



Annual Report 2009

National Eye Hospital
Colombo

Message from the Director

The annual report of the institution is very important to assess its efficiency, effectiveness and productivity. The government is the main input provider for this institute. These inputs are provided through Ministry of Health. Government and other stake holders have rights to know our progress. This report gives good analysis of our process and output.

Health Indicators are valuable parameters in assessing the health status of the population and thereby the status of the country. Health Indicators are formulated by the collection and analysis of data by the ministry of health.

At the Eye Hospital the process is handled by the quality assurance unit which publishes its findings in the Annual Report annually. The purpose of the report is

1. To provide the feedback on the efficiency, effectiveness and asses productivity.
2. For future planning and recruitment of staff.
3. To justify request for increase resources from the Ministry of Health, Government and Non Governmental Organizations.
4. For public education.

I thank the quality assurance unit for their untiring effort and wish them all the best in their future endeavors.

Your constrictive criticism would be warmly welcome for better report in next year.

Dr. Sisira Liyanage.

Director

Eye Hospital

Colombo.

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Our Hospital

Eye Hospital has a long history in the health care of Sri Lanka. This is the tertiary care hospital with the centre of excellence which was established in 1905. It is the referral hospital in special management of many ophthalmic conditions. Patients are referred from all parts of the island for the specialized management.

The Out Patient Department (OPD) of the hospital plays a major role in screening, managing and treating many eye problems. There are over thousand patients seen daily at the OPD itself. There are clinic for the further management of various eye conditions. There are clinics under the care of the consultant Ophthalmologists. Over six hundred patients attend to the clinic daily for various eye conditions. There are special clinics for retinal patients, diabetic, glaucoma, and post operative patients. Two retinal units are functioning under the supervision of two Consultant Ophthalmologists.

Casualty unit operates for twenty four hours every day to see the patients who need the treatment immediately.

With the new trend, the patients are sent home after the cataract surgery on the same day. This may reduce the patient stay in the hospital. There are eighteen normal wards and paying ward facilities in this institution.

There are nine consultant ophthalmologist one consultant anesthetist and one consultant pathologist in this hospital. There are teams of Ophthalmic Technologist and Orthopists handling the paramedical service like refraction and orthoptic assessments. There is separate low vision clinic to low vision patients for low vision aids and rehabilitation. Medical Laboratory Technologist, Pharmacist and Cardiographers also give their fullest co operation in managing the patients.

The laser treatment unit utilizes the new technology to provide laser therapy and other latest investigations like Optico Coherent Tomography (OCT).

There are training programmes for medical officers who are doing Post Graduate studies with the association of College of Ophthalmologists and Post Graduate Institute of Medicine, University of Colombo. There is a training course for the Ophthalmic technologists too.

Our Vision

To become the best Eye Hospital in South Asia.

Our Mission

As a centre of excellence in the eye care service in Sri Lanka, this institute provides adequate quality services to satisfy patients through maximum tertiary level eye care with advance technology and with kindness of well trained staff. It also gives necessary training and guidance for all categories of staff in the eye care service in Sri Lanka. We Support and conduct community eye care programs also in Sri Lanka.

Our Goals

1. To become best recognized centre in tertiary eye care in South Asia within next five years.
2. To develop attractive, updated training programs for each category of health staff suitable for local and international level in eye care.
3. To establish an international research centre.
4. To sustain as a centre of excellence in eye care in Sri Lanka.

Cooperate Level Strategies

1. To introduce latest technology and update these technology for eye care in next five years.
2. To prepare a curriculum of training program suitable for local and internationals.
3. To establish international research centre with help of college of ophthalmologists and private sector.
4. Establish system to get assistance from hospital committee, N.G.O. and donors for development work.
5. To introduce productivity and quality programs to increase quality and productivity.
6. Maximum use of operation theatre allowed for private sector patients operation by our consultants for reasonable chargers.
7. Promotions of our services in South Asian countries for low cost but add reasonable income for hospital.
8. Forward project proposal to international organizations to establish well equipped units with new technology in new building.

Divisional Level Strategies

1. Introducing cost reduction programs in supportive services.
2. Prioritize requirements using scientific model.
3. Keep good rapport with all the trade unions by get them involve development work.
4. Introduce rational referral system in O.P.D. and clinics.
5. Introduce program to improve the quality of hospitality towards foreign and local patients.

Functional Level Strategies

1. Introduce system (early registration, giving appointments, supply of new technology, early triage etc.) to reduce waiting time for patients
2. Introduce day care management protocol for cataract surgeries
3. Introduction of rational antibiotic policy.
4. Introduce efficient maintaining system for essential services (delegation, fixed responsibility, service agreements, out sourcing)
5. Improve the appearance of the hospital with participation of staff, patients, donors and hospital comity
6. Improve quality of care services of class 1 and 2 paying wards.

Our Staff

There are dedicated staff members in our hospital, always serving the patient well in every field. With working experience in many years in the medical field, they do a great job to the patients. Further, they always pay their attention to the well being of the patients.

CATEGORY OF STAFF	Approved cadre	In position
Administrative Grade MOO	1	1
Consultant Ophthalmologists	8	8
Consultant Pathologist	1	1
Consultant Anesthetist	1	1
Medical Officer Grade 1	} 69	1
Grade 11		51
Preliminary		28
Registered Medical Officer	2	3
Special Grade Nursing Officer	3	2
Nursing Officer Grade 1 (Sister)	6	5
Nursing Officer Grade 1(Supernumerary)	} 174	10
Nursing Officer Grade 11A		47
Nursing Officer Grade 11B		82
Hospital Infection Control Nurse	1	2
Accountant	1	1
Public Management Assistant	2	2
Development Assistant	1	1
Medical Record Assistant	1	1
HMAS Supra Grade (A O)	1	1
HMAS Grade 1,11,& Preliminary	14	12
Data Entry Operator	1	1
Ward Clerk	6	9
Pharmacist	5	5
Dispenser	2	2
Medical Lab Technologist	4	4
E.C.G. Recordist (Cardiographer)	2	2
Orthoptist	4	3
Ophthalmic Technologist	20	24
Telephone Operator	3	3

CATEGORY OF STAFF	Approved cadre	In position
Diet Stewardess	2	2
House Warden	3	3
Hospital Overseer	6	5
Driver	3	5
K.K.S.	2	2
Lift Operator	4	4
Book Binder	1	1
Cook	10	8
Seamstress	2	2
Labouredly	2	3
Cycle Orderly	1	1
Hospital Attendant	73	47
Ordinary Labourer	70	92
Sanitary Labourer	30	70
Sanitary Labourer - Causal		11
Total	535	568

Consultant for Ophthalmology

1. Dr.(Mrs) C. P .Banagala
2. Dr. H. C. N. Fonkeka
3. Dr.(Mrs) K. M. Gamage
4. Dr (Mrs) .M .K .Kulathunga
5. Dr (Mrs) S. N. Pathirage
6. Dr. (Mrs) G. M. Pasquel
7. Dr. C. Sebanayagem
8. Dr. (Mrs) I .K . Fonseka

Consultant for Pathology

Dr. (Mrs) P. A. Samarasekara

Consultant for Anesthesia

Dr. (Mrs) D. Wijewardan

Training Programmes

Date	Topic	Lectures Name and Position	Participants	No of Participants
28.03.09	5S Concept	Dr.K.K.W.Karadagoda Director De Soysa Maternity Hospital	Major staff Miner staff	34 02
05.04.09	Introduction	Dr.S.A.H.Liyanage Director Eye Hospital	Miner staff	23
	Patient care	Ms.Y.Hemamali Special Grade Nursing Officer		
	Basic eye examination	Mr. M.M.S.A. Marasinghe Nursing Officer		
	Emergency Management	Ms. Nilanthika Nursing Officer		
09.05.09	Human Resource Management	Dr.Rathnasiri Deputy Director(EH)	Miner staff	21
02.08.09	Patient care	Ms.Y.L.S.Hemamali Special Grade Nursing Officer	Miner staff	18
05.08.09	Human Resource Management	Dr.Rathna siri Deputy Director	Miner staff	23
	Duties of Miner staff	Mr. W.A.Jayasinghe Hospital Secretary		
	Patient care and hospitality	Ms.lalitha Abeynayaka Nursing Sister		
16.09.09	Introduction	Dr.S.A.H.Liyanage Director Eye Hospital	Nursing Officers	20
	Purpose of the ophthalmic work shop	Ms.H.N.T.T.Gunarathne Special Grade Nursing Officer		
	Anatomy and physiology of the eye	Dr.H.M.P.Samarathunga Deputy Director		
	Diabetic Retinopathy	Dr. C.Danuka Weerasinghe		
	Nursing Responsibility	Ms.Y.L.S.Hemamali Special Grade Nursing Officer		
	Preoperative Management	Ms.Pushpa Wikramasinghe Nursing Officer		

Date	Topic	Lectures Name and Position	Participants	No of Participants
17.09.09	Post operative Management	Ms.B.B.S.Perera Nursing Officer[]	Nursing Officers	30
	Roll of OPD and Clinic Nurse	Ms.L.Abeynayaka Nursing Sister		
	Refractive errors and low vision	Ms.Sudharma		
	Trauma and blindness	Dr. Asela Abeydeera		
	Cataract	Dr.Wathsala Priyadharashinie		
	Glaucoma	Dr.Chaya Samarasinghe		
	Eye Infection	Mr.S.A.Marasinghe Nursing Officer		
21.09.09	Introduction	Dr.S.A.H.Liyanage Director Eye Hospital	Nursing Officers	30
	Duties of miner staff	Mr. W.A.Jayasinghe Hospital Secretary		
	Patient care and hospitality	Mr.Thusitha Mallasekara Publicity officer		
	Hospital Management	Ms.Bolana Special Grade Nursing Officer		
	Emergency Management	Ms.Nilanthika Nursing Officer		
	Patient care	Ms.Gunarathna Special Grade Nursing Officer		

Community Health, Public Health and Other Service

Health Education Unit

- **Activities of the Unit**
 1. Health education for OPD patients, individual basis.
 2. Mass Health Education through loud speaker system.
 3. Directive patients and their by standers /relatives.
 4. Direct involvement in helping hand for patient's problems within the OPD premises.
 5. Registration of officers for occupational medicals.
 6. Issuing OPD tickets for staff patients.
 7. Lectures for hospital staff.

- **Activities of Development of Productivity Improvement**
 1. Preparing and fixing of name and directions boards in collaboration with Janashakthi Insurance Cooperation.
 2. Removal of waste from the whole hospital by staff through a Sramadana programmes.
 3. Colour washing of the hospital done by the staff themselves using the paint which was given by the hospital committee.
 4. Spectacles distribution for school children under vision 2020 programme.



5. Provisions of donated spectacles frame for poor patients.
6. Provisions of IOL and spectacles for defective patients.
7. Cleaning programme for destruction of breeding places of dengue mosquito.
8. Screening programme in North East (I.D.P.)

Special Activities

01. Wearing Uniform.

All the employees who are entitled to wear uniforms were requested to be in uniform while on the duty and it is carried out strictly up to now.

02. Issuing of Identity Cards.

Official identity cards were issued for the remaining employees who couldn't get earlier. All employees are asked to wear the identity card while on duty and the response was very high as most of the employees are wearing identity cards.

03. Maintaining of Medical Equipments.

Arrangements are made to maintain the medical equipments better to prevent the damage and loss.

04. Clinical Waste Management System.

The clinical wastage management system was reestablished properly to give the better service to prevent infection.

05. Reorganization of Infection Control Unit.

The infection control unit was reorganized to face the demand and prevent future infections.

06. Donation Register.

The document register was maintained properly and it was made in order for the documentation donations were encouraged.

07. Measures Taken to Minimize out of Pocket Expenditure of the patients.

08. Laboratory Investigations Outside.

Circular was issued to stop requesting the patients to get the investigation done outside.

09. Investigation in Our Lab.

(Hematology analyzer)
Measures were taken to do the lab investigation in the institution using the hematology analyzer.

10. Visiting physician visit to Eye Hospital.

Earlier, the patients who needed VP opinion were sent to NHSL with ambulance. There was lot of problems in this regard. Arrangements were made the VP to visit Eye Hospital itself. As a result lot of time saved and most of the problems faced by sending the patients to NHSL were stopped.

11. E.C.G Service.

E.C.G Service were maximized give fullest and supportive service.

12. Waiting area for Refraction.

There were no ample place for the patients who were waiting for refraction and a room at the 1st floor closer to the refraction room was allocated waiting room for refraction.

13. Minimize waiting time for Refraction.

All the respective day refractions were done on the same day itself and the waiting time for refraction time was shorten

14. Priority given for Clinic Patients.

The clinic patient were given priority in refraction

15. Annual Health Report

The relevant clinical and service data were collected and entered properly in view of epidemiology. These data used in publishing in the Annual Health Report. The Annual Health Report gives the feedback of the previous year in a nut shell.

16. In Service Programs.

To increase the efficiency of the employees of the hospital, in service programs such as productivity, Tamil classes and computer classes were arranged time to time.

17. Renovation of Hospital Beds.

Hospital beds were renovated by the hospital committee to meet the demand

18. Annual Pirith and Dana Pinkama.

Annual pirith chanting and dana pinkama were also held as usual.

19. Annual Cricket Tournament.

Cricket tournament was organized to give a break in the routine schedule with the participation of all categories of the staff.



20. Monthly Religious Program.

The monthly religious programs also conducted without any obstacle.

21. Glaucoma Screening Programme.

Glaucoma mass screening was conducted in March to commemorate the World Glaucoma Day.

22. Musical Program.

The last year was concluded successfully with musical programme “ paduru party”










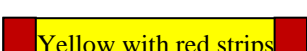
Activities of vision 2020

Date	place	Participants	Purpose
21.01.09	Blood bank	EH staff including Director	Spectacles distribution for school children
07.04.09	Blood bank		
02.06.09	Blood bank		
06.08.09	MRI		
16.09.09	BMICH		
12.05.09 - 16.12.09	GH Vavuniya	Ophthalmic Technologist	Eye programme for IDP
18.05.18 - 23.05.09	GH Vavuniya		
25.05.18 - 30.05.09			
01.06.09 - 06.06.09	GH Vavuniya		
08.06.09 -13.06.09	GH Vavuniya		
15.06.09 - 22.06.09	GH Vavuniya		
22.06.09 - 29.06.09	GH Vavuniya		
29.06.09 - 27.07.09	GH Vavuniya		
12.05.09 - 13.05.09	Cheddikulam	Doctors and other staff	Eye screening programme
06.06.09 - 07.06.09	Cheddikulam		
19.06.09 - 21.06.09	Cheddikulam		
18.08.09	Cheddikulam		
08.03.09	Viharama Devi Park	Eye hospital staff	Women's day Eye screening programme
12.03.09	Eye Hospital		Eye screening programme
12.10.09	Viharama Devi Park		World Sight day Eye screening programme
18.10.12	Abeyarama Temple		Eye Clinic
24.11.09 - 25.11.09	HEB		Eye camp for media personals
18.12.09	HEB		Spectacles distribution for media personals

Two ophthalmic technologist are sent to school clinic in Narahempita each Saturday of the week as a routine work of vision 2020) programme.

Infection control unit

Hospital waste management is supervised by the infection control unit. Waste is separated according to a colour cord at ward level

- Normal waste -  Black
- Clinical waste -  Yellow
- Decompose material -  Green
- Recycling waste -  Blue (papers only)
- Plastic waste -  Orange
- Glass -  Red
- Metal -  Brown
- Sharp -  Yellow with red strips

Plastic waste products are sold while the sharps are burnt. All the other are sent to the urban council.

Prevention programmes for eradicate of hospital infection

Date	Activities
09.06.2009	Testing at autoclaves. 01. Mini autoclaves – No 6 02. Major autoclaves – No 2
12.06.2009	Examination of bacterial growth of solutions 01. Hartmann’s Solution 02. BSS Solution
18.06.2009	Examination of two mini autoclave in the operation theater
12.06.2009	Bacteriological investigation of pre operation eye drops and post operative eye drops.
27.06.2009	Examination of bacterial growth at solutions repeat 01. Hartmann’s Solution 02. BSS Solution
02.07.2009	Bacteriological examination of air quality of operation theater by settle plate method
07.07.2009	Examination of routing culture swabs of operation theater
10.07.2009	Examination of routing culture swabs of operation theater
01.10.2009	Bacteriological Investigation a slit lamps and tonometer pwsms at the OPD.
17.11.2009	Bacteriological examination of water.
30.11.2009	Testing at autoclaves. 01. Mini autoclaves – No 6 02. Major autoclaves – No 2
8.12.2009	Testing at autoclaves. 01. Mini autoclaves – No 2 02. Major autoclaves – No 2

Transport Service

Our transport service offers a transport service for medical /nonmedical, equipment transport and emergency care transport. Our transport service consists with two ambulances and a cab.

- **Two Ambulances**

To transport patients to specialized institutions and to transport patients to clinics.

- **Cab**

To transport drugs, medical gas, official items (Stationary etc.), other supplies from the MSD & BES. This is also used for transport of staff for official work.

Communication Service

Telecommunication is used to provide better co ordination and exchange of information within and between health care institutions for twenty four hours.

Our hospital has eight direct lines and 160 terminals. In addition email facility is available to the institution as well.

Hospital Diet

Nutritional assistance of the patients is very important part in the hospital care. Raw items are supplied by the contractors and cooking is done by the hospital cooks. There are two diet stewardesses in charge of the kitchen.

Technical Support given by the Hospital

Ophthalmic Technological service is provided to other needed hospitals in Colombo and suburbs. One ophthalmic technologist is send to the Lady Ridgeway Hospital, Wjekumaranathunga Memorial Hospital and Police Hospital one day per week .

Army Hospital

As a support to the military service, weekly Eye clinic were conducted at the military hospital in last year too. The following table gives the description of the number of patients seen in military hospitals.

Hospital	Total patients seen
Army Hospital - Narahempita	933
Navy Hospital	807
Police Hospital - Narahempita	675
AirForce Hospital - Guwanpura	367
Total	2782

Financial Performance Review

Recurrent Expenditure

Type	Allocation((Rs)	Received(Rs)	Expenditure(Rs)
Staff Salary	134,955,000.00	134,955,000.00	128,866,266.40
OT Doctors	} 45,000,000.00	} 37,123,000.00	} 25,014,894.99
OT Nurses			
OT Others			
Other Allowances	37,000,000.00	58,000,000.00	57,847,942.28
Loan	9,450,000.00	6,750,000.00	9,369,705.00
Travelling allowances (all staff)	150,000.00	250,000.00	248,556.25
Fuel	562,500.00	562,500.00	402,167.70
Stationary	1,000,000.00	1,000,000.00	480,796.02
Food & Uniforms	9,000,000.00	10,700,000.00	9,788,612.59
LP gas	} 7,200,000.00	} 9,200,000.00	} 9,177,529.72
Other Supplies			
Repair of vehicles	450,000.00	450,000.00	317,109.06
Repair of Machines	750,000.00	850,000.00	798,573.82
Building Repairs	1,000,000.00	1,700,000.00	1,543,732.77
Telephone	} 1,550,000.00	} 1,550,000.00	} 1,057,880.03
Postal			
Electricity	} 21,600,000.00	} 28,600,000.00	} 21,158,525.37
Water			
Tax	500,000.00	500,000.00	323,556.00
Laundry	} 7,200,000.00	} 9,200,000.00	} 9,177,529
Security			
Cleaning			
Loan interest	2,500,000.00	2,500,000.00	2,254,711.12
Bio gas	} 6,638,641.00	} 6,638,641.00	} 5,179,730.67
Medical Supplies			
Total	286,506,141.00	310,529,141.00	283,007,818.79

Capital Expenditure

	Allocation(Rs.)	Received(Rs)	Expenditure(Rs)
Bio Medical Service	1,000,000.00	1,000,000.00	1,601,362.06
Building Maintain	6,175,503.75	6,175,503.75	4,709,785.10
Maintain of Electricity	5,294,633.06	5,294,633.06	3,073,555.76
Maintain of Vehicles	164,500.00	164,500.00	164,500.00
Air Conditions	5,770,925.53	5,770,925.53	5,071,654.40
Office Equipments	2,500,000.00	2,500,000.00	1,896,456.20
Theater Tables	1,288,400.00	1,288,400.00	1,254,400.00
Intercom service	22,089.78	22,089.78	22,089.78
Maintain of Generators	1,288,400.00	1,288,400.00	1,254,400.00
Total	21,006,952.12	21,006,952.12	19,048,203.30

Hospital Revenue

The total revenue we earned from medical certificate , paying wards, canteen and Highland milk café etc. is Rs.12,055,176.52.

Statistics in the hospital

Out Patient Service

Description	Number
No. of first patient visit	218252
No. of subsequent patient visit	85901
No. of Out Patient visit	304153
No of all clinical visit	203481
No. of casualty patients	24941
Grand total (O.P.D. & Clinic)	507634
Average general OPD/day	1049
Average clinic visit/day	701
Average OPD & clinical visit /day	1750

Clinic Visits

	Month												Total
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
First visit	6291	4172	6491	6244	5963	6396	6248	6043	6217	6910	6088	6484	73547
Subsequent visit	11797	8506	11288	10299	10170	11574	10823	10790	11158	12842	9876	10811	129934
Total visit	18088	12678	17779	16543	16133	17970	17071	16833	17375	19752	15964	17295	203481

Inpatient Service

Description	Number
Bed Strength	486
Total No of Admissions -	
Non paying	20509
Paying	523
Total No of Discharge	20011
Total No of Inpatients Days	98977
Average Length of stay	5
Bed Occupancy	55%
Average Daily Sick	271
Average Admission	57
Average Discharge	55

Ward Statistic

Non paying

Ward No	M/F	Bed	Admission	Cots	Bed Occupancy %	Length of stay
1	M	33	-	-	-	-
2	F	23	1239	5	92	7.6
3		16	1094	-	88	4.7
4	F	29	2472	6	61	3.1
5	F	25	3307	4	82	2.6
6	M	22	1050	-	44	3.4
7	M	30	1531	-	54	3.8
8	F	22	1677	4	45	2.5
9	F	19	863	4	41	4.06
10	F	24	1727	4	57	3.4
11	M	25	1931	-	59	2.8
12	M	30	1398	-	69	5.4
13	M	29	3207	-	119	3.9
14	M	25	697	-	54	7.0
15	M	28	1686	-	55	3.3
16	F	20	1628	4	41	2.2
17	F	12	294	-	7.3	1.0
18	F	11	134	-	57	17.3

Paying wards

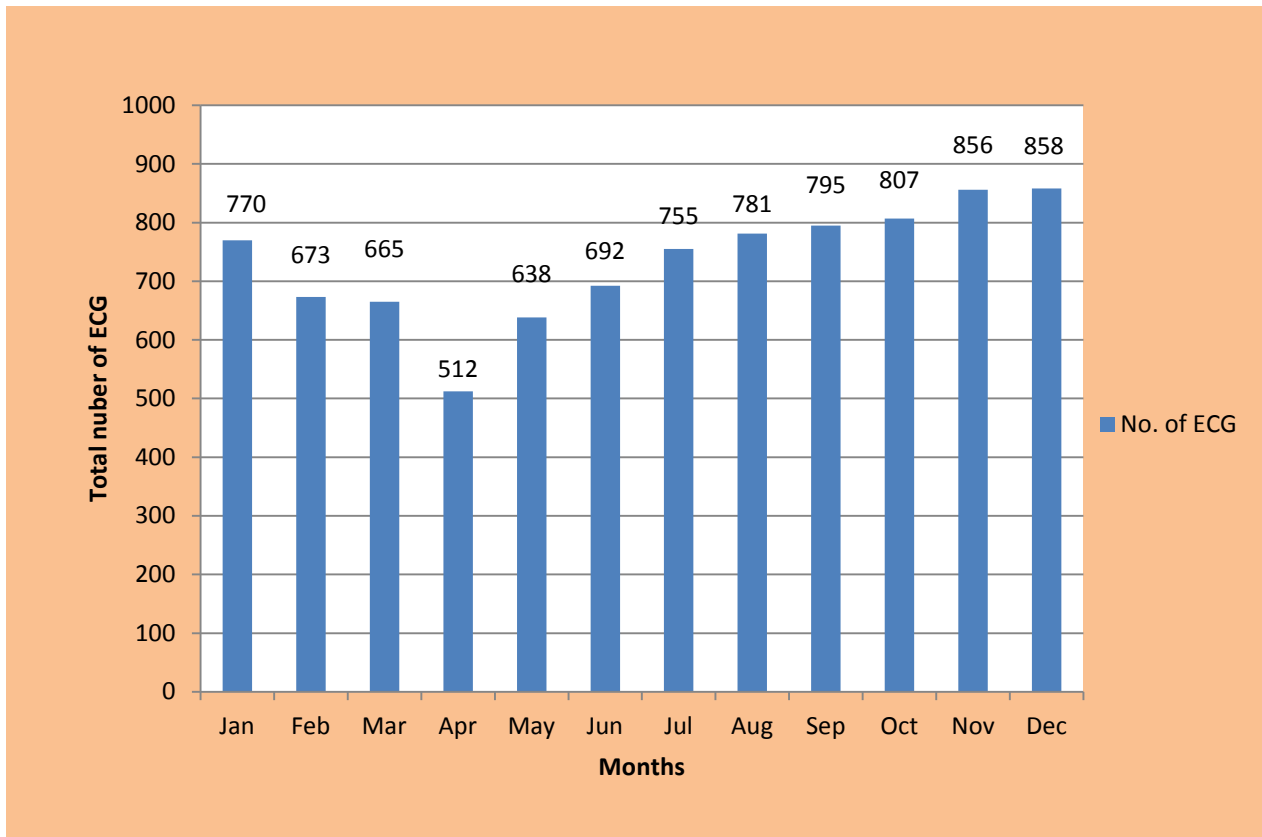
Flow	Class	M/F	Beds	Total No. of patients
1st	11	M	2	46
2nd	11	M/F	2	44
3rd	11	M	4	24
4th	1	M/F	10	405

Clinical Supportive Services

ECG Service

Two Cardiographers attend the duty of in ward and OPD patients.

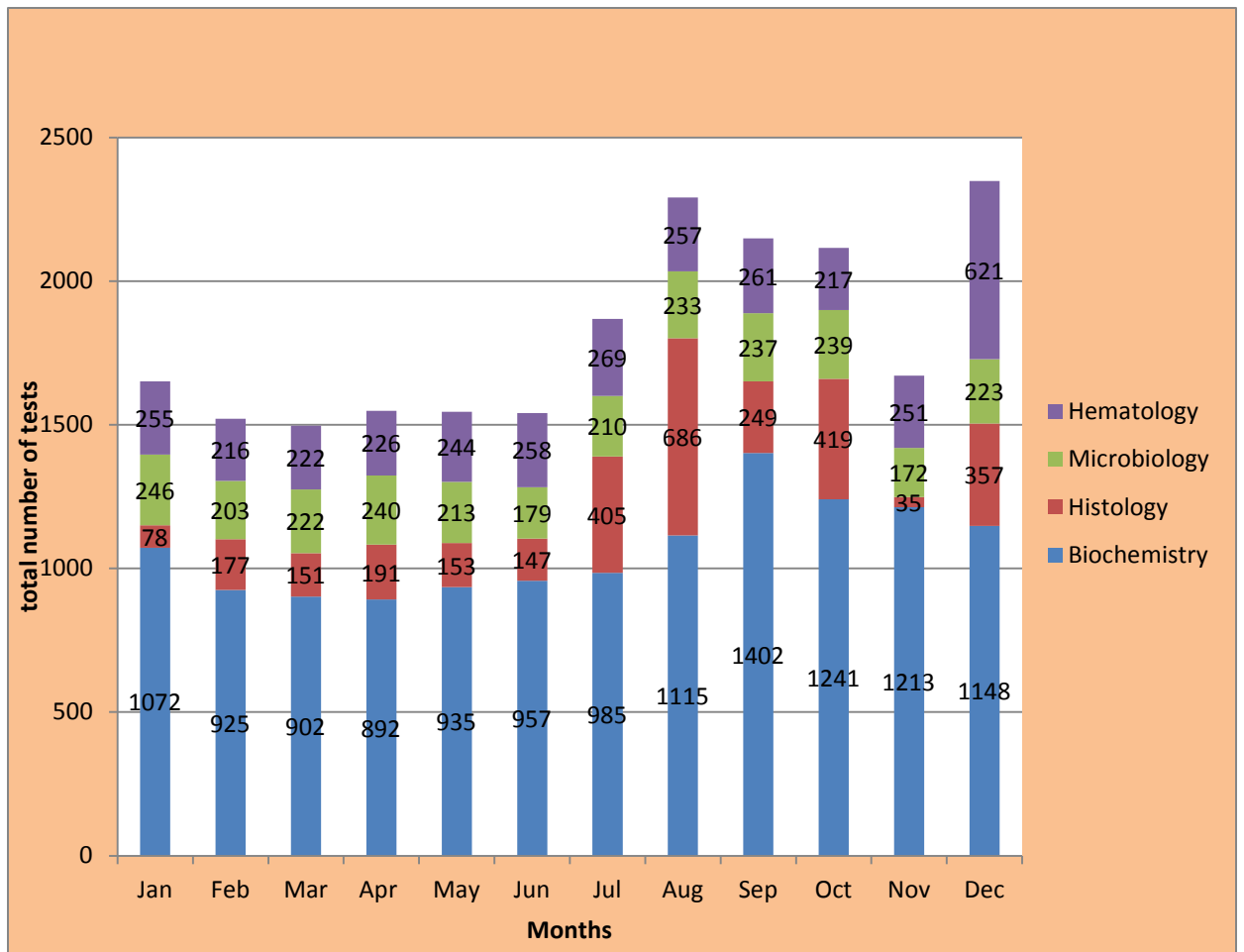
	Month												TOTAL
	Jan	Feb	Marr	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
No. Of ECG	770	673	665	512	638	692	755	781	795	807	856	858	8802



LABORATORY SERVICE

This unit is functioning under the supervision of consultant pathologist.

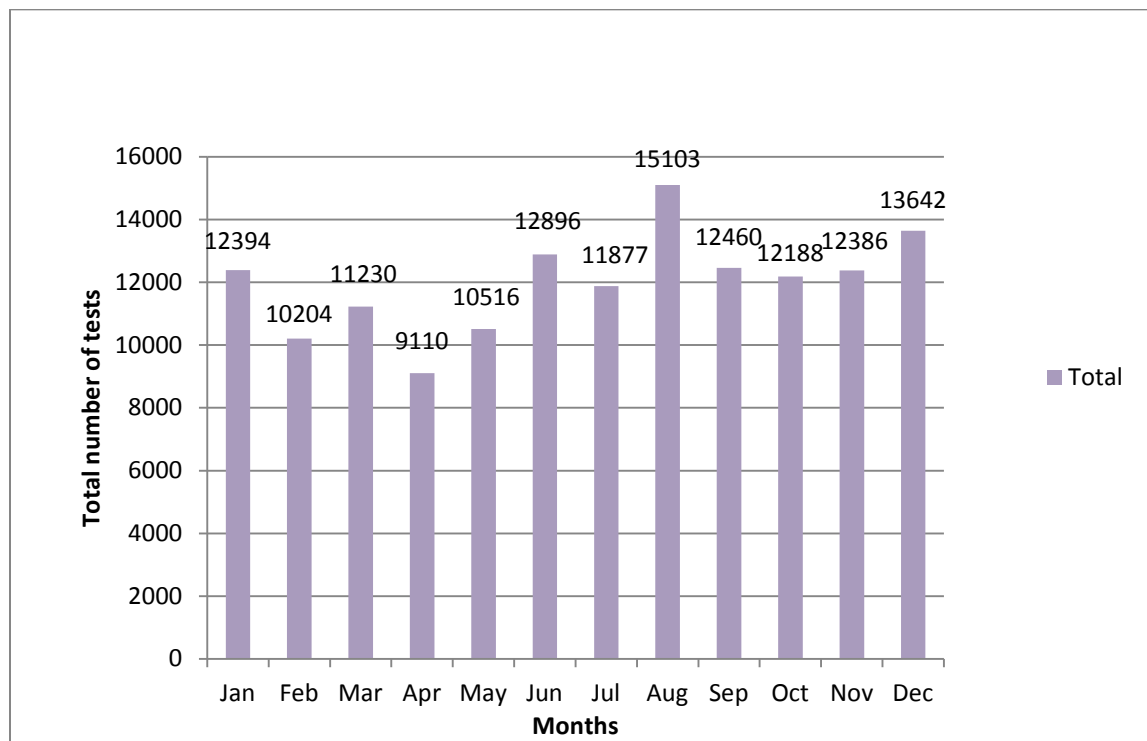
Test	Month												Total
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Biochemistry	1072	925	902	892	935	957	985	1115	1402	1241	1213	1148	12787
Histology	78	177	151	191	153	147	405	686	249	419	35	357	3048
Microbiology	246	203	222	240	213	179	210	233	237	239	172	223	2617
Hematology	255	216	222	226	244	258	269	257	261	217	251	621	3297
Total	1651	1521	1497	1549	1545	1541	1869	2291	2149	2116	2311	2670	22710



OPHTHALMIC TECHNOLOGICAL SERVICES

a) REFRACTION

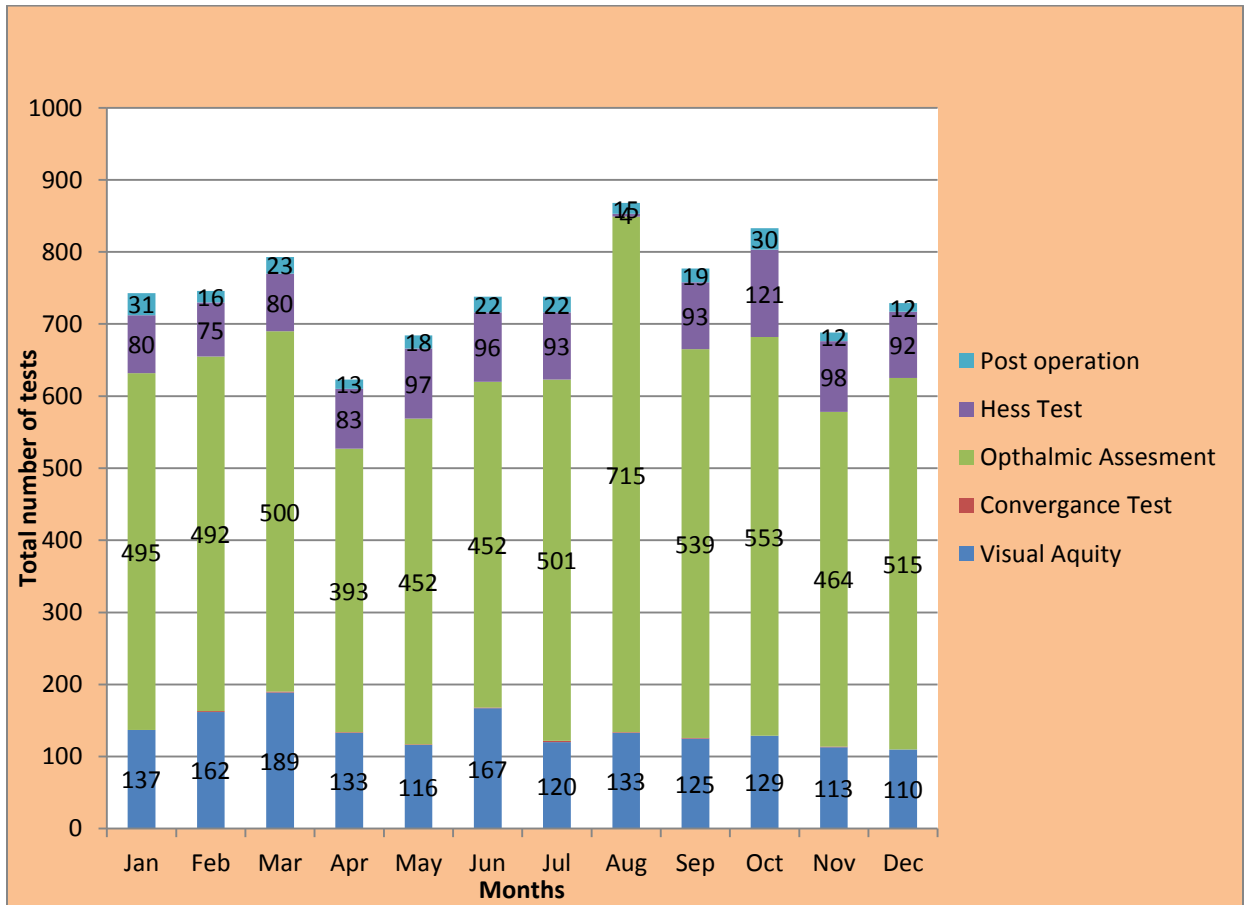
TEST	MONTH												Total
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Refraction	12092	9849	10695	8212	9420	11909	10261	13281	12018	11178	11352	12531	132798
Goldmarns													
H.V.F.	252	305	289	269	293	392	250	386	375	461	483	495	4250
Scanning "A" (Biometry)	-	-	196	279	453	241	466	407	-	462	498	562	3564
F. m. 100 Hue test	10	10	10	10	10	12	8	54	10	10	8	6	158
Ishiharas test	-	-	-	-	-	42	48	10	50	50	45	48	293
Coneal Topography	40	40	40	40	40	-	-	-	7	27	-	-	234
Specular Microscopy	-	-	--	-	-	-	-	-	-	-	-	-	-
"B" Scan	-	-	-	300	300	300	844	965	-	-	-	-	2709
Total	12394	10204	11230	9110	10516	12896	11877	15103	12460	12188	12386	13642	144006



The service is carried out by under the supervision of chief ophthalmic technologist.

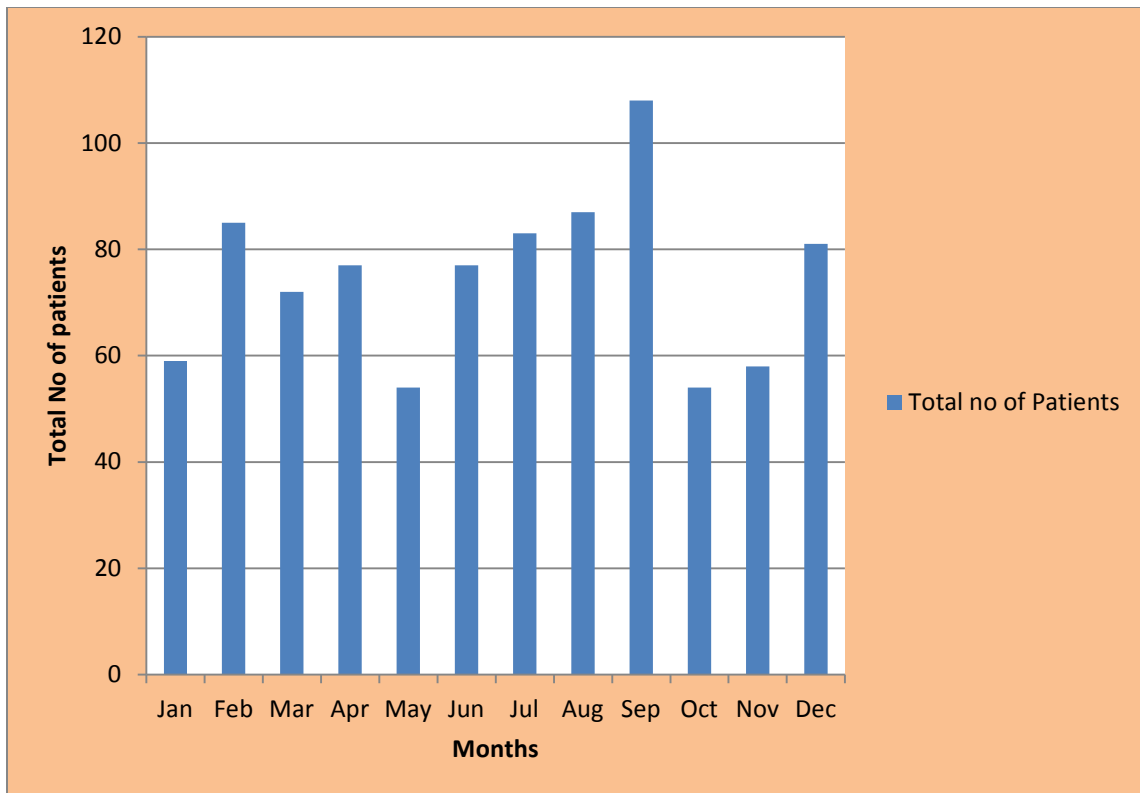
b) ORTHOPTIST CLINICAL SERVICE

TEST	MONTH												TOTAL
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Visual Acuity	137	162	189	133	116	167	120	133	125	129	113	110	1634
Convergence Test		1	1	1	1	1	2	1	1		1		10
Ophthalmic Assessment	495	492	500	393	452	452	501	715	539	553	464	515	6071
Hess Test	80	75	80	83	97	96	93	4	93	121	98	92	1012
Post Operation	31	16	23	13	18	22	22	15	19	30	12	12	233
TOTAL	743	746	793	623	684	738	738	868	777	833	688	729	8960



c) LOW VISION CLINICAL SERVICE

	Month											
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Total no of patients	59	285	72	77	54	77	83	87	108	54	58	81



LASER TREATMENT UNIT

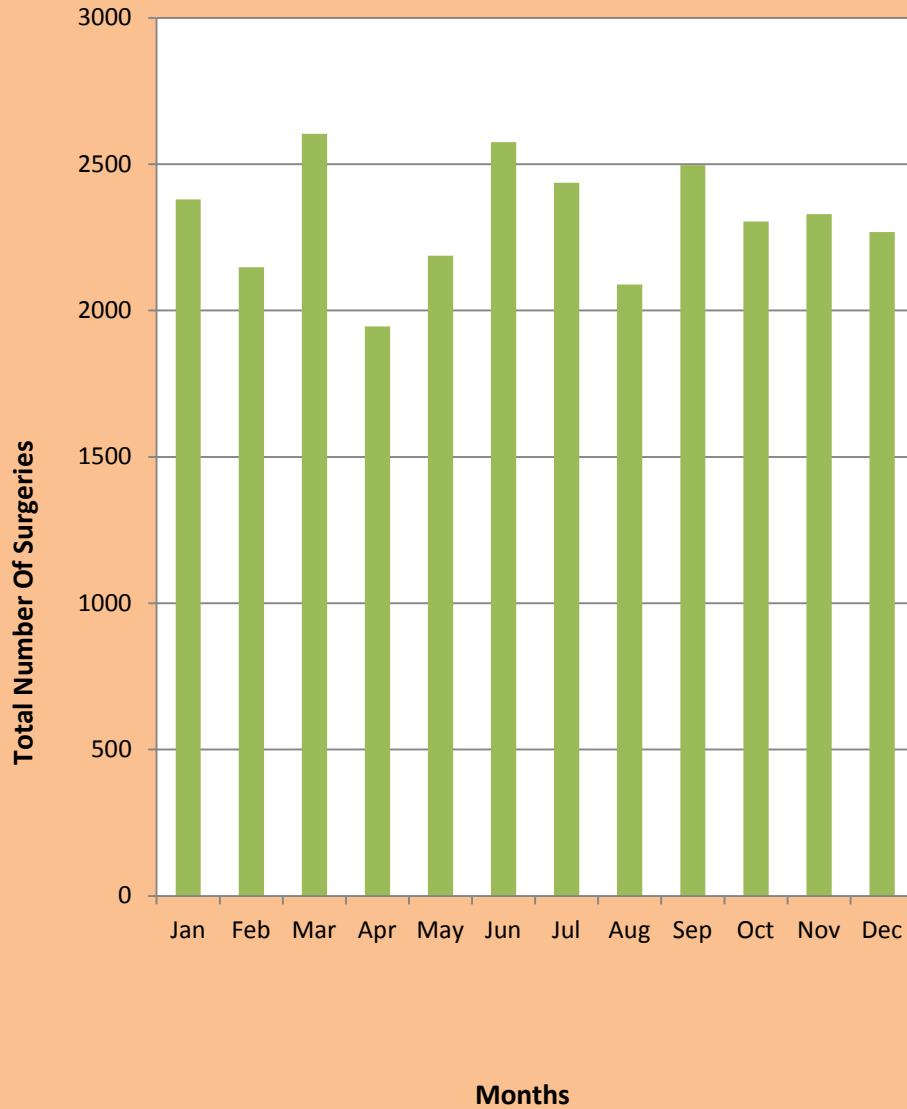
This unit is functioned under the supervision of consultant ophthalmologists.

Test	Month												Total
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	
Fundus Fluorescence Angiography (FFA)		3	66	54	86	116	97	101	85	96	99	99	902
I.C.G. Angiography				2		1			2	1	2	2	10
Treatment													
Pan Retinal Photocoagulation (PRP)	121	97	127	110	189	203	133	169	200	156	167	189	1861
Focal Laser Treatment (FLT)	89	67	60	79	66	93	68	98	95	76	79	60	930
Argon Laser Treatment (ALT)	-	-	-	-	-	-	-	-	-	-	-	-	-
Suturelysis	10	15	49	29	11	27	33	29	43	34	28	47	355
Feeder Vessels Cauterization	5	4	14	7	1	1	9	4	2	5	5	4	61
Capsulotomy (YAG)	89	62	52	53	92	90	55	60	65	60	76	53	807
Peripheral Iridectomy (PI)	23	28	25	24	34	55	38	38	52	29	33	30	409
Vitreolysis	3	8	9	8	9	11	3	11	6	3	3	6	80
Fundus Photograph	-	-	-	-	-	-	15	19	46	25	5	33	143
Optical Coherence Tomography (OCT)	243	-	89	152	151	306	305	361	271	307	191	271	2647
Central Corneal Thickness (CCT)	-	52	410	352	335	350	375	362	350	335	345	365	3631
Endothelial Cell Count (ECC)	365	-	-	-	-	-	-	-	4	2	5	9	385
Total	948	336	901	870	974	1253	1131	1252	1221	1129	1038	1168	12221

HOSPITAL SURGERIES

All the surgeries are performed under the supervision of consultant ophthalmologists.

SURGERY	MONTHS												TOTAL
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
1.Cataract	707	711	725	505	561	754	652	606	703	548	630	550	7652
2. Surgical PI	2	0	1	0	0	1	1	4	3	1	4	1	18
3.TPPV	51	27	54	34	55	54	44	42	37	34	43	31	506
4. Sclera Bulking Pro.	16	5	20	9	11	20	25	11	19	14	21	12	183
5. PKP	26	25	20	17	21	23	24	18	27	32	33	20	286
6. DCR	6	6	2	5	7	3	5	6	8	11	10	6	75
7.Trabeculectomy	33	35	50	36	37	43	44	35	61	50	50	35	509
8. Anterior vitrectomy	35	30	53	26	27	37	43	23	41	48	23	41	427
9. Repair Of Corneal Laceration	29	29	36	33	23	24	30	23	34	18	31	38	348
10. Aspiration Of Lm	15	7	20	24	20	17	28	8	18	16	13	17	203
11. Squint Correction	14	12	19	11	14	16	13	21	20	14	11	17	182
12.Eviseration	5	3	7	4	8	7	6	2	7	3	1	3	56
13. Enucleation	4	1	3	2	7	3	3	3	1	9	4	7	47
14. Orbitotomy	2	3	3	1	3	3	2	1	3	2	0	3	26
15. Ptosis Correction	3	0	1	2	1	1	1	0	2	2	2	0	15
16. Excision Of Biopsy	3	9	10	3	4	5	6	6	10	3	3	6	68
17.Remove Of Foreign Body	62	28	32	37	40	30	22	30	39	29	31	55	435
18. EUA / EUM	115	81	94	86	117	108	113	113	90	100	117	105	1239
19. Removal Of Suture	67	66	57	41	62	76	48	49	85	73	97	84	805
20.Resuturing	14	10	24	8	10	23	21	7	12	10	12	14	165
21. Indirect Laser	3	0	7	5	3	3	8	7	10	13	7	8	74
23. Cryotherapy	1	0	2	0	2	0	0	0	9	11	6	13	44
24. Other Major Surgeries	112	115	176	126	139	159	172	113	121	155	116	115	1619
25. Other Miner Surgeries	269	258	297	243	249	305	283	260	287	276	270	263	3260
Total	1594	1461	1713	1258	1421	1715	1594	1388	1647	1472	1535	1444	18242



Abbreviations

1. OPD - Out Patient Department
2. CCT - Central Corneal Thickness
3. OCT - Optico Coherent Tomography
4. EH - Eye Hospital
5. HEB - Health Education Beauró
6. IDP - Internally Displaced Patients
7. BSS - Balance Sault Solution
8. CB - Dr. Champa Banagala's Unit
9. SP - Dr. Sujatha Pathirage's Unit
10. CF - Dr. Charith Fonseka's Unit
11. MP - Dr. Manel Pasqual's Unit
12. MG - Dr. Mangala Gamage's Unit
13. MK - Dr. Muditha Kulathunga's Unit
14. MM - Dr. Meena Muthukumara's Unit
15. CS - Dr. C.Sebanayagem's Unit
16. RU - Retinal Unit
17. MRA - Medical Record Assistant
18. NHSL - National Hospital Sri Lanka
19. BME - Bio Medical Engineering
20. MSD - Medical Supply Division

