

A. Course concerned proforma
DEGREE IN CLINICAL PERFUSION TECHNOLOGY

Details of infrastructure facilities available in the institute

Sl. No.	Details	Detailed area In Sq. metre	Available No.
a.	Built in area of building proposed for the course (after excluding common area mentioned in the general proforma)		
b.	Number of Lecture hall (With its available / proposed facilities)		
c.	Number of Open Heart OT		
d.	Seminar room with facilities i) Table ii) Chair iii) Audiovisual aids - OHP iv) LCD projector v) Computer		
e.	General store with facilities		
f.	Common toilet – a) for Boys b) for Girls		
g.	Faculty rooms & staff rooms		

26. Whether enough number of open heart surgeries are being done for training students in perfusion technology (Average number of Open Heart Surgeries in a year-260):

27. Whether a fully functional cardiology unit with 24 hr cath lab facility is available :

28 Whether well equipped round the clock blood banking facility is available. :

29 Whether supportive lab facilities like round the clock hematological, biochemical labs and arterial blood gas analysis is available :

- 30 Whether facility for mechanical support of heart like IABP is available :
- 31 Whether complete patient monitoring facilities are available :
- 32 whether a full fledged post operative intensive care facility is available :

Details of equipments available/proposed

- 1) Heart Lung Machine with heater cooler system
- 2) Intra Aortic balloon pump -
- 3) Echo Cadiogram with TEE probe for Intra Operative as well as postoperative Echo monitoring of the patients -
- 4) State of the art anesthesia work station -
- 5) Mechanical ventilators -
- 6) ACT Machine -
- 7) Syringe pump inforser -
- 8) Defibrillators -
- 9) patient warmer -
- 10) invasive and non invasive monitors -

Teaching Faculty

Sl.No.	Designation	Name	Qualification	Experience	Date of joining	Full/Part time

DECLARATION

I.....on behalf of the Medical College do hereby state that the information given above is true to the based of my knowledge. Further I do agree to abide by future direction of the State Government Paramedical council regarding mod of selection, minimum standard and fee structure of the proposed course.

Signature of the applicant

Place:

Date:

(Seal)