglottic stenosis : 1st case in entire Asia -Pacific region

- Endolymphatic Sac decompression, Facial Nerve Decompression
- Clearance of fistula of semicircular canal
- Balloon Sinuplasty
- Endoscopic sinus surgeries.
- CSF Rhinorrhoea repair
- Management of Rare Cases like invasive sin orbital aspergillosis, Invasive Mucormycosis, laryngo-tracheal stenosis.
- Head and Neck Oncosurgeries:

Advanced Equipments:

- Operating Microscope with integrated camera
- Micro power sinus shaver system
- Nasal endoscopy system
- Micromotor with Skeetor
- Lumainous CO₂ Laser
- ENT mobile unit
- Satallofmicrolaryngeal set
- Gubish Rhinoplasty set
- Intraoperative Nerve monitor



received UICC (Union for International Cancer Control) award for awareness activity.

Awareness Activity:

Antitobacco campaign and cancer awareness campaign over past one decade amongst patients, hospital staff, attendees, doctors of JRH and through online platforms throughout western railway every year and has

DEPARTMENT OF PAEDIATRICS

STAFF: IRHS

Dr. Pradeep K. Ranabijuli, ACHD

Dr. Nazparveen, DMO

DNB- 2 primary and 2 secondary Seats

Annual Work Load: IPD: Avg. 1121, OPD:

Avg. 11000

Equipments:

- 1 Ventilator with CPAP mode- Neonatal
- 1 Neonatal resuscitation unit
- 5 Multi-parameter monitor
- 6 Radiant heat Warmer one each in OT and Neonatal Room.
- 6 Double surface Phototherapy units
- 2 Nebulizer machine
- 10 Syringe Infusion pump
- 1 ECG machine
- 1 Otoscope & 1 Ophthalmoscope
- 1 Transcutaneous jaundice detector (bilirubinometer)
- 2 Digital Weighing Scales & 2 Stadiometers

Services offered:

- General Pediatric care
- Neonatal Care and resuscitation
- New Born Care in labour room and Operation theatre
- Immunization including pulse polio and Mission Indradhanush.
- Well Baby Clinic
- Phototherapy
- Health education and awareness days

Academic Activities:

- Regular Classes for the DNB Students.
- Attending the National Conferences (PEDICON) by all the Doctors of the Department
- Department Of Paediatrics, Jagjivan Ram Hospital, Western Railway is DNB Final Practical Examination Centre of NBEMS

- Regularly conducting Paediatric CMEs in JRH
- 14 Publications in the National & International Paediatrics Journals.



WARD 8 [PAEDIATRICS WARD]



NEWBORN CARE UNIT



OBSERVATION OF NATIONAL DAYS BY THE DEPARTMENT



DEPARTMENT OF DENTISTRY

IRHS

Dr. Arun Kumar, CDS

Dr. Parveen Chopra, Sr. Consultant

Dr. Binny Dogra, PTDS (On Contract for 4 hrs a day)

Dental Hygienist - 1 (On Contract)

Dental Mechanic - 1 (On Contract)

Hospital Peon -1

WORKLOAD

Average 10000-13000 patients/ year

SERVICES OFFERED

Routine-

Extractions, Scaling, Surgical extractions, Pulp capping, Pulpotomies, Pulpectomies, Temporary restorations, glass ionomer fillings, Miracle fillings, Zirconomer fillings, Amalgam fillings, Hand RCTs, Operculectomy, Coronoplasty, RVG, PSP.

Special-

Dento-alveolar fractures, Small Intra-oral tumor surgeries. Intra-oral cyst enucleation, Composite crown build-ups, Direct Composite Veneers, Post and Core build-up, Pin Retained restorations, Impactions, light cured restorations, Apicoectomy, periodontal splinting, Gingivectomy and other gingival surgeries, bone grafting procedures, Atraumatic restorative dental procedures. Surgical Curettage, Rotary RCTs, Repeat RCT, Hemisection, Radisectomy, Frenectomy.

- Training and education for fresh Dental Graduates during observership.

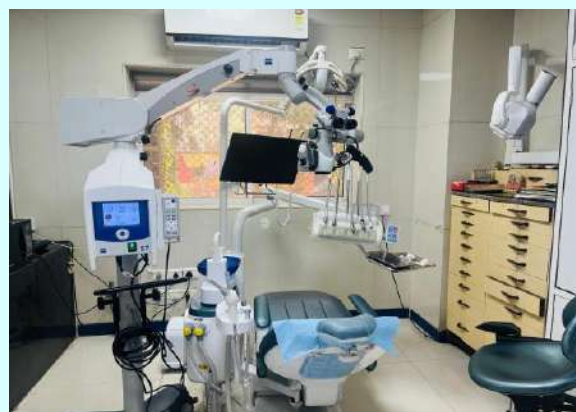
EQUIPMENTS

Electronically operated dental chairs and units with air-rotor, micro motor, piezosonic scaler, three-way syringe, high and low power motorized suction,



Dental Suit – Dentist with Patient

Light cure gun, Intra oral X Ray Machine, Radio Visio Graphy, Phosphor Sensor Plate Imaging, Physiodispenser, Radio frequency Electrocautery Machine, Ultrasonic instrument cleaning machine, Glass Bead Sterilizer, Digital Apex locator for accurate measurement of root canal length, Digital pulp tester, Intra oral camera, Endomotor, Dental Operating Microscope.



Dental Suit with Equipments

DEPARTMENT OF GASTROENTEROLOGY

IRMS

Dr. Sharan Malipatil Sr DMO, DM,

Honorary Visiting Specialist-

Dr. Pravin Rath

Dr. Sandeep Dawawala

Dr. Pravin Rath

Dr. Ajay Jhaveri

Super-specialty GE center of Indian Railways.

Annual Work Load

OPD ~ 10,000 per year

IPD ~ 500 per year

ENDOSCOPIC PROCEDURES –

Around 3000 per year

Services offered

OPD, IPD, Gastrointestinal Endoscopic Procedures, GI Emergencies

OPD:

Monday, Wednesday, Saturday.

11:00 am to 1:00 pm.

IPD

Number of Beds: 50 Beds

Procedures :

- Upper GI Endoscopy (Diagnostic & therapeutic-EVL, APC, Sclerotherapy, Glu-inj, Esophageal & Colonic stenting,
- Esophageal & Colonic stricture dilatation, Pneumatic dilatation for achalasia, Hemospray, Hemocliping)
- Sigmoidoscopy, Colonoscopy
- ERCP (Diagnostic & Therapeutic)
- Endoscopic Ultrasound-Diagnostic & Therapeutics (cystogastrostomy & Gastric Bypass)
- High Resolution Manometry,
- Single Balloon Enteroscopy

- PEG insertion
- 24-Hour Ph-Monitoring
- Endoscopic Foreign body removal
- IBD, Liver clinic

INFRASTRUCTURE:

Two fully equipped endoscopy suites



Equipments:

- Paediatric Gastroscope,
- Video- Gastroscope, Duodenoscope, Colonoscope,
- Therapeutic Video-Gastroscope,
- Single Balloon Enteroscope,
- Endoscopic Ultrasound System,
- High Resolution Manometry,
- X-Ray Machine -Flexavision
- Argon Plasma Coagulation Unit,
- Endowasher,

DEPARTMENT OF PATHOLOGY & LABORATORY MEDICINE

NABL accreditation received

IRHS

Dr. Yoganand Patil, ACHD

Dr. Mrunal Kesari, Sr DMO

Visiting Faculty:

HVS Microbiology engagement under process

DNB – 2 seats per year

Annual Average Work Load

- Microbiology- 15561
- Histopathology - 1218
- Cytopathology – 1618

NABL accredited sections:

- Biochemistry - 736862
- Immunology - 84945
- Hematology and Clinical Path
- - 191940
- Molecular with RTPCR -15095



Pathologist on Job

Infrastructure

- Advanced automated equipments with Data Management System & Calibration and Reporting is as per NABL standards.
- Quality Assurance done by Internal and External Quality Control Procedures
- The Hematology section participates in **AIIMS EQAS**
- Biochemistry Laboratory and Immunology Laboratory is accredited by **RIQAS**

(Randox International Quality Assurance Scheme) of UK.

- Microbiology and Molecular RTPCR participate in **CMC Vellore**.

1. Histopathology & Cytology Lab:

- Cryostat for Frozen Section for Intra-Operative Reporting.
- Cyto-centrifuge for Malignant Cytology.
- Liquid based cytology
- Automatic Tissue Processor for Surgical Pathology and Biopsy Reporting.
- Microtome with water bath
- Automated Tissues Embedding Station .
- Microscopes with CCD attachment for teaching.



• Histopathology & Cytology Lab

2. Clinical Chemistry Lab:

- Fully Automated Clinical Chemistry Analyzer –and Cobas6000, Cobas C311
- Automated Blood Gas Analyzers. ABL 800



3. Haematology Lab:

- 5-part differential Automated Blood Cell Counter Sysmax - XT 2000i
- Fully automated coagulation analyzer (ACL elite)
- Semi-automated 4 channel coagulometer (CA – 50)



Hematology Lab

4. Microbiology Lab:

- Automated system for identification of organisms and its sensitivity to antibiotics BACTEC , VITEK
- Bio-safety cabinets with Laminar Flow for culture

5. Immunology Lab:

- Fully Automated Electrochemiluminescence Immunoassay (Cobas e 411)
- VIDAS ELFA Immunoassay System



Biochemistry and immunology Lab

6. Molecular lab:

Biosafety level 3 set up

- Thermofischer Quantstudio 7,
- Kingfisher Flex,
- Gene expert.



RTPCR lab

7. Blood Bank: Full functional blood bank facility in-house available.



BLOOD BANK

Academic achievements:

13 Publications in National and International Journals in last 3 years

DEPARTMENT OF IMAGING (RADIOGRAPHY & SONOGRAPHY)

IRHS

Dr Shramistha- Sr DMO

Dr Sunayana, DMO

House surgeon -1

Work load

Sonography- > 11000 per year

X-Rays- > 35000 per year

Advanced Equipments

- Digital (DR) and Computer Radiography system and Digital X-ray Printers- 2 Nos.
- Two 500 mA X-Ray machines with 1 IITV and 300 ma
- 60 mA mobile X-Ray machines for bed-side X-Rays-02 Nos.
- One Sonography machines- High end with 3D & 4D, and Doppler.

SERVICES OFFERED

- Routine& Emergency X-rays of all Body Parts
- Full Leg & Full Spine X-rays.
- Special Investigations like Barium studies which include Ba Swallow, Ba Followthrough, Ba Enema and S&D, IVP, ASU&MCU, HSG, TTC.
- Sonography of all Body parts & Doppler studies of various vessels & guided procedures.
- CT, MRI, PET CT done in private on contract basis.
- Emergency Xray/USG 24 x 7



X Ray Unit



Ultra Sonography Unit

DEPARTMENT OF PSYCHIATRY

IRHS Consultant

Dr JP Rawat, Chief Consultant

Dr. Kareena Xavier, ADMO

Honorary Consultant

Dr. Malay Dave

DPM-1Resident

Clinicalpsychologist-2(JRH/Divisional)



In-patient and Out-patient Care



Annual Work Load

- OPD – 5700
- IPD Admissions- 132
- Consultation liaison and emergencies- 873
- Fitness cases- 103
- Psychological Testing-140
- Counseling Services-171

Equipments

- ECT Machine

Psychological Tests

- ROR, MCMI, TAT, SASSI, MMSE, MOCA-A/B, MMPI, VSMS, HAM-D, HAM-A, BPRS, Y-BOCS, YMRS, HTP, BG



Services Offered

- Treatment on OPD basis
- Admission and detailed evaluation as per requirement
- Conducts Medical Board to decide fitness of employees
- Electro Convulsive Therapy
- Pentothal Interview
- Ketamine Therapy
- Psychotherapy
- Motivation Enhancement Therapy
- Alcohol group therapy
- Couple Therapy
- Relaxation Techniques
- Psycho education on various mental health related topics
- Dependency certification of Mental Retardation and Resistant cases of schizophrenia.
- Consultation liaison psychiatry
- Monthly Safety Seminars conducted by clinical psychologist for Loco Pilots and guards
- Seminars for staff on stress management, work ethics and coordination

DEPARTMENT OF PSYCHIATRY

Achievements and Activities

- Total no of papers presented- 22, one won the best paper award
- One resident got first rank in DPM exam
- CMEs on Parkinson's Disease and Alzheimer's disease



World Mental Health Day

- World Mental Health Day celebrated on the 10th of October 2024
- De-stressing activities
- A skit titled "WARD MEI TENSION, MENTAL HEALTH PE ATTENTION"
- Felicitation of winners from the poster-making and essay-writing competitions held earlier.

Safety Seminars for Loco pilots

- Monthly safety seminars at CCG, BDTS, BSR and BVI lobbies
- Topics like sleep hygiene, concentration, stress management, workplace coordination, communication, etc
- Aims to provide psycho education about mental health and its importance, stress relief, increase efficiency, productivity and safety, team work, job satisfaction and prevent SPADs, work disruption, work conflicts, etc.



DEPARTMENT OF DERMATOLOGY, VENEROLOGY & LEPROSY

- **IRMS Dermatologist:**
Dr Silky Priya, ADMO
- **Visiting consultants** on a case-to-case basis.

Dr Swetha Jain, MD-DVL

Average OPD per month: 870

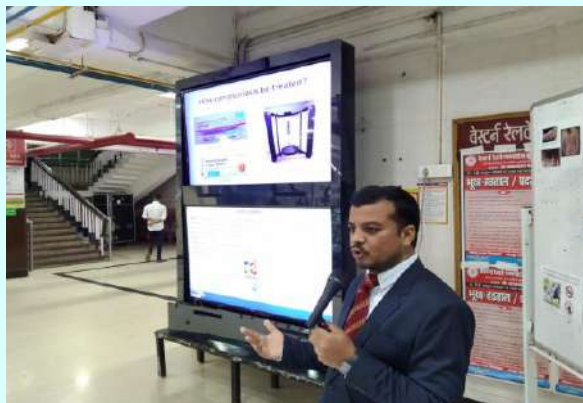
Average number of procedures done per month: 30

Procedures & Minor Surgeries:

- Electrocautery for Verruca vulgaris, Skin tags and DPNs(Dermatosis Papulosa nigricans)
- Platelet rich plasma injection for Androgenetic alopecia, Acne scars and Melasma.
- Chemical peeling
- Extirpation for Molluscum Contagiosum
- Surgical Excision of sebaceous cyst
- Paring of Corn
- Intralesional steroid injection for alopecia areata and keloid
- Punch biopsy and excisional biopsy for diagnosis of difficult to treat skin lesions

AWARENESS PROGRAMS:

- Talks are given on various skin diseases to allay the concerns of patients and remove their misconceptions.
- Difficult cases are presented in CME and the treatment is elaborated.



DISASTER MANAGEMENT AT JRH

JRH is having its DM plan and coordinates with the plan of BCT division.

For Disaster Management, three teams have been designated as under:

- Team A will attend to Emergencies / Disaster immediately and leave to ARME from BCT.
- Team B will reach by Road with POMKA, and
- Team C will rush to JRH for Hospital management of Casualties.

The Hospital is equipped with extra supplies of Medicines and Dressings in Casualty. 50 Extra foldable cots are available for surge capacity.

Efforts are made For Hospital Staff for training in CRBN disasters on rotation basis at NDRF, Baroda. More than 12 staff have been trained in CBRN DISASTER MANAGEMENT. CPR Training is given to all staff of JRH .

The Hospital conducts regular fire drills twice a year. The Civil Defense staff in Hospital conducts the mock drill.

The Hospital is equipped with Fire Fighting Equipment, in the form of 120 fire extinguishers, Fire Alarm and detector system, Disaster intimation Alarm system, Fire Hydrant system, Hose reels, and has a water tank with 3.5 lakh litre capacity with pump.

Fire Safety inspection and certification is done and NOC was given by Fire Department.

JRH is having a Casualty with 4 beds, and has 3 Ambulances. It has Blood storage Centre.

EMERGENCY SERVICES

Jagjivan Ram hospital has fully equipped department of casualty which functions 24 x 7 days/365 days, providing immediate and appropriate **life saving** care.

STAFF

- Doctor in casualty – 24 hrs
- On call Specialist doctors – 24 hrs
- Nursing staff & Dresser – Morning shift
- Emergency Laboratory services – 24 hrs
- On call imaging and OT services – 24 hrs

FACILITIES

- 3 beds.
- Fully equipped with modern gadgets like: O₂, multi-parameter monitor, Defibrillators.
- Nebulizers, ECG machine, Suction apparatus, Airway resuscitation equipments.
- Crash Cart

- Air conditioning and stand by generator
- POMKA
- Ambulance services



Ambulance Staff

- Disaster Management Control Room during Railway Accidents.



PHARMACY AND STORES

STAFF

Cadre of 16 Pharmacists

SERVICES

Pharmacy (Dispensary)- Around 500-600 Patients per day

Issue of Sick & fit certificates

Medical Store, Surgical Store, General Store

OVERVIEW OF LOCAL PURCHASE DONE BY JRH

	Medical Store Expenditure	Surgical Store Expenditure	Total Expenditure
2019-20	1,22,68,657	1,58,88,116	2,81,56,773
2020-21	81,04,954	55,20,660	1,36,25,614
2021-22	1,88,30,175	1,36,80,540	3,25,10,715
2022-23	1,54,28,287	1,42,06,454	2,96,34,741
2023 -24	1,50,09,290	1,85,06,085	3,35,15,375

	MEDICAL	SURGICAL	CVTS
Total No of item in AMI 2022-23			
Total value of Indent	10,39,95,255	13,12,86,728	28,61,63,159
No of items to be procured by HQ	478	623	284
No of Items sent for Divisional Purchase	633	950	Nil
No of PO received from HQ	362	480	140
No of Item received	340	395	97
No of Items procured through DP	Nil	Nil	Nil
Total No of item in AMI 2023-24			
Total value of Indent	11,08,51,635	14,68,17,037	13,21,92,323
No of items to be procured by HQ	608	1317	357
No of Items sent for Divisional Purchase	503	256	Nil
No of PO received from HQ	498	783	135
No of Item received	486	753	93
No of Items procured through DP	124	Nil	Nil

Few of SPECIAL CASES done at JRH

The following cases have been managed in-house effectively at Jagjivan Ram Hospital (JRH) despite being extremely difficult and with high mortality and morbidity. A few of these cases could not be managed in reputed private hospitals and hence shifted to JRH for further management.

1. Reconstructive surgery of Right forearm and left thumb following crush injury

Patient 37 yrs. / M, Fitter/Electrical dept. /Mahalaxmi, sustained crush injury to right forearm and left hand due to fall of heavy object (Rotor) while working in Mahalaxmi workshop, Mumbai. His right forearm and left thumb were severely crushed near to post-traumatic auto-amputation and loss of distal phalanx ring finger left hand as shown in photographs below. It was successfully reconstructed at JRH Hospital. It is an example of fast and specialized care being given at JRH.





2. Giant Aneurysm of splenic artery (Swelling of blood vessel)

A patient presented with a giant aneurysm of splenic artery, which is a rare occurrence and difficult to treat owing to the high risk of torrential bleeding in such cases. The patient was treated with a multimodal approach and as a joint effort between, surgeons and anaesthetists. The aneurysm was coiled and blocked with great difficulty, after which it was operated and the spleen was removed. Despite an intraoperative complication of massive bleeding, the situation was swiftly controlled with a joint effort of the skilled anaesthesiologists and expert surgeons. The patient is currently in ICU and is recovering well.

3. Case of bile duct injury referred to JRH for further management

A patient who was operated for removal of gall bladder at an outside hospital and was referred to JRH with bad bile duct injury along with a vascular injury and biliary peritonitis. The patient who was in a poor condition was operated successfully by the skilled team of JRH.

4. Case of large intestine perforation referred to JRH for further management

A female patient operated at private hospital for lumbar canal stenosis developed abdominal distension and vomiting and presented to JRH. The surgeons immediately diagnosed it as a case of

perforations in large intestine. The patient was operated successfully and is currently healthy, accepting oral feeds comfortably.

5. Case of occlusion of superior mesenteric artery

A patient presented to JRH with multiple blockages in the superior mesenteric artery and its branches, after being admitted for abdominal pain in a private hospital for 7 days. The patient condition was diagnosed with an emergency CT scan and was then taken up for surgery on an emergency basis that same night. Intraoperatively, 5ft of small intestine was found to be gangrenous and was removed with the ends of the intestine exteriorised. 4 weeks later, the bowel continuity was restored with a second stage surgery and the patient is healthy, taking oral feed comfortably

6. Paralysis of left side of body (Hemiplegia) cured by in time treatment (within 2 hrs)

A 26 yr old female weight lifter with a history of acute onset weakness in left upper limb, lower limb, deviation of corner of mouth to right side and difficulty in speaking was treated with specific medicine to dissolve the blood clot (thrombolysis) and the patient recovered completely

Timely management and intervention by in- house doctors of JRH saved the life of the patient. If the diagnosis & treatment were delayed for more than 4.5 hrs of onset, it would have resulted in permanent paralysis..

7. Successful management of Severe Pulmonary embolism diagnosed immediately intraoperatively

A 52 year old female, wife of retired AOS from Ahmadabad admitted in JRH on 14/12/2017 with history of road traffic accident, was diagnosed with fracture of left femur (thigh bone). During surgery patient developed cardiac arrest due to severe life threatening pulmonary thromboembolism (blockage of artery supplying blood to lungs by blood clots). Patient diagnosed immediately and revived successfully by anaesthesia team with very effective CPR. Cardiologist confirmed presence of clots by 2D ECHO on OT table. Despite major risk of bleeding, blood dissolving drug given to patient on table, which saved her life. Later localized breakdown of blood clots was done with percutaneous method by Cardiologists.

Patient stabilized in MICU for one week. One filter implanted in the large vein to prevent migration of blood clots going to lungs in CVTS department. Then Femur fixation done successfully by orthopedic and anaesthesia team on 8/1/2018 again. Patient is mobilized within 15-20 days of surgery; can walk with help of walker patient discharged home on 31/01/2018.

8. OB & GY: Case of Near-miss maternal mortality,saved due to prompt management of Acute Uterine Inversion

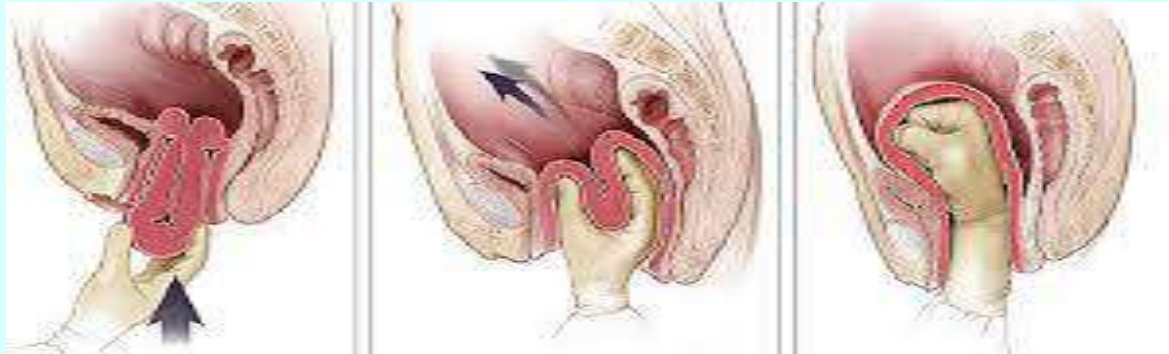
A 25 yr old ,Primigravidawith 9 months of amenorrhoea presented on 21/10/17 at 5:30 pm in JRH with c/o labour pains since one hour .Patient went into spontaneous labour and delivered a Full term Male child Vaginally at 6.30 am on 20.11 17 at JRH.

Spontaneous expulsion of Placenta awaited but as there was no spontaneous expulsion , placenta was delivered by traction –counter traction method. After expulsion a bulge felt in Vagina and bimanual examination revealed depression in uterine fundus, **indicating the**

diagnosis of Acute Uterine Inversion. Immediate reposition of uterus tried in labour room but was not possible due to tight cervical rim.

Patient was immediately shifted to OT for reposition under GA. Meanwhile patient went into neurogenic shock and had cardiac arrest on OT table. Patient was resuscitated due to prompt action of team of anesthetists and Gynecologists.

Such cases have a very high mortality. She was successfully treated and discharged.



10. OB & GY: A case of Near miss maternal mortality due to Postpartum Cardiomyopathy

A 23yrs Primigravida, developed sudden onset acute breathlessness on otherwise uneventful post op day 5 of LSCS, rapidly deteriorated and had witnessed cardiac arrest in ward. Revived after 10 minutes of CPR, shifted to MICU, intubation done, kept on ventilator.

Bedside 2D Echo done, showed LVEF of 15 percent suggestive of Postpartum

She was managed in MICU by intensivist. Patient remained comatose responding only to painful stimuli for 7 days. Slowly patient started improving started showing signs of recovery like eye opening, obeying verbal commands and limb movements.

First sign of cognitive recovery seen on day 8 when she cried after seeing her mother.

With continuous and dedicated care patient gradually had complete cardiac and neurological recovery. Patient was discharged on day 56 with normal vital sign.



11 Ophthalmology: small pupil phaco

Performing Cataract Surgery by Phaco-emulsification by no injection, no forceps no pad method with minimum tissue handling and wound assisted minimal post operative surgical astigmatism. Doing extra skill demanding surgeries like toric IOLs small pupil phaco using iris retractors / Malyugin ring and capsular tension ring in subluxated cataracts.

Challenging cases small pupil cataract surgeries made safe and easy with new device.



complex cataract



complex cataract



after Malyugin ring

12. Toxic Epidermal Necrolysis

- Case of drug induced severe skin reaction called as toxic epidermal necrolysis involving almost 80% of skin, eyes, mouth cavity was treated in MICU with unique modality of treatment called as plasmapheresis.
- Only 10- 20 % people survive with this condition.



Pre and post treatment

13 Cardiology: Acute heart attack

A 58 year male presented in JRH at mid night on 5.11.17 with ongoing chest pain for last 2 days along with symptoms suggestive of heart attack. He was found to be having massive heart attack and was in shock. Finding him not responding to medical interventions, he was taken for Primary Angioplasty (PAMI). One vessel of the heart was 100% blocked, it was opened and stent was placed. During the procedure, the patient has repeated cardio respiratory arrest. He was revived and the procedure was completed. To improve the blood circulation, artificial balloon pump was inserted in the aorta to support the heart. Finally patient was discharged after 7 days when the heart was functioning properly.

14 Cardiology : Angina

A 62 yr female known chronic Rheumatic Heart disease, diabetes, hypertension presented at JRH with h/o ongoing chest pain with radiation to back and for last few years. She diagnosed as aortic dissection and big aneurysm in descending thoracic aorta. With all the high risk concerned she underwent successful hybrid surgery in two steps. First step was done aortic root replacement, aortic arch repair with re implant of coronary artery followed by covered stent grafting to aneurysm. After a stay of 10 days patient discharged in a good condition and she is on regular follow and going satisfactorily. Such procedures are rarely done in the hospitals of Mumbai.

15. NEUROSURGERY:

26th surviving case in the world of Ruptured brain abscess

Neurosurgery JRH performs surgery in a challenging case of ruptured brain abscess on 35 year male patient. About 80% patient don't survive this condition.

Patient came in emergency to hospital in coma.

Craniotomy and surgical evacuation of brain abscess was done using recent advanced microsurgical technique. After 3 months of intensive management patient went home. This is the only 26th case in the world who has survived ruptured intraventricular brain abscess. The cause of the abscess was found to be a hole in the heart (patent foramen ovale, atrial septal defect) which will be treated further by cardiology team.

CHALLENGING CASE IN NEUROSURGERY



Fig1



Fig 2



Fig 3

Fig1 Patient in coma on ventilator on admission

Fig 2 MRI showing blue arrow ruptured intraventricular abscess

Fig 3 Patient walking at 3 months

16. Pain Medicine/Neurosurgery

SPINAL CORD STIMULATION FOR FAILED BACK SURGERY SYNDROME

A challenging case of chronic and complex neuropathic back and leg pain - A case of Post Spine surgery pain (condition also infamously called as 'Failed Back Surgery Syndrome') treated with advanced pain management neuromodulation modality known as "Spinal cord stimulator implantation".

A 67 year female c/o severe low back pain with intractable neuropathic bilateral lower limb pain. The pain was of the severity of 8-9/10 for back pain & both lower limbs.

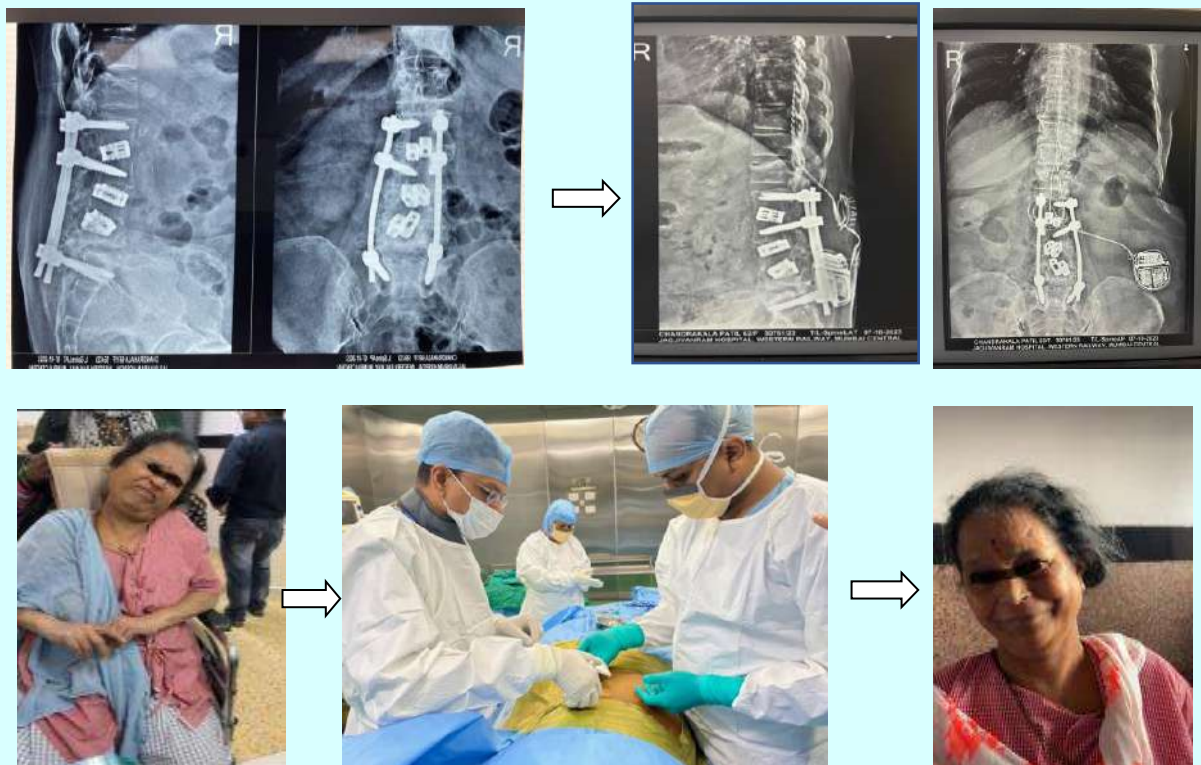
Patient underwent Laminectomy L2-L5 in 2005; Screw fixation and titanium disc implant at 2 levels performed L3-4 and L4-5 in 2011; Reexploration and instrumentation spine surgery performed in 2016; Symptoms persisted and did not respond to conservative line of management. In 2019 again patient was operated for Decompression of L4-5 L5-S1 disc and fusion. All the above treatments were done outside railway hospital.

The patient visited JRH pain clinic. After thorough evaluation we tried minimally invasive pain interventions (MIPSI procedures) in Jan 2023 i.e. caudal epidural and adhesiolysis, with good relief for short term.

There after she again started getting unbearable pain at same place. There is no further surgery or nerve blocks possible at this point. Hence for long term relief 'Spinal cord stimulator implantation' (SCS) was planned.

What is SCS - It's a pacemaker which delivers high frequency current through 16 electrodes of 2 leads placed over the dorsal column of spinal cord in epidural space. (Similar to cardiac pacemaker)

Procedure is done under fluoroscopic guidance under local anaesthesia.







रेलवे स्वास्थ्य सेवार्यें

हमारा मिशन

सहिष्णुता पूर्ण व्यवहार,
उत्कृष्ट तकनीकी व आधुनिकतम संसाधनों
के
तर्कसंगत और मूल्योचित उपयोग
द्वारा
रोगियों की सम्पूर्ण संतुष्टि
ही
प्रत्येक रेल स्वास्थ्यकर्मी
का
एकमात्र लक्ष्य
उसकी
एकमात्र साधना



RAILWAY HEALTH SERVICES

MISSION STATEMENT

TOTAL
PATIENT SATISFACTION
THROUGH
HUMAN APPROACH
&
SHARED COMMITMENT
OF
EVERY SINGLE DOCTOR & PARAMEDIC
TO PROVIDE
QUALITY HEALTH CARE
USING
MODERN, COST EFFECTIVE
TECHNIQUES
& TECHNOLOGIES

जगजीवनराम अस्पताल

हमारा लक्ष्य

मानव स्पर्श के साथ चिकित्सा क्षेत्र में
प्रगति के साथ तालमेल रखते हुए रेलवे
लाभार्थियों को गुणवत्तापूर्ण निवारक और
उपचारात्मक स्वास्थ्य सेवा प्रदान करने
के लिए जेआरएच को उत्कृष्टता का केंद्र
बनाना

JAGJIVANRAM HOSPITAL

VISION STATEMENT

Making JRH as center of
excellence for providing quality
preventive and curative
healthcare to railway
beneficiaries keeping pace with
advancement in medical field
with human touch