International Institute of Health Management Research (IIHMR), New Delhi

PGDM (HOSPITAL AND HEALTH MANAGEMENT)

(Batch 2022-2024)

RE_SUPPLEMENTARY EXAM (4ᵗʰ Term)
SUPPLEMENTARY EXAM (5ᵗʰ & 6ᵗʰ Term)

HOM 709-Hospital Management Information Systems

Date: June 20, 2024   **Timing & Duration: 10:30 A.M.-01:30 P.M. (3 Hrs.)**   **Max. Marks: 100**

Instructions:
- Budget your time as per the marks given for each question and write your answer accordingly.
- Don't write anything on the Question Paper except writing your Registration No.
- Mobile Phones are not allowed even for computations.

Part A: Q. 1 to Q.10 (10 questions *2 marks = 20 marks).

Match the Column A and Column B

S.No.	Column A	Column B
1	Telehealth	Un-labelled input data
2	Telemedicine	Labelled input data
3	Virtual Reality	Relates to estimating the strengths and weaknesses of technology alternatives
4	Robotic Augmentation	Uses real world setting & users can control the system
5	Cost benefit of technology	Software that intervenes with treatment based on clinical evidence
6	Software as Medical Device	Relates to value of the outcome compared to the expenditures.
7	Supervised Learning	Uses fictional world and the system controls the users movements
8	Digital Therapeutics	Remote clinical services
9	Unsupervised Learning	Software intended to be used for one or more medical purposes
10	Cost effectiveness of technology	Remote non clinical services

Part B: Q.11 to Q.15 (4 questions *10 Marks = 40 Marks) Attempt any four.

11. A hospital is interested in developing dash boards to monitor few performance indicators for outpatient department. Identify and describe two indicators for monitoring patient satisfaction in OPD.
12. A Telemedicine platform will be implemented for a State Govt hospital in a rural district in UP. What are the points to be considered before implementation?
13. Brexit Pharmaceuticals is interested in obtaining approval for the pill from the Drug Regulator they are developing for treating diabetes. How do you think artificial intelligence can help this situation?
14. A clinical problem in hospital are drug interactions on account of Polypharmacy? How can digital tools help in controlling the situation?
15. How can waiting time problem be addressed through digital tools?

Part C: Q.16 to Q.20 (4 questions *10 Marks = 40 Marks) Attempt any four.
The Universal Immunisation programme is implemented in India to immunise children and women of reproductive age group against 6 life threatening disease conditions. These include Tetanus, Diphtheria, Whooping Cough, Measles, Polio and Tuberculosis. The schedule for vaccination is illustrated below:

Vaccine	Number of Doses	Age
BCG	One	Birth upto 6 weeks
Oral Polio	Three	6 weeks followed by one month interval Booster at 12 months – 18 months
Measles	One	9 months
Diphtheria, pertussis, Tetanus	Three initial Booster - Two	6 weeks followed by one month interval Booster at 12 months – 18 months & 5 years

16. How can digital technology be utilized for effective implementation of Universal Immunisation Programme in a Health System?
17. How can professionals be capacitated using digital tools for Universal Immunisation Programme?
18. How can AI be used for effective universal coverage for vaccinations?
19. How can effective adverse effects of vaccine be reported using digital tools in the healthcare settings?
20. How can community be involved/ motivated through digital tools for Universal Immunisation Programme?