

## DIPLOMA IN OPERATION THEATRE TECHNOLOGY (DOTT)

### 26. Details of infrastructure facilities available in the institute

SNo	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 students Practical laboratory (With its available / proposed work bench area for each student).  <i>Attach details of available/proposed equipments in the students' laboratories</i>		
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 c) for staff		
g	Faculty rooms & staff rooms		

27. Whether the institute has a functional hospital of your own :  
If yes, Total number of out patients/month :  
Total number of in-patients/month :

28. Whether the hospital have the facility of 24 hour casualty:  
If yes, Total number of out patients/month :

29. Whether the hospital have the 24 hour trauma care unit :  
If yes, Total number of out patients/month :

30. Whether surgical departments such as General surgery, Thorasic surgery, Neurosurgery, Orthopaedic, Gynaecology Otolaryngiology Gynaecology and Paediatric surgery are available :  
If yes, Total number of out patients in each unit/month :  
Total number of in-patients in each unit/month :  
Total number of surgery done in each unit/month :

31. Give details of surgical procedure done in the last 2 years :

32. Total number of operation theatre in the hospital :

32. Total working area in the theatre :

33. Total number of operation table in the theatre :

34. Whether the hospital has intensive care unit :  
 If yes, Total number of bed available in the ICU :  
 Mention the facilities available in the ICU :
35. Whether the hospital has post operative care unit in each :  
 Department or common to all dept. :  
 If yes, Give the details :  
 Total number of bed available :  
 Mention the facilities available :
36. Details of available staff position in the :  
 Anesthesiology Department :
37. Whether the staff members are posted for teaching DOTT course : :  
 If yes, give the details :

Teaching faculties

No.	Designation	Name	Qualification	Experience	Date of joining
1	Course Director				
2	Assistant Professor				
3	Lecturer				
4	Lecturer in Nursing				
5	Lecturer in Biomedical engineer				
5	Administrative officer				
6	Assistant				

38. Give the detailed list of staffs presently available in the concerned department.

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

39. Enclose the list of Equipments (with its make/model,year of installation, working status etc) available for the conduct of the concerned course in the institute /hospital.

**DECLARATION**

I, ..... on behalf of  
..... do hereby state that the information given above is true to the best of my  
knowledge. Further I do agree to abide by future direction of the state Government/Paramedical council regarding mode of  
selection, minimum standards and fee structure of the proposed course.

Place:

Date:

Signature of the applicant

(Seal)