Appendices

Appendix I: Sources of criteria

(Reference: Paragraph no. 1.2.2)

- Atomic Energy (Radiation Protection) Rules 2004.
- Bio-Medical Waste (Management and Handling) Rules 1998 and Bio-Medical Waste Management Rules 2016.
- Drugs and Cosmetic Rules 1945.
- Financial Rules (FHB Vol. V and VI), GoUP.
- Framework for Implementation of NHM 2012-17.
- Guidance Note on Prevention and Management of Postpartum Haemorrhage, GoI.
- Guidance Note on Use of Uterotonics during Labour 2015, GoI.
- Guidelines for Ante-Natal Care and Skilled Attendance at Birth 2010, GoI.
- Guidelines on Engaging General Surgeons for Performing Caesarean Sections and Managing Obstetric Complications 2014, GoI.
- Guidelines for Janani Shishu Suraksha Karyakram 2013, GoI.
- Handbook on Medical Methods of Abortion 2016, GoI.
- Indian Public Health Standards (IPHS) Guidelines for District Hospitals and IPHS Guidelines for Community Health Centres 2012.
- Manual for Laboratory Techniques, National Institute of Communicable Diseases, GoI.
- Maternal and Newborn Health Toolkit (MNH Toolkit) 2013.
- National Disaster Management Guidelines 2014 and National Disaster Management Guidelines for Hospital Safety 2016.
- National Family Health Survey-4 (2014-16), GoI.
- National Health Mission (NHM) Assessor's Guidebook for Quality Assurance in District Hospitals (Vol I & II) 2013 and Assessor's Guidebook for Quality Assurance in Community Health Centres 2014.
- National Quality Assurance Standards for Public Health Facilities 2017, GoI.
- Norms prescribed by Nursing Council of India.
- Operational Guidelines for Programme Managers and Service Providers for Strengthening STI/RTI services 2011, GoI.
- Operational Guidelines for Use of Antenatal Corticosteroids in Preterm Labour 2014, GoI.
- Professional Conduct, Etiquette and Ethics, Regulations 2002, Medical Council of India.
- Regulations on Graduate Medical Education 2012, Medical Council of India.
- Government/Departmental policies, rules, orders, manuals and regulations.

Appendix II: Records not/partially maintained

| SI. | Charter | Dono no | Decende | | Hospitals |
|-----|----------------------------|---|--|--|--|
| No. | Chapter | Para no. | Records | District | Hospitals |
| 1. | 2: Out-patient Services | 2.4 Patient rights and grievance redressal | Records of grievance redressal | All test-checked DHs/JHs (except DH Agra and JH Lucknow in 2017-18) and CHCs had not maintained. | |
| 2. | 3: Diagnostic services | 3.2.5 Waiting time and turn-around time | Test indent form and others records related to waiting time and turn-around time of pathology and radiology services | All test-checked DHs/JHs and CHCs had not maintained. | |
| 3. | 4: In-patient | 4.2.2 Rosters for doctors | Roster of the duties of doctors | All test- checke | ed hospitals had not maintained. |
| | services | and nurses | Roster of the duties of nurses | As per Table 1 | 5 in Chapter 4 |
| | | 4.4.2 Documentation of OT procedures | Surgical safety checklist, pre- surgery evaluation records and post-operative evaluation records for OTs | | ed DHs/JHs had not maintained for the period 2013-18, ahabad which had partially maintained in 2015-18. |
| | | 4.6.3 Triaging of patients and average turn-around time | Triaging records in emergency departments | All test-checke | ed DHs and CHCs had not maintained. |
| | | 4.7 Dietary Services | Diet Registers | Agra | CHC- Jaitpur Kalan for the period 2013-18 |
| | | | | Balrampur | JH for the period 2013-18, CHC-, Gaisandi for 2013-18 and Pachperwa for 2013-17 |
| | | | | Banda | DH for the period 2013-16, CHC- Naraini for 2013-16 and Kamasin for 2013-15 |
| | | | | Budaun | CHC- Asafpur for 2013-18 |
| | | | | Gorakhpur | DWH for the period 2013-17, CHC- Campiarganj, Pali and Pipraich for 2013-18 |

(Reference: Paragraph no. 1.2.3)

| Sl. | | Descent | Describ | | Hospitals | |
|-----|--------------|---|---|--|--|--|
| No. | Chapter | Para no. | Records | District | Hospitals | |
| | | 4.8.1 Disaster management capability | Disaster Management Plan | All test checked hospitals and CHCs except DH Gorakhpur and DWH Allahabad. | | |
| | | of hospitals | SOPs for disaster and mass casualty management | All test checke Banda and DH | d hospitals and CHCs except DWH Allahabad, DH & DWH Gorakhpur. | |
| | | 4.8.2 Safety from fire | Evacuation plan along with photographs of evacuation routes and staircases. | Lucknow, while | ed hospitals except DH-II Allahabad, JH and DWH le photographs of evacuation routes and staircases were WH Allahabad also. | |
| | | 4.9 Evaluation of IPD through Outcome | BHTs ¹⁶⁵ in DHs/ JHs and CHCs | | ained in DH Agra, Allahabad, Allahabad-II, Banda, daun, Gorakhpur, Lucknow, Saharanpur and JH Balrampur | |
| | | indicators | | Budaun | CHC- Asafpur, Sahaswan and Samrer | |
| | | | | Balrampur | CHC- Gaisandi and Pachperwa | |
| | | | | Gorakhpur | CHC- Campiarganj, Pali and Pipraich | |
| | | 4.9.1.1 Bed Occupancy Rate | Bed occupancy records of CHCs | | ed CHCs had not maintained except Behat, Deoband and npur and Naraini, Banda. | |
| | | | | Agra | CHC-Baroli Ahir, Jaitpur Kalan & Kairagarh | |
| | | | | Allahabad | CHC-Baharia, Handia & Meja | |
| | | | | Balrampur | CHC- Pachperwa & Gaisandi (Except 2013-14) | |
| | | | | Banda | CHC-Kamasin | |
| | | | | Budaun | CHC-Sahaswan & Samrer | |
| | | | | Gorakhpur | CHC- Pali & Pipraich | |
| | | | | Lucknow | CHC- Sarojini Nagar, Gosaiganj & Mall | |
| | | | IPD registers | Partially maint | ained in all the test-checked CHCs | |
| 4. | 5: Maternity | 5.1.2 Management of | Details of RTI/STI patients | Agra | CHC-Baroli Ahir, Jaitpur Kalan | |
| | services | RTI/STI ¹⁶⁶ | treated by the hospitals | Allahabad | CHC-Baharia, Handia & Meja | |
| | | | | Banda | CHC-Naraini | |

 ¹⁶⁵ BHTs – Bed Head Tickets
 ¹⁶⁶ RTI – Reproductive Tract Infection, STI – Sexually Transmitted Infection

| Sl. | Charter | Dama ma | Describe | | Hospit | tals |
|-----|-------------------------|---|--|---------------------------------|--|--|
| No. | Chapter | Para no. | Records | District | | Hospitals |
| | | | | Budaun | CHC- Asafpur, Sahasw | an & Samrer |
| | | | | Gorakhpur | CHC- Pali, Campiargan | ŋ |
| | | | | Lucknow | CHC- Sarojini Nagar, C | Gosaiganj & Mall |
| | | | | Saharanpur | CHC- Deoband | |
| | | 5.1.3 Comprehensive | MTP ¹⁶⁷ Register | Agra | CHC-Baroli Ahir, | |
| | | abortion care | | Allahabad | CHC-Handia | |
| | | | | Balrampur | DWH | |
| | | | | Saharanpur | CHC- Deoband | |
| | | 5.2.2.1 Preparation of partographs | Partographs | Allahabad & C February and M | All test-checked DWHs/ JHs and CHCs had not maintained except D Allahabad & CHC Campiarganj Gorakhpur partially maintained durin bebruary and May 2017 and CHCs Baharia, Handia & Meja, Allahab id not provide the records. | |
| | | 5.3 Post-natal maternal (PNC) and new-born care | PNC register | All test-checke | d DWHs/JHs and CHCs | |
| | | 5.4.2 Neonatal deaths | Labour room register (Neonatal deaths) | | ecked DWHs/JHs and CH Budaun, Lucknow and S | ICs had not maintained except sharanpur. |
| 5. | 6: Infection control | 6.1 Standard Operating Procedures (SOP) for infection control | SOP in DHs/JHs and CHCs | District | Not maintained in DHs/DWHs/JHs (2017-18) | SOPs not maintained in any test- checked CHC |
| | | | | Balrampur | DH, DWH and JH | |
| | | | | Budaun | DH and DWH |] |
| | | | | Gorakhpur | DWH | |
| | | | | Saharanpur | DH and DWH | |
| | | Checklist for hygiene | Checklist for hygiene and infection control in hospitals | District | Not maintained in DHs/DWHs/JHs | Checklist for hygiene and infection control not maintained |

¹⁶⁷ MTP – Medical Termination of Pregnancy

| SI. | | Deve | | | Hospitals | | | |
|-----|---------|-------------------------|---------------------------|----------------|-------------------------|--------------------------------|--|--|
| No. | Chapter | Para no. | Records | District | | Hospitals | | |
| | | and infection control | and CHCs | | (2017-18) | in any test-checked CHC. | | |
| | | | | Allahabad | DH-II | | | |
| | | | | Balrampur | DH, DWH and JH | | | |
| | | | | Banda | DH and DWH | | | |
| | | | | Budaun | DH and DWH | | | |
| | | | | Gorakhpur | DH and DWH | | | |
| | | | | Lucknow | DWH | | | |
| | | | | Saharanpur | DH and DWH | | | |
| | | Pest and rodent control | Pest control records in | District | Not maintained in follo | owing during 2017-18 | | |
| | | | hospitals and CHCs | Agra | DH and CHC-Baroli A | hir, Jaitpur Kalan & Kheragarh | | |
| | | | | Allahabad | DH and CHC-Baharia | , Handia & Meja | | |
| | | | | Balrampur | DH and CHC- Pachpe | rwa & Gaisandi | | |
| | | | | Banda | DH and CHC- Naraini | & Kamasin | | |
| | | | | Budaun | DH, DWH and CHC- | Asafpur, Sahaswan & Samrer | | |
| | | | | Gorakhpur | DH and CHC- Pali | | | |
| | | | | Lucknow | CHC- Mall and CHC | Gosaiganj | | |
| | | | | Saharanpur | DWH and CHC-Behat | , Deoband & Nagal | | |
| | | | Rodent control records in | District | Not maintained in follo | owing during 2017-18 | | |
| | | | hospitals and CHCs | Agra | CHC-Baroli Ahir, Jait | pur Kalan & Kheragarh | | |
| | | | | Allahabad | DH and CHC-Baharia | , Handia & Meja | | |
| | | | | Balrampur | DH, JH and CHC- Pac | hperwa & Gaisandi | | |
| | | | | Banda | DH, DWH and CHC- | Naraini & Kamasin | | |
| | | | | Budaun | DH, DWH and CHC- | Asafpur, Sahaswan & Samrer | | |
| | | | | Gorakhpur DH a | DH and CHC- Campia | ırganj & Pali | | |
| | | | | Lucknow | DWH and CHC -Mall | & Gosaiganj | | |
| | | | | Saharanpur | DH, DWH and CHC-I | Behat, Deoband & Nagal | | |
| | | 6.2.1.3 Records of | Records of sterilisation | District | Partially Maintained in | 1 | | |

| SI. | Classification | Descent | Dereste | | Hospitals |
|-----|----------------|--------------------------|---|--------------|---|
| No. | Chapter | Para no. | Records | District | Hospitals |
| | | sterilisation using | | Agra | DH |
| | | autoclave | | Allahabad | DH, DH-II and DWH |
| | | | | Balrampur | DH, DWH and JH |
| | | | | Banda | DH and DWH |
| | | | | Budaun | DH and DWH |
| | | | | Gorakhpur | DWH |
| | | | | Lucknow | DH and JH |
| | | | | Saharanpur | DH and DWH |
| | | 6.3.1 Standard operating | SoP for housekeeping in | District | Not maintained (2017-18) |
| | | procedure for | DHs/JHs and CHCs | Agra | DH and CHC-Baroli Ahir, Jaitpur Kalan & Kheragarh |
| | | housekeeping. | | Allahabad | CHC-Baharia, Handia & Meja |
| | | | | Balrampur | DH, DWH, JH and CHC- Pachperwa & Gaisandi |
| | | | | Banda | DH,DWH and CHC- Naraini & Kamasin |
| | | | | Budaun | DH, DWH and CHC- Asafpur, Sahaswan & Samrer |
| | | | | Gorakhpur | DWH and CHC- Campiarganj, Pali & Pipraich. |
| | | | | Lucknow | CHC- Mall, Sarojini Nagar & Gosaiganj |
| | | | | Saharanpur | DH, DWH and CHC-Behat, Deoband & Nagal |
| | | 6.3.2 Hygiene practices | Microbiological survey (Reports of any surface/ air/ hand swab tests) | 18 except DH | ed DHs/JHs and CHCs had not prepared for the period 2013- Banda had prepared the report of microbiological survey in eas (OT, paediatric ward) for 2017-18. |
| | | 6.3.3 Outsourcing of | Records of consumables | Agra | DH |
| | | cleaning services | | Allahabad | DH |
| | | | | Balrampur | DH and DWH |
| | | | | Banda | DH and DWH |
| | | | | Budaun | DH and DWH |
| | | | | Gorakhpur | DWH |

| Sl. | Charter | Davia na | Decembr | | Hospi | tals |
|-----|-------------------------------|---|---|---------------------------------|-------------------------------------|---------------------------------------|
| No. | Chapter | Para no. | Records | District | | Hospitals |
| | | | | Lucknow | DH | |
| 6. | 7: Drug | 7.3 Dispensing of drugs | Section/ward-wise stock | Balrampur | DH and JH | Not maintained in any test- |
| | management | to patients | registers | Banda | DWH | checked CHC except Naraini, Banda. |
| | | | | Gorakhpur | DH and DWH | Banda. |
| | | | OPD drug slips ¹⁶⁸ | Balrampur | DH, DWH and JH | Not maintained in any test- |
| | | | | Gorakhpur | DH and DWH | checked CHC. |
| | | | Records of daily distribution of | Agra | CHC- Jaitpur Kalan | |
| | | | drugs | Allahabad | DH-II | |
| | | | | Banda | CHC Kamasin | |
| | | | | Balrampur | DH and JH, CHC- Gais | sandi, Pachperwa. |
| | | | Budaun | CHC- Asafpur, Sahaswan & Samrer | | |
| | | | | Gorakhpur | CHC- Campiarganj, Pali and Pipraich | |
| | | | | Lucknow | CHC: Sarojini Nagar | |
| | | 7.5.3 Irregular procurement of drugs through local purchase | Records of emergency situations in respect of procurement of drugs through local purchase | All test-checke | ll test-checked hospitals and CHCs. | |
| 7. | 8. Building Infrastructure | 8.2.5 Maintenance and repair of hospital buildings | Records of building maintenance plans based on the norms and cycles and records related to building-wise annual maintenance | | | |

¹⁶⁸ OPD drugs slip contains the list of drugs prescribed by the doctor along with quantity, to be dispensed to the OPD patients by the hospital pharmacy.

Appendix III: Radiology equipment lying unutilised

| | 1 | • • | | (as on 31 | March 2018) |
|--|--------------------------------|------|--------------------|---------------------------------------|-------------------------|
| Hospital | Equipment | Qty. | Cost (₹ lakh) | Period from which lying idle | Reason |
| DH Saharanpur | X-ray Machine-60 MA | 01 | 0.78 | 03 months | For want of |
| DWH Saharanpur | Ultrasound machine | 01 | 8.19 | 01 year | repair |
| | Ultrasound machine | 01 | 14.10 | 01 year | |
| DWH Banda | Ultrasound machine | 01 | NRG ¹⁶⁹ | NRG | |
| CHC Deoband, Saharanpur | Ultrasound Machine | 01 | NRG | 06 years | For want of |
| DH Saharanpur | Ultrasound machine | 01 | 17.10 | 09 months | manpower |
| | CT Scan | 01 | 342.65 | 09 months | |
| DWH Budaun | Ultrasound Machine | 01 | NRG | 02 years | |
| DWH Balrampur | Ultrasound Machine | 01 | NRG | 05 years | |
| DH Banda | CT Scan | 01 | 342.65 | 09 months | |
| DWH Banda | Colour Doppler System | 01 | NRG | 04 years | |
| JH Lucknow Three D Ultrasonography machine | | 01 | 13.91 | 09 months | |
| DH Agra | Ortho ultrasound | 02 | 1.58 | 08 years | |
| JH Lucknow | Portable digital X-ray machine | 01 | Free of cost | 11 months | For want of accessories |

(Reference: Paragraph no. 3.1.1)

(Source: Test-checked hospitals and CHCs)

¹⁶⁹ NRG – No Record Given

Appendix IV: Pathology equipment lying unutilised

| | | 110901 | ence. I urugrupi | <i>i noi ei2ie)</i> | (as on 31 March 2018) |
|------------------|---|--------|------------------|------------------------------------|---|
| Hospital | Equipment | Qty. | Cost (₹ lakh) | Period from which lying idle | Reason |
| JH Lucknow | Semi Auto analyser | 01 | 0.90 | 30 months | For want of repair |
| DH Saharanpur | Fully Automatic computerised Haematology Cell Counter | 01 | 27.25 | 12 months | |
| | Fully Automatic Harmonal Analyser | 01 | NRG | 12 months | |
| | Fully Automatic computerised Blood gas Analyser | 01 | 10.25 | 12 months | |
| | Semi-Automatic Analyser | 01 | 1.08 | NRG | |
| | Fully computerised Biochemistry Analyser (TERGA) | 01 | 25.19 | 12 months | |
| DH Lucknow | Haematology Analyser five part with 22 parameter | 01 | 9.15 | 15 months | For want of reagents as |
| DH Saharanpur | Haematology Analyser five part with 22 parameter | 01 | 9.15 | 15 months | equipment was purchased by UPHSSP without |
| DH Gorakhpur | Haematology Analyser five part with 22 parameter | 01 | 9.15 | 15 months | execution of RC for reagents, required for functioning of the equipment. |

(Reference: Paragraph no. 3.2.3)

(Source: Test-checked hospitals and CHCs)

Appendix V: Human resources in hospitals/CHCs (Reference: Paragraph no. 4.2.1)

| District | Hospital | Sanctioned | Doct | ors | Nurses | | |
|------------|-----------------|-----------------|---------------------|---------------------|---------------------|---------------------|--|
| | | beds | Sanctioned strength | Persons in position | Sanctioned strength | Persons in position | |
| | · | District | Hospitals/Joint H | lospitals | | | |
| Agra | DH Agra | 128 | 46 | 49 | 25 | 59 | |
| | DH Allahabad | 156 | 43 | 38 | 36 | 23 | |
| Allahabad | DH-II Allahabad | 199 | 27 | 31 | 32 | 29 | |
| Balrampur | JH Balrampur | 50 | 34 | 9 | 33 | 11 | |
| Balrampur | DH Balrampur | 100 | 24 | 15 | 12 | 6 | |
| Banda | DH Banda | 103 | 27 | 15 | 28 | 18 | |
| Budaun | DH Budaun | 234 | 28 | 30 | 30 | 42 | |
| Gorakhpur | DH Gorakhpur | 305 | 34 | 44 | 39 | 99 | |
| | DH Lucknow | 756 | 100 | 101 | 130 | 193 | |
| Lucknow | JH Lucknow | 100 | 28 | 43 | 20 | 62 | |
| Saharanpur | DH Saharanpur | 326 | 61 | 36 | 92 | 78 | |
| | | Distr | rict Women Hosp | itals | | | |
| Agra | DWH Agra | 200 | 23 | 36 | 53 | 53 | |
| Allahabad | DWH Allahabad | 146 | 20 | 18 | 20 | 30 | |
| Balrampur | DWH Balrampur | 45 | 7 | 5 | 4 | 14 | |
| Banda | DWH Banda | 32 | 8 | 6 | 5 | 16 | |
| Budaun | DWH Budaun | 79 | 11 | 16 | 12 | 9 | |
| Gorakhpur | DWH Gorakhpur | 205 | 15 | 28 | 26 | 50 | |
| Lucknow | DWH Lucknow | 326 | 27 | 39 | 50 | 116 | |
| Saharanpur | DWH Saharanpur | 110 | 34 | 20 | 67 | 47 | |
| | | Comr | nunity Health Ce | enters | | | |
| Agra | Baroli Ahir | 30 | 8 | 8 | 5 | 5 | |
| | Jaitpur Kalan | 23 | 5 | 3 | 4 | 2 | |
| | Kheragarh | 30 | 6 | 7 | 4 | 5 | |
| Allahabad | Baharia | 30 | 5 | 2 | 2 | 5 | |
| | Handia | 30 | 8 | 6 | 4 | 6 | |
| | Meja | 30 | 8 | 4 | 4 | 4 | |
| Balrampur | Gaisandi | 30 | 11 | 7 | 8 | 5 | |
| | Pachperwa | 30 | 11 | 7 | 8 | 5 | |
| Banda | Kamasin | 04 | 2 | 5 | 0 | 3 | |
| | Naraini | 30 | 8 | 6 | 3 | 8 | |
| Budaun | Asafpur | 30 | 14 | 9 | 3 | 5 | |
| | Sahaswan | 30 | 7 | 5 | 3 | 6 | |
| | Samrer | 30 | 9 | 8 | 3 | 5 | |
| Gorakhpur | Campiarganj | 30 | 7 | 6 | 3 | 10 | |

(as on 31 March 2018)

Appendices

| District | Hospital Sanction | | Doct | ors | Nurses | |
|------------|-------------------|------|------------------------|---------------------|------------------------|---------------------|
| | | beds | Sanctioned strength | Persons in position | Sanctioned strength | Persons in position |
| | Pali | 30 | 12 | 7 | 10 | 7 |
| | Pipraich | 30 | 10 | 11 | 3 | 7 |
| | Gosaiganj | 30 | 9 | 9 | 3 | 11 |
| Lucknow | Mall | 30 | 9 | 9 | 3 | 5 |
| | Sarojini Nagar | 30 | 7 | 14 | 3 | 12 |
| | Behat | 30 | 6 | 4 | 3 | 3 |
| Saharanpur | Deoband | 30 | 11 | 4 | 4 | 13 |
| | Nagal | 30 | 7 | 2 | 6 | 4 |

(Source: Test-checked hospitals/CHCs)

Appendix VI: Evaluation of Outcome Indicators

| Туре | Quality Indicator | Numerator | Denominator |
|------------------------|--|--|---|
| Productivity | BOR (in <i>per cent</i>) | Total patient bed days in a month | Total no. of functional beds x No. of days in a month |
| of hospital | C-section rate (in <i>per cent</i>) Total no. of C-sections conducted | | Total no. of deliveries |
| | BTR | Total no. of discharges | Total no. of functional beds |
| Efficiency of | DR (in per cent) | Total no. of discharges | Total no. of admissions |
| hospital | ROR (in per cent) | Total no. of cases referred to higher facility | Total no. of admissions |
| Clinical care | ALoS (in days) | Total patient bed days | Total no. of admissions |
| capability of hospital | AER (in per cent) | Total no. of adverse events | Total no. of admissions |
| Service | LAMA (in <i>per cent</i>) | Total no. of LAMA & Absconding cases | Total no. of admissions |
| quality of hospital | Patient satisfaction score | Sum of average satisfaction score of each respondent | Total no. of respondents |

(Reference: Paragraph no. 4.9 and 5.5)

(Source: NHM Assessor's Guidebook)

Appendix VII: Local purchase of drugs

| SI. | | | | | (₹ In lakh) |
|-----|------------------|--------------|---------|-----------------------|-------------|
| No | District | Hospital/CMO | Period | No. of drugs | Cost |
| | | СМО | 2013-18 | 102 | 17.2 |
| 1 | Agra | DH | 2013-18 | 691 | 68.03 |
| | | DWH | 2013-18 | 583 | 65.4 |
| | | СМО | 2014-18 | 69 | 226.1 |
| 2 | A 11 - b - b - d | DH | 2016-18 | 160 | 83. |
| 2 | Allahabad | DWH | 2015-18 | 223 | 67.5 |
| | | DH-II | 2013-18 | 666 | 4178.04 |
| | | СМО | 2013-18 | No Record Given | 1652.49 |
| 2 | D 1 | DH | 2013-18 | No Record Given | 33.72 |
| 3 | Balrampur | DWH | 2013-18 | No Record Given | 95.7 |
| | | ЈН | 2013-18 | No Record Given | 670.3 |
| | | СМО | 2013-18 | 622 | 542.2 |
| 4 | Banda | DH | 2013-18 | 1187 | 66.7 |
| | | DWH | 2013-18 | 409 | 83.6 |
| | | СМО | 2013-18 | 165 | 33 |
| 5 | Budaun | DH | 2013-18 | No Recored Maintained | 294.0 |
| | | DWH | 2013-18 | No Recored Maintained | 18.09 |
| | | СМО | 2013-18 | No Recored Maintained | 137.7 |
| 6 | Gorakhpur | DH | 2013-18 | No Recored Maintained | 305.4 |
| | | DWH | 2013-18 | No Recored Maintained | 127.9 |
| | | СМО | 2017-18 | 202 | 0.6 |
| _ | . . | DH | 2013-18 | No Recored Maintained | 3104.4 |
| 7 | Lucknow | DWH | 2013-18 | 149 | 34.6 |
| | | ЈН | 2013-18 | No Recored Maintained | 50.7 |
| | | СМО | 2013-18 | 630 | 762.3 |
| 8 | Saharanpur | DH | 2013-18 | 388 | 153.2 |
| | | DWH | 2013-18 | 540 | 122.6 |
| | | Total | | 6786 | 13302.3 |
| | Total (CMOs) | | | 1790 | 3676.9 |
| | Total (DHs/DWHs) | | | 4996 | 9625.3 |

(Reference: Paragraph no. 7.5.3)

(Source: Test-checked hospitals/CHCs)

Appendix VIII: Handover of completed works

| SI. No | Name of work | Name of district | Date of completion as per the records of Executing Agency | Date of taking over the facility from the Executing Agency |
|-----------|--|---------------------|--|--|
| 1 | 50 Bedded MCH, Chinhat | Lucknow | 02/2016 | 02/2018 |
| 2 | 30 Bedded MCH, Mohanlalganj | Lucknow | 01/2016 | 05/2017 |
| 3 | 300 bedded Hospital, Kanpur Road | Lucknow | 06/2016 | 06/2016 |
| 4 | CHC Sadholi Kadeem | Saharanpur | 01/2017 | 02/2017 |
| 5 | 30 Bedded MCH at Fathepur, Saharanpur | Saharanpur | 09/2017 | 11/2017 |
| 6 | CHC Kamasin, Banda | Banda | 03/2013 | 07/2015 |
| 7 | 30 Bedded MCH, Phoolpur | Allahabad | 03/2015 | 01/2016 |
| 8 | 100 bedded MCH, Budaun | Budaun | 03/2016 | 09/2017 |

(Reference: Paragraph 8.2.4)

(Source: Executing Agencies)

Appendix IX: Maintenance and repair of hospital buildings

(Reference: Paragraph no. 8.2.5)

Following activities were to be performed by the engineering staff of the CMOs in each district:

- (i) Inspection of all buildings at district headquarter once a month and other buildings in his charge at least once a quarter;
- (ii) Review complaints entered in the complaint register daily in case of district hospital, at least once a week for CHC and once in a fortnight for other hospitals;
- (iii) Summarize the complaints and divide them into day-to-day repair, periodical repair and special repair as per nature of complaints;
- (iv) Attend to complaints received on order of priority;
- (v) Prepare estimates for all types of repair separately and send them to Assistant Engineer.
- (vi) Prepare tender notices and bill of quantities for proposed works;
- (vii) Examine tenders received, prepare engineering appreciation and recommend valid tender for acceptance to Assistance Engineer;
- (viii) Supervise all types of repair works in his/her charge at regular intervals and prepare bills for the same;
- (ix) Ensure smooth functioning of services and supply of water and electricity in the district hospitals;
- (x) Examine general maintenance of buildings during visits and advise on proper maintenance.

List of Abbreviations

| ABG | Arterial Blood Gas |
|---------|---|
| AES | Acute Encephalitis Syndrome |
| AED | Automated External Defibrillator |
| AER | Adverse Event Rate |
| AERB | |
| | Atomic Energy Registration Board |
| AHAP | Annual Health Action Plan |
| AIDS | Acquired Immune Deficiency Syndrome |
| ALoS | Average Length of Stay |
| AMC | Annual Maintenance Contract |
| ANC | Antenatal Care |
| ANM | Auxiliary Nursing Midwife |
| BCC | Behavioural Change Communication |
| BCG | Bacillus Calmette Guerin |
| BHT | Bed Head Ticket |
| BMW | Bio Medical Waste |
| BOR | Bed Occupancy Rate |
| BTR | Bed Turnover Rate |
| CAC | Comprehensive Abortion Care |
| CAG | Comptroller and Auditor General of India |
| CBMWTF | Common Bio-Medical Waste Treatment Facilitator |
| C&DS | Construction and Design Services |
| CHC | Community Health Centre |
| СМО | Chief Medical Officer |
| CMS | Chief Medical Superintendent |
| CT Scan | Computed Tomography Scan |
| DC | Drug Controller |
| DGFW | Director General, Family Welfare |
| DGMH | Director General, Medical Health |
| DGS&D | Director General of Supplies and Disposal |
| DH | District Hospital |
| DHS | District Health Society |
| DMP | Disaster Management Plan |
| DPP | Drug Procurement Policy |
| DR | Discharge Rate |
| DVDMS | Drugs and Vaccines Distribution Management System |
| DWH | District Women Hospital |
| EA | Executing Agency |
| EDL | Essential Drug List |
| EmOC | Emergency Obstetric Care |
| EMTS | Emergency Medical Transport Service |
| | Line gener medical manopole betvice |

| ENT | Ear, Nose and Throat | | |
|---------|--|--|--|
| EPP | Equipment Procurement Policy | | |
| EQA | External Quality Agency | | |
| ESF | External Quality Agency Emergency Support Function | | |
| ESIC | Employees State Insurance Corporation | | |
| EtO | Ethylene Oxide | | |
| ETP | Effluent Treatment Plant | | |
| FHB | Financial Hand Book | | |
| FHS | | | |
| FRU | Foetal Heart Sound | | |
| GoI | First Referral Unit | | |
| GoUP | Government of India Government of Uttar Pradesh | | |
| HBsAG | | | |
| HICC | Hepatitis B Surface Antigen | | |
| HIV | Hospital Infection Control Committee | | |
| | Human Immunodeficiency Virus | | |
| HLD | High Level Disinfection | | |
| HR | Human Resource | | |
| ICCU | Intensive Cardiac Care Unit | | |
| ICU | Intensive Care Unit | | |
| IEC | Information, Education and Communication | | |
| IMR | Infant Mortality Rate | | |
| IPC | Intra-partum Care | | |
| IPD | Indoor Patient Department | | |
| IPHS | Indian Public Health Standards | | |
| IT | Information Technology | | |
| JE | Japanese Encephalitis | | |
| JH | Joint Hospital | | |
| JSSK | Janani Shishu Suraksha Karyakram | | |
| LAMA | Leave Against Medical Advice | | |
| LD | Liquidated Damage | | |
| LT | Lab Technician | | |
| MCH | Maternal and Child Health | | |
| MMR | Maternal Mortality Rate | | |
| MNH | | | |
| Toolkit | Maternal and Neonatal Health Toolkit | | |
| MOIC | Medical Officer in Charge | | |
| MoU | Memorandum of Understanding | | |
| MTP | Medical Termination of Pregnancy | | |
| NABL | National Accreditation Board for Testing and Calibration Laboratories | | |
| NCI | Nursing Council of India | | |
| NFHS | National Family Health Survey | | |
| NHM | National Health Mission | | |

| NICONeonatal intensive Care UnitNITNotice Inviting TenderOIOutcome IndicatorsOPDOutdoor Patient DepartmentOPVOral Polio VaccineOTOperation TheatrePIPProject Implementation PlanPNCPost Natal CarePPPerspective PlanPSSPatient Satisfaction SurveyPSUPublic Sector UndertakingRCRate ContractRORReferral Out RateRPRRapid Plasma ReaginRTIReproductive Tract InfectionSDGSustainable Development GoalSHSState Health SocietySICSuperintendent in ChiefSOPStandard Operating ProcedureSPMUState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUttrasonographyVDRLVenereal Disease Research LaboratoryWTWaiting Time | NICU | Nexastal Interview Core Huit |
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| OIOutcome IndicatorsOPDOutdoor Patient DepartmentOPVOral Polio VaccineOTOperation TheatrePIPProject Implementation PlanPNCPost Natal CarePPPerspective PlanPSSPatient Satisfaction SurveyPSUPublic Sector UndertakingRCRate ContractRORReferral Out RateRPRRapid Plasma ReaginRTIReproductive Tract InfectionSDGSustainable Development GoalSHSState Health SocietySICSuperintendent in ChiefSOPStandard Operating ProcedureSPKBState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPHSSPUttar Pradesh Health System Strengthening ProjectUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | | Neonatal Intensive Care Unit |
| OPDOutdoor Patient DepartmentOPVOral Polio VaccineOTOperation TheatrePIPProject Implementation PlanPNCPost Natal CarePPPerspective PlanPSSPatient Satisfaction SurveyPSUPublic Sector UndertakingRCRate ContractRORReferral Out RateRPRRapid Plasma ReaginRTIReproductive Tract InfectionSDGSustainable Development GoalSHSState Health SocietySICSuperintendent in ChiefSOPStandard Operating ProcedureSPBUState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | | |
| OPVOral Polio VaccineOTOperation TheatrePIPProject Implementation PlanPNCPost Natal CarePPPerspective PlanPSSPatient Satisfaction SurveyPSUPublic Sector UndertakingRCRate ContractRORReferral Out RateRPRRapid Plasma ReaginRTIReproductive Tract InfectionSDGSustainable Development GoalSHSState Health SocietySICSuperintendent in ChiefSOPStandard Operating ProcedureSPCBState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPRLNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | | |
| OTOperation TheatrePIPProject Implementation PlanPNCPost Natal CarePPPerspective PlanPSSPatient Satisfaction SurveyPSUPublic Sector UndertakingRCRate ContractRORReferral Out RateRPRRapid Plasma ReaginRTIReproductive Tract InfectionSDGSustainable Development GoalSHSState Health SocietySICSuperintendent in ChiefSOPStandard Operating ProcedureSPCBState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPHSSPUttar Pradesh Health System Strengthening ProjectUPPCLUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | | |
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| PNCPost Natal CarePPPerspective PlanPSSPatient Satisfaction SurveyPSUPublic Sector UndertakingRCRate ContractRORReferral Out RateRPRRapid Plasma ReaginRTIReproductive Tract InfectionSDGSustainable Development GoalSHSState Health SocietySICSuperintendent in ChiefSOPStandard Operating ProcedureSPCBState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPHSSPUttar Pradesh Health System Strengthening ProjectUPPCLUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | | |
| PPPerspective PlanPSSPatient Satisfaction SurveyPSUPublic Sector UndertakingRCRate ContractRORReferral Out RateRPRRapid Plasma ReaginRTIReproductive Tract InfectionSDGSustainable Development GoalSHSState Health SocietySICSuperintendent in ChiefSOPStandard Operating ProcedureSPGBState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPPCLUttar Pradesh Health System Strengthening ProjectUPPCLUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | PIP | |
| PSSPatient Satisfaction SurveyPSUPublic Sector UndertakingRCRate ContractRORReferral Out RateRPRRapid Plasma ReaginRTIReproductive Tract InfectionSDGSustainable Development GoalSHSState Health SocietySICSuperintendent in ChiefSOPStandard Operating ProcedureSPCBState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPHSSPUttar Pradesh Health System Strengthening ProjectUPPCLUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | PNC | Post Natal Care |
| PSUPublic Sector UndertakingRCRate ContractRORReferral Out RateRPRRapid Plasma ReaginRTIReproductive Tract InfectionSDGSustainable Development GoalSHSState Health SocietySICSuperintendent in ChiefSOPStandard Operating ProcedureSPCBState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | PP | Perspective Plan |
| RCRate ContractRORReferral Out RateRPRRapid Plasma ReaginRTIReproductive Tract InfectionSDGSustainable Development GoalSHSState Health SocietySICSuperintendent in ChiefSOPStandard Operating ProcedureSPCBState Pollution Control BoardSPKWSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Health System Strengthening ProjectUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | PSS | Patient Satisfaction Survey |
| RORReferral Out RateRPRRapid Plasma ReaginRTIReproductive Tract InfectionSDGSustainable Development GoalSHSState Health SocietySICSuperintendent in ChiefSOPStandard Operating ProcedureSPCBState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPPCLUttar Pradesh Health System Strengthening ProjectUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | PSU | Public Sector Undertaking |
| RPRRapid Plasma ReaginRTIReproductive Tract InfectionSDGSustainable Development GoalSHSState Health SocietySICSuperintendent in ChiefSOPStandard Operating ProcedureSPCBState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPPCLUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | RC | Rate Contract |
| RTIReproductive Tract InfectionSDGSustainable Development GoalSHSState Health SocietySICSuperintendent in ChiefSOPStandard Operating ProcedureSPCBState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPPCLUttar Pradesh Health System Strengthening ProjectUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | ROR | Referral Out Rate |
| SDGSustainable Development GoalSHSState Health SocietySICSuperintendent in ChiefSOPStandard Operating ProcedureSPCBState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPPCLUttar Pradesh Health System Strengthening ProjectUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | RPR | Rapid Plasma Reagin |
| SHSState Health SocietySICSuperintendent in ChiefSOPStandard Operating ProcedureSPCBState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPPCLUttar Pradesh Health System Strengthening ProjectUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | RTI | Reproductive Tract Infection |
| SICSuperintendent in ChiefSOPStandard Operating ProcedureSPCBState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPPCLUttar Pradesh Health System Strengthening ProjectUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | SDG | Sustainable Development Goal |
| SOPStandard Operating ProcedureSPCBState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPPCLUttar Pradesh Health System Strengthening ProjectUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | SHS | State Health Society |
| SPCBState Pollution Control BoardSPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPPCLUttar Pradesh Health System Strengthening ProjectUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | SIC | Superintendent in Chief |
| SPMUState Programme Management UnitSRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPPCLUttar Pradesh Health System Strengthening ProjectUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | SOP | Standard Operating Procedure |
| SRSWORSimple Random Sampling Without ReplacementSTISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPHSSPUttar Pradesh Health System Strengthening ProjectUPPCLUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | SPCB | State Pollution Control Board |
| STISexually Transmitted InfectionTATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPHSSPUttar Pradesh Health System Strengthening ProjectUPPCLUttar Pradesh Project Corporation LimitedUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | SPMU | State Programme Management Unit |
| TATTurn-around TimeTBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPHSSPUttar Pradesh Health System Strengthening ProjectUPPCLUttar Pradesh Project Corporation LimitedUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | SRSWOR | Simple Random Sampling Without Replacement |
| TBTuberculosisTFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPHSSPUttar Pradesh Health System Strengthening ProjectUPPCLUttar Pradesh Project Corporation LimitedUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | STI | Sexually Transmitted Infection |
| TFRTotal Fertility RateTSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPHSSPUttar Pradesh Health System Strengthening ProjectUPPCLUttar Pradesh Project Corporation LimitedUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | TAT | Turn-around Time |
| TSTechnical SanctionUPAVPUttar Pradesh Avas Vikas ParishadUPHSSPUttar Pradesh Health System Strengthening ProjectUPPCLUttar Pradesh Project Corporation LimitedUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | ТВ | Tuberculosis |
| UPAVPUttar Pradesh Avas Vikas ParishadUPHSSPUttar Pradesh Health System Strengthening ProjectUPPCLUttar Pradesh Project Corporation LimitedUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | TFR | Total Fertility Rate |
| UPHSSPUttar Pradesh Health System Strengthening ProjectUPPCLUttar Pradesh Project Corporation LimitedUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | TS | Technical Sanction |
| UPPCLUttar Pradesh Project Corporation LimitedUPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | UPAVP | Uttar Pradesh Avas Vikas Parishad |
| UPRNNUttar Pradesh Rajkiya Nirman NigamUSGUltrasonographyVDRLVenereal Disease Research Laboratory | UPHSSP | Uttar Pradesh Health System Strengthening Project |
| USGUltrasonographyVDRLVenereal Disease Research Laboratory | UPPCL | Uttar Pradesh Project Corporation Limited |
| VDRL Venereal Disease Research Laboratory | UPRNN | Uttar Pradesh Rajkiya Nirman Nigam |
| | USG | Ultrasonography |
| | VDRL | Venereal Disease Research Laboratory |
| | WT | Waiting Time |

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