5. Bases for Calculation of Hospital Volume

(1) Population

1)	Objected Population					
•	a.	MOH data 35,000				
	b1.	Population of Jericho District without Refugees (PRC data)				
		- Year 1992 25,957				
		- Year 2002 37,118				
		- Year 1997 (calculated proportionally) 31,538				
	b2.	Population of Refugees Camp in Jericho District (PRC data)				
		- Year 1994 4,799				
	b1 +	+ b2 = 36,335				
2)	Futi	ure Expectation				
	a.	Pre-occupied Population of Jericho District (MOH data) 100,000				
	b1.	Refugees out of Palestine (JICA data)				
		- Lebanon				
		- Syria 314,039				
		- Jordan 1,072,561				
		Total				
	b2.	Expected Population of Jericho District with returned refugees (PRC data)				
		in the year 2002 (calculated proportionally)				
		- $37,118 + 1,714,776 \times 25,957 \div 2,238,987 = 56,998 \dots 50,000$ - 2)				
Nur	nber	of Beds				
	٠.					
a.	Exis	sting Jericho Hospital 50				
b.	Bed	ds / Population (1,000)				
	\	NHO recommendation 2 Beds / 1,000				
		Objected Population 35,000 × 2/1,000 70				
.*		Future Expectation 50,000 × 2/1,000				

		 WHO acceptable number on process 1.5 Beds / 1,000 	
		Objected Population 35,000 × 1.5/1,000 <u>53</u>	b)
		Future Expectation 50,000 × 1.5/1,000	
	c.	New Jericho Hospital will be an only Hospital in the District.	
(3)	Nur	umber of Out Patients	
	a.		ents
	b.	Number of Out Patients of the existing Jericho Hospital (1994)	
		- General Surgery 350	
		- Obstetrics / Gynaecology 100	
		- Pediatrics	
		- Orthopedics 240	
		- Physiotherapy 240	
		- General Internal Medicine 150	
		Total	
		Average49 / day	
	c.	Number of Emergency Patients of the existing Jericho Hospital (1994)	
		- General Surgery 900 - 1,330	
		- Orthopedics 900 - 1,420	
		Total 2,750 / month	
		Average 92 / day	
	d.	. Future Expectation	
		- Rate of increase in population without refugees from the year 1994 to 1997	
		(PRC data)	
		31,538 ÷ 28,189 = 1.12	
		- Rate of increase in patients is <u>1.2</u> after considering returned refugees	
			- d1)
			- d2)
		- Expected number of chiefgency rations 110 / day	U # j

	a.	Number of Beds in Obstetrics						
		(Objected Population) × (Birth Rate) × (Average of Hospitalized Days) × 100						
		1,000 × 365 × Effective Ra						
		$= \frac{36,000 \times 45 \times 2.5 \times 10}{1,000 \times 365 \times 80\%}$	14					
	b.	70% of deliveries in the district will be do	one in PHC					
		Needed Beds in the Hospital 14 × 30%	<u>5</u>	- b)				
	c	5 (average number of delivery / day) \times 0.8	$3 \div 2.5 = 1.6$					
		- Number of Delivery Table	<u>1</u>	- c1)				
		- Number of Labor Beds	<u>2</u>	- c2)				
	d.	Number of Operations	•					
		- 95 / month						
		- 22.8/bed-year (10-13/bed-year in Sh	ifa Hospital)					
	e.	Number of Operation Theaters						
		(Number of Operations (Number of Operations) × 50 =	weeks × (Work Day / Week)					
(5)	Priv	2.5 × 50 × 5vate Room	<u>2</u>	- e)				
	a.	Purpose						
		- Recover after operation						
		- Serious illness						
		- Infection case						
	b.	Number of Rooms						
		- for HCU	male and female 2					
		- for serious illness and infection case	male and female 2					
		- for infant	2					
		Total	<u>6</u>	- b)				
	С.	Private room can be used as 2 Beds room	in case of emergency.					

(4) Number of Operations and Deliveries

6 Cost Estimation Borne by Palestinian Authority

6. Cost Estimation Borne by Palestinian Authority

(1) Estimated Cost

a)	Removal of building obstacles from the site	None
b)	Cost of ordinary furniture and fittings	None
c)	Transfer of existing equipment	20,000 US\$
	Total	20,000 US\$

(2) Other Cost

In addition to the above, the Palestinian Authority will be required to pay the following expenses.

- a) Bank commission (approximately 0.1% of amount listed in E/N)
- b) Import Tax (based on CIF prices)

7 Estimate of Operation and Maintenance Cost

7 Estimate of Operation and Maintenance Cost

A. Personnel Cost

Standard wages and allowances data for a public hospital supplied by the Palestinian Authority are used to estimate the personnel cost which is adequate to secure capable staff members as envisaged by the personnel plan.

1,100US\$ × 12months ×10persons= 132,000US\$ a) Doctor 500US\$ × 12months ×30persons= 180,000US\$ b) Nurse 57,600US\$ Technician 600US\$ × 12months × 8persons= c) 180,000US\$ 500US\$ × 12months ×30persons= d) Administrator 78persons = 549,600US\$/year -A) Total

B. Consumables Cost

The cost of consumables and medical supplies may substantially change depending on the level of activities. The estimate is based on such data as annual medical supplies procurement budget provided by the Palestinian side and the list of standard consumables of the equipment to be provided under the Project.

① Medical Supplies

Annual budget : $13,000,000US\$ \div 2,472beds = 5,258US\$/bed = 5,250US\$/bed$

 $5,250US\$/bed \times 50bed = 262,500US\$$ - @

② Consumables

X-ray films, contrast medium, developing solution, various reagents and recording

paper, etc. : <u>34,000US\$/year</u> - 6

③ Hospital Meals

 $2US\$/day \times 365day \times 50bed \times 0.8 =$ $29,200US\$/year - \bigcirc$

Total ② + ⑤ + ⓒ 325,700US\$/year - B)

C. Operation Cost

The annual operation cost is estimated based on the assumed consumption rates of water, electricity, gas and telephones.

① Water Bill

(Annual Consumption)

General Use : $50 \text{bed} \times 1,500 \ell/\text{bed-day} \times 365 \text{day/year} = 27,375 \text{m}^3/\text{year}$

- Cooling Water: $(2,040\ell/\min \times 0.015 \times 60\min/h \times 12h/day + 750\ell/\min \times 0.015)$

 \times 60min/h \times 24h/day) \times 300day/year \times 0.75=8,602m³/year

 $27,375 \text{ m}^3/\text{year} + 8,602 \text{ m}^3/\text{year} = 35,977 \text{ m}^3/\text{year} = 36,000 \text{ m}^3/\text{year}$

(Annual Cost)

Total

- Basic Charge : 500US\$/month×12month=6,000US\$

- Unit Charge : $0.17US\$/m^3 \times 36,000m^3 = 6,120US\$$

Total : <u>12,120US</u>\$ - @

② Electricity Bill

(Daily Consumption)

The level of contracted electricity supply is assumed to be 180KW-200KW(400W/m²-50W/m²). Assuming that the above figure is the peak level, the daily electricity consumption is calculated below based on the average load fluctuation.

40KW	×	5hrs	=-	200KWh	(00:00-05:00)
70KW	×	4hrs	==	280KWh	(05:00-09:00)
130KW	×	3hrs	<u></u>	390KWh	(09:00-12:00)
150 KW	×	4hrs	==	600KWh	(12:00-16:00)
110KW	×	2hrs	==	220KWh	(16:00-18:00)
60KW	×	2hrs	=	120KWh	(18:00-20:00)
50KW	×	4hrs	=	200KWh	(20:00-24:00)
				•	

(Annual Consumption)

Average:

Given the climatic conditions of the project site, the electricity consumption level is believed to be constant throughout the year.

2,010Kwh/day $\times 365$ day/year = 733,650Kwh/year = 740,000Kwh/year

2,010KWh / day

(Annual Cost)

Basic Charge

 $2,300US\$/month \times 12months = 27,600US\$$

Unit Charge

 $0.13US$/Kwh \times 740,000Kwh = 96,200US$$

Total

123,800US\$

- (b)

(3) Gas Bill

(Annual Consumption)

Assuming an LPG consumption rate of gas ranges of 60,000 Kcal/h, the annual LPG consumption is calculated below.

60,000Kcal/h \times 3h/day \times 365day/year \times 0,8 ÷ 15,000Kcal/kg=3,504kg/year

=3,500kg/year

(Annual Cost)

 $0.35US$/kg \times 3,500kg/year = 1,225US$/year$

- ©

(4) Telephone Bill

(Annual Talking Time)

A hospital with the size of the new Jericho Hospital is usually expected to have 14 joining telephone lines, 5 joining lines are believed to be sufficient in view of the fact that no direct extensions to the ward will be installed. According to the calculation table compiled by the Japan Telephone Industry Association, the total talking time per hour for 5 lines is calculated as follows;

87.48HCS (hundred call seconds) ×100seconds = 8,748seconds

Annual Talking Time : $8,748/360 \times 24h \times 365 \text{day} = 21,286h/\text{year} = 22,000h/\text{year}$

Assuming that the share of outgoing calls is 40%, the talking time of outgoing calls will be 8,800h/year.

(Annual Cost)

Basic Charge: 1,200US\$/month×12moths=14,400US\$

Unit Charge

 $4.5US$/h \times 8,800hrs/year = 39,600US$$

54,000US\$/year

(5) Fuel Oil Bill

(Annual Consumption)

- Absorption Refrigerator: $270 \text{kg/h} \times 2 \text{unit} \times 538 \text{Kcal/kg} \times 12 \text{h/day} \times 0.5$

 \times 25day/month \times 12month \div 10,600Kcal/ ℓ = 49,333 ℓ /year

Steam Sterilizer : 50kg/h×1unit×

: $50 \text{kg/h} \times 1 \text{unit} \times 538 \text{Kcal/kg} \times 4 \text{h/day} \times 25 \text{day/month}$

 $\times 12$ month ÷ 10,600Kcal/ $\ell = 3,045\ell$ /year

- Hot Water Supply

: 220ℓ /person day \times 50person = 11,000 ℓ /day

Average temperature: 20°C

Fuel consumption: 11,000 l/day × (60-20) × 300 day/year

+10,600Kcal/ $\ell = 12,452\ell/y$ ear

Solar system contribution rate: 50%

 $12,452\ell/\text{year} \times 0.5 = 6,226\ell/\text{year}$

Total

 $49,333\ell/year + 3,045\ell/year + 6,226\ell/year = 58,604\ell/year$

Assuming a boiler thermal efficiency of 0.7,

 $58,604\ell/\text{year} \div 0.7 = 83,720\ell/\text{year} = 83,700\ell/\text{year}$

(Annual Cost)

 $0.3US$/\ell \times 83,700\ell/year =$

25.110US\$

- (e)

216,255US\$

- 1)

2) Maintenance Cost

(1) Building Maintenance Cost

The actual building maintenance cost significantly varies from year to year while generally increasing with the passing of time. Here, the average annual repair cost over a span of 30 years is assumed to be 1.2US\$/m² and is used to estimate the building maintenance cost.

$$1.2US\$/m^2 \times 4,383m^2 = 5,259US\$ = 5,250US\$/year$$

_ (a)

② Building Services Maintenance Cost

The building services maintenance cost remains low in the first 5 years and begins to increase thereafter due to the need to replace parts or equipment. Here, it is assumed

that the average annual repair cost over a span of 10 years equivalent to approximately 1.5% of the total building services equipment cost, i.e. approximately 1,550,000US\$).

$$1,550,000US$ \times 1.5\% = 23,250US$/year$$

- (b)

Within the (b), cost for fluorescent lump is listed below.

*	0 17	Life Span	Lighting Hours		Replacement	Unit Price	IIC di
Lump	Quantity	(h)	h/day	h/year	/year (year)	(US\$)	US\$/year
FL 40W	802	12,000	12	4,380	1/3	4	1,070
FL 20W	46	8,500	12	4,380	1/2	2.8	65
FL 15W	2	6,000	12	4,380	1/1.5	2	3
FL 10W	21	6,000	24	8,760	1/0.7	2	60
FDL 13W	113	6,000	12	4,380	1/1.5	7.7	580
FDL 18W	126	6,000	12	4,380	1/1.5	8.4	705
IL 60W	7	2,000	12	4,380	2/1	0.9	13
IL 20W	4	2,000	12	4,380	2/1	0.9	7
ミニハロ 50W	56	2,000	12	4,380	2/1	9.8	1,100
HF 200W	10	12,000	12	4,380	1/3	26	87

Total Cost 3,690 US\$/year

(3) Equipment Maintenance Cost

The equipment maintenance cost remains low for the first couple of years and begins to gradually increase thereafter. Here, following the typical example in Japan, the annual equipment maintenance cost is assumed to be 1.5% of the equipment cost for the first 5 years and 4% for the next 5 years.

40% of the equipment is requiring regular maintenance work.

First 5 years

: 12,300US\$/year

- ©

Next 5 years

32,800US\$

Total

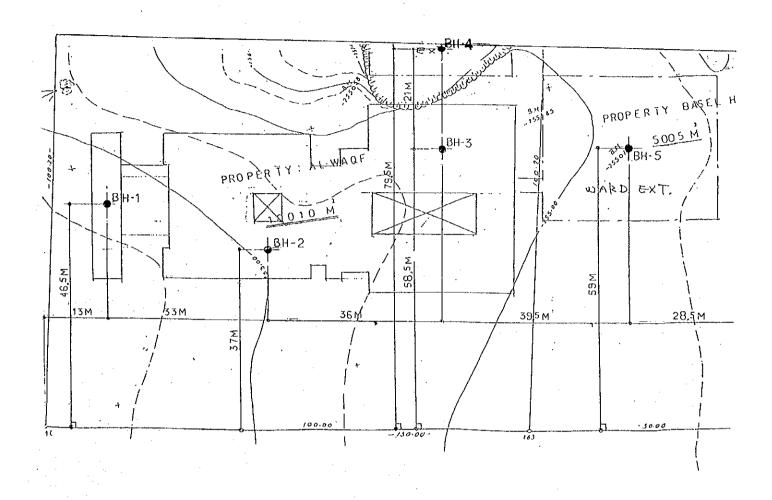
: @ + @ + @ = 40,800US\$/year

- 2)

Total Operation Cost: 1)+2)=257,055US\$/year

- C)

8 Site Information



BH-1

Job number:

65095

Client:

KUMI SEKKEL CO., LTD.

Co-ords (x,y):

20013.00,30046.50

G.W. Table [m]:

0.00

Date started: Total depth (m): 27.6.95

Supervised by:

25.00

DR. WLADIMIR TROSTANOVSKY

Type of sampler:

PLYETHELIN BAGS

Remarks:

Hard chalk layer appear at a

depth of 25.00 m

Project name: Site location:

NEW JERICHO HOSPITAL

AKABAT JABER CAMP

Vertical scale:

1:200

Elevation [m]:

-252.40

Date:

20.7.95

Date finished:

02.7.95

Checked by: Logged by:

ENG BASIM HAZZAN

NAZAR KHOURY

Type of boring:

AUGERING

Page 1 Sieving Depth FIELD TESTS Color LAB TESTS DESCRIPTION a У [m] S m m C b S 0 W. L.PL (%) (%)100 LO 655 . 複志. 0.00 7777 DRY LOES/SILT White 2.00 -CI ow. M-4.00 ed-LOES -256,40 ium 6,00 -258.40 00.8 Yellow-M-WET MARE 10.00 Green led--262.40 CH ium 12,00 High 14.00 -266,40 16.00 -268.40 MARL REL 18.00 Thin-wall tube Recovery. Odor SPT (Blows/0.3m) Atterberg limits Cased length Split spoon Rock core 과 - Estetics ▼ - Swedish Fall Cone Sieve analysis Vane Shear [KPa] □ - Originality 25.00 Dry Density at 10.00 m depth is 1795 kg/cub m Specific gravity (Gs) at 8.0 m is 2.81

BH-2

Job number:

65095

Client:

Co-ords (x,y):

KUMI SEKKEI CO.,LTD. 20046.00,30037.00

G.W. Table [m]:

0.00

Date started:

27.6.95

Total depth [m]:

25.00

Supervised by:

DR. WLADIMIR

TROSTANOVSKY

Type of sampler: Remarks:

PLYETHELIN BAGS Hard chalk layer appear at a

denth of 25.00 m

Project name:

NEW JERICHO HOSTILAL

Site location:

AKABAT JABER CAMP

Vertical scale: Elevation [m]: 1:200

Date:

-253.20 20.7.95

Date finished:

02.7.95

Checked by: Logged by:

ENG.BASIM HAZZAN

NAZAR KHOURY

Type of boring:

•			depth of 25.00 m									
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Job number:

65095

Client:

KUMI SEKKEI CO.,LTD. 20082.00,30058.50

Co-ords (x,y): G.W. Table [m]:

0.00

Date started:

27.6.95 25.00

Total depth [m]: Supervised by:

DR. WLADIMIR

TROSTANOVSKY

Type of sampler:

PLYETHELIN BAGS

Remarks:

Hard chalk layer appear at a

depth of 23.00 m

Project name:

NEW JERICHO HOSPITAL

Site location:

AKABAT JABER CAMP

Vertical scale: Elevation [m]: 1:200 -254.35

Date:

20.7.95

Date finished:

02.7.95

Checked by:

ENG.BASIM HAZZAN

Logged by:

NAZAR KHOURY

Type of boring:

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BH-4

Job number:

65095

Client:

KUMI SEKKEI CO.,LTD.

Co-ords (x,y):

20082.00,30079.50

G.W. Table [m]: Date started:

0.00

Total depth [m]:

27.6.95 17.00

Supervised by:

DR. WLADIMIR

TROSTANOVSKY

Type of sampler: Remarks:

POLYETHELYN BAGS

Hard chalk layer appear at a depth of 12.00 m

Project name: Site location:

NEW JERICHO HOSPITAL AKABAT JABER CAMP

Vertical scale:

1:200

Elevation [m]:

-255.06 20.7.95

Date:

Date finished: Checked by:

02.7.95

Logged by:

ENG.BASIM HAZZAN

NAZAR KHOURY

Type of boring:

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BH-5

Job number:

65095

Client:

KUMI SEKKEI CO.,LTD.

Co-ords (x,y):

20121.50,30059.00

G.W. Table [m]: Date started:

0.00 27.6.95

Total depth (m):

25.00

Supervised by:

DR. WLADIMIR

er:

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POLYETHELYN BAGS

Type of sampler: Remarks:

Hard chalk layer appear at a

depth of 25.00 m

Project name:

NEW JERICHO HOSPITAL

Site location:

AKABAT JABER CAMP

Vertical scale: Elevation [m]: 1:200 -255.01

Date:

20.7.95

Date finished:

02.7.95

Checked by: Logged by: ENG.BASIM HAZZAN

NAZAR KHOURY

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9 Possessed Equipment of Existing Jericho Hospital

# 9 Possessed Equipment of Existing Jericho Hospital

		Со	ndi	tion	1		gin	to be o II.	
Name of Equipment	O'ty (Existing)	роод	Usable	Reparable	Unusable	Duration	Country of Origin	Q'ty of Equip. to transfered from existing Jericho F	Remarks
(Out Patient Dept.)									
Infusion Pump	10	10				New	Japan	7	Nakamura Medical FP-955
Portable Patient Monitor	1	1				N	Japan	①	Nihon Kouden OEC-6102
Electric Suction Unit	1	. 1				N	Japan	1	Asahi Nedical 103
Examination Bed for Endoscope	1	1				N	Japan	1	Kakinuma K-1020A
Diagnostic Laparoscope	1	1				N	Japan	1	Olympus A5259 etc.
Diagnostic Endoscope Set	1	1				N	Japan	①	Olympus GIF-XQ etc.
Cardiac Respiratory Monitor for Infant	3	33				N	USA	① & Tert.②	Air Shields Vickers V1-S
Infant Ventilator	1	1				N	Japan	①·	Acoma Nedical ICY-60
ICU Incubator	1	1				N	USA	Tertiary	Air Shields Vickers C100QT
Syringe Pump	8	8				N	Japan	<b>④</b>	Nakamura Medical SP-60
Ultrasonic Nebulizer	2	2				N	Japan	<b>①</b>	Nakamura Medical U-100
Pediatric Laryngofiberscope	2	2				N	Japan	<b>Ø</b>	Olympus ENF-L3
Electric Suction Unit	2	2				6	Germany	_	ESCHNANN
ECG Unit	1	1				7	Germany	-	MENNEN
Ventilator	1				1	12	USA	-	Bennet
Defibrillator	2	2				2	Germany	-	MENNEN
Oxygen Meter	1	1				1	USA	-	BCI
(OG Dept.)									
Fetal Heart Detector	1	1				·N	Japan	①	Toitsu MT-430
Gyn. Surgical Instruments Set	2	2				N	Јарал	1	Nakamura Medical N-4820
Anesthesia Apparatus	2	2				N	Japan	<b>①</b>	Kimura Medical FANCY-80M
Infant Care Unit	2	2	Ī .			N	Japan		Nakamura Medical NIW-3500
Maternity Ultrasound Scanner	1	1				N	USA	-	GE RT-X200
Medical Refrigerator	.1	1				N	Japan	-	Kayagaki Medical ER-100N
ECG	1				1	12	Germany	-	MANNEN
Infusion Pump	1				1	10	USA	_	EASYLIFE
Ultrasound Scanner	1	<u> </u>	1			9	Japan	_	Aroka Nedical
Fetal Monitor	1	1				5	USA		CORONETRIC
Fetal Heart Monitor	1	1				7	USA		ECHOSOUND
Suction Unit	1			1		10	Germany		DEVIBISS
Delivery Bed	2	2				N.	Japan	_	Nakamura Medical GD-2000
Delivery Instrument Set	4	4				N	Japan	2	Nakamura Medical N-4840
Vacuum Extractor	1	1				N	Japan		Nakamura Medical GT-200
Vacuum Extractor	1		1			10	Germany		VACUKAT
Blood Pressure Monitor	1	1				N	Japan	①	Colin BP-8800
Suction Unit	3	3				N	Japan	<b>②</b>	Mizuho Medical MSP-207M

	Con	dit	ion			gin	to be	
Name of Equipment	Cood	Usable	Reparable	Unusable	Duration	Country of Origin	Q'ty of Equip. to transfered from existing Jericho	Remarks
Infant Incubator, STD type 2	2			-	N	Japan	<b>②</b>	Nakamura Medical H-1000D
Ultrasonic Nebulizer 1	1				N	Japan	<b>①</b>	Asahi Medical 107
Phototherapy Machine 2	2				N	Japan	<b>①</b>	Nakamura Medical PT-1600
Apnea Alarm 1	1				N	Japan	<b>D</b>	Nakamura Medical EA-1200
Incubator 1		1			5	USA		AIR-SHIELDS
(Labolatory)								
Biological Microscope 2	2				N	Japan	①	Nikon LABOPHOT-2
Contrast Microscope 1	1				N	Japan	0	Nikon LABOPHOT-2PH
Hematocrit Centrifuge, 12,000rpm 1	1				N	Japan	① .	Kubota 3110
Distiller 1	1				N	Japan	1	Advantic Toyo GS-500
RO Water Pulifier 1	1	.			N	Japan	① .	Millipore Japan M-RX12
Autoclave 1	1				N	Japan	Œ.	Asahi Medical 320-A
Centrifuge, 6000rpm 2	2				N	Japan	2	Kubota 5100
UV/VIS Spectrophotometer 1	1				N	Japan	0	Hitachi U-1100
Blood Gas Analizer 1	1				N	USA	0	AYL AYL-995HB
Electrolyte Analizer 1	1				N	USA	<b>①</b>	AVL AVL-988-3
Electrophoresis Analyzer 1	1				N	Japan	0	Joko CTE-1000
Incubator 1	1				N	Japan	0	Kayagaki KFF-35PM
Nixer for Tube	1	-			N	Japan	<b>①</b>	Tietick BR-30LF
Blood Cell Counter 1	1				N	Japan	Tertiary	Sysmex F-820
Automatic Chemical Analyzer 1	1		-		N	USA	Tertiary	Chiba · Corning EXPRESS PLUS
Microplate Reader 1	1	:			N	Japan	① ·	Corona Elect, MTP-120
Centrifuge, 3000rpm 2		2		ļ	7	Germany		HERMLE Z-320
Biological Microscope 1		1			10	Japan	<u>-</u> .	Olympus CH-2
Spectrophotometer 1	1				7	Germany	-	LKB/NOVASPEL
Spectrophotometer 1		1			6	Sweden		PHARMASIA
Frame Photometer 1		1			7	USA	_	Corning 410C
Dilutor 1		1			7	USA		Corning 805
Medical Refrigerator 1	1				7	USA	-	Forma Sientific
(Blood Bank)								
Blood Unit Shaker 1	1		-		N	Japan	<b>①</b>	Titick BR-30LF
Blood Bag Sealer 1	1		-	1	N	Japan	0	Terumo ME-AC157
Blood Bank Refrigerator 1	1	<u> </u>		1	N	Japan	1	Katoman UB5000
Blood Plazma Freezer 1	1				N	Japan	0	Nihon Freezer SC-20
Donor Chair 1	1			1	N	Japan	0	Paramount KD-H23
(Radiology)			<u> </u>					
X-Ray Machine, Mobile Type 1	1		Ι	1	N	Japan	-	Acoma X-ray MBA-200
Buckey's Table 1	1			1	N	Japan	_	0obayashi
Ultrasound Scanner 1	1	<b></b>	<del> </del>	1	N	USA	0	GE RT-X200

		Со	ndi	tion			gin	to be	
Name of Equipment	Q'ty (Existing)	Good	Usable	Reparable	Unusable	Duration	Country of Origin	Q'ty of Equip. to transfered from existing Jericho	Remarks
Auto, Film Processor	1	1				N	Japan	-	Nishimoto S-90PLUS
(Operation Theater)									
Operation Table	2	2				N	Japan	2	Muranaka OL-202P
Shadowless Lump (Celing Type)	1	1				N	Japan		Yamada U63AF-60
Anesthesia Nachine	2	2				N	Japan	2	Acoma Medical KWA-1300F
Cardiac Monitor	2	2				N	Japan	①	Nihon Koden BSM-2101K
Defibrillator	2	2				N	Japan	<b>①</b>	Nihon Koden TEC-4150K
Diathermy	4	4				N	Japan	2	Olympus UES-10-220
Electric Suction Unit	1	1				N	Japan	0	Muzuho Medical MSP-205
Laoaroscope Apparatus Set	1	1				N	Japan	0	Mizuho Medical 09-225/226
Minor Surgical Instrument Set	10	10				N	Japan	6	Takasago Medical
Stretcher	4	4				N	Japan	3	Muranaka SR-650
Yentilator	2	2				N	Swiss	① & Tertiary	HAMILTON "VEOLAR"
Diathermy (Electric Surgery Unit)	1	1				10	USA		VELLEY Lab SSE-2L
Operation Table	2		2			7	Germany	_	SHNITZ
Anesthesia Nachine	2	2				4	USA	_	BOC International
Patient Monitor	1	1		·		3	Germany		MENNEN H-1000
(Physiotherapy)									
Shortwave Therapy Unit	1	1				N	Holland	①	Dimeq Brunssum C-419
Electric Muscle Stimulator	1	1				N	Japan	①	OG Phsio. EF-502
Massage Therapy	1	1				N	Japan	<b>D</b>	OG Phsio. CX-ST
Infrared Lamp	1	1				N	Japan	<b>①</b>	OG Phsio. EL-100
Ultrasound Therapy Unit	1	1				N	Japan	①	OG Phsio. ES-1
(Morgue)					<u> </u>				······································
Mortuary Refrigerator	1					7	Germany	_	SGNUTZ
(Pharmacy)		<u> </u>							
Medical Refrigerator	1	1				N	Japan	①	Katoman C-4009
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Palestinian National Authority Ministry of Health Technical office - Nablus Tel - 09-384775 - 384776 Fax - 09-384777

- Day care services are to be eliminated as there are no units in the Hospitals to handle such services.
- b-1- All costs incurred for surgical preparations should be redeemed in full from uninsured patients.
- One In-hospital day for expecting mothers in maternity ward 100 NIS for uninsured Patient also pays for all drugs use (Attached is a drug list).
- In-Patient days for tourists 3-2768 NIS Visitors of Palestinian Origin - who do not hold a West Bank I.D. card will be treated as a native Palestinian and when he / she use health services, he / she pays similar fees, However he / she is not eligible to participate in the health Insurance Plan.

4-	Treatment in the ICU	450 NIS
5-	One in-patient day in psychiatric hospital for non-residents	146 NIS
6-	One in-patient day in psychiatric hospital for tourists	658 NIS
7-	One in-patient day for kidney patients non-residents	951 NIS
8-	Each in-patient day for car accidents	960 NIS
0	Madical Danage	

Medical Reports

a- 1st report	Free
b- Each additional medical report for Insured persons	15 NIS
c- Each additional Medical report for uninsured	30 NIS
d- Medical report for car accidents	170 NIS
10- Copy of an entire medical file	500 NIS

This however is subject to an official letter of approval from the legal department of the ministry to the relevant department in the hospital allowing this copy.

11- Medications

a- Medications for insured persons 3 NIS B- Medications for uninsured Per cost

All prescription drugs from MOH facilities are issued to insured persons only. All prescription drugs for children under 3 is free.

12- X-ray	
a- Normal X-ray (each)	25 NIS
b- Radiology test with contrast material	100 NIS
c- Security Deposit for X-ray	50 NIS
d- Radiology report	Free
e- CT scan	400 NIS
f- Ultrasound	345 NIS
Contabound	
13- Laboratory test (For each test on the form)	25 NIS
14- Blood Bank	
a- 100 ML - Unit of Blood	50 NIS
b- 500 ML - Unit of Blood	50 NIS
c- Blood test	50 NIS
15- Ambulance	
a- Within the municipality	54 NIS
b- Outside the municipality per KM	2 NIS
Rates for ambulance services for insured and un-insu	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s
16- Vaccination	
a- For travel a broad (insured and un-insured)	100 NIS
b- For Naj (insured and un-insured)	20 NIS
17- Cancer	
a- Chemotherapy	Per cost
18- Physical therapy	
a- Physical Therapy treatment	
19- E-E-G-	50 NIS
	and the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second o
20- Clinic visit	the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the co
20- Clinic visit  a- Dr. treatment in outpatient department	10 NIS

21-	Hospital visit				
	a- Treatment by Dr. in Hospital				20 NIS
	OP clinic				÷
	b- Treatment by nurse in Hospital	•		•	
	OP clinic			•	10 NIS
	c- ECG in Hospital OP clinic				30 NIS
	d- Treadmill test - ( OP )				150 NIS
	e- Echocardiography (OP)				150 NIS
	f- Respiratory function test (OP)		•		150 NIS
	g-Bronchoscopby (OP)				300 NIS
٠	h- Gastroscopy (OP)				300 NIS
	i- Colonoscopy ( OP )				600 NIS
	j- Laparroscopy (OP)				400 NIS
22-	Emergency room treatment				50 NIS
23-	Driving tests				
٠	a- 1st test				194 NIS
	b- 2nd test				194 NIS
	c- Review committee for drivers				294 NIS
	d- Drivers test in health clinics				100 NIS

### Free Health Services

- a- Treatment of contagious diseases and epidemics in accordance with the list of diseases as issued by the MOH.
- b- MCH clinics.
- c- All public health tests at the request of the MOH.
- d- All school tests by public school health.
- e- Oncology diagnosis.
- f- Children under 3.
- g- Army casualties.
- h- Emergency care for school children during school hours.
- i- Referral cases to medical committees from other government depts. for diagnosis.

i-	Health Insurance AS		
,	1- Voluntary health insurance premiums Ais-monthly	111 NI	S
	2- Students 18-21 Yr.	20 NI	S
	Students 21-30 Yr.	40 NI	S

- 3- All referral cases from Intifada casualty association.
  - a- Free medical treatment in health clinics No. medications, however the association should secure cost of drugs from outside sources.
  - b- For Hospitalizations, members must secure a written order from the referral section of the ministry.
    - Hospitalizations for newly insured's is effective 30 days from day of joining the health insurance plan.
    - Referrals to health facilities outside the governmental health facilities is effective 4 months from the date of issuance for all kinds of insurance.

Deputy Health Ministry
Dr. Husam Abdulhadi

# Circular Subject - Fees for health services

I am pleased to inform you that as of 18-2-95 fees for health services will be as follows

Hospitalizations	<u>NIS</u>			
1- One day for uninsured if the healt	h insurance is not valid 300			
a- Minor operations	200			
b- Medium type operations	400			
c- Major surgeries	600			
e- Cataract extraction and infra ocular lens implant- for insured				
f- Cataract extraction and -intra	- ocular lens implant -for uninsured 900			

11 Monitoring Indicators for Medical Institute

# 11 Monitoring Indicators for Medical Institute

### 1. Basic Philosophy

- Whether or not there is basic philosophy.
- To what extent the basic philosophy has filtered into the hospital staffers.
- Conformity of the basic philosophy to the actual situation.

### 2. Conformity of the Facilities

- 2-1) Conformity of the hospital facilities to regional medical activities
  - To use patient statistics to determine the regional coverage of the medical services provided.
    - · No. of patients by residential area and by type of illness
  - Investigate the scale of hospital wards and the medical departments covered by medical institutions in the region.

### 3. Diagnosis/Treatment Functions

- 3-1) Medical Departments in which Diagnosis/Treatment is Provided.
  - a) Summary of activities (by month, for the past five years)
    - No. of physicians by specialty (by medical department)
    - No. of patient beds
    - Bed occupancy ratio
    - No. of inpatients (by medical department)
    - No. of outpatients (by medical department)
  - b) Quality of the activities
    - No. of Medical departments in which diagnosis and treatment is provided.
    - Special outpatient clinic
    - Emergency aid system
    - Whether or not the system of treatment by medical terms is adopted.
    - Whether or not conferences are held regularly.
    - Whether or not the hospital accepts interns.
    - Whether or not the hospital collaborates with other medical institutions.

#### 3-2) Nursing Department

- No. of nurses (by medical department)
- Ratio of registered nurses vs. practical nurses
- Nursing system
- Average night duty days per month (average)
- System for education/training
- Time study on the work hours of nurses
- Whether or not medical clerks are allocated.
- System for delivering goods and supplies

### 3-3) Pharmaceutical Department

- Whether or not guidance is given on the taking of medicine.
- Whether or not the patients' history of taking medicine can be traced.
- Whether or not the system of administering medicines to inpatients through a unified channel is adopted.
- Waiting time of outpatients (average)
- Inventory system
- Establishment of a standard optimum stock
- Number of medicine items available
- Whether or not the medicines readily available in patient wards undergo regular inspection. If you have any, please show the contents.

#### 3-4) Inspection Department

- No. of inspection items that can be carried out.
- No. of inspection specialists
- Whether or not the inspection systems are computerized. If they are computerized, please show the contents.
- Whether or not subcontractors are used.
- Whether or not the hospital carries out inspections commissioned by other hospitals. If so, please show the contents.

## 3-5) Radiology Department

- Contents and types of equipment
- No. of radiology specialists
- Conditions of protection measures

### 3-6) Meal Service Department

- No. of nutritionists
- Whether or not meals are adequately heated and served at adequate timings.
- How long is the menu cycle.
- How are the ingredients for meals preserved (place of storage, how many days' supply)

#### 3-7) Operation Department

- No. of operation rooms and their main usage
- Whether each operation room is used exclusively for a particular department, or is used on a shared basis
- No. of operations by operation methodology
- Securing of anesthetists
- Cleanliness of the operation rooms
- Whether or not the operation schedule is managed smoothly

## 3-8) Material and Equipment Department

- Range and volume of the activities (per day, per month)

Medical equipment and materials

Sterilization equipment and materials

Sanitary equipment and materials

General equipment and materials

- No. of staffers
- Type and quantity of equipment
- Degree and rang of cleanliness management
- Delivery method

### 3-9) Others

- Whether or not the hospital has rehabilitation facilities.
- Whether or not the hospital has a visiting nurses' room.
- Whether or not the hospital adopts countermeasures against nosocomial (in-hospital) infection (if yes, the specific measures adopted).
- Management of the patients' the medical histories

## 3-10) Conformity of the hospital facilities to regional medical activities

- No. of patients consulted per physician per day (for inpatients, and for outpatients)
- No. of medicines prepared Pharmaceutical Department staffer per day
- No. of inspections carried out per inspection specialist per day
- No. of radiological inspections carried out per radiology specialist per day
- No. of meals prepared per Meal Service Department staffer per day

#### 4. Balance of Accounts

- Income

Government subsidy

Income from pay beds

Income from advanced medical treatment

(Heart survey, X-ray diagnosis, etc.)

Income from high level services (ICU, paid-basis

rehabilitation care, etc.)

- Costs

Personnel costs

Equipment/material costs

- · For medicine
- · For medical equipment
- · For preparing meals

#### Expenses

- · Infrastructure (power and water supply)
- · Maintenance costs
- · Expendable supplies

### 5. Financial Data

- Balance Sheet

#### 6. Services Provided to Patients

- Whether or not amenities are provided for the hospital facilities
- Degree of patient satisfaction

## 7. Management and Maintenance

- Organization of the hospital
- Personnel Management
- System of maintenance

### 8. Workplace Environment

- Whether or not dormitories for staffers are provided.
- Whether or not day nurseries for staffers are provided.
- Whether or not welfare facilities are provided.
- Whether or not a system of lending uniforms to staffers is adopted.
- Whether or not regular health checkups are carried out on staffers.
- Working hours
- To confirm whether good communication is maintained between the management and the labor by focusing on the following two points:
  - · Whether or not the hospital has an in-house public relations journal.
  - · Whether or not there are activities hosted by the hospital

### 9. Facilities and Buildings

- Perception based on external appearance (confirm the image of the hospital by visually inspecting the damages and soils on the exteriors of the hospital facilities)
- Perception based on the appearance of interiors (confirm the image of the hospital by visually inspecting the damages and soils on the exteriors of the hospital facilities)
- Sense of cleanliness
- History of the building and facilities
- Structure
- The period of durability (Physical)
- Availability of vertical transport systems
- Air-conditioning systems
- Electrical systems
- Plumbing and sanitary systems
- Existing problems

#### 10. Machines and Devices

- Medical machines and devices (steam sterilizer, gas sterilizer, etc.)
- Future plans to renew the machines and devices.

