

## DEPARTMENT OF ANAESTHESIOLOGY-GMC ONGOLE

### ANAESTHESIA SOPs as per NMC

The National Medical Commission (NMC) provides Standard Operating Procedures (SOPs) primarily through its competency-based curriculum for **MD Anaesthesia** and assessment forms for medical colleges. These guidelines ensure standardized patient care across preoperative, intraoperative, and postoperative phases.

#### 1. Pre-Anaesthetic SOPs

**Pre-Anaesthetic Check-up (PAC):** A mandatory evaluation including a detailed medical history (allergies, past surgical/anaesthesia experiences), physical examination, and systemic assessment.

**Investigations:** Routine tests like CBC, electrolytes, urea, and creatinine are required to assess organ status.

**Risk Categorization:** Patients must be classified using the ASA Physical Status (I to V) to determine fitness for surgery.

**Informed Consent:** A separate, specific consent for anaesthesia must be obtained, independent of the surgical consent.

**Equipment Check:** Verification of gas supplies, drugs, fluids, and anaesthesia machine functionality (using a pre-check list) is required before induction.

#### 2. Intraoperative SOPs

**Mandatory Presence:** A qualified and registered Anaesthesiologist must be present in the Operating Room (OR) throughout the procedure.

**Monitoring Standards:** Periodic recording of vital signs is mandatory:

Heart rate and rhythm (ECG)

Blood pressure (NIBP)

Oxygen saturation (SpO<sub>2</sub>)

Respiratory rate and temperature

Urine output and CVP in prolonged cases

### 3. Post-Anaesthetic SOPs

**Recovery Room (PACU) Monitoring:** Patients are shifted to the recovery room where vitals are monitored until they meet discharge criteria.

**Pain Management:** Continuous assessment and management of postoperative pain are required.

**Documentation:** All anaesthetic events, drugs administered, and adverse reactions must be recorded in the Anaesthesia Record Sheet, which becomes part of the permanent medical record.


### 4. Departmental & Educational Requirements

**Specialty Clinics:** The department is encouraged to run specialized clinics such as Pre-Anaesthesia Clinics and Pain Clinics.

**ICU Facilities:** Must include at least 3 syringe infusion pumps per bed and multi-parameter monitors.

**Audit and Ethics:** Participation in clinical audits and adherence to ethical standards regarding end-of-life care and live surgery broadcasts (which must prioritize education over promotion) are mandatory

  
Professor & HOD  
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22/04/2026

  
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ONGOLE::PRAKASAM DISTRICT**

**Crisis Intervention and Response Protocol**

The comprehensive crisis intervention protocol for students with psychiatric illnesses in Government Medical college , Ongole is managed by an immediate Response Team. The team adopts the SOP in practice and also follows up the cases for their final integration into normal life.

**Immediate Response Team:** A Mental Health & Well-being Monitoring Committee (MHWMC), as given below, has been constituted which springs into action for crisis intervention.

Office bearers	Role in MHWMC	Name	Designation & Dept	Contact number
Vice Principal	Chairman	Dr.P.Padmalatha	Vice Principal	9246620072
Chairman of Student Welfare Committee	Member 1	Dr. A. Suvarchala	HOD (General Surgery)	8790261540
Nodal Officer (Faculty)	Member 2	Dr. I. Lakshmi Narayana Reddy	HOD ( Psychiatry)	8978078377
Hostel warden	Member 3	Dr. R. Nazar Ahmed	Tutor	7702042337
Non-Teaching staff rep.	Member 4	M. Shyni	UG Clerk	9121555612
Student rep.	Member 5	Moulendra	MBBS 3 <sup>rd</sup> year	9959165617

**Action :** MHWMC implements the steps for managing emergencies, including emergency contact notification and secure transport to hospitals.

**Follow-up and Reintegration :** The committee provides structured, mandatory follow-up for students returning after a mental health crisis, including tailored academic plans.

  
Principal 2-11-26

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**NOTIFICATION**  
**SOP FOR CONFIDENTIALITY IN CAMPUS MENTAL HEALTH SERVICES**

SOP on confidentiality for psychiatric patients in Government Medical College, Ongole is governed by **Section 23 of the Mental Health care Act, 2017**, which guarantees the right to confidentiality regarding mental health, treatment, and physical health records. Information can only be released with explicit consent, to a Nominated Representative (NR) if capacity is lost, or under specific legal orders.

SOP for maintaining confidentiality of students suffering from psychiatric illness shall include:

1. **Scope of Protection** : All personal information, diagnosis, and treatment details in any format (physical, virtual, digital) are protected.
2. **Consent for Disclosure** : Information can generally only be shared with the explicit, informed consent of the patient.
3. **Exceptions (Breach & Confidentiality ):**
  - a. **NR** : Information can be shared with NR when patient lacks capacity to consent.
  - b. **Emergency & Safety** : Information can be released if the person with mental illness poses a danger to themselves or others.
  - c. **Legal Orders** : Information can be disclosed if required by the Mental Health Review Board, the Central Mental Health Authority, or high courts.
  - d. **Referrals:** Information can be shared with other health professionals for the purpose of providing care.
4. **Media restrictions (Section 24** : No photographs or identifying information can be released to the media without the person's explicit consent.
5. **Procedure for dilemmas:** If a mental health professional cannot decide whether to disclose information, they should seek direction from Mental Health Review Board.
6. **Data protection** : Digital systems and records must comply with privacy standards to prevent unauthorized access, as noted in studies regarding the Mental Health Care Act 2017 and data privacy in India.
7. **Legal and Ethical Considerations** :
  - a. **Capacity Assessment:** Confidentiality applies to anyone deemed to have capacity. If capacity is absent, decisions shift to the Nominated Representative.
  - b. **Tele-psychiatry:** Special care is needed in tele – psychiatric services to ensure data privacy an obtain implied consent.

  
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