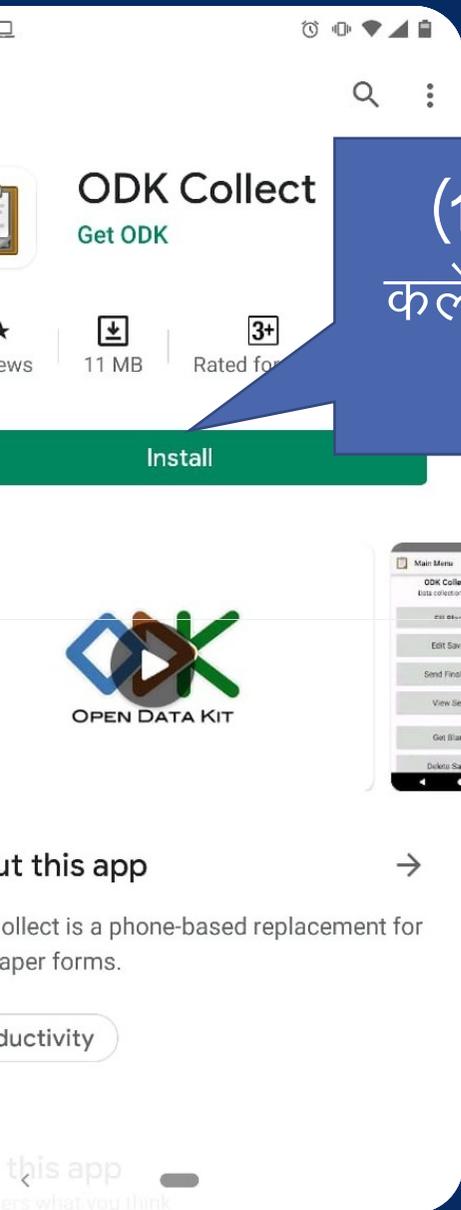


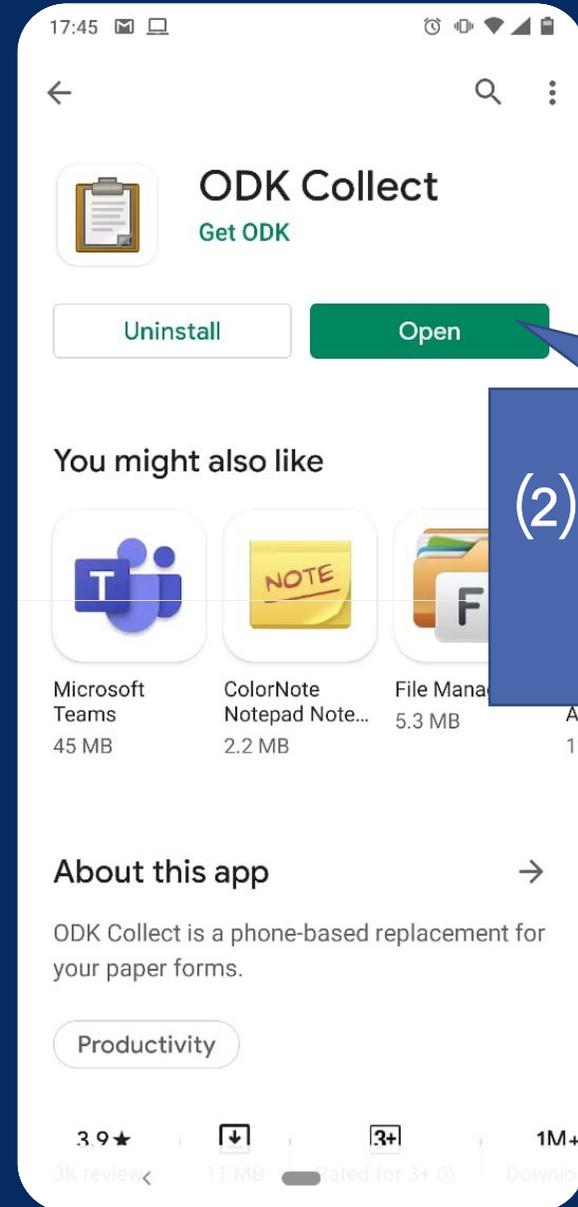


ODK

OPEN Data Kit



(1) प्लेस्टोर से ओडीके कलेक्ट को इन्स्टॉल करना है ।



(2) इन्स्टॉल हो जाने के ओपन करना है ।



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Send Finalized Form

View Sent Form

Get Blank Form

Delete Saved Form

ODK Collect v2021.2.2





Fill Blank Form

Edit Saved Form

Send Finalized Form

View Sent Form

Get Blank Form

Delete Saved Form

ODK Collect v2021.2.2



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Projects



ihms.health.rajasthan.gov.in
mchrajasthan /
ihms.health.rajasthan.gov.in

Settings



odk.ona.io
mchdungarpur / odk.ona.io



odk.ona.io
consultant / odk.ona.io



assanvassan-odk.com
assanvassan-odk.com



assanvassan-odk.com
assanvassan-odk.com



Add project



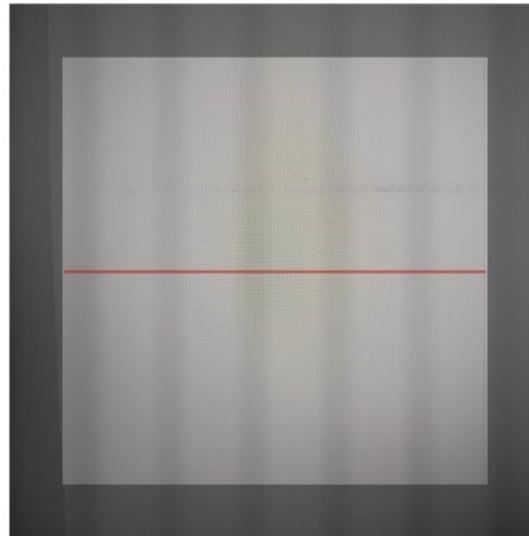
About



Add project



Scan configuration QR code



OR

 Manually enter project details

Cancel





Mucormycosis Checklist

**(in COVID Positive
patient)**



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ODK Collect v2021.2.2

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1. Mucormycosis Checklist

Version: 1

Added on Thu, Aug 12, 2021 at 11:15



1.b Mucormycosis Monthly Data from the facility

Version: 1

Added on Thu, Aug 12, 2021 at 11:15



4. ICU, PICU & NICU Audit Check List

Version: 1

Added on Thu, Aug 12, 2021 at 11:15



1. Mucormycosis C...

Mucormycosis Checklist (in COVID Positive patient)

NEXT >

1. Mucormycosis C...

* District

- Ajmer
- Bikaner
- Barmer
- Bundi
- Churu
- Ganganagar
- Jaipur I
- Jaipur II
- Jhalawar
- Jodhpur
- Karauli

< BACK

NEXT >

11:26 AM

3.4KB/s

1. Mucormycosis C...

* Name of Facility

- DH Kekri
- SDH Nasirabad
- Jawahar Lal Nehru Medical College and Hospital
- Other

< BACK

NEXT >



1. Mucormycosis C...

* Name

* age

* sex

Male

Female

* Phone Number

* Address

* Facility in Which Presently Admitted

< BACK

NEXT >

1. Mucormycosis C...   

* Facility in Which Presently Admitted

* Date of Admission

Select date

No date selected

* Complaints on admission

* Date of Diagnosis of Mucormycosis based on culture report

Select date

No date selected

< BACK

NEXT >

1. Mucormycosis C...   

No date selected

* Complaints on admission

* Date of Diagnosis of Mucormycosis based on culture report

Select date

No date selected

* Approximate Date of Onset of Symptoms

Select date

No date selected

< BACK

NEXT >

1. Mucormycosis C...

* Extent of involvement

- Rhinocerebral
- Cutaneous
- pulmonary
- Gastrointestinal

* Comorbidity if any

- DM
- HTN
- CVD
- Tuberculosis
- COPD
- Cancer

< BACK

NEXT >

1. Mucormycosis C...

* Comorbidity if any

- DM
- HTN
- CVD
- Tuberculosis
- COPD
- Cancer
- Asthma
- CKD

* RT-PCR

- Positive
- Negative



1. Mucormycosis C...

* RT-PCR

- Positive
- Negative

* Was Patient given Oxygen in the present Facility before the onset of Mucormycosis

- Yes
- No

* Mode of delivery

- Nasal Prongs
- HFNC
- BiPAP
- Ventilator

< BACK

NEXT >

1. Mucormycosis C...

* Was Oxygen Support given in previous facility then what was the source of Oxygen

- Oxygen Concentrator
- Cylinder
- Centralized Supply
- LMO
- Not_Given

* Final Source of Oxygen for the facility

- LMO plant
- PSA plant
- Firm Supplying Oxygen Cylinder

< BACK

NEXT >

1. Mucormycosis C...

- Cylinder
- Centralized Supply
- LMO
- Not_Given

* Final Source of Oxygen for the facility

- LMO plant
- PSA plant
- Firm Supplying Oxygen Cylinder
- Industrial Oxygen Plant

* name of LMO plant

< BACK

NEXT >

1. Mucormycosis C...

* Was patient referred from outside Facility

- Yes
- No

* Name of the facility from which referred

* Brief Course of disease in the previous hospital

* Was Oxygen Support given in previous facility then what was the source of Oxygen

- Oxygen Concentrator

< BACK

NEXT >

1. Mucormycosis C...

* What was the source of Oxygen

- Oxygen Concentrator
- Cylinder
- Centralized Supply
- LMO

* Final Source of Oxygen in the present facility

- LMO plant
- PSA plant
- Firm Supplying Oxygen Cylinder
- Industrial Oxygen Plant

* name of LMO plant

< BACK

NEXT >

1. Mucormyco... + [Icons]

Medications Given: > 1

* Drug Name/Class

* Quantity

* Dosage

OD

BID

TDS

QID

* Duration in Days

< BACK

NEXT >

Add "Medications Given:"?

DO NOT ADD

ADD

< BACK

NEXT >



1. Mucormyco... + [Disk Icon] [Share Icon] [More Icon]

Medications Given: > 2

* Drug Name/Class

* Quantity

* Dosage

OD

BID

TDS

QID

* Duration in Days

< BACK

NEXT >

Add "Medications Given:"?

DO NOT ADD

ADD

1. Mucormycosis C...

* Outcome

- Death
- Disability
- Discharged Normally
- LAMA

< BACK

NEXT >

1. Mucormycosis C...

* Intervention: Surgical/Medical –
Brief Description

< BACK

NEXT >

**You are at the end of 1.
Mucormycosis Checklist.**

Name this form

1. Mucormycosis Checklist

Mark form as finalized

Save Form and Exit

< BACK



Mucormycosis

**(Monthly Data From
Facility)**

Fill Blank Form

Edit Saved Form

Send Finalized Form

View Sent Form

Get Blank Form

Delete Saved Form

ODK Collect v2021.2.2

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1. Mucormycosis Checklist

Version: 1

Added on Thu, Aug 12, 2021 at 11:15



1.b Mucormycosis Monthly Data from the facility

Version: 1

Added on Thu, Aug 12, 2021 at 11:15



4. ICU, PICU & NICU Audit Check List

Version: 1

Added on Thu, Aug 12, 2021 at 11:15

Mucormycosis Checklist (in COVID Positive patient)

NEXT >

1.b Mucormycosis...   

* District

- Ajmer
- Bikaner
- Barmer
- Bundi
- Churu
- Ganganagar
- Jaipur I
- Jaipur II
- Jhalawar
- Jodhpur
- Karauli

< BACK

NEXT >

1.b Mucormycosis...   

* Name of Facility

- DH Kekri
- SDH Nasirabad
- Jawahar Lal Nehru Medical College and Hospital
- Other

< BACK

NEXT >

1.b Mucormycosis...   

* Total Number of Cases of Mucormycosis during Last Month in the facility:

Cases of Mucormycosis in the Facility (Number of Cases)
(Tentative table)

* 0-19 Years

* 20-39 Years

* 40-59 Years

< BACK

NEXT >

1.b Mucormycosis...   

Cases of mucormycosis in the Facility (Number of Cases)
(Tentative table)

* 0-19 Years

* 20-39 Years

* 40-59 Years

* 60-79 Years

* More than 80 years

< BACK

NEXT >

**You are at the end of 1.b
Mucormycosis Monthly Data from
the facility.**

Name this form

1.b Mucormycosis Monthly Data
from the facility

Mark form as finalized

Save Form and Exit

 **BACK**

The slide features a dark blue background with a pattern of overlapping, semi-transparent diamond shapes in various shades of blue. A large, white diamond shape is centered on the page, containing the text. The text is in a bold, black, sans-serif font.

ICU Audit Checklist

Fill Blank Form

Edit Saved Form

Send Finalized Form

View Sent Form

Get Blank Form

Delete Saved Form

ODK Collect v2021.2.2

Fill Blank Form



1. Mucormycosis Checklist

Version: 1

Added on Thu, Aug 12, 2021 at 11:15



1.b Mucormycosis Monthly Data from the facility

Version: 1

Added on Thu, Aug 12, 2021 at 11:15



4. ICU, PICU & NICU Audit Check List

Version: 1

Added on Thu, Aug 12, 2021 at 11:15

4. ICU, PICU & NICU...

* District

- Ajmer
- Bikaner
- Barmer
- Bundi
- Churu
- Ganganagar
- Jaipur I
- Jaipur II
- Jhalawar
- Jodhpur
- Karauli

< BACK

NEXT >



4. ICU, PICU & NICU...   

* Name of Facility

- DH Kekri
- SDH Nasirabad
- Jawahar Lal Nehru Medical College and Hospital
- Other

< BACK

NEXT >

4. ICU, PICU & NICU...

Type of ICU

- ICU
- PICU
- NICU

< BACK

NEXT >



24.8KB/s

PICU & NICU...

of beds

tioned

tional

Functional

ler's bed

tioned

NEXT >

⌂ ○ ↶



2. Fowler's bed

* Sanctioned

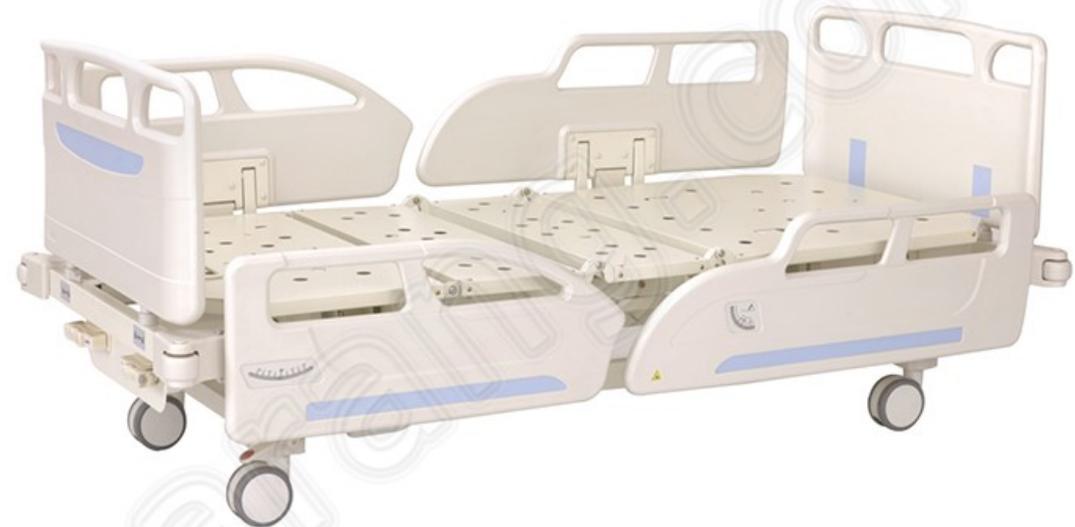
* Functional

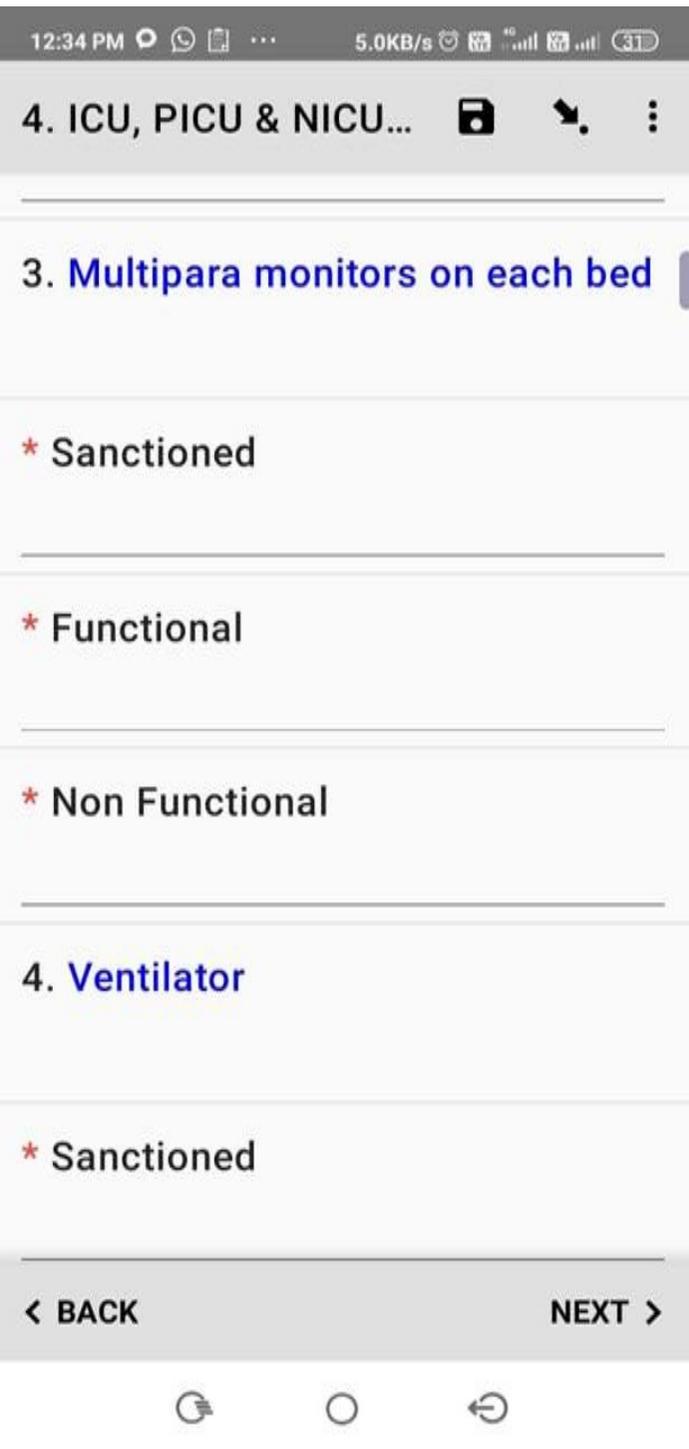
* Non Functional

3. Multipara monitors on each bed

* Sanctioned

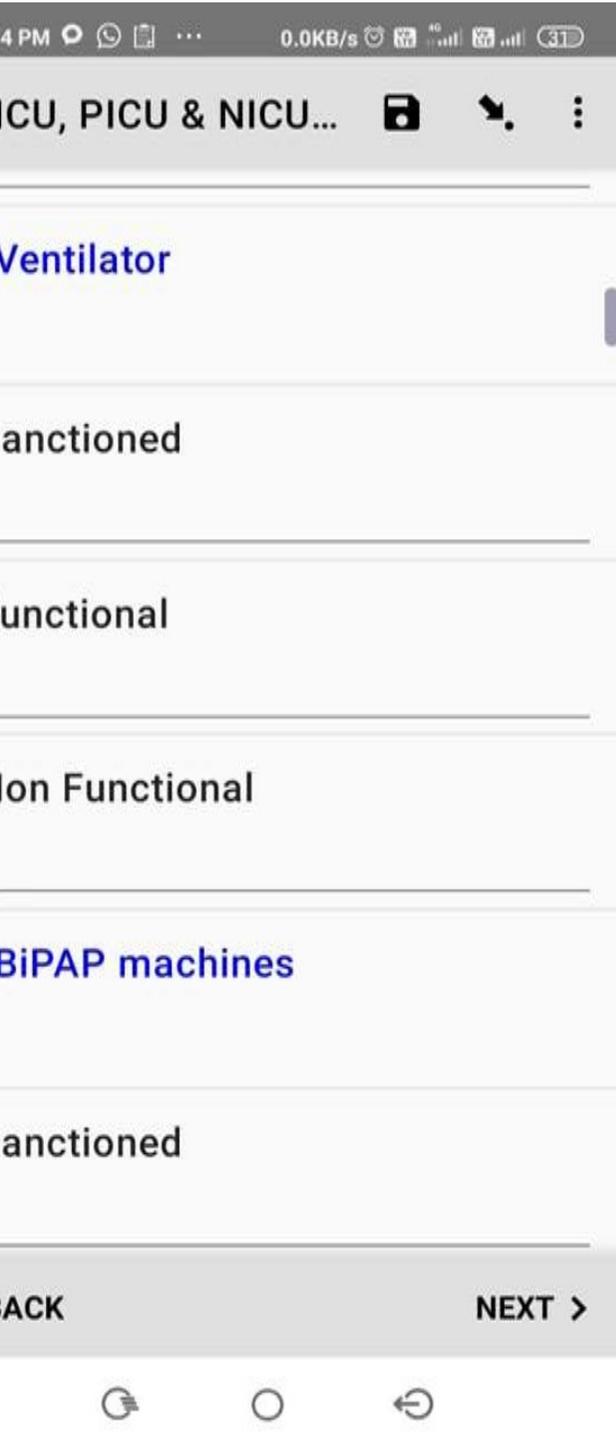
Fowler's bed





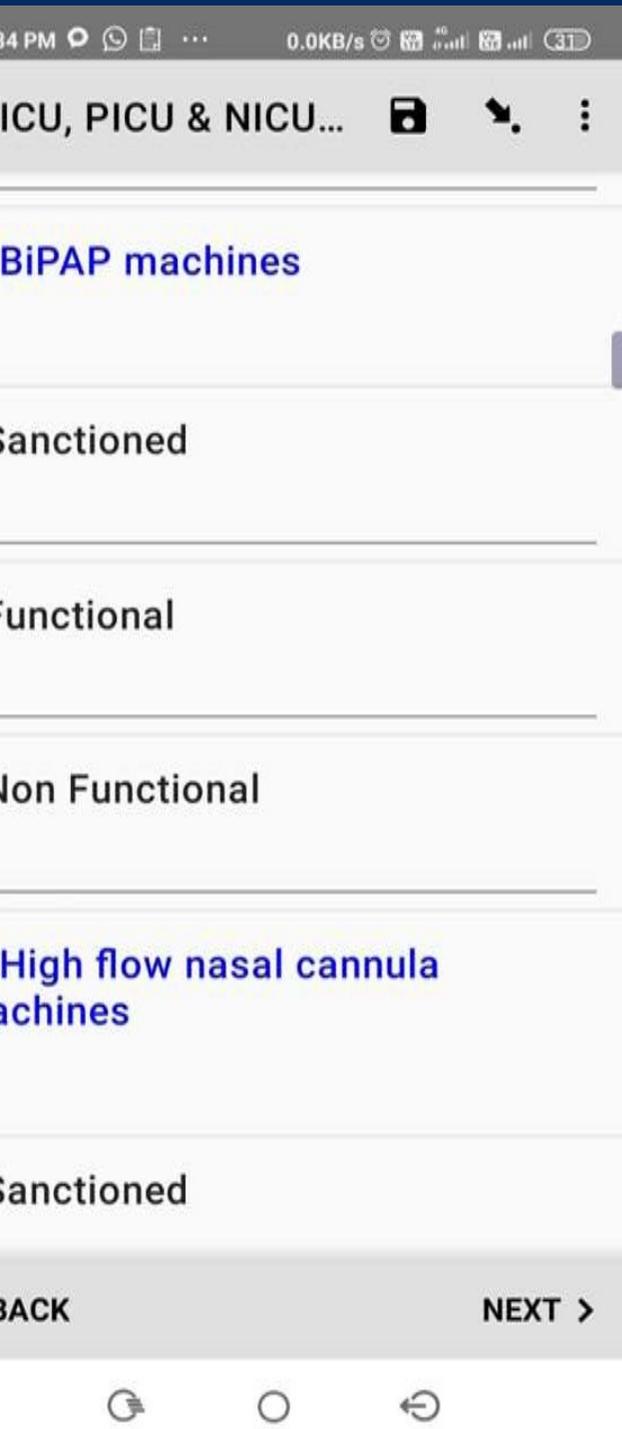
Multipara monitors on each bed





Ventilator Machine





BiPAP Machine



4. ICU, PICU & NICU...

6. High flow nasal cannula machines

* Sanctioned

* Functional

* Non Functional

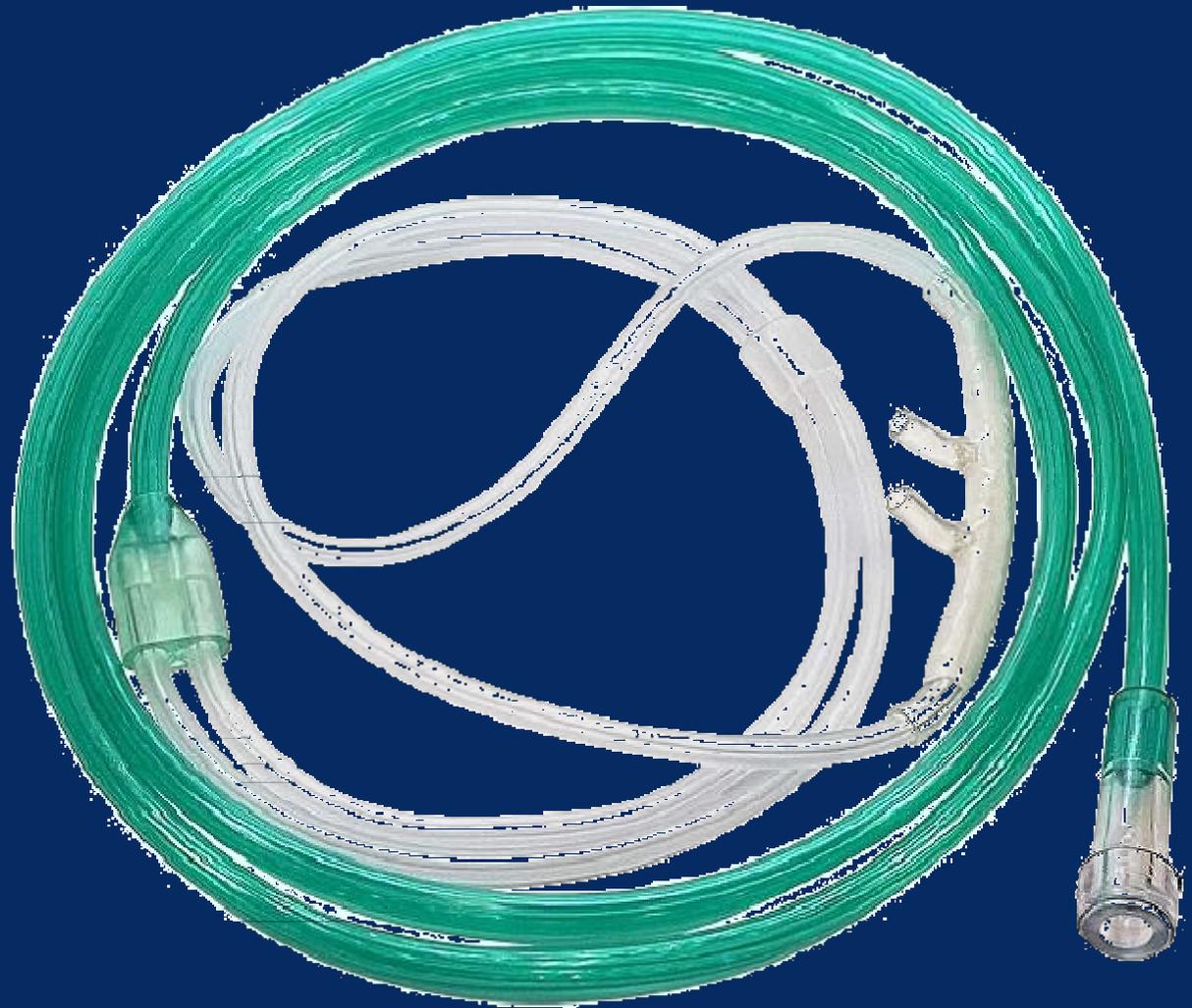
7. ABG machines

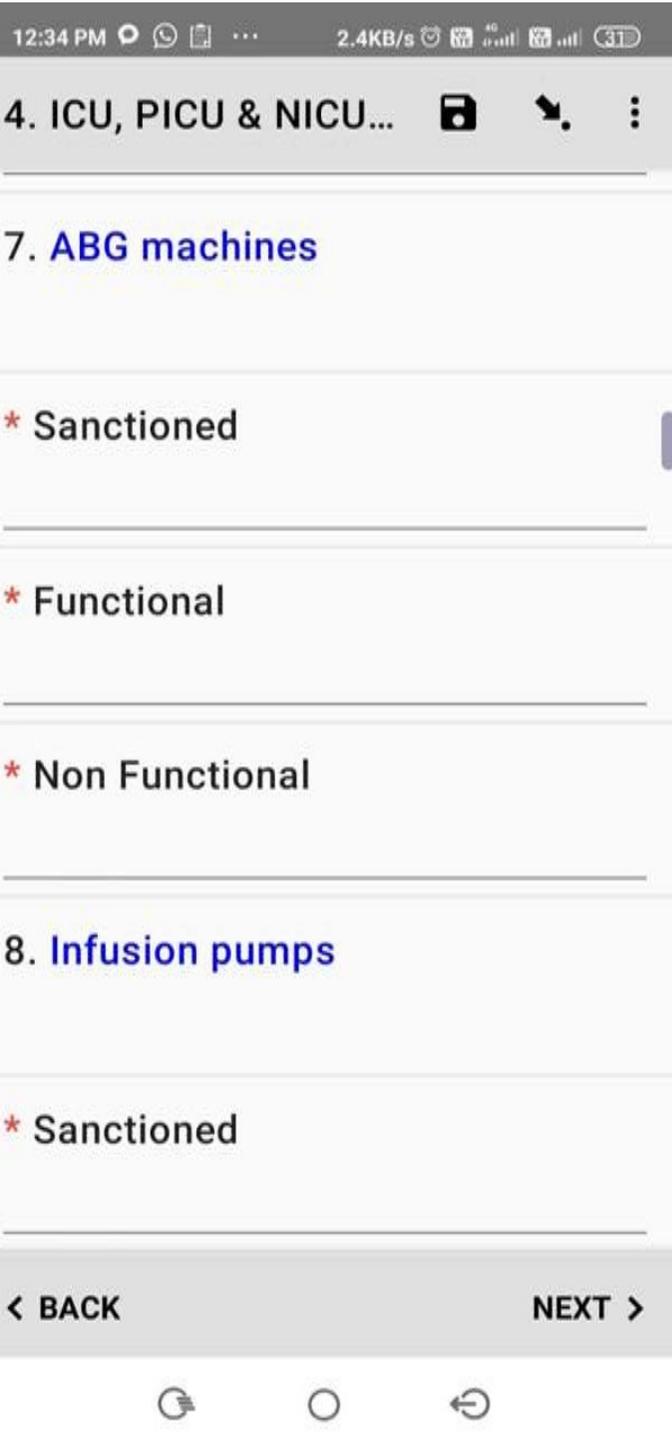
* Sanctioned

< BACK

NEXT >

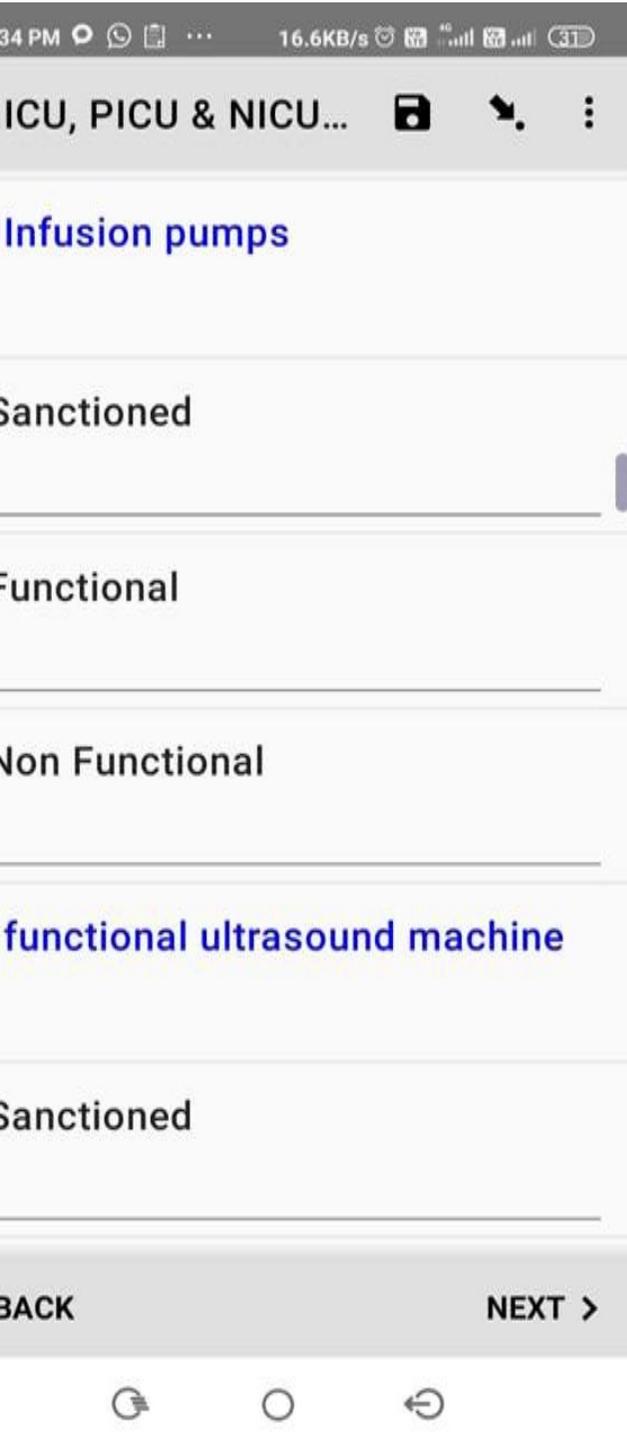
High flow nasal cannula machines





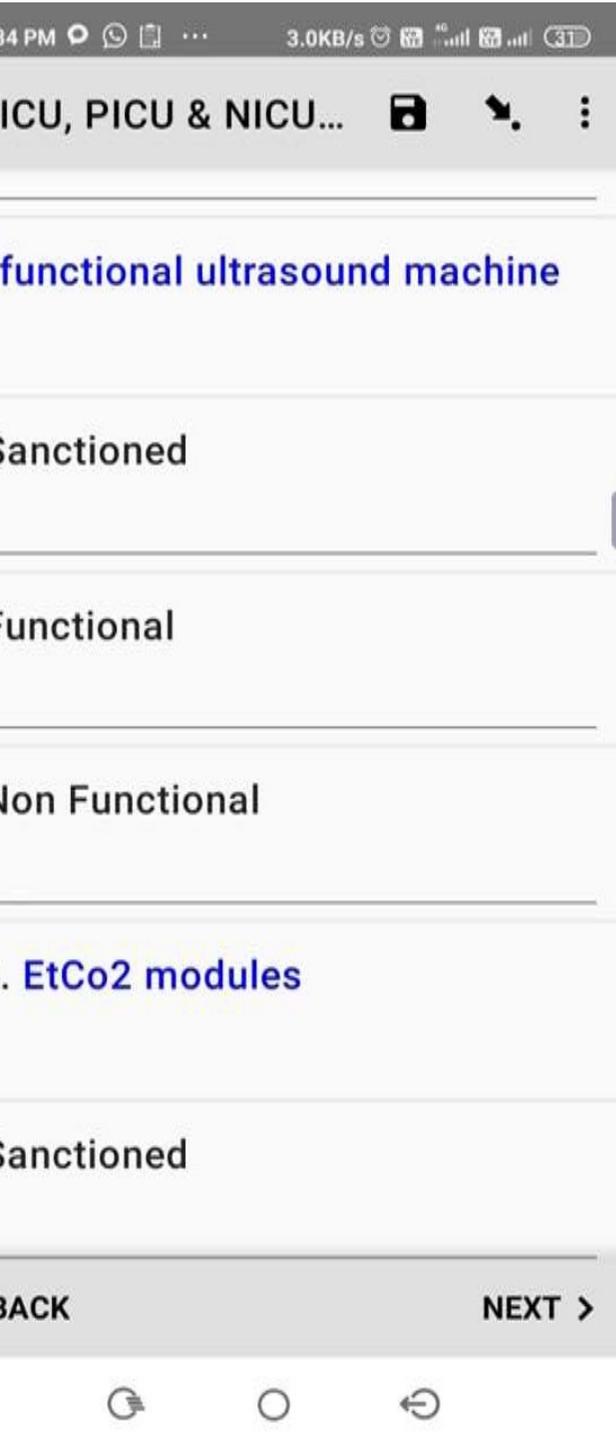
ABG machines





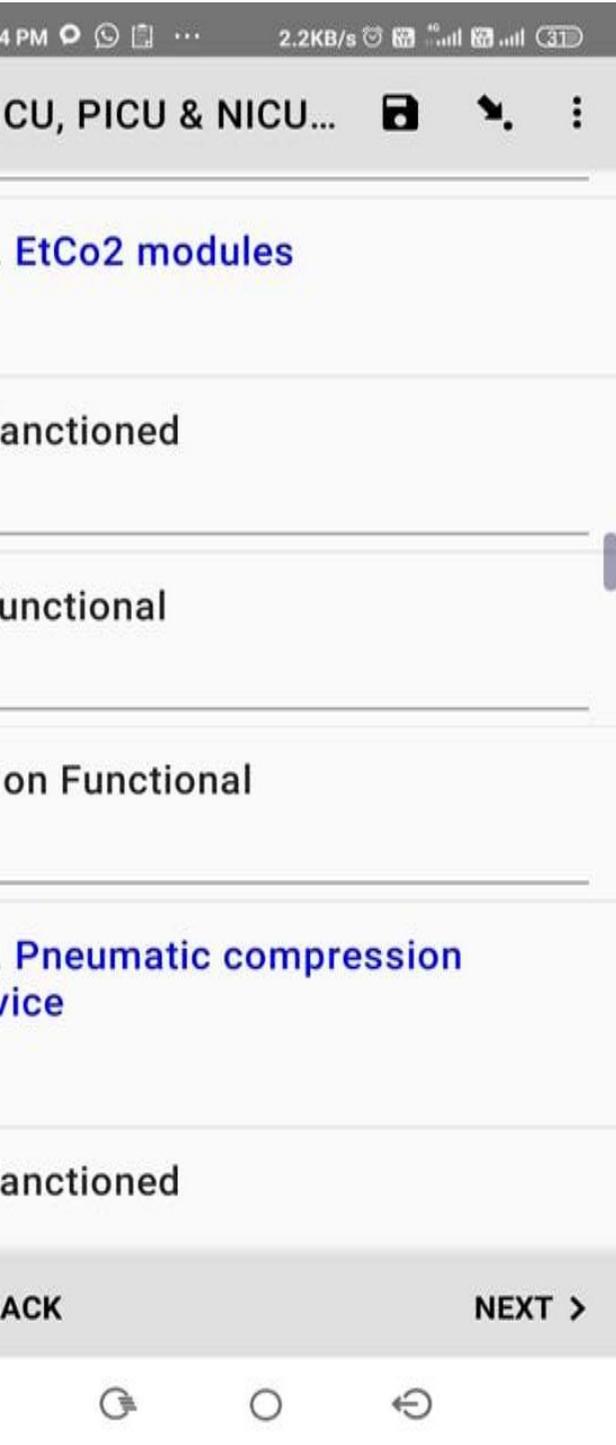
Infusion pumps





functional ultrasound machine





EtCo2 modules





Pneumatic compression device



2:34 PM 0.6KB/s

ICU, PICU & NICU...

2. air bed mattress

Sanctioned

Functional

Non Functional

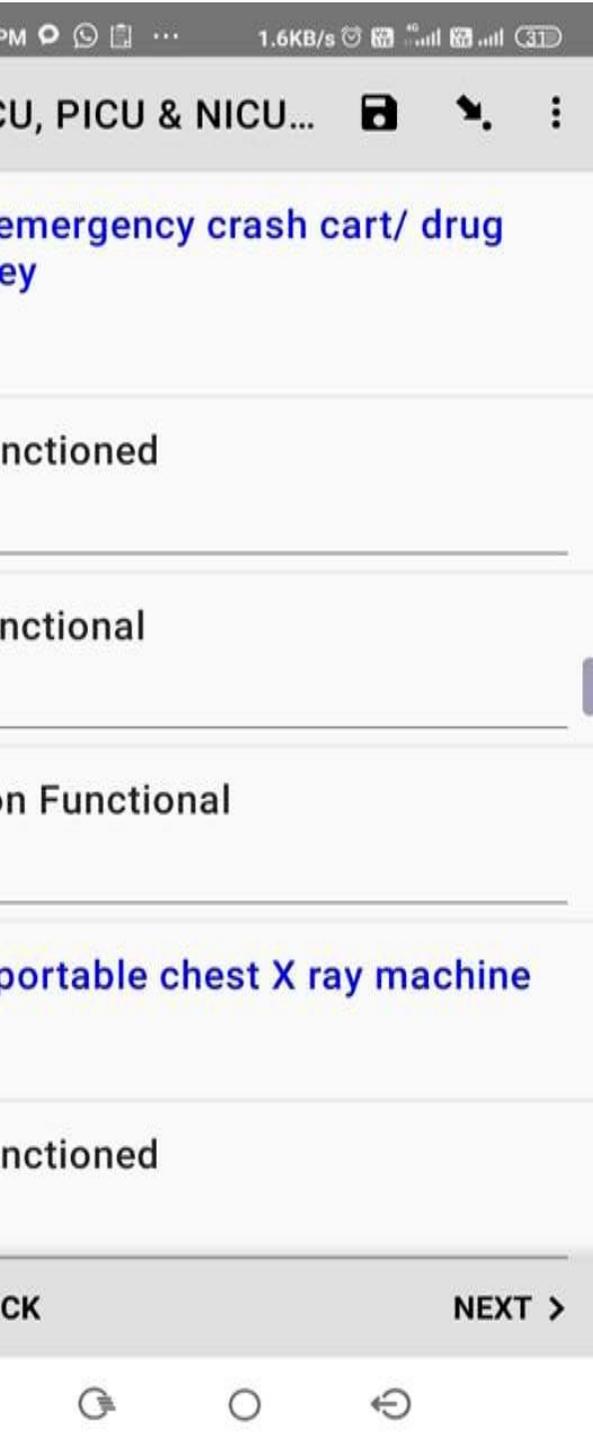
3. emergency crash cart/ drug trolley

Sanctioned

BACK NEXT >

Air bed mattress





emergency crash cart/ drug trolley



14. portable chest X ray machine

* Sanctioned

* Functional

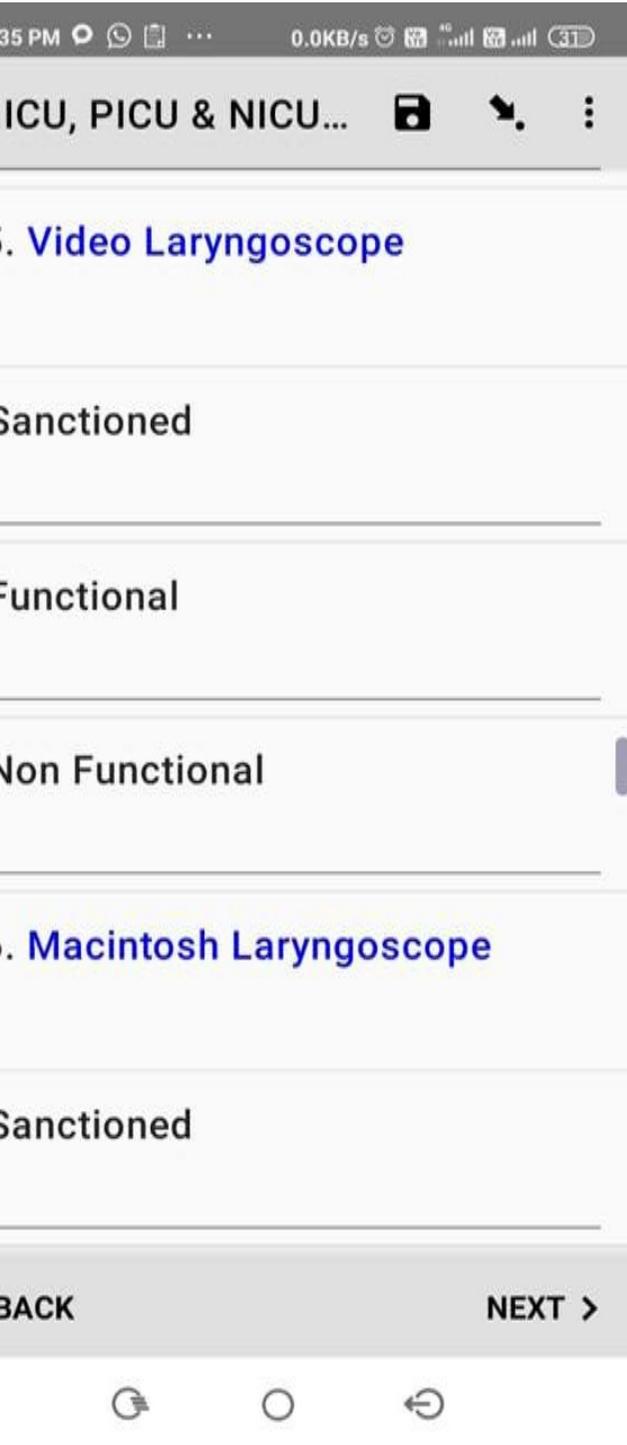
* Non Functional

15. Video Laryngoscope

* Sanctioned

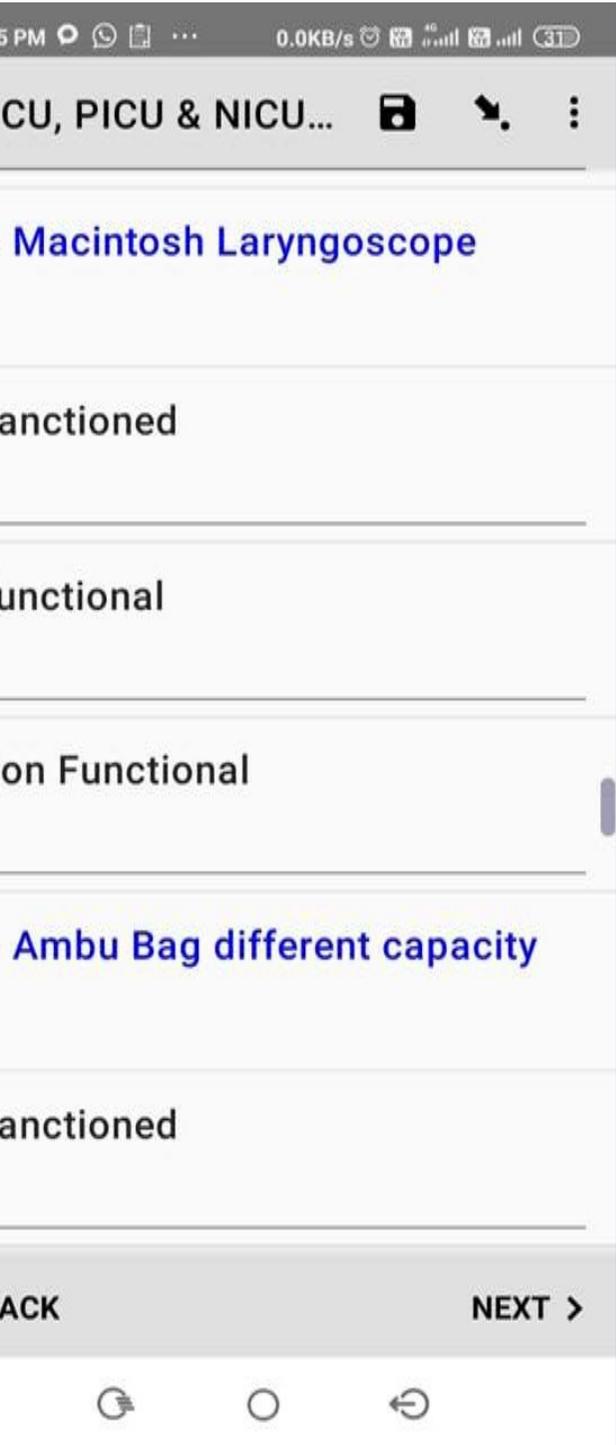
portable chest X ray machine





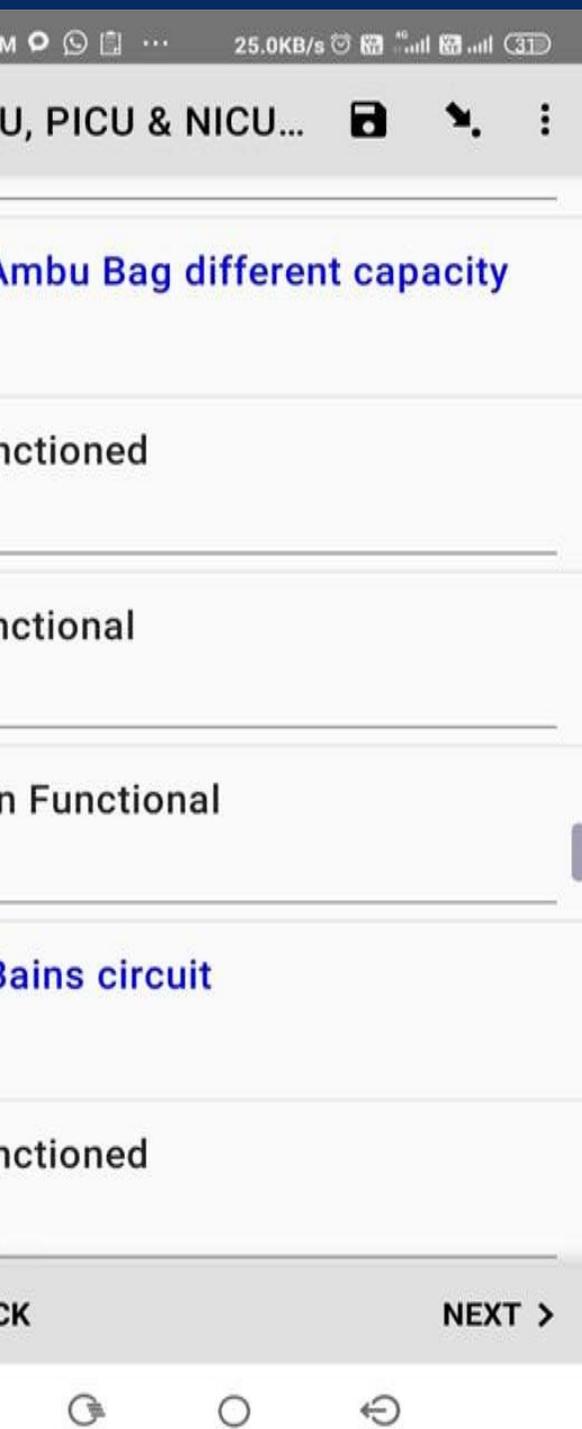
Video Laryngoscope





Macintosh Laryngoscope





Ambu Bag different capacity



5 PM 3.5KB/s

ICU, PICU & NICU...

Bains circuit

anctioned

unctional

on Functional

Non rebreathing mask

anctioned

BACK NEXT >

Bains circuit





Non rebreathing mask



Biougie

anctioned

unctional

on Functional

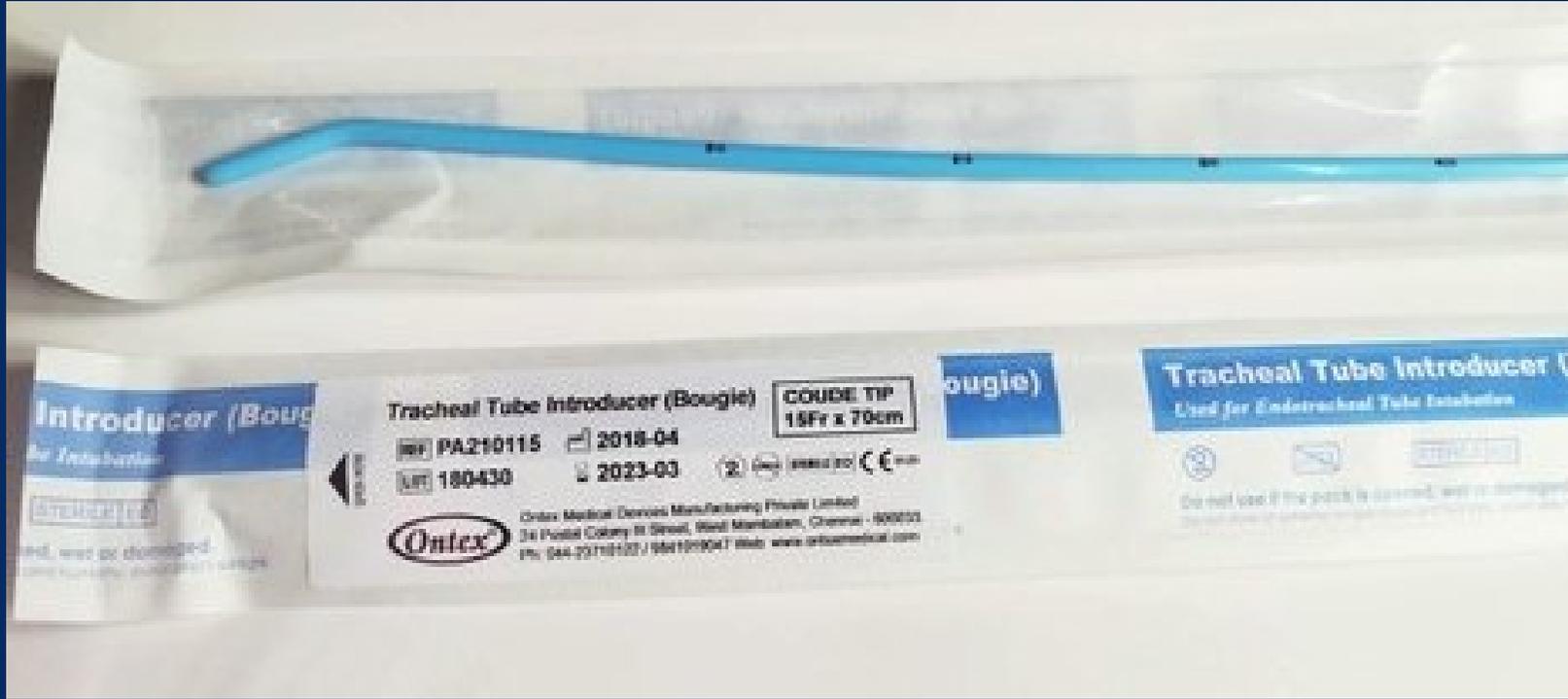
Venturi mask

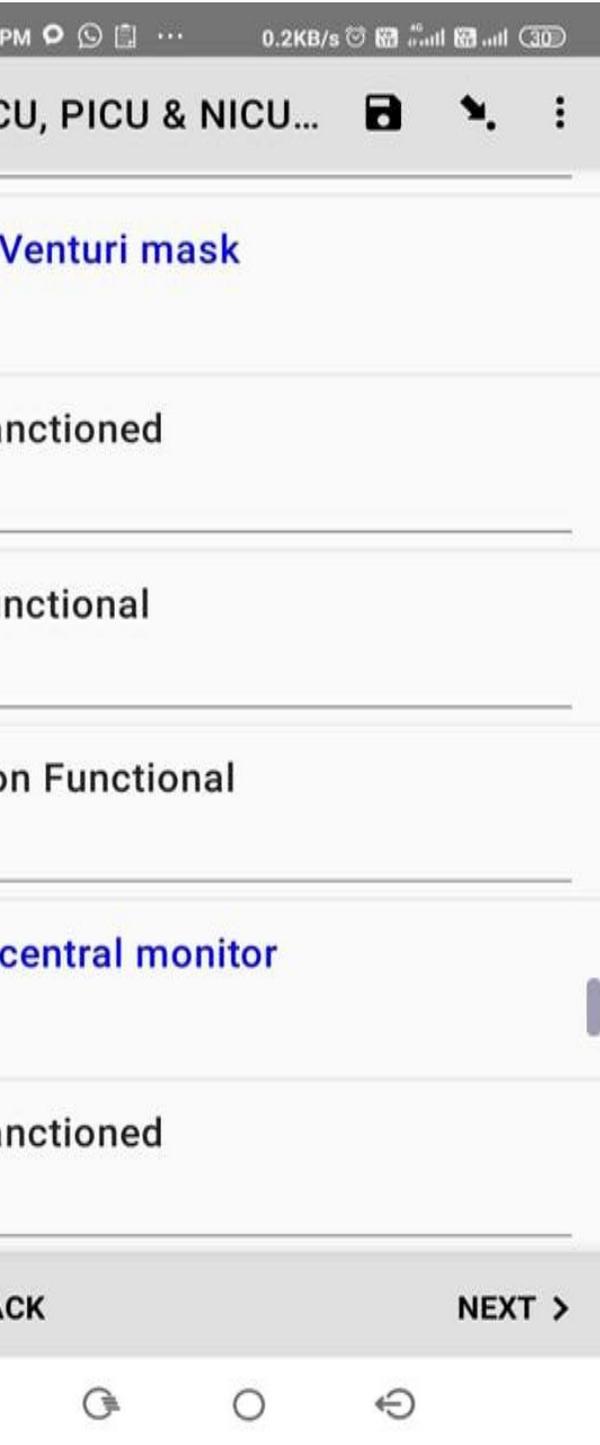
anctioned

ACK

NEXT >

Bougie





Venturi mask



2. central monitor

Sanctioned

Functional

Non Functional

3. Arterial line cannula

Sanctioned

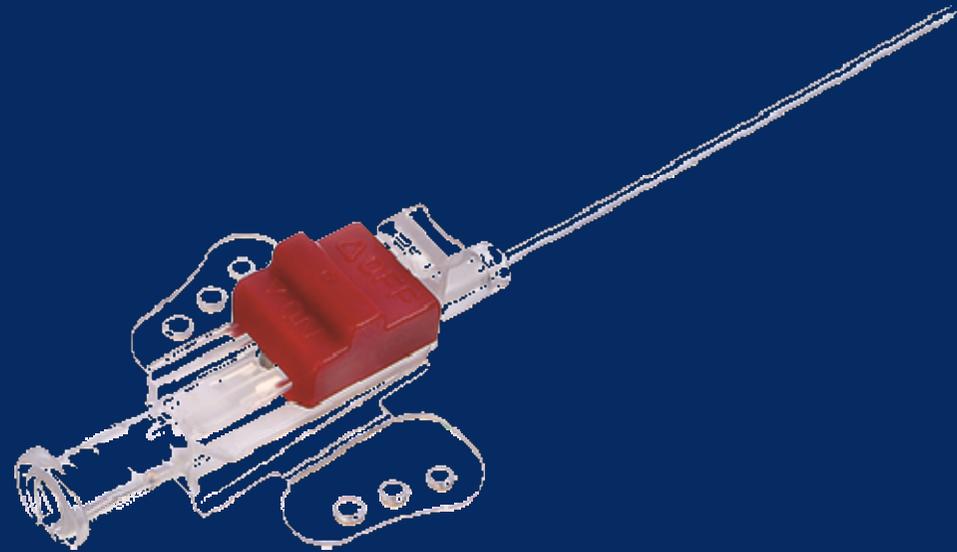
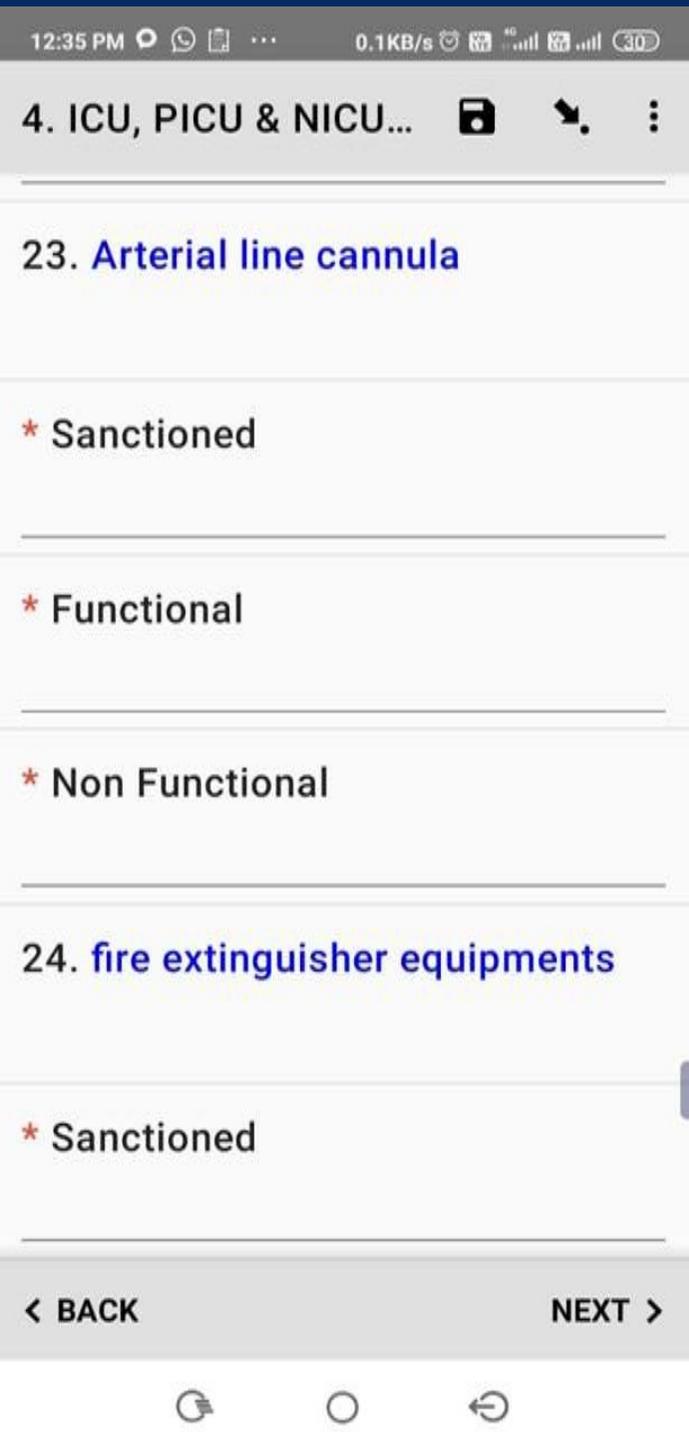
BACK

NEXT >

central monitor



Arterial line cannula



24. fire extinguisher equipments

Sanctioned

Functional

Non Functional

25. Biomedical waste bins as per BMW rules

Sanctioned

fire extinguisher equipments



5 PM 0.0KB/s 4G

CU, PICU & NICU...

Biomedical waste bins as per W rules

anctioned

unctional

on Functional

Defibrillator

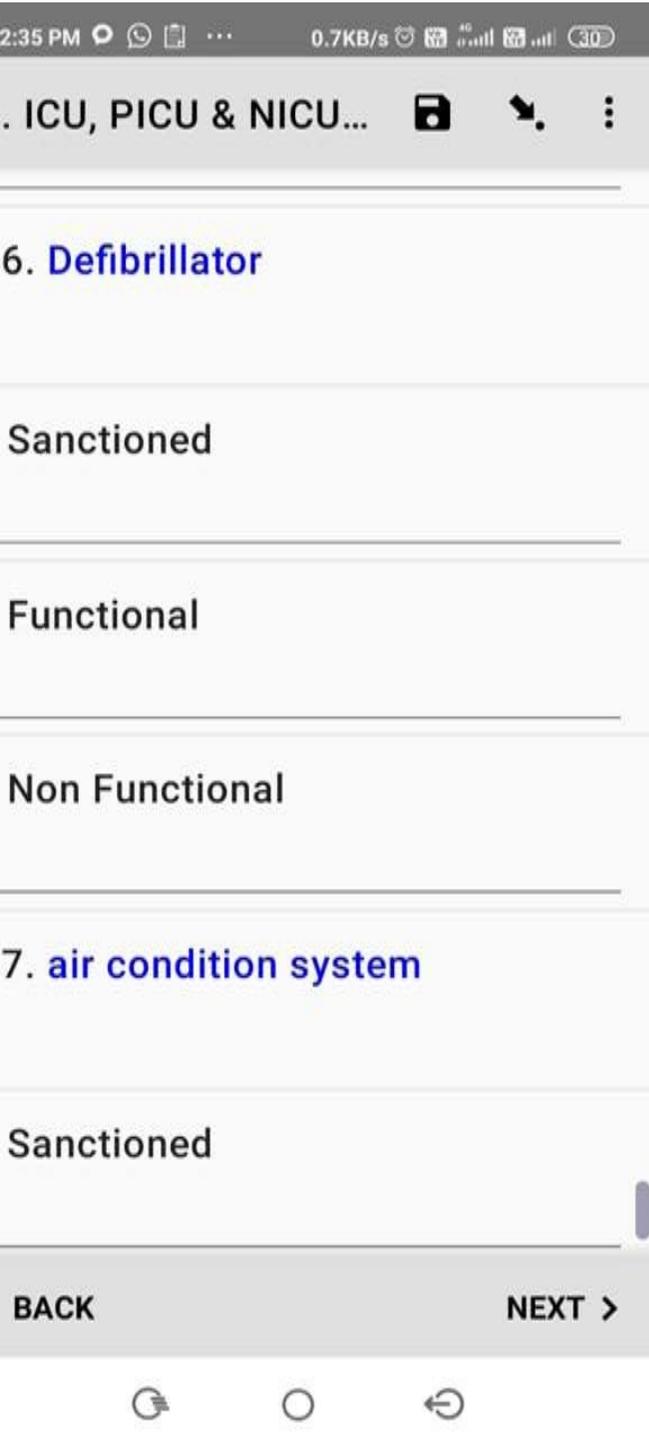
anctioned

ACK NEXT >

⌂ ○ ↩

Biomedical waste bins as per BMW rules





Defibrillator



4. ICU, PICU & NICU...

* Functional

* Non Functional

27. air condition system

* Sanctioned

* Functional

* Non Functional

4. ICU, PICU & NICU...

	Yes	No
28. Ample trained staff	<input checked="" type="radio"/>	<input type="radio"/>
29. ECG technician	<input checked="" type="radio"/>	<input type="radio"/>
30. Sufficient space for carrying out patient care activities with adequate circulatory space	<input checked="" type="radio"/>	<input type="radio"/>
31. Inter bed distance at least 6 feet	<input type="radio"/>	<input type="radio"/>
32. accessible hand washing area	<input type="radio"/>	<input type="radio"/>

< BACK

NEXT >

4. ICU, PICU & NICU...

33. Adequate privacy arrangement for patients

34. safe washing area for patients

35. Duty doctor available round the clock

36. Linen on patients beds are changed daily

37. Maintenance of patients records as per hospital policy

< BACK

NEXT >

4. ICU, PICU & NICU...

39. Maintenance of necessary registers

40. Pantry

41. Round the clock availability of dedicated consultant on call and take morning ICU rounds

42. protocol book

43. Transport trolley

44. CCTV cameras at

4. ICU, PICU & NICU...		
45. changing rooms	<input type="radio"/>	<input type="radio"/>
46. suction port/o2 port/air port on each bed	<input type="radio"/>	<input type="radio"/>
47. Central lines	<input type="radio"/>	<input type="radio"/>

12:36 PM 0.7KB/s 4G 30

4. ICU, PICU & NICU...

You are at the end of 4. ICU, PICU & NICU Audit Check List.

Name this form

4. ICU, PICU & NICU Audit Check List

Mark form as finalized

Save Form and Exit

< BACK

