किंग जॉर्ज चिकित्सा विश्वविद्यालय उ०प्र0, लखनऊ 226003

कुलसचिव कार्यालय

फोन एण्ड फैक्स : 91-0522-2253171 ई-मेल : registrar@kgmcindia.edu

संख्याः .

/योजना अनु0/2022

दिनांकः १०७ / 2022

सेवा में.

प्रमुख सचिव, उत्तर प्रदेश शासन, चिकित्सा शिक्षा विभाग, (अनुभाग-2), लखनऊ।

विषय:-

भारत सरकार योजनान्तर्गत किंग जार्ज चिकित्सा विश्वविद्यालय उ०प्र०, लखनऊ में रीजनल जीरियाट्रिक सेन्टर/जीरियाट्रिक मेडिसिन विभाग की स्वापना (100 प्रतिशत भारत सरकार के स्तर से स्वीकृत) हेतु प्रशासकीय एवं वित्तीय स्वीकृति प्रदान करने एवं कार्यदायी संस्या का निर्धारण करने के सम्बन्ध में।

महोदय,

कृपया उपर्युक्त विषयक इस कार्यालय के पत्र संख्या-13621/योजना अनु0/2020 दिनांक 16.03.2020 (संलम्नक-1) एवं पत्र संख्या-11738/योजना/2021 दिनांक 23.01.2021 (संलम्नक-2) एवं पत्र संख्या-12011/योजना अनु0/2021 दिनांक 23.01.2021 तथा पत्र संख्या-2481/योजना अनु0/2021 दिनांक 23.01.2021 तथा पत्र संख्या-2481/योजना अनु0/2021 दिनांक 14.06.2021 एवं पत्र संख्या-4603/योजना अनु0/2021 दिनांक 04.08.2021 का संदर्भ प्रहण करने की कृपा करें, जिसके द्वारा भारत सरकार योजनान्तर्गत किंग जार्ज विकित्सा विश्वविद्यालय उ0प्र0, लखनऊ में रीजनल जीरियाट्रिक सेन्टर/जीरियाट्रिक मेडिसिन विभाग की स्थापना हेतु उ0प्र0 राजकीय निर्माण निगम लि0 से प्राप्त प्रारम्भिक प्रस्ताव/आगणन रूप 498.16 लाख एवं मानवित्र/ले-आउट त्वान पर सद्यम प्राधिकारी एवं विकित्सा विश्वविद्यालय के अभियंताओं की संस्तुति/सहमित सिहत शासन को प्रेषित कर उक्त परियोजना हेतु कार्यदायी संस्था को नामित करने के साथ-साथ आगणन/प्रस्ताव की प्रशासकीय एवं वित्तीय स्वीकृति प्रदान करने का अनुरोध किया गया है।

उपरोक्त के कम में शासन के पत्र संख्या-1105/71-2-2021 दिनांक 03.08.2021 एवं पत्र संख्या-1535/71-2-2021 दिनांक 12.08.2021 द्वारा प्रश्नगत प्रायोजना के सम्बन्ध में कितपय बिन्दुओं पर आख्या चाही गई थी, जो प्रो0 कौसर उस्मान, आफिशिएटिंग विमाग, जीरियाट्रिक मेडिसिन विमाग, के0जी0एम0यू0 के पत्र संख्या'1756/मेडिसिन/21 दिनांक 28.08.2021 द्वारा शासन की पृच्छा के कम में बिन्दुवार आख्या उपलब्ध कराई गई थी, जो इस कार्यालय के पत्र संख्या-5754/योजना अनु0/2021 दिनांक 31.08.2021 द्वारा प्रीयत करते हुए भारत सरकार योजनान्तर्गत किंग जार्ज चिकित्सा विश्वविद्यालय उ०प्र0, लखनऊ में रीजनल जीरियाट्रिक सेन्टर/जीरियाट्रिक मेडिसिन विमाग की स्थापना हेतु पूर्व प्रीयत आगणन स्0 498.16 लाख स्0 5.00 करोड़ की सीमा के अन्तर्गत होने के कारण महानिदेशक, चिकित्सा शिक्षा एवं प्रशिक्षण उ०प्र0, लखनऊ की अध्यक्षता में गठित तकनीकी समिति से आगणन का परीक्षत कराते कार्यदायी संस्था का निर्धारण एवं प्रशासकीय एवं वित्तीय स्वीकृति प्रदान का अनुरोध किया गया है, जो शासन में विचाराधीन है।

उपरोक्त के कम में अवगत कराना है कि भारत सरकार, स्वास्थ्य एवं परिवार कल्याण मंत्रालय, निर्माण भवन, नई दिल्ली के पत्र संख्या-T-21020/2013-NCD-(i) दिनांक 01 फरवरी, 2016 (संलग्नक-3) द्वारा प्रश्नगत प्रायोजना हेतु निम्नवत् प्राविधान किया गया है:-

| Item/Component | Non Recurring | Recurring (for the Plan Period) |
|--|---------------|--|
| Regional Geriatric Centre (8 exsting and 12 new) | | |
| i) Civil works and furniture of 30 bedded Geriatric Unit @ Rs. 200.00 lakh per unit for 12 new Unit | 2400.00 | The state of the s |
| ii) Machinery and Equipment @ 50 lakh Item/component | 600.00 | - |
| Per Unit for 12 new Units | | |
| iii) Drugs and consumables | \ | 1200.00 |
| in) Drugs and consumators | | 2400.00 |
| iv) Research Activities | | 5023.00 |
| v) Human Resources (Contractual) | | 260.00 |
| vi) Training activities | - | 1200.00 |
| vii) Pilot vaccination to 75 + elderly | | 306.00 |
| viii) Meeting/Review /IEC | | 600.00 |
| ix) Machinery & Equipment | | 220.00 |
| x) Home visits and home based care | | 2000.00 |
| Special initiatives for the 75 + population | | |
| National Level Activities Including IEC, Research Study, Survey Staff | | 1000.00 |
| i) IEC, monitoring and Evaluation | | 507.00 |
| ii) Reseach Study | | 2000.00 |
| iii) Survey (through LASI) | | 580.00 |
| iv) Staff | | 400.00 |
| to the total management of the | | 1680.00 |
| v) Contingency/ TA/ DA/Training/ Others State Level Activities (Review/ Monitoring/IEC/ meetings/training etc. | | 19376.00 |
| Total | 3000.00 | 22376.00 |
| Total Project cost | | (3000.00 + 19376.00 |
| I dan i roject cost | | कुमश:2/- |

उपरोक्त के अतिरिक्त यह भी अवगत कराना है कि उक्त परियोजना हेतु स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के पत्र संख्या-T-21011/02/2016-NCD dt. 13.03.2016 (संलग्नक-4) द्वारा स्0 100.00 लाख (Civil work, furniture, machinery, equipment), एवं पत्र सख्या-T-21011/02/2016-NCD(III) dt. 24.05.2016 (संलग्नक-5) द्वारा रू0 150.00 लाख (Civil work, furniture, machinery, equipment) निर्माण मद में कुल स्त 2.50 करोड़ तथा मशीनें और सज्जा/उपकरण संवंत्र (machinery & equipment, drugs & consumable, research, activities, humen resources (contractual & training)) हेतु स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के पत्र संख्या-T-21011/02/2016-NCD dt. 20.01.2017 (संलग्नक-6) द्वारा उपकरण मद में स0 97.11 लाख महायोग रू0 347.11 लाख (निर्माण मद में रू0 250.00 लाख + उपकरण मद में रू0 97.11 लाख) भारत सरकार द्वारा राज्य सरकार को उपलब्ध कराई जा चुकी है।

अतः उपरोक्त के परिप्रेक्ष्य में वर्णित संलग्नकों के पत्रों की प्रतियाँ पुनः प्रेषित करते हुए अनुरोध है कि भारत सरकार योजनान्तर्गत किंग जार्ज चिकित्सा विश्वविद्यालय उ०प्र०, लखनऊ में रीजनल जीरियाट्रिक सेन्टर/जीरियाट्रिक मेडिसिन विभाग की स्थापना (100 प्रतिशत भारत सरकार के स्तर से स्वीकृत) हेतु पूर्व प्रेषित आगणन स्0 498.16 लाख स्0 5.00 करोड़ की सीमा के अन्तर्गत होने के कारण महानिदेशक, चिकित्सा शिक्षा एवं प्रशिक्षण उ०प्र०, लखनऊ की अध्यक्षता में गठित तकनीकी समिति से आगणन का परीक्षण कराते कार्यदायी संस्था का निर्धारण एवं प्रशासकीय एवं वित्तीय स्वीकृति प्रदान करते हुए <u>चालू वित्तीय वर्ष 2022-23 में</u> के0जी0एम0यू0, लखनऊ में नेशनल प्रोग्राम फार हेल्थ केयर फॉर दी एल्डरली परियोजना हेतु अनुदान संख्या-031-चिकित्सा विमाग (चिकित्सा शिक्षा एवं प्रशिक्षण)-4210-चिकित्सा तथा लोक स्वास्थ्य पर पूँजीगत परिव्यय, 03-चिकित्सा शिक्षा, प्रशिक्षण तथा अनुसंधान, 105-एलोपैयी-76-के0जी0एम0यू0 लखनऊ में नेशनल प्रोग्राम फार हेल्य केयर फॉर दी एल्डरली(के.100/रा..-के.)-24-वृहत निर्माण कार्य मद में स्व 250.00 लाख की स्वीकृति प्रदान करने की कृपा करें, जिससे इस धनराशि का उपभोग करने के उपरान्त निर्माण मद में भारत सरकार से शेष धनराशि की मॉग की जा सकें।

संलग्नक:-यद्योपरि।

भवदीय (आशुतोष कुमार द्विवेदी) कुलसचिव

पृष्ठांकन ५८३३ /योजना अनु0/2022 दिनांक-ययोक्त। प्रतिलिपि:- निम्नलिखित को सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित:-

सचिव, उत्तर प्रदेश शासन, चिकित्सा शिक्षा अनुमाग-2, लखनऊ। 1.

संयुक्त सचिव, उत्तर प्रदेश शासन, चिकितसा शिक्षा अनुमाग-2, लखनऊ। 2.

महानिदेशक, चिकित्सा शिक्षा एवं प्रशिक्षण, उत्तर प्रदेश, जवाहर भवन, लखनऊ। प्रो0 कौशर उस्मान, आफिशिएटिंग विमागाध्यक्ष, जीरियाट्रिक मेडिसिन विभाग, के0जी0एम0यू0, लखनऊ। 3.

वित्त अधिकारी, किंग जार्ज चिकित्सा विश्वविद्यालय उ०प्र०, लखनऊ।

इकाई प्रभारी, इकाई-10, उ०प्र० राजकीय निर्माण निगम लि0, के0जी0एम0यू0 परिसर, लखनऊ। 5.

श्री दिनेश कुमार राज, अधिशासी अभियंता(सिविल), निर्माण विमाग, के0जी0एम0यू०, लखनऊ। 6.

7. कुलपति जी के निजी सचिव को मा0 कुलपति जी के अवलोकनार्थ।

(आशुतोष कुमार द्विवेदी)

क्षित्यादिक मेडिविय

किंग जॉर्ज चिकित्सा विश्वविद्यालय 🗘 🗘 एउ, लखनऊ 226003



कुलसचिव कार्याः

फोन : 91-0522-2258365 फैक्स : 91-0522-2253171 ई-मेल : registrar@kgmcindia.edu

दिनांक: 3/ /08 / 2021

संख्याः/योजना अनु0/2021

सेवा में.

अनु सचिव, उत्तर प्रदेश शसान, चिकित्सा शिक्षा अनुभाग-2,

लखनऊ। भारत सरकार योजनान्तर्गत किंग जार्ज चिकित्सा विश्वविद्यालय उ०प्र०, लखनऊ में रीजनल जीरियाट्रिक सेन्टर/जीरियाट्रिक मेडिसिन विमान की स्थापना हेतु प्रशासकीय एवं वित्तीय स्वीकृति के सम्बन्ध में।

महोदय,

कृपया उपर्युक्त विषयक अपने कार्यालय के पत्र संख्या-1105/71-2-2021 दिनांक 03 अगस्त, 2021 एवं पत्र संख्या-1535/ 71-2-2021 दिनांक 12.08.2021 का संदर्भ ग्रहण करने की कृपा करें, जिसके द्वारा भारत सरकार योजनान्तर्गत किंग जार्ज विकित्सा विश्वविद्यालय २०४०, तक्षनक मे रीजनल जीरियाट्रिक सेन्टर∕जीरियाट्रिक मेडिसिन विमाग की स्थापना हेतु प्रस्तावित निर्माण कार्य का उठप्रठ राजकीय निर्माण निगम लि0 से प्राप्त प्रारम्भिक प्रस्ताव/आगणन स्0 498.16 लाख के कम में तीन बिन्दुओं पर आख्या उपलब्ध कराने की अपेछा की गयी है।

उपरोक्त के कम में डा0 कौसर उस्मान, आफिशिएटिंग विभागाध्यक्ष, जीरियाट्रिक मेडिसिन विभाग, के.जी.एम.यू. के कार्यालय के पत्र संख्या-1756/

मेडिसिन/21 दिनॉक 28.08.2021 द्वारा संदर्भित प्रकरण पर बिन्दुवार आख्या उपलब्ध कराई गयी है, जो निम्नवत् है:-

| ₲. | शासन की पृच्छा के बिन्दु | वॅछित आख्या |
|----|---|--|
| 1. | भारत सरकार के नेशनल प्रोग्राम फार हेल्थ केयर फार द एल्डरली के अन्तर्गत फन्डिंग पैटर्न क्या है? क्या प्रश्नगत् योजनान्तर्गत राज्य सरकार के स्तर पर भी वित्तीय सहायता प्रदान की जानी है? | भारत सरकार द्वारा उक्त योजना के अन्तर्गत 100 प्रतिशत फर्न्डिंग की जाती है। राज्य सरकार के द्वारा उक्त योजनान्तर्गत काई भी वित्तीय सहायता प्रदान नहीं की जाती है। |
| 2. | प्रश्नगत योजनान्तर्गत भारत सरकार द्वारा विभिन्न पदो में कुल कितनी धनराशि प्रदान की जानी है? | उक्त योजना के अन्तर्गत भारत सरकार के द्वारा स्0 370.00 लाख अनावर्ती अनुवान (Non recurring grant) तथा 163.44 लाख आवर्ती अनुवान (recurring grant) प्रतिवर्ष दिया जाता है। अब तक गुल स्0 347.11 लाख आवर्ती अनुवान (recurring grant) अवमुक्त किये जा चुके हैं। भारत सरकार, स्वास्थ्य एवं परिवार कल्याण मंत्रालय के पत्र संख्या-T-21011/02/2016-NCD dt. 13.03.2016 द्वारा स्0 100.00 लाख (Civil work, furniture, machinery, equipment), एवं पत्र सख्या-T-21011/02/2016-NCD(III) dt. 24.05.2016 द्वारा स्0 150.00 लाख (Civil work, furniture, machinery, equipment) खुल स्0 250.00 लाख तथा मशीने और सज्या/उपकरण संयंत्र (machinery & equipment, drugs & consumable, research, activities, humen resources (contractual & training) हेतु स्वास्थ्य एटं परिवार कल्याण मंत्रालय, भारत सरकार के पत्र संख्या-T-21011/02/2016-NCD dt. 2 01.2017 द्वारा स्0 97.11 लाख कुल स्0 347.11 लाख (रू० 100.00 + 150.00 + 9, 11 लाख) भारत सरकार द्वारा उ000 सरकार के पक्ष में अवमुक्त किये जा चुके है। (पत्रों की ६.41प्रति संलग्न) |
| 3. | क्या प्रश्नगत योजनान्तर्गत विश्वविद्यालय द्वारा भारत सरकार से कोई एम०ओ०यू० सम्पादित की गई है? यदि हाँ, तो उक्त एम०ओ०यू० के महत्वपूर्ण बिन्दु क्या है? | हाँ। के0जी0एम0यू0 एवं उत्तर प्रदेश शासन तथा भारत सरकार, स्थास्य एतं परिवार कल्यान मंत्रालय के मध्य 18 फरवरी 2016 को अनुबन्ध सम्पादित हुआ है। जिसकी प्रति संलग्न की जा रही है। (एम0ओ0यू0 छायाप्रति संलग्न) |

अतः संदर्भित प्रकरण में डा० कीसर उस्मान, आफिशिएटिंग विभागाय्यक्ष, जीरियाट्रिक मेडिसिन विभाग, के.जी.एम.यू. के कार्यातय के एत्र संख्या-1756/मेडिसिन/21 दिनॉक 28.08.2021 की प्रति मय संलग्नक के संस्तुति सहित प्रेषित करते हुए अनुरोध है ि प्रश्नगत् योजना के अन्तर्गत निर्माण कार्य हेतु इस कार्यालय के पत्र संख्या-13621/योजना अनु/2020 दिनॉक 13.06.2020 एवं पत्र संख्या-11738/योजना/2021 दिनॉक 23.01.2021 एवं पत्र संख्या-12011 व पत्र संख्या-2481/योजना अनु/2021 दिनॉक 14.06.2021 द्वारा प्रेषित किये गये आगणन 498.16 लाख की प्रशासकीय एवं विलीय स्वीकृति प्रदान करने के साथ ही भारत सरकार द्वारा अनावतीं मद में अवमुक्त की गई पनराशि स्त 250.00 लाख की स्वीकृति प्रदान करने की कृपा करें। संलग्नक:- यथोपरि।

> (आशुतोष धुनार हिवेदी) कुलसविव

पुष्ठांकन 57.54 /योजना अनु0/2021 दिनांक-यदोक्त। प्रतिलिपि:- ूनिम्नलिखित को सूचनार्च एवं उग्रवश्यक कार्यवाही हेतु प्रेपित:-

डा० कौसर उत्मान, आफिशिएटिंग विभागाध्यक्ष, जीरियाट्रिक मेडिसिन विभाग, के.जी.एम.यू. लखनऊ।

कलपति के निजी सचिव को मा0 कुलपति जी के अवलोकनार्थ।

(आशुतोप कुमार विवेदी)



उत्तार अदेश UTTAR PRADESH

MEMORANDUM OF UNDERSTANDING

FOR THE CDC, USA FUNDED PROJECT "Capacity Building and Strengthening of Hospital Infection Control to Detect and Prevent Antimicrobial Resistance in India"

Between

JPN APEX TRAUMA CENTRE, ALL INDIA INSTITUTE OF MEDICAL SCIENCES NEW DELHI

And

KING GEORGE'S MEDICAL UNIVERSITY, LUCKNOW

"Capacity Building and Strengthening of Hospital Infection Control to Detect and Prevent Antimicrobial Resistance in India"

A CDC-USA Funded project to AIIMS, New Delhi. 2015-2020

MEMORANDUM OF UNDERSTANDING

FOR THE CDC, USA FUNDED PROJECT "Capacity Building and Strengthening of Hospital Infection Control to Detect and Prevent Antimicrobial Resistance in India "

Between

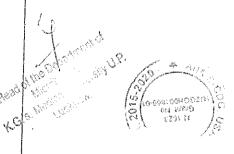
JPN APEX TRAUMA CENTRE, ALL INDIA INSTITUTE OF MEDICAL SCIENCES NEW DELHI

And

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"Capacity Building and Strengthening of Hospital Infection Control to Detect and Prevent Antimicrobial Resistance in India"

> A CDC-USA Funded Project to AHMS, New Delhi. 2015-2020





MEMORANDUM OF UNDERSTANDING

Between

JPN APEX TRAUMA CENTRE, ALL INDIA INSTITUTE OF MEDICAL SCIENCES NEW DELHI

And

KING GEORGE'S MEDICAL UNIVERSITY, LUCKNOW

This Memorandum of Understanding (MoU) is entered into by JPN Apex Trauma Centre, AIIMS, New Delhi and King George's Medical University, Lucknow, on Literal 2016, to specify the terms and conditions for the CDC, USA funded project, titled "Capacity Building and Strengthening of Hospital Infection Control to Detect and Prevent Antimicrobial Resistance in India" conducted by the JPN Apex Trauma Centre, AIIMS, New Delhi.

The terms of the Agreement are applicable to the project identified below conducted by the JPN Apex Trauma Centre, AIIMS, New Delhi.

Project covered under this Agreement

Name of the Project

Capacity Building and Strengthening of Hospital Infection Control to Detect and Prevent Antimicrobial Resistance in

India

Principal Investigator:

Dr. Purva Mathur, Additional Professor, Department of

Laboratory Medicine, JPN Apex Trauma Centre, AIIMS, New Delhi

<u>Co-Principal Investigator:</u> Dr. Subodh Kumar, Additional Professor, Department of Surgery, JPN Apex Trauma Centre, AHMS, New Delhi

Center for Disease Control and Prevention (CDC), USA.

Duration:

Funding Agency:

01/10/2015 to 30/09/2020

I. Background

The rise of antimicrobial resistance (AMR) with the rapid dissemination of multidrug resistant (MDR) bacteria within and between countries is now considered a global patient safety issue and a major public health concern. Many Asian countries experience more significant problems with MDR bacteria than those reported from the western world.

Worldwide, over 1.4 million patients suffer from healthcare associated infections (HAIs) at any time. HAIs have tremendous implications in terms of associated mortality, morbidity, adverse patient outcomes, increased cost of treatment, and social impact. Apart from the escalating rates of HAIs, MDR organisms now increasingly cause these infections. The problem is further compounded by the severe paucity of new antimicrobials, making treatment extremely difficult. In the present scenario of international travel, and as evidenced by the recent Ebola outbreak, no country is safe from imported infectious diseases. An important initiating point to curtail HAIs and AMR is through capacity building to ensure that systems, policies and procedures are in place to rapidly and accurately detect and monitor AMR and HAIs.

In this project, the All India Institute of Medical Sciences (AIIMS), New Delhi proposes to collaborate with CDC and ICMR to leverage the existing capacities for microbiology and robust academic capabilities of the ICMR AMR network to implement a step-wise, scalable process for quantifying, strengthening, and expanding the ability of the healthcare systems in India to generate, apply and report accurate AMR data. The project will entail development of a Center of Excellence (COE) for Surveillance of HAI and AMR at AIIMS. In the first year, apart from the COE, four nodal Centers (AIIMS, New Delhi; PGI, Chandigarh; CMC Vellore; JIPMER, Pondicherry) and two other centers (Hinduja hospital, Mumbai; Assam Medical College, Dibrugarh) will be strengthened for implementation of uniform detection, reporting and prevention guidelines for HAIs and AMR. This project will also strengthen the national capacity for surveillance of HAIs, using the modules developed at AIIMS, based on CDC's NHSN guidelines. AIIMS has already developed an indigenous electronic surveillance format, which can be implemented at other nodal and regional centers to enhance electronic data entry and data sharing. This serves both the need for reliable AMR data to support successful patient care, and public health need to measure, track and report the magnitude and types of AMR and HAI threats affecting India, in accordance with stated GHSA goals. In addition, the clinical facility component of the project will assess and strengthen both clinical antimicrobial use practices and infection control capacities for containment of AMR pathogens.

In the Second phase, the following centers will be added to the network: All India Institute of Medical Sciences, Jodhpur; Sevagram, Wardha; Tata Medical Center, Kolkata; Manipal Medical College and Hospital Rarnataka; Sir Gangaram Hospital, New Delhi; Nizam's

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hospital, Hyderabad; KGMU, Lucknow; and Apollo Hospital. Chennai. These centers will also be working on the stated objectives.

The short-term outcomes include development of trained workforce; establishing external quality standards for AMR surveillance; and strengthening infection control action plans and HAI surveillance at nodal facilities. These activities would serve to strengthen AMR and HAI surveillance that is linked with infection control activities at regional centers in the second phase. The activities in this project will advance India's capacity to detect and prevent AMR in a sustainable way and will achieve measurable progress toward the AMR GHS targets. It would ensure that uniform systems are in place across the length and breadth of India. The ultimate long-term objective is for India to have a sustainable, representative AMR and HAI surveillance network that produces quality data and informs the development and implementation of evidence- based national policies on antimicrobial stewardship and HAI prevention.

II. Responsibilities of the King George's Medical University, Lucknow

- Nominate personnel for workshop/training/review meetings related to the project.
- Ensure that all Device Associated Infection cases (DAIs, fulfilling the case definition as per the SOPs prepared) identified from selected ICUs of the King George's Medical University, Lucknow are included in the surveillance work of this project.
- Ensure that case report forms are filled up for all the above patients of DAIs.
- Maintain complete and accurate data of all patients under surveillance.
- Maintain complete records of the antimicrobial susceptibility of isolates recovered from DAIs cases as defined above.
- Participate in the EQAS program developed specifically for this project work.
- Ensure that strains are shared in the EQAS as per the protocol prepared by the network.
- Participate in the Infection Control Assessment by filling the approved Infection Control Assessment tool in a timely manner.
- Ensure that the entire data of DAIs and AMRs is regularly entered into specific software developed in this project.
- Ensure that the Microbiology labs of the King George's Medical University, Lucknow shall take part in the Quality Assurance Program conducted by network created in this project.
- Permit the Project/Laboratory Coordinators appointed by AIIMS to function as liaison officers for the project.
- Ensure maintenance of an inventory of all supplies and equipment purchased for the Project work. A copy of the registers would be sent and the end of each financial year to AIIMS.

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- Ensure that updated Project progress reports for the preceding calendar month are sent to AHMS by the 10th of every month.
- Nominate one person to liaise with AIIMS for feedbacks, reporting and trouble-shooting as well as for financial matters.
- Ensure that all procurements are done as per Govt. of India's rules and regulations
- The items will be tendered as per rules and the lowest cost equipment satisfying the technical and tender terms would be selected for purchase. The cost includes the Annual Maintenance charges and the cost of tendering etc.
- Permit, facilitate and coordinate the visits to King George's Medical University. Lucknow by the AIIMS and CDC team as and when required.
- King George's Medical University, Lucknow will intimate to AIIMS the amount of money required at least 30 days prior to the expected expenditure (which includes salaries and expenditures for consumables, travel and equipment).
- Original bills of expenditure would be sent to AIIMS every month.
- The expenditures in each category (Personnel salary/ consumables/ equipment/ travel) will not exceed the limit mentioned in the allotted budget.
- A Utilization certificate in standard format would be submitted to AIIMS for the purpose
 of audit and annual fund expenditure report to be submitted to the funding agency.
- Recruitment of staff would be done as per the rules of Govt. of India. The positions and salaries would be as per ICMR guidelines.
- Ensure that the staff employed will work 100% of their time only for this project.
- Travel (TA/DA) is allowed only as per Govt. of India's rules and regulations.
- King George's Medical University. Lucknow will serve as mentor for other regional centers as and when the network expands in the next phase of work.
- Ensure the development of trained manpower on various components of this project.
- Presentation of their data in the annual/biannual meetings between various centers.

III. Responsibilities of JPN Apex Trauma Centre, AIIMS, New Delhi

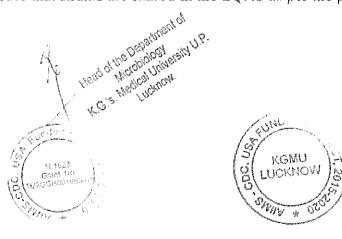
- Will function as the overall Project Coordinator. The Principal Investigator will be responsible for data compilation, feed-backs and reporting to the King George's Medical University, Lucknow regarding rates and trends of DAIs and AMRs/ EQAS and various assessment tools.
- Will identify additional centers for the next phase as the network will expand and work closely with those centers.

• Will liaison with King George's Medical University, Lucknow for the smooth functioning of the project.

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- Will develop protocols in coordination with ICMR, CDC-India and other participating centers for External Quality Assurance program to ensure quality in AMR Laboratory testing, EQAS for AMR, Infection Control Assessment tool, surveillance for DAIs and Tools to monitor Antimicrobial stewardship program.
- Payment would be done on a monthly basis by AIIMS to King George's Medical University, Lucknow (subject to receipt of bills and expenditure details every month).
- Provide facilities for training (in terms of space, manpower and inviting national and international experts) for activities committed in the project. Conduct periodic training/ review meetings/ workshops.
- Carry out assessment and review of the various activities of this project as and when required and submit annual reports to the funding agency. Will be responsible for submitting performance reports and expenditure reports to the funding agency.
- Will provide required technical and other assistance as and when required.
- JPNA Trauma Center will enter all reports of their patients enrolled in the network in the electronic network/software designed through this project.
- It will participate in EQAS, Infection Control assessment, Laboratory Assessment and AMSP assessment as per the tools and SOPs developed in this project
- Nominate personnel for workshop/training/review meetings related to the project.
- Ensure that all Device Associated Infection cases (DAIs, fulfilling the case definition as per the SOPs prepared) identified from ICUs of patients admitted to the JPNA Trauma Center are included in the surveillance.
- Ensure that case report forms are filled up for all the above patients of DAIs.
- Maintain complete and accurate data of all patients under surveillance.
- Maintain complete records of the antimicrobial susceptibility of isolates recovered from DAIs cases as defined above.
- Ensure that strains are shared in the EQAS as per the protocol prepared by the network.



IV. Financial Responsibilities

 The following is the budget allotted to King George's Medical University, Lucknow for one year for all activities pertaining to this work

Budget Summary (For year One)

| Budget Heads | | Amount |
|-----------------------|--|---------------|
| Staff | | Rs 12.5 lakhs |
| SRF 1 | @ Rs 36,400 | |
| Nurse 1 | @ Rs 17,040 | |
| Technician 1 | @ Rs 17,040 | |
| Data entry operator I | @ Rs 17,040 | |
| Lab Attendant: 1 | @ 14,910 | |
| Equipment | 22 | Rs 10 Lakhs |
| Supplies | | Rs 20 Lakhs |
| Others | A Al-Mallandinangga at 18 PA Malladdina "Anglanging Sapinanganga" — 1800 - 1846 Abbahangga | Rs 7.5 Lakhs |
| Travel | AND INTERPOLATION OF THE PROPERTY OF THE PROPE | Rs 2.5 lakhs |
| Total | | Rs 52,50,000 |

Govt. of India Pay scales and Qualifications/ eligibility rules will apply. Each selected staff will work 100% of time for this project only

V. Record keeping and access

 The King George's Medical University, Lucknow will maintain the complete and accurate data of all patients of DAIs identified included in this work, record of AMR, EQAS, Infection Control Assessment, AMSP assessment and Lab assessments.

They will communicate the findings, results and the completed and accurate data to AIIMS on a monthly basis or as required.

Head of the Department U.P. McGis. Medical University U.P. Lucknow

Both parties shall maintain data confidentiality.

VI. Term and Termination

The initial term of this agreement has commenced on the Decreb 2016 and shall continue till 30th September, 2020, unless otherwise terminated in writing by either party as provided herein.

- a) Either party may terminate the agreement upon 90 days written notice to the other party.
- b) In the event of a material breach of any terms of this agreement, any party may terminate the agreement upon filing written notice of any material breach of its terms with the other party, and affording the breaching party 15 working days to rectify the breach to the noticing party's satisfaction.

VII. Amendments

This agreement may be modified, cancelled, or renegotiated upon mutual consent, at any time, through an amendment signed by authorized representatives of the organizations.





VII. Signatures:

a.) Authorized Signatories:

JPNA Trauma Center, AIIMS

Signature

Date 20.1.17

Name: Dr Purva Mathur

Designation: Additional Professor Address: JPNA Trauma Center, AHMS

Phone: 9868397274

email: purvamathur@yahoo.co.in

Signature

Date

Name: Dr. Subodh Kumar Designation: Additional Professor Address: JPNA Trauma Center, AHMS

Phone: 9868397705

email: subodh6@gmail.com

b.) Two Witnesses

Date 20.01 . 2017

Name: Pawan Kuma

Designation: Assistant Address: R-212 Lab med.

Phone: 3353545365

Email: pawam kush'k@.gn

Date 20 117

Name: Isidhi Bhatding

Designation SRI

Address: Room No 208, Depl 3) tab Med Phone: 9962574430

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the Department of K.G.'s. Medical University U.P.

Lucknow.





b.) Authorized Signatories:

King George's Medical University, Lucknow

Signature

Date: Juli 12/12/2016

Name: Dr. Amita Jain

Designation: Professor & Head Address: KGMU, Lucknow Phone: +91 9415023928 Email: amita60@gmail.com Signature

Date: 7/12/2016Name: Prof. Ravikant

Designation: Vice Chancellor Address: KGMU, Lucknow Phone: +91 9868218536 Email: vc@kgmcindia.edu

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c.) Two Witnesses

Date: 7/12/2016

Name: Dr. Sheetal Verma

Designation: Assistant Professor Address: KGMU, Lucknow Phone: +91 9936269516

Email: dr.sheetal2001@gmail.com

Date: 7/12/16 June 1

Name: Dr. Vimala Venkatesh

Designation: Professor Address: KGMU, Lucknow Phone: +91 9335912340

Email: vimalavenkatesh@gmail.com

Head of the Department of Microbiology

K.G.'s. Medical University U.P.







India

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Reference: WR/NPSP_VPD Labs/2020

A ... King Georges Medical University Lucknow Department of Microbiology Shahmina Road Chowk Lucknow, Uttar Pradesh - 226003

LONG TERM AGREEMENT

This Long-Term Agreement (LTA) is made between the WORLD HEALTH ORGANIZATION, Country Office for India, room no 533-535, A wing, Nirman Bhawan, Maulana Azad Road, New Delhi -110011 (hereinafter referred to as WHO-India) and M/s King Georges Medical University Lucknow, Department of Microbiology, Lucknow - 226003, India (hereinafter called the "Contractor).

Whereas, WHO in concurrence with the Government of India has designed a laboratory supported surveillance system to address cases relating to certain additional vaccine-preventable diseases (VPD) like diphtheria, pertussis and neonatal tetanus. The expanded surveillance system will provide an insight to the overall performance of the immunization programme and identify pockets of susceptibility to guide vaccination strategies. This initiative will help in further reducing the morbidity and mortality due to proper case management resulting in timely public health interventions. As the VPD surveillance system involves laboratory confirmation of samples collected from suspected diphtherla and pertussis cases, a laboratory network that can test samples in accordance to internationally acceptable standards of Diphtheria and Pertussis laboratory diagnosis needed to be

Through this LTA, WHO Country Office for India would be engaging the services of the Contractor to conduct surveillance by proving funding support under broad budget heads namely, essential human resource, procurement of short shelf life consumables/reagents, shipment of samples/isolates, maintenance of equipment and miscellaneous costs towards communication, stationery etc. (hereinafter referred to as the "Services").

Whereas, the Contractor has submitted a financial and technical proposal dated 20 September 2019 in response to our email communication dated 24 July 2019 (the "Contractor's bid");

Whereas, WHO wishes to enter into a Long-Term Agreement for the provision of the Services by the Contractor to WHO, pursuant to which WHO may conclude specific contractual arrangements with the Contractor, as provided herein; and

Whereas, the Contractor is willing to provide the Services described more fully in the terms of reference listed in Annex 1 hereto, to WHO on the terms set forth herein,

Now, therefore, WHO and the Contractor (hereinafter each referred to as a "Party" and, collectively,

1 REQUESTS FOR SERVICES/PROVISION OF SERVICES

- 1.1 WHO may during the term of this Agreement request the Contractor to provide the Services listed in Annex 1 hereto, as and when required by WHO. Any such request shall be made by WHO through written communication referencing the present Agreement and detailing WHO's specific requirements with regard to the Services. Services may be requested for any duration (up to the maximum specified in Annex 1) depending on WHO's requirements.
- 1.2 The Contractor shall provide the requested Services in accordance with the technical specifications set forth in the terms of reference and any specific requirements which WHO has communicated to the Contractor (as set forth in Annex 1 hereto).

- 1.3 The Contactor shall provide the Services requested by WHO at the prices listed in Annex 2. These prices shall remain valid for three years i.e. until 2022.
- 1.4 This Agreement is non-exclusive, and WHO shall have no limitation on its right to obtain services, including services of the same kind, quality and/or quantity as described in this Agreement, from
- 1.5 Unless otherwise specified in this Agreement, WHO shall have no obligation to purchase any minimum quantities of Services from the Contractor.
- 1.6 Any and all of the Contractor's (general and/or special) conditions of contract are hereby explicitly excluded from this Agreement, i.e., regardless of whether such conditions are included in the Contractor's proposal, or printed or referred to on the Contractor's letterhead, invoices and/or other material, documentation or communications.

CHANGES IN CONDITIONS

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- 2.1 In the event of any reduction in the pricing applicable to the above services provided by the Contractor to its other customers during the term of this Agreement, the Contractor shall immediately notify WHO, and WHO shall have the right to benefit from such a reduction in price for any Services that it may request under this Agreement. In such case, the Parties shall agree in good faith upon a corresponding amendment to Annex 2 of this Agreement.
- 2.2 The Contractor shall provide the Services within the time frame to be agreed between the Parties.
- 2.3 Neither Party shall be responsible for a delay caused by force majeure, that is, a delay caused by reasons outside such party's reasonable control it being agreed, however, that WHO shall be enlitled to terminate this Agreement (or any individual agreement and/or similar arrangement for agreement issued hereunder) forthwith if the implementation of the work is delayed or prevented by any such reason for an aggregate of 30 days. Such termination shall be subject to payment of an equitable part of the contract sum and/or other reasonable charges. In the event of such termination, the Contractor shall, in accordance with the general condition of standard WHO agreements, ("All rights in the work, including ownership of the original work and copyright thereof, shall be vested in WHO, which reserves the right (a) to revise the work,(b) to use the work in a different way from that originally envisaged, or (c) not to publish or use the work"), deliver to WHO all work products and other materials so far produced.
- 2.4 In the event of and as soon as possible after the occurrence of any cause constituting force majeure, the Contractor shall give notice and full particulars in writing to WHO, of such occurrence or change if the Contractor is thereby rendered unable, wholly or in part, to perform its obligations and meet its responsibilities under this Agreement. The Contractor shall also notify WHO of any other changes in conditions or the occurrence of any event which interferes or threatens to interfere with its performance of the contract. The notice shall include steps proposed by the Contractor to be taken including any reasonable alternative means for performance that is not prevented by force majeure. On receipt of the notice required under this section, WHO shall take such action as it, in its sole discretion, considers to be appropriate or necessary in the circurnstances, including the granting to the Contractor of a reasonable extension of time in which to perform its obligations under this Agreement.

CONFIDENTIALITY

3.1 Except as explicitly provided in this Agreement, the Contractor shall keep confidential all information which comes to its knowledge during, or as a result of, the implementation and execution of this Agreement or any subsequent arrangement for agreements concluded between the Parties. Accordingly, the Contractor shall not use or disclose such information for any purpose other than the provision of the Services. The Contractor shall ensure that each of its employees and/or other persons having access to such information shall be made aware of, and be bound by, the obligations of the Contractor under this paragraph. However, there shall be no obligation of confidentiality or restriction on use, where: (i) the information is publicly available, or becomes

publicly available, otherwise than by any action or omission of the Contractor, or (ii) the information was already known to the Contractor (as evidenced by its written records) prior to becoming known to the Contractor in the implementation and execution of the Contract; or (iii) the information was received by the Contractor from a third party not in breach of an obligation of confidentiality.

3.2 The Contractor undertakes not to disclose any information which is received by it or to which it has otherwise gained access, for the purpose of providing the Services only to persons who have a need to know (such as its employees working on providing the Services, or otherwise to third parties who have been explicitly authorized and designated by WHO) and who are bound by like obligations of confidentiality as contained in this Agreement.

CONTRACTOR'S REPORTING

The Contractor will, upon request by WHO, report to WHO on the Services provided under this Agreement. The report should include a summary list of contracts issued for the relevant period, a summary of the Services provided and total cost per contract for the relevant period, as well as cumulative amounts paid to the Contractor from the Effective Date of this Agreement.

5 **MISCELLANEOUS**

- 5.1 This Agreement shall enter into force on the date of its last signature by the Parties (the "Effective Date") and shall remain in force until 31 December 2022 from the date of commencement of the contract.
- 5.2 Without WHO's prior written approval, the Contractor shall not, in any statement of an advertising or promotional nature, refer to this Agreement or any subsequent agreements concluded between the Parties or its relationship with WHO. In no case shall the Contractor use the name or emblem of WHO, or any abbreviation thereof, in relation to its business or otherwise.
- 5.3 Any notices required under this Agreement shall be in writing and shall be delivered personally or sent by registered or certified mail, prepaid, or telex or facsimile to the following addresses:

To WHO:

World Health Organization

Dr Henk Bekedam WHO Representative to India, World Health Organization Country Office for India ROWING NAMER Bhawan Maulana Azad Road New Delhi - 110011

Dr Prashant Gupta Prashan (mit w Professor

King Georges Medical University

Shahmina Road Lucknow - 226003

India

Dr. Prashani Gupia Processor of Microbiology Uepanneni or Micropiology Vepanneni or Medical University King George's Medical University Lucknow - UP Pin-226003 Lucknow professor

or such other addresses as either party shall have notified the other party. Any such communication shall be deemed to have been given or made on the date such letter was hand-delivered, registered or transmitted from the sender's facsimile operator, but any assumption of actual notice shall be subject to rebuttal to show that it has not actually been received.

- Any matter relating to the interpretation or application of this Agreement or any subsequent agreements concluded between the Parties which is not covered by its terms shall be resolved by or any subsequent agreements concluded between the Parties shall, unless amicably settled, be subject to conciliation. In the event of failure of the latter, the dispute shall be settled by arbitration. Parties or, in the absence of agreement, with the rules of arbitration of the International Chamber of Commerce. The Parties shall accept the arbitral award as final.
- 5.5 Nothing contained in or relating to Agreement or any subsequent agreements concluded between the Parties shall be construed as a waiver of any of the privileges and immunities enjoyed by jurisdiction.

6 ANNEXES

8

6.1 The following Annexes, attached hereto, form an integral part of this Agreement (in the following descending order of priority):

Annex 1: Technical Specifications applicable to the Services (Terms of Reference)

Annex 2: Schedule of prices applicable to the Services

- 6.2 In the event of any inconsistency between any of the above documents, the document with the highest priority according to the above-mentioned priority of documents will prevail. This
 Agreement will prevail over the Annexes.
- 6.3 This Agreement with the above-mentioned documents represents the entire agreement between the parties and supersedes and cancels any and all previous written and/or oral agreements between them with respect to the subject-matter thereof. This Agreement may not be modified, except in writing signed by both parties.

IN WITNESS WHEREOF, the duly authorized representatives of the Parties have signed this Agreement.

| | oligination of the state of the |
|--|--|
| Signed for and on behalf of WHO: | Signed for and on behalf of the Contractor: |
| Signature: Name: Dr Henk Bekedam Title: WHO Representative to India Date: 5/11/19 | Signed for and on behalf of the Contractor: Signature: Contractor: Signature: Contractor: Signature: Contractor: Signature: Contractor: Cupta Contractor |
| | The same of the sa |

Annex-1 TERMS OF REFERENCE

Name of Laboratory: King Georges Medical University, Lucknow

Title: Laboratory support for detection of Diphtheria and Pertussis bacteria from throat swabs, nasopharyngeal swabs and serum for the period 1 January 2020 to 31 December 2022

The contractual partner shall perform the following tasks in connection with laboratory diagnosis for Diphtheria and Pertussis from clinical specimens:

- Hire services of skilled personnel to perform bacterial cultures and molecular tests for detection of Diphtheria and Pertussis bacteria from throat swabs, nasopharyngeal swabs and serum samples collected from suspected cases as part of VPD surveillance.
- Arrange local purchase of consumables.
- Shipment of isolates to the Regional Reference Laboratory "CMC, Vellore". iii.
- Testing of PT panels received from Regional Reference laboratory "CMC, Vellore" for quality
- Sharing the data to WHO. ٧.
- Submission of technical report and certified Statement of Expenditure. Vί.

For the CONTRACTUAL PARTNER

Name: DY CANANTOTESSO!

Title: Processor King George's Medical University

Date: 30/11/19

Date: .30/11/19

Amer-2

Budget Details for Diptheria-Pertusis surveillance project for 2020

1. Name of PI:Dr Prashant Gupta

2. Institute -

King George's Medical University, Lucknow, UP-226003 Recurring

1. Manpower

Position1: Research officer (1)

Qualification: M.Scin Microbiology /Biosciences/ Biology with 3 years of experience in

relevant field

Salary:32,109 per month

Annual Salary: Rs. 385,308

Position2: Technician (1)

Qualification: M.Sc in Microbiology /Biosciences/ Biology

Salary::Rs.18,900 per month Annual Salary: Rs. 226,800

2. Consumables:

| S.no | Consumable item | Company/Brand | Amount (yearly requirement) | Approximate price (In Indian Rs) |
|------|--|-----------------------------|--------------------------------|----------------------------------|
| 1. | Columbia 5% Sheep blood agar plates | Biomeriux or BD/ Himedia | 4 Pack x 12 (20plates/ pk) | 40,000.00 |
| 2. | Diphthería virulence supplement (Part A and B) | HIMEDIA | 1 Pack x 6 | 35,000.00 |
| 3. | Bordet Gengou agar base | HIMEDIA | 4Pack x12 (20plates/ pk | 50,000.00 |
| 4. | Vitek MD Ds slide | Biomeriux | 1 Pack | 30,000.00 |

| - | 5. Ms CHCA Matrix | Biomeriux | 5 vial (0.5ml) | 11,000.00 |
|-----|-----------------------|--------------------|----------------|--------------------|
| 6 | 5. Tinsdale agar base | HIMEDIA | | |
| 7 | Diphtheria virulence | HIMEDIA | I Pack (500gm) | 1 - |
| | agar base | AIGDIA | 1 Pack (500gm) | 3000.00 |
| 8 | . Culture swab | BD | 100 | |
| 9 | . Todd Hewitt | HIMEDIA | 100 pcs/Pk | 2,000.00 |
| | | THMEDIA | Pack of | 1,000.00 |
| 1(| 0. Sodium chloride | LUMEN | 100gm | |
| _ | (molecular grade) | HIMEDIA | 500gm x1 pk | 1,000.00 |
| 1 [| . Taqman gene | Applied | 10ml x 12 | |
| | expression universal | Biosystems | 10111 X 12 | To be procured and |
| | master mix | Julyanoma | | provided by WHO |
| 10 | | | | |
| 12. | TOTAL MICHAEL | EUROIMMUN | 8 Kit | To be procured and |
| | Bordetellapertussis | | | |
| | Ig G ELISA kit | | | provided by WHO |
| 13. | Primers and probe for | Genetix/ CMC | For 1000 | T- t |
| | Corynebacteriumdiphth | | reactions | To be procured and |
| | riae | | reactions | provided by WHO |
| 14. | Primers and probe for | Gentix/ CMC | For 1000 | T |
| | bordetellapertussis | | reactions | To be procured and |
| 15. | DNA Diluent | Applied | 500 0 | provided by WHO |
| | | Biosystems | COAZIIII | 4,000.00 |
| 16. | 0.2 ml Real time PCR | Applied | 2Pack | |
| | strips (tubes) | biosystems | 2Fack | 20,000.00 |
| | | • | | |
| 17. | Real time PCR tube | Applicat | | |
| | optical cover lids | Applied biosystems | 2 Pack | 20,000.00 |
| 18. | Nuclease free water | Applied | 100-1-6 | |
| L | | · -Philea | 100ml x 2 | 0,000.00 |

| | | biosystem | | |
|-----|--------------------------------------|---------------------------------------|----------------|-----------------------|
| ļ | 9. Filter tips 0.5 -10 ul | Tarsons | 960pcs/ pk x 6 | 12,000.00 |
| 2 | 0. Filter tips 200 ul | Tarsons | 960pcs/pk x 6 | 1 |
| 2 | 1. Filter tips 1000 ul | Tarsons | 960pcs/pk x 6 | |
| 22 | 2. QIA amp DNA mini ki | | 6 Pack | 12,000.00 |
| | (250 extractions) | | Orack | 250,000.00 |
| 23 | | Bemis | 1 pack | 2,000.00 |
| 24 | | Blue star | IPack x 12 | 2,000.00 |
| 25 | . Nitrile gloves | Tarsons | 1Pack x 6 | |
| 26 | Mask | | 1Pack x 6 | 6,000.00 |
| 27 | 1 P - Mauri (uoca | Tarsons | IPackx12 | 3,000.00 12,000.00 |
| 28. | (1.5ml) Cryobox | 34 | | |
| 29. | | Moxicare | I pack | 5000.00 |
| 30. | Tris EDTA buffer | Thermo Fisher | 5gm | 6,000.00 |
| 31. | Eppendorf (2ml) | Thermo Fisher | 100 ml x2 | 16,000.00 |
| 32. | Immersion oil | Thermo Fisher | IPack x 12 | 12,000.00 |
| 33. | Glucose | MERCK | 125ml/pk x2 | 2,000.00 |
| 34. | Sucrose | HIMEDIA | 500 gm | 500.00 |
| 35. | Maltose | HIMEDIA | 500 gm | 500.00 |
| 36. | Nitrate Reagent | HIMEDIA | 500gm | 500.00 |
| 50, | (A and B) | HIMEDIA | l kit | 500.00 |
| 37. | Sterile disposable | HIMEDIA | 1 Pack | 5,000.00 |
| 38. | petriplates(55mm) Sterile disposable | HIMEDIA | | |
| į | petriplates (90mm) | · · · · · · · · · · · · · · · · · · · | I Pack | 5,000.00 |
| 39. | E atri | | | |
| | E strip | HIMEDIA | 60 strips of | 70,000.00 |

A Chilling

| Ervih | omycin | San San San Carlotte | | |
|------------|--------|---------------------------------|--|-------------|
| 1 I | mycin | | each antibiotic | |
| Vanco | mycin | | - | |
| Ceftri | Oxone | | from a constant of the constan | |
| Penici | llin | | | |
| Total | | 24x 22 | | |
| | | Company Company Company Company | | Rs 6,53,000 |

Justification: Now we have started culture of Bordetella pertussis and identification of Corynebacterium diphtheria by MALDI, so we need Rs 50, 000 for Bordet Gangou plates and 41,000 for MALDI. This amount was not included in our previous budget requirement

3. Contingency: (shipment communication and miscellenious) Rs. 46,000/-

4. InstitutionOverhead: 5% of total cost: Rs=65,555

Grand Total:1,376,663

Dr. Prashant Gupta

Dr. Prashant Gupta

Professor Druntment of Microbiology
Professor Oruntment of Mic

Department of Microbiology

KGMU, Lucknow

Budget Details for Diptheria-Pertusis surveillance project for 2021

1. Name of PI: Dr Prashant Gupta

2. Institute –

King George's Medical University, Lucknow, UP-226003 Recurring

1. Manpower

Position 1: Research officer (1)

Qualification: M.Sc in Microbiology /Biosciences/ Biology with 3 years of experience in

Salary: 33,715 per month Annual Salary: Rs. 404,580

Position 2: Technician (1)

Qualification: M.Sc in Microbiology /Biosciences/ Biology

Salary: : Rs. 19,845 per month Annual Salary: Rs. 238,140

2. Consumables:

| 1. 2. | Consumable item Columbia 5% Sheep blood agar plates Diphtheria virulence supplement (Part A and B) | Biomeriux or BD/ Himedia HIMEDIA | Amount (yearly requirement) 4 Pack x 12 (20plates/ pk) | Approximate price (In Indian Rs) 60,000.00 |
|----------|--|----------------------------------|---|---|
| 3. | Bordet Gengou agar base | | 4 Pack x I 2 (20plates/ pk | 60,000.00 |

| | 4. Vitek MD Ds slide | Biomeriux | 1 Pack | 35,000,00 |
|-----|--|---|----------------|--------------------|
| | 5. Ms CHCA Matrix | Biomeriux | | 35,000.00 |
| (| Tinsdale agar base | HIMEDIA | 5 vial (0.5ml) | 15,000.00 |
| 7 | 7. Diphtheria virulence | | I Pack (500gm | |
| | agar base | MICHAIN | Pack (500gm |) 5000.00 |
| 8 | . Culture swab | BD | 100 (7) | |
| 9 | . Todd Hewitt | HIMEDIA | 100 pcs/Pk | 2,000.00 |
| | | | 1Pack of | 1,000.00 |
| 10 |). Sodium chloride | LUMEDIA | 100gm | |
| | (molecular grade) | HIMEDIA | 500gm x l pk | 1,000.00 |
| 11 | | | | |
| · • | | Applied | 10 ml x 12 | To be procured an |
| | expression universal | Biosystems | | provided by WHO |
| | master mix | | W- | , and by mile |
| 10 | | | | |
| 12. | - THOMMON AND | EUROIMMUN | 8 Kit | To be |
| | Bordetella pertussis | 1 | | To be procured and |
| | Ig G ELISA kit | ļ | | provided by WHO |
| 13. | Primers and probe for | Genetix CMC | For 1000 | |
| | Corynebacterium | | reactions | To be procured and |
| | diphthriae | | reactions | provided by WHO |
| 14. | Primers and probe for | Genetix CMC | | |
| | Bordetella pertussis | General Civic | For 1000 | To be procured and |
| 15. | DNA Diluent | Applied | | provided by WHO |
| | | Applied | 500x2ml | 6,000.00 |
| 16. | 0.2 ml Real time PCR | Biosystems | | |
| | strips (tubes) | Applied | 2Pack | 25,000.00 |
| | | biosystems | | |
| | | | | |
| 1 | | *************************************** | | |
| 17 | D | | | |
| 17. | Real time PCR tube | Applied | 2 Pack | 25,000.00 |

| <u> </u> | optical cover lids | biosystems | | |
|------------|---------------------------|---------------|----------------|---|
| | 18. Nuclease free water | Applied | 100ml x 3 | 1.6.000.00 |
| - | | biosystem | , | 1 5,000.00 |
| | 9. QIA amp DNA min | i kit Qiagen | 6 Pack | 260,000,00 |
| | (250 extractions) | | | 260,000.00 |
| | 0. Filter tips 0.5 -10 ul | Tarsons | 960pcs/ pk x 6 | 15,000.00 |
| 2 | I. Filter tips 200 ul | Tarsons | 960pcs/pk x 6 |] " " " " " " " " " " " " " " " " " " |
| - | | | | 15,000.00 |
| 22 | - 1000 (I) | Tarsons | 960pcs/pk x 6 | 15,000.00 |
| 23 | | Bemis | 1 pack | 3,000.00 |
| 24 | 311403 | Blue star | 1Pack x 12 | 3,000.00 |
| 25 | | Tarsons | IPack x 6 | 8,000.00 |
| 26 | | | IPack x 6 | 4,000.00 |
| 27. | -FF = mdot1 tabes | Tarsons | 1Packx12 | 15,000.00 |
| 28. | (1.5ml) | | | , 5,000.00 |
| 29. | | Moxicare | 1 pack | 5000.00 |
| 30. | | Thermo Fisher | 5gm | 16,000.00 |
| 31. | Tris EDTA buffer | Thermo Fisher | 100 ml x2 | 6,000.00 |
| 31. | Eppendorf (2ml) | Thermo Fisher | IPack x 12 | 15,000.00 |
| 33. | Immersion oil | MERCK | 125ml/pk x2 | 2,000.00 |
| 34. | Glucose | HIMEDIA | 500 gm | 1000.00 |
| 35. | Sucrose | HIMEDIA | 500 gm | 1000.00 |
| 35. 36. | Maltose | HIMEDIA | 500gm | 1000.00 |
| JU. | Nitrate Reagent | HIMEDIA | l kit | 1000.00 |
| 37. | (A and B) | | | · • |
| 57. | Sterile disposable | HIMEDIA | I Pack | 5,000.00 |
| 38. | petriplates(55mm) | | | · - |
| | Sterile disposable | HIMEDIA | l Pack | 5,000.00 |
| } | petriplates (90mm) | | 7004 | - |

| 39. | E strip | HIMEDIA | 60 strips of | 70.000.00 |
|-------|--------------|---------|-----------------|---|
| | Erythromycin | | each antibiotic | 70,000.00 |
| | Gentamycin | | each airroidile | *************************************** |
| | Vancomycin | | i. | |
| | Ceftrioxone | | | |
| | Penicillin | | Transition | |
| Total | | | | |
| | | | | Rs 751,000 |

3. Contingency: (shipment communication and miscellenious) Rs. 54,000/-

4. Institution Overhead: 5% of total cost: Rs =72,385

Grand Total: 1,520,105

Dr. Prashant Guptor, Prashant Guptor

Professor

Professor

Obnatiment of Microbiology

Ring Goorge's Medical University

Professor

Department of Microbiology

KGMU, Lucknow

Budget Details for Diptheria-Pertusis surveillance project for 2022

1. Name of PI: Dr Prashant Gupta

2. Institute -

King George's Medical University, Lucknow, UP-226003 Recurring

1. Manpower

Position 1: Research officer (1)

Qualification: M.Sc in Microbiology /Biosciences/ Biology with 3 years of experience in

Salary: 35,400 per month

Annual Salary: Rs. 424,800

Position 2: Technician (1)

Qualification: M.Sc in Microbiology /Biosciences/ Biology

Salary: : Rs.20,837 per month Annual Salary: Rs. 250,044

2. Consumables:

ACX350

| S.no | Consumable item Columbia 5% Sheep blood agar plates | Company/Brand Biomeriux or BD/ Himedia | Amount (yearly requirement) 4 Pack x 12 (20plates/ pk) | Approximate price (In Indian Rs) |
|------|--|--|---|----------------------------------|
| 2. | Diphtheria virulence supplement (Part A and B) | HIMEDIA | 1 Pack x 6 | 55,000.00 |
| 3. | Bordet Gengou agar base | 1 | 4 Pack x12 (20plates/ pk | 70,000.00 |
| 4. | Vitek MD Ds slide | Biomeriux | l Pack | 40,000.00 |

| | Ms CHCA Matrix | Biomeriux | | 20,000,00 |
|-----|------------------------|--|---|--------------------|
| - | - Tinsdale agar base | | 5 vial (0.5ml) | 20,000.00 |
| ļ | - The date agai base | HIMEDIA | 1 Pack (500gm) | 5000.00 |
| ' | - Francista Attoretice | HIMEDIA | I Pack (500gm) | · - |
| | agar base | | , | 3000.00 |
| 8 | | BD | 100 pcs/Pk | 2.000.00 |
| 9. | Todd Hewitt | HIMEDIA | l Pack of | 2,000.00 |
| | | | 1 | 5,000.00 |
| 10 | Sodium chloride | HIMEDIA | 100gm | |
| | (molecular grade) | ······································ | 500gm x1 pk | 5,000.00 |
| 11 | | | | |
| | expression universal | Applied | 10 ml x 12 | To be procured and |
| | master mix | Biosystems | | provided by WHO |
| | aster HHX | | 1 | |
| 12. | FILE | | | - |
| 12, | - OTHER PLOTA WILL | EUROIMMUN | 8 Kit | To be procured and |
| | Bordetella pertussis | | | |
| | Ig G ELISA kit | | | provided by WHO |
| 13. | Primers and probe for | Gentix/ CMC | For 1000 | |
| | Corynebacterium | | reactions | To be procured and |
| | diphthriae | | reactions | provided by WHO |
| 14. | Primers and probe for | Gentix/ CMC | | |
| | Bordetella pertussis | Centry, CMC | | To be procured and |
| 15. | DNA Diluent | A | | provided by WHO |
| | - / won(| Applied | 500x2ml | 1,000.00 |
| 16. | 0.2 ml Real time PCR | Biosystems | | |
| | | Applied | 2Pack | 30,000.00 |
| ļ | strips (tubes) | biosystems | | |
| | | | *************************************** | |
| | | | | |
| 17. | Real time PCR tube | Applied | 2 Pack | 70.000 |
| | optical cover lids | biosystems | 400 | 30,000.00 |
| 1 | | , | | |

| · | 8. Nuclease free water | Applied biosystem | 100ml x 3 | 1 5,000.00 |
|------------|--|----------------------|----------------|------------|
| 19 | 9. QIA amp DNA mini kin (250 extractions) | Qiagen | 6 Pack | 280,000.00 |
| 20 | 10 UI | Tarsons | 960pcs/ pk x 6 | 20,000.00 |
| 21 | . Filter tips 200 ul | Tarsons | 960pcs/pk x 6 | 20,000.00 |
| 22 | . Filter tips 1000 ul | Tarsons | 960pcs/pk x 6 | 20.000 |
| 23 | | Bemis | I pack | 20,000.00 |
| 24. | | Blue star | IPack x 12 | 3,000.00 |
| 25. | gio vos | Tarsons | 1Pack x 6 | 10,000.00 |
| 26. | | | IPack x 6 | 4,000.00 |
| 27. | Eppendorf tubes (1.5ml) | Tarsons | 1Packx12 | 15,000.00 |
| 28. | Cryobox | Moxicare | 1 pack | 5000.00 |
| 29. | Lysozyme | Thermo Fisher | 5gm | 6,000.00 |
| 30. | Tris EDTA buffer | Thermo Fisher | 100 ml x2 | 6,000.00 |
| 31. | Eppendorf (2ml) | Thermo Fisher | IPack x 12 | 20,000.00 |
| 32. 33. | Immersion oil | MERCK | 125ml/pk x2 | 2,000.00 |
| 34. | Glucose Sucrose | HIMEDIA | 500 gm | 1000.00 |
| 35. | Maltose | HIMEDIA | 500 gm | 1000.00 |
| 36. | Nitrate Reagent | HIMEDIA | 500gm | 1000.00 |
| | (A and B) | HIMEDIA | l kit | 1000.00 |
| 37. | petriplates(55mm) | HIMEDIA | I Pack | 7.000.00 |
| 38. | Sterile disposable petriplates (90mm) | HIMEDIA | I Pack | 7,000.00 |

Sales Sales

| 39. | E strip Erythromycin Gentamycin Vancomycin | HIMEDIA | 60 strips of each antibiotic | 80,000.00 |
|-------|--|---------|------------------------------|------------|
| | Ceftrioxone Penicillin | | | |
| Total | | | | Rs 860,000 |

3. Contingency: (shipment communication and miscellenious) Rs. 62,000/-

4. Institution Overhead: 5% of total cost: Rs =79,842

Grand Total: 1,676,686

Dr. Prashant Gupta

Professor

Professor

Oeparlment of Microbiology

King George's Medical University

Pi OF VPD survei Harice Project (WHO)

Department of Microbiology

KGMU, Lucknow

INDIAN COUNCIL OF MEDICAL RESEARCH ANSARI NAGAR, NEW DELHI-110029

Dated: December 2021

No. V. MODELLE 2016 MR

To, The Principal King George - Medical University, Shah Mari Ressa Lucknow 22000) Unar Pradesh

Subject: Recurring Grant-in-aid for implementation of the scheme, "Setting up of Nation-wide Network of Laboratories for Managing Epidemics and National Calamities" to the King George's Medical University, Lucknow, State Level VRDL, through "Assignment" to the Reserve Bank of India (RBI) under the Treasure Single Account (TSA) System during the financial year 2021-22.

Sir/Madam.

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The Director General, ICMR heachy sanctions of Rs. 52,25,000/- (Rupees Fifty Two Lakhs Ewents Five Chousead Only) of grant-in-aid to the Principal, King George's Medical Emissisty Englished, for "Sening up of Nation-wide Network of Laboratories for Managing Epidemics and National Calamities".

- 1. The comparison wise break-up of the amount is given in the enclosed statement (Annexure 1).
- 2. The scheme will be implemented in accordance with the guidelines on the scheme (available on the website ways dhr.gov.in) and subsequent release of grant-in-aid will be subject to adherence to the terms & conditions mentioned in the guidelines for the scheme.
- 3. The payment of grant-in-aid will be subject to the Rule 228 to 245 of provisions of GFR-2017 and the following terms and conditions:
- a. The manage (manage shall not without prior sanction of the Government dispose of or engine to such a the assets acquired wholly or substantially out of the Government grant to part our start form these for which the grant has been sanctioned.
- b. Account of the institute will be audited by the Comptroller and Auditor General of India.
- C. The accounts of the grantee institution shall be open to inspection by the sanctioning authority and audit both by the CAG of India under the provision of CAG (DPC) Act, 1971 and internal audit wing of the O/o CCA of the Ministry, whenever the institution or organization is called upon to do so.
- d. A uniferron serument and audited statement of accounts in the Performa prescribed under CMF + TA (copy enclosed) as per rule 238 of GFR 2017 should be furnished to ICMR within 12 months of closure of the financial year i.e. latest by March, 2022.

- 13. Hitter country any part the roof is not utilized for the purpose for which it is paid; it shall be consequented to the many batchy
- i. The state as said many into a register in Form GFR-19 of the payment and semi-permanent asset as deal distability is mainly out of Government grants and a copy thereof furnished to \$15.50.
- 4) The same tree as also assumatized by the Institute shall be made available for scrutiny by the Analytic
- The first the constitution institution grantee certify that they have not obtained or applied for a substitution the same propose of activity from any other Ministry or Department of the Governments.
- i. 3CMR dail communication specific quantified and qualitative targets likely to be attained against the grant to the grantee. ICMR shall ensure that the likely targets prescribed were in fact a lefted.
- 1. After commetion of the project/activity the ownership of the physical and intellectual assets acquired on the first the funds granted shall vest with DHR and decision on the assets acquired dual he taken by the Department which shall be binding.
- k. The is Vite mail costure that principles and procedures laid down in the Rule 230 of the GFR are talk wed retain refersing the funds. A bond as prescribed in Rule 230(6) (ix) where-ever required should be obtained by the ICMR before release of funds.
- μ , this in this limit the VRDE is already on the PFMS portal. Hence, the funds may please be written as μ , the RPS
- (4) Inches the second of the experienced by the beneficiary Institution so that the same could be whether the first of the experience of PLMS, with strict compliance. If it is not done, next grant with the experience is kell, to the helicitary Institution.
- 4. All VRIDE will have to submit 10 copies of annual progress reports (on completion of 10 mentions). Will fain receive by the Expert Group. Next installment of grant will be released only at a agreeff of the annual report by the ICMR Expert Group.
- The properties to grow would will be made by the Electronic transfer Demand

 Dente: A properties of properties of the mandate form and undertaking from the respective Medical

 Confere.

Digitally Signed ₩ ₩ ₩ ₩ ₩ ₩ Prakash Singh

Date: 31-12-2021 17:35:29
Reason: Approvedp. Singh)

DDG (ICMR) & Scientist E

No. V.230 H H 22016-11R

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- 1 copy the new with a copy of the budget statement forwarded for information to irrule; an improvementor in RDI s. Department of Microbiology. King George's Medical and control lands on
- 2. Copy regether with two copies of the budget statement forwarded to the Sh.

Manchas Lal, Section Officer, Accounts Section, ICMR for information and reconstitution of Montally Bank Statement please. This may be debited under head TDHKT lands received from DHR for this activity.

- 3. IRIS : off (Division of P&I), Indian Council of Medical Research, New Delhi.
- 4. The Innector General, Indian Council of Medical Research, New Delhi.
- 5. Dr. Navedita Ciapta, Scientist E, ICMR, for kind information please.
- 6. Dr. Human Kaur, Seventist C

7. Copy to 17le No. V.25011/112/2016-HR

Yours faithfully,

(Dr. V.P. Singh) DDG (ICMR) & Scientist E

ANNEXURE-I

Budget Statement

BUDGET BREAK-UP AS PER THE GUIDELINES

RECURRING GRANT-IN-AID

1

| Name of VRDL: | Budget Break-up Details | Amount (in Rs. |
|--|-------------------------|----------------|
| VRDL in the King George's | Med Staff Salaries | 33,50,000/- |
| ical University, Lucknow. | CCT | 18,75,000/- |
| A Comment | TOTAL | 52,25,000/- |
| All the state of t | | |

(Rupees Fifty Two Lakhs Twenty Five Thousand Only)

The state file of the VP. Stratest and the state of file and the state of the state

SE BE SEE SEE fatt in 656 स्थारको भारतासुन्धार व त्यार च राज्य व स्थारको भ्रोतिकाच व त्यार र स्थाप Scene / all yearch

thinking of Hooling is a newly visiting with separate / Govern Louise and Tapas / Hooling Desire Desire

किंग जॉर्ज चिकित्सा विश्वविद्यालय उत्तर प्रदेश, वित्त एवं लेखा लखनऊ — 226003

फोन : 91-0522-2257545, फैक्स : 91-0522-2257545 वेबसाइट :www.kgmcindia.edu.

पत्रांक : 1863 /विता एवं लेखा / 2021

दिनांक 27/08/2021

सेवा में,

अतिआवश्यक / तुरन्त / आज ही

H.

विभागाध्यक्ष,

01. बाल रोग विभाग

02. मानसिक रोग विमाग

03. प्रसृति एवं स्त्री रोग विभाग

04. माईकोबायलोजी विभाग

V 05. यूरोलॉजी विभाग

06. अधिष्ठाता नर्सिंग, के०जी०एम०यू० लखनऊ।

07. इंचार्ज रिसर्च सेल, के०जी०एम०यू० लखनक।

महोदय,

कृपया मिशन निर्देशक के पत्रांक संख्या एस०पी०एम०थू०/एन०एथ०एम०/लेखा/2019-2020/85/2988-2 दिनोंक 26/08/2021 तथा मुख्य विकित्सा अधिकारी कार्यालय के पत्रांक संख्या मु०चि०अ०/एन०एच०एम०/लेखा/न्यू वैकिंग/2021-22/9786-20 दिनोंक 27/08/2021 का संदर्ग ग्रहण करने का कष्ट करें जिसमें राष्ट्रीय स्वास्थ्य मिशन के अन्तर्गत संवालित वैक खाते बन्द करके अवशेष धनशिश को नवीन बैंक खाते (आई०ए०) के बैंक खाते में हस्तांवारित कराने के सम्बन्ध में निर्देशित किया गया है। मिशन निर्देशक के पत्रांक संख्या एस०पी०एम०यू०/एन०एच०एम०/लेखा/2019-2020/85/2077-4 दिनोंक 24.07.2021 वे. हारा भारत सरकार हारा निर्धारित नवीन वैकिंग व्यवस्था के अन्तर्गत स्टेट बैंक ऑफ इण्डिया चौक ब्रांच में किंग जार्ज मेंडिकल कालेज के नाम एक IA खाता खोला गया है जिसमें एन०एच०एम० का समस्त पैसा स्थानान्तरित किया जाना है।

उपरोक्त के कम में आप सभी से अनुरोध है कि आपके दिमाग में संचालित खातों में जो भी एन०एच०एम० का पैसा हो इण्डियन बैंक, के०जी०एम०यू० के खाता संख्या 50144231294 जिसका आई०एफ०एस०री० कोड IDI6000K656 में आज ही अपरान्ह 02:00 बजे तक स्थानान्तरित करते हुए अधाहरताक्षरी को अवगत कराने का कष्ट करें।

आपके सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित।

भवदीय

वित्ते सिर्धकारी कंतजीवएमध्यूवः उठप्रठ,

लखनक

प्रेपक,

मुख्य चिकित्सा अधिकारी, लखनक ।

सेवामें,

विमागाध्यक्ष यूरोलाजी विभाग, किंग जार्ज चिकित्सा विश्वविद्यालय, लखनऊ।

पत्रांक-एन.एच.एम. / डी.एच.एस. / लेखा / परि०क० / 2019-20

विषय-पुरुष नसबन्दी क्षतिपूर्ति हेत् धनराशि अवमुक्त करने के सम्बन्ध में।

महोदय

आपके पत्रांक-एन.एस.वी. /यूरो० / 183 दिनांक 29.08.2019 के कम में रू० 5 लाख की धनराशि आपके संस्थान के एन.एच.एम. बैंक खाते में दिनांक 09 सितम्बर, 2019 को जिला स्वास्थ्य समिति स्तर से निम्नानुसार निर्गत की जा चकी है-

| 51. No. | Name of Units | A/c No. | Advice No. | Released Amount for NSV |
|------------|---------------|-------------|---------------|-------------------------|
| 1 | KGMU Lucknow | 50144231294 | C091904014385 | 500000.00 |

उक्त के कम में आपसे अपेक्षा है कि इस धनराशि को उपलब्ध दिशानिर्देश के अनुरूप नियमानुसार व्यय करते क्षेये व्यय विवरण ससमय अधोहरः।।क्षरी को प्रेषित करने का काट करें।

संलग्नक-उपरोक्तानुसार।

पत्रांक-एन.एच.एम./डी.एच.एस./लेखा/ब्लंड सर्वि०/२०१९-२०//3 ७/४ - ६ दिनांकित । प्रतिलिपि-निम्नलिखित को सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित-1. कुलपति, किंग जार्ज चिकित्सा विश्वविद्यालय, लखनऊ।

- 2. वित्त नियन्त्रक, एन.एच.एम., ७०५०, लखनऊ।
- महाप्रबन्धक, प0क0, एन.एच.एम., च०प्र०, लखनऊ।
- वित्त अधिकारी, के.जी.एम.यू, लखनऊ।
- अपर मुख्य चिकित्सा अधिकारी(आर.सी.एच.) / प०क०, लखनऊ।
- जिला कार्यकम/लेखा प्रबन्धक, एन.एन.एम., लखनऊ।

मुख्य चिकित्साधिकारी लखनऊ।



भारतीय आयुर्विज्ञान अनुसंघान परिपद रवारथ्य अनुरांघान विमाग, रवारथ्य एवं परिवार कल्याण गंजालय, भारत रारकार

Indian Council of Medical Research Department of Health Research, Ministry of Health and Family Welfare, Government of India

No. AMR/88/2017-ECD-II

Dated: //-//- 202/

To

The Vice Chancellor, King George's Medical University (KGMU), Lucknow- 226003, Uttar Pradesh

Subject: Continuation for the 4th year for project entitled, "KGMU: Regional Center for Antimicrobial Resistance Surveillance Network" under Dr. Prashant Gupta, MD, Department of Microbiology, King George's Medical University (KGMU), Lucknow-226003

Sir.

The Director-General of the Indian Council of Medical Research sanctions an allotment for Rs. 10,20,969/- (Rupees Ten Lakh Twenty Thousand Nine Hundred Sixty Nine Only) as detailed in the attached budget statement for the above mentioned project for the year 01/07/2021 to 30/06/2022 during the year 2021-22 subject to the following conditions:

1. The grant will be released to the head of the Institution in two installments during the financial year on receipt of the demand in the prescribed form as indicated below:

1st & Final installment of 4th Year grant = Rs. 10,20,969/-

While asking for the release of the installment it may be ensured that the amount for the pay and allowances of the staff who are actually in position is included. The unspent balance available out of the funds paid during the year previous year should be intimated. This will be adjusted against the current year's grant.

2. A separate account for the grant received and expenditure incurred shall be maintained. The account will be subjected to audit by the authorized auditors of the Institutions. In case, facilities are not available for such auditing, the account will be audited by the Council's own internal auditors. Latest by the end of December, following the financial year for which the grant is paid, and audit certificate from the auditors to the effect that the accounts have been audited and that the money was actually spent on the objects for which it was sanctioned shall be submitted to the Council along with a list of non-expendable articles purchased out of the grant during the year. Any unspent balance would be refunded to the ICMR on termination of the scheme.

Further grants will be stopped unless audited statements of accounts and utilization certificate are received within a period of the year after the end of the financial year for which grant was sanctioned. Further grants will be stopped unless audited statements of accounts and utilization certificate are received within a period of the year after the end of the financial year for which grant was sanctioned

Contd 2/-....

The last installment of the grant will be paid on receipt of the audited certificate will be paid on receipt 3. The last installment of the grant will be paid on record before but defrayed which should included all the liabilities of last year, expenditure pertains should be should included all the liabilities of last year, expenditure pertains should be shoul clearly.

The grant will not be regarded as a subvention, towards the normal work of the Institution 4. The grant will not be regarded as a subvention, but should be exclusively utilized for the Research activity for which it has been sanctioned, but should be exclusively utilized for the Research activity for which it has been sanctioned.

Expenditure should on no account exceed the allotment sanctioned for the enquiry. 5. Expenditure should on no account execut and anount against one or more subheads of Expenditure incurred over and above the sanctioned amount against one or more subheads of Expenditure incurred over and above the sanctioned and state of the expenditure such as pay allowances, contingencies, etc. shall be met without reference to the expenditure such as pay allowances, contingencies, oto sub-heads provided that the total ICMR by re-appropriation of savings under remaining sub-heads provided that the total expenditure incurred during the financial year. No expenditure shall however, be incurred by reappropriation of savings on items not sanctioned by the Council i.e. non-consumable equipment, appropriation of savings on noise not sanctioned by the Council Savings shall also not be re-appropriated for meeting on incurring expenditure on staff that has not been sanctioned by the Council.

The grant paid by the Council shall be refunded in full by the institution if and when the grantee concerned discontinuous a scheme midway or does not follow the detailed technical

programme laid down and approved.

Receipt, realized by the project officer on behalf of ICMR project, if any, will be remitted to the Council as miscellaneous receipts and not utilized for meeting expenditure of the project.

All facilities for conduct of the research scheme basic equipment and ordinary laboratory chemicals, glassware, furniture and other assistance, as may be required, for the smooth working of the research scheme shall be provided by the Institute.

The stores purchased out of the grant of the Council shall be entered in the property stock register and presented auditors for check and endorsement. The usual forms used for these registers and all purchases made in accordance with the procedure in vogue in your institution.

Only such equipment for which provision has been made in the budget shall be 10. purchased.

All the non-expendable articles purchased out of the funds of the Council will be the property of the Council and will not be disposed of without their concurrence.

The staff employed on the on the research schemes will not be the Council's employee 12. but for all purposes be treated as employees of the Institute and will be subject to the rules and administrative control of the Institute and will be accordance with the normal recruitment's rules and procedures of the Institute. The scale of pay, allowances etc. applicable to the staff of the schemes will be the same as admissible under the rules of the grantee Institution. Prior approval of the Council will however be necessary if pay higher than that admissible under the rules of the Institution is sought to be given e.g. by grant of advances increments or ad-hoc increase.

The Council will not be liable to bear any expenditure pension provident fund contribution and or leave salary contribution incurred or committed by the grantee and person appointed on deputation from any other organization.

Report of Work Done

The grant is being sanctioned on the condition that reports on the progress of work done 14. on the research scheme will be submitted by you to the Council as and when called for. Normally a progress report of work done on the enquiry is to be submitted to the Council an and when required, the enquiry maybe discontinued immediately unless there is sufficient justification for non-submission of the report of work done on the research scheme.

Contd....3/-

The financial assistance rendered by the Council will be acknowledge in any published fig. of work which the grant is given.

A list of papers published based on the work carried out on enquiry under the auspices of 16. the ICMR shall be obtained before publication of any such paper in a foreign journal.

patents

The Council shall have the right to take out patent in respect of invention/discoveries made under scheme protect financial by the Council. The Officer-in-charge or the staff employed on. ICMR scheme shall not apply or obtain patents for any invention/discovery made by them without prior approval of the Council.

All the patents will be registered in the name of the Indian Council of Medical Research.

Termination of Research Scheme

- Prior permission of the Council shall obtained if the investigator desires to discontinue the research scheme. The reasons for discontinuing the scheme should invariably be stated.
- A final report is required to be submitted within one month from the date of termination of the research scheme.
- A list (in duplicate) of non-expendable and expendable articles together with property registers and suggestions for disposal of the articles should be sent to the Council within a month from the date of termination of the research scheme.
- The Institute will maintain a separate saving bank account of the receipts and the 22. expenditure incurred on the research scheme and will furnish a utilization certificate and an audited statement of the account pertaining to the grant.

The grant will be utilized after following provision laid down in GFR-2017 and TA rules.

The receipt of this letter may kindly be acknowledged.

Yours faithfully,

Administrative Officer

File No.AMR/88/2017-ECD-II

Dr. Prashant Gupta, MD, Department of Microbiology, King George's Medical University (KGMU), Lucknow-226003, Uttar Pradesh.

2. Copy together with two copies of the budget statement forwarded to the Accounts Section, ICMR for information and necessary action. RFC No: (P-44)ECD/NTF/4/2018-19 dt. 21/05/2018.

3. Copy together with two copies of the budget forwarded to the Finance Section, ICMR for compilation of the Council's budget.

4. IRIS Cell (Division of P & I), ICMR IRIS No. 2017-10250/F1 dt 28/03/2017

5. Mrs. Vandana, Sr. T.O.-II

Administrative Officer

The Budget for the 4th Year period 01.07.2021 to 30.06.2022

| S. No. | Item | - |
|-----------|--|----------------------|
| A) | Staff | 4 th Year |
| | Research Assistant @ 35,050/- 12 | 600 6001 |
| | Data Entry Operator(Grade 'A')(1) @ 19,280/- ×12 | 4,20,600/- |
| B) | Contingencies(Recurring) | 2,31,360/- |
| | Reagents | 75,000/- |
| | Culture media | 65,000/- |
| | Antibiotic discs/ Vitek 2 cards | 1,00,000/- |
| | Glassware/ other consumables | 25,000/- |
| | Standard strains | 40,000/- |
| | Miscellaneous/ stationary etc | 10,000/- |
| <u>C)</u> | Travel | 25,000/- |
| D) | Overhead Charges @ 3% | 29,009/- |
| | Total (Rs.) | 10,20,969/- |

Grand Total = 10,20,969/-(Rupees Ten Lakh Twenty Thousand Nine Hundred Sixty-Nine Only)

Yours faithfully,

(Ved Prakash) Administrative Officer



रवारथ्य अनुसंघान विभाग, रवारथ्य एवं मरिवार कत्याण मंत्रालय, भारत सरकार

Indian Council of Medical Research Department of Health Research, Ministry of Health and Family Welfare, Government of India

Dated: //-//- 202/

File No. AMR/88/2017-ECD-II e-File No. 75567

Subject:-Payment of 1^{5t} & Final installment of 4th year grant-in-aid for the research scheme entitled, "KGMU: Regional Center for Antimicrobial Resistance Surveillance Network" under Dr. Prashant Gupta, MD

MEMORANDUM

The Director General, ICMR sanctions the payment of Rs. 10,20,969/-(Rupees Ten Lakh Twenty Thousand Nine Hundred Sixty-Nine Only) as the 1st & Final installment of the grant for 4th Year for incurring expenditure in connection with the above mentioned research scheme. The provision of Rs. 10,20,969/- made for the above research scheme for the current financial year 2021-22.

A sum of 46,781/- is lying with the PI as unspent balance from the grant related during last year. A formal bill for Rs. 10,20,969/- is sent herewith for (i) adjustment of Rs. 46,781/- (ii) for payment of Rs. 9,74,188/- by RTGS to Vice Chancellor, King George's Medical University (KGMU), Lucknow

(Ved Prakash) Administrative Officer

Accounts Section V, ICMR.

Copy to:-

- 1. The Vice Chancellor, King George's Medical University (KGMU), Lucknow-226003
- 2. Dr. Prashant Gupta, MD, Department of Microbiology, King George's Medical University (KGMU), Lucknow-226003
- 3. IRIS Cell (Division of P&I, ICMR. IRIS No. 2017-10250/F1 dt 28/03/2017
- 4. Mrs. Vandana, Sr. T.O-II

00

Spots

PABX: 26588980, 26588707, 26589336, 26589745

26589873, 26589414

FAX: 011-26588662, 26589791

icmrhqds@sansad.nin.in

GRAM : SCIENTIFIC Web-site: www.icmr.nic.in

e-mail:

INDIAN COUNCIL OF MEDICAL RESEARCH

V. Ramalingaswami Bhawan, Ansari Nagar, New Delhi - 110 029

No. AMR/166/2018-ECD-II

Dated: 16/1/19

To

The Vice- Chancellor King George's Medical University, Uttar Pradesh, Lucknow- 226 003, India

Subject: Sanction of budget allotment for the project entitled as "KGMU, Lucknow: Initiating Antimicrobial Stewardship activities in hospitals in India" under Dr. Himanshu D, Associate Professor, Department of Medicine, KGMU, Lucknow.

Sir.

The Director General of the Council sanctions the above mentioned research scheme initially for a period of **One Year** subject to extension upto the total duration specified in para 3(3) below.

The Director General of the Council also sanctions the budget allotment Rs.9,56,820/-(Rupees Nine Lakh Fifty Six Thousand Eight Hundred and Twenty Only) as detailed in the attached statement for the period w.e.f 01.02.2019 year ending on 31.01.2020 during 2018-19.

The grant-aid will be given subject to the following conditions:

1. The payment of the grant will be made in lump-sum to the Head of the Institution. The first installment of the grant will be paid generally as soon as a report regarding the commencement of the project and appointment of the staff is received by the Council. The demand for payment of the subsequent installment of the grant should be placed with the Council in the prescribed performa attached. The installments will be released as indicated below:-

First Installment = Rs. 8,66,820/-

Second Installment = Rs. 90,000/- (Second/ Final Installment will be released on

receipt of SOE/ Audited Statement & final report of the project)

Total = Rs.9,56,820/-

2. The staff appointed on the project should be paid as indicated in the budget statement attached.

- 3. The approved duration of the scheme is for 1 Year. The annual extension will be given after review of the work done on the scheme during the previous year.
- 4. Fifteen copies of the Annual Progress Report of work done be submitted to the Council every year after completion of ten months of the project. Failure to submit the report in time may lead to termination of the project.

- 5. The institute will maintain a separate account of the receipts and the expenditure incurred on the scheme and will furnish a utilization certificate and an audited statement of account pertaining to the grant.
- 6. The other terms and conditions are indicated in the website of ICMR (www.icmr.nic.in) for "Guidelines for operation of projects for Grantees of ICMR's Extramural Research Projects". The receipt of this letter may please be acknowledged.

Yours faithfully,

(Arti Chawla)
Administrative Officer
for Director General.

Copy together with a copy of the budget statement forwarded for information to: -

- 1. Dr. Himanshu D, Associate Professor, Department of Medicine, King George's Medical University, Uttar Pradesh, Luknow- 226 003, India.
- Copy together with two copies of the budget statement forwarded to the <u>Accounts Section V, ICMR</u> for information and necessary action.
 RFC No. (P.No. 49) ECD/NTF/30/2018-19 Dt. 10/01/2019.
- 3. Copy together with two copies of the budget forwarded to the <u>Finance Section</u>, <u>ICMR</u> for compilation of the Council's budget.
- 4. IRIS Cell (Division of P & I), ICMR. IRIS No. 2018-5128N

5. Mrs. Vandana, Sr. TO, ECD, ICMR Hqr, Ansari Nagr, New Delhi- 29

for Director General.

Budget for 1 year is:

| S. No. | Item | 1 st Year | |
|------------|---|----------------------|--|
| A) | Staff | Village Service | |
| | Research Associate-I @ Rs. 36,000/- Per Month + 20% HRA (Rs.7,200/-) = Rs. 43,200/- | Rs.5,18,400/- | |
| B) | Contingency Recurring | | |
| | Stationary/ Miscellaneous | Rs. 50,000/- | |
| C) | Travel | Rs.1,00,000/- | |
| D) | Non- Recurring (Equipment) | | |
| | Desktop Computer | Rs.50,000/- | |
| E) | Workshops | Rs.2,00,000/- | |
| F) | Overhead Charges @ 5 % | Rs.38,420/- | |
| | Grand Total | Rs.9,56,820/- | |

Grand Total = Rs.9,56,820/-(Rupees Nine Lakh Fifty Six Thousand Eight Hundred and Twenty Only)





National Accreditation Board for Testing and Calibration Laboratories

SCOPE OF ACCREDITATION

Laboratory Name

CHEMICAL PATHOLOGY LAB, POST GRADUATE DEPARTMENT OF PATHOLOGY, KING GEORGE'S MEDICAL UNIVERSITY, KGMU, SHAHIMEENA ROAD CHOWK, LUCKNOW, UTTAR PRADESH, INDIA

Accreditation Standard

ISO 15189:2012

Certificate Number

MC-2563

Page No.:

1/3

Validity

30/01/2020 to 29/01/2022

Last Amended on

| S.No | Discipline | Materials or Products tested | Component, parameter or characteristic tested / Specific Test Performed / Tests or type of tests performed | Test Method Specification against which tests are performed and / or the techniques / equipment used | %CV |
|------|------------------------------|------------------------------|--|--|-----|
| | · | | Permanent F | acility | |
| 1 | CLINICAL BIOCHEM ISTRY | Serum | VLDL-Cholesterol | Calculated | NA |
| 2 | CLINICAL BIOCHEM ISTRY | Plasma | Glucose | GOD-POD | 4.6 |
| 3 | CLINICAL BIOCHEM ISTRY | Serum | Albumin | Bromocresol green | 4.5 |
| 4 | CLINICAL BIOCHEM ISTRY | Serum | Alkaline Phosphatase | DGKC (Deutsch Gesellschaft Fur Klinische Chemie) | 5.3 |
| 5 | CLINICAL BIOCHEM ISTRY | Serum | Amylase | CNPG (2-chloro-4-nitrophenyl-a-maltotrioside), Kinetic Assay | 5.5 |
| 6 | CLINICAL BIOCHEM ISTRY | Serum | Creatinine | Enzymatic - Colorimetric | 5.8 |
| 7 | CLINICAL BIOCHEM ISTRY | Serum | Direct Bilirubin | Malloy-evelyn | 4.9 |
| 8 | CLINICAL BIOCHEM ISTRY | Serum | HDL-Cholesterol | PVS & PEGME (Polyvinyl sulfonic acid & Polyethyleneglycol-methyl ether) | 5.3 |
| 9 | CLINICAL BIOCHEM ISTRY | Serum | Ionic Calcium | ISE Indirect | 3.9 |





National Accreditation Board for Testing and Calibration Laboratories

SCOPE OF ACCREDITATION

Laboratory Name

CHEMICAL PATHOLOGY LAB, POST GRADUATE DEPARTMENT OF PATHOLOGY, KING GEORGE'S MEDICAL UNIVERSITY, KGMU, SHAHIMEENA ROAD CHOWK, LUCKNOW, UTTAR PRADESH, INDIA

Accreditation Standard

ISO 15189:2012

Certificate Number

MC-2563

Page No.:

2/3

Validity

30/01/2020 to 29/01/2022

Last Amended on

| S.No | Discipline | Materials or Products tested | Component, parameter or characteristic tested / Specific Test Performed / Tests or type of tests performed | Test Method Specification against which tests are performed and / or the techniques / equipment used | %CV |
|------|------------------------------|------------------------------|--|--|-----|
| 10 | CLINICAL BIOCHEM ISTRY | Serum | LDH | Pyurat to Lactate | 5.1 |
| 11 | CLINICAL BIOCHEM ISTRY | Serum | LDL-Cholesterol | Calculated | NA |
| 12 | CLINICAL BIOCHEM ISTRY | Serum | Lipase | Enzymatic Colorimetric | 7.7 |
| 13 | CLINICAL BIOCHEM ISTRY | Serum | Magnessium | Calmagite | 6.7 |
| 14 | CLINICAL BIOCHEM ISTRY | Serum | Phosphorous | Phosphomolybdate | 5.2 |
| 15 | CLINICAL BIOCHEM ISTRY | Serum | Potassium | ISE Direct | 2.6 |
| 16 | CLINICAL BIOCHEM ISTRY | Serum | SGOT/AST | IFCC-UV without P5P | 5.4 |
| 17 | CLINICAL BIOCHEM ISTRY | Serum | SGPT/ALT | IFCC-UV without P5P | 4.6 |
| 18 | CLINICAL BIOCHEM ISTRY | Serum | Sodium | ISE Direct | 1.2 |





National Accreditation Board for Testing and Calibration Laboratories

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CHEMICAL PATHOLOGY LAB, POST GRADUATE DEPARTMENT OF PATHOLOGY, KING GEORGE'S MEDICAL UNIVERSITY, KGMU, SHAHIMEENA ROAD CHOWK, LUCKNOW, UTTAR PRADESH, INDIA

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| S.No | Discipline | Materials or Products tested | Component, parameter or characteristic tested / Specific Test Performed / Tests or type of tests performed | Test Method Specification against which tests are performed and / or the techniques / equipment used | %CV |
|------|------------------------------|------------------------------|--|--|-----|
| 19 | CLINICAL BIOCHEM ISTRY | Serum | Total Bilirubin | Malloy-evelyn | 4.2 |
| 20 | CLINICAL BIOCHEM ISTRY | Serum | Total Calcium | Arsenazo | 5.1 |
| 21 | CLINICAL BIOCHEM ISTRY | Serum | Total Cholesterol | CHOD-PAP (Enzymatic Method) | 4.7 |
| 22 | CLINICAL BIOCHEM ISTRY | Serum | Total Protein | Biuret | 3.3 |
| 23 | CLINICAL BIOCHEM ISTRY | Serum | Triglyceride | Enzymatic, Colorimetric | 4.6 |
| 24 | CLINICAL BIOCHEM ISTRY | Serum | Urea | Enzymatic Urease | 4.8 |
| 25 | CLINICAL BIOCHEM ISTRY | Serum | Uric Acid | Uricase-POD | 4.2 |



भारतीय आयुर्विज्ञान अनुसंधान परिषद स्वास्थ्य अनुसंधान विभाग, स्वास्थ्य और परिवार कल्याण मंत्रालय, भारत सरकार

Indian Council of Medical Research

Department of Health Research, Ministry of Health
and Family Welfare, Government of India

Dated: 28.12.2021

Notification

With reference to call for Expression of Interest for participation in the Indian Clinical Trial & Education Network (INTENT) dated 22.09.2021, the applications received were reviewed by a screening committee, consisting of external experts. The institutes were selected under the following subheads:

- 1. Advanced Centre for Clinical Trial (ACCT)
- 2. Regional Clinical Trial Unit (RCTU)
- 3. ICMR-Centre for Clinical Trial (ICCT)
- 4. Specialty Centre for Clinical Trial (SCCT)
- 5. Knowledge Partner for Clinical Trial (KPCT)

The Institutes/Centres selected to be a part of the INTENT are tabulated below. The details of the network, along with the Terms of Reference (ToR) will be shared with the centres individually.

Dr. Aparna Mukherjee

(on behalf of Indian Clinical Trial & Education Network)
Scientist-E & In charge
Clinical Studies, Trials & Projection Unit
Epidemiology and Communicable Division
Indian Council of Medical Research, New Delhi



1. Advanced centers for clinical trials (ACTT)

| Zone | Institute | Lead Applicant |
|---------|--|-----------------------------|
| | All India Institute of Medical Sciences, New Delhi | Dr. Rakesh Lodha |
| North | Post Graduate Institute of Medical Sciences and | Dr. Samir Malhotra |
| | Education, Chandigarh | |
| | S.M.S. Medical College and Attached Hospitals, | Dr. Sudhir Bhandari |
| | Jaipur, Rajasthan | |
| West | Mahatma Gandhi Institute of Medical Sciences, | Dr. Abhishek V. Raut |
| 77631 | Sevagram, Maharashtra | |
| | ICMR- National AIDS Research Institute (NARI), | Dr. Abhijit Vasantrao Kadam |
| | Pune, Maharashtra | |
| | All India Institute of Medical Sciences, | Dr. Sujit Kumar Tripathy |
| East | Bhubaneswar, Odisha | |
| 2434 | ICMR- National Institute of Cholera and Enteric | Dr. Suman Kanungo |
| | Diseases (NICED), Kolkata, West Bengal | |
| North- | North Eastern Indira Gandhi Regional Institute of | Dr. Chayna Sarkar |
| East | Health and Medical Sciences (NEIGRIHMS), | |
| Lust | Shillong, Meghalaya | |
| Central | King George Medical University, Lucknow, Uttar | Dr. Himanshu D Reddy |
| Central | Pradesh | |
| | Jawaharlal Institute of Medical Education & | Dr. Sandhiya Selvarajan |
| | research (JIPMER), Puducherry | |
| South | St Johns Medical College, Bengaluru, Karnataka | Dr. Denis Xavier |
| | Amrita Institute of Medical Sciences, Kochi, | Dr. Jaideep Menon |
| | Kerala | |

2. Regional Clinical Trial Unit (RCTU) (MRU/ MRHRU Network)

| Zone | Institute | |
|------------|---|--|
| 3.7 .4 | | |
| North | All India Institute of Medical Sciences, Rishikesh, Uttarakhand | |
| West | ICMR-National Institute For Research In Reproductive and Child Health | |
| VVEST | Mumbai (Dahanu), Maharashtra | |
| East | ICMR-Regional Medical Research Centre, Bhubaneswar (Tigria), Odisha | |
| Last | Rajendra Institute of Medical Sciences, Ranchi, Jharkhand | |
| North-East | ast Silchar Medical College & Hospital, Silchar, Assam | |
| South | Gandhi Medical College, Secunderabad, Telangana | |



3. ICMR Centers for Clinical Trials (ICCT)

| Zone | Institute | Lead Applicant |
|------------|---|-------------------------------|
| | Pandit Bhagwat Dayal Sharma Post Graduate Institute of Medical Sciences (PGIMS) Rohtak, Haryana | Dr. Savita Verma |
| North | Government Medical College and Hospital, Chandigarh | Dr. Deepak Chawla |
| | Dayanand Medical College and Hospital, Ludhiana, Punjab | Dr. Sandeep Kaushal |
| | Christian Medical College, Ludhiana, Punjab | Dr. M Joseph John |
| | All India Institute of Medical Sciences, Jodhpur, Rajasthan | Dr. Pankaj Bhardwaj |
| West | KEM Hospital & Research Centre, Pune, Maharashtra | Dr. Anand Kawade |
| vvest | Dr. D. Y. Patil Medical College, Hospital and Research Centre, Pune, Maharashtra | Dr. Srikanth Tripathy |
| | Datta Megha Medical College, Wardha, Maharashtra | Dr. Zahiruddin Quazi Syed |
| | SCB Medical College and Hospital, Cuttack, Odisha | Dr. Samita Mahapatra |
| East | IMS & SUM Hospital, Bhubaneswar, Odisha | Dr. Soumya Surath Panda |
| | ICMR- Rajendra Memorial Research Institute of Medical Sciences, Patna, Bihar | Dr Krishna Pandey |
| North-East | JN Medical College, Imphal, Manipur | Dr. H. Nirendrakumar Singh |
| Central | All India Institute of Medical Sciences, Bhopal, Madhya Pradesh | Dr. Rajnish Joshi |
| | Tirunelveli Medical College, Tirunelveli, Tamil Nadu | Dr. Shantararaman.K. |
| | Karnataka Institute of Medical Sciences, Hubli, Karnataka | Dr. Ram S. Kaulgud |
| | Pondicherry Institute of Medical Sciences, Puducherry | Dr. Anil J Purty |
| South | DM Wayanad Medical College, Wayanad, Kerala | Dr. Aneesh Basheer |
| South | Narayana Medical College & Hospital, Nellore | Dr. Surya Prakash Rao |
| | Jawaharlal Nehru Medical College, KLE Academy of Higher Education and Research Belagavi, Karnataka | Dr Shivaprasad S Goudar |
| | SRM Medical College Hospital & Research Centre, Chennai, Tamil Nadu | Dr. Melvin George |



4. Specialty Center for Clinical Trial (SCCT)

| Specialty | Institute | Lead Applicant |
|---------------|---|-----------------------------|
| Tuberculosis | ICMR-National Institute for Research in Tuberculosis (NIRT), Chennai, Tamil Nadu | Dr. C. Padmapriyadarsini |
| Cancer | Tata Memorial Centre, Mumbai, Maharashtra | Dr.Rajendra A Badwe |
| Neurology | National Institute of Mental Health and Neurosciences (NIMHANS), Bengaluru, Karnataka | Dr Sriganesh K |
| | Sree Chitra Tirunal Institute for Medical Sciences & Technology, Trivandrum | Dr. Jeemon Panniyammakal |
| Endocrinology | Diabetes Foundation, New Delhi | Dr. Anoop Misra |
| Laboratory | ICMR-National Institute of Virology, Pune, Maharashtra | Dr. Pragya D. Yadav |

5. Knowledge Partners for Clinical Trials (KPCT)

| Institute | Lead Applicant |
|--|----------------------|
| The George Institute of Public Health, Hyderabad, | Prof. Vivekanand Jha |
| Telangana | |
| Centre for Chronic Disease Control (CCDC), New Delhi | Dr. Kavita Singh |
| Centre for Public Health Kinetics, New Delhi | Dr. Sunil Sazawal |

RESEARCH COLLABORATION AGREEMENT

National COVID-19 Clinical trial registry -India

This National COVID-19 Clinical registry Agreement ("Agreement") is made effective as of August 18th, 2020 (the "Effective Date") by and among:

(1) Indian Council of Medical Research, (hereinafter referred to as ICMR) an autonomous Organization under the laws of India, having its registered office at Ansari Nagar, New Delhi - 110029, India.

AND

2) King George's Medical University Chowk Lucknow; an autonomous institution having its Registered Office at chowk lucknow226003 Uttar Pradesh India., represented by its Dean/ Principal/Principal Investigator, hereinafter referred to as Dean...(which expression shall where the context so admits include its successorsand permitted assigns)......

NOW, THEREFORE, THE PARTIES HEREBY AGREE AS FOLLOWS:

ARTICLE 1. DEFINITIONS

- 1.1. 'Chief Data Controller' shall be the Director General, ICMR or anyone appointed by
- 1.2. 'Controllers' shall collectively mean the Chief Data Controller and all Data Controllers at the various Registries.
- 1.3. 'Data' shall mean any representation of information, knowledge, facts, concepts or instructions relating to a data subjected to who has been diagnosed with COVID-19 which are being prepared or have been prepared in a formalized manner, and is intended to be processed by the NCRC or any person/body authorized by the NCRC for the purpose of maintaining a Registry.

1.4. 'Data Controller' shall mean the Principal Investigator (PI) at any of the Registries tasked with supervising the collection of COVID-19 data.

1.5. Data Subject' means the identifiable natural person whose COVID data is processed by the Registry.

1.6. 'Personal Information' or 'Personal Data' means any information that relates to a natural person, which, either directly or indirectly, in combination with other information, is capable of identifying such person. Personal information shall include all "sensitive personal information" as defined under the Information Technology (Reasonable security practices and procedures and sensitive personal data or information) Rules, 2011 to mean "physical, physiological and mental health condition; sexual orientation; medical records and history and Biometric information".

1.7. 'Processing of Data' denotes any and all operations performed upon data, whether or not by automatic means, such as collection, recording, organization, storage, adaptation or alteration, analysis and reporting, retrieval, consultation, use, disclosure by transmission, dissemination or otherwise making available, alignment or combination, blocking and erasure.

1.8. 'Registry' refers to software based registry system set up at DCH (Designated Covid Hospitals) and DCHC(Designated COVID Hospital Centers) as identified by the Indian Council of Medical Research for this project.

1.9. Source of Registration refers to a DCH(Designated Covid Hospitals) and DCHC(Designated COVID Hospital Centers) physician, pathology, laboratory or any

other body which directly collects data from the data subject.

"Parties" means ICMR and "Party" means any one of them.

'Third Party' refers to any natural or legal person, public authority, agency or anybody other than the Data Subject, the Source of Registration, the Registry, ICMR the Chief/Data Controller or any person authorized by the Data Controller

National COVID Registry Protocol" or "Protocol" means the protocol for the Clinical Registry for COVID-19 (including the electronic case record form(s), participant information sheet(s), and informed consent document(s)) developed by the Parties and approved by the applicable IRBs/IECs, and all amendments there to be approved in writing by the Parties and all such IRBs/IECs.

"Budget" means the budget for the direct, external costs to carry out the project 1.13.

approved by ICMR and to be shared subsequently with site.

"Financial Report" means a completed Financial Report Formats per ICMR 1.14.

Formats or a report otherwise acceptable to ICMR.

"Institutional Review Board" or "IRB" means an independent body constituted of medical, scientific and non-scientific members for each participating site whose responsibility is to ensure the protection of the rights, safety, and well-being of study participants.

- 1.16. "Investigator" means the Principal Investigator and co-investigators identified in the Protocol.
- 1.17. "Joint Publication" means publication with ICMR and collaborating partners.
- 1.18. "Operational Committees" means that body created by ICMR for the oversight and day to day management of the Clinical Registry..
- 1.19. "Press Release" shall have the meaning set forth in Section 10.
- 1.20. "National Registry Staff" means the individuals providing services under the supervision of the Investigator with respect to the conduct of the registry including without limitation sub-investigators, study coordinators, and other Site employees, agents; or permitted subcontractors.
- 1.21. Mentoring registry sites -These are 15 pre-identified institutes to be assigned with responsibility of training and monitoring the satellite registry sites centers.
- 1.22. Satellite registry sites 100 satellite sites identified for data collection guided by mentoring registry sites.
- 1.23. Law Governing MoU: This MoU, its meaning and interpretation, and the relation between the Parties shall be governed by the applicable laws of India.

ARTICLE 2. The National Clinical Registry for COVID-19

- 2.1 Title: National Clinical Registry for COVID-19 (NCRC)
- 2.2 Dean/Director/Principal/Head of Institute: LT. GEN. Dr. Bipin Puri

ARTICLE 3. RESPONSIBILITIES; CONDUCT OF RESEARCH STUDY

DATA COLLECTION

3.1 AUTHORISATION AND INFORMED CONSENT

- 3.1.1. The Controllers (Chief Data Controller and all Data Controllers) shall ensure, as best as possible, that all institutions are authorized to collect and transfer such data in consonance with the broad framework of this policy. Data controller from sites to identify person for collection and transfer of such data as per this policy.
- 3.1.2. The Controllers (Chief Data Controller and all Data Controllers) shall ensure.
 - a. At satellite registry site all data collected are anonymous and unlinked to the patient to ensure no additional risk to the participating patient. Specific approval has been sought from the central ethics committee on this matter.
 - b. At mentoring registry sites verbal/electronic informed consent to be taken from enrolled study subject for follow-up.
- 3.1.3. Data controllers from mentoring sites will have responsibility for training, monitoring and data auditing at satellite registry sites.

3.2 PURPOSE, RELEVANCE AND RETENTION.

- 3.2.1. ICMR and/or registries shall only collect information from the data subject which is commensurate to the purpose for which the ICMR registry is maintained.
- 3.2.2. The purposes for which ICMR may collect data include, but not limited to:
 - a. Generate reliable data on the clinical and laboratory features, treatments, and outcomes of hospitalized COVID-19 patients in India.
 - b. Generate data on frequency, clinical and laboratory features, treatments and outcomes of C@VID-19 related multisystem inflammatory disorder in children and adolescents by analyzing the national COVID-19 registry data
 - c. Undertake epidemiological studies based on results of registry data
 - d. Help in designing, planning, monitoring and evaluation of COVID control activities and patient care under the relevant programs
 - Offer such data to parties/ third party researchers who in turn would use such data for the greater public good. For sharing data with parties refer article 4 section 4.1 and for third party please refer to article 4 Section 4.2.
- The controller shall put in place a quality control mechanism to ensure that the data collected is accurate and reliable and confidentiality of data is maintained at all levels of data collection.

ARTICLE 4 -DATA DISCLOSURE TO PARTIES and THIRD PARTY

4.1 With Parties (collaborating partners)

Any participating sites desiring access to data held by ICMR shall make a written request to ICMR. Such request shall include all particulars relevant to such request including the following:

- a. The name and full details of the applicant
- b. His/ Her collaboration with any foreign agency or participation in its management
- c. The nature and format of data required by them
- d. The reason for so desiring the data, including details of any project in furtherance of which the data is sought to be acquired, processed and used currently and any further use of such data
- e. The intended use of the data including the identity of any partners or collaborators that would have access to such data, once made available
- f. The identity of any organization who is partnering, collaborating and/or funding the project, in furtherance of which the data is so requested

Every request for data sharing as above shall be carefully scrutinized by the Chief Data Controller or person /committee identified by him/her

The party shall ensure the following:

- a. The data is used strictly in compliance with the terms of this policy, and cannot further share/transfer the data with any other individual or organization within or outside India.
- b. Prior to submitting the results of any "relevant research" for publication, the said results and the format, methodology and all other particulars surrounding the intended publications shall be made available to the ICMR. ICMR or person/ committee identified by it shall carefully evaluate the methodology and the research results to ensure that they comport with the best academic standards. Only after ICMR approval shall this research be released for publication.

4.2 With Third Parties.

Sharing of data with any third party is under sole discretio of the Steering committee constituted for this project.

ARTICLE 5- DATA SECURITY

5.1. Unauthorized access to data shall be prevented. The Controllers shall maintain a list of authorized individuals with access to the registry. Access to the data should be provided only to the extent necessary for the fulfillment of a defined purpose or objective.

5.2. The Controllers shall ensure that the registry and the storage/ transmission of data complies with international best practices and procedures in maintaining data. security, so long as such measures can be implemented without undue cost or burden to ICMR

ARTICLE 6- BINDING NOTICE

6.1. The Principal Investigator, shall be responsible for ensuring that the terms of this policy are complied with by all employees and others working under their supervision, who shall be bound by the said terms (particularly the need to maintain confidentiality of data) even after the termination of their employment/engagement.

ARTICLE'7-OTHER LAWS/GUIDELINES

- 7.1. To the extent applicable, the Principal Investigator shall ensure compliance with all relevant laws and policies including:
- 7.2. Norms relating to data processing, storage and transfer including the Sensitive Personal Data (Reasonable Security Practices) Rules, 2011, under the Information Technology Act.
- 7.3. ICMR*guidelines pertaining to research on human subjects and collection of consequent information /data

ARTICLE 8- BUDGETING, OBLIGATION, HR ENGAGAEMENT & FUNDING

8.1 Obligation of ICMR

As its sole financial obligation and liability under this Agreement, ICMRshall pay the amounts set forth in the Budget and in accordance with Section 8.2. The Budget shall be limited to that portion of the actual and reasonable direct, external costs and expenses incurred under this Agreement in performing the study. The budget is provided in Annexure

Financial Reports; Payment by ICMR

Currency of Payment: All payments shall be made by the sponsor (ICMR) inIndian Rupees.

. 8.2 ICMR shall provide funding to King George's Medical University for recurring expenses as incurred in human resource engagement etc. for the national COVID -19 clinical registry under this Agreement and in amounts up to those outlined in the Budget. No budget will be provided for purchase of any equipment or devices to be used during the study. The treatment of the registered participants including admission charges, ICU charges if needed, medicines and any other unforeseen requirement along with treatment of complications will NOT be met by ICMR. Also ICMR will not be responsible for any compensation directly or indirectly if death or disability

of any study subjects occurs including risk cover to the health workers involved.

King George's Medical University shall deposit and maintain all funds received from ICMR as per current ICMR guidelines as amended from time-to-time. Within thirty (30) days following the termination or expiration of this Agreement, King George's Medical University shall return to ICMR any unspent funds.

King George's Medical University shall prepare and submit, or shall ensure that a qualified member from the registry project team prepares and submits, written Financial Reports to ICMR listing budgeted costs and expenses incurred on a quarterly basis. All Financial Reports shall be submitted after certification by Investigator as well as dean as accurate with institutional stamp. Financial Reports will disclose all funds received together with the actual direct, external costs and expenses incurred for the COVID Clinical registry for which ICMR is responsible in accordance with this Agreement. After receipt and review of any Financial Report ICMR may, in its reasonable discretion, request to provide substantiating documentation or additional information, shall provide within thirty (30) days of receipt of such a request.

The research collaboration agreement with the registry site may be terminated under circumstances where the site fails to enroll 30 subjects or more consecutively for a period of two months. Under such circumstances the sites PI will have to return the balance amount to the ICMR.

8.3 Human Resource

a- ICMR shall fix the nomenclature of the post and the consolidated salary attached to the same and release the funds on six monthly basis, subject to the performance. The staff shall be engaged by the institute as per the prescribed norms/rules of respective Institution. The engagement of all the staff shall be initially for one year or till the project is closed whichever is earlier.

8.3 Site enrolling significantly more number of subjects may submit a written claim with justified reasons for additional human resource. After due approval from steering committee or committee identified by it additional HR may be hired.

ARTICLE 9-TERM, TERMINATION OF AGREEMENT

Agreement Term. This Agreement will commence on the Effective Date and willexpire after 1 year. Prior to termination King George's Medical University will have to submit the performance and financial Report to ICMR as per ICMR Format however, that this Agreement may terminate sooner as provided in this Article 9.

- 9.1 <u>Termination for Inadequate Funding.</u>ICMR may terminate this Agreement withthirty (30) days written notice to **King George's Medical University** in the event that inadequate funding is available for the COVID Clinical Registry, as determined by ICMR, at their sole discretion.
- 9.2 Termination for Efficacy and Other Matters Any Party may terminate this Agreement with thirty (30) days written notice to the other Parties, in the event of failure, despite good faith efforts, to obtain approval to proceed with the COVID Clinical Registry from all reviewing IRBs/IECS within one (1) months of submission to the last such IRB; the failure of funding for the COVID Clinical Registry to be made available for any reason; or termination of the COVID Clinical Registry pursuant to Applicable Laws and requirements; or In the event of a termination of the COVID Clinical Registry pursuant to this present Section , the Parties will undertake those obligations to terminate the COVID Clinical Registry as required under the Applicable Laws and Requirements and this Agreement. Financial responsibilities in the event of such termination shall be undertaken by the Parties in a manner that conforms to the obligation of termination but does not result in any one Party bearing the full financial impact of such termination.
- 9.3 Termination for Material Breach: If a Party materially breaches or neglects to perform its covenants, obligations, representations or warranties as outlined in this Agreement, and if such default is not cured within thirty (30) days after receiving written notice from another Party with respect to such default, ICMR will have the right to terminate this Agreement by giving an additional written notice of termination to all other Parties. Such notice of termination shall be effective upon receipt, but only if (i) the Party in default receives it within thirty (30) days of the written notice of default (or such longer period as the defaulting Party may mutually agree upon in writing), and (ii) the Party in default has not remedied the default before its receipt of the notice of termination.
- 9.4 Termination upon Mutual Agreement of the Parties: In addition to the foregoing, this Agreement may be terminated upon the mutual written agreement of the Parties.

ARTICLE 10- CONFIDENTIALITY

- 10.1. Ownership: Confidential Information of a Party and all tangible expressions, in any media, of a Party's Confidential Information is the sole property of such Party. Clinical Information created by Investigator or Project Staff in connection with the COVID Clinical registry (except for any subject's medical records) and cumulative Clinical Information, and reports from the Trial Site shall be the property of ICMR.
- 10.2. <u>Restrictions on Use:</u> Subject to the rights and obligations outlined in Article 10 and Section 5 the Party receiving Confidential Information shall:
- use the received Confidential Information only to the extent necessary to carry out the COVID Clinical registry.
- 10.2.2. safeguard the received Confidential Information with at least the same standard of care that such Party uses to safeguard its own confidential information, and in any event with no less than reasonable care; and
- 10.2.3. not disclose the received Confidential Information to third parties
- 10.3. <u>Subject Medical Information</u>: Medical information may be disclosed solely as necessary for the appropriate medical care of such study participants.

10.4 Force Majeure

It is clearly understood that in the event of any circumstance like flood, earthquake, fire, civil disturbances, tempest or any other acts of GOD beyond control of either of the parties, they shall be relieved of their mutual obligations under these circumstances during such period.

ARTICLE 11- PRESS RELEASE AND PUBLICATIONS.

11.1 Fress Releases: If a Party wishes to issue a press release or other public announcement (collectively, "Press Release") regarding this Agreement, COVID Clinical registry, or the termination of or other information related to the COVID Clinical registry, such Party will submit the intended Press Release to the designated officials of such other Parties for review at least thirty (30) days in advance of the date of the intended release. In the event a Party does not approve the intended Press Release in writing, the non-approving Party(ies) shall discuss in good faith modifications to the Press Release with the Party proposing the Press Release, but the Investigators shall not release a Press Release without the prior written approval of ICMR, such approval not to be unreasonably withheld or delayed. The requirements of this Section 11.1 shall not apply to the extent that a Party is required to disclose information by Applicable Laws and Requirements or order of a governmental agency or a court of competent jurisdiction; provided, however, that the Party required to make such disclosure will (i) provide prior written notice thereof to such other Parties, (ii) consult in good faith with such other Parties with respect to such disclosure, and (iii) provide such other Parties sufficient opportunity to, and cooperate with any reasonable request of such other Parties to object to any such disclosure or request confidential treatment thereof.

Investigator Publications; Publications by the Parties: The Parties shall undertake to make or coordinate a joint publication or presentation of the COVID Clinical registry ("Joint Publication"). And such Joint Publication shall comply with the obligations of ICMJE (International Committee of Medical Journal Editors), including matters of authorship. Any decision to make or coordinate a Joint Publication or presentation of the COVID Clinical registry results shall be discussed and agreed by the Parties before implementing the same, and the content of such Joint Publication shall be reviewed and agreed by all the Parties.

11.3 License to Investigator Publications: ICMR shall have a royalty-free, nonexclusive, and

irrevocable license to reproduce, translate, display, publish, use, and distribute Investigator publications and to authorize others to do so.

The parties acknowledge that they have read this sub-agreement, understood it, and agree to be bound by its terms. The parties further agree that this sub-agreement, together with all of the referenced and incorporated attachments, is the entire agreement between the parties and that it supersedes all prior agreements, written or oral, relating to the subject matter of this sub-agreement.

Agreed by

| | INDIAN COUNCIL OF MEDICAL RESEARCH |
|--------|---|
| | By: |
| Name: | डॉ. पीरनञ्जाजा, जैलानिक भीर / Dr Samiran Panda, Scientist 'G' विभागाध्यक्ष, महामारी विज्ञान और संचारी रोग विभाग |
| Title: | Head, Division of Epidemiology and Communicat [®] Passes भारतीय आर्थ [ी] अन्य अनुस्थान परिषद / Indian Council of the second each स्वारणा अनुस्थान दिभाग / Department of the second of the |
| | Date: अवास्थ्य एवं प्रतिचार काम्याण मध्य गाँउ म Мейкцу of १५० व अस्माय |
| | अंगर्ग |
| | King George's Medical University |
| • | By: VIOE CHÂNCELLOR |
| Name: | King George's Medical University, Uttar Pradesh LUCKNOW |
| Title: | 03/08/20 |
| | Date: |
| | |

Page **11** of **12**



उ० प्र० राज्य एड्स नियन्त्रण सोसाइटी

चतुर्थ तल, ए-ब्लॉक, पिकप भवन, विभूति खण्ड, गोमती नगर, लखनऊ-226 010 दूरभाष : 0522-2720360,2723947 फेक्स: 0522-2721135 Website: www.upsacs.nic.in

पत्रांक : एड्स सोसा0/CST/Recurring grant/2012-13/2017-18/12-69

विनांक 07/08/18

 कुलपति / निदेशक / प्रधानाचार्य / मुख्य चिकित्सा अधीक्षक, मेडिकल कॉलेज/जिला चिकित्सालय, जनपद- आई.एम.एस.- बी.एच.यू,,-वाराणसी/के.जी.एम.यू, -लखनऊ / मेरठ / इलाहाबाद / गोरखपुर / आगरा / कानपुर / झाँसी / जौनपुर / डा.आर एम. एल. संयुक्त चिकित्सालय, लखनऊ / आजमगढ़ / प्रतापगढ़ / बरेली / फैजाबाद / एन.टी.पी.सी. ऊँचाहार-रायबरेली / कुशीनगर / देवरिया / पं० दीन दयाल उपाध्याय राजकीय चिकित्सालय, वाराणसी / उ०प्र० ग्रामीण आयुर्विज्ञान एवं अनुसन्धान संस्थान, सैफई-इटावा/गाजीपुर/मुरादाबाद एवं गोण्डा।

 प्रमुख चिकित्सा अधीक्षक / मुख्य चिकित्सा अधीक्षक, जिला चिकिल्सालय, एफ.आई.-ए.आर.टी. केन्द्र, मथुरा / बहराईच / मुजफ्फरनगर एवं बॉदा।

विषयः वित्तीय वर्ष 2018-19 हेतु क्रियाशील ए.आर.टी. / एफ.आई.-ए.आर.टी. केन्द्रों को Operational Cost के मद में प्रेषित अवमुक्त धनराशि के सम्बन्ध में।

महोदय.

कृपया अवगत कराना है कि आपके मेडिकल कॉलेज/जिला चिकित्सालय में क्रियाशील एआर.टी. /एफ.आई.-ए.आर.टी. केन्द्र को वित्तीय वर्ष 2018-2019 हेतु सोसाइटी द्वारा दिनांक 31 जुलाई, 2018 को Operational Cost के मद में धनराशि संलग्न सूची अनुसार पी.एफ.एम.एस./ई-ट्रांसफर के माध्यम से ट्रांसफर

पी एफ एम एस. के सम्बन्ध में किसी भी प्रकार की जानकारी के लिए श्री मधुकर जोशी, सहायक निदेशक, वित्त (मो०न० 9839064549) अथवा श्री राजकमल अग्रवाल, लेखा सहायक (8896365649) से सम्पर्क किया जा सकता है।

यह भी अवगत कराना है कि सोसाइटी द्वारा आवंटित धनराशि के व्यय में निम्नलिखित बिन्दुओं का भी अनुपालन किया जाए-

।- किसी भी देशा में एक मद में आवंटित धनराशि का उपयोग अन्य मद में नहीं किया जायेगा।

2- बजट के नियमानुसार उपयोग उपरान्त निर्धारित प्रारूप पर त्रैमासिक आधार पर उपयोगिता प्रमाण-पत्र सोसाइटी को प्रेषित किया जायेगा।

3- संचालित बैंक खातों में अर्जित व्याज का उपभोग किसी भी मद में नहीं किया जायेगा।

अतः आपसे अनुरोध है कि उपरोक्तानुसार Operational Cost के मद में अवमुक्त की गयी अग्रिम धनराशि का पी.एफ.एम.एस. के माध्यम से नियमानुसार व्यय उपरान्त संलग्न प्रारूप पर उपयोगिता प्रमाण पत्र सोसाइटी कार्यालय को उपलब्ध कराने का कष्ट करें।

सलग्नकः यथोपरि।

(डा० अर्रूण कुमार सिंघल)

संयुक्त निदेशक (सी.एस.टी.) प्रतिलिपिः समस्त नोडल अधिकारी, ए.आर.टी. / एफ.आई.- ए.आर.टी. केन्द्र को सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित।

> (डा० अरूण कुमार सिंघल) संयुक्त निदेशक (सी.एस.टी.)

"एड्स को रोकेंगे, वादा निभाएंगे – मैं, आप और हम सब"

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उ० प्र0 राज्य एड्स नियन्त्रण सोसाइटी

चतुर्थ तल, ए-ब्लॉक, पिकप भवन, विभूति खण्ड, गोमती नगर, लखनऊ-226 010 दूरभाष : 0522-2720360,2723947 फैक्स: 0522-2721135

Website: www.upsacs.nic.in

पत्रांक: एड्स सोसा0/CST/Recuroing grant 2012-13/2017-18/4383 विनांक 07/04/020

सेवा में.

- 1. कुलपति / निदेशक / प्रधानाचार्य, एस.एन. मेडिकल कालेज, आगरा / जे.एन. मेडिकल कालेज, ए.एम.यू., अलीगढ़ / एम.एल.एन. मेडिकल कालेज, प्रयागराज / उ०प्र० रिम्स, सैफई, इटावा / बी.आर.डी. मेडिकल कालेज, गोरखपुर / एम.एल.बी. मेडिकल कालेज, झॉसी/जी.एस.वी.एम. मेडिकल कालेज, कानपुर/के.जी.एम.यू. लखनऊ/एल.एल.आर. एम. मेडिकल कालेज, मेरठ/ आई.एम.एस.-बी.एच.यू.,वाराणसी/डा० आर.एम.एल. इन्स्टीट्यूट ऑफ मेडिकल साइन्सेज, लखनऊ।
- 2. मुख्य चिकित्सा अधीक्षक, जिला चिकित्सालय, बलरामपुर/ बांदा/ गाजियाबाद/ कुशीनगर/ देवरिया / जौनपुर / जालौन / आजमगढ़ / गाजीपुर / प्रतापगढ़ / सिद्धार्थनगर / बस्ती / मुरादाबाद / सहारनपुर / मऊ / गोण्डा / बिलया / बिजनौर / महाराजगंज / मथुरा / बहराइच मुजफ्फरनगर/एन.टी.पी.सी., ऊँचाहार-रायबरेली/सुल्तानपुर/पं0 दीनदयाल उपाध्याय चिकित्सालय, वाराणसी।

विषयः ए.आर.टी. केन्द्रों को Operational Cost एवं Universals work precaution के मद में वित्तीय वर्ष 2020-21 हेतु अवमुक्त प्रथम किश्त के सम्बन्ध में।

महोदय/महोदया,

कृपया अवगत कराना है कि आपके मेडिकल कॉलेज / जिला चिकित्सालय में क्रियाशील ए.आर.टी. केन्द्र को वित्तीय वर्ष 2020-21 हेतु सोसाइटी द्वारा दिनांक 31 अगस्त, 2020 को Operational Cost एवं Universals work precaution के मद में प्रथम किश्त संलग्न सूची अनुसार पी.एफ.एम.एस. / ई-ट्रांसफर के माध्यम से ट्रांसफर की जा चुकी है।

यह भी अवगत कराना है कि सोसाइटी द्वारा आवंटित धनराशि के व्यय में निम्नलिखित बिन्दुओं का भी

अनुपालन किया जाए:-

।- किसी भी दशा में एक मद में आवंटित धनराशि का उपयोग अन्य मद में नहीं किया जायेगा।

2- बजट के नियमानुसार उपयोग उपरान्त निर्धारित प्रारूप पर त्रैमांसिक आधार पर उपयोगिता प्रमाण-पत्र सोसाइटी को प्रेषित किया जायेगा।

3- ए.आर.टी. केन्द्र के संचालित बैंक खातों में अर्जित ब्याज का उपभोग किसी भी मद में नहीं किया जायेगा।

अतः आपसे अनुरोध है कि उपरोक्तानुसार Operational Cost एवं Universals work precaution के मद में अवमुक्त की गयी अग्रिम धनराशि का पी.एफ.एम.एस. के माध्यम से नियमानुसार व्यय उपरान्त संलग्न प्रारूप पर उपयोगिता प्रमाण पत्र सोसाइटी कार्यालय को उपलब्ध कराने का कष्ट करें।

संलग्नकः यथोपरि।

(डा० अरूण कुमार सिंघल) सयुक्त निदेशक (सी.एस.टी.)

प्रतिलिपिः समस्त नोडल अधिकारी, ए.आर.टी. केन्द्र को सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित।

(डा० अरूण कुमार सिंघल) संयुक्त निदेशक (सी.एस.टी.)



उ० प्र० राज्य एड्स नियन्त्रण सोसाइटी

सप्तम तल, मण्डी परिषद भवन, 16, ए०पी० सेन रोड, लखनऊ — 226001 वेबसाइट: https://www.upsacs.up.gov.in

पत्रांक: एड्स सोसा0/C 57 | Recussing Grant | 2022-23 | 558

दिनांक 22/06/22

सेवा में

कुलपति / निदेशक / प्रधानाचार्य / मुख्य चिकित्सा अधीक्षक, मेडिकल कॉलेज / जिला चिकित्सालय,

आई.एम.एस., बी.एच.यू. वाराणसी/के जी.एम.यू. लखनऊ/मेरठ/प्रयागराज/गोरखपुर/अलीगढ/अगरा/कानपुर/झॉसी/देवरिया/कुशीनगर/फैजाबाद/बरेली/रायबरेली/पं0 दीन दयाल उपाध्याय राजकीय चिकित्सालय. वाराणसी/ जौनपुर/आजगगढ/डा0 आर.एम.एल.आई.एम.एस. लखनऊ/उ०प्र० आयुर्विज्ञान विश्वविद्यालय, सैफई. इटावा/गाजीपुर/प्रतापगढ/सिद्धार्थनगर/बरती/नुरादाबाद/सहारनपुर/मऊ/गोण्डा/बिलया/सुल्तानपुर/बादा/विजनौर/बलरामपुर/बहराइच/गाजियाबाद/जालौन/महाराजगज/मथुरा/एटा/मुजफ्फरनगर/उन्नाव/फतेहपुर/अम्बेडकरनगर/बुलन्दशहर/सन्तकबीर नगर/फिरोजाबाद/सोनमद्र/सन्त रविदास नगर/रामपुर/कानपुर देहात/चित्रकूट/चंदौली/गौतमबुद्ध नगर।

विषयः ए.आर.टी. केन्द्रों को Operational Cost एवं Universals work precaution के मद में वित्तीय वर्ष 2022-23 हेतु प्रेषित की जाने वाली धनराशि के सम्बन्ध में।

महोदय/महोदया.

आपके मेडिकल कॉलेज/जिला चिकित्सालय में क्रियाशील ए.आर.टी. केन्द्र को वित्तीय वर्ष 2022-23 हेतु सोसाइटी द्वारा दिनांक 20 जून, 2022को Operational Cost (Telephone, internet broadband, stationary, printer cartridge, postal charges, local travel, petty expenses, etc.) एव Universals work precaution के मद में संलग्न सूची अनुसार पी.एफ.एम.एस. के माध्यम से धनराशि अवमुक्त की जा चुकी है।

सोसाइटी द्वारा आवंटित धनराशि के व्यय में निम्नलिखित बिन्दुओं का अनुपालन किया जाए-

- किसी भी दशा में एक मद में आवंटित धनराशि का उपयोग अन्य मद में नहीं किया जायेगा।
- 2. बजट के नियमानुसार उपयोग उपरान्त निर्धारित प्रारूप पर उपयोगिता प्रमाण-पत्र सोसाइटी को प्रेषित किया जायेगा।
- 3. ए.आर.टी केन्द्र के संचालित बैंक खातों में अर्जित ब्याज का उपभोग किसी भी मद में नहीं किया जायेगा।

अतः आपसे अनुरोध है कि उपरोक्तानुसार Operational Cost एवं Universals work precaution के मद में आवटित की गयी अग्रिम धनराशि का पी.एफ.एम.एस. के माध्यम से नियमानुसार व्यय उपरान्त उपयोगिता प्रमाण पत्र सोसाइटी कार्यालय को उपलब्ध कराने का कष्ट करें।

संलग्नकः यथोपरि।

(डा० अरूण कुमार सिंघल) संयुक्त निदेशक (सी.एस.टी.)

प्रतिलिपिः रामस्त सम्बन्धित नोडल अधिकारी, ए.आर.टी. केन्द्र को सूचनार्थ एवं आवश्यक कार्यताही हेतु प्रेषित।

> (डा० अरूण कुमार सिंघल) संयुक्त निदेशक (सी.एस.टी.)



उ०प्र० राज्य एड्स नियंत्रण सोसाइटी

ए-ब्लाक, चतुर्थ तल, पिकप भवन, विभूति खण्ड, गोमती नगर, लखनऊ - 226 010 दूरभाष: 0522-2721871, 2720360, 2720361

पत्रांकः एड्स सोसा0 / U PSALS | AAT | LKO | 2 m 5 / 9446

दिनांक 20.04.05..

सेवा में,

कुलपति, किंग जार्ज चिकित्सा विश्व विद्यालय, क्रिकं लखनऊ, उ० प्र०।

विषयः ए०आर०टी० (एन्टी रिट्रोवाइरल थेरेपी) केन्द्र की स्थापना एवं संचालन हेतु आवश्यक कार्यवाही।

महोदय,

कृपया नाको के पत्रांक टी.11020/63/2004/ए0आर0टी0 दिनांक 12 अप्रैल, 2005 (छाया प्रति संलग्न) का सन्दर्भ ग्रहण करने का कष्ट करें, जो कि आपके संस्थान में ए0आर0टी केन्द्र के सम्बन्ध में है। इस केन्द्र के स्थापना एवं कुशल संचालन हेतु नाको द्वारा दिए गए निर्देशानुसार आपके स्तर से निम्नलिखित कार्यवाही किया जाना अपेक्षित है:-

1. उपर्युक्त केन्द्र का संचालन विभागाध्यक्ष मेडिसिन की देख-रेख में किया जाएगा।

ाचित परिष्ट इस. सन्यन्य में कोई शक्त हो ही पानी सालग्राम

- 2. इस केन्द्र के कुशल संचालन हेतु एक टीम का गठन आपके स्तर से किया जाएगा जिसमें निम्नलिखित विभागों के एक-एक अधिकारी होंगे:-
 - मेडिसिन विभाग
 - स्त्री एवं प्रसूति विभाग
 - बाल रोग विभाग
 - टी0वी0 एवं चेस्ट विभाग
 - कम्यूनिटी मेडिसिन विभाग
 - मेडिको सोशल विभाग
 - मनोरोग विभाग
- 3. उपरोक्त केन्द्र हेतु नाको द्वारा निर्दिष्ट संख्या में अधिकारियों एवं कर्मचारियों का एक वर्ष हेतु संविदा पर चयन नाको द्वारा दिए गए निर्देशानुसार किया जाएगा।



उ०प्र० राज्य एड्स नियंत्रण सोसाइटी

ए-ब्लाक, चतुर्थ तल, पिकप भवन, विभूति खण्ड, गोमती नगर, लखनऊ - 226 010 दूरभाष: 0522-2721871, 2720360, 2720361

पत्रांक: एड्स सोसा० /

दिनांक

- 4. ए0आर0टी केन्द्र, लखनऊ के संचलान हेतु डा० ए0के0 त्रिपाठी को नोडल ऑफिसर, ए0आर0टी0 केन्द, लखनऊ नामित किया जाता है।
- 5. ए0आर0टी केन्द्र, लखनऊ के लैबोरेटरी हैड के लिए माइक्रोबाइलोजी के विभागाध्यक्ष डा0 एस0के0 अग्रवाल को नामित किया जाता है।
- 6. नाकों के उक्त पत्र के क्रम में आपसे अनुरोध है कि ए0आर0टी0 केन्द्र, लखनऊ को 15 मई, 2005 के पूर्व अवश्य क्रियाशील करा दें तथा तदोपरान्त अपने स्तर से नाको एवं अधोहस्ताक्षरी को सूचित कर दें।
- 7. कदाचित यदि इस सम्बन्ध में कोई शंका हो तो उसके समाधान हेतु आप इस कार्यालय से सम्पर्क कर सकते हैं।

संलग्नक- उपरोक्तानुसार।

भवदीय,

(एस.पी. गोयल) परियोजना निदेशक

प्रतिलिपि निम्नलिखित को सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित:-

- प्रमुख सचिव, चिकित्सा एवं स्वास्थ्य विभाग, उ० प्र० शासन, लखनऊ।
- महानिदेशक, स्वास्थ्य एवं चिकित्सा, उ० प्र0, लखनऊ।
- 3/ विभागाध्यक्ष मेडिसिन, किंज जॉर्ज चिकित्सा विश्वविद्यालय, लखनऊ।
 - अपर निदेशक, चिकित्सा, लखनऊ मण्डल, लखनऊ।
- मुख्य चिकित्सा अधिकारी, लखनऊ।

श्रीमती अनु गर्ग, निदेशक (वित्त), नाको, नई दिल्ली।

A. K. Triputh

Dept. of Medicine

K.G's Medical University, Lko.



उ0 प्र0 राज्य एड्स नियन्त्रण सोसाइटी

चतुर्थ तल, ए-ब्लॉक, पिकप भवन, विभूति खण्ड, गोमती नगर, लखनऊ-226 010 वूरमाष : 0522-2720360,2723947 फैक्स: 0522-2721135 Website : www.upsacs.nic.in

पत्रांक: एड्स सोसा0/CST/Recuving grant 2012-13/937

दिनांक 14-8-17

सेवा में,

- 1. कुलपति/निदेशक/प्रधानाचार्य/मुख्य चिकित्सा अधिकारी/मुख्य चिकित्सा अधीक्षक, मेडिकल कॉलेज/जिला चिकित्सालय, ए.आर.टी. प्लस केन्द्र/ए.आर.टी. केन्द्र। आई.एम.एस.—बी.एच.यू,—वाराणसी/के.जी.एम.यू—लखनऊ/ मेरठ/ इलाहाबाद/ गोरखपुर/अलीगढ/ आगरा/कानपुर/ झॉसी/ कुशीनगर/देवरिया/पं० दीन दयाल उपाध्याय राजकीय चिकित्सालय, वाराणसी/जौनपुर/आजमगढ़/ गाजीपुर/ उ०प्र० आयुर्विज्ञान विश्वविद्यालय, सैफई—इटावा/जीवन ज्योति हॉस्पिटल, एन.टी.पी.सी.,ऊँचाहार— रायबरेली/डा.आर. एम.एल. संयुक्त चिकित्सालय, लखनऊ प्रतापगढ़/सिद्धार्थनगर/बरेली/ फैजाबाद/बस्ती/मुरादाबाद/सहारनपुर/मऊ/गोण्डा/ बिलया एवं सुल्तानपुर।
- प्रमुख चिकित्सा अधीक्षक/मुख्य चिकित्सा अधीक्षक, जिला चिकित्सालय, एफ.आई.—ए.आर.टी. केन्द्र, बिजनौर/महाराजगंज/जालौन/मथुरा/बहराईच/मुजफ्फरनगर/बलरामपुर/गाजियाबाद एवं बाँदा।

विषयः वित्तीय वर्ष 2017-18 हेतु क्रियाशील ए.आर.टी. / एफ.आई.-ए.आर.टी. केन्द्रों को Contingency and Operational Cost के मद में प्रेषित अवमुक्त धनराशि के सम्बन्ध में।

महोदय,
कृपया अवगत कराना है कि आपके मेडिकल कॉलेज/जिला चिकित्सालय में क्रियाशील ए.आर.टी.

/ एफ.आई.—ए.आर.टी. केन्द्र को वित्तीय वर्ष 2017—2018 हेतु सोसाइटी द्वारा दिनांक 01 अगस्त, 2017
को Contingency and Operational Cost के मद में प्रथम किश्त की धनराशि संलग्न सूची अनुसार पी.एफ.एम.

एस./ई-ट्रांसफर के माध्यम से ट्रांसफर की जा चुकी है।

अतः आपसे अनुरोध है कि उपरोक्तानुसार Contingency and Operational Cost के मद में अवमुक्त की गयी अग्रिम धनराशि का पी.एफ.एम.एस. (गाईड-लाइन संलग्न) के माध्यम से नियमानुसार व्यय करने एवं उपरान्त संलग्न प्रारूप उपयोगिता प्रमाण पत्र सोसाइटी कार्यालय को उपलब्ध कराने का कष्ट करें।

पी.एफ.एम.एस. के सम्बन्ध में किसी भी प्रकार की जानकारी के लिए श्री मधुकर जोशी, सहायक निदेशक, वित्त (मो०न० 9839064549) अथवा श्री राजकमल अग्रवाल, लेखा सहायक (8896365649) से सम्पर्क किया जा सकता है।



Fwd: Clinical Centres of Excellence program - Reminder for VC at 4 p.m. today

1 message

To: Research Cell <res@kgmcindia.edu>, SV Singh <saumyendravsingh@rediffmail.com>

Wed, Aug 3, 2022 at 1:11 PM

----- Forwarded message ------

From: Himanshu Reddy <dr.himanshu.reddy@gmail.com>

Date: Wed, 3 Aug 2022 at 1:10 PM

Subject: Fwd: Clinical Centres of Excellence program - Reminder for VC at 4 p.m. today

To: Balendra PratapSingh <balendrapratapsingh@kgmcindia.edu>

----- Forwarded message ------

From: Sharma, Aprajita <Sharma.Aprajita@bcg.com>

Date: Fri, Jul 10, 2020 at 3:53 PM

Subject: Clinical Centres of Excellence program - Reminder for VC at 4 p.m. today

To: Yogesh <writeto.dr.yogesh@gmail.com>, shashank05gwalior@gmail.com <shashank05gwalior@gmail.com>, sekharhere2012@yahoo.co.in <sekharhere2012@yahoo.co.in>, tamarpaleng@yahoo.com <tamarpaleng@yahoo.com>, dean@aiimspatna.org <dean@aiimspatna.org>, e-jj-gomes@hotmail.com <e-jj-gomes@hotmail.com>, drsarkarmalay23@rediffmail.com <drsarkarmalay23@rediffmail.com>,

dr.tushar.kumar@gmail.com <dr.tushar.kumar@gmail.com>, Director, AIIMS Bhopal <director@aiimsbhopal.edu.in>, dr_ramji@yahoo.co.in <dr_ramji@yahoo.co.in>, drsibia1@yahoo.com <drsibia1@yahoo.com>, dranurag_1992@yahoo.co.in <dranurag_1992@yahoo.co.in>, ltilakeshwari@gmail.com <lti>ltilakeshwari@gmail.com <lti>ltilakeshwari@gmail.com </dr>

andreasdkhar@gmail.com <andreasdkhar@gmail.com>, dr_rajs@yahoo.co.in <dr_rajs@yahoo.co.in>, dranjan_t@yahoo.co.in <dranjan_t@yahoo.co.in>, drdipesh1984@gmail.com <dranjan_t@yahoo.co.in>, drdipesh1984@gmail.com <draravind13@gmail.com <draravind13@gmail.com>, drvidyanagar@gmail.com <draravind13@gmail.com>,

dr.himanshu.reddy@gmail.com <dr.himanshu.reddy@gmail.com>, dranurag.1992@gmail.com

<dranurag.1992@gmail.com>, dr_ramji1@yahoo.co.in <dr_ramji1@yahoo.co.in>, venkateswarababu21@gmail.com
<venkateswarababu21@gmail.com>, vanapalliy@yahoo.com <vanapalliy@yahoo.com>,

prakashdr300190@gmail.com <prakashdr300190@gmail.com>, gaya546@yahoo.com <gaya546@yahoo.com>, shashibhushanbl@yahoo.com <shashibhushanbl@yahoo.com>, drbabu21@gmail.com <drbabu21@gmail.com>, drbabu21@gmail.com <drbabu21@gmail.com>, drbabu21@gmail.com>, drbabu21@gmail.com>,

baskeran21562@gmail.com <baskeran21562@gmail.com>, drhimanshukgmu@gmail.com

<drhimanshukgmu@gmail.com>, atulpatel65@gmail.com <atulpatel65@gmail.com>, drbipinamin@gmail.com

<drbipinamin@gmail.com>, adddir.health.me1@gmail.com <adddir.health.me1@gmail.com>,
rasailly2222@yahoo.com <rasailly2222@yahoo.com>, sharmarm@gmail.com <sharmarm@gmail.com>,

drvinaya31@gmail.com <drvinaya31@gmail.com>, drhaseenabeegum@gmail.com

<drhaseenabeegum@gmail.com>

Cc: LAV AGARWAL <lavagarwal@hotmail.com>, telemedicine@aiims.edu <telemedicine@aiims.edu>, director@aiims.edu <director@aiims.edu>, director.aiims@gmail.com <director.aiims@gmail.com>, Palliri Ravindran <diremr@gmail.com>, Wadhwa, Hardik <Wadhwa.Hardik@bcg.com>, picf@aiims.edu <picf@aiims.edu>, Anant Mohan <anantmohan@yahoo.com>, director aiims <director@aiims.ac.in>, Indu.mohfw@gmail.com <Indu.mohfw@gmail.com>

Dear Sirs,

Gentle reminder for clinical excellence webinar today at 4 p.m. (10 minutes to go).

Please do join the link.

Medical management and ICU care for severe COVID-19 cases

Webinar invite link: https://mohfw.webex.com/mohfw/j.php?MTID=m4084ab9a4759789ebc0592d4863204fe

Date: July 10th, Friday (Today)

Time: 4 p.m. to 5:15 p.m.

Format: Topic(s) + Q/A discussion





CLINICAL EXCELLENCE PROGRAM

Launch of Interactive Webinar Series

Clinical Guidance on COVID-19 Case Management



July 10th, Friday



p.m. to 5: 30 p.m.



Case management on invasive, non-invasive ventilator, hyperbaric or HNFC oxygen therapy?



What are the latest treatment protocols to use anticoagulants, tocilizumab, anti-viral therapy?



How to identify and treat cerebral infarction or myocardial infarction?

Webinar I - Medical management and ICU care for severe cases

Schedule S No. Expert panel State fatality overview Secy/Joint Secy, MoHFW Director, EMR MoHFW 2 Orientation - (CoEs) Webinar series introduction Director, AIIMS 3 Documented clinical concerns Prof. Guleria, Prof Rajeshwari 5 Topic: Medical mgmt. of severe cases (15 mins) Subramanium, Prof Anant Mohan, Topic: ICU care for severe cases (15 mins) Prof Ambuj Roy, Dr Karan Madan, 6 Dr Dalim Baidya Q&A session Link to live webinar: Pre-reading material:



http://www.youtube.com/c/Teleme dicine AIIMS ND



Join clinical excellence group: https://chat.whatsapp.com/Gg5Rd GiNG9sBTv3s8KISw9



- Clinical management protocol version 5
- ICU care and ventilator strategy
- Setting up and Management of a COVID-19 ICUMechanical ventilation

Sincere Regards,

Aprajita Sharma M +91 8828001600 From: Yogesh <writeto.dr.yogesh@gmail.com>

Sent: Thursday, July 9, 2020 1:29 PM

To: shashank05gwalior@gmail.com; sekharhere2012@yahoo.co.in; tamarpaleng@yahoo.com; dean@aiimspatna.org; e-jj-gomes@hotmail.com; drsarkarmalay23@rediffmail.com; dr.tushar.kumar@gmail.com; Director, AllMS Bhopal <director@aiimsbhopal.edu.in>; dr_ramji@yahoo.co.in; drsibia1@yahoo.com; dranurag_1992@yahoo.co.in; ltilakeshwari@gmail.com; andreasdkhar@gmail.com; dr_rajs@yahoo.co.in; dranurag_1992@yahoo.co.in; drdipesh1984@gmail.com; draravind13@gmail.com; drvidyanagar@gmail.com; dr.himanshu.reddy@gmail.com; dranurag.1992@gmail.com; dr_ramji1@yahoo.co.in; venkateswarababu21@gmail.com; vanapalliy@yahoo.com; prakashdr300190@gmail.com; gaya546@yahoo.com; shashibhushanbl@yahoo.com; drbabu21@gmail.com; drbala71@yahoo.co.in; azolouis@gmail.com; baskeran21562@gmail.com; drhimanshukgmu@gmail.com; atulpatel65@gmail.com; drvinaya31@gmail.com; drhaseenabeegum@gmail.com; drvinaya31@gmail.com; drhaseenabeegum@gmail.com

Cc: LAV AGARWAL <lavagarwal@hotmail.com>; telemedicine@aiims.edu; director@aiims.edu; director.aiims@gmail.com; Palliri Ravindran <diremr@gmail.com>; Wadhwa, Hardik <Wadhwa.Hardik@bcg.com>; picf@aiims.edu; Anant Mohan <anantmohan@yahoo.com>; Sahani, Rohit <Sahani.Rohit@bcg.com>; Sharma, Aprajita <Sharma.Aprajita@bcg.com>; director aiims <director@aiims.ac.in>; Indu.mohfw@gmail.com
Subject: Launch of Clinical Centres of Excellence program - First Webinar on July 10, 2020

Dear Colleagues,

Congratulations on being appointed as the Centre of Excellence (CoE) for COVID case management in your State/UT.

Further to MoHFW, GoI letter dated June 9th, we are glad to announce the commencement of the Clinical Centres of Excellence program across India. The clinical excellence hub would facilitate interactions between doctors to:-

- · Develop insights on understanding the patho-physiology of the virus
- Improve quality of clinical care for COVID patients to reduce case fatality
- Disseminate best-in-class clinical guidance and support to dedicates COVID facilities

A key component of the program involves the conduct of <u>weekly interactive sessions</u> through a video conference, led by team of doctors from AIIMS, New Delhi. These sessions will be hosted MoHFW where <u>clinical concerns raised by doctors</u> from the clinical excellence hub, along with a <u>deep-dive on specific topics</u> for clinical management of COVID cases would be discussed.

Launch of clinical excellence hub - 1st weekly webinar

Date: July 10th, Friday

Time: 4 p.m. to 5: 30 p.m.

VC invite: https://mohfw.webex.com/mohfw/j.php?MTID=m4084ab9a4759789ebc0592d4863204fe

CoE Whatsapp Group: https://chat.whatsapp.com/Gg5RdGiNG9sBTv3s8KISw9

| S No. | Schedule | Duration | Led By |
|-------|--|----------|--|
| 1 | State fatality overview – root-causes of CFR | 15 mins | Secy/Joint Secy, MoHFW |
| 2 | Orientation - Role of Centres of Excellence (CoEs) | 05 mins | Director, EMR MoHFW |
| 3 | Webinar series introduction | 05 mins | Director, AIIMS |
| 4 | Documented clinical concerns | 15 mins | Dr. Guleria, Prof Rajeshwari |
| 5 | Discussion on topic of the week | 30 mins | Subramanium, Prof Anant Mohan, Prof Ambuj Roy, Dr Karan Madan, Dr Dalim |
| 6 | Q&A session | 15 mins | Baidya |

Pre-reading material:

- Clinical management protocol version 5
- ICU care and ventilator strategy
- Setting up and Management of a COVID-19 ICU
- · Mechanical ventilation

Clinical concerns on COVID case management have been received from the clinical excellence network. Feedback and concerns will be collected on a rolling basis for discussion during each webinar by panel of senior doctors from AIIMS, New Delhi.

Your kind support and initiative is required to collaboratively and collectively tackle the COVID-19 pandemic.

Please do reach out to the undersigned in case of any clarifications (email: wadhwa.Hardik@bcg.com).

Regards

Dr. Yogesh, M.D.

Chief Medical Officer,

EMR Division, Dte. GHS

Min. of Health & FW

Tel: 011-23063205

The Boston Consulting Group (India) Private Limited

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We may share your contact details with other BCG entities and our third party service providers. Please see BCG privacy policy https://www.bcg.com/about/privacy-policy.aspx for further information. Thank you.

Dr Balendra Pratap Singh BDS, MDS, MAMS, FISDR, FPFA, FAAMP, ICMR-IF Professor Department of Prosthodontics and Crown & Bridge King George's Medical University, Lucknow, India 09839121151

2 attachments





CLINICAL EXCELLENCE PROGRAM

Launch of Interactive Webinar Series

Clinical Guidance on COVID-19 Case Management



July 10th, Friday



4 p.m. to 5: 30 p.m.



Case management on invasive, non-invasive ventilator, hyperbaric or HNFC oxygen therapy?



What are the latest treatment protocols to use anticoagulants, tocilizumab, anti-viral therapy?



How to identify and treat cerebral infarction or myocardial infarction?

Webinar I - Medical management and ICU care for severe cases

S No. Schedule **Expert panel** State fatality overview 1 Secy/Joint Secy, MoHFW 2 Orientation - (CoEs) Director, EMR MoHFW 3 Webinar series introduction Director, AIIMS 4 Documented clinical concerns Prof. Guleria, Prof Rajeshwari 5 Topic: Medical mgmt. of severe cases (15 mins) Subramanium, Prof Anant Mohan, Prof Ambuj Roy, Dr Karan Madan, 6 Topic: ICU care for severe cases (15 mins) Dr Dalim Baidya 7 Q&A session



Link to live webinar:
 http://www.youtube.com/c/Teleme
 dicine AIIMS ND



 Join clinical excellence group:
 https://chat.whatsapp.com/Gg5Rd
 GiNG9sBTv3s8KISw9



Pre-reading material:

- Clinical management protocol version 5
- ICU care and ventilator strategy
- Setting up and Management of a COVID-19 ICUMechanical ventilation



No. Myco/10/4/2021-ECD-II

भारतीय कार्यांगंजान अनुसंधान भारपद रवास्थ्य अनुसंधान विभाग, स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार

Indian Council of Medical Research Department of Health Research, Ministry of Health and Family Welfare, Government of India

Dated: 14/9/21

To

The Vice Chancellor, King George's Medical University, Lucknow- 226003

Sub: Sanction of budget allotment for the ICMR Task Force New Scheme entitled, "To develop Advanced Mycology Diagnostic and Research Center at King George's Medical University, Lucknow" Under Dr. Prashant Gupta, King George's Medical University, Lucknow

Dear Sir.

The Director General of the Council sanctions the above mentioned research scheme initially for a period of One year from 02.08.2021 subject to extension up to the total duration specified in para 3 below:

The Director General of the Council also sanctions the budget allotment of Rs. 1,32,69,838/-(Rupces One Crore Thirty two Lakh Sixty Nine Thousand Eight Hundred Thirty Eight Only) as detailed in the attached statement for the period w.e.f. 02.08.2021 year ending on 01.08.2022 during 2021-22.

The grant in aid will be given subject to the following conditions:

- The payment of the grant will be made in lump sum to the Head of the Institute. The first Installment of the grant will be paid generally as soon as report regarding the commencement of the project and appointment of the staff is received by the Council. The demand for payment of the subsequent installment of the grant should be placed with the Council in prescribed format attached.
- 2. The staff appointed on the project should be paid as indicated in the budget statement attached.
- 3. The approved duration of the research scheme is 3 Years. The annual extension will be given after review of the work done on the research scheme during the previous years.
- 4. Fifteen copies of the annual progress report of work done be submitted to the Council every year after completion of ten months of the project. Failure to submit the report in time may lead to termination of the project.

- 5. The Institute will maintain a <u>Separate Saving Bank Account</u> of the receipts and expenditure incurred on the research scheme and will furnish a utilization certificate and an audited statement of the accounts pertaining to the grant.
- 6. The grant shall be utilized after following provision laid down in GFR-2017 and TA rules.
- 7. The other terms & condition are indicated in the website of ICMR (www.icmr.nic.in) for "Guidelines" for operation of projects for Grantees of ICMR's Extramural Research Projects". The receipt of the letter may please be acknowledged.

14

urs sincerely,

(Dr. Samiyan Panda)

 Copy together with a copy of the budget statement forwarded to the <u>Account Section - V, ICMR</u> information and necessary action.
 RFC No. (P-6)/ECD/NTF/12/2021-22 Dated: 09/07/2021

2. Dr. Prashant Gupta, Professor, Dept. of Microbiology, King George's Medical University, Lucknow

3. Mrs. Vandana, Sr. Technical Officer (2), ICMR

(Dr. Samiran Panda)

Head ECD, ICMR

Budget (02.08.2021 to 01.08.2022)

| 3. | | 2 20 (1.00.2022) |
|---------------------|---|--|
| % No. | ricao | I st Year |
| <u> </u> | Stoff | |
| ****** | Project Scientist - 'D'(Non-Med) (1) | |
| | @Rs. 54,000/- (corresponding to PB-3 | 7,03,680/- |
| | Rs.15600 - 39100 + Grade Pay Rs.7600) | |
| | Lab Technician (2) @Rs. 18,000/- | 10 1 10 7 annual management and a second of the department of the second |
| | (corresponding to PB-1 Rs.5200 - 20200 | 4,32,000/- |
| | + Grade Pay Rs.2800) | |
| | Lab Attendant (1) @Rs. 15,800/- | 1,89,600/- |
| | (corresponding to PB-1 Rs.5200 - 20200 | 1,09,000/- |
| | 1 Grade Pay Rs.1800) | |
| \ - | Total (A) | 13,25,280/- |
| | Recurring | |
| | Primers & Probes, Gel, molecular reagents | 3,00,000/- |
| | Beta D Glucan Assay (Fungitell Glucatell) | 2,00,000/- |
| | kits | 2,00,0001- |
| | | 1.00.000/ |
| | Ilistoplasma antigen/antibody assay | 1,00,000/- |
| | Candida mannan & antimannan kits | 50,000/- |
| | IgG Aspergillus | 50,000/- |
| | 1gE Aspergillus | 50,000/- |
| | Syringes | 10,000/- |
| | Vacutainers (EDTA/Plain) | 10,000/- |
| | Stationary | 10,000/- |
|), | Pipettes 7 Tips | 2,00,000/- |
| 1. | Culture plates/tubes | 10,000/- |
| 2. | Culture media | 20,000/- |
| 3. 1. | Antifungal agents | 50,000/- |
| i. 5. | ATCC Strains Stains (Gram/KOII/PAS/GMS/ZN etc.) | 20,000/- |
| 5. 5. | Website Development | 30,000/- |
| | Total (B) | 50,000/- |
| · | Non Recurring | 11,60,000/- |
| | Real time PCR | 16,00,000/- |
| | Spectrophotometer | 6,00,000/- |
| | Kinetic ELISA Render | 6,00,000/- |
| | HPLC System | 35,00,000/- |
| | BOD incubator | 1,50,000/- |
| _ | Incubator . | 1,00,000/- |
| | -80 Deep Freezer | 7,00,000/- |
| | Bio Safety Cabinet | 12,00,000/- |
| | Laminar hood/PCR cabinet | 5,00,000/- |
| | Vortex mixer | 10,000/- |
|] | Weighing Balance | 1,00,000/- |
|] | pt I mater Gel electrophoresis (complete) | 50,000/- |
| | | 7,50,000/- |
| }- | Gel documentation system Total (C) | 6,00,000/- |
| | Travel | 1,04,60,000/- |
| | Workshops/Seminars/Conferences/Travel | |
| | & Stay) | 2,50,000/- |
| | Total (D) | 7.50,000/ |
| | Overhead @3% | 2,50,000/- |
| | Grand Total | 74,558/- |
| í | A+B+C+D+E) | 1,32,69,838/- |

(Dr. Samiran Panda)
Head ECD, ICMR



भारतीय आयुधिजान अनुसंधान पार्कः रवारण्य अनुरांधान विभाग, स्वारण्य एवं परिवार कल्याण मंत्रालय, मारेत संस्कृत

Indian Council of Medical Research Department of Health Research, Ministry of Health and Family Welfare, Government of India

e-125161 No. Myco/10/4/2021-ECD-II

to the

Dated: 14 2 21

Sub:- Payment of 1st installment (6 Months) of 1st Year grant in aid for the research scheme entitled, "To develop Advanced Mycology Diagnostic and Research Center at King George's Medical University, Lucknow" under PI: Dr. Prashant Gupta, King George's Medical

MEMORANDUM

The Director General, ICMR sanction the payment of Rs. 1,18,64,919/- (Rupees One Crore Eighteen Lakh Sixty Four Thousand Nine Hundred Nineteen Only) as the 1st Installment (6 Months) for 1st Year of the grant for year 2021-22. The amount of Rs. 1,18,64,919/- may be debited from the provision of Rs. 1,32,69,838/- made for the above research scheme for the current

A Formal bill of Rs.1,18,64,919/- (Rupees One Crore Eighteen Lakh Sixty Four Thousand Nine Hundred Nineteen Only) is sent herewith for payment The Vice Chancellor, King George's Medical University, Lucknow- 226003

> amiyan Payida) Head ECD, ICMR

Accounts Section- V, ICMR

Copy to:-

1. The Vice Chancellor, King George's Medical University, Lucknow- 226003 A bank draft for the amount of Rs.1,18,64,919/- (Rupees One Crore Eighteen Lakh Sixty Four Thousand Nine Hundred Nineteen Only) will be sent to you in due course.

2. Dr. Prashant Gupta, Professor, Dept. of Microbiology, King George's Medical University,

3. Mrs. Vandana, Sr. Technical Officer (2)

Head ECD, ICMR

No.V.25011/162/2015-HR Ministry of Health & Family Welfare Department of Health Research

2nd Floor, Indian Red Cross Building New Delhi-110001

Dated: 21.05.2018

To.

The Principal. King George Medical University Shah Mina Road, Lucknow, Uttar Pradesh 226003

Rec. No. Date 5 / 6 M U., Luck G

Sub: Amendment in the MoA signed for the Establishing of MRU at King George Medical University, Lucknow. Uttar Pradesh.

Sir.

I am directed to say that establishment of MRU in King George Medical University, Lucknow. Uttar Pradesh was approved in 2014-15. 1st instalment of Rs. 1.25Crore (Rs. 1.00 Crore for Equipment and Rs. 0.25 Crore for Civil Work) was released during 2015-16 and Rs. 2,26,70,924/- (Rs. 2.00 Crore for Equipment, Rs. 11,70,924 for Staffing and Rs. 15.00 lakh for Contingency) was released during the year 2017-18 for establishment of MRU.

As per Scheme guidelines conceptualized during 12th plan, a tripartite MoA was signed between the State Government, Medical College and Department of Health Research for the establishment of MRU in King George Medical University, Lucknow. Uttar Pradesh. The scheme inters -alia prescribed the funding norms for various component of the project under the MRU scheme. The scheme has been approved for continuation by the SFC till 2019-20 i.e to be co-terminus with the period of 14th Finance commission. SFC while approving the continuation of the scheme up to 2019-20, also enhanced the allocation of fund under the head "Recurring Expenditure" to Rs. 47.44 lakh (Rs.25.20 lakh for Salary & Rs. 22.24 lakh for Contingency) from 34.00 lakh. It has therefore become necessary to make requisite amendment in para 4 of the MoA. The amendment in the MoA is enclosed (Annexure-A) and the same needs to be consented by the State Government and the Medical College.

In view of the above, it is advised that the consent, in original, be communicated to this department by 25.06.18 for further necessary action.

This may be accorded priority.

UPGENT. Research

Prof D. Mehrstra Dam.

Yours faithfully,

(Vinod Kumar) Under Secretary to the Govt of India Ph: 011-23736089

Copy to:-

The Principal Secretary (Health & FW), Department of Health & Family Welfare, Government of Ottars Pradesh, 5th floor, Room No. 516, Vikas Bhawan, Janpath Market, Vidhan Sabha Road, Hazrat Ganj, Lucknow – 226 001 Vino George's N I TICKUO

Para 4 in the existing MOA i.e.

With a view to achieving the objectives set forth in the preceding para, the DHR agrees to discharge the following responsibilities:

- To provide a onetime grant not exceeding Rs 5.25 crores to the SMC comprising Rs.25 lakhs for civil works for modification/renovation and Rs.5.00 crores for the procurement and installation of the equipment as described in Appendix -1 to this MOA needed for the establishment of the MRU in the SMC.
- To provide financial assistance to the SMC19:23 lakks per annum to meet the cost on engaging the services of technical manpower on contractual basis (on consolidated remuneration) and Rs.15 lakks per annum towards consumables/training/contingencies for the running of the MRU for a period of 5 years from the commencement of this MOA, as per details described in Appendix-II to this MOA.
- > To have the scheme implemented with the technical support of Indian Council of Medical Research (ICMR) through appropriate expert committees for regular review and monitoring of the scheme.
- > Constitute committees for screening, evaluation, approval-and monitoring of schemes.

is substituted by the following:-

With a view to achieving the objectives set forth in the preceding para, the DHR agrees to discharge the following responsibilities:

- To provide a onetime grant not exceeding Rs 5.25 crores to the SMC comprising Rs.25 lakhs for civil works for modification/renovation and Rs.5.00 crores for the procurement and installation of the equipment as described in Annexure III of OM dated 25.10.17 to this MOA needed for the establishment of the MRU in the SMC.
- To provide financial assistance to the SMC 25.20 lakhs per annum to meet the cost on engaging the services of technical manpower on contractual basis (on consolidated remuneration) and Rs. 22.24 lakhs per annum towards consumables/training/contingencies for the running of the MRU for a period of 5 years from the commencement of this MOA, as per details described in Annexure III of OM dated 25.10.17 to this MOA.
- To have the scheme implemented with the technical support of Indian Council of Medical Research (ICMR) through appropriate expert committees for regular review and monitoring of the scheme.
- > Constitute committees for screening, evaluation, approval and monitoring of schemes.

Funding Norms for Non-recurring Expenditure in respect of MRUs:

A) Non-recurring Expenditure (Unit Cost):

| Head. | Cost | Remarks |
|-----------------|-------------|--|
| Civil Works | 25.00 Lakhs | - Pt Year |
| Equipment | 5.00 Crore | 1.00 crore (1 st Year) 2.00 crore (2 nd Year) |
| Total | 5.25 Crore | 2.00 erore (3 rd Year) |

B) Recurring Expenditure (Unit Cost):

| | | | • |
|---|-------------|--|---|
| llead | Cost | Remarks | į |
| Staffing (Contractual) | 25.20 lakhs | (From 2nd Year onwards) | |
| Consumables/training/con tingencies including research related expenditure | | (From 2 nd Year onwards) | |
| Total | 47.44 lakhs | to manage proper distribution of the color o | |

For and on behalf of the State For & on behalf of the Government of Government India, Ministry of Health & Family Welfare, Department of Health Research New Delhi **Authorized Signatory** Authorized Signatory, Place DHR, New Delhi Dated: For and on behalf of the State Medical College___ Authorized Signatory, Place: Date: Date: Place: New Delhi, India

2020



SUBAWARD AGREEMENT

SUBRECIPIENT: King George's Medical University

ADDRESS: King George's Medical University, Shahmcena Road, Chowk, Lucknow, UP, India, 226003

PROJECT TITLE: Biosurveillance for Henipaviruses and Filovirus2s in Rural India

PERIOD: October 01, 2020 - September 30, 2021

PHONE: 091-522-225-7540, 091-9415023928

E-MAIL: vc@kgmcindia.edu amita60@gmail.com, amita602002@vahoo.com,

FEDERAL CONTRACT FUNDS ID: HDTRA12010026

DUNS NUMBER: 916341553

AGREEMENT AMOUNT: 108, 232,62 US\$

This Grant Agreement (the "agreement") is by and between FcoHeaith Alliance, a United States tax-exempt organization, located at 520 8th Avenue. New York, 10018, and King George's Medical University, a non-US Non-Governmental Organization.

An authorized representative of EcoHealth Alliance has executed the original version of this agreement. Please sign the digital copy and return it via email. If EcoHealth Alliance does not receive a signed copy (digital or print) within thirty (30) days of mailing, this agreement may be revoked. This agreement shall be effective only upon the receipt of the subrecipient's signed contract by EcoHealth Alliance, now therefore, EHA and the subrecipient mutually agree as follows:

I. TERM AND AMOUNT OF THE GRANT

Subject to the continued availability of funding for this project, the term of this Agreement shall be the award period stated on page 1 (the "1 erm"), renewable for an additional term solely by written agreement between the subrecipient and EcoHealth Alliance.

The amount of the award as indicated on the preceding page and detailed in Attachment B is to be disbursed following receipt of a signed, detailed invoice(s) indicating hours, rate(s), and date(s) worked, or locations and dates for travel and all other details as elaborated in the Financial Responsibilities section below. All deliverables and project details are claborated in Attachment A.

11. CONDITIONS OF THE GRANT

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these representations and certifications and that, on request, the subrecipient will provide documentation of the monitoring and oversight of these efforts.

Notwithstanding any term to the contrary, EcoHealth Alliance may terminate or suspend any part of this agreement immediately if it determines that the subrecipient fails to comply with the conditions stated in this paragraph.

III. USE OF FUNDS

The award monies, including any interest earned, may only be used for the purpose(s) stated in this agreement, as contained in the approved budget in Attachment B, and in the scope of work defined in Attachment A.

Funds may not be expended for any other purpose without the prior written approval of EcoHealth Alliance. Should there be a material change in the purpose, character, or method of operation of the project, the subrecipient agrees to give prompt and detailed written notice to EcoHealth Alliance. The subaward project shall be performed to EcoHealth Alliance's satisfaction as determined by EcoHealth Alliance.

The subrecipient will notify EcoHealth Alliance prior to purchase of any VAT or other taxes, exceeding \$500.00 per transaction with a "transaction" defined as a single purchase by the subrecipient and transactions may not be deliberately split in order to avoid compliance with the \$500.00 limit. Written approval with documentation from EcoHealth Alliance is required for any purchase exceeding VAT of \$500.00 per transaction. The subrecipient understands that in the event that EcoHealth Alliance is unable to approve the use of funds for VAT or other taxes exceeding \$500.00 per transaction, the purchase of applicable items may not proceed.

IV. NATURE OF RELATIONSHIP

The parties hereto intend by this agreement solely to specify the terms for the subrecipient 's use of EcoHealth Alliance grant funds. Nothing in this agreement shall be construed as creating or constituting the relationship of employer and employee between EcoHealth Alliance and the subrecipient or grantee or the continuation of funding from EcoHealth Alliance. During the course of completing the grant project work, the subrecipient remains a distinct and separate legal entity from that of EcoHealth Alliance and shall not, under any circumstances, be considered an agent of EcoHealth Alliance.

The subrecipient agrees to conform to the laws and regulations of the location in which they operate and obtain all required permits and agreements and insurance required by local authorities. They also agree to pay all fees and taxes levied on this project by applicable political authorities or designated subdivisions.

V. PHOTOGRAPHS AND VIDEO

EcoHealth Alliance retains the rights to all recorded media (photos, video, audio) recorded by the subrecipient as related to this project.

VI. PUBLICATION REVIEW

At least 30 days prior to the publication of any written work – digital or print – made possible by this EcoHealth Alliance subaward or involving data or information gained directly in whole or in part from research or activity conducted under this subaward, a copy of such work must be sent to EcoHealth Alliance for prepublication review and recommendations for revision by EcoHealth Alliance. Such review shall not be unreasonably

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withheld. All work generated under this agreement must recognize EcoHealth Alliance in the acknowledgements.

VII. EVALUATION OF THE AGREEMENT

At its own expense. EcoHealth Alliance may monitor and conduct an evaluation of operations under this subaward agreement. Evaluation may include visits to the subrecipient by representatives of EcoHealth Alliance in order to observe and discuss the funded project.

VIII. DISBURSEMENT OF FUNDS

Unless otherwise stated below, grant funds shall be disbursed by EcoHealth Alliance based on the following criteria:

- 1. The subrecipient shall submit a valid invoice to EcoHealth Alliance indicating the services performed and the expenses incurred, as well as the time period covered by the invoice. The subrecipient should attach all supporting documentation needed to substantiate expenses.
- 2. The subrecipient must sign the invoice as certification that the services rendered and all expenses incurred have been pursuant to the scope of service contained in this agreement.
- EcoHealth Alliance will invoice the funding source for the value of the invoice and remit the funds in a timely manner.
 - 4. EcoHealth Alliance reserves the right to delay payment of any funds due to insufficient documentation submitted by the subrecipient
 - 5. The subrecipient acknowledges that all involves must be submitted to EcoHealth Alliance within forty-five days of the end of the subaward, low-less submitted after these periods will not be involced by the funding source and will not be paid to the subrecipient.

Unless otherwise directed, EcoHealth Alliance shall remit US funds transfer to a bank account. The legal name of the subrecipient, who must be the sole owner of the account, must appear on the account. Grant funds will not be wired into the personal account of any officer, director, agent, or employee of the subrecipient.

The subrecipient shall provide the following banking information to EcoHealth Alliance:

Name of bank: Allahabad Bank

Bank Address: KGMC Branch, King George's Medical University Campus, Lucknow, 226003

Account Name: Foreign Contribution KGMU Lucknow

Account Number, 50037486245 Account type: savings account

Swift Code (if non-US): ALLAINBBLUK

Branch Code: ALLA0211028

IX. SUBRECIPIENT'S FINANCIAL RESPONSIBILITIES

As applicable, the subrecipient agrees to adhere to all requirements contained in 2 CFR 200 (Uniform Administrative requirements, Cost Principles, and Audit Requirements for Federal Awards) during the term of the agreement. The subrecipient acknowledges responsibility for 2 CFR 200 Subpart F Federal Audit requirements for funds received under this agreement and all other federal agreements should they exceed a total of US \$750,000 and will provide EcoHealth Alliance a copy of their most current 2 CFR 200 Subpart F

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or similar audit report as may be provided. The subrecipient agrees that all overhead charged to this grant shall not exceed the amount permitted by the federal indirect cost rate in effect during the performance period (10% in the absence of a US federally negotiated rate). The subrecipient will provide EcoHealth Alliance a copy of their most current indirect cost rate agreement if not using the 10% de mínimus.

The subrecipient agrees to keep systematic records of all expenditures relating to this agreement. A quarterly financial report may be required along with the required signed invoice for services in order for the subrecipient to be reimbursed for expenses. Documentation of expenses, consisting of bills, invoices, receipts, log books (acceptable only for gasoline for cars and boats), etc., must be retained by the subrecipient for five (5) years after the close of the agreement period, and must be available for inspection by representatives of EcoHealth Alliance at any time during this period. EcoHealth Alliance may, at its own expense, examine, audit, or have audited the records of the subrecipient insofar as they relate to activities supported by this agreement.

Subrecipient financial records must be itenazed in the following categories, as applicable:

1. Salary or stipend - detailed by person, care, date, and amount

Field or Laboratory supplies – an original or copy (when original is not available) of all receipts or
purchase orders must be provided with detailed and regular financial reports for all field equipment
items.

Purchased services (e.g., field asst., boat hire) – detailed at the level of numbers 1 & 2, above.
 Detailed logbooks (including dates, times, and signatures) are acceptable when signed by both subrecipient and EHA or responsible party.

4. Vehicle associated costs – mileage to be indicated along with any associated costs: driver, repairs, insurance, etc. Detailed logbooks (including dates, times, and signatures) are acceptable when signed by both subrecipient and EHA or responsible party.

5. Travel – trip cost indicating departure/arrival dates and air/car/train/boat costs along with all boarding passes and receipts including meals in transit.

6. Accommodation - location and amounts per person along with all lodging receipts.

7. Capital equipment – including the submission of three quotes prior to the purchase of such equipment as detailed below.

The subrecipient shall submit detailed invoices to EcoHealth Alliance detailing actual expenditures compared to the approved budget or subaward total. Invoices are subject to review and approval by EcoHealth Alliance's Principal Investigator and/or Director of Federal Grants and Programs, who shall certify that all expenses are in conformity with the award. The documentation that is submitted to support the invoice must be numbered to match the item on the invoice.

EcoHealth Alliance reserves the right to request documentation of all costs incurred as part of its normal practices in the use of federal funds. Upon the completion of this contract term the subrecipient shall submit a final report indicating the scope of work completed during the term and the funds used to complete it.

X. PURCHASE OF CAPITAL EQUIPMENT

All capital equipment (items valued over US \$5.000 and with a useful life of one year or more) purchased with award money remains the property of EcoHealth Alliance. The equipment shall be returned to EcoHealth Alliance at the end of the project unless EcoHealth Alliance agrees, in writing, to relinquish title to the equipment. The subrecipient agrees to use this equipment solely for the purposes of this project and to maintain it in proper working order.

For all such items, a completed Capital Equipment Inventory must be submitted to EcoHealth Alliance at the

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conclusion of the project.

All equipment purchases over \$3,500 require the prior approval of EcoHealth Alliance.

A minimum of three quotes should be submitted to EcoHealth Alliance along with the request to purchase for items that cost more than \$3,500.

XI. UNUSED FUNDS

The subrecipient agrees to return to EcoHealth Alliance at the conclusion of the agreement period all award funds that have not been used to complete the project. The subrecipient may not use award funds after the end of the agreement period without the written consent of EcoHealth Alliance unless both subrecipient and EcoHealth Alliance agree to an extension of this agreement and both parties sign this in the form of an amendment.

XII. REVOCATION AND REVERSION

EcoHealth Alliance retains the right to terminate this Agreement for cause under such circumstances as the following:

- 1. The subrecipient makes material change with purpose, character, or method of operation of the project subject to this agreement;
- 2. The subrecipient is found to have made a material misrepresentation or misstatement in the agreement application or any required report:
- 3. The subsocipient has failed to perform any of the material terms of this agreement;
- 4. The subrecipient is found to have misappropriated funds awarded under this agreement; and
- 5. The subrecipient in the judgment of EcoHealth Alliance has misused EcoHealth Alliance's name or otherwise harmed the reputation of EcoHealth Alliance.

In the event of a termination for cause, EcoHealth Alliance may cancel all future installments under the agreement and require the subrecipient to repay all amounts misappropriated or otherwise related to the basis for the for-cause termination. EcoHealth Alliance in turn agrees to reimburse Universities Space Research Association (USRA) for all allowable and allocable (within the agreed budget) costs incurred prior to the notice of termination, to include any non-cancelable fees incurred up to such date of termination.

XIII. INSURANCE AND LIABILITY

By accepting the terms and conditions of this grant, the subrecipient also accepts full responsibility for any and all insurance needs, such as medical, vehicle, general professional liability, evacuation, etc. for themselves and all other project related personnel, by signing this agreement, the subrecipient relieves EcoHealth Alliance from any and all liability due to accident or injury, or any other claims which may result from any activities conducted by the subrecipient in relative to the grant project.

XIV. ADDITIONAL SUPPORT

In making this grant, EcoHealth Alliance assumes no obligation to provide other or additional support to the subrecipient.

XIII. NOTICE

All correspondence and project reports should the directed to:

Ava Sultivan EcoHealth Alliance 520 8th Ave, Suite 1201 New York, NY 10018 Phone: +1 607 280 7669

Email: sullivan@ecohealthalliance.org

XV. INDEMNIFICATION

The subrecipient and EcoHealth Alliance hereby mutually agreed to indennify and hold each other, respectively, and each other's affiliates, officers, employees, successors and assigns, harmless from and against claims, demands, actions, proceedings, in extigation and right of action, including reasonable aftorneys' fees and costs, whether action is instituted or not and, if instituted, whether at any trial or appellate level, whether raised by the other party or a third party, arising from the intentional and/or negligent acts, errors or omissions of the subrecipient or to Fleathy Alliance.

XVI. CHOICE OF LAW

This agreement shall be governed by and construed in accordance with the laws of the State of New York of the United States of America.

XVII. PARTIAL INVALIDITY

If any term or provision of this agreement to any person or circumstance shall, to any extent, be invalid or unenforceable, the remainder of this agreement shall not be affected thereby and shall be valid and enforceable to the fullest extent permitted by law.

XVIII. MARKING AND PUBLIC COMMUNICATIONS

As a condition of receipt of this subaward, marking with the EcoHealth Alliance logo of a size and prominence equivalent to or greater than the subrecipient's, another donor's or third party's is required. In the event the recipient chooses not to require markings with its own identity or logo by the subrecipient, EHA may, at its discretion, require marking by the subrecipient with the ficoHealth Alliance logo. The EcoHealth Alliance logo shall be placed on all reusable equipment purchased using funds from this subcontract.

XIX. OTHER PROVISIONS

This agreement may not be transferred or assigned by either party without the prior written consent of the other, and any breech of this prohibition will deem the agreement null and void.

Both parties agree that either party may terminate this agreement with 30 days written notice to the other party.

Each party represents and warrants that this Agreement has been duly executed on its behalf by its authorized agent(s).

This agreement constitutes a single integrated contract expressing the entire agreement of the parties hereto. There are no other agreements, written or oral, express or implied, between the parties hereto, concerning the

The laws of the United States place certain restrictions on the use of funds awarded to organizations by government agencies, charitable trusts and foundations. Therefore, the subrecipient agrees to the following terms and conditions:

- Internal Revenue Code: Funds awarded by 1 collealth Alliance may not be used for any forbidden
 political activities or for any purposes prohibited by the United States Internal Revenue Service Code.
- 2. Foreign Corrupt Practices Act of 1977: as amended: The subrecipient agrees to be bound by this act that prohibits individuals and entities from making payments to foreign government officials for the purposes of obtaining business. This includes the offer, either directly or indirectly, of anything of value, to a foreign government official to influence that official in his or her official capacity to do or omit any act in violation of their official capacity or lawful duty, or to secure any improper advantage in order to assist in obtaining or retaining business for or with, or directing business, to any person.

The subrecipient's directors, officers, employees and agents have not and will not offer, pay, promise or authorize the payment, directly or indirectly through any other person or entity, of any monies or anything of value to any governmental official amployee or any political party or candidate for political office, for the purpose of inducing an exactling any favorable action or influencing any act or decision of such official or of the government.

Funds in this agreement may not be used to induce the travel, per diem, hotel expenses, meals, conference fees or other conference costs for any member of a foreign government's delegation to an international conference sponsored by a public international organization, except as otherwise agreed upon by Ecol lealth Alliance and the subrecipient.

- 5. Support for Acts of Terror: The subrecipient or grantee certifies and represent that they will be bound by U.S. anti-terrorism legislation that prohibit having transactions with and providing material support or resources to individuals or groups that engage in or support acts of terror and that the subrecipient or does not engage in or support, sheetly or indirectly, acts of terror.
- 4. Financial Conflict of Interest: The subrecipient certifies and represents that no Significant Financial Conflict of Interest exists regarding their participation in this project that would influence their research. They furthermore agree that if such a conflict develops during the course of this project they will promptly notify and disclose that conflict in writing to the EHA Principal Investigator and the EHA Chief Financial Officer and may be required to develop a plan of corrective action to resolve that matter. This requirement shall extend to all individuals with managerial oversight of this grant including their spouse and dependent children.
- 5. Federal Funding Accountability and Transparency Act: The subrecipient agrees to provide EcoHealth Alliance with all information required by the above law including, if required, executive compensation data for publication on applicable Segovernment websites (complete Attachmem A). The subrecipiem shall obtain a unique DUNS catabox from Dun & Bradstreet and shall provide it to EcoHealth Alliance.
- 6. Non-Discrimination Policy: The subrecipient will toflow a comprehensive, consistent, and non-discriminatory policy (http://www.usaid.gov.ib.or.jesaid/disability) to the extent it can accomplish this goal within the scope of the program objectives.

The subrecipient acknowledges that EcoHealth Alliance is implementing, and over the course of this agreement will cominue to implement, reasonable morning and oversight to assure the continuing truth of

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subject matter hereof, except the agreements set forth in this agreement. Any amendment to this agreement is effective only if set forth in writing and signed by Loth parties.

Dr. Peter Daszak
President, EcoHealth Alliance

Jan 6, 2020

DATE

Li. Gen. (Dr.) Bipin Puri. Vice Chancellor, KGMU

DATE

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King George's Medical University



The foundation stone of King George's Medical College was laid by the Royal Highness, Prince of Wales, in 1906, during his second visit to India for his Coronation Durbar as King Emperor. His Majesty gave his consent to establish the institution and to designate it by his name. Since then, this institution has been a pariah for excellence in medical education, unparalleled medical ethics, groundbreaking research, and exceptional patient care.

KGMU (King George's Medical University) located in Northern India, is amongst the premier medical and research institutes of the country. Alumni of this University are working at many key positions as policy makers in many eminent Institutions in India. KGMU will share evidence from Cochrane results with various stakeholders and policy makers of India to imbibe advantage of translational research.

The university is having four streams namely Faculty of Medical Sciences, Dental Sciences, Nursing and Paramedical Sciences. The

All India Institute of Medical Sciences, New Delhi

Christian Medical College Vellore

India Council of Medical Research, New Delhi

Indian Institute of Public Health, Hyderabad

Institute of Dental Sciences, Bhubaneshwar

King George's Medical University, Lucknow

Manipal Academy of Higher Education, Manipal

Postgraduate Institute of Medical Education and Research, Chandigarh

Tata Memorial Centre, Mumbai

faculties are running undergraduate, post graduate, super-speciality and postdoctoral programs in clinical medicine and allied disciplines. KGMU started its journey with a meagre 12 departments and now has grown to 58 departments with a bed strength of nearly 4500. There are fifteen medical and seven nursing colleges affiliated to the University. Notably, the University was ranked ninth in the year 2021 by NIRF, a ranking body of the Government of India constituted to rank the Universities of the country. KGMU is widely known to be the flagship medical institution of the state of Uttar Pradesh. The guidelines/SOP's formulated by KGMU are validated by the state government and followed by most of the medical colleges of the state.

KGMU's intramural funding program for generating evidence through systematic reviews started in the year 2019. Since then, the KGMU had adopted evidence-based medicine practice training for the budding health care providers from the undergraduate, post graduate, superspeciality and research trainees. The University has funded many faculty members to undergo training at the earlier Cochrane South Asia Centre at Vellore. The vision of the University has been to inculcate a robust practice of EBM among all healthcare providers. We are running EBM programs in the University through periodic organization of workshops on research methodology, systemic reviews and metaanalysis. Workshops are mandatory for all doctoral students of the University. Twenty-five workshops on evidence-based medicine, writing systematic reviews and meta-analysis have been organised in the last five years so far.

Our priority would be to disseminate the importance of evidence-based research and its importance in deriving significant outcomes of clinical studies to benefit and improving health system. Our approach would be to promote the participation of most of the medical colleges of the state of Uttar Pradesh and also the adjoining states like Madhya Pradesh, Bihar, Punjab, Jharkhand, West Bengal and north east states. The evidence generated through Cochrane should reach all the stakeholders which includes patients and healthcare providers; we will work in this direction to create an ecosystem of workflows of information for all.

The highest priority is to make healthcare providers in the region understand the importance of adopting evidence-based practice with integrity and transparency. Given the widespread use of unproven therapies, developing a culture of rationale thinking, referring to the Cochrane database and updating oneself regularly would be one of the most important takeaways of our Cochrane Centre.

We at KGMU would attempt to work on the following three aspects:

- 1. Developing a vibrant ecosystem to inculcate the practice of EBM among stakeholders and policy makers in the geographical areas.
- 2. Augmenting the EBM outreach to a broad-range of individuals and groups i.e. clinical, research, and non-governmental organizations through social media, open workshops and symposiums.
- 3. Extending the knowledge of evidence-based translational research in local language to the patients, general public and healthcare providers.

Patron



Lt. Gen. (Dr.) Bipin Puri Hon'ble Vice Chancellor King George's Medical University UP, Lucknow

Advisory committee

Prof. Shally Awasthi Prof. Uma Singh

Dean Dean

Research and Development Faculty of Medical Sciences

King George's Medical University King George's Medical University

UP, Lucknow UP, Lucknow

Prof. R. K. Singh Prof. Apjit Kaur

Dean Dean

Faculty of Dental Sciences Faculty of Nursing

King George's Medical University King George's Medical University

UP, Lucknow UP, Lucknow

Prof. Vinod Jain Prof. Divya Mehrotra

Dean Dean

Faculty of Paramedical Sciences Quality Control and Accreditation

8/5/22, 12:59 PM

King George's Medical University

UP, Lucknow

King George's Medical University UP, Lucknow

Core Cochrane Faculty

Prof. Amita Jain

Prof. R. K. Garg

Head, Department of Microbiology Head, Department of Neurology King George's Medical University

King George's Medical University

UP, Lucknow

UP, Lucknow

External experts:

Dr. Amit Goel

Additional Professor

Department of Gastroenterology

SGPGIMS, Lucknow

Prof. Ravishankar Ramachandran Chief Scientist, Molecular and

structural biology, sophisticated analytical instrument facility,

CSIR-CDRI,

Lucknow

Internal Experts:

Prof. Apul Goel

Department of Urology

King George's Medical University

UP, Lucknow

Dr D. Himanshu Reddy Department of Medicine

King George's Medical University

UP, Lucknow

Administrative Committee:

Director

Prof. Balendra Pratap Singh **Department of Prosthodontics** King George's Medical University UP, Lucknow Email: cochrane@kgmcindia.edu, balendrapratapsingh@kgmcindia.edu

Co-directors

Prof. Hardeep Singh Malhotra Department of Neurology King George's Medical University UP, Lucknow Email: drhsmalhotra@gmail.com

Prof. Raghuwar Dayal Singh Department of Prosthodontics King George's Medical University UP, Lucknow

Email: raghuwards@rediffmail.com

Dr Anand Srivastava Department of Respiratory Medicine King George's Medical University UP, Lucknow Email: drsrianand@gmail.com

Dr. Neeraj Kumar Department of Neurology King George's Medical University UP, Lucknow Email: drneeraj2903@gmail.com

Contact address:

About Cochrane

Research cell King George's Medical University UP, Lucknow 226003 Email: cochrane@kgmcindia.edu

Cochrane

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Masters in Health Professions Education

Department of Medical Education King George's Medical University, UP, Lucknow

Preamble: Education in medicine and allied subjects has seen a paradigm shift. I. There is increased focus on student-centric education, promotion of skills development and fostering scholarly activities in the academicians and educators. Hence, there is a need to initiate a course in Masters in Health Professions Education (MHPE) through the newly created department of Medical Education. Medical Council of India also promotes such activities

This part-time 2 years MHPE program is an ideal programme for those wishing to further their career in academic clinical or medical/dental/allied education, who already have experience of delivering education for healthcare professionals. It will particularly appeal to those seeking leadership positions or to undertake independent high-quality research in clinical education. Our students are clinicians/dentists, academicians, nurses, physiotherapists and the like possessing at least a graduate degree. They will be exposed to debates on issues and trends in higher education, learn the principles of teaching strategy, analyze professional health curricula and conceptualize the values and ethical systems of the health professional.

- II. *Goals:* The goals of the Program are to:
 - Provide the tools and guidance to enable faculty to advance their scholarly careers in medical/dental/allied education
 - Deepen the scholarly commitment of KGMU faculty to the educational research areas:
 - Clinical teaching
 - Curriculum development outcomes
 - Teaching and curriculum in patient care
 - Innovating assessment approaches
 - Integration of basic and clinical sciences
 - Portfolios
 - Professionalism and ethics
 - Reflection

Faculty of Medicine

K. G. Medical University, U.P.

AMENDED SYLLABUS

- III. Eligibility to be Course Instructors: Advanced Course in medical education like FIME, MPHE, FAIMER, PhD (Medical Education)
- IV. Eligibility to enroll in program: Teaching faculty of medical/dental/Nursing/allied sciences. Since this is in Campus Course, no leave will be required by KGMU faculty. Course is open for out campus faculty too.
- V. (a). Selection of candidates: Maximum of 30 and minimum of 5 students. Admission will be based on the basis of Entrance Test conducted by Controller of Examination.
- V. (b). The 15 seats (50% of total) will reserved for faculty from King George's Medical University, Lucknow. It will be allotted as follows:
 - i. 5-Assistant Professor
 - ii. 5-Associate Professor
 - iii. 5-Additional Professor/Professor
- V. (c). If there are less applicants in any category faculty from other category can be taken.
- V. (d). If total applications are >15 selection preference may be done as follows:
 - i. Longest duration of service in King George's Medical University, Lucknow
 - ii. Older in age
 - iii. Highest number of publications in indexed peer reviewed journals (Pubmed/Scopus).
- VI. Duration: This will be a part-time, 4-semester course (6 months each). There will be 6 hours contact sessions each month (total 24 hours/semester) and at least twice the number of hours of self-directed learning.
- VII. Course type: Part time, onsite course. Dissertation under a course guide will be done from the 1st semester. Each candidate will have to participate in national one conference/Workshop/Seminar on Health Professions Education and conduct one such in KGMU with the assistance of other colleagues.
- VIII. Attendance: 75% of classes and 100% of the course activities including internal assessments.

AMENDED SYLLABUS rof. Shally Awasthi

Head

Department of Medical Education

Department of Medical University, U.P. Lucknow

Medical University, U.P. Lucknow

Dean
Faculty of Medicine
K. G. Medical University, U.P.
PAGE-2

IX. Assessment: [AMENDED]

- 1. One **Internal Assessment** will be conducted at the end of each semester. Each internal assessment will be of 20 marks and pattern of assessment will be of short answer questions type.
 - **2(A).** At the end of 4th semester a **Final Examination** (grand total 500 marks) would be held. This would include
 - 2(A) i. <u>Theory paper</u>- A total of three theory papers of short answer type and with 100 marks each (Total 300 marks)
 - Paper-I would include course contents of Ist semester
 - Paper-II would include course contents of IInd semester
 - Paper-III would include course contents of IIIrd semester

2(A) ii. Theory Examination: (Paper setting & assessment) - 300 marks

- Paper-I & Paper-II will be made by the external examiners, one each
- Paper-III will be made by both internal examiners, one each for part A and part B.
- Each paper would have 2 parts. Part-A would include the 1st 3 modules of that semesters. Part-B would include last 2 modules of that semester.

2(B) i. Practical Examination- (Total 200 marks)

Would be conducted for 1/2 days (Not more than 20 candidates can be examined in 1 day). The total marks for practical examination will be 140.

This would include Table viva, OSCE & microteaching.

Marks of internal assessment will (60) be added to this making a total of 200 marks.

2(B) ii. Practical Examination (Assessment)-

- Practical examination
 - i. OSCE-50 marks
 - ii. Viva- 50 marks
 - iii. Microteaching- 40 marks

3. Eligibility for examination-

a. Approval of dissertation.

AMENDED SYLLABUS

rof. Shally Awasthi
Prof. Shally Awasthi
Head
Head
Headical Education
Headical University, U.P. Lucknow
Headical University, U.P. Lucknow
Headical University, U.P. Lucknow

Dean John Jacknow

2 Faculty of Medical University, UPAGE-3

Faculty of Medical University

A Facul

- b. At least 50% marks in internal assessment. (combined for all 3 semesters)
- c. At least 75% attendance of participant in the course.

4. Examiners: For Final Examination

- There would be 2 internal & 2 external examiners for the examination.
- One of the internal examiners will be Chairperson for the examination.
- The examiners should have completed Masters in Medical Education OR Advanced course in Medical Education OR at least 8 years' experience as faculty in Medical Education.
- Internal Examiners will be by annual rotation.

5. Passing / Qualifying Marks –

- Participant has to pass separately in theory & practical examination.
- Pass marks − 50%
- A total of **5 marks** may be give as **grace marks** in theory/practical examination.

X. The Semester will be as follows:- [ADDED]

| | Year-1 | Year-2 |
|-------------------|-----------------|-----------------|
| October- March | 1 st | 3^{rd} |
| April – September | 2 nd | 4 th |

XI. Proposed Assessment/Examination Schedule [ADDED]

- 28th April 2018 Terminal examination (One theory paper)
- Performa presentation- in Month of March, 1st Semester.
- Midterm presentation of dissertation and discussion- September 2nd Semester
- Date for the dissertation submission- 31st May, 4th Semester.
 (There should be at least 3 months between submission of dissertation and Final (exit) examination.)

Prof. Shally Awasthi

Prof. Shally Awasthi

Head

Head

Head

Head

Head

George's Medical Education

Head

Department of Medical Education

Head

Department of Medical University, U.P. Lucknow

Appear

Faculty of Medical University, U.F.

AMENDED SYLLABUS

PAGE-4

Semester wise Breakup of Syllabus [UPDATED]

| Semester wise Breakup of S | | PDATED | |
|--|-----------------------------|--------|-----------|
| | Credit Hours (FF+SDL) | Theory | Practical |
| Semester 11. Theories and Practice of Adult Education Faculty development | 6 + 6 | √ | √ |
| 2. Curriculum Development and Evaluation | 6+6 | 1 | 1 |
| 3. Principles of Assessment and Teaching | 6 + 12 | 1 | V |
| 4. Teaching Methodologies and Classroom Design | 6+6 | 1 | 1 |
| 5. Quantitative Research Methodology | 6 + 6 | X | 1 |
| 6. Proposal Development | 6+6 | | |
| Semester 2 7. Psychometrics | 6 + 12 | √ √ | √ |
| 8. Learning outcome development and mapping (Competency Based education) | 6 + 12 | 1 | 1 |
| 9. Entrustable Profession Activities | 6+6 | 1 | 1 |
| 10. Students learning to teach and Peer Assisted Learning (PAL) | 6+6 | 1 | 1 |
| 11. E-learning | 6+6 | | |
| Semester 3 11. Ethics | . 4 | | |
| | 6+6 | 1 | 1 |
| 12. Communication and professionalism | 6+6 | V | 1 |
| 13. Organization, Leadership and Change | 6+6 | 1 | 1 |
| 14. Feedback &Mentoring | 6+12 | 1 | 1 |
| 15. Manuscript writing | 6+6 | | |
| Semester 4 16. Submission of Dissertation with Manuscript | | X | 1 |
| 17. Manuscript Writing 18. Organizing a workshop/symposlum | | ÷ | |

AMENDED SYLLABUS

PAGE-5

Dean

Dean

Faculty of Medicine

Faculty of Medical University, U.P.

G. Medical Lucknow

Abbreviation:

FF: Face to Face Learning **SDL:** Self Directive Learning

Course Fees: Rs. 10,000/- per semester. Final Examination Fees will be Rs. 20,000/- as for all post graduate courses (MD/MS). (Fees can be revised by the University from time to time)

Degree: Degree of MPHE will be given by KGMU on successful completion of the course and publication / acceptance of atleast one manuscript from the dissertation in peer reviewed journal.

Core Syllabus [UPDATED]

Semester 1:

- 1. Theories and Practice of Adult Education Faculty development
- 2. Curriculum Development and Evaluation
- 3. Principles of Assessment and Teaching
- 4. Teaching Methodologies and Classroom Design
- 5. Quantitative Research Methodology
- 6. Proposal Development

Semester 2:

- 7. Psychometrics
- 8. Learning outcome development and mapping (Competency Based education)
- 9. Entrustable Profession Activities
- 10. Students learning to teach and Peer Assisted Learning (PAL)
- 11. E-learning

Semester 3:

- 12. Ethics
- 13. Communication and professionalism
- 14. Organization, Leadership and Change
- 15. Feedback & Mentoring
- 16. Manuscript Writing

AMENDED SYLLABUS

Shally Awasthi

23/3/2000 Medicine U.P.

PAGE-6

Semester 4:

- 17. Submission of Dissertation with Manuscript
- 18. Manuscript Writing
- 19. Organizing a workshop/symposium

Prof. Shally Awasthi
Prof. Shally Awasthi
Head
Head
Head
Department of Medical University, U.P. Lucknow
King George's Medical University

Dean
Faculty of Medicine
K. G. Medical University, U.P.
Lucknow

Dated: 28/5/2022



भारतीय आयुर्विज्ञान अनुसंधान परिषद INDIAN COUNCIL OF MEDICAL RESEARCH

स्वास्थ्य अनुसंधान विभाग (स्वास्थ्य एवं परिवार कल्याण मंत्रालय) वी रामलिंगस्वामी भवन, अन्त्यारी नगर, नई दिल्ली - 110029 DEPARTMENT OF HEALTH RESEARCH (MINISTRY OF HEALTH & FAMILY WELFARE) V. RAMALINGASWAMI BHAWAN, ANSARI NAGAR, NEW DELHI-110029

No.3/TSS-2/MD-Ph.D/(KGMU/LUCKNOW)/HRD-2019

Prof. Shally Awasthi, Head. **Department of Medical Education** King George's Medical University, Lucknow-226003.

Subject: Payment of Stipend and other allowance under ICMR's MD - Ph.D Programme at KGMU, Lucknow (2019) -reg.

Madam,

With reference to your letter even dated 07.12.2021 on the subject mentioned as above. The Competent Authority of ICMR has sanctioned the payment of Rs. 25,44,236/-(Rupees twenty five lakhs forty four thousand two hundred thirty six only) as the grant for covering the payment of stipend contingency and other allowance for the candidates enrolled in the Batch 2019 under MD-Ph.D Programme of ICMR for the period from 01.04.2021 to 31.03..2022

| Pay+ Grade pay 25810 | NPA 25% | Pay | | | One | 3 months | Cont | Ongwood |
|--|---|---|---|---|---|---|---|---|
| | 1 43/0 | | HRA 20% | DA 164% | Month | 3 months | Cont. | One year |
| 25810 | 6453 | 32263 | 6453 | 52911 | 91627 | 2,74,881 | 100,000 | 12,72,118/- |
| Pay+ NPA Pay HRA DA One Grade pay 25% 20% 189% Month | | | | | | | | |
| 25810 | 6453 | 32263 | 6453 | 60,977 | 99,963 | 8,97,237 | | |
| | | | | | | | | 1 |
| Pay+ Grade pay | NPA 25% | Pay | HRA 20% | DA 164% | One Month | 3 months | 100,000 | 12,72,118/- |
| 25810 | 6453 | 32263 | 6453 | 52911 | 91627 | 2,74,881 | | |
| Pay+ Grade pay | NPA 25% | Pay | HRA 20% | DA 189% | One Month | 9 months | | |
| 25810 | 6453 | 32263 | 6453 | 60,977 | 99,963 | 8,97,237 | | |
| | | | | | | | | 25,44,236/ |
| Uı | nspent balan | ce as per the | UC | | | | | 35,502/ |
| | Grade pay 25810 Pay+ Grade pay 25810 Pay+ Grade pay 25810 | Grade pay 25% 25810 6453 Pay+ NPA 25% 25810 6453 Pay+ NPA 25% 6453 Pay+ NPA Grade pay 25% 25810 6453 | Grade pay 25% 25810 6453 Bay+ NPA Grade pay 25% 25810 6453 Bay+ NPA Grade pay Pay Grade pay 25% Bay+ NPA Grade pay 25% Bay+ NPA Grade pay 25% Bay+ 25% | Grade pay 25% 20% 25810 6453 32263 6453 Pay+ NPA Pay HRA Grade pay 25% 20% 25810 6453 32263 6453 Pay+ NPA Pay HRA Grade pay 25% 20% | Grade pay 25% 20% 189% 25810 6453 32263 6453 60,977 Pay+ NPA Pay HRA DA 164% 25810 6453 32263 6453 52911 Pay+ NPA Pay HRA DA Grade pay 25% Pay HRA DA 20% 189% 25810 6453 32263 6453 60,977 | Grade pay 25% 20% 189% Month 25810 6453 32263 6453 60,977 99,963 Pay+ Grade pay NPA 25% Pay 20% HRA 164% DA Month One Month 25810 6453 32263 6453 52911 91627 Pay+ Grade pay NPA 25% Pay 20% HRA 20% DA Month One Month 25810 6453 32263 6453 60,977 99,963 | Grade pay 25% 20% 189% Month 25810 6453 32263 6453 60,977 99,963 8,97,237 Pay+ Grade pay NPA 25% Pay 25% HRA 20% DA 164% One Month 3 months 25810 6453 32263 6453 52911 91627 2,74,881 Pay+ Grade pay NPA 25% Pay 20% HRA 20% DA 189% One Month 9 months 25810 6453 32263 6453 60,977 99,963 8,97,237 | Grade pay 25% 20% 189% Month 9 months 25810 6453 32263 6453 60,977 99,963 8,97,237 Pay+ Grade pay NPA 25% Pay 25% HRA 20% DA 164% One Month 3 months Month 100,000 25810 6453 32263 6453 52911 91627 2,74,881 Pay+ Grade pay NPA 25% Pay 20% HRA 189% DA Month 9 months Month 25810 6453 32263 6453 60,977 99,963 8,97,237 |

for the amount of Rs.25,08,734/- will be sent to you in due course. The grant has been sanctioned on the conditions laid down in ICMR Fellowship Rules (already provided). Further, it is requested that this office may please be informed whether the above fellow are availing any hostel/Govt accommodation facility or not. A certificate to this effect from the competent authority of the host Institute may please be sent to this office in support of claim of HRA.

Thanking you,

Administrative Officer-HRD For Director General

Copy to: Accounts:-

1. Section, ICMR together with a formal bill of Rs 25,08,734/-/- for payment at an early date from allocation made under MD-PhD Programme (2021-22), Division of HRD. The expenditure may be met under head "17-P" Human Resource Development Plan. 2. The Vice Chancellor, King George's Medical University, Lucknow-226003.

फेल्स /FAX

पी.ए.बी.एक्स./PABX : 26588980, 26588707, 26589336, 26589745

26589873, 26589414

: 011-26588662, 011-26589791, 011-26589258

तार / GRAM Website

E-mail

: SCIENTIFIC

www.icmr.nic.in

icmrhqds@sansad.nic.in



भारतीय आयुर्विज्ञान अनुसंधान परिषद

INDIAN COUNCIL OF MEDICAL RESEARCH

स्वास्थ्य अनुसंधान विभाग (स्वास्थ्य एवं परिवार कल्याण मंत्रालय) वी रामलिंगस्वामी भवन, अन्सारी नगर, नई दिल्ली - 110029

DEPARTMENT OF HEALTH RESEARCH (MINISTRY OF HEALTH & FAMILY WELFARE) V. RAMALINGASWAMI BHAWAN, ANSARI NAGAR, NEW DELHI-110029

No.3/TSS-2/MD-Ph.D/(KGMU/LUCKNOW)/HRD-2019 Prof. Shally Awasthi, Head, Department of Medical Education King George's Medical University, Lucknow-226003.

Dated: 16.12.19

Subject: Payment of Stipend and other allowance under ICMR's MD - Ph.D Programme at KGMU, Lucknow (2015) -reg.

Madam,

With reference to your letter even dated 22.11.2019 on the subject mentioned as above. The Director General, ICMR sanctions the payment of Rs. 13,16,146/-(Rupees thirteen lakhs sixteen thousand one hundred forty six only) as the grant for covering the payment of stipend contingency and other allowance for the candidates enrolled in the Batch 2019 under MD-Ph.D Programme of ICMR for the period from date of joining to 31.03.2020.

| | Revised pay R | 1 | - | LIDA | DA | 000 | | Cont. | One year | |
|-----------------------------|---------------|------|-------|------|-------|-------|--------|-------|-----------|--|
| Name | Pay+ | NPA | Pay | HRA | DA | One | | Cont. | One year | |
| | Grade pay | 25% | | 20% | 164% | Month | | | | |
| Dr. Akanksha | 25810 | 6453 | 32263 | 6453 | 52911 | 91627 | 33597 | 36389 | 4,36,494 | |
| Singh 4 months 11 days | | | | | | | 366508 | | | |
| Dr. Mallicka | 25810 | 6453 | 32263 | 6453 | 52911 | 91627 | 36651 | 36667 | 4,39,826 | |
| 4 months 12 days | | | | | | | 366508 | | | |
| Dr. Shweta | 25810 | 6453 | 32263 | 6453 | 52911 | 91627 | 36651 | 36667 | 4,39,826 | |
| Jaiswal 4 months 12 days | 23010 | | | | | | 366508 | | | |
| | Total | | | | | | | | 13,16,146 | |

A RTGS for the amount of Rs.13,16,146/-/- will be sent to you in due course. The grant has been sanctioned on the conditions laid down in Council's Fellowship Rules (already provided). Further, it is requested that this office may please be informed whether the above fellow are availing any hostel/Govt accommodation facility or not. A certificate to this effect from the competent authority of the host Institute may please be sent to this office in support of claim of HRA. Thanking you,

(Lalita Anand)

Sr. Administrative Officer

For Director General

Copy to: Accounts-1 Section, ICMR together with a formal bill of Rs 13,16,146/-/- for payment at an early date from allocation made under MD-PhD Programme (2019-20), Division of HRD. The expenditure may be met under head "17-P" Human Resource Development Plan.

The Vice Chancellor, King George's Medical University, Lucknow-226003.

फैक्स /FAX

पी.ए.बी.एक्स./PABX : 26588980, 26588707, 26589336, 26589745

26589873, 26589414

: 011-26588662, 011-26589791, 011-26589258

तार / GRAM : SCIENTIFIC

Website

: www.icmr.nic in icmrhqds@sansad.nic.in

Dated: 17.12.2020



भारतीय आयुर्विज्ञान अनुसंधान परिषद INDIAN COUNCIL OF MEDICAL RESEARCH

स्वास्थ्य अनुसंधान विभाग (स्वास्थ्य एवं परिवार कल्याण मंत्रालय) वी रामलिंगस्वामी भवन, अन्सारी नगर, नई दिल्ली - 110029

DEPARTMENT OF HEALTH RESEARCH (MINISTRY OF HEALTH & FAMILY WELFARE) V. RAMALINGASWAMI BHAWAN, ANSARI NAGAR, NEW DELHI-110029

No.3/PSS-2/MD/MS-Ph.D/(KGMU/LUCKNOW)/HRD-2018

Prof. Shally Awasthi,

Head, Department of Medical Education King George's Medical University, Lucknow-226003.

Subject: Payment of fellowship under ICMR's MD - Ph.D Programme at KGMU, Lucknow Batch -2018- reg.

With reference on the subject mentioned as above. The Director General, ICMR has sanctioned the payment of Rs.61,42,790/-(Rupees sixty one lakhs forty two thousand seven hundred ninety only) as the grant for covering the payment of stipend , contingency and other allowance for the candidates enrolled in the Batch 2018 under ICMR-MD-Ph.D Programme for the period from 01.04.2020 to 31.03.2021.

| Name | Pay+ | NPA | pay Rs. 1 Pay+ | HRA | DA | One | 12 | Cont. | Too | |
|------------------------|--------------|-----------|-------------------|------------|-------------|----------|---------|--------|--------------|----------|
| | Grade pay | 25% | NPA | 20% | 164% | Month | months | Cont. | DA Arrear | total |
| Dr. Aditi Garg | 25810 | 6453 | 32263 | 6453 | 52911 | 91627 | 1099524 | 100000 | 29034 | 1228558 |
| Dr. Debadyuti Sahu | 25810 | 6453 | 32263 | 6453 | 52911 | 91627 | 1099524 | 100000 | 29034 | 1228558 |
| Dr. Abhishek Tiwari | 25810 | 6453 | 32263 | 6453 | 52911 | 91627 | 1099524 | 100000 | 29034 | 1228558 |
| Dr.Vanshika Shahi | 25810 | 6453 | 32263 | 6453 | 52911 | 91627 | 1099524 | 100000 | 29034 | 1228558 |
| Dr. Nishant Taur | 25810 | 6453 | 32263 | 6453 | 52911 | 91627 | 1099524 | 100000 | 29034 | 1228558 |
| Total | | | | • | | A | 5497620 | 500000 | 145170 | 6142,790 |
| | Un | spent bal | ance as pe | r the Util | ization cer | tificate | | | 113170 | 3,720 |

A RTGS for the amount of Rs. 61,39,070/- will be sent to you in due course. The grant has been sanctioned on the conditions laid down in Council's Fellowship Rules (already provided). Further, it is requested that this office may please be informed whether the above fellow are availing any hostel/Govt accommodation facility or not. A certificate to this effect from the competent authority of the host Institute may please be sent to this office in support of claim of HRA. Thanking you,

(Ishwar likhar) Administrative Officer For Director General

1. Accounts-1 Section, ICMR together with a formal bill of Rs. 61,39,070/- for payment at an early date from allocation made under ICMR-MD-PhD Programme (2020-21), Division of HRD. The expenditure may be met under head "17-P" Human Resource Development

2. Registrar, King George's Medical University, Lucknow-226003.

INDIAN COUNCIL OF MEDICAL RESEARCH Ansan Nagar, New Delhi - 110029, India hentist - G & Head Phone: (Off.) 26589753; (Res.) 26266317 Gram: Scientific, Fax: 26588662 Div. of Human Resource Planning & E.Mail: singhkeshari@yahoo.com Development (HRD) No.3/2/TSS/MD-Ph.D-2005/MPD Dated: 06.03.2012 Prof. Shally Awasthi Faculty Incharge, Chhatrapati Shahuji Maharaj Medical University, Lucknow-226003. Subject: MD-Ph.D Programme at CSM Medical University U.P. (Formerly King George's Medical University), Lucknow. Kindly refer to your letter No.439/R.Cell-12 dated 22.2.2012 regarding issuance of No a Objection Certificate to allow the CSMMU UP for providing the experience certificate to the MD-Ph.D. students, at par with senior resident for the clinical work and teaching done along with Ph.D course work. Since, the students are already M.D. and doing their Ph.D and getting fellowship of senior resident's salary, therefore, ICMR has no objection to issue the NOC to the students enrolled under MD-Ph.D Programme after certificate of work and conduct by their respective Head of Department. This issues with the approval of DG, ICMR. With regards, Yours sincerely, Inter (In Ricord)
Republican duripla Note for information love.

K.K. SINGH

Research Cell

Madam,

गचार्य एन.के. गांगुली महानिदेशक

Prof. N.K. GANGULY
(hc), FRC Path. (London), FAMS, FNA, FASc, FNASc
TWAS (Italy), FIACS (Canada), FIMSA

Director General



भारतीय आयुर्विज्ञान अनुसंधान परिषद वी. रामलिंगरवामी भवन, अंसारी नगर, पोस्ट वॉक्स 4911, नई दिल्ली - 110 029

Indian Council of Medical Research V. Ramalingaswami Bhawan, Ansari Nagar, Post Box 4911, New Delhi - 110 029

D.O.No. No. Do 23/1/98-05

25th June, 2005

Dear Dr.Bhandari,

Kindly refer to your letter No.22/R.Cell dated 15.6.2005 regarding MD-PhD Programme for King George's Medical University, Lucknow. We are pleased to consider six seats of MD-PhD Programme to King George Medial University. Please send us the complete proposal so that the necessary formalities could be completed.

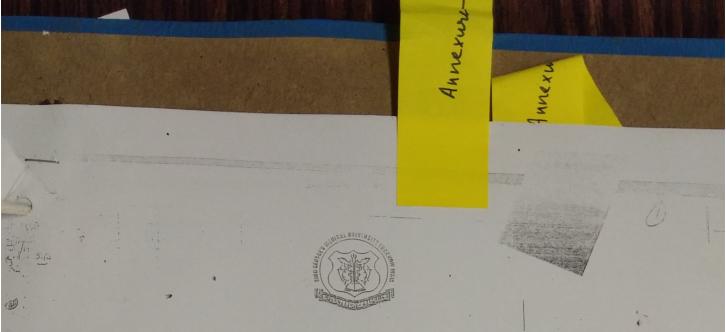
With warmest regards,

Yours sincerely,

(N.K.Ganguly)

Dr. Mahendra Bhandari, Vice-Chancellor, King George's Medical University, Shahmeena Road, Chowk, Lucknow-22669.

De le os



KING GEORGE'S MEDICAL UNIVERSITY, LUCKNOW

Minutes of the meeting of the Executive Council held on Tuesday July 19, 2005 at 5.00 P.M. in the Committee Room of the Administrative Block of the University.

The following were present:

Prof. Mahendra Bhandari

2! Prof. A.M. Kar

3. Prof. Suresh Chandra

Prof. S.K. Agarwal

5. Prof. R. Pradhan

6. Hon'ble Mr. Justice Jagdish Bhalla

7. Dr. Ramesh Chandra

3. Dr. K.N. Sinha

Dr. N.C. Mishre

0. Dr. Devika Nag

14. Dr. Shradha Singh

12. Dr. Hari Ram

"Sri S.D., Maurya, Finance Officer

Vice-Chancellor[in the Chair]

Dean, Faculty of Medicine

Dean Faculty of Dental Sciences,

U.P.K.G.U.D.S.

Head Deptt. of Microbiology

Former Head Deptt. of Oral &

Maxillofacial Surgery,

U.P.K.G.U.D.S

Senior Judge of Allahabad High Court

Former Principal KGMC, Lko.

Former Principa, KGMC, Lko.

Former Prof. & Head, Deptf. of Surgery

Former Prof. & Flead, Deptt of

Neurology.

Associate Prof., Deptt, of Physiology

Astt. Frof. Depth of Oral &

Maxillofacial Surgery,

U.P.K.G.U.D.S

In charge Registrar (Secretary)

The Vice-Chancellor welcomed all the members

Item No.1. The Council confirmed the minutes of the meeting of Ex. Council held on 17th May 2005 with the following modifications:-

כשומשפונים

Item No. 7

The Council considered the application of D. Vineel Sharma for granting leave with full pay, as he will get only honorarium in B.P. Koirala, Institute of Health Sciences, Dharan Nepal. Since the amount of honorarium offered was more than the pay he is getting in this University, the Executive Council approved to grant him leave without pay.

Item No. 8

The Council rejected the proposal of extension of service of Sri Sidhnath Srivastava and Sri B.M. Sharma on fixed pay on contractual basis.

Item No. 9

The Council approved the proposal of starting MD-PhD program [ICMR Scheme] at this University from this Academic Year. however this should be gone in consultation with the MCI, ICMR and govt, of UP, not violating any of the existing norms of MD Course at this University. An equal opportunity should be given to all faculty members to Guide MD-PhD work; However the selection of Guides and candidates will be on merit through independent and transparent process. Since MD-PhD program has a strong research component this will be coordinated through Research Cell like ongoing PhD program

Item No. 10 The Council passed the Budget of this University for the Year 2005-06.

Item No. 11

In any other item the Executive Council desired that a proposal for the establishme c of independent department of Dermatology be prepared to be sent to the Government for approval.