

IQRAA Pulmonary Rehabilitation Program - Breathe Easier and Live Well



Pulmonary medicine, a broad specialty in medicine, deals primarily with diseases affecting lungs. It also encompasses areas like critical care, sleep medicine. The specialty in its formative years dealt mainly with tuberculosis. However; in recent years it has made forays into areas of diagnostics procedures & interventions like bronchoscopy & thoracoscopy. The discipline is a rapidly growing specialty with immense promise and hope for the future. It also works in tandem with the government to control tuberculosis as a part of DOTS strategy.

Pulmonologists have made noteworthy contributions to society in dealing with the covid pandemic. Pulmonologists are branching into specialties like sleep medicine, critical care, and interventional pulmonology.

There is an increasing burden of both acute and chronic respiratory diseases, over the last decade, mostly associated with environmental pollution, climatic variation and newer variants of respiratory infections. Among chronic respiratory diseases, Asthma and COPD constitute more than 50% of total disease burden. COPD is the third leading cause of death worldwide.

IQRAA's pulmonologists are specially trained in managing lung diseases like TB, Pneumonia, Asthma,

COPD, interstitial Lung diseases, bronchiectasis, lung cancer, pleural diseases, post covid lung diseases, allergies, occupational lung diseases and obstructive sleep apnoea.

We have OP services available on all day except Sunday and 24*7 hours admission facilities available with invasive and non-invasive ventilator facilities and monitoring. Our department is supported by respiratory therapists, critical care physicians, and interventional radiologists.



The department is equipped with a spirometry, 6 minute walk test, sleep lab and advanced interventional pulmonology unit with flexible bronchoscopy and semi rigid thoracoscopy. We have recently launched a comprehensive pulmonary rehabilitation program for patients with chronic lung diseases especially COPD to help them breathe easier,

improve their quality of life, to make their daily activities smoother and reduce hospital care utilization.

Pulmonary rehabilitation program helps patients to get comprehensive care from an expert pulmonologist, physiotherapist, respiratory therapist, psychologist and dietitian to overcome their disease burden.

During the program, patients will be taught regarding limb exercises and breathing techniques. They will also be educated regarding healthy dietary practices and individual counselling to tackle their anxiety and depression.



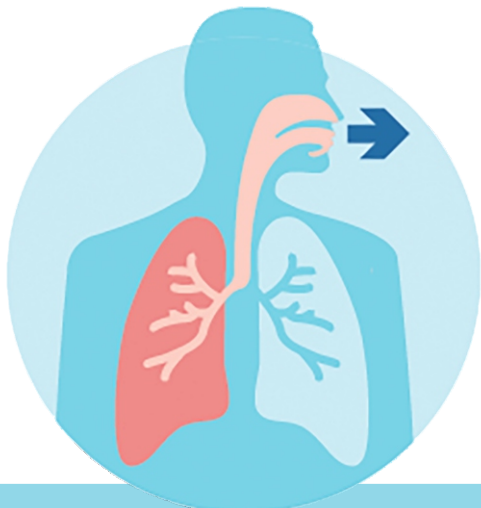
OUR PULMONOLOGISTS

- **Dr. MOYINKUTTY KUZHINHODIYIL**
MBBS, DTCD, DNB, MNAMS
- **Dr. NAMITHA R.**
MBBS, DTCD, DNB, MNAMS
- **Dr. BUSHNA BAVUMON**
MBBS, DNB, DM (Pulmonary Medicine)

CORE SERVICES

- **ADVANCED BRONCHOSCOPY SUITE**
- **SEMIRIGID THORACOSCOPY**
- **SLEEP LAB**
- **PULMONARY REHABILITATION PROGRAMME**
- **SMOKING CESSATION CLINIC**

Clinical Nutrition Department



FACTS TO BREATHE

COPD

- COPD is the 3rd leading cause of death, after heart disease & strokes.

Smoking

- Every cigarette you smoke reduces your expected life span by 11 minutes.
- Tobacco kills up to half of its users

TB

- Every one minute, one person dies due to TB in India
- About one quarter of the world's population is infected with TB.

Lung Cancer

- Lung cancer is the leading cause of cancer death worldwide.
- Smoking contributes to 80-90% of lung cancer.



The Clinical Nutrition Department of IQRAA hospital is a 5 member team. Department works to improve health by establishing and encouraging evidence-based personalised nutrition practices and Lifestyle Modifications (LSM). This is made into practice through the Nutrition Care Process (NCP) which includes nutritional assessment, nutritional diagnosis, nutritional intervention and monitoring. We have a dedicated dietician for ICUs, who is working as an integral part of the nutrition support team.

Our Services/ duties include:

- ▶ In-Patient and Out-Patient counselling, through NCP.
- ▶ OP services have coverage to health packages, LSM for metabolic diseases, pre-operative and post-operative counselling to renal transplant

patients etc.

- ▶ Nutritional assessment includes anthropometric, biochemical, clinical and dietary assessment. We use the Subjective Global Assessment (SGA) tool for the same.
- ▶ Food Service management of Transplant patients and patient on enteral nutrition support.
- ▶ Monitoring Food & Beverages department in providing therapeutic diets to patients.
- ▶ Extension and training programmes for post graduate or undergraduate students of dietetics, under the supervision of department head.
- ▶ Conducting extra-curricular activities and awareness programmes within the hospital and in communities.

Our recent achievements:

- ▶ First hospital in north Kerala to have an established continuous feeding practice in critical care units.
- ▶ Conducted CME on critical care nutrition "NUTRICON 2022" in collaboration with Department of critical care medicine on 30th October 2022.
- ▶ Numbered one in conducting workshop on Indirect Calorimetry in the State.
- ▶ Conducted various awareness programmes like meal plating techniques, skit, Zumba sessions to public in connection with "World Diabetes Day" in collaboration with Iqraa academy and JDT school of nursing.

Quality, the Prime Concern



National Accreditation Board for Hospitals & Healthcare Providers (NABH) operates an accreditation programme for healthcare organisations. Our

hospital has been certified as NABH fully accredited from 23rd July 2022.

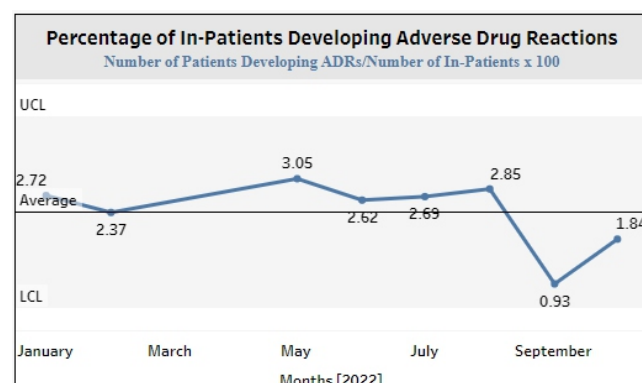
Key Performance Indicators, also known as KPIs, help in measuring and evaluating the effectiveness of solutions, functions and processes in your business.

Key performance indicator:

1. Percentage of in-patients developing adverse drug reaction(s).

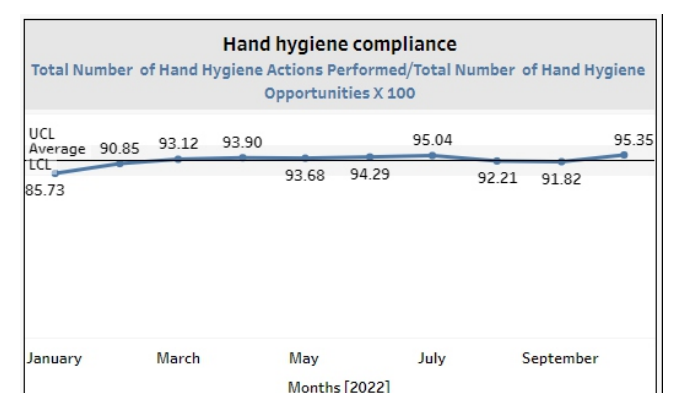
Adverse Drug Reaction is a response to a drug which is noxious and unintended and which occurs at doses normally used in man for prophylaxis,

diagnosis, or therapy of disease or for the modification of physiologic function. Our organization have a mechanism in place to ensure that all adverse drug reactions are captured and reported.



2. Compliance to Hand Hygiene practice.

Compliance to Hand Hygiene include observation which involves directly watching and recording the hand hygiene behavior of health care workers and the physical environment. WHO hand hygiene monitoring tool is used as reference.

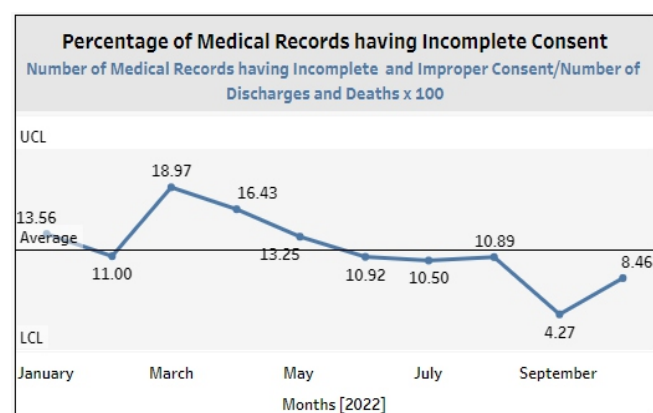


3. Percentage of medical records having Incomplete and/or Improper consent

Healthcare provider has a duty to inform his/her patient about the procedure, its potential risks and benefits, alternative procedure or treatment with their risks and benefits so as to enable the patient to take an informed decision of his/her healthcare.

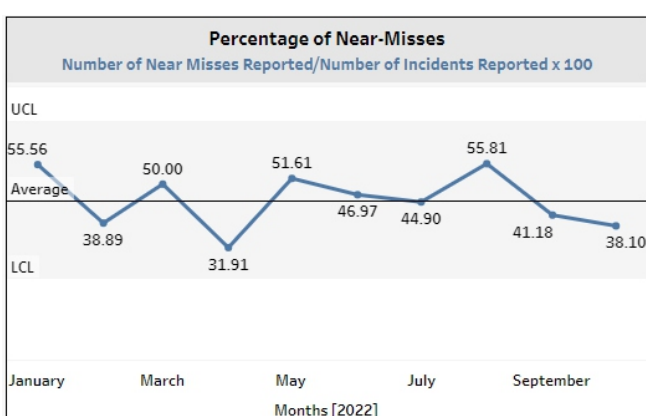
If any of the essential element/requirement of consent is missing it shall be considered as incomplete. If any consent obtained is invalid/void (consent obtained from wrong

person/consent obtained by wrong person etc.) it is considered improper.



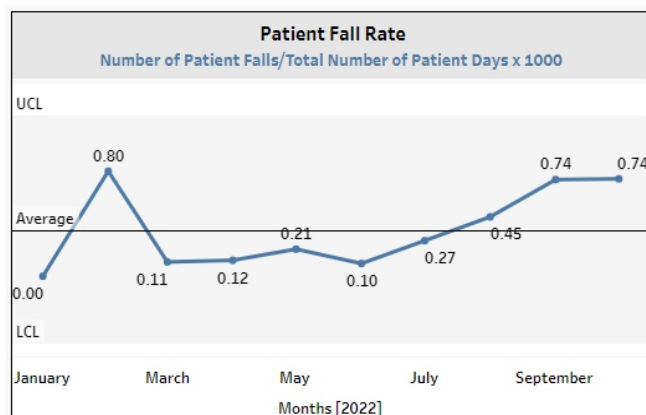
4. Percentage of Transfusion Reactions.

Any adverse reaction to the transfusion of blood or blood components shall be considered as transfusion reaction. It may range from a mild allergic reaction (including chills/rigors) to life threatening complications like TRALI and Graft-Versus-Host Disease.



5. Incidence of Patient falls

Fall is an event that results in a person coming to rest inadvertently on the ground or floor or other lower level. All types of falls are included whether they result from physiological reasons (fainting) or environmental reasons. Assisted falls (when another person attempts to minimize the impact of fall by assisting patient's descent to floor) are included.

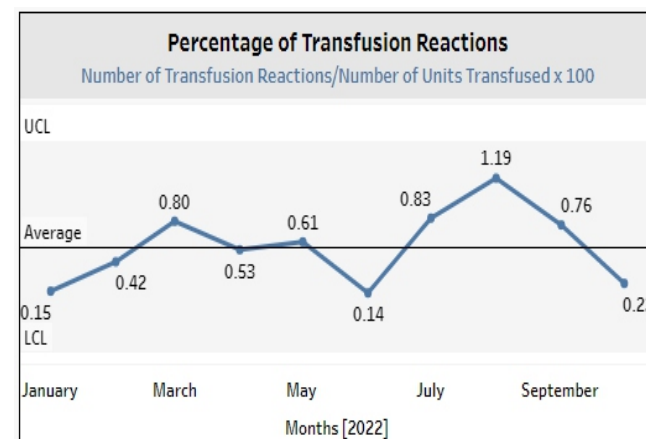


6. Percentage of Near Miss Events

A near miss is an unplanned event that did not result in injury, illness or damage- but had the potential to do so. These are the errors that did not result in patient harm, but could have, can be categorized as near misses.

A key to any near miss report is the 'lesson learned'. Near miss reporters

can describe what they observed of the beginning of the event, and the factors that prevented loss from occurring



CENTRES OF EXCELLENCE

- ANAESTHESIOLOGY
- CARDIOLOGY
- CHILD DEVELOPMENT CLINIC
- CLINICAL PSYCHOLOGY
- CRITICAL CARE MEDICINE
- DENTAL AND MAXILLO SURGERY
- DERMATOLOGY & COSMETOLOGY
- DIABETOLOGY & ENDOCRINOLOGY
- EMERGENCY MEDICINE
- ENT & HEAD AND NECK SURGERY
- FAMILY MEIDCINE
- FERTILITY CENTRE
- GASTROENTEROLOGY
- GASTROINTESTINAL SURGERY
- GENERAL MEDICINE
- GENERAL SURGERY
- OBSTETRICS & GYNAECOLOGY
- HAEMATOLOGY
- MEDICAL GENETICS
- MEDICAL ONCOLOGY
- MICROBIOLOGY
- NEONATOLOGY
- NEPHROLOGY
- NEUROLOGY
- NEUROSURGERY
- ORTHOPAEDICS & TRAUMATOLOGY
- PAEDIATRIC SURGERY
- PAEDIATRICS
- PATHOLOGY
- PHYSICAL MEDICINE & REHABILITATION
- PLASTIC & RECONSTRUCTIVE SURGERY
- PSYCHIATRY AND DE-ADDICTION
- PULMONOLOGY & RESPIRATORY MEDICINE
- RADIOLOGY
- RHEUMATOLOGY
- SPINE SURGERY
- TRANSFUSION MEDICINE
- UROLOGY



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