

Human allocation in the new NMCHC

Annex -2

section	WD	MA	MW	SN	PN	SL	PL	Ph	ot	total
1)Director	1									1
A. Administrative bureau		1								1
1)secretariat				5						5
2)personnel affair		1		1						2
3)general affair										
a. security/hygiene		1		1					7	9
b. cleaner									12	12*
c. laundry					7				1	8**
d. kitchen									3	3
e. driver									7	7
4)Engincer										
a. clctrician					1				2	3#
b. mechanic/plumber/water carpenter/plaster									2	2
B. Accounting bureau				2	1				6	9
C. Technical bureau		2		4	1					7
D. National program	6	1	1	5						13
E. Clinical division and F. Nursing division		*1								
1)OPD										
a. OB/GY/BS/Mothers' class	7	9	22		3					41
b. Neonatal follow up	1	§2		2						5
c. Vaccination(pediatric)	1			4						5
d. Dental					1				2	3
2)Delivery/labor	6	1	33							40
3)Maternity	13	2								15
a. east ward			17							17
b. west ward			17							17
4)Gynecology	7	2	17		1					27##
5)OT(Anesthesy)										
a. Operation room	1	3		15	3					22
b. ICU/recovery room	4			9	4					17
c. CSSD				1	6					7
6)Neonatal care										
a. Neonatal care unit	7	3		17						27
b. Sick baby in maternity	1	1								2
7)Paraclinic										
a. echo/EKG	2			2						4
b. radiology		1		3						4
c. laboratory				1	1	9		1	1	13
8)Pharmacy				4	1			3		8
TOTAL	57	31	107	76	30	9		4	43	357

* 1 person is a temporary worker.

**1 person is retired in official, but continues to work.

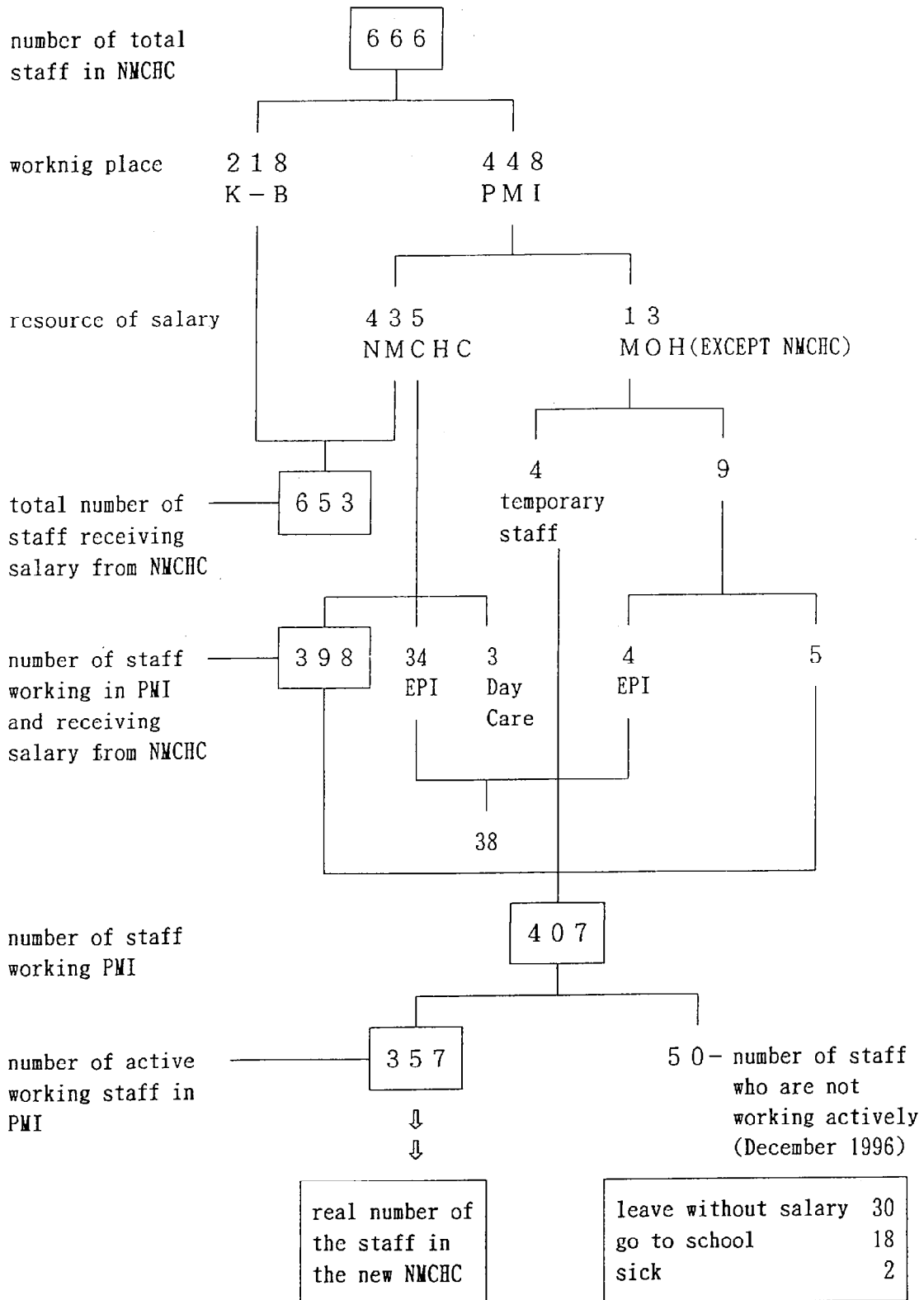
1 person will come from the MOH in January 1997.

##Chief doctor of gynecology is also working as a vice deirector of the NMCHC.

* This MA is working as a chief of nursing division.

§ 1 MA will retired in January 1997.

Human allocation and resource of salary in NMCHC



User fee system

Annex -4(a)

A. Activities and tarification

OPD	activity	cost
1)ANC(package)	routine check (BW, BP, UH, FHR) iron tablets vaccination mothers' class	1st visit: 4000R 2nd visit: 3000R 3rd visit: 2000R 4th visit: 1000R more than 5: no charge
2)Gy	depends on the diagnosis	⇒ see tarification
3)BS	depends on the clients' choice	⇒ see tarification
4)neonatal follow up (package)	growth monitoring development monitoring vaccination advice to the mother	2000R
5)vaccination	EPI program for infants TT for women reproductive age	1000R
6)dental	depends on the age of patient and diagnosis	⇒ see tarification
7)emergency	depends on the diagnosis	⇒ see tarification
8)para-clinic a. labo b. echo c. ECG c. X-ray	depends on the order of MD/MA only abdominal echo ECG check and report by MD depends on the size of film	⇒ see tarification] outpatient: 10,000R] inpatient : 5,000R ⇒ see tarification

TARIF POUR Examination
(EN Riel)

No	DESCRIPTION	PRIX
<u>I) EXAMEN DE GYNECO</u>		
1.	Examen decyto	4.000
2	Examen de gynéco	4.000
3	Crête de coq	50.000
4	Curetage provoqué 1mois	50.000
5	Avortement en cour 1mois	50.000
6	Cauterisation col	50.000
7	Périnographie	100.000
8	Kyste bothelin	50.000
9	Coupe polype de col	50.000
10	Colposcopie	50.000
<u>II) INJECTION</u>		
1	Un injection	1.000
<u>III) SERVICE DE PETITECHIRURGIE</u>		
1	Suture-5 points	6.000
2	Suture+5 points	10.000
3	Suture2 plans	25.000
4	Abces	25.000
5	Soin	2.000
<u>V) ESPACEMENT DE NAISSANCE</u>		
1	IUD	3.000
2	Pill	200
3	Depoprovera	1.000
4	Condom 12 pieces	500
<u>IV) DENTAL</u>		
1	Extraction normal(adulte)	5.000
2	Extraction Compliqué (adulte)	8.000
3	Extraction enfeant	4.000
4	Protese(couronne) 01piece	15.000
5	Obturation simple	5.000
6	Obturation+Pilpitomie (1Piece)	15.000
7	Detartrage+Polishage(1piece)	20.000
8	Orthodontique	50.000

PARACLINIQUE

No	DESCRIPTION	PRIX en RIEL
ⓄHEMATOLOGIE		
1	Hemogramm (Ht,Hb,Fl,GR,GB)	3.000,00
2	Ht	1.000,00
3	Hb	1.000,00
4	Plaquettes	2.000,00
5	V S (vitesse Sédimental)	1.000,00
6	Réticulocyte	2.000,00
7	TC ;TS	2.000,00
8	Test A B O	2.000,00
9	Hématozoaire	2.000,00
ⓄCHIMIE		
1	Albumine Sucre	3.000,00
2	Culot Urinaire	1.500,00
3	PH	1.000,00
4	Corp Cétonique (Ketone)	1.000,00
5	Taux Glycémie (Glucose dans le sang)	4.000,00
6	Taux Protéine total	3.000,00
7	Test Grossese	5.000,00
ⓄSEROLOGIE		
1	VDRL	4.000,00
2	Test Vidal	4.000,00
3	AG HBs	7.000,00
ⓄPARASITOLOGIE		
1	Selle KOP	3.000,00

RADIOLOGIE

No	DESCRIPTION	PRIX en RIEL
1.	Crane F/P (Ant.Post.et Lat.)	7.000,00
2.	Sinus ou Mastoïde	5.000,00
3.	Poumon ou Thorax	10.000,00
4.	Colonie C/D/L ou F/P	7.000,00
5.	Bras ou Avant Bras F/P	7.000,00
6.	Main ou Coude ou Pied F/P	7.000,00
7.	Epaule ou Ceinture Scapulaire	7.000,00
8.	Bassin ou A S P	10.000,00
9.	Transit Oesophagien	14.000,00
10.	Femur(cuisse) ou Jambe F/P	7.000,00
11.	Transit Oesophagien	14.000,00
12.	Transit Gastro-Duodenal(T.G.D)	20.000,00
13.	Lavement Baryté	45.000,00
14.	Urographie Intraveineuse (U.I.V)	45.000,00
15.	Hystérogaphie(Utérus)	52.000,00

in patients	activity	cost:8beds
maternity ward	cost for daily care before delivery post-delivery care within package days post-delivery care more than package days post-operation care procedure of removal of placenta for the patients from outside	\$4/day included in package \$4/day \$4/day \$20
delivery room (package)	normal delivery without episiotomy normal delivery with episiotomy breech delivery without episiotomy breech delivery with episiotomy abnormal delivery includes these activity • forceps • vacuum • induction of delivery by oxtocin inject. • fetal monitoring by cardiotocograph • attendance of delivery by pediatrician	3days: \$20 5days: \$40 3days: \$20 5days: \$40 5days: \$60 these pack days are postpartum
gynecology ward	daily care post-operation care procedure of abortion(less than 12 weeks)	\$4/day \$4/day \$20
operation theatre	big operation medium operation(local anesthesy)	\$120 \$60
recovery room	post-operation at least 24 hours	\$4/day
intensive care unit	intensive care for the severe cases	\$10/day
neonatal care unit	sick baby care(inborn) sick baby care(outborn)	no charge \$4/day

※If a patient admitted after 21:00 o'clock, the day is included in the following day. (Less than 3 hours is not counted as one day.)

Information about the user fee system in the new NMCHC

1) Objectives

To increase financial resources to improve the quality of health services

3) Methods

- ☞ All of the patients should register at the communication counter first.
- ☞ Patients should know the tariffication of each service
- ☞ Patients affordable to pay will pay according to the tariffication at the accounting bureau. Don't pay money to the medical staff directly.
- ☞ Patients who can't pay will go to the controller to receive the exemption.
- ☞ If the staff demand money directly to the patients, please inform to the controller.

If you have any comments or question about this matter, please don't hesitate to contact to the controller.

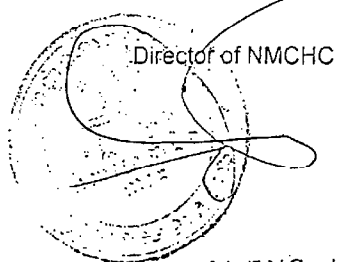
Thank you for your kind understanding and cooperation !!

Ministry OF HEALTH
NATIONAL MCH CENTRE

EXPENSE of BUDGET at 1996

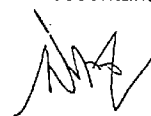
Cate gory	Chap ter	Arti cal	Para graf	Subpa ragraf	DESCRIPTION	Budget	Expended	Balance
1	10	2			Salary		283,197,330	
		3			Casal Staff		926,640	
2	11	1	1	2	Repaire and maintenance building	40,000,000	28,609,000	11,391,000
	11	1	2		Small equipment& repaire	80,000,000	12,511,668	67,488,332
	11	1	4		Printing&office supplies	30,000,000	22,176,350	7,823,650
	11	1	7	1	Repaire and maintenance transport	60,000,000	27,406,630	32,593,370
	11	1	7	2	Fuel& oil	55,271,700	34,046,289	21,225,411
	11	1	8	1	Reception for foreign delegation	500,000	1,024,000	-524,000
	11	1	8	2	Recaption for nationa delegation	500,000	646,500	-146,500
	11	1	10		Clothing & uniforms	33,000,000	31,112,000	1,888,000
	11	1	13		Publication of information for public	50,000,000	57,432,000	-7,432,000
	11	1	14	1	Drug & Alcohol		41,839,493	
	11	1	14	4	Patient food	142,000,000	15,374,000	126,626,000
	11	1	14	5	Oxygene	10,000,000	11,639,600	-1,639,600
	11	1	14	6	Cleaning	20,000,000	11,427,000	8,573,000
	11	1	14	7	Patient bedding&closing	10,000,000	7,500,000	2,500,000
	11	1	14	9	Cold chain (glass)	15,000,000	71,000,000	-56,000,000
	11	1	14	10	Funerail		500,000	
	11	1	9	1	National day& traditioal holiday		2,970,000	
	11	2	1	1	Transport costs		250,600	
	11	2	1	2	Accommodation		2,412,000	
	11	2	1	3	Cost of mission		1,615,000	
3	31	1	1	4	Deaths		1,159,980	
						546,271,700	666,776,080	214,366,663
						546,271,700	331,905,037	214,366,663

Director of NMCHC



DR. ENG HUOT

P.PENH,09 January 1997
Chief Accountant



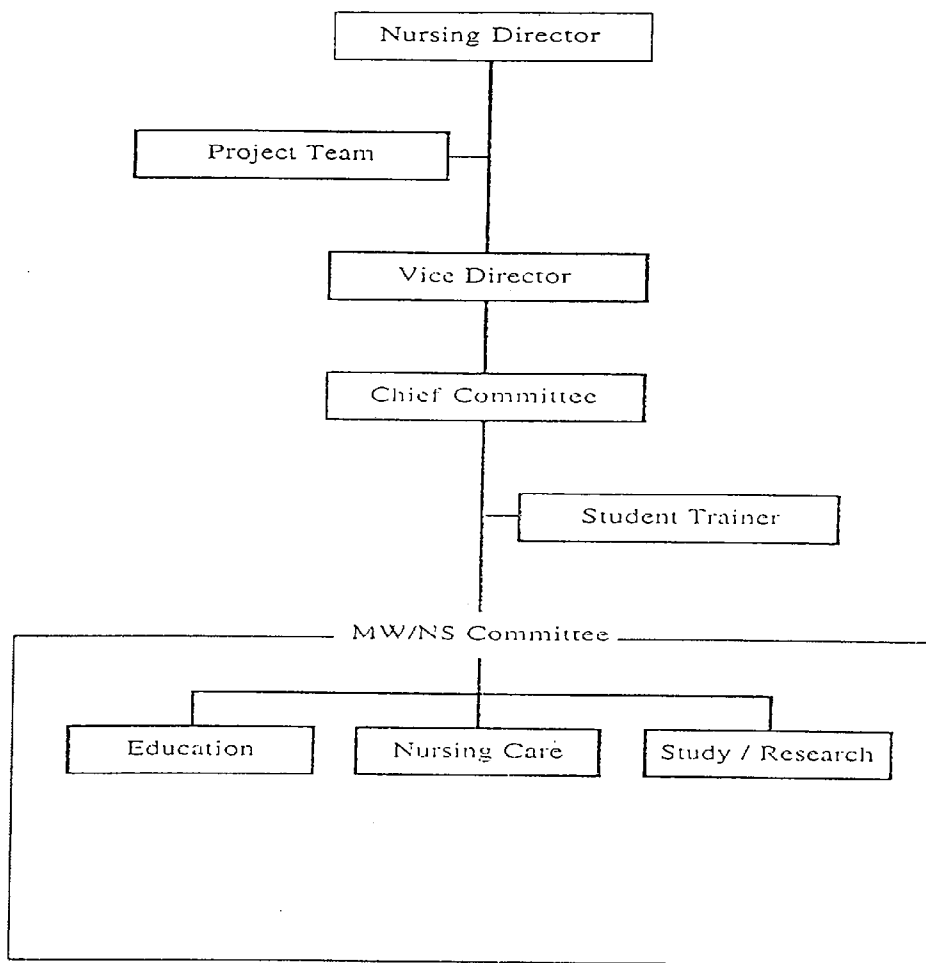
CHEA PENH

Input by JICA (Fiscal Year 1996)

	1996												1997			
	4	5	6	7	8	9	10	11	12	1	2	3	4			
1. Dispatch of Japanese Experts																
(1) Chief Advisor	95Apr.15~ Dr.Takako YAMADA															
(2) Coordinator	95Apr.15~ Mr.Tadashi MIYAZAKI															
(3) Midwife	95Aug.29~ Ms.Yoshiko KAWAI															
(4) Perinetal Nusing	95Nov.19~ Ms.Yasuyo KAWATA Apr.18															
(5) Maternal Nursing	Mar.24← Ms.Satomi NAITO															
(6) Pharmacy	96Oct.6← Ms.Naoko FUJITA															
(7) Clinical Laboratory	Apr.22←→Jun.20 Mr.Yasuo MORIKAWA															
(8) Hospital Management	Apr.23←→Jun.20 Mr.Takao SUGIMOTO															
(9) Maintenance of Equipment	Jan.25←→Feb.21 Mr.Katsuo TATENO															
(10) Health Education	Mar.3←→Apr.5 Dr.Naoshi KUJI Mar.3←→Apr.5 Dr.Hidechika AKASHI															
2. Counterpart Training in Japan																
(1) Obstetrics and Gynecology	Jul.16←→Aug.30 Dr.Sann Chan Soeung															
(2) Obstetric, Anesthesiology	Jul.16←→Nov.3 Dr.You Sophat															
(3) Midwife	Jul.16←→Sep.10 Ms.Deng Kheang															
(4) Neonatal Nursing	Jul.16←→Sep.10 Mr.Kroch Sary															
3. Provision of the Equipment for Technical Cooperation	☆															
4. Japanese Mission to Cambodia																

Changing organogram chart in Nursing division from 4 Division to 3 division .

THE ACTIVITY SYSTEM OF NURSING DIVISION



- _ Chief committee will function as management group .
- _ Student trainer is not approved yet by MOH but they will be able to start. .

NURSING DIVISION FUNCTIONAL ORGANOGRAM

Director

Nursing Division Director

1. To implement the national MCH policy
2. To manage the management in the ward
3. To grasp staff , to lead and to supervise
4. To Manage education , training for staff , midwife's student and nurse
5. To manage the patient's management and health education
6. To adjust to other division
7. To make the proposal to Motivation Punishment and the staff position changing.
8. Special direction from director of the national MCH and inform condition of nursing division to director

<p>Vice chief (Education)</p> <ol style="list-style-type: none"> 1. To make orientation of new staff 2. To manage education in service 3. To involve the national program training and TOT 4. To manage the nursing care study and research 5. To manage the education for prevention of medical accident 6. Special direction from nursing director 	<p>Vice Chief (Personnel)</p> <ol style="list-style-type: none"> 1. To manage working time 2. To adjust number of staff 3. To make the working regulation and working condition 4. To supervision condition of staff 5. To manage the welfare for staff 6. Special direction from nursing director 	<p>Vice Chief (Nursing clinical)</p> <ol style="list-style-type: none"> 1. To manage in the clinical nursing care. 2. To manage the safety to the patient 3. Responsible to management in service. 4. Responsible nursing system 5. To manage nursing of equipment and medical material. 6. Special direction from nursing director
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<p>Chief of OPD</p> <ol style="list-style-type: none"> 1. To manage in OPD 2. To manage the working time and adjustment 3. To manage the equipment allocation and medicine 4. To make the safety management in unit 5. To adjust other division 6. To manage service working and education to patient . 7. To manage the receptionist of patient , registration and patient's distribution 8. To manage in the emergency room and supervision 9. Special direction from nursing director 	<p>Chief of OT</p> <ol style="list-style-type: none"> 1. To manage in the OT room 2. To make operation program according to the plan 3. To grasp staff and OJI 4. To manage the equipment allocation and medicine 5. To manage the safety working and prevention of other accident 6. To manage the registration (in the operation book , making statistics , making report etc.) 7. To adjust other division 8. Special direction from nursing director 	<p>Chief of ICU(Recovery Room)</p> <ol style="list-style-type: none"> 1. To manage in the ICU 2. To grasp staff and OJI 3. To manage the working time 4. To manage the equipment allocation and medicine 5. To manage the safety working and prevention of other accident 6. To manage on the patient condition control and the patient condition record 7. To manage leader or supervision for the patient families , visitors 8. To adjust other division 9. Special direction from nursing director 	<p>Chief of ward (Maternity , Neonatal , Gynecological)</p> <ol style="list-style-type: none"> 1. To manage in the ward 2. To grasp staff and OJI 3. To do the health service and make the home care education to patient 4. To manage the working time 5. To manage the equipment allocation and medicine 6. To manage the safety working and to prevention of other accident 7. To manage leader or supervision for the patient families , visitors 8. To manage the nursing care education to the student 9. To adjust other division 10. Special direction from nursing director 	<p>Chief of Delivery Room</p> <ol style="list-style-type: none"> 1. To manage in the delivery room and in the labor room 2. To grasp staff and OJI 3. To manage working time 4. Safety management and to manage the nursing care 5. To do service and to make the education . 6. To manage the equipment allocation and medicine 7. To make the nursing care education to student 8. To make the delivery register 9. To adjust other division 10. Special direction from nursing director 	<p>Chief of CSSD</p> <ol style="list-style-type: none"> 1. To manage in the CSSD 2. To manage the safety for high pressure steam sterilize and to manage worker 3. To manage the working time 4. To manage , to improve operation material and treatment material 5. To manage the equipment supply plan and material plan (monthly plan and annual plan) 6. Quality control on working , sterilization and material 7. Making statistics 8. To adjust other division 9. Special direction from nursing director
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WORKS OF CHIEF

Public service regulations

- working time (check and leading)
- working table
- working plan

Nursing care management

- direction of nursing system
- to lead nursing care (plan,do,check)and case conference
- to check nursing record
- to lead and keep the nursing standards and manual
- management of patient bed (transfer,isolation)
- to keep safety environment of patients
- to evaluate quality of nursing care from patient's response and objective view
- information of patient condition to the next duty, nursing director

Education

- orientation to staff,trainee,students,worker
- to make education plan
- to promote education of staff (inservice,outside)
- education of patients
- to have conference and interview for trainee,student
- evaluation

Management of medicine,material,equipment

- to direct MW/Ns to give medicine properly
- to request proper amount of material
- to keep clean and quality

Safety management

- to prevent accident
- to prevent infection
- fire prevention

Participation of meeting,training

- as a member
- as a trainer

Information

- nursing director
- MD/MA
- others

Management of user fee

MIDWIVES TRAINING CURRICULUM
HEALTH CENTER LEVEL

AIMS:

- 1.To be able to detect the pregnant women with risk and their early referral
- 2.To emphasize the health promotion
- 3.To improve the skill of normal delivery

CONTENT:

Antenatal care

- 1.Introduction of antenatal care
- 2.How to use white card
- 3.Health education in each trimester
- 4.Nutrition
- 5.The growth of baby
- 6.Risk detection and referral
 - 1)Minor problems
 - 2)Major problems (bleeding, pregnancy induced hypertension, pre eclampsia, anaemia, infection)
- 7.Observation of ante natal mother's class

Delivery

- 1.Normal delivery (from the first stage to the fourth stage)
Partograph
- 2.Risk detection and referral
- 3.New born baby care

Post natal care

- 1.Post natal nursing care
- 2.Risk detection and referral
- 3.Birth spacing
- 4.Nutrition
- 5.Health education
- 6.Breast feeding
- 7.Baby's care
- 8.Immunization
- 9.Observation of post natal mother's class

MIDWIVES TRAINING CURRICULUM
REFFERAL LEVEL

AIMS:

- 1.To be able to manage the women with risk
- 2.To emphasize the health promotion
- 3.To improve the skill of normal and abnormal delivery

CONTENT(BASIC):

Antenatal care

- 1.Introduction of antenatal care
- 2.How to use white card
- 3.Health education in each trimester
- 4.Nutrition
- 5.The growth of baby
- 6.Risk detection and nursing care
 - 1)Minor problems
 - 2)Major problems (bleeding,pregnancy induced hypertension,pre eclampsia, anaemia,infection)
- 7.Observation of ante natal mother's class.

Delivery

- 1.Normal delivery (from the first stage to the fourth stage)
Partograph
- 2.Risk detection and nursing care
- 3.New born baby care

Post natal care

- 1.Post natal nursing care
- 2.Risk detection and nursing care
- 3.Birth spacing
- 4.Nutrition.
- 5.Health education
- 6.Breast feeding
- 7.Baby's care
- 8.Immunization
- 9.Observation of post natal mother's class

CONTENT(RISKS):

Antenatal care

1. Anaemia
2. Hypertensive disorders in pregnancy
(Pregnancy induced hypertension, pre eclampsia)
3. Malaria
4. Antepartum haemorrhage
(placenta praevia, placental abruption)
5. Abortion
6. Ectopic pregnancy
7. Mal presentation
8. Intra uterine fetal death
9. Prelabour rupture of the membrane

Delivery

1. Prolonged labour
2. Obstructed labour
3. Ruptured uterus
4. Post partum haemorrhage
5. Obstetric operations
(Caesarean section, Ventouse)
6. Neonatal asphyxia

Post natal care

1. Pyrexia
2. Breast condition

Drugs and Materials total supply price from JICA and CMS

US\$ 1\$=2500R	JICA	CMS				JICA&CMS
		Budget	WB	AID	TOTAL	
95	Jul	2,435				
	Aug	1,086				
	Sep	3,573	600		6,362	6,962
	Oct	3,239				
	Nov	4,938				
	Dec	3,541	2,342		4,420	6,762
	Total	18,812	2,942	0	10,782	13,725
	Ave/M	3,135	490	0	1,797	2,287
	%	58%	9%	0%	33%	42%
						100%

US\$ 1\$=2500R	JICA	CMS				JICA&CMS
		Budget	WB	AID	TOTAL	
96	Jan	4,050				
	Feb	3,381				
	Mar	7,270	5,656	4,121	6,205	15,981
	Apr	795				
	May	6,137				
	Jun	4,015	5,356	2,370	2,423	10,150
	Total	25,647	11,012	6,491	8,628	26,131
	Ave/M	4,274	1,835	1,082	1,438	4,355
	%	50%	21%	13%	17%	50%
						100%

US\$ 1\$=2500R	JICA	CMS				JICA&CMS
		Budget	WB	AID	TOTAL	
96	Jul	8,591				
	Aug	3,196				
	Sep	440	4,858	6,713	7,166	18,737
	Oct	3,795				
	Nov	4,615				
	Dec	2,276	1,432	5,464	8,015	14,911
	Total	22,913	6,290	12,177	15,181	33,648
	Ave/M	3,819	1,048	2,029	2,530	5,608
	%	41%	11%	22%	27%	59%
						100%

Ave/M : Average per Month

Drug and Materials provided by JICA in 1996

Name	Dose	Unit	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Extra
Injection															
Adrenaline	1mg/ml	A			80										
Adrenoxyl inj		A					70		60						30
Ampicilline	1g	A	2,000			1,000	2,500		2,000			2,500	2,500		
Ampicilline inj	500mg	A													
Calcium Gluconate		A	50	50	100		150		100			100			
Cefaxone (Roceline)	1g	A	10						150			50	50		
Cloxacilline	1g	A				100	50								
Gentamycin	80mg	A	2,000	2,000	400		2,000		2,000	500	1,000	2,500	2,500	2,500	
Glucose 50%	10ml	A	50												
Hydralazine(Aprezoline)	inj	A	165												
Largactil	20mg	A			200			100		100		100	100		
Metronidazol	100ml/F	A	50							20					
Oxylocine	10Ul/2ml	A		400	800		500			200		400	400	400	
Pentazocine	30mg/2ml	A					100	100		100		100	100	100	
Promethazine	50mg/2ml	A					100	100		100		100	100	100	
Prostlgmine		A						102					54		
Vit B Complex		A							3,000			1,500			
Vit B12	1mg	A							3,000			1,500	1,500	1,500	
Vitamine K1	10mg	A	50	50	100		50		100			100			
Vitamine K1	20mg	A	54	54			50		60	54		54	54	102	
Injection total price (\$)			1,513	409	606	470	1,667	376	2,730	527	115	2,271	1,965	822	0
Perfusion															
Dextrose 10%	500ml	Fl							100						
Dextrose 5%	500ml	Fl			200								40		
Dextrose 5%+1/3 NSS	500ml	Fl	30	100					50						
Lactate Ringer	500ml	Fl							100						
Normal Saline	500ml	Fl			100								40		
Plasma Sterile	500ml	Fl	30	30	60	50	70		100	30	30	50	50	50	
Perfusion total price (\$)			234	325	650	325	455	0	965	195	195	325	409	325	0
Others															
Milk BEBE	450g	can						12	24			12	24		
Gel de Contact				5		60							50		
Others total price (\$)			0	0	0	420	0	32	64	0	0	32	464	0	0
Material															
Adhesive	2.5X5	piece						150	200	50		150	150		
Alcohol 90°		Litter	210						270	490		210	210	210	
Capillary tube	200/B							3	3	2		3	3	10	
Catheter IV	No.18 et 20	piece	100	100	200		200								2,000
Catheter IV	No.24	piece	100				100		100						500
Compress	m	1,500						1,700	1,700	1,700			1,700		
Cotton Wool	500g	roll							100				100		
Dispo needle for Dent	27G	piece							200	100					
Examination gloves	paire	pair	1,500	1,500	3,000		1,700	2,000	2,000	2,000		2,000	2,000	2,000	
Infusion Set+ Buret	100ml	piece			100		100	50	100	20					500
Needle	26G X 1/2	100/B								1			2	2	
Scalap vein	24G	piece													500
Scalap vein	26G	piece													500
Scalap vein	27 1/2G	50/B													1,000
Catheter Foley	No. 16	piece	100	100	200		150	100	100	50					2,500
Spinal needle		piece			14										
Surgical glove	7	pair		800	1,500		1,000	1,000	1,000	600					6,000
Surgical glove	7.5	pair		700	1,500		1,000	1,000	1,000	600					6,000
Suture needle	No.5 5.5mm	piece							50			120			120
Syringe Disposable	1cc	piece	1,000	1,000	2,000		1,800	2,000	2,000	500		1,000	1,000	1,500	
Syringe Disposable	5cc	piece	7,000	7,000	15,000		7,500	8,500	7,000	5,000	2,000	7,000	7,000	7,000	
Syringe Disposable	10cc	piece					1,500	1,200	1,500	1,000		1,000	1,000	1,000	
Syringe Plastic	50cc	piece			450							50			
Urine Bag	2000ml	piece	100	100	200		150								2,500
Material total price (\$)			1,453	1,432	3,294	0	2,457	2,619	3,301	1,993	130	1,167	1,777	1,129	22,218
Suture															
Suture Catgut Plain	01	12/B		20	40		10	7		10					400
Suture Catgut Plain	02 (2-0)	12/B	20	20	40		40	13	40	10					200
Suture Catgut Plain	1(11)	12/B	20	20	40		20	20	20	10					200
Suture Catgut Plain	2(22)	12/B	10	10	40		20	20	20	10					200
Suture Silk	No.1-0	12/B													40
Suture Silk	No.2-0	12/B													40
Suture Vicryl 90mm	No.2-0	12/B													200
Suture Vicryl 90mm	No.0	12/B													200
Suture Vicryl 90mm	No.1	12/B													200
Suture total price (\$)			810	1,215	2,720	0	1,555	989	1,380	680	0	0	0	0	51,958
Monthly total price (\$)			4,010	3,381	7,270	1,215	6,134	4,015	8,439	3,394	440	3,795	4,615	2,276	74,176

Extra: JICA supply 1year estimation on October 1996

Drug and Material consumed in 1996

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
No. of patients (Mat A.B.C)	2,203	1,813	1,763	1,977	2,090	1,842	2,100	1,890	2,145	2,236	1,881	2,030
No. of admission (Mat. A.B.C)	432	386	399	424	449	416	422	408	419	454	421	401
No. of admission (Pead)	56	50	63	67			56	51	46	52	42	43
No. of case of OPD	2,376	2,221	2,396	2,789	2,776	2,632	2,972	2,731	2,276	2,978	1,427	2,156
No. of case of Operation	87	60	63	93	84	81	104	77	98	87	84	95
No. of case of Lab exam	720	800	640		800	756	726	612	607	563	443	433
Injection												
Adrenoxyl								6	27	28	8	25
Ampicillin 1/2g	61	1,328	3,779	1,736	24	952	4,599	489	4,053	186	220	1,730
Ampicillin 1g	1,682	656		233	2,591	41	74	1,738	377	2,174	4,439	1,850
B12									1,539	1,736	1,450	1,850
B-complex									1,362	1,457	1,811	250
Calcium Gluconate	48	63	66	46	1		74	53	32	15	76	30
Cefazone			6				6					70
Cloxaciline 1g	10	25	36	35	16		8		12		14	
Gentamycine 80mg					2,064	610	2,296	1,913	2,083	2,049	1,973	2,400
Glucose 50%								22	18	15	18	25
Hydralazine							100	6	35	32	31	50
Hydrocortisone 100mg					6			6	8	19	14	35
Largacil 25mg				58			104	77	86	82	3	100
Methergin					36	56	35					150
Metronidazol 100ml	51	24	46	40	30	10	71	63	80	39	55	160
Oxylocin				174	279	81	517	479	401	485	425	470
Pentazocine 30mg				93			105	77	88	82	84	100
Promethazine 50mg				58			104	77	86	80	84	100
Prosligmine							5		12	15		50
Vilamine K1 10mg	51	55	45					20	46		27	
Vilamine K1 20mg				58	69	15	55	84	82		58	105
Perfusion												
Dextrose 1/2 500ml	19		19									100
Dextrose 1/3 500ml	18		18	16	24		9	26	17		8	
Dextrose 10% 500ml	351	144	603	770	334	115	820	381	471	386	357	465
Dextrose 5% 500ml	363		16	78	54	3	259	332	439	462	486	555
Lactate Ringer 500ml	688	100	587	740	107	94	897	637	716	642	485	175
Normal Saline 500ml	8		5	13	45		10	11	15	8	122	205
Plasma Sterile 500ml	43	6	43	56	23	13	50	51	68	58	61	75
Materials												
Adhesive 2,5 x 5m							160	500	44	80	2	108
Alcohol(L)	242	218	239	223	266	420	258	250	223	246	239	244
Capillary tube							1,000	600	466	350	228	300
Catgut plain No. 1-0	65	114	15	88	42	45		156		472	249	554
Catgut plain No. 2-0	112	199	245	202	375	405	221	212	234			
Catgut plain No. 1	170	130	170	235	168	182	630	154		340	498	292
Catgut plain No. 2	168	122	158	256	168	182		154				
Catheter 18G	184	100	63	10	79	79	18	101	95			256
Catheter 20G	153	6	17	153	103	11	134	11	74	163	164	
Catheter 24G	36	29	44	39	48	48	16	23	17	26	18	8
Compress (m)	1,481	1,334	1,306	1,606	1,552	1,654	1,770	1,519	1,559	1,626	1,825	2,189
Colton (kg)					97	40	47	43	45	43	42	44
Examination gloves	1,507	1,480	1,639	1,753	1,779	1,858	2,244	1,993	2,316	2,253	2,088	2,224
Infusion set	29	124	77	56	48	42	45	36	49			36
Lancet						15	400	500	360	300	300	302
Needles 21G		126										
Needles 26G*1/2	102	57	162					137	145		134	329
Scalp vein 26G	8	1	6	12				2	5	2	243	3
Scalp vein 27G	52	69	101	72	82	53	67	45	57	69	60	38
Surgical Gloves 7.0 & 7.5	1,635	1,626	1,693	2,004	1,957	1,588	2,126	1,677	1,775	1,763	1,500	1,540
Syringe 1cc					1,732	112	1,519	558	493	1,018	1,262	1,440
Syringe 2cc	179	387	196	158		739	163	153			128	158
Syringe 5cc	6,585		6,996	7,424	8,235	2,000	6,965	6,258	5,682	6,900	7,332	7,367
Syringe 10cc	1,316	59			940	300	1,756	824	1,085	905	288	950
Syringe 20cc	29		60									
Urine bag 2L	90	69	65	93	105	15	119	92	107	97	99	114
Urine (Foley) Catheter 16Fr	90	69	63	93	112		119	92	108	99	100	114

Provision of Equipment List 1996

No.	Item	Description	Quantity	Company	Price (US\$)
1-1	Uterine operation scissors	straght,180mm	1 pc.	Takasuna Med.	37.10
1-2	Uterine operation scissors	curvrd,180mm	1 pc.	Takasuna Med.	37.10
1-3	Hemostatic forceps	rochester-pean,160mm	2 pcs.	Takasuna Med.	63.30
1-4	Hemostatic forceps	kocher,160mm	2 pcs.	Takasuna Med.	63.30
1-5	Dressing forceps	with tooth,160mm	1 pc.	Takasuna Med.	10.00
1-6	Tissue forceps	with teeth,160mm	1 pc.	Takasuna Med.	10.80
1-7	Needle holder	Maya-hegar, 180mm	1 pc.	Takasuna Med.	71.70
1-8	Dressing Case	Size:300x240x75mm	1 pc.	Takasuna Med.	70.00
1-9	Examination Light	Model 270-F	3 pcs.	Daikyo Ins.	1,600.00
1-10	Halogen bulb for above	100v,75w	12 pcs.	Daikyo Ins.	540.00
1-11	Suture needle	No.5, 5.5mm	10 boxes	BKK	138.00
1-12	Silk suture	#1.0, w/o needle	40 boxes	BKK	912.40
1-13	Silk suture	#2.0, w/o needle	40 boxes	BKK	923.60
1-14	Cutgut plain gauge	1-0, 75cm	400 boxes	Echicon	8,000.00
1-15	Cutgut plain gauge	2-0, 75cm	200 boxes	Echicon	4,000.00
1-16	Cutgut plain gauge	11, 75cm	200 boxes	Echicon	4,200.00
1-17	Cutgut plain gauge	22, 75cm	200 boxes	Echicon	4,400.00
1-18	Vicryl	#2-0, 90cm	200 boxes	Echicon	8,810.00
1-19	Vicryl	#0, 90cm	200 boxes	Echicon	9,280.00
1-20	Vicryl	#1, 90cm	200 boxes	Echicon	11,400.00
1-21	Surgical gloves	size 7.0	6,000 pairs	BKK	5,580.00
1-22	Surgical gloves	size 7.5	6,000 pairs	BKK	5,580.00
2-1	Infusion Pump	Model:FP-955	1 set	Nakamura	2,128.30
2-2	Infusion set	100ml	500 pcs.	BKK	2,750.00
2-3	Catheter	18G	1,000 pcs.	BKK	1,170.00
2-4	Catheter	20G	1,000 pcs.	BKK	1,170.00
2-5	Catheter	24G	500 pcs.	BKK	585.00
2-6	Scalvein	24G	500 pcs.	BKK	180.00
2-7	Scalvein	26G	500 pcs.	BKK	180.00
2-8	Scalvein	27G	1,000 pcs.	BKK	360.00
3-1	Urinal for Female	No.245-004-02	5 pcs.	Muranaka	20.00
3-2	Urine Bottle with Handle	No.245-004-01	5 pcs.	Muranaka	62.50
3-3	Urine bag	2,000cc	2,500 pcs.	BKK	1,575.00
3-4	Urine catheter	Folly No.16	2,500 pcs.	BKK	2,950.00

No.	Item	Description	Quantity	Company	Price (US\$)
4-1	Vacuum Cup,silicone	size: 55mm	2 pcs.	Soft medical	500.00
4-2	Vacuum Cup,silicone	size: 64mm	2 pcs.	Soft medical	500.00
4-3	Vacuum Cup,silicone	size: 72mm	2 pcs.	Soft medical	500.00
5-1	Female Genital organs Model	Cat.No. 0115	1 set	Sakamoto	950.00
5-2	Normal Pregnancy Model	Cat.No. 0116	1 set	Sakamoto	840.00
5-3	Female Pelvis Model	Cat.No. 0116-1	1 set	Sakamoto	1,525.00
6-1	Personal Computer	PRESARIO 9222	2 sets	COMPAQ	4,900.00
6-2	Printer	HP-LaserJet 5MP	2 sets	HP	2,900.00
7-1	Oxygen Concentrator	New Life AS00005X	1 set	Air Sep	2,400.00
8-1	Doppler Fetus Detector	FD-300,with accessories	80 sets	TOITU	62,083.30
8-2	Ultrasonic Gel	250ML for FD-300	1,000 pcs.	TOITU	7,166.70
8-3	Dry Battery	006P (9V) for FD-300	1,000 pcs.	Toshiba	1,583.30
8-4	Infant Resuscitation Bag	250ml,Model CF-560	80 sets	ATOM	14,000.00
8-5	Valve Suction		80 pcs.		104.00
8-6	Baby Stethoscope	Cat.No.CA-1100	80 sets	ATOM	3,666.70

TOTAL US\$183,398.00

Schedule of training in Japan

Annex -16

	Dr. Soeurn	Dr. Sophat	Ms. Kheang	Mr. Sary	
July 15 16 17-20	leave for Japan arrive at Narita briefing in JICA				
July 22- Aug. 2 (2 weeks)	International Medical Center of Japan				
	OB-GY	Anesthesia	OB-GY	Neonatology	
Aug. 5-16 (2 weeks)	Okinawa Chubu hospital	Okinawa Naha hospital (3 months)	Seibo hosp. (OB-GY)	(Neonatology)	
Aug. 19-23	Okinawa health center (1 week)		midwife clinic (1 week)	Tokyo Women's Medical Colleg (Neonatology) (3 weeks)	
26 27	Tokyo MCH health service center		Kyorin univ. (OB-GY) (2 weeks)		
28	evaluation(JICA)				
29	preparation				
30	leave for Cambodia				
Sep. 2-6					
Sep. 9				evaluation (JICA)	
10			leave for Cambodia		
-Oct. 30					
Nov. 1		evaluation (JICA)			
2		preparation			
3		leave for Cambodia			

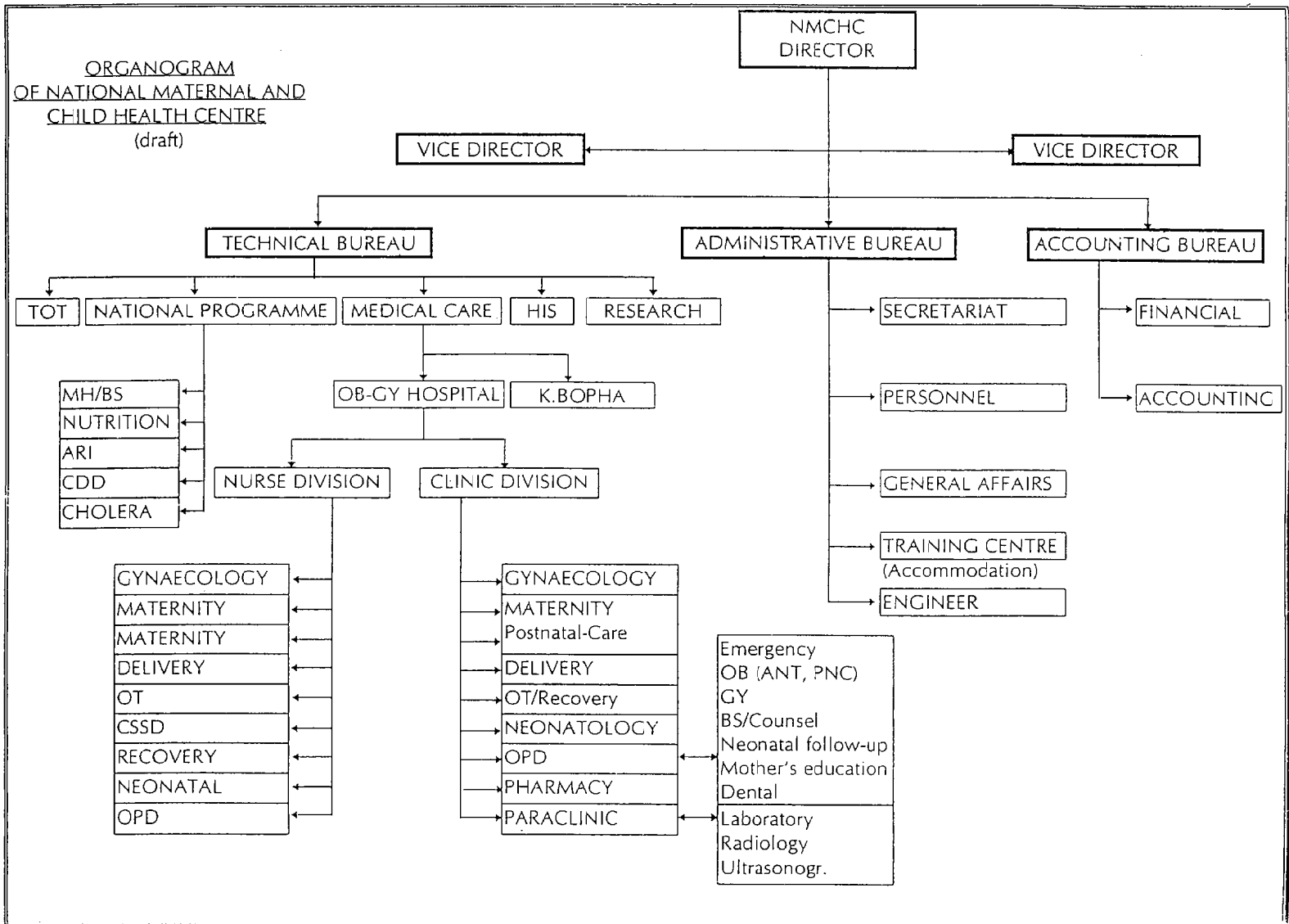
③ 1997年4～5月 新母子保健センター活動と運営管理

Activities and management of new NMCHC
in April and May 1997

Discussion with the advisory mission team for MCH project of JICA

June 13 1997

1. Organogram of new NMCHC
2. Comparison of activities between Jan. 7 hospital and new NMCHC
3. Statistics of deliveries
4. Number of staying patients in new NMCHC
5. Income from user fee in new NMCHC
6. Daily income records
7. Allocation to the staff of each division in April and May 1997
8. Reaction of the staff for the user fee system
9. Results of the exit interview to the patients for user fee system
10. Number of exemption
11. Exemption report
12. Maintenance cost for new NMCHC
13. Drug and material supply from CMS and JICA
14. Flow chart of material management and procurement system
15. Number of the staff and distribution
16. Role of committees in new NMCHC



Comparison of the activities between Jan. 7 hospital and new NCMHC

	activities	number of cases/month		
		Jan. 7	new NCMHC	
			April	May
OPD	ANC	786	847(108%) ↑	1,369(170%) ↑
	gynecology	320	224(70%)	362(113%)
	BS	249	174(70%)	215(86%)
	vaccination	899	294(33%)	364(40%)
	dental	88	53(60%)	94(107%)
para-clinic	echo	232	341(147%) ↑	469(202%) ↑
	ECG	-	15	25(167%) ↑
	X-ray	423	127(30%)	141(33%)
	labo	827	496(60%)	581(70%)
admission	delivery(total)	337	271(80%)	365(108%)
	normal	250	212(85%)	294(118%) ↑
	abnormal	87	59(68%)	71(82%)
	gynecology	60	49(82%)	77(128%) ↑
	NCU	40	43(108%)	52(130%) ↑
	OT(total)	75	73(97%)	89(119%)
	c/s	40	38(95%)	44(110%)
	gynecology	35	35(100%)	45(129%) ↑

Patients record in NWCHC

1997

	April	May	June
Normal deliveries	212	294	
1. twin/triplets	4	4	
2. breech	3	7	
3. premature	12	11	
Abnormal deliveries	59(22%)	71(19%)	
1. C/S	39(14%)	44(12%)	
2. Vacuum	19	27	
3. Forceps	0	0	
4. Craniotomy/Embry	1	0	
Maternal death	4	0	
Toxemia/Eclampsia	2	3	
Hemorrhage			
Neonates	271	371	
1. 2.5kg< alive	230	333	
2. 2.5kg< died	2	1	
3. 2.5kg> alive	33	32	
4. 2.5kg> died	6	5	
Perinatal death	8	6	
in utero	6	4	
after birth	2	2	
indication for C/S	39	44	
1. placenta previa	10	13	
2. arrest of dilatation	6	8	
3. dysproportion/CPD	7	4	
4. small pelvis	3	1	
5. toxemia/eclampsia	0	3	
6. breech/transverse	8	10	
7. abruptio placenta	1	0	
8. dystocia	2	2	
9. weak pain	0	0	
10. rupture of uterus	0	0	
11. fetal asphyxia	0	1	
12. others	2	2	

Number of staying patients in the NMCHC

month	April 8/2/1 room	May	June	July	August	
1	16/1/0:17	52/4/4:60				
2	16/1/0:17	57/4/4:65				
3	28/2/1:31	56/4/4:64				
4		58/4/5:67				
5		55/2/5:62				
6	35/3/6:44	57/4/3:64				
7	41/2/6:49	63/4/2:69				
8	49/1/4:54	64/4/1:69				
9	46/4/6:56	68/4/4:76				
10	39/2/5:46	51/2/5:58				
11	35/4/3:42	52/3/4:59				
12	34/3/3:40	53/2/5:60				
13		55/3/5:63				
14		49/4/6:59				
15		49/4/6:59				
16		41/4/6:51				
17	55/4/2:61	53/3/6:62				
18		59/4/5:68				
19		69/4/6:79				
20	49/4/1:54	71/4/6:81				
21	41/3/1:45	63/4/3:70				
22	47/4/2:53	61/2/2:65				
23	42/2/1:45	60/2/4:66				
24	51/3/4:58	53/4/4:61				
25	57/3/6:66	53/3/6:62				
26	47/4/6:57	52/4/6:62				
27	47/2/6:55	56/4/3:63				
28	50/4/5:59	64/4/4:72				
29	58/4/5:67	59/4/3:66				
30	54/2/4:60	52/4/4:60				
31		64/3/5:72				
total	1,076	2,014				
avera	49/day	65/day				
BOR	33%	43%				

(30% 70% 58%) (41% 88% 73%)

Income from user fee in the new NWCHC

division	1-9/April	10-30/April	total	ratio
OT/ICU/recovery/CSSD/laundry	\$2,820	\$5,121	\$7,941	35.2%
ME/MW/delivery	\$1,942	\$6,889	\$8,831	39.1%
Gy	\$ 625	\$1,718	\$2,343	10.4%
Neo				
OPD	\$ 504	\$1,205	\$1,709	7.6%
para-clinic	\$ 659	\$1,088	\$1,747	7.7%
total	\$6,550	\$16,021	\$22,571	100%

total income ⇒ 1% MOF

11% running cost

20% each service except OT(36% for OT)

68% all staff

OT ⇒ 20% OT

10% operator(4%:surgeon, 2.5%:1st assistant, 1%:2nd assistant, 2.5%:Anne)

3% NEO

3% Mat/Gy(allocated according to the number of operation cases)

division	1-15/May	16-31/May	total	ratio
OT/ICU/recovery/CSSD/laundry	\$4,909	\$4,470	\$9,379	29.8%
ME/MW/delivery	\$6,473	\$7,211	\$13,684	43.5%
Gy	\$1,637	\$2,052	\$3,689	11.7%
Neo	\$ 119	\$ 70	\$ 189	0.6%
OPD	\$1,088	\$1,106	\$2,194	7.0%
para-clinic	\$1,203	\$1,127	\$2,330	7.4%
total	\$15,429	\$16,036	\$31,465	100%

total income⇒ 1% MOF

50% running cost(15% overtime fee, 1% temporary worker)

49% staff(10% each service, 39% for all)

INCOM the 16 to 31 MAY 1997

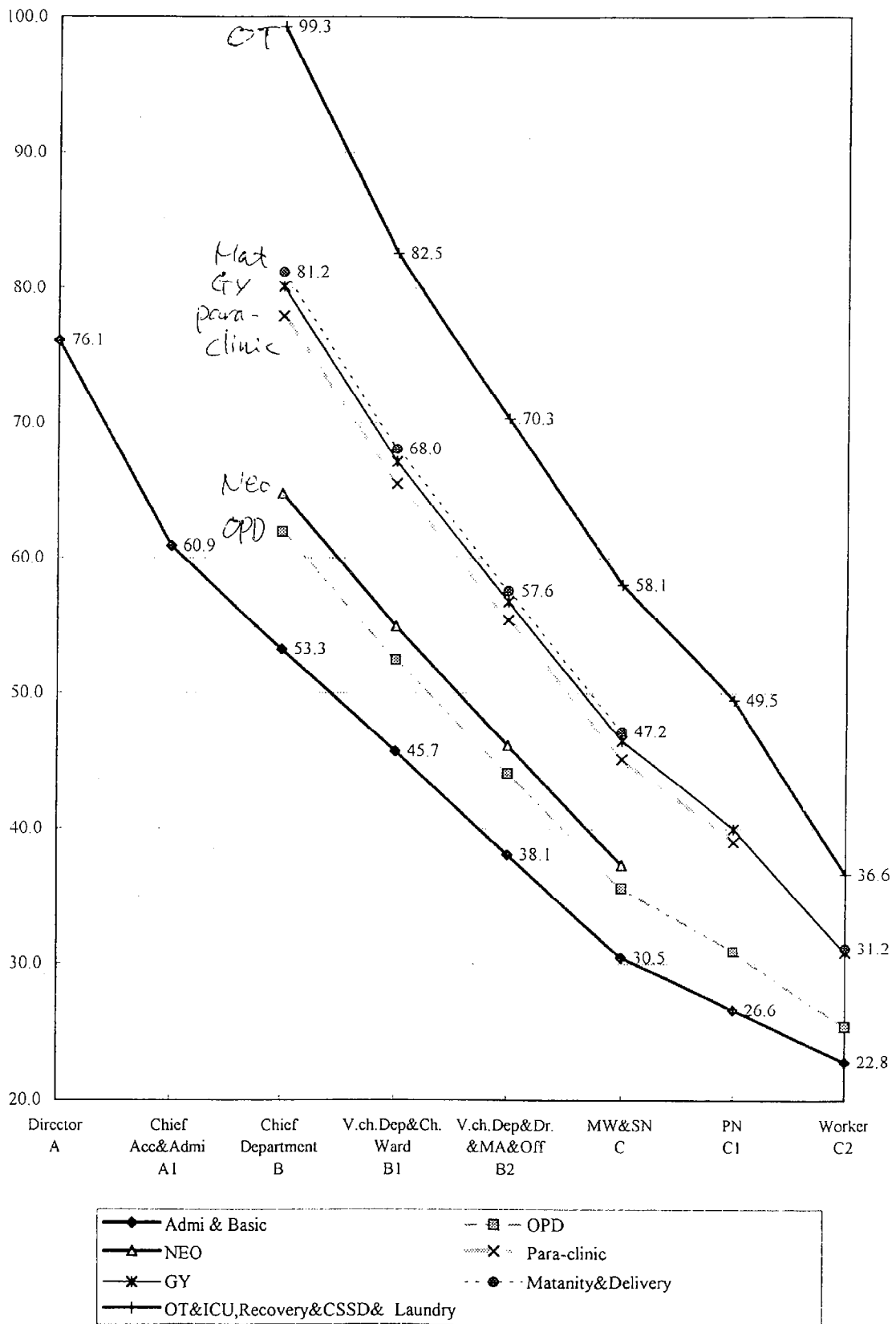
DATE	OPD	PARA	OT	ICU	GYNE	MAT	NEO	TOTAL
197-5-16	228,000.00	341,000.00	330,000.00	82,500.00	380,000.00	1,630,000.00		2,991,500.00
197-5-17	87,600.00	15,000.00	925,000.00	20,000.00	365,000.00	1,604,000.00	50,000.00	3,066,600.00
197-5-18	20,000.00	4,000.00	660,000.00	110,000.00	265,000.00	2,306,500.00		3,365,500.00
197-5-19	412,900.00	495,500.00	1,750,000.00	27,500.00	405,000.00	926,000.00		4,016,900.00
197-5-20	362,900.00	351,000.00	-	37,500.00	280,000.00	944,000.00	10,000.00	1,985,400.00
197-5-21	43,000.00	55,000.00	747,500.00	110,000.00	625,000.00	1,570,500.00		3,151,000.00
197-5-22	332,500.00	304,000.00	1,352,000.00	192,000.00	540,000.00	1,730,000.00	50,000.00	4,500,500.00
197-5-23	267,600.00	336,000.00	810,000.00	-	93,000.00	660,000.00		2,216,600.00
197-5-24	70,000.00	64,000.00	180,000.00	65,000.00	240,000.00	868,000.00		1,487,000.00
197-5-25	4,000.00	6,000.00	660,000.00	55,000.00	370,000.00	1,231,000.00	30,000.00	2,356,000.00
197-5-26	109,000.00	52,500.00	660,000.00	47,500.00	260,000.00	701,000.00		1,830,000.00
197-5-27	359,900.00	385,000.00	1,750,000.00	55,000.00	687,500.00	2,016,500.00	30,000.00	5,283,900.00
197-5-28	219,200.00	269,000.00	600,000.00	27,500.00	105,000.00	1,148,000.00		2,368,700.00
197-5-29	270,000.00	207,000.00	530,000.00	102,500.00	415,000.00	1,047,000.00		2,571,500.00
197-5-30	158,400.00	88,500.00	50,000.00	55,000.00	460,000.00	625,000.00		1,436,900.00
197-5-31	40,000.00	70,000.00	50,000.00	27,500.00	50,000.00	461,500.00	20,000.00	719,000.00
total	2,985,000.00	3,043,500.00	11,054,500.00	1,014,500.00	5,540,500.00	19,469,000.00	190,000.00	43,297,000.00

-134-

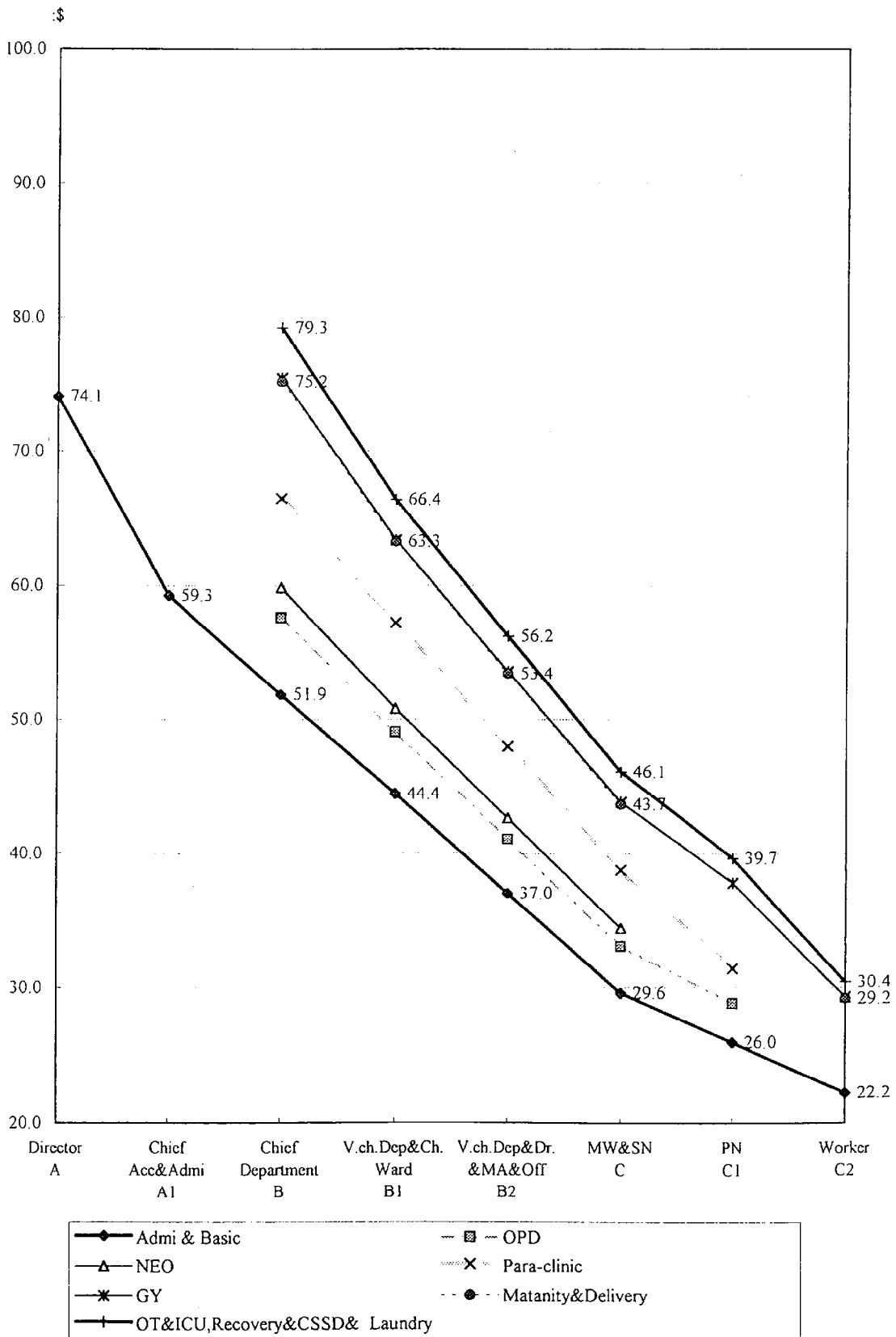
\$1106 (7%)
 \$1127 (2%)
 Gy: 25 cas
 M: 17 cas
 12,069,000
 \$4470 (28%)
 \$2052 (13%)
 \$7,211 (45%)
 \$20
 5/15 \$15,929

\$31,965
 total in May

Allocation for each division in April 1997 (\$)



Allocation for each division in May 1997 (\$)



1) The allocation from user fee

	clinical			admsitration pharmacy, other	total
	MD/MA	MW/NS	para-clinic		
a. higher than before	13	15	13	64	105
b. lower than before	16	107	8	6	137
c. alomst same	4	4	0	3	11
total	33	126	21	73	253
recovery rate	49%	98%	95%	79%	68%

2) Are you happy to receive the money from user fee ?

	MD/MA	MW/NS	para-clinic	others	total
a. happy	20	41	16	72	149
b. not happy	4	83	5	4	96
c. others	4	4	0	2	10
total	28	128	21	78	255

3) Do you think that user fee system is good for the patients ?

	MD/MA	MW/NS	para-clinic	others	total
a. good	23	90	8	62	183
b. not good	5	22	8	5	40
c. others	2	5	5	5	17
total	30	117	21	72	240

Results of the exit interview

April 1997

	OPD	admission
number of respondents	51	46
1)pay no pay no answer	41 10 * 0	43 2 1
2)demandd from the staff no yes	51 0	44 2 **
3)price for the service very expensive relatively expensive acceptable price cheap very cheap	0 2 40 4 5 *	0 3 *** 37 4 0
4)any problem ? no yes	43 8	39 7
	<ul style="list-style-type: none"> •waiting time is long •difficult to find the place of each service 	<ul style="list-style-type: none"> •room is hot •special room is expensive •staff is not kind •staff ask to clean the room •staff don't educate the patients
5)staff very good good fair bad very bad	0 51 0 0 0	0 45 0 1 0
6)come again ? yes no not sure	50 0 1	
6)recommend to the other people ? yes no not sure		45 0 1

* ANC more than 5 times(no charge)

** They were not demandd from the staff, but they wanted to pay privately.

*** Cesarcian section \$120 is expensive for the patients. They paid \$76, \$105 and 10,000Riel(\$3.7) only.

Number of exemption

month	April	May 1-18	May 19-31*	service
total	61	58	36 (100%)	
staff(no pay)			11 (30%)	dental, vaccination para-clinic(echo, ECG) delivery(3 cases), others
poor patients			25 ** (70%)	delivery(vaginal): 8 operation : 6 curatage : 3 retension placenta: 1 threatened abortion: 1 gynecology : 3 ? : 3
no pay			11	
partial pay			14	

* The exemption report paper started to be used from May 19.

** address of the patients: Kandal 10
Phnom Penh 6
Prey Veng 4
Kpg. Spuc 2
Kpg. Thom 2
? 1

exemption / total admission = 15%

របាយការណ៍អំពីការលើកលែង

Exemption Report លេខប័ណ្ណពិនិត្យ / ID No. : _____

លេខរៀង / Serial No.: _____ កាលបរិច្ឆេទ / Date : _____

- ឈ្មោះ / Name : _____ អាយុ / Age : _____ ឈ្មោះប្តី / Husband`s name : _____

- អាសយដ្ឋាន / Address : _____

- តើអ្នកមានមុខរបរជាអ្វី ? / What is your Occupation ?

កសិករ / Farmer មេផ្ទះ / Housewife កម្មករ / Laborer អ្នកលក់តូចតាច / Small seller

អ្នកបំរើការងារ / Civil Servant មន្ត្រីរាជការ / Officer ផ្សេងៗ / Other _____

- តើមុខរបររបស់អ្នកជាអ្វី / What is your husband occupation ?

កសិករ / Farmer កម្មករ / Laborer អ្នកលក់តូចតាច / Small seller

មន្ត្រីរាជការ / Officer ទាហាន / Soldier ផ្សេងៗ / Other _____

ឈ្មោះរបស់ក្រុមហ៊ុន / Name of company : _____

- តើប្រាក់ចំណូលជាមធ្យមរបស់អ្នកក្នុងមួយខែបានប៉ុន្មាន ? / How much approximately of your income per month ?

- តើអ្នកមកកាន់មន្ទីរពេទ្យនេះដោយសារអ្វី? / How you can come to this hospital ?

ដើរ / Walk ម៉ូតូឌុប / Moto taxi កង់ / Bicycle ម៉ូតូខ្លួនឯង / Own moto

ឡាន / Car មធ្យោបាយផ្សេងៗ / Other: _____

- តើសេវាកម្មអ្វីដែលអ្នកត្រូវទទួល ? / What kind of service you will receive ?

សំរាល / Delivery ការវះកាត់ / Operation ផ្សេងៗ / Others : _____

តើអ្នកមានលទ្ធភាពបង់សំរាប់ការវះកាត់ ឬ សំរាប់ការស្នាក់នៅក្នុងមន្ទីរពេទ្យប៉ុន្មាន ?

How much you are affordable to pay for operation or stays in the hospital ?

ខ្ញុំ (ឈ្មោះអ្នកបំពេញ : _____) មិនមានប្រាក់ក្នុងការបង់ថ្លៃសេវានេះទេ ដូច្នេះខ្ញុំ សុំសេចក្តីអនុញ្ញាតនូវការលើកលែងការបង់ប្រាក់នេះ / I (Name of applicant : _____) have no money to pay for the service , so that I would like to request the exemption .

គ្រប់ការដែលខ្ញុំបានរៀបរាប់ខាងលើនេះ គឺជាការពិត / All I mention here is only the truth .

ហត្ថលេខាអ្នកត្រួតពិនិត្យ
Signature of controler

ហត្ថលេខាអ្នកបំពេញ
Signature of applicant

ស្នាមមេដៃស្តាំអ្នកបំពេញ
Right thumb of applicant

Maintenance cost for the NMCHC

June 9 1997

A. facilities and others

item	April	May
1)electricity ※	(49600 kw/month x \$0.14/kw = \$6,944)	55,400kw:\$7756
2)fuel for generator	25l/hour x 8 hours x \$0.3 = <u>\$ 60</u>	12h : <u>\$90</u>
3)fuel for incinerator	28l/hour x 22 hours x \$0.3 = <u>\$185</u>	24h : <u>\$202</u>
4)oil for pump		
5)water ※		
6)chlorine for water	27l/month x \$0.97 = <u>\$26</u>	<u>\$26</u>
7)oxygen gas ※	(83 bottles/month x \$9 = \$ 747)	109 x \$9 = \$981
8)kitchen gas	(\$165/month purchased by canteen)	
9)telephone(3 new) ※	<u>\$15</u>	<u>\$20</u>
10)gavage(city car)	<u>\$50</u>	<u>\$50</u>
total	<u>\$336</u>	<u>\$388</u>

B. documents

item	April	
1)file for the documents	2,500/month x \$0.16 = <u>\$400</u>	<u>\$400</u>
2)ID card(printing) ※	2,500/month	
3)plastic cover of ID card	2,500/month x \$0.07 = <u>\$175</u>	<u>\$175</u>
4)printing for documents※		
5)copy paper ※		
total	<u>\$575</u>	<u>\$575</u>

※: payment from MOH budget _____ : payment from NMCHC

Drugs and Materials supply from Main store to Detail in Pharmacy (S)

Drug	Jan	Feb	Mar	Apr	May	Total (1-5)
NB	733.21	870.93	92.98	409.06	4,276.48	6,382.66
AID	1,500.27	1,447.05	2,821.41	770.96	2,007.34	8,547.03
CMS	2,233.47	2,317.98	2,914.40	1,180.02	6,283.82	14,929.69
JICA	8,641.28	8,392.69	0.00	6,203.22	10,230.37	33,467.56
TOTAL	10,874.76	10,710.67	2,914.40	7,383.24	16,514.18	48,397.25

Material	Jan	Feb	Mar	Apr	May	Total
NB					7.91	7.91
AID	804.19	2,302.39	954.93	780.92	1,016.37	5,858.80
CMS	804.19	2,302.39	954.93	780.92	1,024.27	5,866.71
JICA	7,837.09	6,090.30	1,016.50	5,422.30	9,214.00	29,580.19
TOTAL	8,641.28	8,392.69	1,971.43	6,203.22	10,238.27	35,446.90

TOTAL	Jan	Feb	Mar	Apr	May	Total
NB	733.21	870.93	92.98	409.06	4,284.38	6,390.56
AID	2,304.46	3,749.44	3,776.35	1,551.88	3,023.71	14,405.83
CMS	3,037.67	4,620.37	3,869.33	1,960.94	7,308.09	20,796.40
JICA	16,478.37	14,482.99	1,016.50	11,625.52	19,444.37	63,047.75
TOTAL	19,516.04	19,103.36	4,885.83	13,586.46	26,752.45	83,844.15

(%)

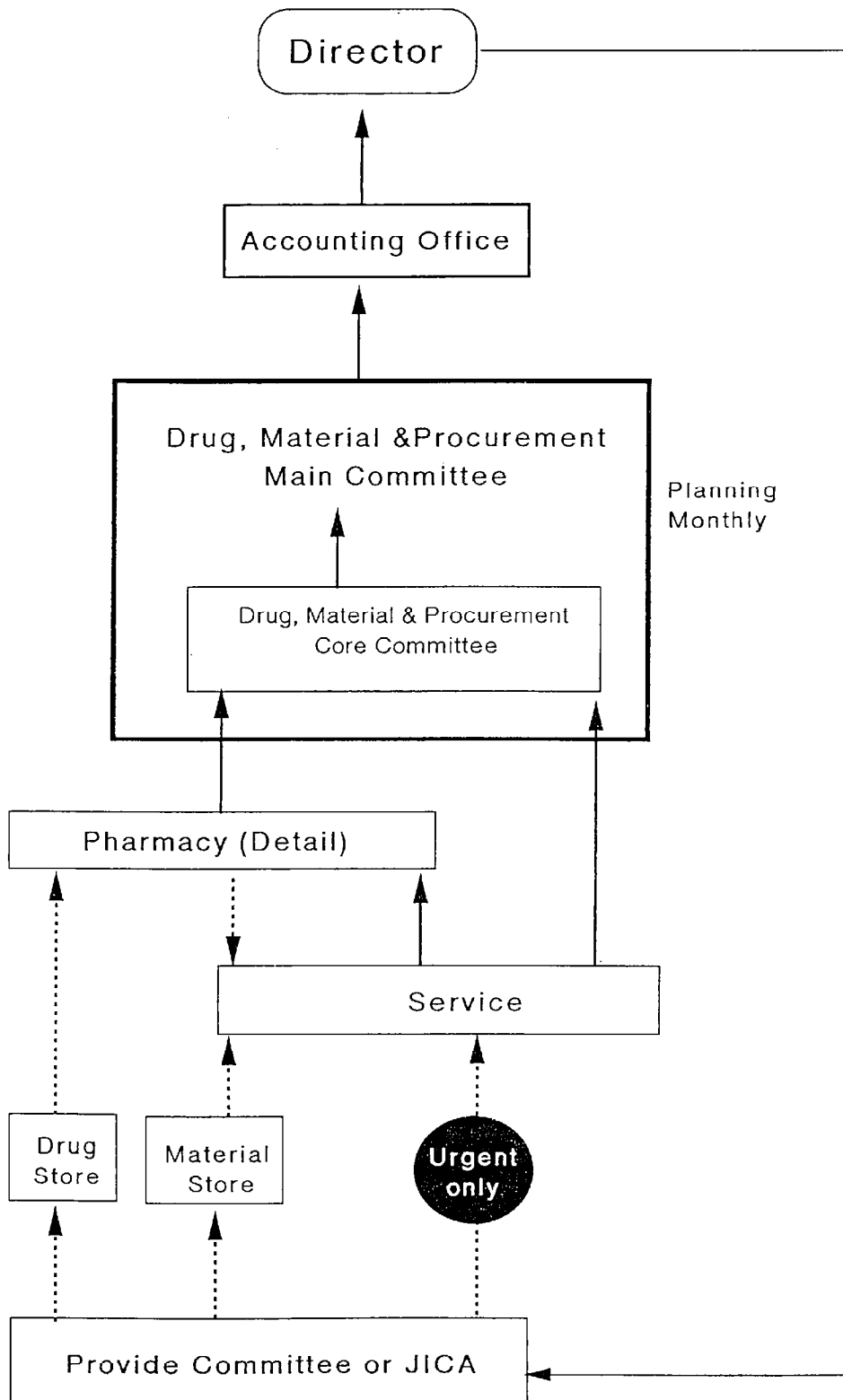
Drug	Jan	Feb	Mar	Apr	May	Total (1-5)
NB	6.7%	8.1%	3.2%	5.5%	25.9%	13.2%
AID	13.8%	13.5%	96.8%	10.4%	12.2%	17.7%
CMS	20.5%	21.6%	100.0%	16.0%	38.1%	30.8%
JICA	79.5%	78.4%	0.0%	84.0%	61.9%	69.2%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Material	Jan	Feb	Mar	Apr	May	Total (1-5)
NB	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
AID	9.3%	27.4%	48.4%	12.6%	9.9%	16.5%
CMS	9.3%	27.4%	48.4%	12.6%	10.0%	16.6%
JICA	90.7%	72.6%	51.6%	87.4%	90.0%	83.4%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

TOTAL	Jan	Feb	Mar	Apr	May	Total (1-5)
NB	3.8%	4.6%	1.9%	3.0%	16.0%	7.6%
AID	11.8%	19.6%	77.3%	11.4%	11.3%	17.2%
CMS	15.6%	24.2%	79.2%	14.4%	27.3%	24.8%
JICA	84.4%	75.8%	20.8%	85.6%	72.7%	75.2%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

NB ; National Budget
A ; AIDS

CMS ; Central Medical Stores



← Flow of Request paper ←····· Flow of Drugs and Materials

Number of staff

	total staff	A	A1	B	B1	B2	C	C1	C2
		1	.8	.7	.6	0.5	0.4	0.35	0.3
OT/ICU/recovery/CSSD/laundry	52:14%			1	5	8	18	17	3
ME/MW/delivery	94:25%			2	9	19	58	0	6
Gy	28: 7%			1	4	6	14	1	2
Neo	28: 7%			1	2	13	12		
OPD	58:16%			1	5	19	27	6	
para-clinic	22: 6%			1	2	4	14	1	
administration/pharmacy/ national program	69:18%	1	2	2	1	41	8	0	14
temporary	23: 6%								23
total	374 (100%)	1	2	9	28	110 29%	151 40%	25	48

A : Director

B : Chief of administrative burcaru, Chief of accounting bureau

B : Chief of department(MD)

B1: Vice chief of department(MD), Chief of ward(MW/NS)

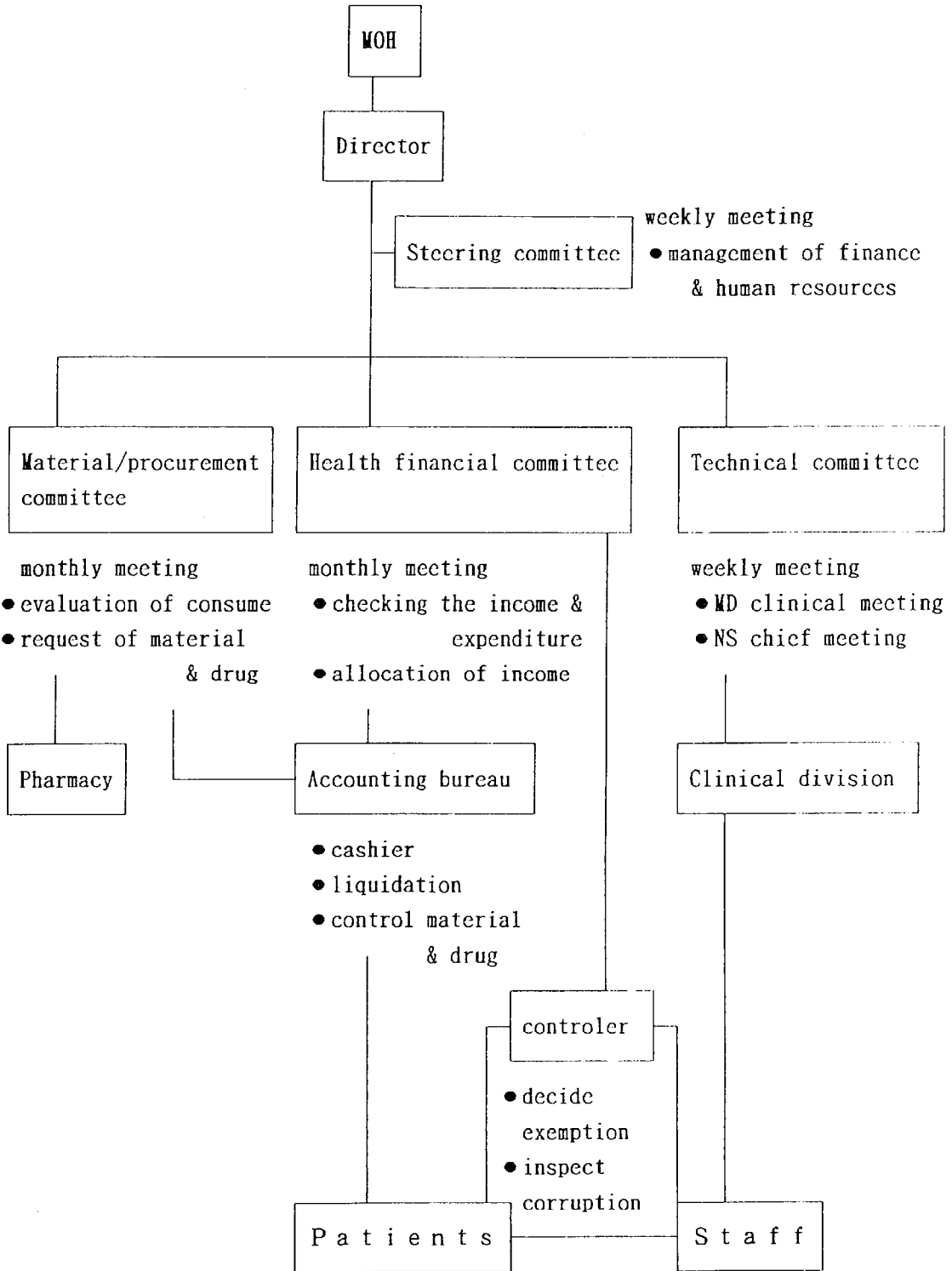
B2: Vice chief of warad, MD/MA, officer

C : MW/secondary nurse

C1: primasry nurse

C2: worker

Role of committee in NMCHC



④ 1997年 看護部門運営管理

THE MATERIAL
OF
MANAGEMENT
IN NURSING DIVISION

CAMBODIA MCH PROJECT
1997

看護部門における体制作り

看護部の設立

看護部長・副部長・婦長選出

組織図

活動システム

機能組織図

人員配置

人員配置表

勤務体制（当直制）及び看護方式一覧表

配置換ローテーションシステム

勤務の規則

運営

看護部の方針

会議

薬品物品管理

日報

（看護管理基準の作成）

業務

婦長業務・婦長当直業務

助産婦業務・分娩室勤務者の業務

母親学級 運営とカリキュラム

受講者数

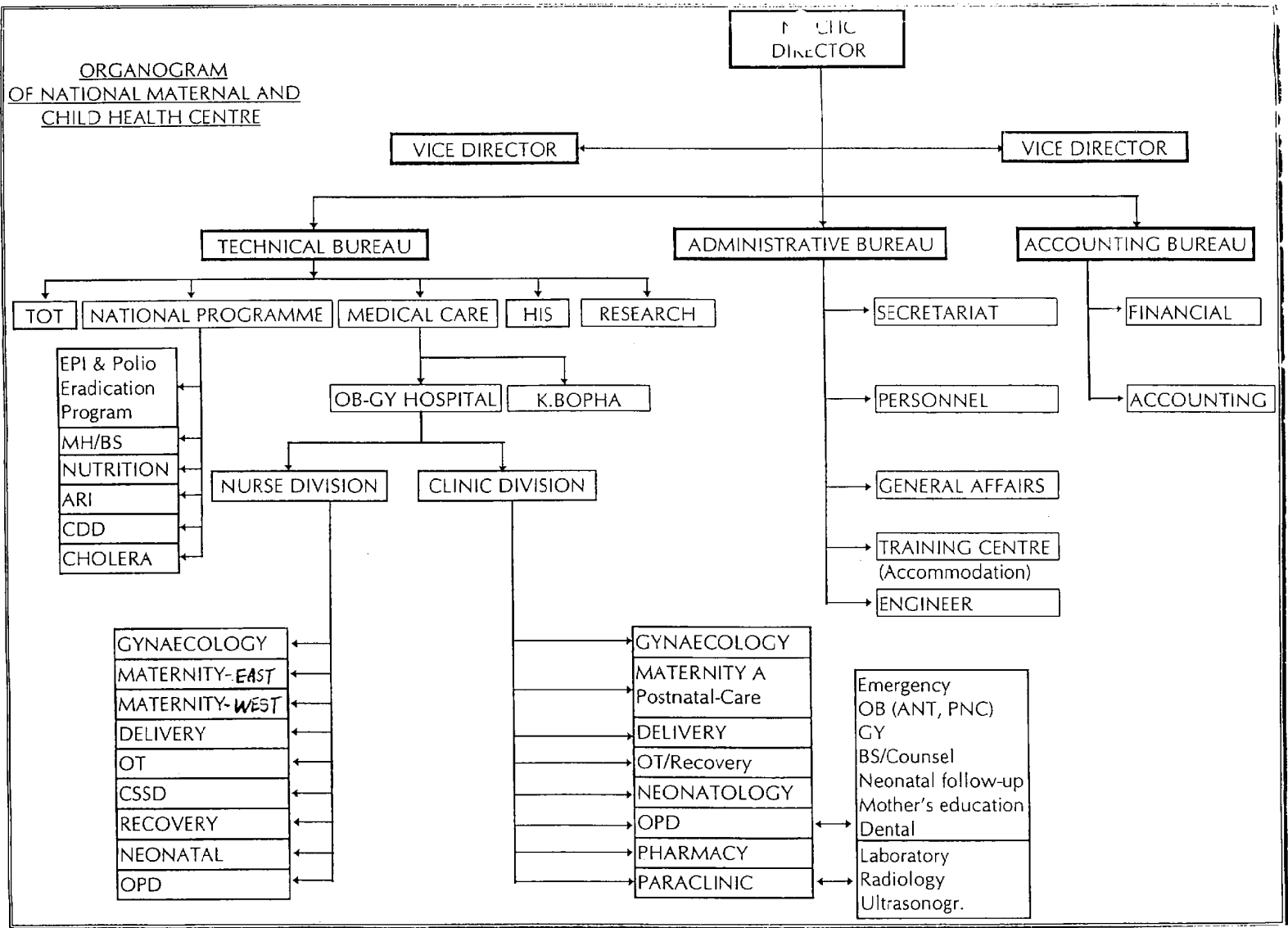
（看護基準・手順の作成）

教育

トレーニングプラン

地方への展開 カリキュラム

日本派遣研修者



NURSING DIVISION FUNCTIONAL ORGANOGRAM

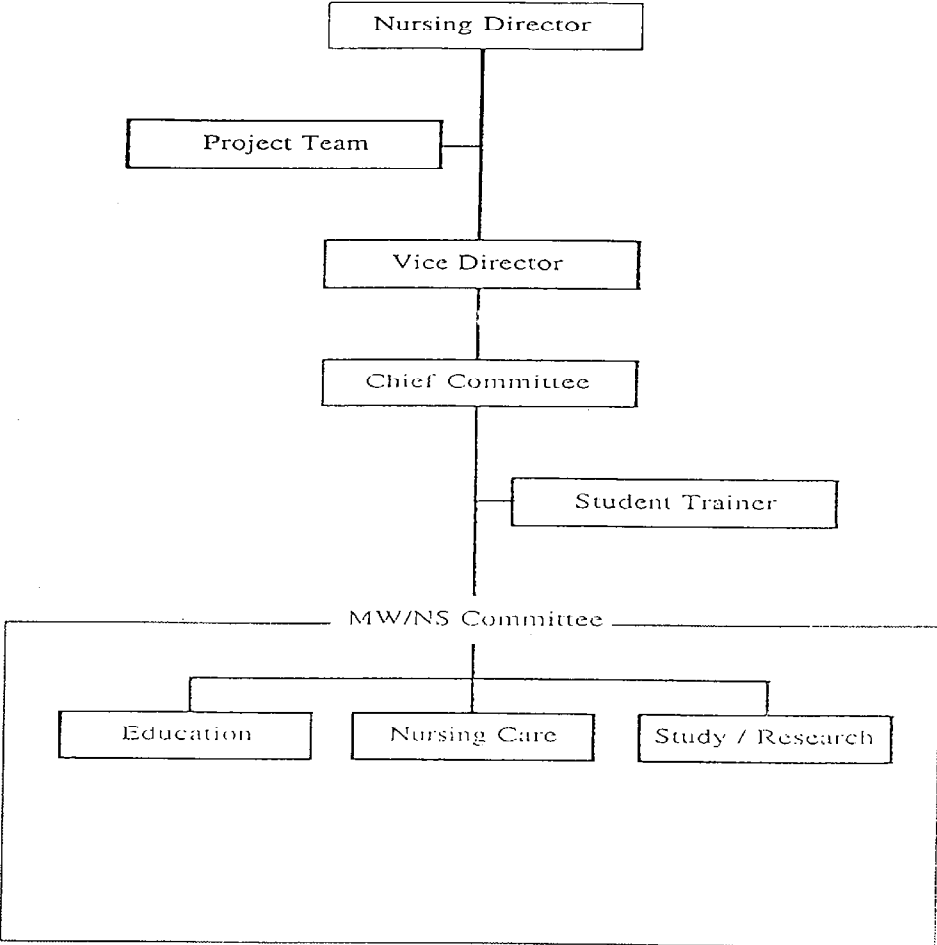
Director

Nursing Division Director
 1. To implement the national MCH policy
 2. To manage the management in the ward
 3. To grasp staff , to lead and to supervise
 4. To Manage education , training for staff , midwife's student and nurse
 5. To manage the patient's management and health education
 6. To adjust to other division
 7. To make the proposal to Motivation Punishment and the staff position changing.
 8. Special direction from director of the national MCH and inform condition of nursing division to director

<p>Vice chief (Education) 1. To make orientation of new staff 2. To manage education in service 3. To involve the national program training and TOT 4. To manage the nursing care study and research 5. To manage the education for prevention of medical accident 6. Special direction from nursing director</p>	<p>Vice Chief (Personnel) 1. To manage working time 2. To adjust number of staff 3. To make the working regulation and working condition 4. To supervision condition of staff 5. To manage the welfare for staff 6. Special direction from nursing director</p>	<p>Vice Chief (Nursing clinical) 1. To manage in the clinical nursing care. 2. To manage the safety to the patient 3. Responsible to management in service. 4. Responsible nursing system 5. To manage nursing of equipment and medical material. 6. Special direction from nursing director</p>
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<p>Chief of OPD 1. To manage in OPD 2. To manage the working time and adjustment 3. To manage the equipment allocation and medicine 4. To make the safety management in unit 5. To adjust other division 6. To manage service working and education to patient . 7. To manage the receptionist of patient registration and patient's distribution 8. To manage in the emergency room and supervision 9. Special direction from nursing director</p>	<p>Chief of OT 1. To manage in the OT room 2. To make operation program according to the plan 3. To grasp staff and OJI 4. To manage the equipment allocation and medicine 5. To manage the safety working and prevention of other accident 6. To manage the registration (in the operation book , making statistics , making report etc.) 7. To adjust other division 8. Special direction from nursing director</p>	<p>Chief of ICU(Recovery Room) 1. To manage in the ICU 2. To grasp staff and OJI 3. To manage the working time 4. To manage the equipment allocation and medicine 5. To manage the safety working and prevention of other accident 6. To manage on the patient condition control and the patient condition record 7. To manage leader or supervision for the patient families , visitors 8. To adjust other division 9. Special direction from nursing director</p>	<p>Chief of ward (Maternity , Neonatal , Gynecological) 1. To manage in the ward 2. To grasp staff and OJI 3. To do the health service and make the home care education to patient 4. To manage the working time 5. To manage the equipment allocation and medicine 6. To manage the safety working and to prevention of other accident 7. To manage leader or supervision for the patient families , visitors 8. To manage the nursing care education to the student 9. To adjust other division 10. Special direction from nursing director</p>	<p>Chief of Delivery Room 1. To manage in the delivery room and in the labor room 2. To grasp staff and OJI 3. To manage working time 4. Safety management and to manage the nursing care 5. To do service and to make the education . 6. To manage the equipment allocation and medicine 7. To make the nursing care education to student 8. To make the delivery register 9. To adjust other division 10. Special direction from nursing director</p>	<p>Chief of CSSD 1. To manage in the CSSD 2. To manage the safety for high pressure steam sterilize and to manage worker 3. To manage the working time 4. To manage , to improve operation material and treatment material 5. To manage the equipment supply plan and material plan (monthly plan and annual plan) 6. Quality control on working , sterilization and material 7. Making statistics 8. To adjust other division 9. Special direction from nursing director .</p>
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THE ACTIVITY SYSTEM OF NURSING DIVISION



1. 6 '97
ALLOCATION OF PERSONNEL IN NURSING

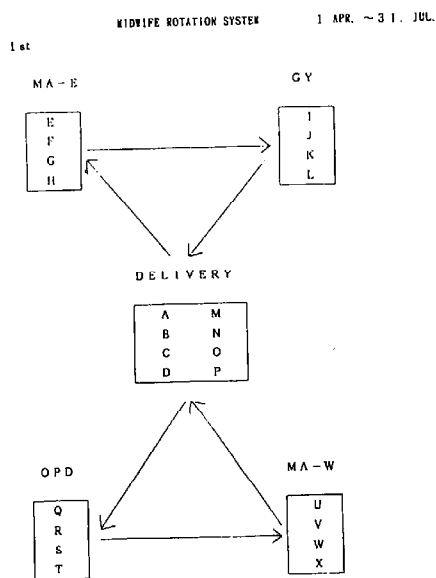
NURSING UNIT	WORKING SYSTEM	chief	M W		N S		sub total	work-er	total
			S	P	S	P			
Maternity	duty	1	14				15	3	18
Maternity	"	1	16				17	3	20
gynecology	"	1	16		1		18	3	21
labor delivery	"	1	31				32	2	34
neonatal care unit	"	1			14		15		15
recovery room ICU	"	1			11		12		12
operation theater	"	1			15		16	2	18
central supply	"	1				6	7		7
O P D	"	1	19		8	5	33	3	36
admi. of N. division		1					1		
TOTAL		10	96		48	12	166	16	182

O. P D

O P D	WORKING SYSTEM	chief	M W		N S		sub total	work-er	total
			S	P	S	P			
ob(ANC, PNC)		1	5			2	8		8
gy			2			2	2		2
emergency			2				2		4
BS/course			4				4		4
VACC neonatal follow up			3		4	2	7		7
mother's education			3				3		3
dental						1	1		1
reception									
Echo					2		2		2
total		1	19		8	5	33	3	36

midwife rotation table

Term \ Group No	4-5	6-7	8-9	10-11	12-1	2-3	4-5	6-7	8-9	10-11	12-1	2-3
A	D.V		M.E		g.y		D.V		OPD		MW	
B	D.V		M.E		g.y		D.V		OPD		MW	
C	D.V		M.E		g.y		D.V		OPD		MW	
D	D.V		M.E		g.y		D.V		OPD		MW	
E	M.E		g.y		D.V		OPD		MW		D.V	
F	M.E		g.y		D.V		OPD		MW		D.V	
G	M.E		g.y		D.V		OPD		MW		D.V	
H	M.E		g.y		D.V		OPD		MW		D.V	
I	g.y		D.V		OPD		MW		D.V		M.E	
J	g.y		D.V		OPD		MW		D.V		M.E	
K	g.y		D.V		OPD		MW		D.V		M.E	
L	g.y		D.V		OPD		MW		D.V		M.E	
M	D.V		OPD		MW		D.V		M.E		g.y	
N	D.V		OPD		MW		D.V		M.E		g.y	
O	D.V		OPD		MW		D.V		M.E		g.y	
P	D.V		OPD		MW		D.V		M.E		g.y	
Q	OPD		MW		D.V		M.E		g.y		D.V	
R	OPD		MW		D.V		M.E		g.y		D.V	
S	OPD		MW		D.V		M.E		g.y		D.V	
T	OPD		MW		D.V		M.E		g.y		D.V	
U	MW		D.V		M.E		g.y		D.V		OPD	
V	MW		D.V		M.E		g.y		D.V		OPD	
W	MW		D.V		M.E		g.y		D.V		OPD	
X	MW		D.V		M.E		g.y		D.V		OPD	



WORKING AND NURSING SYSTEM OF NURSING DIVISION
1. 6. 1997

ward	chief	No. of staff	No. of one group	No. of Sf. weekday	No. of Sf. St. Sunday	Nursing system	remarks
MA- E	1	16 14	3~4	10~12	3~4	One MW is in charge of 1~2 Pt. room with other group member	
MA- W	1	16 16	4	12	4	"	
GY	1	17 17	4	12	4	"	
Delivery	1	32 31	7~8	12~13	7~8	One MW is in charge of Pt from admission to delivery	one group...as guide MW in OPD one group...as education member in OPD, ward
NCU	1	16 14	3~4	11~12	3~4	one NS is in charge of one baby	
OT	1	17 15	4	12	4		
ICU	1	12 11	2~3	8~9	2~3	one NS is in charge of one patient	
OPD	1	33 32	7	32	7		OPD duty members help when MW/NS absent in other nursing unit by direction of duty chief
CSSD	1	6 6	1~2	4~5	1~2		
TOTAL	9	165 156					

upper: as of Apr. 1
lower: as of Jun. 1

WORKING SYSTEM

The duty group of MW/NS stay in the hospital every four days for 24 hours. Duty group hand over at 7 : 0 0 ~ 7 : 3 0 the next group and chief, then they go home.

WORKING TIME

in the morning 7 : 0 0 ~ 1 1 : 3 0

in the afternoon 2 : 0 0 ~ 5 : 3 0

RULE OF ROTATION

MW who can duty and is allocated at MA-E, MA-W, GY, DELIVERY ROOM and OPD has to move to the next nursing unit following rotation table. The rotation is performed every four months and group of half move.

RULE OF LEAVE

PERMISSION

1. Delivery It is permitted for three months before delivery one month after delivery for two months.
After three months she can work without duty and go home early for breast feeding. When the baby become one year old she must do duty.
2. Disponibilite When she take disponibilite, she must write a letter and get the signature of Nursing Director and NMCHC Director. The letteris transfered to Ministry of Health and decided.
3. the permission for sick or any problem 1day, 2days, 3days
She must fill up permission letter and signature then get signature from Chief, Nursing Director, NMCHC Director.

POLICY OF NURSING DIVISION

- 1- We will contribute to maternal and child health performing high quality service .
- 2- We improve the Nursing Management

OBJECTIVE

- 1- To able to strengthen the Nursing skill .
- 2- To be able to be promator of health education .
- 3- To be able to trust patient and family

គោលការណ៍របស់ផ្នែកថែទាំ

- ១- យើងនឹងផ្តល់នូវសេវាដែលមានគុណភាពខ្ពស់ដល់មាតានិងទារក
- ២- យើងបង្កើនការចាត់ចែងនៃការថែទាំអោយកាន់តែប្រសើរឡើង

ទិសដៅ :

- ១- អាចពង្រឹងជំនាញពីការថែទាំ
- ២- អាចបង្កើនការអប់រំសុខភាព
- ៣- អាចធ្វើអោយអ្នកជម្ងឺនិងគ្រួសាររបស់គេមានការទុកចិត្ត

OBJECTIVE OF NURSING DIVISION

Delivery :

- To strengthen the midwife to observe the woman before delivery properly .
- To strengthen the midwife to response and effect on practicing of delivery .

Maternity East :

- To strengthen the nursing care of mother and baby follow the manual properly .
- Should make the patient trust to the midwife or nurse .
- Should be good communication with other ward .

Maternity West :

- Should practice the duty properly follow the prescription .
- Should speak the smoothly word to the patient .
- Take care the patient thoroughly .
- Should educate the mother every day .
- Assist to clean the room and explain how to use the toilet and throw away the garbage .
- Should have good discipline .
- The uniform should be properly and clean .
- We try to strengthen more , if there is any shortage of NC. technic .

Gynecology :

- The uniform should be properly and clean .
- Should respect the time .
- Improve the quality of nursing care by training .
- Meeting in the ward at least 3 times a week .
- Should appoint one midwife to explain to the patient family .
- Should do hand over properly .
- Should be good communication with each ward .

N.C.U :

- To manage the staff and train more the technical of nursing care .
- Improve on the maintenance of material and equipment .
- Improve on the communication between the other staff , midwife , physician , other ward and the patient .

CSSD :

- To strengthen the sterilization properly to avoid getting the infection .
- Provide and receive the equipment regular time .
- Should make more compress and cotton for stocking .

OPD :

- The staff should have good attitude .
- The midwife should get good uniform and the room should be clean .
- The midwife should respect the time and their duty .
- Should train more how to fill up on the with card and other knowledge .

OT :

- To strengthen discipline
- To strengthen cleaning the material thoroughly before carrying to CSSD for prevention infection .
- Grade up cleaning in the OT room .

ICU :

- Meeting 2 times in a month for improving technic .
- Educate the staff to clean the room everyday .
- Practice the hand over and respect the time .
- Educate the midwife and nurse of good nursing care and explain to family of patient how to take care the patient .

MEETING OF NURSING DIVISION

name of meeting	organizer	member	No. of member	date time	chair person	remarks
Chief committee	Nursing director	chief	10	every Tuesday	rotation	
MW/NS meeting	"	all MW/NS	175	every Wednes.	rotation of chief	the same meeting two times
MW/NS committee	leader or adviser	selected person from MW/NS	15	wednes.	leader	<ul style="list-style-type: none"> • education • nursing care • study/research
mother's class meeting	(Dr. T. Rathavy)	Dr. MW	12	Friday 10~11	Dr. T. Rathavy	
drug and material meeting	chief of meeting (Dr. T. Vochheng)	chief of every section	16	every month	chief of pharmacy	
WORKING GROUP						
curriculum for health center MW	(Dr. O. Sivarin)	nursing D. vice D. chief of OPD	5	Friday 14~16	Dr. O. Sivarin	
curriculum for mother's class	(Dr. T. Rathavy)	MA 2 MW 10	16	Tuesday 10~11	Dr. T. Rathavy	

Drug and Material Management Manual in each service division

- DRUGS -

< In working time >

- Dr. or MA check patients every 8 o'clock AM and write prescription.
- MW or Ns correct these prescription and sum up in the *request & receive paper*.
- MW or Ns go to pharmacy with prescription and *request & receive paper*.
- Pharmacy check the sum and supply drugs.
- MW or Ns return back to each ward, and distribute each patients.

< In duty time > (Use drugs kept in duty shelf)

- Every morning, at 6 o'clock, duty MW or Ns check the actual number of drugs in duty shelf, and keep the record in *Duty drug check book*. [Remain]
- Every morning MW or Ns go to pharmacy with prescription and *request & receive paper*, and receive the drugs.
- MW or Ns return these drugs in duty shelf and keep the record in the *Duty drug book*. [Receive] And calculate total amount on time. [Total]
- When Dr. or MA prescribed in duty time, use these drugs.
- When MW or Ns use these drugs, keep the record in *Duty drug check book*. [Use] And also keep the prescription with the book.
- Before finishing duty work, MW or Ns calculate total usage. [Use Total]
- And also calculate Balance. [Total] - [Use Total] = [Balance]
- This [Balance] should be equal to actual number at that time. [Balance] = [Remain]

- MATERIAL -

Ward chief has a responsibility to manage materials.

- Every Monday morning, chief check the actual number of each materials in the ward. And keep the record in *Material check book*. [Balance]
- Calculate the consumption follow weeks. [Total] - [Balance] = [Consume]
- Fill up the *Drug and Material consumption & request form*
- Go to pharmacy with *Material check book* and *Drug and Material consumption & request form* and *request & receive paper*, and receive Materials.
- Keep the Materials in the store and keep the receive record in the *Material check book*. And calculate Total. [Total]
- Every Month, chief make plan of 1month consumption and submit to **Drug & Material committee** chief 3 days before **Drug and Material meeting**.

របាយការណ៍នៃការងារថែទាំមន្ត្រីថែទាំ / Management Report of Nursing Division

កាលបរិច្ឆេទ / Date														
ផ្នែក Ward	ចំនួនគ្រែ Bed No.	ចំនួនអ្នកជម្ងឺ Patient				ចំនួនជម្ងឺចូល Admission		ចំនួនជម្ងឺចេញ Discharge				ជម្ងឺធ្ងន់ Serious Case		
		សរុប Total	សម្ពាធ Ob	ភេទស្រ្តី Gy	ទារក Baby	សរុប Total	បញ្ជូនពី Transfer from	សរុប Total	រយៈពេលសំរាក Duration	ស្លាប់ Die				
										ម្តាយ/Mother	ទារក/Baby		កុមារ/Ped	
M	F													
សម្ពាធ កើត Maternity East	52													
សម្ពាធ លិច Maternity West	52													
ពេទ្យស្រ្តី Gynecology	34													
សរុប Sub Total	138													
ផ្នែកកុមារ Pediatric	16		០១/០០០	០០/០០០										
បន្ទប់ ICU	4				សំរាល Delivery	សំរាលធម្មតា/Normal Delivery			សំរាលមិនធម្មតា/ Abnormal Delivery			ទារក Baby		
បន្ទប់ Recovery	8					ភ្លោះ Twin	បញ្ជាស Breech	មុនខែ Preterm	ការបូម Vaccum	ការកៀប Forceps	កំទេចលោមី Cranio	♀	♂	កូនកិច្ចដំបូង L B W
វះកាត់ OT		ចំនួន:												
ពិគ្រោះជម្ងឺ OPD	ពិនិត្យផ្ទៃពោះ ANC		ភេទ ស្រ្តី Gy	កុមារ Infant	ចាក់ថ្នាំការពារ Vaccination			សង្គ្រោះបន្ទាន់ Emergency	ពន្យារកំណើត Birth Spacing	ទន្តពេទ្យ Dental	សរុប Total	អប់រំម្តាយ Mother's Class	អេកូសាស្ត្រ Ecto	
ចំនួនអ្នកជម្ងឺ Patient's number		ប្តី P	ស្រ្តី M		ម្តាយ Mother	ទារក Neo	កុមារ Child							

ចំនួនបុគ្គលិក / Number of Staff

ផ្នែក Ward	សរុប TOTAL	យាម Duty	ថ្ងៃ Day	ចុះយាម After Duty	ច្បាប់ Permission	ផ្សេងៗ Other	ឈ្មោះនិងមុខរបរ Name & Res.
សម្ពាធ កើត Maternity East							
សម្ពាធ លិច Maternity West							
ពេទ្យស្រ្តី Gynecology							
កន្លែងសំរាល Delivery							
វះកាត់ OT							
បន្ទប់ ICU / Recovery							
ពិគ្រោះជម្ងឺ OPD							
ផ្នែកកុមារ Pediatric							
បន្ទប់ស្នេហ៍ CSSD							
សរុប TOTAL							

ឡើងវិញនៃបញ្ហាគ្រប់គ្រង Management issue

កាលបរិច្ឆេទ / Date

ឈ្មោះប្រធានផ្នែក / Name of Chief , _____

ផ្នែក/Ward ម៉ោង/Time			ប្រធានផ្នែក Management issue
សម្ព័ន្ធ. កើត Maternity East			
សម្ព័ន្ធ. លិច Maternity West			
រោគស្ត្រី Gynecology			
សំរាល Delivery			
វះកាត់ Operation Theater			
បន្ទប់ ICU / Recovery			
ពិគ្រោះជម្ងឺក្រៅ OPD			
ផ្នែកកុមារ Pediatric			

ផ្សេងៗ / Others

ក្រសួងសុខាភិបាល
មជ្ឈមណ្ឌលជាតិការងារមាតាដំបូង
កាលបរិច្ឆេទ /Date

ព្រះរាជាណាចក្រកម្ពុជា
ជាតិ សាសនា ព្រះមហាក្សត្រ

របាយការណ៍ថ្ងៃ

Daily Management Report

ក្រែសរុប / Total bed
ជម្ងឺនៅសល់ពីមុន/patient Last day
ជម្ងឺចូល /Admission

សម្ព័ន្ធ / Ob រោគស្រ្តី / Gy
ជម្ងឺបញ្ជូនមកពី / Transfer from

ក្រែនៅសល់ / Free bed
ជម្ងឺចេញ / Discharge

អនុញ្ញាត/Permit
គ្មានអនុញ្ញាត/No permit
បញ្ជូនទៅ/Transfer to
ស្លាប់ Die (ទារក/Baby)

ចំនួនអ្នកជម្ងឺសរុប / Total patient

សម្ព័ន្ធ / Ob រោគស្រ្តី / Gy Neo Ped
ជម្ងឺរក្សាទុក O.T សំរាល /Delivery
ទារក/babyស្រី / Girl ប្រុស/Boy

ផ្នែក / Department
បុគ្គលិកសរុប/ Total staff ()
ឈ្មោះអ្នកយាម / Name of Duty

បុគ្គលិកពេលថ្ងៃ /Day staff ()
ចុះយាម/After duty ()
ច្បាប់/Permission ()
ផ្សេងៗ/Others ()

ផ្ទៃពោះ / Existence

លេខក្រែ Bed No.	ឈ្មោះ Name	អាយុ Age	រោគវិនិច្ឆ័យ Diagnosis	ស្ថានភាពជម្ងឺ Patient Condition

ជម្ងឺដែលត្រូវតាមដាន Observation Patient

ផ្នែកជំងឺចេញពីមន្ទីរពេទ្យ Discharge Patient
 ផ្នែកជំងឺចូលមកពេទ្យ Admission Patient

ឈ្មោះ Name	អាយុ Age	លេខគ្រែ Bed No.	សម្ព័ន្ធភេសិក្ខា Ob+Gy	រោគវិនិច្ឆ័យ (រយៈពេលសំរាកពេទ្យ) Diagnosis (Period of admission)

ចេញនាវកនាវមន្ទីរកុមារ / Transfer the baby to Pediatric

លេខគ្រែ Bed No	ឈ្មោះម្តាយ Mother's name	កាលបរិច្ឆេទសំរាល Delivery date	អាប៊ីហ្ស័រ Apgar	ភេទ Sex	ទម្ងន់ Weight	បញ្ហា Problem

រឿងបំបាត់ចិត្តកុមារករណីនៅនាវមន្ទីរ / Management matter in the ward

ហត្ថលេខាប្រធានក្រុមគ្រូពេទ្យ / Signature of duty chief

ក្រសួងសុខាភិបាល
មជ្ឈមណ្ឌលជាតិគាំពារមាតានិងទារក

ព្រះរាជាណាចក្រកម្ពុជា
ជាតិ សាសនា ព្រះមហាក្សត្រ

កាលបរិច្ឆេទ / Date

របាយការណ៍ថ្ងៃ

ត្រែសរុប / Total bed

Daily Management Report

ផ្នែក / Department

ជម្ងឺនៅសល់ពីមុន/patient Last day

បុគ្គលិកសរុប/ Total staff ()

ជម្ងឺចូល / Admission

សម្ព័ន្ធ / Ob រោគស្រ្តី / Gy

ឈ្មោះអ្នកយាម / Name of Duty

ជម្ងឺបញ្ជូនមកពី / Transfer from

ត្រែនៅសល់ / Free bed

អនុញ្ញាត/Permit

ជម្ងឺចេញ / Discharge

គ្មានអនុញ្ញាត/No permit

បញ្ជូនទៅ/ Transfer to

ស្លាប់/ Die (ទារក/Baby)

ទំនួលស្រុកជម្ងឺសរុប / Total patient

សម្ព័ន្ធ / Ob រោគស្រ្តី/ Gy Neo Ped

បុគ្គលិកពេលថ្ងៃ / Day staff ()

ជម្ងឺកាត់ O.T សំរាល / Delivery

ចុះយាម/After duty ()

ទារក/babyស្រី/ Girl ប្រុស/Boy

ច្បាប់/Permission ()

ផ្ទៃពោះ / Existence

ផ្សេងៗ/ Others ()

ជម្ងឺដែលត្រូវតាមដាន Observation Patient

លេខត្រែ Bed No.	ឈ្មោះ Name	អាយុ Age	រោគវិនិច្ឆ័យ Diagnosis	ស្ថានភាពជម្ងឺ Patient Condition

ផ្នែកជំងឺចេញពីមន្ទីរពេទ្យ Discharge Patient
 ផ្នែកជំងឺចូលមកពេទ្យ Admission Patient

ឈ្មោះ Name	អាយុ Age	លេខគ្រែ Bed No.	សប្តាហ៍ភេស្ត្រ Ob+Gy	រោគវិនិច្ឆ័យ (រយៈពេលសំរាកពេទ្យ) Diagnosis (Period of admission)

ចេញនាវកទៅមន្ទីរកុមារ / Transfer the baby to Pediatric

លេខគ្រែ Bed No	ឈ្មោះម្តាយ Mother's name	កាលបរិច្ឆេទសំរាល Delivery date	អាច់ហ្គ័រ Appar	ភេទ Sex	ទម្ងន់ Weight	បញ្ហា Problem

រៀបចំចាត់ចែងក្នុងកន្លែងនៃនាវក / Management matter in the ward

ហត្ថលេខាប្រធានក្រុមគ្រូពេទ្យ / Signature of duty chief

របាយការណ៍ថ្ងៃ
Daily Management Report

បន្ទប់សំរាល
Delivery Room

កាលបរិច្ឆេទ/Date

ចំនួនបុគ្គលិកសរុប / Total staff ()

ឈ្មោះន្នកប្រចាំការណ៍ / Name of duty

បុគ្គលិកគេលថ្ងៃ/Day staff () បុគ្គលិកចុះយាម/After Duty () បុគ្គលិកសុំឱ្យប្រើ/Permission () ផ្សេងៗ / Other _____

ឈ្មោះ Name	អាយុ Age	ថ្នាក់ Ward	ម៉ោងសំរាល Time of delivery	វិធីសំរាល / Method of delivery ធម្មតា . ភ្លេច . ប្រញោស . មុនថ្ងៃ Normal . Breech . Twin . Premature វិធីធម្មតា : បូ.ការរៀន តំបន់លូហ្វី Abnormal . Vacuum . Forceps . Crania	អាប៉ូហ្គារ Apgar	ទម្ងន់ Weight	ទម្ងន់ Neonate		
							ភេទ Sex	រស់ Alive	ស្លាប់ Dead

ការបញ្ជូនទារកទៅផ្នែកកុមារ / Transfer baby to pediatric

ឈ្មោះម្តាយ / Mother's name	បញ្ហា / problem

រៀបចំចាត់ចែងករណីផ្សេងៗនៅកន្លែងសំរាល / Management in Delivery Room

ហត្ថលេខា / Signature _____

របាយការណ៍ប្រចាំថ្ងៃ
Daily Management Report

ផ្នែកវះកាត់ / Operation Theater

កាលបរិច្ឆេទ / Date

ចំនួនបុគ្គលិកសរុប / Total staff ()

ឈ្មោះអ្នកប្រចាំការណ៍ / Name of duty

បុគ្គលិកពេលថ្ងៃ day staff _____ () បុគ្គលិកចុះយាម After duty _____ () បុគ្គលិកសុំច្បាប់ Permission _____ () ផ្សេងៗ/ Other _____

ឈ្មោះ Name	អាយុ Age	ថ្នាក់ Ward	រោគសញ្ញា Ob Lix	រោគវិនិច្ឆ័យ Diagnosis	ការវះកាត់ Operation	បញ្ជូនទៅ Transfer to

រឿងបំបែកចែកករណីផ្សេងៗនៅកន្លែងវះកាត់ / Management matter in operation theater

ហត្ថលេខា / Signature _____

របាយការណ៍ថ្ងៃ
Daily Management Report

ផ្នែកពិគ្រោះជម្ងឺក្រៅ / Out Patient Department

	ពិនិត្យផ្ទៃពោះ ANC		ភេទ ស្រី Gy	កុមារ Infant	ចាក់ថ្នាំការពារ Vaccination			សង្រ្គោះបន្ទាន់ Emergency	ពន្យារកំណើត Birth Spacing	ទន្តពេទ្យ Dental	សរុប Total	អប់រំម្តាយ Mother's Class	អេកូសាស្ត្រ Echo
	ប្រុស P	ស្រី M			ម្តាយ Mother	ទារក Neo	កុមារ Child						
ចំនួនអ្នកជម្ងឺ Number of patient													
ចំនួនបុគ្គលិក សរុប Total staff													
ចំនួនបុគ្គលិក ពេលថ្ងៃ Day staff													
បុគ្គលិកចុះ យាម After duty													
បុគ្គលិកច្បាប់ Permission													
ផ្សេងៗ Other													
ឈ្មោះ បុគ្គលិក ប្រចាំការ Name of duty													

រៀបចំចាត់ចែងករណីផ្សេងៗនៅផ្នែកពិគ្រោះជម្ងឺក្រៅ / Management matter in Out Patient Department

កាលបរិច្ឆេទ / Date _____

ហត្ថលេខា / Signature _____

របាយការណ៍រៀបចំថ្ងៃ
Daily Management Report

ផ្នែកថែទាំជំងឺធ្ងន់ធ្ងរ
Intensive Care Unit , Recovery Room

កាលបរិច្ឆេទ / Date :

ចំនួនបុគ្គលិកសរុប / Total staff ()

ឈ្មោះអ្នកប្រចាំការណ៍ / Name of duty

បុគ្គលិកពេលថ្ងៃ day staff _____ () បុគ្គលិកចុះឃាម After duty _____ () បុគ្គលិកសុំច្បាប់ Permission _____ () ផ្សេងៗ / Other. _ _

ឈ្មោះ Name	អាយុ Age	ផ្នែក Ward	រោគសញ្ញា សម្ព័ន្ធ Ob Gyn	រោគវិនិច្ឆ័យ Diagnosis	ស្ថានភាពជំងឺ Patient condition	បញ្ជូនមកដំ Transfer from

រឿបចំចាត់ចែងករណីផ្សេងៗនៅកន្លែងវះកាត់ / Management matter in Intensive Care Unit

ហត្ថលេខា / Signature _____

របាយការណ៍ប្រចាំថ្ងៃនៃផ្នែកវិទ្យាសាស្ត្រវះកាត់

Daily Report of CSSD

កាលបរិច្ឆេទ / Date	ប្រធានផ្នែក / Chief
ឈ្មោះបុគ្គលិក / Staff name	ឃាម / Duty
	បុគ្គលិកច្បាប់ / Permission

ចំនួនអ្នកប្រើប្រាស់កំពុងដំណើរការណ៍ / The number of autoclave operation

1
2

ចំនួនសម្ភារៈដំឡើងក្នុងវិទ្យាសាស្ត្រវះកាត់
The number of sterilization equipment and material

ផ្នែកថែទាំ Nursing Unit	សម្ភារៈ Equipment	បរិក្ខារ / Material											
		តំប៉ុង Dressing Compress	តំប៉ុង Cotton Ball	តំប៉ុង OT Compress	តំប៉ុង Square Compress	តំប៉ុង Tampong							
សម្ព័ន្ធ កើត Maternity E													
សម្ព័ន្ធ លើច Maternity .W													
រោគស្ត្រី Gynecology													
សំរាល Delivery													
បន្ទប់ NCU													
ផ្នែកវះកាត់ Operation theater													
ពិនិត្យជម្ងឺក្រៅ OPD													
បន្ទប់ ICU													
ផ្នែកអមវេជ្ជសាស្ត្រ Para Clinic													
សរុប TOTAL													

ការងារដ៏សំខាន់ៗ / Management matter

ពិនិត្យ / Check

<input type="checkbox"/> ប្រភពចរន្ត / Sources of electricity <input type="checkbox"/> វាល់បើកទឹក Water valve	<input type="checkbox"/> ចាក់សោរ / Lock <input type="checkbox"/> ប្រអប់ដាក់សម្ភារៈស្តើរ / Pass box <input type="checkbox"/>
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WORKS OF CHIEF

Public service regulations

- working time (check and leading)
- working table
- working plan

Nursing care management

- direction of nursing system
- to lead nursing care (plan,do,check)and case conference
- to check nursing record
- to lead and keep the nursing standards and manual
- management of patient bed (transfer,isolation)
- to keep safety environment of patients
- to evaluate quality of nursing care from patient's response and objective view
- information of patient condition to the next duty, nursing director

Education

- orientation to staff,trainee,students,worker
- to make education plan
- to promote education of staff (inservice,outside)
- education of patients
- to have conference and interview for trainee,student
- evaluation

Management of medicine,material,equipment

- to direct MW/Ns to give medicine properly
- to request proper amount of material
- to keep clean and quality

Safety management

- to prevent accident
- to prevent infection
- fire prevention

Participation of meeting,training

- as a member
- as a trainer

Information

- nursing director
- MD/MA
- others

Management of user fee

DUTY WORK OF NURSING MANAGEMENT

to get the situation of nursing management on that day and
to adjust

1 .admission

- number of in patient
- bed occupancy
- serious patient's condition
- to lead patient care properly
- to check nursing chart

2. OPD

- emergency patient care(if necessary)

3. OT

- operation patient care (if necessary)

4. staff

- staff condition and accountability
(who works,who leaves)
- coordination of staff and work

5. to cope with the problem of medicine,equipment,material,environment

6. to collaborate MD/MA, comedical staff and administration staff

Duty chief must round every nursing unit more than tow times
and hand over to nursing director

TASK OF MIDWIFE

(Draft)

classification of NC I	classification of NC II
1 measure	fundus uteri. volume of bleeding. abdominal size. pelvis. volume of urine. BP. FHT. new born baby CTG uterus contraction.
2 examination and interview	abdominal. fetal (size. position. habitus. presentation) amnion. cervical canal. whole body condition anamnesis (general. obstetrical) urine new born baby. apgar score. placenta
3 diagnosis	to calculate EDD. every term of pregnancy (normal. abnormal → consult Dr.) every stage of labor (normal. abnormal → consult Dr.) postpartum (normal. abnormal → consult Dr.) new born baby (normal. abnormal → consult Dr.)
4 birth attendant	
5 treatment	vaccination. clipping of umbilical cord. episiotomy. local anesthesia. suture of laceration. suction of respiratory tract. eye drop. breach extraction. resuscitation → call Dr.
6 nursing care and education	timely. proper education of every period (antenatal. perinatal. postnatal) to relieve anxiety. fear pain. mother's class. suckling. breast feeding. home care BS.
7 record	delivery record white card

SERVICE OF MW IN THE DELIVERY WARD

DUTY(1st group)	2nd group	3rd group
delivery, labor room 8 people	education 8 people	<i>guide</i> midwife in OPD 8people
<ol style="list-style-type: none"> 1. nursig care of delivery patient <ul style="list-style-type: none"> -interview -examination & diagnosis -observation of the progress of delivery, fetus -education at the bedside -aid of taking food and excretion -make comfortable environment 2. birth attendant <ul style="list-style-type: none"> -aid of progress of delivery and write record -observation of patient and fetus condition 3. the care of new born baby <ul style="list-style-type: none"> -observation -identification 4. prevention of infection <ul style="list-style-type: none"> -keep clean all 5. observation for 2hours after delivery and hand over to materniy ward 6. management of equipment and record <ul style="list-style-type: none"> -statistics 7. information to ND 	<ol style="list-style-type: none"> 1. participate and assist mother's class 2. education for mothers before discharge from the maternity ward 3. education of students (Ns, MW school) in delivery ward 	<ol style="list-style-type: none"> 1. guide for patients <ul style="list-style-type: none"> -the procedure of registration -place -haw to pay the fee 2. information <ul style="list-style-type: none"> -activity 3. respond to patient's question 4. collaborate with technical, accounting bureau every consultation and paraclinic 5. control patients if reception is crowded

MOTHER' S CLASS ACTIVITIES IN NMCHC (draft)

AIMS :

1. To support and give information to mothers who are faced with pregnancy,delivery and child care
2. To promote educational activities
3. To improve the teaching method of the educator

PLACE :

1. First floor hall : from first month to fifth month
2. Mother' s classroom : from sixth month to delivery
3. Second floor hall : puerperal patient

METHOD :

1. We divide the members into 3 groups .
2. We plan schedule of educators.
3. All members can teach in each class .

CONTENT :

- I Antenatal care - from first month to fifth month
 - 1 Antenatal care information
 - 2 Visiting antenatal care
 - 3 Tetanus toxoid
 - 4 Baby' s growth
 - 5 Nutrition
 - 6 Risk factors
 - 7 White card
- II Antenatal care - from six month to delivery
 - 1 Birth spacing
 - 2 Delivery(time of admission , preparation for delivery)
 - 3 Breast care
 - 4 Instructions for daily life

III Postnatal care - puerperal patient

- 1 Newborn care
- 2 Breast feeding
- 3 Nutrition
- 4 Immunization
- 5 Birth spacing
- 6 Hygiene
- 7 Yellow card

TEACHING AIDS :

- I Video , Flip chart , Poster , Magnet board , Food model
- II Video , Magnet board , Birth spacing kit
- III Video , Flip chart , Birth spacing kit

WEEKLY MEETING :

We hold mother' s class meeting on Friday.

Members : Physicians 5 Midwives 12

The implementation of mother' s class meeting

DATE	AGENDA
10 / Apr	How to bring patients to the mother' s class room How to guide patients around the hospital
28 / Apr	How to increase the number of patients
12 / May	To divide the midwives into 3 groups To plan schedule of educators To organize the working group : manual , video , pamphlet
19 / May	Choose members of working group To discuss the purpose with working group members
27 / May	To discuss the subject matter with working group members

WORKING GROUP :

We hold the working group meeting on Tuesday.

Members : Physicians 4 Medical assistants 2 Midwives 10

Purpose :

1 Manual group :

To improve the subject matter and give extensive knowledge

To be useful for teaching

2 Video group :

To understand the contents immediately

To assist midwife' s explanation

3 Pamphlet group :

To increase the number of patients

To give information to patients

GUIDELINE OF ACTIVITIES :

To activate the mother' s class

To strengthen educational activities

To develop educator in the district

To cooperate with NGO

Sheet1

Number of ANC & Mother's Class

Date	ANC	MC	MC/ANC (%)
2.May.'97 (Fri)	67	38	56.7%
5.May.'97 (Mon)	87	26	29.9%
6.May.'97 (Tue)	47	31	66.0%
7.May.'97 (Wed)	48	23	47.9%
8.May.'97 (Thu)	42	32	76.2%
9.May.'97 (Fri)	28	20	71.4%
12.May.'97 (Mon)	70	53	75.7%
13.May.'97 (Tue)	30	13	43.3%
14.May.'97 (Wed)	21	14	66.7%
15.May.'97 (Thu)	40	30	75.0%
16.May.'97 (Fri)	37	25	67.6%
19.May.'97 (Mon)	60	31	51.7%
20.May.'97 (Tue)	56	38	67.9%
22.May.'97 (Thu)	65	44	67.7%
23.May.'97 (Fri)	53	27	50.9%
27.May.'97 (Tue)	46	26	56.5%
28.May.'97 (Wed)	50	31	62.0%
29.May.'97 (Thu)	49	20	40.8%
30.May.'97 (Fri)	36	12	33.3%

total	932	534	***
average	49.1	28.1	57.3%

Mother's class April-May 1997

Number of mothers

April	440
May	534
total	974

primipara	406
multipara	565
no answer	3
total	974

Age total = 971 mothers

	primipara	multipara	total
minimum	15	18	15
maximum	44	48	48
average	24.8	29.1	27.3 (years)

pregnant weeks total = 969 mothers

<20weeks	139
>21weeks	830
total	969 (person)

	primipara	multipara	no answer	total
count	403	563	3	969 (person)
minimum	3	3		3 (weeks)
maximum	41	41		41
average	29	29.2		29.1

number of children total = 971 mothers

minimum	1
maximum	14
average	2.31 (children)

attendance times of mother's class

	1st time	2nd times	3rd times	4th times	5th times	total
April	392	43	5	0	0	440
May	376	119	30	5	1	531
total	768	162	35	5	1	971
(%)	79.09%	13.80%	1.77%	0.17%	0.03%	100.00%

MIDWIFE, NURSE TRAINING PLAN

trainee	object	organizer	date or period	contents
chief	to be able to improve management knowledge and skill	nursing director	every month the fourth Tuesday 9:00~10:00	-leader ship -solve problems -assess self N.unit -motivation
team leader	to be able to improve midwifery and nursing care	nursing director	every month the second Friday 9:00~10:00	-care plan -safety management -communication skill -responsibility
MW/NS (general)	MW/NS COMMITTEE perform from planning to evaluation			

MIDWIFE • NURSE COMMITTEE

	Education	Nursing Care	Study/Research
Adviser	Ou Saroeun	Ouk Chantha	Tai Leang Chou
Leader	Chen Sokhala	Ang Sareth	Srey punlork
Member	Kroch Sary Sann Vanna Mao Yim Chhe Sary	Dith Samon Deng kheang Bo Saroeun Chea Sonita	Y Ngin Eng Neal Srey Cheuda Kheng Sophan Oung Lida
Object	<ul style="list-style-type: none"> - grade up quality of task of MW/NS - realize the essential meaning of nursing care 	<ul style="list-style-type: none"> - improve nursing manual - reconsider the routine work and change 	<ul style="list-style-type: none"> - find out problem and summarize - consider presentation
content (example)	<ul style="list-style-type: none"> • theory (nursing, physiology, pathology, pharmacology...) • ethics • communication and attitude • leader-ship • teaching method 	<ul style="list-style-type: none"> • prevent infection <ul style="list-style-type: none"> -how to clean -how to use ~ • how to record • how to care • first aid 	<ul style="list-style-type: none"> • case study • survey • statistics

MIDWIFE TRAINING ACTIVITIES IN NMCHC (draft)
HEALTH CENTER LEVEL

AIMS :

1. To be able to detect high risk pregnancies early for referral
2. To emphasize health promotion
3. To improve the skill of normal delivery
4. To give the midwife practical experience

PERIOD : 4 weeks

TRAINING INSTITUTE :

National Maternal and Child Health Center(NMCHC)

TRAINING FACILITIES IN NMCHC :

third floor of the south wing

- training room : 40 people 1
- 21 people 2
- dormitory room : 8 people 2
- 6 people 1

TRAINING SCHEDULE IN NMCHC :

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
MW	16	16	16	16	16	16	16	16	16	16	16	16

MIDWIFE TRAINING CURRICULUM (draft)

CLINICAL TRAINING :

We train the trainees in the morning (from 8 to 11 am).

We divide the trainees into 4 groups.

The members remain at the hospital on night duty in the delivery room.

CLINICAL TRAINING SCHEDULE:

	DV	MA(east)	MA(west)	OPD	NEO
① MON	A	B		C	D
TUE	A	B		C	D
WED	A	B		C	D
THU	A	B		C	D
FRI	A	B		C	D
② MON	B		C	D	A
TUE	B		C	D	A
WED	B		C	D	A
THU	B		C	D	A
FRI	B		C	D	A
③ MON	C		D	A	B
TUE	C		D	A	B
WED	C		D	A	B
THU	C		D	A	B
FRI	C		D	A	B
④ MON	D	A		B	C
TUE	D	A		B	C
WED	D	A		B	C
THU	D	A		B	C
FRI	D	A		B	C

DUTY IN THE DELIVERY ROOM : first , second , third week

- I Friday night 7p.m.- 7a.m.
- II Saturday 7a.m.- 7p.m.
- III Saturday night 7p.m.- 7a.m.
- IV Sunday 7a.m.- 7p.m.

	I	II	III	IV
A	first week	second week	third week	
B		first week	second week	third week
C	third week		first week	second week
D	second week	third week		first week

LECTURE SCHEDULE (draft)

LECTURE : We lecture the trainees in the afternoon(from 2 to 5 pm).

CONTENT

I ANTENATAL CARE

- 1 Introduction to antenatal care
- 2 How to use white card
- 3 Minor pregnancy problems
- 4 Major pregnancy problems
- 5 At risk pregnancies and tools of at risk assessment
- 6 Introduction to the mother' s class

II DELIVERY

- 1 First stage
- 2 Partograph
- 3 Second stage normal
- 4 Second stage abnormal
- 5 Third and fourth stages
- 6 Newborn care
- 7 Risk detection and referral

III POSTNATAL CARE

- 1 Postnatal care
- 2 Newborn care / yellow card
- 3 Breast feeding / birth spacing
- 4 Infection / immunization

Lecture 80 minutes Break 20 minutes

① MON	I - 1
TUE	I - 2
WED	I - 3
THU	I - 4
FRI	WEEKLY EVALUATION
② MON	I - 5
TUE	I - 6
WED	II - 1, 2
THU	II - 3
FRI	WEEKLY EVALUATION
③ MON	II - 4
TUE	II - 5
WED	II - 6
THU	II - 7
FRI	WEEKLY EVALUATION
④ MON	III - 1
TUE	III - 2
WED	III - 3
THU	III - 4
FRI	WEEKLY EVALUATION

ឈ្មោះអ្នកសិក្សាប្រចាំប្រទេស

Trainees name list of outside country

បច្ចេកទេសជំនាញ Qualification	ឈ្មោះ Name	អាយុ Age	រយៈពេល Period	ប្រទេស Country	មុខវិជ្ជា Name of Course	កំណត់ចំណាំ Remarks
助産師 副主任	オウ・サルーン	47	95.10.17 95.12.9	日本	カウンセラー・パート研修	7週間
看護士長	グロウ・サリー	44	96.9.15 96.11.9	"	"	"
助産師	ティン・キアン	38	"	"	"	"
"	スオン・ハンナ	35	96.10.1 97.8.29	"	アセアン 臨床看護コース 国際看護交流協会	11ヶ月
看護士部長	チン・チャンタイ	47	97.1.13 97.3.9	"	イボント 母子保健看護コース JICA 国際看護交流協会	8週間
副看護部長	タイ・リン・チュウ	46	"	"	"	"
外来看護	チェン・ソ.カラ	48	"	"	"	"