



MALABAR CANCER CENTRE THALASSERY

ANNUAL REPORT 2012-13



MALABAR CANCER CENTRE

(An autonomous centre under Govt. of Kerala)

Moozhikkara (P.O), Kannur district, Kerala, India-670103

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From Director's Desk



In Kerala, it is roughly calculated that around 37000 new cancer patients are detected each year. The incidence of cancer may have an apparent rise due to improving awareness among public, early detection, emergence of many cancer treating facilities in the state. Change in life style is a major contributory factor in the development of this disease. Early detection and properly implemented multidisciplinary approach are key to the success of treatment. Cancer being one of the most curable chronic diseases and cancer conquerors contribute significantly to the family, society and nation, quality of life and approaches to develop less morbid treatment modalities become major thrust areas in cancer research. Quality of care and impetus provided for cure of patient should be a major zone of action for any dedicated tertiary cancer centre.

Malabar Cancer Centre, an autonomous institution under Health and Family welfare department of Government of Kerala, thrives for excellence in the field of early detection, diagnosis and treatment of cancer. The institution is being developed as a state of art cancer centre with equal thrust on clinical care, education and research. Introduction of Fellowship programmes in Head and neck oncology and surgical oncology, BSc Medical Radiological Technology course have created a boon to the academic milieu of the institution. Installation of High end dual energy linear accelerator has enabled the Department of Radiation oncology to be a state of art division on par with any major cancer centre in the country. Regular publication of results and clinical research further emphasise our continuous and relentless focus on quality of care. Various therapeutic, diagnostic and research departments are enriched with state of art equipment.

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Highlights from the year 2012-13

- ⇒ ASWAS: A comprehensive project for control of cancer jointly organized by MCC, District Panchayath and Dept. of Health. Implemented in 22 Panchayaths of Kannur District, including central prison and Aralam farm.
- ⇒ Academic and Research Collaborations with Centre for Materials for Electronics Technology (C-MET) Thrissur, P.S Vaidhyaratam Ayurveda College Kottakkalottakkal, School of Health Sciences Kannur university, Institute of Palliative Medicine Kozhikode.
- ⇒ Rapidarc Intensity Modulated Radiotherapy (IMRT) was started.
- ⇒ Simultaneous Integrated Boost Rapidarc IMRT was introduced.
- ⇒ Organized The Young Radiation Oncologists Conference 2013 on 2nd & 3rd February 2013 in association with AROI.
- ⇒ HDxT 1.5T Signa 16 Channel GE MRI scan was commissioned.
- ⇒ Picture Archival and Communication System (PACS) was commissioned for use across the Hospital.
- ⇒ In hands with Association of Surgeons of India, Kerala Chapter - Conducted Peripheral Meet on February 2013
- ⇒ A full-fledged Microbiology laboratory started functioning.
- ⇒ The Pain-Free Hospital Initiative Project
- ⇒ Hospital Based Cancer Registry Report-2012 Published.
- ⇒ New Website for MCC with the domain www.mcc.kerala.gov.in
- ⇒ Edu@Expert: Delivering lectures using Telemedicine facilities about cancer awareness to Nursing Students and Staff.
- ⇒ Implemented Malayalam Computing Project at MCC in association with Akshya Project Office, Kannur.
- ⇒ Started Energy saving activities: Automatic on-off system for street lights Implemented.

About MCC

Introduction

Malabar Cancer Centre, Thalassery (MCC) is an autonomous institution under Health and Family Welfare Department, Government of Kerala, started with an aim to establish a comprehensive cancer centre, providing the much-required oncology care to the population of Northern region of Kerala and neighbouring parts of Karnataka and Tamilnadu states. The main objective of the centre is not only to provide comprehensive cancer care but also to develop as a Research and Training Centre of international standards. A society named Malabar Cancer Centre Society was registered under Societies Registration Act XXI of 1860 with the above aims and clinical work in MCC started from March 2001 onwards. At present MCC has around 110 in-patient bed strength which is expected to be increased to 220 in near future. The control and management of the Society are vested in the Governing Body consisting of 23 members with the Hon'ble Chief Minister of Kerala as the Chairman. The routine activities and functions of the Centre are supervised by the Executive Committee, with the Secretary, Department of Health and Family Welfare, Government of Kerala being the Chairperson of the Committee. The mem-

bers in the Governing Body and Executive Committee are functioning by virtue of their official positions.

MCC is providing a full spectrum of oncological care as an autonomous not-for-profit institution funded by the State Government and other sources. Patients are categorized according to their economic status, and accordingly it is expected that 20% of patients will be provided free services and about 60% on concessional rates. It has been undertaken that no patients will be denied treatment for financial reasons. During the last twelve years period, a total of 14,864 new cancer patients had registered for various modalities of cancer treatment and about 1,79,609 patient visits made during this period. The main modalities of treatment offered by MCC to patients, presently, include radiotherapy, chemotherapy, onco-surgery and palliative care. The Centre also carries out Community Oncology activities including cancer awareness and early detection programmes. With affiliation to Kannur University MCC has started BSc. (MRT) course from 2011 - 2012 onwards.



Mission & Vision

Mission :

Non-compromising Professionalism in Quality of Treatment, Research and Education.

Vision :

The development of an exponentially progressing high quality institution with equal trust on clinical care, oncology related education and multifaceted research.

Emblem :



Quality Policies

High quality of treatment is always aimed at MCC. Quality standards at MCC can be considered under three headings

- ✦ Quality of Clinical services
- ✦ Quality of Clinical Laboratory and diagnostic services
- ✦ Quality of Education and Research

Quality of Clinical services :

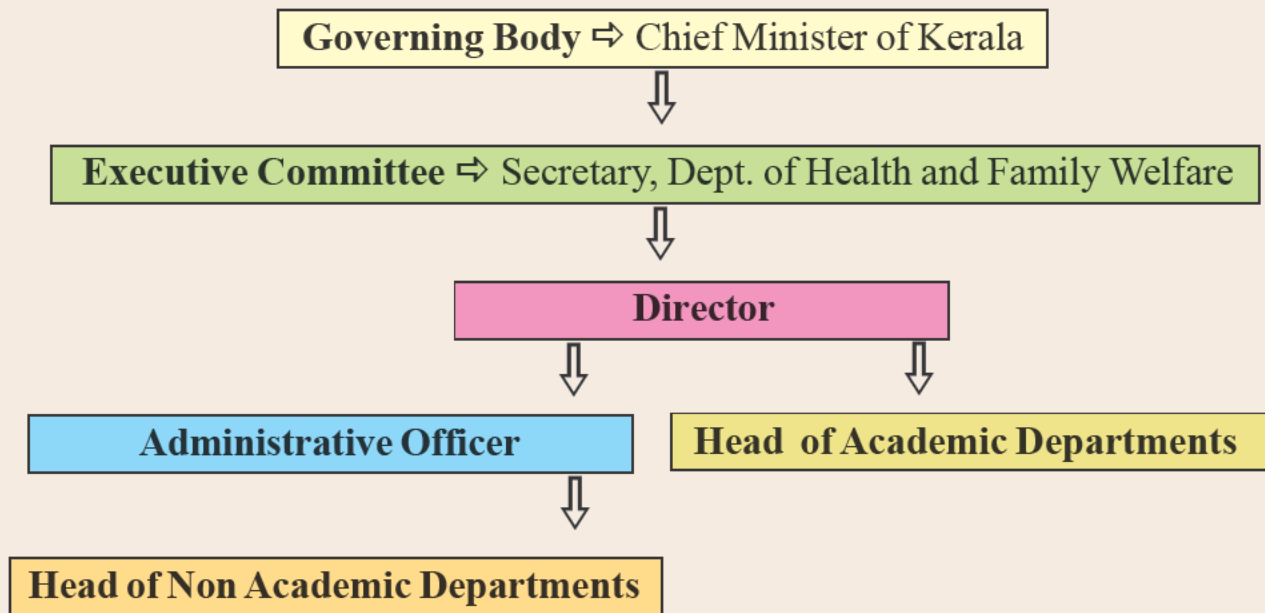
Treatment at MCC is based on internationally accepted protocols in line with Indian socio-economic and physical peculiarities. Treatment protocols are being regularly updated by treating physicians based on advances made in the field of oncology. External expert's opinions are obtained in cases of clinical dilemma. All patients are discussed in Multi Speciality Board comprising of Director himself and all treating physicians in the departments of Surgical oncology, Medical oncology and clinical hematology and Radiation oncology apart from onco-pathologist and radiologist. MSB is conducted at 4.15 p.m. from Tuesdays to Fridays and all patients after completion of their work up are discussed and if needed patient will be seen together by the entire team. Treatment decision is laid down based on protocol prevailing and if needed customization. It is done after detailed discussion. Any clinically difficult situations are brought to MSB for discussion and literature review and decisions are taken accordingly. Second opinions on pathology slides, clinical dilemma are taken from major centres in India like Tata Memorial Hospital, Mumbai, Cancer Institute (W.I.A), Chennai, Regional Cancer Centre, Thiruvananthapuram, Christian Medical College, Vellore, NIMHANS, Bangalore etc. All biopsy slides reported outside are always reviewed at MCC except in cases of those reported from RCC, Govt. Medical colleges and other renowned institutions (in specific situations, based on clinical findings, slides from these institutions are also obtained)

Quality of Clinical Laboratory and diagnostic services:

The quality control tests are done with external agency - Christian Medical College, Vellore

Quality of Education and Research : MCC has entered into collaboration with major academic and research organizations in the state for academic and research activities. It is affiliated to Kannur University and KUHS.

Organization Structure



GB, EC and Other committees

The control and management of the Society are vested in the Governing Body consisting of 23 members with the Hon'ble Chief Minister of Kerala as the Chairman. The routine activities and functions of the Centre are supervised by the Executive Committee, with the Secretary, Department of Health and Family Welfare, Government of Kerala being the Chairman of the Committee. The members in the Governing Body and Executive Committee are functioning by virtue of their official positions.

Governing Body (GB): The Governing Body of the Society consists of 23 members.

1	Chairman	Chief Minister of Kerala
2	Vice-Chairman	Minister for Health & FW, Kerala
3	Alternate Vice-Chairman	Minister for Electricity, Kerala
4	Member	Secretary, Department of Finance, Kerala
5	Member	Secretary, Department of Power, Kerala
6	Member	District Medical Officer, Kannur
7	Member	Secretary, Department of Health & FW, Kerala
8	Member	An eminent Medical Scientist
9	Member	Secretary, Department of Science, Technology & Environment
10	Member	One nominee of the Ministry of Health, Government of India
11	Member	Principal, Medical College, Kozhikode
12	Member	Secretary- Planning & Economic Affairs Department, Kerala
13	Member	Director- Rajiv Gandhi Centre for Bio technology, Trivandrum
14	Member	Director of Medical Education, Directorate of Medical Education, Trivandrum
15	Member & Secretary to GB	Director, Malabar Cancer Centre, Thalassery
16	Member	M.L.A. of the Thalassery constituency
17	Member	President, District Panchayat, Kannur District

18	Member	Chairman, Thalassery Municipality, Thalassery
19	Member	A public man from North Malabar region (to be nominated by Government of Kerala)
20	Member	One Head of the department nominated from Malabar Cancer centre, Thalassery by the Government.
21	Member	One nominee of the Charitable Society established for rehabilitation and financial assistance for poor cancer patients
22	Member	Principal / Chief Executive Officer of Medical College, Pariyaram
23	Member	Director, Regional Cancer Centre, Trivandrum

Executive Committee (EC): The Executive Committee shall be composed of ;

1.	Secretary, Department of Health & Family Welfare, Government of Kerala	Chairman
2	Secretary, Department of Power, Government of Kerala	Member
3	Secretary, Department of Finance, Government of Kerala	Member
4	Chairman, Thalassery Municipality	Member
5	A public man from North Malabar to be nominated by Government of Kerala	Member
6	Secretary, Department of Planning, Government of Kerala	Member
7	Director, Regional Cancer Centre, Trivandrum	Member
8	The Director, Malabar Cancer Centre, Thalassery	Member/Convener

Other Committees :

1	Administrative Council
2	Academic Council
3	Library Committee
4	Purchase Committee
5	HOD Committee
6	Canteen Committee
7	Waste management Committee
8	Institutional Review Board
	i) Scientific Review Committee
	ii) Institutional Ethics Committee
9	Data Monitoring and Safety Committee
10	Building Committee

Academic and Research Collaborations

We have established research collaboration with the following institutes in the field of Cancer, Biomechanical and Medical Research.

- 1) Centre for Materials for Electronics Technology (C-MET) Thrissur. (Research Collaboration)**
- 2) P.S Vaidhyaratam Ayurveda College, Kottakkal. (Research Collaboration)**
- 3) School of Health Sciences, Kannur university. (Research and Academic Collaboration)**
- 4) Institute of Palliative Medicine, Kozhikode. (Academic and Training Collaboration)**

We plan to enhance our research activities in the area of Biomechanical Engineering, Health Information Technology and Medical Informatics, etc. in the coming days.

Departments and Activities

We have mainly the following Departments and Subdivisions.

Sl.No.	Department	Sub Divisions
1	Department of Radiation Oncology & Diagnostic Radiology	Medical Physics Division
		Imageology Division
2	Department of Surgical Oncology	Surgical Oncology Division
		Physiotherapy Division
		Dietetics Division
		Speech and Swallow Therapy Division
3	Department of Medical Oncology & Clinical Hematology	Pediatric Oncology Division
4	Department of Onco-Anesthesiology	
5	Department of Clinical Laboratory Services and Translational Research	Transfusion Medicine Division
		Onco Pathology Division
		Molecular Oncology Division
		Microbiology Division
		Biochemistry Division
6	Department of Cancer Palliative Medicine	
7	Department of Community Oncology	Tobacco Cessation Clinic
8	Department of Cancer Registry and Epidemiology	Cancer Registry Division
		Medical Records Division
		Clinical Research and Biostatistics Division
		Health Information
		Technology Division
9	Department of Oncology-Nursing	
10	Department of Dental Medicine Rehabilitation	
11	Department of Clinical Administration and Public Relations	
12	Department of Engineering and Maintenance	
13	General Administration Department	Administration Division
		Accounts Division
		Purchase Division
		Store Division

Department of Radiation Oncology & Diagnostic Radiology

Introduction

The Departments of Radiation Oncology and Diagnostic Radiology are committed to achieving excellence in the treatment and diagnosis of cancer. Radiation Oncology saw the inauguration of the dual energy linear accelerator towards the end of the year 2011. March 2012 saw the first patient being treated with Rapidarc Intensity Modulated Radiotherapy. Over the next three months significant experience was gained in Rapidarc IMRT planning and the technique of Rapidarc Simultaneous Integrated Boost was fine tuned for head neck cancers. Presently



about 65 - 70% of the patients on Linear accelerator are treated with Rapidarc. The statistics related to the treatment as well as the early results of treatment in selected sites were presented in various national conferences. In February 2013 the department also organized the first national conference of the Young Radiation Oncologists Wing (YROW) of the Association of Radiation Oncologists of India (AROI). Professor Ramesh Bilimagga also inaugurated the Young Radiation Oncologist Wing of the AROI in the same conference.

In addition to delivering radiation treatment the doctors of the department also treat patients with systemic chemotherapy for solid malignancies. Various solid tumors have been treated with various forms of chemotherapy over the last year. With increasing burden of patients the department in association with the department of nursing and cancer palliative medicine regular training has been conducted for health services nurses from various medical colleges. The aim is to ensure that patients presenting from far off places can receive palliative chemotherapy in local centres in the near future after the doctors and nurses have been trained. In order to facilitate the same the department has prepared information sheets for common palliative chemotherapy regimens. It is expected that over the next few months more patients will benefit from this as they don't have to travel long distances to Malabar Cancer Center to get palliative chemotherapy. In addition the burden on the day chemotherapy ward of the hospital will be also reduced.

The Department of diagnostic radiology has also seen a large increase in the number of diagnostic imaging performed. The new 1.5 Tesla MRI was installed and started operating since January. With the induction of a one full-time diagnostic radiologist the number of cases undergoing imaging for various indications as well intervention in the form of guided biopsies has increased substantially. This has also reduced the burden on the surgical oncology department. The Picture Archival and Communication System (PACS) was commissioned during this period and has ensured contin-



ued availability of high quality diagnostic imaging for all patients imaged in the hospital without relying on films. It is expected that the system will be integrated with Hospital Information System (HIS) once it is commissioned in the recent future.

Over the next year we plan to commission the 4D CT Simulator, MRI compatible Image guided Brachytherapy system and Radiobiology Laboratory (in conjunction with the molecular oncology laboratory). In addition we are planning to acquire a new Linear Accelerator for catering to the increased load of patients in the hospital. Tenders

have been called for supply of a Thermoluminescent dosimetry system, MRI compatible Intracavitary Brachytherapy applicator, Martinez Universal Perineal Template (MUPIT) Interstitial Brachytherapy system and an anthropomorphic phantom to set-up the Radiobiology Laboratory. The ongoing research projects, publications and other academic activities are detailed in the report below. The focus of the departments will remain on providing affordable international standard evidence and guideline based management (diagnostic and therapeutic) for all patients seen.



Activities & Achievements

Department of Radiation Oncology

1. The first Rapidarc Intensity Modulated Radiotherapy (IMRT) was started in March 2012. Over the next 4 -5 months Rapidarc became the preferred method of delivering Intensity Modulated Radiotherapy in the department.
2. In addition to routine Rapidarc IMRT in various cancer sites, the technique for Simultaneous Integrated Boost IMRT using Rapidarc was fine tuned after May 2012. Simultaneous Integrated Boost Rapidarc IMRT allows delivery of various doses to different sites in the same treatment sitting with the dose tailored according to the burden of the disease. This sophisticated mode of treatment delivery is particularly useful in head and neck cancers as it allows the entire treatment to be planned in a single setting saving significant physics resources.
3. Presently approximately 60% -70% of the patients are treated with Rapidarc IMRT. Majority of the patients are in Category A and B. To our knowledge is this makes Malabar Cancer Center one of the unique government center where a large proportion of patients get the benefit of the latest technology in their treatment.
4. The department has initiated the Stereotactic Body Radiotherapy Programme incorporating image guidance. Till date 3 patients have completed their treatments with minimal or no morbidity. While the initial two patients were treated with fixed field IMRT, Rapidarc IMRT was used for the treatment of the third patient. The advantage of Rapidarc IMRT in delivering SBRT is the short time required that allows better management of motion. Future integration with Respiratory Motion Management is planned after commissioning of the 4D CT simulator in the near future. With the integration of RPM more sites like Liver, Prostate etc can be taken up for SBRT treatments on research protocols.
5. The department has proposed to set up a radiobiology laboratory in conjunction with the molecular oncology laboratory. As a part of this purchase of an anthropomorphic phantom, bioanalyzer platform, thermoluminescent dosimetry system for in vivo dosimetry and software package for mathematical modeling are planned. In addition to initiate image based brachytherapy we are planning to acquire an MRI compatible intracavitary interstitial brachytherapy applicator system along with the latest treatment planning system.
6. The department organized the Young Radiation Oncologists Conference 2013 between 2nd - 3rd February 2013 in association with the Association of Radiation Oncologists of India (AROI). This conference saw the inauguration of the Young Radiation Oncologists Wing of the AROI. Over 40 papers were presented by young radiation oncologists from different parts of the country along with a quiz competition.
7. The brachytherapy OT was remodeled to ensure that it could be used as a complete sterile OT. A separate 3 bed patient recovery is planned attached to the OT. Once the renovation work is completed it is expected that the brachytherapy OT will start functioning as a full fledged OT to ensure minor OT procedures can be conducted safely in the complex. Of course the primary function of the OT as a brachytherapy OT will remain intact.
8. The department work was represented at various national conferences during this period the details of which are given below.



Department of Diagnostic Radiology

1. The department saw the inauguration of the 1.5 Tesla GE MRI scanner in January 2013. Since that day more than 200 patients have undergone diagnostic imaging with MRI for various oncological indications. In addition MRI images are being used for more precise Radiotherapy planning specially in case of head neck cancers. Diffusion Weighted Imaging using MRI is being used to get better information regarding disease staging especially in patients where patients may be having disseminated disease. Preliminary experience has shown that this form of imaging technology has good sensitivity for detecting distant metastasis and may be used in lieu of bone scans in selected patients.
2. The latest Hologic Digital Mammography system along with digital tomosynthesis has been acquired. This is expected to be installed in the coming months and once operational will allow better screening of breast cancers with reduced dose and better image clarity.
3. The department has placed greater emphasis on intervention radiology with larger number of interventions being performed specially for diagnostic purposes. It is expected that with the induction of RFA (Radio frequency Ablation) and HIFU (High Frequency Ultrasound) more interventions will be performed for therapeutic indications.
4. The Picture Archival and Communication System (PACS) was commissioned for use across the hospital. The terminals for retrieving the images on PACS is expected to be in place over the next few months. Once operational fully the PACS will allow the treating clinicians and nursing staff to pull up the diagnostic radiology films without having to rely on films which may not be available at all times. The PACS will be integrated fully with the Hospital Information System (HIS) in the near future after its deployment.



Statistics

The following are the statistics for the Department in the year 2012.

1. Patients treated with Radiotherapy : 1528

1. Treatment on Cobalt	:	912
1. Number of fields treated	:	17249
2. Palliative Treatments	:	600
3. Radical Treatments	:	312
4. Compensator Prepared	:	24

2. Treatment on Linear Accelerator : 529

1. Number of fields treated	:	41382
2. Number of Rapidarc	:	272
3. Number of IMRT	:	61
4. Number of 3DCRT	:	162
5. Number of Electrons	:	30
6. Number of SBRT	:	2

3. Treatment with HDR brachytherapy : 87

1. Total Sessions treated	:	199
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4. Department of Radiology :

1. X-rays taken	:	4286
2. Mammograms taken	:	884
3. Ultrasound Examinations	:	527
4. RT planning CT scans	:	598
5. CT Scans taken	:	2607

Publications

The following is the list of publications from the department between the year 2012 - 2013. It is to be noted that clinical data for most advanced radiation treatment techniques are still immature as the treatment was started only in 2012. However with the large number of patients being treated it is estimated that the several major publications will be made in various field in the coming years.

1. Brachytherapy in modern oncology practice - A Survey based assessment of knowledge levels among Oncology Professionals and need for comprehensive oncology education. Dr Sujith Kumar M. Accepted in Indian Journal of Cancer
2. Comparison of intracavitary brachytherapy and stereotactic body radiotherapy dose distribution for cervical cancer: In regard to Cengiz et al. Dr Santam Chakraborty. Accepted in Brachytherapy.
3. Palliative Chemotherapy with fortnightly Methotrexate in predominantly elderly patients with Head Neck Cancers : Institutional Experience. Dr Santam Chakraborty. On Peer review at Asia Pacific Journal of Clinical Oncology.
4. RAPID-SIB: Simultaneous integrated boost IMRT using RapidArc in locally advanced head neck cancers: Initial technical and clinical experience. Santam Chakraborty, M. Geetha, E. P. Sameer, C. Suja, K. M. Sujith, Milind Kumar. Journal of Cancer Research and Therapeutics. Supp 3. Vol 8 S138.
5. Initial institutional experience of volumetric-modulated arc radiotherapy using rapid arc for treatment of pelvic malignancies: Clinical and dosimetric results. M. Sujith Kumar, Santam Chakraborty, Milind

Kumar, M. Geetha, C. Suja, B. Sateeshan. Journal of Cancer Research and Therapeutics. Supp 3. Vol 8 S135.

6. Geriatric radiation oncology practice in a tertiary care center in India: Cure sometimes, comfort always. M. Sujith Kumar*, Santam Chakraborty, M. Geetha, E. P. Greeshma, Milind Kumar, B. Sateeshan. Journal of Cancer Research and Therapeutics. Supp 3. Vol 8 S177.
7. Prevalence of fatigue in patients undergoing cancer chemotherapy: A cross-sectional survey. M. Geetha*, Santam Chakraborty*, M. S. Biji, N. R. Sindhu, K. M. Sujith, Milind Kumar. Journal of Cancer Research and Therapeutics. Supp 3. Vol 8 S177.

Conferences, Seminars, Workshops & Presentations

Conferences and Invited Talks: The department conducted its first national conference in February 2013 at Thalassery. In addition the faculty of the department were invited as faculty and panellists in several places.

1. The department organized the Young Radiation Oncologists conference 2013 between 2nd and 3rd February 2013. The conference saw the inauguration of the Young Radiation Oncologist Wing (YROW) of the Association of Radiation Oncologists of India (AROI) by Professor Ramesh Bilimagga who is also the current president of the association. Dr Siddharth Laskar was appointed as the President of the AROI and Dr Sridhar PS was appointed as the convener. The conference saw participation from over 70 delegates from all across the nation as well as from

the SAARC countries. Institutes like All India Institute of Medical Sciences (AIIMS), Post Graduate Institute of Medical Education and Research (PGIMER), Tata Memorial Hospital (TMH), Cancer Institute Adayar, JIPMER, CMC Vellore, Regional Cancer Center Trivandrum participated in the conference through their students and teachers. Over 40 scientific presentations were presented in the conference across 11 scientific sessions ranging from management of different forms of cancer to practical aspects of running the department. In addition a radiation oncology quiz competition was organized. The idea and organization of the conference was well appreciated. Another important idea that was discussed was the provision of a DM in Radiation Oncology. It was felt by all office bearers of AROI and the present delegates that provision of a DM Radiation Oncology course would go miles towards attracting and retaining better talent in the field. In addition it would be of help in future when promotions are considered and MD Radiation Therapy candidates are competing against DM Medical Oncology, MCh Surgical Oncol-

ogy and other super-specialists in terms of academic equivalence. The YROW of AROI can provide significant impetus towards making this super-specialization a reality in the future with the cooperation of AROI. The YROW also decided to conduct the YROC as an annual conference and the next conference is proposed to be conducted at Vishakapatnam.

2. An invited talk was delivered at Kannur Branch on Indian Medical Association (IMA) on 13th December 2013 by Dr Santam Chakraborty. This talk on the Latest Advances in Radiation Oncology was directed to non oncologist medical professionals and highlighted the advances in the field over the past two or three decades. The present level of technology available to deliver high precision radiotherapy was discussed and the availability of such advanced technology in Malabar Cancer Center was highlighted. The discussion after the talk focussed on cost and accessibility of such technology to the members of the public. Members of the IMA appreciated the service that Malabar Cancer Center was do-



ing by making such high technology treatment available to the poorest sections of the population.

3. Another invited talk was given on the basics of Radiation Oncology by Dr Milind Kumar in the IMA hall, Thalassery. This talk detailed the role and overall importance of radiation oncology in the treatment of cancer patients. The talk also highlighted the advanced radiation oncology facilities available at the centre for the medical professionals in the locality. The importance of timely referral of the patients in ensuring the best outcome was highlighted. The talk was well received by the medical fraternity who appreciated the hard work done by the doctors of the hospital in giving the benefit of the latest treatment technology to the people in the locality.
4. Dr Santam Chakraborty was one of the invited faculty as the panelist for the session titled Radiation Therapy in Head Neck Cancers where the topic for panel discussion was on the present day role and application of advanced radiotherapy techniques in head neck cancers in the IFHNOS 2012

World Tour & 12th National Conference of the FHNO organized by the Gujrat Society of Head Neck Oncology.

5. Dr Santam Chakraborty was also one of the invited faculty for the panel judging the candidates for the Neil Joseph Fellowship in Annual Conference of the Association of Radiation Oncologists of India (AROI) organized in Kolkata 2012.
6. A research proposal for evaluating the efficacy of concurrent temozolamide with palliative whole brain radiotherapy in patients with metastatic disease was nominated for the Medical Research Grant of the UAE Cancer Congress in 2012 worth US \$5000. This proposal titled "Prospective randomized study of concurrent temazolamide and whole brain radiotherapy in patients with brain metastases." was written by Dr. Sameer E.P.

Conference Presentations: Several faculty members of the department presented scientific papers and posters in various national and international conferences. A tabulation of the same is presented below.

Title & First Author	Conference	City
Awareness regarding basics of brachytherapy - Radiotherapy Using Rapid Arc For Carcinoma Rectum: Dosimetric Results And Clinical Feasibility. Dr Sujith Kumar M	National Conference of the Indian Brachytherapy Society 2012	Mysore
Initial Experience with Rapidarc Intensity Modulated Radiotherapy at Malabar Cancer Centre - Is more intensified treatment feasible? Dr Santam Chakraborty	IFHNOS 2012 World Tour & 12th National Conference of the FHNO	Ahmedabad
Alterations in gene expression profile during chemoradiation of cervix and comparison with recurrent tumors in locally advanced carcinoma cervix. Dr Santam Chakraborty	International Conference in Radiation Biology	Mumbai
Prevalence of Fatigue in patients undergoing cancer chemotherapy: A cross sectional survey. Dr Geetha M	International Conference in Radiation Biology	Mumbai
RAPID-SIB: Simultaneous Integrated Boost IMRT Using Rapidarc In Locally Advanced Head Neck Cancers Initial Technical And Clinical Experience. Dr Santam Chakraborty	International Conference in Radiation Biology	Kolkata
What is new in Radiation Oncology. Dr Santam Chakraborty	Peripheral Meet of Association of Surgeons of Kerala in association with Malabar Cancer Center	Wayanad
A Patient Specific Quality Assurance Study On Absolute Dose Verification Using Ionization Chambers Of Different Volumes In Rapidarc Treatments. Dr Syam Kumar	Young Radiation Oncologists Conference 2013	Thalassery
Commissioning And Early Experience With A High-Energy Linear Accelerator With Advanced Delivery And Imaging Facilities. Ms Suja C	Young Radiation Oncologists Conference 2013	Thalassery
Commisioning Of Electronic Portal Dosimetry In Varian Clinac. Mrs Reshmi K Bharathan	Young Radiation Oncologists Conference 2013	Thalassery
Experience In Patient Specific Quality Assurance Of IMRT And Rapidarc Plans. Mrs Silpa Ajaikumar	Young Radiation Oncologists Conference 2013	Thalassery

Title & First Author	Conference	City
Treatment Of Esophageal, GE Junction And Stomach Cancers With Imrt/Rapid Arc An Initial Experience. Dr Geetha M	Young Radiation Oncologists Conference 2013	Thalassery
Institutional Experience Of Volumetric Modulated Arc Radiotherapy Using Rapid Arc For Carcinoma Rectum: Dosimetric Results And Clinical Feasibility. Dr Sujith Kumar M	Young Radiation Oncologists Conference 2013	Thalassery
My Experience In A Private Centre After Leaving Government Sector. Dr Milind Kumar	Young Radiation Oncologists Conference 2013	Thalassery
Intensity Modulated Radiotherapy And Rapidarc In The Treatment Of Intracranial Neoplasms - An Institutional Experience. Dr Sameer EP	Young Radiation Oncologists Conference 2013	Thalassery
Comparison of Concurrent Chemoradiation to Accelerated Hyperfractionated Radiotherapy in Locally Advanced Squamous Cell Carcinomas of Head Neck. Dr Greeshma KE	Young Radiation Oncologists Conference 2013	Thalassery
3. Image Guided Adaptive Radiotherapy in Head and Neck Cancer: Evidence from a prospective clinical trial. Dr Sujith KM	Young Radiation Oncologists Conference 2013	Thalassery
Optimization strategies for midline and peripheral tumors for IMRT and Rapidarc : A Phantom Study. Dr Syam Kumar	American Association of Physicists in Medicine Spring Clinical Meet 2013	Arizona
Optimization of dose distributions for different vaginal cylinders of HDR Brachytherapy. Dr Syam Kumar	American Association of Physicists in Medicine Spring Clinical Meet 2013	Arizona
Standardization of Gamma Analysis for the evaluation of pretreatment quality assurance of Rapidarc Plans using 2D Array combined with Octavius Phantom. Dr Syam Kumar	American Association of Physicists in Medicine Annual Meeting 2013	Indianapolis

In addition to the above the department faculties were also a part of several other presentations and posters presented from other departments of the hospital in various conferences. Some of the notable ones are noted below.

Title & First Author	Conference	City
Retrospective Analysis of Outcomes in Geriatric Patients with Squamous Cell Carcinoma of Head & Neck Cancer. Dr Dinesh	IFHNOS 2012 World Tour & 12th National Conference of the FHNO	Ahmedabad
Efficacy of a palliative fortnightly methotrexate regime in a predominantly elderly population with recurrent or residual oral cavity and oro-pharyngeal cancers. Dr Biji MS	National Conference of the Indian Association of Palliative Care (IAPC) 2012	Bangalore
Fatigue and its impact on quality of life: A Cross sectional survey in patients undergoing palliative chemotherapy in Malabar Cancer Centre. Mrs Sindhu NR	National Conference of the Indian Association of Palliative Care (IAPC) 2012	Bangalore
xperience Of Breast Conservation Therapy At A Tertiary Cancer Center In Rural South India - The Techniques And Early Oncological Outcome. Dr Nizamudden P	Young Radiation Oncologists Conference 2013	Thalassery
Clinicopathological Correlation Of Early Recurrences From Oral Squamous Cell Carcinoma After Surgery Followed By Adjuvant Therapy. Dr Sajith Babu	Young Radiation Oncologists Conference 2013	Thalassery

Awards

1. Dr Sameer EP send a research proposal "Prospective randomized study of concurrent temazolamide and whole brain radiotherapy in patients with brain metastases." to the UAE Cancer Congress 2012. The same was nominated for a \$5000 Research Grant.
2. Dr Santam Chakraborty got the Best Oral Presentation award at the AROICON 2012 held at Kolkata for his presentation titled "RAPID-SIB: Simultaneous Integrated Boost IMRT Using Rapidarc In Locally Advanced Head Neck Cancers Initial Technical And Clinical Experience."
3. Dr Sujith KM got the 1st prize for the Best Thesis competition for her thesis titled "Image Guided Adaptive Radiotherapy in Head and Neck Cancer: Evidence from a prospective clinical trial" held at Young Radiation Oncologists Conference 2013, Thalassery.
4. Dr Greeshma KE got the 3rd prize for the Best Thesis competition for her Thesis titled "Comparison of Concurrent Chemoradiation to Accelerated Hyperfractionated Radiotherapy in Locally Advanced Squamous Cell Carcinomas of Head Neck. Dr Greeshma KE" held at Young Radiation Oncologists Conference 2013, Thalassery.
5. Dr Syam Kumar received his PhD in Radiation Physics from Anna University Chennai.
6. Dr Syam Kumar received the Best Presentation Award for his presentation titled "A Patient Specific Quality Assurance Study On Absolute Dose Verification Using Ionization Chambers Of Different Volumes In Rapidarc Treatments" at YROC 2013 in the Physics Session.

Research Programmes

1. Randomized Clinical Trial comparing Neoadjuvant Concurrent Chemoradiation versus Chemotherapy in patients with locally advanced breast cancer. The trial has started and has accrued 19 patients till date.
2. Evaluation of Fatigue in patients undergoing cancer Chemotherapy. This cross sectional survey is ongoing and has been converted into a prospective study with the aim to recruit 500 patients. Results have been presented in two national conferences already.
3. Evaluation of the efficacy of Rapidarc Simultaneous Integrated Boost Radiotherapy in adjuvant treatment of oral cavity cancers. (Planning Stage)
4. Development of an indigenous device for Breast Cancer Screening based on thermography. A collaborative project between C-MET and MCC. (Planning Stage)
5. Development of Total Body Radiation Therapy Technique using Volumetric Modulated Arc Radiotherapy (RapidArc). (Planning stage)

Staff

Staff	Department of Radiation Oncology	Department of Diagnostic Radiology
Physician	Dr. Milind Kumar Dr. Santam Chakraborty Dr. Geetha M Dr. Sujith KM Dr. Greeshma KE Dr. Sameer EP	Dr. Sateesh Babu TV
Physicist	Dr. Syam Kumar Ms. Suja C Mrs. Silpa Ajaykumar Mrs. Reshi Bharathan	
Technologist	Mrs. Alsa Paul Ukken Mr. Renjith M Mrs. Sriji Soman Mr. Najeeb KA Ms. Rijisha Mr. Nijeesh PT Mr. Rajneesh Mr. Renjith Kumar T Mrs. Ramla PT Mr. Gibesh KP Ms. Dhanya V Mrs. Beena PK Ms. Anitha	Mrs. Sherin Paul Mrs. Vini Raveendran Mr. Rajeesh TK Ms. Neethu
Mould Room Assistant	Mr. Sandeep K Mr. Sujith T	

Department of Surgical Oncology

MCC have two major operation theatres fully equipped for performing all types of cancer surgeries. The Surgical Oncology Division in MCC is equipped with state of art equipments. Limb salvage surgeries with custom made megaprosthesis, orthotopic neobladders after radical cystectomy with extended lymphadenectomy, exenterative surgeries, radical gastrectomy with extended lymphadenectomy and radical esophagectomy with lymphadenectomy are some of the major procedures performed in the division. Laparoscopic oncology has also put its foothold in the form of laparoscopic anterior resections and abdomino-peritoneal resections. Oncoplastic surgeries for breast cancer and vascular resections for soft tissue sarcomas are also being performed. Microvascular free flap reconstructive surgeries are routinely performed for head and neck resections. Extensive resections for ovarian cancers attract gynaecologists of nearby centres for training in the Centre. The endoscopy division has the facilities to perform both diagnostic and therapeutic procedures. A well equipped high dependency post-operative care unit supports the surgical division.

Combining unrivaled surgical oncology expertise with state-of-the-art cancer care, we offer treatment to patients in need of routine cancer care as well as those considered "untreatable" at other institutions. Surgical Oncology Department have expertise in the management of a wide range of tumors including cancers of the gastrointestinal tract

(esophagus, liver, stomach, pancreas, colon and rectum), breast cancer, Head and neck cancers(cancers of Oral cavity, Laryngopharynx, Paranasal sinuses, salivary glands and thyroid), Gynaecological cancers, Skin and soft tissue tumours, sarcomas and melanoma.

Reconstructive surgeries :

Cancer surgery is known to result in large defects and include morbid procedures like amputations, radical mastectomies, cystectomies etc. While a cure is our primary objective, paramount to our mission is improving quality of life by maintaining dignity (e.g., breast-saving surgery) and preserving normal function. We have undertaken complex reconstruction surgeries for cancer patients which was made possible by introduction of Microvascular flaps to reconstruct complex head & neck, limb and trunk defects. Last year we have performed 16 free flap procedures and we are able to do at a rate of 1 case every 2 weeks. We could undertake 13 limb preserving surgeries last year with custom made prosthesis where majority of patients were young children who would otherwise have required amputations. Despite continuing challenges with high occupancy, lack of anaesthesiologists, intensivists and specialists in Internal medicine we could introduce Endoscopic surgeries especially Urologic procedures. Major cancer operations, such as liver resections, esophagectomy, Whipple procedure, lung





resections and exenterative procedures could be done even in those patients considered at high risk (e.g., elderly patients, patients with co-existing heart conditions).

In the era of fast pace of development of medical science we have recognized the importance of continued innovations, research and training. Despite busy work schedule and job demands we could our doctors has published articles in interna-

tional and national journals. We could conduct a few CMEs as a part of commitment toward our medical fraternity. S part of developing MCC as an academic centre Fellowship Programmes has started in Head and Neck Oncology, Gynaecologic Oncology and Surgical Oncology.

Conducting Oesophago-gastro-duodenoscopy, Colonoscopy and direct Laryngopharyngoscopy and Bronchoscopy procedures





Statistics

List of Major Surgeries	
Surgical Oncology	
Site wise Division	April 2012 - March 2013
Head and Neck Oncology	217
GI Oncology	130
Uro Oncology	36
Gynec Oncology	89
Breast	232
Bone and Soft tissues	44
Thorasic Oncology	01
Cutaneous Malignancies	14
Miscellaneous	59
Division of cases in Breast surgeries	
Modality of Surgery	April 2012 - March 2013
MRM	158
BCS	38
BCS+LD	17
Excision Biopsy	19

Conferences, Seminars, Workshops & Presentations

International

INVITED FACULTY/PRESENTATIONS/POSTERS

1. Chaired a Session on 'Basic concepts of Colorectal Cancers': International conference organized by Regional Cancer centre and National Cancer Centre, Singapore at Trivandrum
2. Practical issues in CRC - Incomplete and Positive Doughnut - Lecture delivered in International conference organized by Regional Cancer centre and National Cancer Centre, Singapore at Trivandrum

National, State and Regional

INVITED FACULTY/PRESENTATIONS/POSTERS

- I. Invited as demonstrator for 'Tracheo-oesophageal voice prosthesis insertion' at the National conference of Association of Otolaryngologists India
- II. Moderator in Live workshop (Carcinoma Stomach, Endoscopic Thyroidectomy)- State Conference of Association of Surgeons of India, Kerala Chapter, (KASICON 2013)
- III. Presented on "Clinico pathological correlation of early recurrences in Oral cancers" at YROC
- IV. Moderator for Panel discussion on "Oral Cancers" at the Peripheeral meet of ASI, Kerala
- V. Demonstrator for 'Tracheo-oesophageal voice prosthesis insertion' at the annualmeet of AOI
- VI. Invited speaker in FREDOM 2013 (FUNCTIONAL REHABILITATION OF DEFECTS OF MAXILLO FACIAL REGION) - A workshop on Functional Rehabilitation on Maxillofacial Reconstructive Procedures -Surgical & Prosthodontic Management on the topic "Mandibular resection and reconstruction"
- VII. Member of Panel discussion on "management of maxillary defects" in FREDOM 2013 (FUNCTIONAL REHABILITATION OF DEFECTS OF MAXILLO FACIAL REGION) - A workshop on Functional Rehabilitation on Maxillofacial Reconstructive Procedures -Surgical & Prosthodontic Management
- VIII. Video presentation on 'Neck Dissection' at Peripheral meet of ASI. Kerala Chapter, Wayanad.
- IX. Invited speaker in FREDOM 2013 - A workshop on Functional Rehabilitation on Maxillofacial Reconstructive Procedures -on the topic "Maxillectomy"
- X. 'Facial Flap in Reconstruction of Head and Neck Oncologic defects - A simple Algorithm': Poster presented at ASI peripheral meet Wayanad.

International and National Conferences attended by the Faculty

- I. IASO National Conference - NATCON IASO 2012, Goa Sept 2012
- II. TMH-WCI- International Conference on 'Loco-regional Treatment for Breast Cancer'. Tata Memorial Hospital. October 2012
- III. International conference organized by Regional Cancer centre and National Cancer Centre, Singapore, March 2013, Trivandrum.

State and Peripheral Conferences attended by the Faculty

- I. State Conference of Association of Surgeons of India, Kerala Chapter, Kottayam (KASICON 2012), May 2012

- II. ASI peripheral meet, Wayanad, February 2013
- III. AHEAD - Amrita Head and Neck Programme - February 2013
- IV. FREEDOM 2013 - Workshop on Maxillofacial Reconstruction, MINDS, Mahe, March 2013

Conference Organized

- I. TELY ENT 2012- Live surgery workshop on common ENT surgeries held at Indira Gandhi Cooperative hospital, Thalassery as peripheral meet of AOI Malabar chapter on 9th Dec 2012.
- II. In hands with Association of Surgeons of India, Kerala Chapter - Conducted Peripheral meet - at Wayanad in February 2013

Training Programmes Attended

Observer in National Facial Plastic Surgery Cadaveric Dissection Course - First hands on course, held at Ramaiya Advanced Learning Centre, Bangalore, March 2013

Publications

- ❖ Radiation-induced extra- osseous osteosarcoma - A case report and review of literature - Under peer review - Indian Journal of Surgical Oncology

Prizes /Awards in the Conferences

- 1. First prize -Quiz competition on Breast Cancer, Conference on 'Breast Cancer - Current Trends and Future Directions', Calicut February 2013
- 2. Second Prize for Poster- 'Systematic Lymph node dissection in Interval cytoreduction-A feasibility Study' at International conference organized by Regional Cancer centre and National Cancer Centre, Singapore, March 2013
- 3. First Prize for the Poster 'Microvascular reconstruction in oncologic defects', ASI Peripheral meet , Wayanad, February 2013-07-15
- 4. Second Prize for the Posters 'Oncoplastic surgery in Carcinoma Breast- an early result' and for 'Submental artery island flap - in Head and Neck reconstruction'. ASI Peripheral meet , Wayanad, February 2013-07-15

Faculty

- 1. Dr. Satheesan Balasubramanian, MS, DNB, M.Ch (Oncosurgery).
- 2. Dr. Shyam Vikram, Assistant Professor, DNB (Surgery), DNB (Oncosurgery)
- 3. Dr. Sajith Babu TP, MS, Associate Professor, Fellow in Head & Neck Surgery (RCC)
- 4. Dr. Suriy Salih, Associate Professor, MS, M.Ch. (Head & Neck Surgery). (Presently undergoing Fellowship course in Surgical Oncology)
- 5. Dr. Nizamudheen, Lecturer MP, MS (Presently undergoing Fellowship course in Gynec Oncology)

Department of Medical Oncology and Clinical Hematology

Introduction

Department of Medical Oncology, Clinical Hematology and Pediatric Oncology started functioning from December 2010 onwards at MCC. Regular OPDs are conducted. On an average we have 25 outpatients a day. Around 80 % of which are haemato oncologic disorders and around 20 % are benign hematology cases. We have an isolation unit; where high dose chemotherapies are given. Majority of the lymphomas are treated on outpatient basis.

Publications

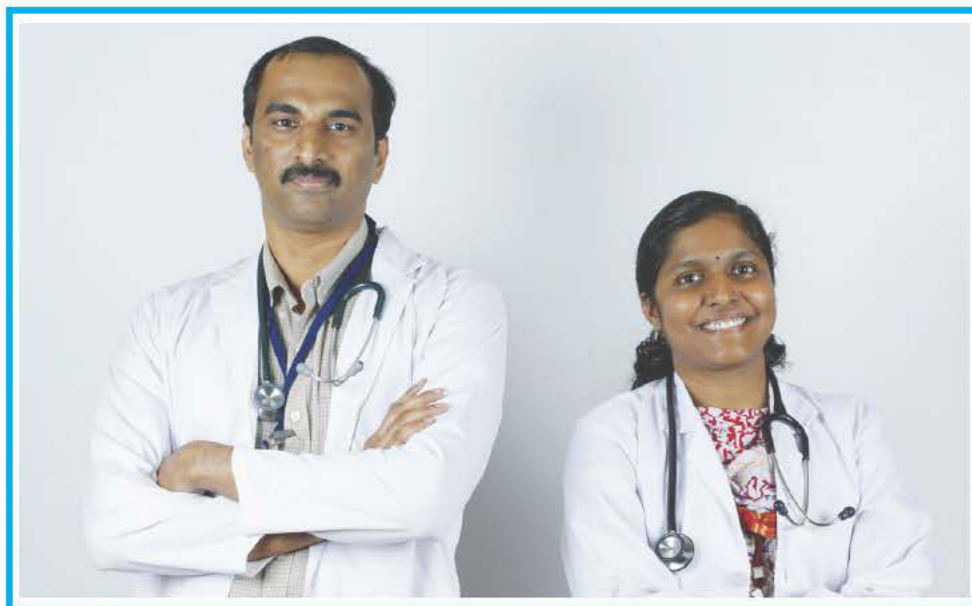
1. Pleural effusion during acute myeloid leukemia induction chemotherapy: A perplexing case. Nair CK, Kumar M, Odayoth SM. J Cancer Res Ther. 2013 Apr-Jun ; 9(2):290-1
2. Recent Trends in Stem Cell Research on Cancer Therapeutics, Shanju S, Sangeetha K, Chandran K. Nair, Satheesan B, Research Journal of Biotechnology, Vol. 8 (4) April (2013)

Conferences, Seminar, workshops and Presentations

Dr. Chandran K Nair Participated in National Hematology conference in Jan. 2013 as a faculty and spoke on primary myelofibrosis.

Faculty

1. Dr. Chandran K Nair, Associate Professor, MBBS, MD, DNB (Med), DM (Clinical Hematology), Fellowship in Hemato-oncology & Blood / Marrow Transplantation (University of British Columbia, Canada)
2. Dr. Vineetha Raghavan, Assistant Professor, MBBS, MD Pediatrics



Department of Onco-Anesthesiology

Introduction

This Department is in charge of postoperative intensive care unit and central line insertions for chemotherapy patients. Apart from patient care, regular training programs for nurses are conducted in intensive care, basic life support and central line management.

This Department has two states of art anesthesia workstations and two ventilators. Five bedded postoperative intensive care unit is equipped with state of art equipments to deliver drugs and monitor the patients.

Statistics

Total number of major cases	830
Procedures under General anesthesia	
Alone	655
With epidural	98
Procedures under spinal	
Alone	65
With epidural	12

Faculty

1. Dr. Krishna Das, Consultant Anaesthesiologist, MBBS, FICS in Anaesthesia
2. Dr. Krishnan Warriar, Consultant Anaesthesiologist, MBBS, DA, MD Anaesthesiology
3. Dr. Roshan Milind, Lecturer, MD Physician (MBBS - MCI)



Department of Clinical Laboratory Services and Translational Research

Introduction

Diagnostic services in the Clinical laboratory at Malabar Cancer Centre grew several folds from its inception in 2001. The department which started with skeleton staff and basic infrastructure grew into full-fledged one in 2011 catering to an increasing patient load.

Activities & Achievements

Diagnostic reporting work in Oncopathology was restarted in April 2011 with the joining of a visiting Pathologist & all hospital cytology samples like FNAC & effusion fluids were processed along with slide review of all referral cases. The clinical laboratory had a staff strength of one senior resident in Pathology & four laboratory technicians. The existing histopathology equipments were serviced, new ones like manual rotary microtome was purchased. In the course of the year Surgical Pathology was also restarted and the department acquired new staff including one Professor & three Assistant Professors, technical staff including a Histotechnologist, a cytotechnologist & cytotechnician. Cryostat was installed in September 2012 for taking frozen sections to aid in intra-operative diagnosis. Immunohistochemistry staining was installed in November 2012 enabling breast

cancer patients to have ancillary hormone analysis. These tests were being outsourced till then which was causing financial burden & inconvenience to the patients.

Clinical Microbiology

A full-fledged Microbiology laboratory started functioning in January 2013 with state of art equipments like Automated blood culture & sensitivity and various microbial identification systems. The department has services of senior Microbiologists & technical staff.

Clinical Biochemistry : In 2013 second haematology analyser was installed in the Haematology section as a standby. Proceedings were also initiated for procuring a standby for Dry Chemistry biochemistry analyser. New Coagulometer was also installed for haematology services. Polymerase chain resection and gel electrophoresis were purchased to facilitate research in Biochemistry.

Blood Bank : In 2012-2013, new state of art Apheresis machine for preparation of Platelet component, Platelet aggregometer for assessment of Platelet function tests & Flow Cytometer for advanced haematology investigations were acquired.





Statistics

Blood Units Supplied 2012-13		6973
Clinical Laboratory services Clinical Achievements: 2012-2013		
Sl.No.	Des	2012-13
1	Biopsy	2080
2	FNAC	1102
3	Cytology	4438
4	Histopathology	2213
5	Haematology	35565
6	Biochemistry	33140
7	Urine analysis	877
8	BMA	201
9	Tumour assay	2148
10	Peripheral smear	403
11	Second Opinion	1120

Publication

1. Recent trends in Stem cell research in Cancer therapeutics. Research Journal Biotechnology. Vol.8(4) . April 2013, pages 86-89.

Conferences, Seminars, Workshops & presentations

1. IAPM- Thiruvalla-(Aug)- POSTER PRESENTATION-2 no:s
2. DERMATOPATHOLOGY CME- Thrissur Oct- Faculty
3. IAPM -KARNATAKA CHAPTER- Bangalore-(Sep)-Participants
4. ASI SURGEON'S CONFERENCE-Wayanad (Jan)- FACULTY
5. PARATUS CNE (nurses meet)-MCC-(Feb)-FACULTY
6. MARCH- H&N SURGEON'S CONFERENCE- Kannur-(Jun)- FACULTY & POSTER
7. BREAST CME- Calicut-(Feb)-Participant.
8. ONCOPATH -NATIONAL CONFERENCE-Allepy- (Feb)

WORK SHOPS

- 1) Workshop for lab technicians @ Kottayam med college- Nov 2012
- 2) Microarray data analysis using R/ Bioconductor @ RGCB, Tvm-Jan 2013
- 3) Oncogenopath-BMH, Calicut -April 2013

OBSERVERSHIP

1. Our laboratory provides an advanced training as observers for B.Sc. & M.Sc. students in Medical Biochemistry, Microbiology, MLT & Biotechnology.

Research programmes

- a) Molecular characterisation of NCOA3/SRC3/AIB-1 status in the intrinsic
- b) Subtypes of breast carcinoma.
- c) Bilateral breast cancer: A study on incidence, risk factors, tumour characteristics, survival and genetics.
- d) Identification of serum biomarkers for diagnosis of lung cancer.

Staff

Sl.No.	Name	Designation	Qualification
Pathology Division			
1	Dr. Sangeetha.K.Nayanar	Professor & HOD, Dept .of Lab services	M.D, DNB Pathology
2	Dr. Kavitha.K.P	Associate Professor	M.D Pathology
3	Dr. Sithara Aravind	Assistant Professor	M.D Pathology
4	Dr. Aswathi.K	Assistant Professor	M.D Pathology
5	Sabna Dev. S.K	Cytotechnologist	MSc, M.phil, Cytotechnology
6	Nimi.GK	Cytotechnologist	MSc, Cytotechnology
7	Padmanabhan. M.V	Trainer in Histopathology Techniques	Class 1st Lab technology, histotechnology Graduation(Army)
8	Shefeeque. I	Cyto Technician	BSc MLT, PGHCT(IAC)
9	Soumya. V.K	Lab. Technician	BSc MLT
10	Sreeyesh. N.S	Lab. Technican	DMLT
11	Seena sukumaran	Lab. Technician	BSc MLT
12	Bindu. K.M	Nursing Assistant	PDC, ANM, D.C.A
13	Pravisha.T	PASAA/COPA	Plus Two, COPA(ITI)
Microbiology Division			
1	Dr.Gufran Ahmmed Bijapur	Consultant Microbiologist	MD, Microbiologist
2	Savitha Dev	Lecturer, Microbiology	Msc Microbiology
3	Sahana.P.P	Lab Technician	Bsc MLT
4	Rehana.T	Lab Technician	DMLT
Clinical Laboratory Services Division			
1	Binu. KA	Lecturer in Biochemistry	MSc Biochemistry
2	Mini. K.A	Lab. Technician	BSc MLT
3	Sindhu. M	Lab. Technician	D MLT
4	Rohini.GS	Lab. Technician	D MLT
5	Sharath. K.S	Lab. Technician	MSc MLT
6	Ajisha Bhaskaran	Lab. Technician	BSc MLT
7	Sali mol .P.A	Lab. Technician	DMLT
8	Reena.K.C	Lab. Assistant	PDC

Sl.No.	Name	Designation	Qualification
Transfusion Medicine Division			
1	Sabeesh.p	Blood Bank Technician	Bsc, DMLT
2	Sanil.A.P	Blood Bank Technician	Bsc, DMLT
3	Soumya.c	Blood Bank Technician	Bsc, DMLT
4	Sajeesh.V.M	Blood Bank Technician	Bsc, DMLT
5	Shibin.c.v	Blood Bank Technician	Bsc, DBBT
6	Anoop Joy	Blood Bank Technician	Msc, DBBT
7	Arun	Attender	Plus Two (Science)
Biochemistry Division			
1	Dr. S.Shanju	Asst. Prof in Biochemistry	Ph D
Molecular Oncology Division			
1	Dr. Geo Francis	Lecturer	PhD



Department of Cancer Palliative Medicine

Introduction

Cancer Palliative Medicine has been functioning in this Centre, since November 2002. The Centre is a recognized medical institution for possession and supply of Oral Morphine. The Palliative Care Services also provide counseling to patients and their family members. Cancer palliative medicine aims at improving the quality of life of cancer patients especially those for whom curative options have been exhausted.

Cancer Palliative Medicine Division has an inpatient, outpatient and home care facility. Inpatient and outpatient department functions on all days from 9 a.m to 5 p.m except on Saturdays (9 a.m to 5 p.m) Home visits are made twice a week.

Home care facility for the needy patients was started on June 20, 2009. It caters to the need of patients staying within 35 kms from MCC. There are so far 227 patients registered in homecare facility. Patients are given medication free of cost. Procedures like ascetic tapping, wound dressing, catheterization, Ryles tube insertion are done. Apart from this psychological support to the patient and their families are also given.

Effectiveness of coordination with palliative care link centers: As a result of referring the palliative patients to Link centres for palliative home care services and outpatient care, MCC has been able to reduce the load of palliative patients in the outpatient department and home care (Statistics shown below). MCC aims at concentrating on training activities for doctors, nurses and volunteers so that effective palliative care services can be established throughout Kannur district.



Academic Activities and Training Programmes

1. **22.5.2012-2nd batch of BCCPN** course started with 2 students.
2. **6.6.12-5th batch of BCCPAN** course started with 8 students
3. **15- 17 June 2012 - 2nd batch of IAPC** course started with 14 students.
4. **13.10.2012-palliative care day -(Workshop)** conducted one day rehabilitation training for patients and relatives, along with this programme a magazine(Ardram) was released by Mr K.K.Marar, the famous artist.
5. **17.10.2012- 3rd batch of BCCPN** course started with 8 students.

6. 2.11.2012-Dr.Meg' O Brien,Director of GAPRI (Global Access to Pain Relief Initiative) and Dr. M.R.Rajagopal, Chairman Pallium India visited MCC as part of starting "**Pain Free hospital Initiative**" in MCC.
7. **3.12.2012-6th batch of BCCPAN** course started with 3 students
8. 25.12.2012-As part of Christmas celebration, Santa Claus and team(children of MCC staff) sang carols and brought gifts for our patients on Christmas eve.Patients were happy to receive gifts from children. Feedback from patients was that in the midst of their suffering children brought hopes and happiness in them.
9. **14.1.2013** - Ms. Maria Blair, National Vice president of American Cancer Society visited MCC on 14 Jan 2013 as part of starting Pain Free Hospital Initiative at MCC. The increasing annual requirement of oral morphine over the past 3 years(2 kg for the year 2012) due to the rise in the no of patients reaching MCC was emphasized.
10. 15.1.2012 - **Sargalayathilekkoru santhwana padham** - Patients and their relatives were taken for a one day trip to Sargalaya Arts and crafts village, Iringal in connection with palliative care day.Later they also visited Turtle conservation Center, Iringal. Around 60 members participated in the program. patients and their relatives enjoyed the trip and appreciated the program very much .
11. **5.2.2013 - (Seminar)** Awareness class was given to volunteers conducted by Janamythri police at KAP camp, Darmasala, Kannur. About 86 volunteers (including BAMS and nursing students) participated in the programme.
12. **8th, 9th, 10th Feb 2013** - Attended the **20th international conference of IAPC** hosted by Kidwai Memorial Institute of Oncology held at Nimhans Convention Centre, Bengaluru.Two posters were presented at the conference :
 13. Fatigue and its impact on quality of life : A cross sectional survey in patients undergoing palliative chemotherapy in Malabar cancer centre.
 14. Palliative chemotherapy with fortnightly methotrexate in oral cancers : Experience at a tertiary care centre.



Statistics

1	The total No. of new patients registered in Cancer palliative Medicine department	761
2	The total No. of In Patients	1394
3	Total No of patients registered in palliative homecare services	105
4	Total No. of outpatient	1771

Research Programmes

PAIN FREE HOSPITAL INITIATIVE

The Global Access to Pain Relief Initiative, or GAPRI, was created in late 2009 by the Against for International Cancer Control and the American Cancer Society to address a target of the World Cancer Declaration: to make effective pain control universally available to all cancer patients in pain by 2020.

Integrating pain relief into service delivery at 3 cancer centres in India: the Pain-Free Hospital Initiative. MCC is one of the centres selected, the other two are Cachar Cancer Hospital and Research Centre, Silchar and Thakurpukur Cancer Hospital, Kolkata, West Bengal .

Goal : One-year quality-improvement program to integrate effective pain treatment into hospital-based services

Objectives

- 1) Motivate clinicians to evaluate and treat pain
- 2) Equip clinicians with the skills and tools to effectively treat pain
- 3) Measure the impact of the program
- 4) Communicate the impact of the program

As part of the programme it was decided to calculate :

1. The pain score for MCC every month.
2. Morphine consumption every month.
3. Classes on pain management for doctors and nurses.
4. Knowledge of doctors and nurses in pain management tested every three months.

Month	Morphine consumption in grams
January 2013	124.8
February 2013	225.3
March 2013	210.1

Pain Score in MCC (out of 10)

Month	Pain score
January 2013	3.25
February 2013	1.25
March 2013	1

Faculty

1. Dr. M.S Biji, Assistant Professor, MBBS, PG Diploma in pain & Palliative Medicine

Department of Community Oncology

Introduction

Activities for empowering public health and awareness on cancer has always been the priority of Community Oncology Department. This year focus in an high risk group like tribal population of Aralam farm & Agali ,Sex workers, tribal schools,National cancer awareness day ,World cancer day and No tobacco day were observed by involving public also as a part of improving awareness and decreasing myths about cancer.

Anti Tobacco Cell: Anti-tobacco cell was formed on 31-10-11 under Community Oncology Department of Malabar Cancer Centre. The members of the cell were eminent personalities from different walks of life. Teachers, Journalists, Social activists, writers etc. The main aim of cell is to educate the student community on the menace posed by the tobacco use. The executive committee of the cell comprises the following members , Dr. Satheeshan Balasubramaniam as chairman , Dr. Ramachandran V as Joint Conveners ,

Dr . Neethu A.P, Dr . Phinse .M. Philip as member conveners and mayaor P Govindan, Dayanandan Master , Chalakkara Purushu, Pradeep Master as executive members.

The formal inauguration of the cell was done by Distict Collector of Kannur Sree. Anand singh IAS on Nov 17th 2011 and a huge memorandum signed by 10,000 school children against tobacco was submitted to the District collector on that occation. Apart from cell members, school children from city high school were also present during the function.

As part of the awareness programmes, cell conducted 2 student leaders training programs on tobacco control for NSS, NCC, Student Police Cadets. World No tobacco day was observed with a 3 day program. On may 29th Work shop on psychological aspect of tobacco use was done and on 30th May 2012, A quiz program for UP & High school children were conducted . On the last day , 31st Mayan anti tobacco rally &street play on haz-





ards of tobacco were organized . The first issue of the anti tobacco cells News letter 'NETHI' was released on 31ST May by P.P Saseendran an eminent Journalist.

2nd issue of 'NETHI' News letter was released in October at a function held at Usman Memorial School in Mahe by eminent writer Mr. Ragavan in connection with the cancer day, a painting competition for school children was conducted at MCC as renewed artist Karunakaran Master inaugurated the competition .

The 3rd issue of the Anti tobacco cell News letter 'NETHI' was Released by District Panchayath President Prof. K.A SARALA at a function organized at Krishnemenon Memorial womens College Kannur.

Activities and Achievements

1. National cancer awareness day: Nov 11 conducted a 4 day Health exhibition, documentary and seminar on cancer at Velimanam, Aralam Panchayath from 5-11-12 to 8-11-12. Painting Competition was conducted for school students at MCC on 28-10-12
2. World Cancer Day- Feb 4: - Health exhibition and Seminars on cancer

Awareness at Iruvery Primary Health centre on 3-2-13 to 4-2-13. Release of News letter " NETHI " (3rd volume) by Jilla panchayath President Prof . P Sarala at Krishna menon womens college, Kannur

3. World No tobacco day on May 31st - Exhibition, Seminars, Quiz competition for students (NCC Cadets, student police) were conducted at Govt. Brennen Teachers Training Institute from 29-5-12 to 31-5-12. Students of college of Nursing also actively participated in the programme. Release of News letter 'NETHI' of anti tobacco cell of MCC by Mr. Saseendran , Chief bureau Editor, Mathrubhoomi. Programme was inaugurated by Municipal Chair Person Amina Maliyakkal. Street play on tobacco by students of college of Nursing was staged in various locations of Thalassery.
4. ASWAS - 2012-2013:- A comprehensive project for control of cancer jointly organized by MCC, Dept of Health and Jilla Panchayath in 22 Panchayaths of Kannur District, also includes Central Prison and Aralam farm .

Details of ECDC 2012-2013						
Kannur	Kozhikode	Kasargode	Wayanad	Malappuram	Palakkad	Mahe
64	18	10	11	4	10	2
Total screened					13,100	
Leukoplakia					157	
Erythroplakia					23	
Oral submucous fibrosis					31	
Lichen Planus					35	
Benign breast disease					171	
Total attending MCC for further evaluation					73	
Total positive cases detected at camp					8	
Details of Pap smears taken at ECDC						
Total Pap Smear					4259	
Total FNAC					100	
INFLAMATION					834	
ASCUS					45	
TV					10	
LSIL					5	
HSIL and above					9	

Publications

1. News Letter 'NETHI' by anti tobacco cell of MCC (3 volume/year). 5000 copies of each volume are circulated among students & public.

Conferences, Seminars & Workshops

Conferences

- a) 15th World Tobacco Conference at Singapore in March 2012. Attended by Dr. Phinse. M. Philip. Poster presentation on Tobacco usage among school student in Kerala by Dr. Phinse. M. Philip at the Conference

Seminars

- 1) Seminars on cancer awareness at Iruvery PHC in connection with world cancer day by Dr. Neethu.
- 2) Seminar on tobacco control for NCC, Student Police Cadet in connection with No tobacco day at Brennan School.
- 3) Seminars on tobacco control for Nursing students and public at Science park in connection with world no tobacco day by Dr. Suraj Salih.

Awards

- a) Cancer awareness exhibition at Wayanad conducted by MCC & DMO Wayanad bagged best government pavilion award in March 2013.

Staff

- 1) Dr. Neethu A.P - HOD - in - Charge
- 2) Dr. Phinse . M.Philip - Lecturer
- 3) Mrs. Sabna Dev S.K - Cytotechnologist
- 4) Mrs. Nimi G .K - Cytotechnologist
- 5) Mr. Santhosh Kumar K - Lab Assistant
- 6) Miss. Dilna.N - Data Entry Operator

Department of Cancer Registry & Epidemiology

Introduction

Department of Cancer Registry and Epidemiology was established in 2011. Registry is tasked with ensuring good quality cancer data available to inform and drive improvements in standards of cancer care and clinical outcomes, as well as enabling the use of cancer information to support audit and research programmes. To give higher quality information. "It revolves around improving patient care, improving outcomes, and addressing discrepancies in data collection efforts," by Hospital Based Cancer Registry. To provide a site-specific "baseline assessment" through Patterns of care and survival studies. Registries are now developing their roles as cancer registration site-specific leads in Breast, Cervix and Head and Neck Cancers through dedicated programmes of ICMR, NCRP. At both the national and community level, cancer registration schemes are central to research into the nature and causation of cancer, to the planning of health service, resources and cancer control programmes, and to the assessment of their efficacy. Cancer registration is thus part of a modern health information system. An accurate picture of the cancer burden depends on the creation of a population-based cancer registry.

The Department of Cancer Registry & Epidemiology in its second year of Hospital based cancer registry in collaboration with NCRP/ ICMR could publish two annual reports of HBCR 2010 & 2011, and two publications to its credit over a period of two years. The department comprises 4 divisions;

1. **Cancer Registry and Epidemiology**
2. **Clinical Research and Bio statistics**
3. **Medical Records**
4. **Health Information Technology**





Clinical Research and Biostatistics Division :

The mission of the Department of Biostatistics is to provide an infrastructure of biostatistical and informatics expertise to support and enhance the research, service, and educational needs of the Malabar Cancer Center and its affiliates. The objectives of the department are as follows:

- ◆ To provide a leadership role in biostatistical and informatics research initiatives across the medical center.
- ◆ To provide the biostatistics and informatics cores for major initiatives.
- ◆ To ensure that researchers have ready access to biostatistical and informatics resources and support.
- ◆ To provide the infrastructure and expertise for centralized and project specific database development, management and analysis.
- ◆ To consolidate resources pertaining to biostatistics and informatics.

Medical Records Division:

Medical Records Department of Malabar cancer centre is situated near reception. All the patient files are stored in mobile racks. Files are arranged according to the hospital number and are in straight number order. The hospital number comprises of six digits and the first two digits indicates

the year of registration the files are retrieved for patient visits in accordance with the request from reception colour codes are used according the site of disease for easy identification the tracer cards are used for file retrieval which helps in tracing the files easily.

Health Information Technology Division:

Health Information Technology Division under **Department of Cancer Registry and Epidemiology is commenced in the year 2012**. In a short working span, the division started the development of several health care related softwares and has extended support to Malabar Cancer Centre for its developments in the new arena of Health Information Technology. Also the division is looking forward in research projects, in applications of Health Information Technology for cancer awareness, diagnosis, detection and prevention. This is just the beginning of a new era, where in the world of information technology is going to initiate health information technology.

Health information technology and exchange provides the umbrella framework to describe the comprehensive management of health information and its secure exchange between consumers, providers, government, quality entities, and insurers. Health information technology (HIT) in general is increasingly viewed as the most promis-

ing tool for improving the overall quality, safety and efficiency of the health delivery system. Broad and consistent utilization of HIT will: Improve health care quality; Prevent medical errors; Reduce health care costs; Increase administrative efficiencies; Decrease paperwork; and Expand access to affordable care. In line with recent advances in Information Technology, the Health Information Technology Division as the heartbeat of a Digital MCC, provides, operates and maintains effective, dynamic user friendly data systems that will enable the Malabar Cancer Centre to achieve its vision of a centre of excellence.

Report of Hospital Based Cancer Registry 2011

Magnitude of Total Cancers

According to cancer registration in the Hospital Based Cancer Registry of MCC, Thalassery, Kannur during the year 2011, the number of cancer patients and their relative proportion according to sex and sex ratio percentage have been represented in Table 1. The number of cancer patients recorded in the HBCR was 2575 [males 1375 (53.4%) and females 1200 (46.6%)]

Males		Females		Sex Ratio	Total Cases
#	%	#	%		
1375	53.4	1200	46.6	115	115

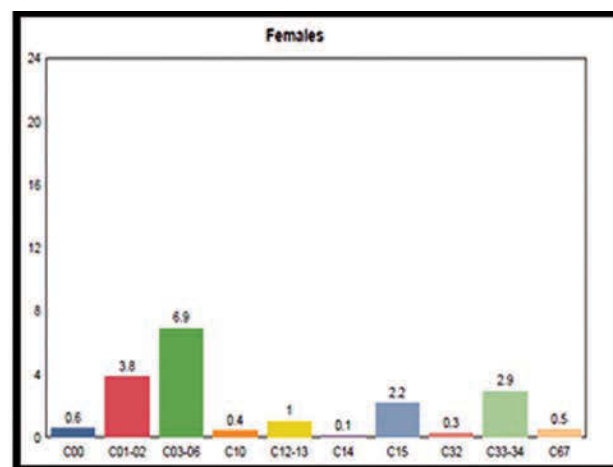
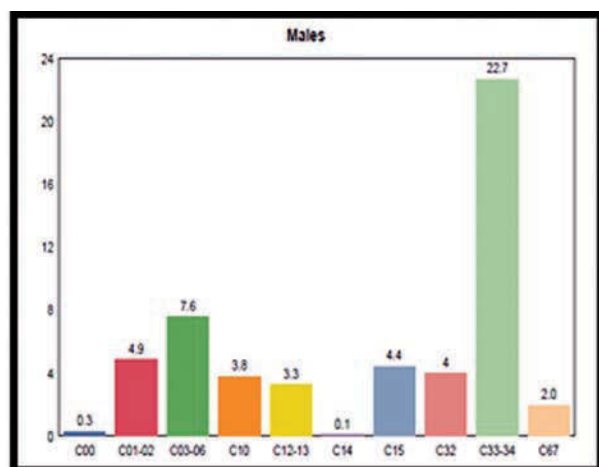
LEADING SITES OF CANCER AND MAGNITUDE

Male

Rank	Sites (ICD 10)	#	%
1	Lung (C33-34)	312	22.7
2	Stomach (C16)	110	8.0
3	Mouth (C03-06)	104	7.6
4	Tongue (C01-02)	67	4.9
5	Oesophagus (C15)	61	4.4
6	Larynx (C32)	55	4.0
7	Oth.Oropharynx (C10)	52	3.8
8	Rectum (C19-20)	50	3.6
9	NHL(C82-85, C96)	47	3.4
10	Hypopharynx (C12-13)	45	3.3
	Total	903	65.7
	All Sites	1375	100

Female

Rank	Sites (ICD 10)	#	%
1	Lung (C33-34)	312	22.7
2	Stomach (C16)	110	8.0
3	Mouth (C03-06)	104	7.6
4	Tongue (C01-02)	67	4.9
5	Oesophagus (C15)	61	4.4
6	Larynx (C32)	55	4.0
7	Oth. Oropharynx (C10)	52	3.8
8	Rectum (C19-20)	50	3.6
9	NHL (C82-85,C96)	47	3.4
10	Hypopharynx (C12-13)	45	3.3
	Total	903	65.7
	All Sites	1375	100



Activities and Achievements

Cancer Registry and Epidemiology Division

1. Proposal submitted to start Population Based Cancer Registry in the districts of Kannur and Kasaragod.
2. In partial collaboration with ICMR, NCRP started a new project Patterns of Care and Survival Studies in
 - a. Cervix (2010-2012)
 - b. Breast (2010-2012)
 - c. Head and Neck (2010-2012)
3. Hospital Based Report 2012

Clinical Research and Bio statistics Division

1. Planning to conduct Two day Workshop on "BASICS OF BIOSTATISTICS AND CLINICAL RESEARCH METHODOLOGY" - A Voyage Begins
2. Project guidance to MSC Nursing students.
3. Statistical consultancy and project guidance to research projects.
4. Biostatistics is the part of the IRB/Ethics meeting.
5. Proposal has been submitted to conduct two epidemiological studies.

Medical Records Division

1. Medical Records keeping and management
2. Intimation of death to the government authority
3. Recording the life style history of new patients
4. Preparation of new folders for the patient registration.

Health Information Technology Division

1. Developed a dynamic website for MCC in English and Malayalam Languages using open source content Management System with the domain **www.mcc.kerala.gov.in**. The website was inaugurated by honorable Chief Minister Sri. Oommen Chandy on 28-01-2013.
2. Initiate and speed up the new HIS **software** Implementation activities using Open source Technology.
3. Given Computer **Hardware Maintenance and support** to all the Departments and support given for tender document preparation.
4. Handling **Computer Science classes** for B.Sc. (MRT) students.
5. Developed Salary Processing Software for MCC
6. Developed **Canteen Billing and Management Software** for MCC Canteen
7. Developed and Implemented **Medical Records Digitizing and Archiving Software and Online Examination Software**.
8. Developed web based **Diet Management Software** for preparing patient's diet charts using open source technology.

9. Development of **Cancer Patient Mapping Software, Clinical Calculator Software, HR Management Software, File Management Software, Smart Image Analyzer Software, open source PACS Software, etc.** are progressing.
10. Implemented **Static IP** for Broad band Connection
11. **Edu@Expert** - Delivering series of lectures using Telemedicine facilities about cancer awareness to Nursing Students and Staff. First class is started on 17-11-2012 for Internship students at District Hospital, Kannur.
12. Implementation of **e-Procurement Mission Mode Project** is at the final Stage. Department Users Training was held on 25-02-2013. A step to implement the system from the financial year 2013-14 onwards is progressing.
13. **Research Tie-up with C-DIT in the area of Health Information Technology:** Initial meetings are held to discuss the area of research collaboration and drafting MoU.
14. **Telemedicine** support for Diagnosis
15. Support given for developing various Brochures and website like conferencemcc.org, ishtmkerala.org, asikcpc.org, etc for different seminars, conferences, workshops organized by MCC.
16. Implemented **Malayalam Computing at MCC** in association with **Akshaya Project office, Kannur**. Malayalam Computing programme is started on 03-01-2013. Malayalam Unicode is installed in the computers at MCC and given training to staff by 3 Trainers from Akshaya Project office, Kannur. They are also provided Malayalam key board stickers, Booklets and CD's.
17. Initiated the Development of **Integrated Cancer Information System for Public in Kerala**.
18. **Online Application:-** Online application software was implemented for inviting career applications of MCC. The software is used for inviting application for Junior Nurse, Radiographer, Nursing Assistant, Lab Technician, Electrician, Driver (Special Recruitment) and Accounts officer. The software is also implemented for inviting application for Lecturer/Medical Officer, Social Investigator, Data Entry Operator, Clerk, OT Technician, Endoscopy Technician, Assistant Pharmacist and Clerical Assistant on contract/



- project staff basis.
19. Started **Project support for MCA and M.Sc Computer Science Students at MCC**. Seven MCA students from Srinivas Institute of Management Studies, Mangalore was joined for project work and successfully completed the projects assigned.
 20. Initiated to conduct **Online Introductory Cancer Awareness course** for public in Malayalam and English Languages
 21. **e-Palliative - An online Palliative Care and Support Network** : A presentation and discussion held in the meeting of Palliative care units at Kannur district and near places at MCC on 17-03-2013. Decide to develop & implement e-Palliative: An online Palliative Care and Support Network within 6 months.
 22. **Fundamental Computer Training to staff** as part of Modernization
 23. **National Knowledge Network** : NKN Connectivity to MCC has been approved by the High Level Committee (HLC) and the Project Implementation Unit assigned Powergrid Corporation of India Ltd. to provide NKN connectivity at MCC.
 24. **Institutional Mail ID** : Steps initiated to provide institutional mail ID to Departments and staff. Provided Institutional Mail ID to departments.
 25. Updated the wrong information status of MCC in the official website of Govt. of Kerala.

Publications

- ◆ **A Descriptive Analysis of Cancer cases from endosulfan-affected areas of Kasaragod District, Kerala.**
Binukumar Bhaskarapillai MPhil, PhD*, Saina Sunil Kumar MBBS, Satheesan Balasubramanian MS, DNB, M.Ch (Oncosurgery). Published in Health Sciences 2012; 1(2): JS004
- ◆ **Lung Cancer in Kerala-A Descriptive Analysis**
Binukumar Bhaskarapillai MPhil, PhD*, Saina Sunil Kumar MBBS, Satheesan Balasubramanian MS, DNB, M.Ch (Oncosurgery). Published in Asian Pacific J Cancer Prev, 13, 3547-3551
- ◆ In collaboration with Department of Clinical Administration and Public Relation - Annual Report 2010.
- ◆ Hospital Based Report 2011.
- ◆ A Breast Cancer Awareness Booklet "Sthanarbhutham Ariyendava" published on Pink Ribbon Day for the general public.



Conferences, Seminars, Workshops & Presentations Workshops Attended

- ◆ Dr. Saina Sunilkumar and Shamna. P attended Workshop on HBCR DM Software, Patterns of Patient Care (POCSS) at National Centre for Disease Informatics and Research NCRP/ICMR, Bangalore. Dr. Saina Sunilkumar presented the Cancer Statistics of Malabar Cancer Centre a consolidated report of Hospital based cancer registry 2010 & 2011.



Staff

1.	Dr. Saina Sunilkumar	Lecturer & Head in Charge
2.	Ranjith MK	System Manager
3.	Bindu T	Lecturer in Biostatistics
4.	Ratheesan K	Lecturer in Biostatistics
5.	Subhra dev Sen	Lecturer in Biostatistics
6.	Jayadev	Medical Records Officer
7.	Bhavina C	Junior System Analyst
8.	Shamna P	EDP Assistant
9.	Suraj Kumar	Medical Records Assistant
10.	Ajesh	Medical Records Attender
11.	Rincy	Program Assistant

Department of Oncology Nursing

Introduction

As the hospital is stepping the ladder of progress, the nursing department has also achieved several milestones in the year 2012-2013. At present we have separate wards for male and female patients. Each section of the patients are kept separately such as preoperative patients, post operative patients, Radiotherapy, chemotherapy, palliative care patients, ICU care patients and medical oncology patients. In each section we have experienced staffs, to give extreme care, frequent fumigations and regular cleaning in the wards. Good Nutrition recommended by the dietician is given to the patients; provision for liquid diet to the patients with Ryle's tube is taken care of. Nursing services is rendered to Brach therapy, CT, MRI, Scanning, endoscopy. Our Nursing Staffs are efficient and always alert to give nursing care to the patients whenever needed and wherever the patients are.

Activities and Achievements

The nursing staffs have attended various training programmes conducted in other reputed hospitals to update their knowledge on the current status. We are conducting regular CNE programmes, in service education, workshops, health educations to the patients and bystanders. We are attending early detection camps conducted by the community oncology departments & providing Home care services twice a week through the Department of pain & palliative Medicine. Drug Bank provides free medicines to the poor patients admitted in wards. Medicines are collected from Doctors in private hospitals & various organizations to the Drug Bank. Various formats for requisition forms have been prepared. We assure good quality of care to all patients. Awareness classes is given to the patients and by standers. Regular MSc Nursing Oncology posting and Internship in BSc Nursing from various nursing schools of Kannur & Kasaragod districts is given.





- ⇒ Published "Roghikalkkoru Margarekha" - a Malayalam book for patients
- ⇒ Donated Rs 20000/- for poor patients welfare scheme.
- ⇒ 12th May 2012 - Nurses day Magician Muthukad inaugurated a book for patients
- ⇒ A hand book on chemotherapy published and released by chief Minister

Staff

Nursing superindent	: 01
Senior nurse	: 01
Head Nurse	: 02
Permanent nursing staff	: 47
NRHM Staff	: 13
Nursing Assistants	: 27

Conferences, Seminars, Workshops & Presentations

- a) Workshop on Socio political Aspects in cancer
- b) Nurses actively participated on the palliative care day on 13th October and Pink Ribbon day on 22nd October.
- c) A training programme on Oncology nursing was given to staff nurses from various district hospitals in Kerala for 2 weeks.
- d) 9th June 2012 - LEAF
- e) 8th September 2012 - Cecaocura
- f) 20th October 2012 workshop on Basic life support
- g) 6th & 7th October 2012 personality development classes.

Department of Dental Medicine and Rehabilitation



Introduction

This division provided a variety of treatment modalities for the oral health and radiation protection of teeth of cancer patients. These included procedures like oral prophylaxis, conservative therapy, dental extractions, occlusal adjustments, therapeutic management of pre-cancerous oral lesions, management of osteoradionecrosis and bisphosphonates induced osteonecrosis of jaw, pre and post-radiation oral care, **pre and post surgical oral care, pre and post chemotherapy oral care**, oral biopsies, management of ulcers, bleeding gums, toothache etc.

Apart from these activities, the dental division in association with the community oncology department is actively participating in the early cancer screening camps, school tobacco awareness classes, cancer awareness classes and cancer volunteer trainings. Tobacco cessation facilities are also provided.

Statistics

Total No. of extractions	280
Total No. of pre and post radiation care	220
Total No. of pre and post surgical care	150
Total No. pre and post chemotherapy care	120
Total No. of scaling	92
Total No. of biopsies	5
Total No. of occlusal adjustments	17
Total No. of oral cancer screening camps attended	83
Total No. of tobacco and cancer awareness classes	17
Tobacco cessation services provided	40

Faculty

1. Dr. Phinse M Philip, Lecturer, MCC



Department of Clinical Administration and Public Relations



Introduction

Clinical Administration And Public Relations includes, Front Office Management, Public Relations Activities, Medical Records Management and Patients Accounting and Billing.

Activities and Achievements

Department of Clinical Administration & Public Relations deals with:

- ⇒ Co ordination of academic programs
- ⇒ Organising and Supervising Filed Work Training and Project Work Dissertations to Various Professional Courses
- ⇒ Co-ordination of various Research Projects
- ⇒ Liaison work with various Governmental and other agencies
- ⇒ All social activities and public relations.
- ⇒ Receiving and guiding patients and other visitors
- ⇒ New Patients Registration according to their Socio Economic Background
- ⇒ Case file arrangement and Issue of Identity cards
- ⇒ Issue of all investigatory reports



- ⇒ All cash transactions of patients
- ⇒ Patients and relatives guidance and counseling
- ⇒ Implementation of various patient welfare services
 - ❖ Cancer Suraksha Scheme
 - ❖ Chis Plus
 - ❖ Karunya Benevolent Fund
 - ❖ Society for Medical Assistance to the Poor
 - ❖ Thalolam
 - ❖ Comprehensive Health Care Scheme for Scheduled Tribe
 - ❖ Snehasanthwanam for Endosulfan victims
 - ❖ Prime Minister's Relief Fund
 - ❖ Patient Welfare fund of MCC



- ⇒ Issue of various certificates to patients
- ⇒ Guidance and issue of certificates for financial aid from both government and private agencies
- ⇒ Death register maintenance and periodical reporting to concerned authority
- ⇒ All types of correspondence related to patients
- ⇒ Treatment expenditure Re imbursement procedures for various agencies
- ⇒ Guidance and assistance to various trainees coming here for training
- ⇒ Press releases of activities in the Centre
- ⇒ Management of patients and their relatives complaints and suggestions
- ⇒ Apprenticeship training for Front Office Assistants and Computer Operators

During this period many students have successfully completed their concurrent and Block fieldwork in Medical setting in this centre as part of their Master of Social Work course.

Statistics

Clinical achievements during the period are shown below:

Sl. No.	Description	2012
1	New Cases	3192
2	Non Cancerous Cases	1758
3	Follow up cases	49659
4	Non Cancerous cases (follow up cases)	1733
5	Total Patients	56342
6	In patients	4085
7	Day CT Injections	7666
8	IP CT Injections	2158
9	Total CT Injections	9824
10	Observation cases	
11	Major Surgeries	821
12	Minor Surgeries	377
13	Total surgeries	1198
14	Scopies	676
15	X-ray	4299
16	U S G	496
17	Mammogram	889
18	CT Scan	2607
19	Esophageal stenting	
20	Biopsy	1895
21	FNAC	1044
22	Cytology	4102
23	Histopathology	1928
24	Histopathology Second Opinion	994
25	Haematology	32178
26	Biochemistry	30032
27	Urine analysis	801
28	BMA	186
29	Peripheral smear	370

30	ABG	171
31	Tumour assay	1891
32	ECG	669
33	Bronchoscopy	948
34	RT Patients (in fractions)	17249
35	Number of Patients RT	912
36	Brachytherapy	199
37	Brachytherapy (pt. bases)	87
38	RT Simulator	914
39	Cancer Awareness Classess	67
40	Linac (No. of patient RT)	529
41	Linac (RT patient in fractions)	41382
42	Early Cancer Detection Camp	91
43	Exhibition	3
44	Work Shop	4
45	CME	1
46	CNE	1
47	Blood Donation	3462
48	Component Preparation	6986
49	Screening Test	3462
50	Blood Donation Camp	13

Department of Engineering and Maintenance

Introduction

The Engineering department of MCC carried out routine maintenance works of the electrical, Civil and plumbing in the hospital, new construction works, installation of new medical equipments etc.

Activities and Achievements

1. Modification works of Blood bank (Aluminum fabrication, False ceiling & Electrical works) required for installation stem cell equipments.
2. Modification of Imagiology department - Present mammography room modified as per BARC norms. For this aluminum partition works, civil works, carpenters works etc are done by engaging outside persons and electrical and plumbing works are done departmentally.
3. Construction of Molecular oncology department (Civil, Aluminum fabrication and Electrification work) is in final stage.
4. The following emergency works were estimated, verified by PWD /Govt. Engineering college Kannur and executed after invited quotations separately and completed timely,
 - a) Nurses hostel - Records Room
 - b) Cleaning staff Room
 - c) ICU Lobby
 - d) Pathology Lab
 - e) Specimen room
 - f) Medical library (false ceiling & aluminium fabrication)
 - g) Nurses rest room
 - h) Bystanders dining area
 - i) Patient and staff dress changing room in brachy OT
 - j) Pathology lab partition wall shifting





Other executed works and programs conducted

- a) In addition to daily maintenance in Electrical installations and sanitary lines, All additional electrical works including setting of community oncology , Digital Mammography, Dialysis room etc are done departmentally by our Electricians in the hospital and taken electrical inspectorate approval for the whole installations till date and taken necessary steps to enhance the contract demand.
- b) Necessary steps were taken for new building
- c) Prepared (up to date plan) Master Plan for the electrical installation construction and regularized the building permit.
- d) Renewal of AMC of Hospital equipments with different agencies and their payments settled.
- e) Necessary steps were taken to settle the payment of the consultancy with Engineering College Kannur.
- f) Necessary steps were taken for stopping encroachments towards MCC's acquired land and as per our request collector ordered Taluk Surveyor to fix the boundary.
- g) Prepared and forwarded part bill for the Construction of part of Compound wall & fencing.
- h) Repaired the damaged Cots, Wheel chairs, Trolleys, Toilet door frames etc with the free service rendered from the students of NTTF
- i) Completed the work of providing street lights in the hospital and are working ok.
- j) Necessary steps were taken for repairing the medical equipments with AMC agencies and settled the issues
- k) Necessary steps were taken for claiming the damaged equipments from Insurance Company
- l) Preparation of vouchers and verification of bills for various miscellaneous works in the hospital.

- m) Verification and maintaining of fuels level required. maintenance of DG properly
- n) IP Block unofficially started functioning.
- o) Arranged labours for clearing the vegetation growth and removed thorny bushes from the hospital compound especially near Nurses hostel, HT yard etc.
- p) Prepared Condemnation report and arranged repairing works.
- q) The engineer included in the various purchase committees and negotiation meetings for the purchase of various equipments for MCC

Energy saving activities

- ❖ Provided automatic (Timer system) on-off system for street lights and this reduced unwanted working of these systems.
- ❖ We had conducted an Energy conservation class for staff and bystanders with the help of energy management centre and KSEB. The class was very useful for the safe and economical handling of power equipments and energy.
- ❖ In connection with world Environment day celebration we conducted a program Centilla 13 - (classes to public for the importance of leaves in the day to day life and started a garden for eatable leafy plants). There were above 600 participants in the programme. In continuation to this we had started planting turmeric in 5 cent of land.
- ❖ To promote vegetable cultivation we brought 350 numbers of grow bags from agriculture department for the use nurses hostel and canteen and doctors quarters

We had prepared the estimate and drawing of the following major works, gets PWD / Engineering college verification / approval, tendered and got executed. These works are in progress

- i. Construction of Directors Residence - almost completed
- ii. Construction of Compound Wall and Fencing.
- iii. Construction of Roof top class rooms
- iv. Construction of community oncology department



- v. Construction of waiting lobby with Polycarbonate sheet near Lab
- vi. Construction of power laundry
- vii. Construction of Bus waiting shelter
- viii. Centralized medical gas pipe line.
- ix. Landscaping works started.

Discussion with HLL, the consultant for the existing construction of IP Block and Pediatric Block and future construction of Stem cell, Nuclear Medicine, Laboratory block etc. Verification of estimates submitted by them, replay to their letters etc are our duties since their site office included one project manager, DPE and 3 site engineers

During the period we had conducted 2 Building committee meetings with following members for evaluation of the ongoing constructions, approval of estimates of new works, and future constructions:

1. Asst.Executive Engineer, District Panchayath
2. Executive Engineer, PWD Buildings, Thalassery
3. Asst.Executive Engineer, PWD Buildings, Thalassery
4. Deputy. DMO(H), Kannur
5. Director, MCC
6. Administrative Officer, MCC
7. Accounts Officer, MCC
8. Engineer, MCC

Staff

1. Sri.K.T Sudeep Engineer
2. Smt.P.C.Reena, Supervisor, Electrical
3. Sri.K.Chandran Supervisor, Plumbing
4. Sri.T.V. Satheesh, Supervisor, Electrical
5. Sri.K.N.Sharath Kumar Supervisor, Civil
6. Smt.Lijikrishnan, Biomedical technician
7. Sri. Susanth, Electrician
8. Sri.Nyju, Electrician
9. Sri. Rajesh, Electrician
10. Sri.Sunil Kumar, Electrician cum plumber
11. Sri. Rasheed Plumber
12. Sri. Jinsithlal Plumber
13. Sri.Harikrishnan.P.K, (Apprentice Trainee)

Department of General Administration

Introduction

This Department handles the overall administrative activities related to the Hospital and liaison work with Government and other Departments. The Department consists of ministerial staff looking after the day-to-day affairs of the Centre in accordance with the existing rules and regulations of the Centre and in accordance with Government orders/instructions, issued from time to time. The Department controls the overall activities of the Centre and consists of the following major Divisions:

1. Security
2. Establishment
3. Purchase
4. Accounts
5. Store

❖ Security

The security wing of MCC plays a pivotal role in maintaining the security system of MCC and is headed by Security Officer. Security guards are Ex-servicemen and are outsourced through manpower agencies. They are guarding the Centre 24x7 and are posted in various areas of this Centre, for the smooth functioning.

❖ Establishment

The establishment works of this Centre are handled under this Division. All recruitment procedures for academic staff as well as non-academic staff are performed by this Division. Leave matters of staff, service matters, maintenance of service book, dealing with Govern-





ment related communications etc. During the period 59 staff's have newly joined this institution and 7 number of staff were relieved from the institution.

❖ **Purchase**

All purchase matters including medicine purchase are handled by this Division. All purchases including medicines, equipments instruments furniture etc done following Store Purchase Manual. Major equipments purchased during the period are as follows:



Sl. No	Item	Amount	Name of the Supplier
1	300C - 500C Digital Incubator	Rs. 69,000/-	Santhome Scientific Services, Bangalore
2	-860 C Ultra low temperature freezer	Rs.11,00,000/-	M/s. Eppendorf India Limited, Chennai
3	-450 C Deep freezer		
4	Binocular Microscopes (4 Nos)	Rs.1,76,000/- @ Rs.44,000/-	Akshaya Associates, Thalassery
5	Endoscope & Urological Accessories	Rs.32,34,991/-	Mitra Medical Services, LLP
6	Electrophoresis Machine	Rs.9,00,000/-	Malabar Diagnostics, Calicut
7	Elisa Washer	Rs.1,18,000/-	Universal Agencies, Trichur
8	Elisa Reader	Rs.1,25,000/-	A4All Diagnostics Distributors, Calicut
9	High Speed Centrifuge	Rs.46,671/-	Universal Agencies, Trichur
10	Incubator (Slide Incubation)	Rs.66,500/-	Scientific Medical Equipments Ltd, Cochin
11	De-ionized Distilled Water	Rs.3,30,000/-	Aakshaya Associates
12	Horizontal Autoclave	Rs.2,02,797/-	Universal Agencies, Trichur
13	Cryostat	Rs.13,97,000/-	DHR Holding India Pvt. Ltd, Bangalore
14	Equipments for establishing Stem cell Transplantation Unit	Rs.2,67,68,000/-	Span Health Care, Bangalore
15	Centrifuge	Rs.45,000/-	Universal Agencies, Trichur
16	MRI Scanner & Accessories Local Supply items Ancillary equipments	USD 9,48,700/- Rs.40,00,000/- Rs.20,00,000/-	Wipro GE
17	Digital Infusion pumps & Syringe pumps (5 nos each)	Rs.3,35,000/-	Medasis India, Calicut
18	Reagent Storage Refrigerator (2 nos)	Rs.1,76,000/- @ Rs.88,000/-	Santhome Scientific Services, Bangalore
19	Water air jacketed CO2 incubator	Rs.3,45,000/-	Eppendorf India Ltd, Chennai



All medicines related to cancer treatment, i.e, anti-cancer drugs, surgical & disposables, antibiotics, reagents etc;- are purchased through this Division. A total amount of Rs.4,69,52,218/- was spent for the purchase of medicines during the period.

❖ **Accounts**

This division plays a key role in up-keeping the financial matters of the Centre. All works pertaining to preparation of annual budget, salary disbursal, maintaining PF accounts of staff members all payments & receipts, maintenance of all books, ledgers and registers, all banking transactions, auditing etc are handled under this Division.

❖ **Store**

This Division deals with stock handling, maintenance of Central Stock Register, condemnation, disbursement of required items to various Departments/Divisions, printing & stationary etc:-

Conferences, Seminars & Workshop

⇒ A workshop on personality Development and leadership skills was conducted at this Centre by Shri. Narayanan Potty, (Institute of Leadership skills) on 15th & 16th of May 2012.

Facilities Available

Diagnostic Facilities

- ⇒ X-ray : GE DX 525 X-Ray Unit was commissioned in 2005 along with Automatic Film Processing Unit. A GE Genius Portable X-Ray machine is also available in the Department.
- ⇒ Mammography : Has one of the best mammography machine- Hologic Selenia Dimension with 3D mammography, stereotaxic and mammotome biopsy facility. Unit also has CAD facility.
- ⇒ Ultrasound Scan : Three Ultrasound Scanners available - GE LOGIQ 200 Ultrasound Machine, Portable Ultrasound Scanner MUS 602, Color Doppler Ultrasound Scanner (Hitachi EUB).
- ⇒ Major services includes routine abdominal scans, doppler, USG guided biopsies, drainage, pigtail insertion and brachytherapy planning.
- ⇒ CT Scanner : The GE Lightspeed Multi slice CT scanner with GE Advantage Sim Virtual simulation workstations was commissioned in 2007. The major activity includes routine spiral CT scan, CT Angiography, Multi phase studies, guided biopsies, drainage procedures, pigtail insertion and radiotherapy treatment planning.
- ⇒ MRI Scanner: HDxT 1.5T Signa 16 Channel GE MRI scan was commissioned in January 2013. The machine has capability for routine imaging, whole body imaging, whole body DWI, endorectal coils for prostate, rectal and cervix imaging with prostate spectroscopy, dedicated breast coils and non contrast whole body angiography.
- ⇒ PACS : Has GE Centricity PACS.
- ⇒ State of art Clinical Laboratory for all usual tests.
- ⇒ Histo-Pathology Department for Cytological and Histo - pathological examinations.
- ⇒ Rooms for General examinations, Gynec examinations, Dental examinations etc., with an attached area for minor procedures.
- ⇒ Cancer awareness classes and early detection campus for the community.

Clinical Facilities

- ⇒ Linear Accelerator (Varian Clinac iX): This dual energy high end Linear Accelerator is a complete and integrated platform for delivering state of the art Radiation Therapy treatments e.g. 3DCRT/IMRT/RapidArc/IGRT/SBRT/SRS. The system is capable of treat-

ment with 2 Photon Beam Energies and 6 Electron Energies. It is equipped with On Board Imaging System capable of KV Xrays, Online Fluroscopy and Cone Beam CT images for online treatment verification and adaptive radiotherapy. The machine treats about 65 - 70 patients daily with 65 - 70% being treated with RapidArc IMRT. This machine has successfully treated over 700 patients since its commissioning in November 2011.

- ⇒ Nucletron 16 Channel HDR Brachytherapy: The system is capable of delivering brachytherapy treatment to various sites. The Centre practices Intracavitary, Interstitial, Intraluminal and Surface Mould Brachytherapy. The centre is in the process of acquiring a MUPIT applicator for interstitial brachytherapy in pelvic malignancies as well as Fletcher Suite CT/MRI compatible applicator. In addition the treatment planning system is being upgraded to the latest ONCENTRA brachytherapy treatment planning. A dedicated Brachytherapy OT is situated beside the brachytherapy vault.
- ⇒ Tele Cobalt 60: The workhorse of the treatment machine treats about 40 - 50 patients per day. The machine is intergrated with the CMS XiO treatment planning system. Compensator based treatment is offered for all radically treated head and neck cancer patients.
- ⇒ Treatment Planning System: The department has the latest ARIA Oncology Information System along with the ECLIPSE treatment planning system. In addition it has the ADVANTAGE Sim, PLATO and CMS XiO treatment planning systems. The PLATO treatment planning system is being upgraded to the latest ONCENTRA BRACHY treatment planning system.
- ⇒ CT Simulator: The department is in the process of acquiring the latest 16 slice CT Simulator capable of 4D image acquisition. The CT simulator will be exclusively available for the department of radiation oncology and will reduce the waiting list for the advanced treatment substantially. The present CT simulation is being performed on the 4 slice GE CT machine.
- ⇒ Conventional Simulator: The department has a Conventional Simulix Simulator in which all patients are simulated. The images can be fluroscopically transferred to the treatment planning systems.
- ⇒ Mould Room: The department has a well equipped mould room with facility to make custom thermoplastic immobilization masks, vaccum cushions, compensators, Electron cutouts etc.
- ⇒ Outpatient service is being conducted 6 days a week.
- ⇒ Average 1200 outpatient visits a week.
- ⇒ Cancer Palliative Medicine Clinic.
- ⇒ Recognized institution for possession and supply of Oral Morphine.

- ⇒ Operation theater well equipped to perform all major surgical procedures
- ⇒ Endoscopy services with Oesophagogastrotic, Colonoscopic and Bronchoscopic examinations.
- ⇒ Full-fledged Blood Bank with all modern accessories and facilities for component separation.
- ⇒ Day care chemotherapy ward, Separate general wards for male and female in-patients.
- ⇒ Semi payments pay wards and single accommodation paywards
- ⇒ Post operative and pre-operative wards are also attached with this.
- ⇒ 24 hours Pharmacy dispensing all the medicines for cancer patients.

Supportive Facilities

- ⇒ Drug Bank: Drug Bank is formulated for collection of drugs from Doctors in and around Thalassery and also sample medicines issued from various pharmaceutical companies. Such medicines are issued free of cost to the needy poor patients, who are undergoing treatment from this Centre.
- ⇒ Home care services : Home care services provided to patients staying nearby and who are unable to travel to MCC for availing treatment.
- ⇒ Hospital Library for patients and relatives : A unique Hospital library for patients, their relatives and staff is functioning in the centre since 2005. The library is funded by Kerala State Library Council.
- ⇒ Tele Medicine Unit : Telemedicine facility has been started in MCC with financial assistance from NRHM and technical assistance from C-DAC and Kerala State IT mission.
- ⇒ 26 acres of elevated greenery land
- ⇒ 11KV dedicated line, which can drop power up to 2.5MW
- ⇒ Transformer capacity of 1600KVA
- ⇒ DG of 250 KVA and 500KVA
- ⇒ Effluent Treatment Plant with 110 KLD
- ⇒ Incinerator with capacity of 25KG/hr
- ⇒ Open well to cater all needs of the Hospital
- ⇒ Incinerator with capacity of 15kg/hr
- ⇒ Canteen for Patients and staff
- ⇒ Dormitory for bystanders

Patient Welfare Activities

The Patient Welfare Committee was constituted for the smooth functioning of our Patient Welfare Activities has attributed a boost to our patient services and management. The Committee consists of Doctors of different specialties, representatives from Administrative section, Social Scientist and Nursing personnel. The Committee co-ordinates all the welfare activities of the patients who are undergoing treatment at this Centre. It promotes to raise the money for the patient welfare fund from the general public as well as staff members of Malabar Cancer Centre. Majority of the staff members generously donate to this fund. This fund is utilized for the treatment/investigations for the needy patients after proper assessment.

Patient Welfare Schemes

- ❖ Comprehensive Health Care Project for Scheduled Tribe patients.
- ❖ Prime Minister's National Relief Fund
- ❖ Chief Ministers Relief Fund
- ❖ Cancer Suraksha Scheme
- ❖ Thalolam
- ❖ Sneha Santhwanam
- ❖ CHIS PLUS
- ❖ PMRS (Pondicherry Medical Relief Society)
- ❖ Employees State Insurance Credit facility
- ❖ Karunya Benovelent fund

Patient Free Food Scheme:

As most of our patients belong to lower socio-economic strata struggling to earn for their meal, with the financial assistance from philanthropists and like-minded organizations, all in-patients are given food (three times a day) at free of cost.

Patient Welfare Fund:

The Patient Welfare Committee co-ordinates all the welfare activities of the patients who are undergoing treatment at this Centre. It promotes to raise the money for the patient welfare fund from the general public as well as staff members of Malabar Cancer Centre. This fund is utilized for the treatment/investigations for the needy patients after proper assessment.

Hospital Library for Patients and Relatives:

A unique Hospital library for patients, their relatives and staff is functioning in the centre since 2005. The library is funded by Kerala State Library Council.

Home care Services:

Home care services provided to patients staying nearby and who are unable to travel to MCC for availing treatment.

Drug Bank:

Apart from the above a Drug Bank is also formulated for collection of drugs from Doctors in and around Thalassery and also sample medicines issued from various pharmaceutical companies. Such medicines are issued free of cost to the needy poor patients, who are undergoing treatment from this Centre.

Support Groups:

MCC initiates the formation of two support groups for the welfare and rehabilitation of Breast and Colostomy cancer patients;

- 1) Thejas : Thejas (Breast Support group) is started on 30-09-2009

President : Smt. Pushpa Antony

Secretary : Sr. Dissy mol

Convener : Dr. Saina Sunil Kumar, Dept. of Cancer Registry and Epidemiology

- 2) Spandhanam : Ostomy Association started on 21-11-2011.?

Educational Programmes and activities

With the increased incidence of cancer, more institutions are getting equipped for treatment of cancer. We realize the need for focused training in oncology, especially for medical and paramedical courses. This is a step towards better care for patients in the present milieu. It is already proposed to develop MCC as a Post-Graduate Institute of Oncology.

Regular Academic Programs:

All new cases are presented in the Daily Multi Specialty Board which are reviewed and decisions on treatment taken accordingly. Interactive discussions on a specific topic are carried out on all Wednesdays afternoon in the Radiation Oncology Cub. All Thursday morning, lectures on the recent trends in oncological care by one faculty are carried out in the Centre. On Saturdays morning, Journal club/ lecture/ morbidity meet are carried out in the centre. Apart from the regular academic programs, Continuing Medical Education Program for Doctors and Post-Graduate Students of nearby Medical Colleges are organized by MCC.

Teaching Courses at MCC :

Teaching Courses at MCC			
Sl No	Course	Duration	University/ Board
1	B. Sc MRT, (Medical Radiology Technology)	4 Years	Kannur University
2	Basic Certificate Course in Community Palliative Nursing(BCCCPN)	6 weeks	Institute of Palliative Medicine, Kozhikkode
3	Certificate Course in Community Palliative in Auxiliary Nursing Course (CCPAN)	3 Months	Institute of Palliative Medicine, Kozhikkode
4	Fellowship in Head and neck oncology	1 Year	Institutional fellowship
5	Fellowship Programme in High Precision Radiotherapy	1 Year	Institutional fellowship
6	Fellowship in Surgical Oncology	2 Years	Institutional fellowship
7	Indian Association of Palliative Care Courses		
8	Distance education course in Cancer Pain and Palliative Medicine		

Bachelor of Science in Medical Radiological Technology (B.Sc. (MRT))

Since its inception Malabar Cancer Centre, Thalassery, has grown tremendously in terms of modern equipments, treatment and prevention of cancer. With increasing incidence of cancer, more institutions need to get equipped for treatment of cancer and we realize the need for focused training in oncology. This is a step towards better care for patients in the present milieu and moulding professionally competent Radiology Technologists. Radiological Technology deals with the application of different types of radiations and allied tools for the diagnosis and treatment of diseases. Radiations of significance are all the ionizing and non ionizing radiations like the complete electromagnetic spectrum - radio waves to cosmic radiation, ultrasound waves and particle type atomic radiations. Besides, use of nuclear magnetic resonance and application of various radio nuclides in medicine also form significant components of this programme.

Graduates in Radiological Technology are professionals who mostly work as technologists in medical institutions. They are in great demand both within India and abroad. Potential for employment abroad for such professionals is tremendous and continues to register a constant upward trend only. Besides, industry engaged in the design, manufacture, and sale of radiological systems of varied types need these graduates as application specialists. Thus, successful candidates who complete this course are sure to get useful employment in the public and private sectors in India as well as abroad. There is a great demand for these professionals in all the developed and developing countries and the present annual intake in such courses worldwide is far short of the requirements. Hence, career opportunities for radiology technologists will continue to be bright and rewarding in the near and distant future.

Batch strength : 25

Duration : 4 Years.

FINANCIAL STATEMENTS



REJEESH & ASSOCIATES
CHARTERED ACCOUNTANTS

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0490 2320492, 2341402 (R)
Mobile : 9847175219
e-mail : tkrfca@rediffmail.com

S 2, Town Hall Complex, T.C. Road, Thalassery - 670 104

AUDITORS' REPORT

To

THE MEMBERS,
MALABAR CANCER CENTRE SOCIETY,
THALASSERY.

Gentlemen,

We have audited the accompanying financial statements of **MALABAR CANCER CENTRE SOCIETY, THALASSERY, KANNUR Dt.**, which comprise the balance sheet as at 31st March, 2013 and income and expenditure account for the year ended 31-03-2013.

Management's Responsibility for the Financial Statements

Management is responsible for the preparations of these financial statements. This responsibility includes the design, implementation and maintenance of internal control relevant to the preparation of the financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with the standards on auditing issued by the Institute of Chartered Accountants of India. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain the reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedure to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risks of assessments, the auditor considers internal control relevant to the society's preparation and fair presentation of the financial statements in order to design audit procedure that are appropriate in the circumstances. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of the accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

On the basis of our audit, we report that;

- a) The fixed assets and current assets have been physically verified by the management. In our opinion and according to the information and explanations given to us, the procedures of physical verification of fixed assets and current assets followed by the management are reasonable and adequate to the size of the entity.
- b) The balances shown under sundry creditors for advances, sundry creditors, sundry debtors, deposits and advances etc. are subject to confirmation.

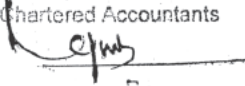
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- c) We have obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purpose of our audit.
- d) In our opinion, proper books of accounts have been kept by the society so far as appears from our examination of such books.
- e) The balance sheet and income and expenditure account dealt with by this report is in agreement with the books of accounts.
- f) Subject to the above remarks, in our opinion and to the best of our information and according to the explanations given to us, the said balance sheet and income and expenditure account read together with 'Schedule- XXVII- significant accounting policies and notes on accounts give a true and fair view;
- i) In so far as it relates to the balance sheet, of the state of affairs of the society as at 31st March, 2013 and
- ii) In the case of income and expenditure account, of the excess of expenditure over income for the year ended 31-03-2013.

30-09-2013



For REJEESH & ASSOCIATES
Chartered Accountants


T. K. REJEESH
(Proprietor)
M. No. 203015

MALABAR CANCER CENTRE SOCIETY, THALASSERY, KANNUR
INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31-03-2013

Figures for the previous year	Expenditure	Sch. No	Figures for the Current year	Figures for the - previous year	Income	Sch. No	Figures for the Current year
Rs. 55,66,239.00	To Opening stock of drugs and consumables		Rs. 92,18,497.00	Rs. 29,97,569.00	By Donation in kind	Rs.	Rs. 8,29,663.00
Rs. 2,76,21,026.00	" Pharmacy purchases		Rs. 5,41,56,311.00	Rs. 5,00,02,500.00	" Grant in aid - Revenue grant	I Rs.	Rs. 6,00,00,000.00
Rs. 3,88,35,701.00	" Salary, stipend, wages and allowances	VII	Rs. 6,31,97,926.00	Rs. 2,18,66,605.00	" Hospital revenue	II Rs.	Rs. 3,24,66,904.00
Rs. 93,94,126.00	" Hospital expenses	VIII	Rs. 1,77,28,329.00	Rs. 2,57,90,497.00	" Pharmacy collection	Rs.	Rs. 5,26,78,722.00
Rs. 39,49,096.00	" Electricity charges	IX	Rs. 72,58,647.00	Rs. 1,550.00	" Agricultural income	Rs.	Rs. 81,918.00
Rs. 4,94,348.00	" Printing and stationery	X	Rs. 5,42,175.00	Rs. 52,846.00	" VAT collection	Rs.	Rs. 73,801.00
Rs. 4,23,961.00	" Postage and telephone expenses		Rs. 4,95,515.00	Rs. 92,18,497.00	" CLOSING STOCK, As valued and certified by the society	III Rs.	Rs. 1,27,43,343.00
Rs. 12,83,519.00	" Employer's contribution to provident/pension fund	XI	Rs. 17,22,934.00	Rs. 12,84,550.00	" Electricity charges collection from KSEB	IV Rs.	Rs. 45,22,640.00
Rs. 59,518.00	" Rates and taxes		Rs. 40,899.00	Rs. 28,59,987.00	" Miscellaneous income		
Rs. 3,09,453.00	" Travelling and conveyance expenses		Rs. 3,61,674.00	Rs. 92,18,497.00	" Interest received on bank accounts/deposits	V Rs.	Rs. 44,46,513.00
Rs. 7,10,425.00	" Vehicle running and maintenance expenses		Rs. 9,23,628.00	Rs. 48,35,688.00	" Income from ambulance service	Rs.	Rs. 77,920.00
Rs. 14,25,190.00	" Repairs and maintenance	XII	Rs. 20,66,063.00	Rs. 24,300.00	" Insurance claim	Rs.	Rs. 99,837.00
Rs. 16,71,657.00	" Security service charges	XIII	Rs. 24,39,245.00	Rs. 3,80,422.00	" Contribution towards various activities	VI Rs.	Rs. 12,11,367.00
Rs. 21,49,358.00	" Cleaning charges	XIV	Rs. 27,15,307.00	Rs. 3,07,071.00	" Excess of expenditure over income transferred to balance sheet		
Rs. 4,957.00	" Subscription		Rs. 2,96,520.00	Rs. 1,42,17,857.00			
Rs. 84,384.00	" New departments inauguration expenses		Rs. 3,18,848.00	Rs. 1,42,17,857.00			
Rs. 1,02,743.00	" Pain and palliative care expenses		Rs. 14,17,070.00				
Rs. 4,74,116.00	" Patients free food expenses		Rs. 1,05,338.00				
Rs. 84,270.00	" Auditors' fee		Rs. 21,009.00				
Rs. 36,948.00	" Professional charges		Rs. 73,801.00				
Rs. 52,846.00	" Value Added Tax		Rs. 12,922.00				
Rs. 22,023.00	" Bank commission		Rs. 6,05,000.00				
Rs. 6,47,500.00	" Insurance charges		Rs. 1,99,621.00				
Rs. 1,76,442.00	" Advertisement charges		Rs. 23,30,948.00				
Rs. 4,33,096.00	" Recruitment expenses		Rs. 11,59,466.00				
Rs. 8,19,407.00	" Annual maintenance contract charges		Rs. 1,54,133.00				
Rs. 1,92,455.00	" Community Oncology expenses		Rs. 35,936.00				
Rs. 36,665.00	" Hospitality expenses		Rs. 1,17,304.00				
Rs. 29,318.00	" Meeting expenses		Rs. 2,88,488.00				
Rs. 70,796.00	" Miscellaneous expenses		Rs. 4,59,86,932.00				
Rs. 3,66,78,356.00	" Depreciation written off						
Rs. 13,38,39,939.00			Rs. 21,62,68,788.00	Rs. 13,38,39,939.00			Rs. 21,62,68,788.00

For REJESH & ASSOCIATES
Chartered Accountants

AUDITORS' REPORT
Vide our separate report of even date attached

DIRECTOR
MALABAR CANCER CENTRE

THALASSERY,
30-09-2013

J. S. REJESH
(Chartered Accountant)
M. No. 203015

MALABAR CANCER CENTRE SOCIETY, THALASSERY, KANNUR.
BALANCE SHEET AS AT 31-03-2013

Figures for the Previous year	LIABILITIES	SCH No	Figures for the Current year	Figures for the Previous year	ASSETS	SCH No	Figures for the Current year
Rs. 26,95,96,069.82	CAPITAL FUND	XV	Rs. 30,96,52,467.82	Rs. 24,35,60,999.00	FIXED ASSETS	XXI	Rs. 28,98,04,265.00
Rs. 35,33,17,761.00	GRANT-IN-AID - CAPITAL GRANT	XVI	Rs. 47,07,08,831.00	Rs. 8,36,28,595.00	WORK IN PROGRESS UNDER PLAN FUND	XXII	Rs. 10,04,34,538.00
Rs. 21,81,233.00	SUNDRY CREDITORS FOR ADVANCES	XVII	Rs. 7,11,89,862.00	Rs. 5,30,01,057.00	DEPOSITS AND ADVANCES	XXIII	Rs. 1,58,62,476.00
Rs. 2,39,49,129.28	SECURITY DEPOSIT	XVIII	Rs. 2,79,81,852.50	Rs. 30,00,247.00	SUNDRY DEBTORS	XXIV	Rs. 2,53,41,832.00
Rs. 1,02,81,655.50	SUNDRY CREDITORS	XIX	Rs. 1,49,51,300.50	Rs. 92,20,730.00	CLOSING STOCK	XXV	Rs. 1,28,52,709.00
Rs. 1,67,043.00	PATIENTS WELFARE FUND		Rs. 4,15,650.00	Rs. 26,90,63,819.10	CASH AND BANK BALANCES	XXVI	Rs. 45,38,81,189.32
Rs. 1,43,055.50	SEMINAR EXPENSE FUND		Rs. 7,01,916.50	Rs. 1,700.00	BALANCE WITH REVENUE AUTHORITIES: TDS refundable		Rs. 9,200.00
Rs. 18,41,200.00	OUTSTANDING LIABILITIES	XX	Rs. 25,84,329.00		SIGNIFICANT ACCOUNTING POLICIES AND NOTES ON ACCOUNTS	XXVII	
Rs. 66,14,77,147.10			Rs. 89,81,86,209.32	Rs. 66,14,77,147.10			Rs. 89,81,86,209.32

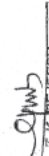
THALASSERY,
30-09-2013


DIRECTOR
MALABAR CANCER CENTRE

AUDITORS' REPORT

Vide our separate report of even date attached

For REJEESH & ASSOCIATES
Chartered Accountants


T. K. REJEESH
(Proprietor)
M. No. 203015

MALABAR CANCER CENTRE SOCIETY, THALASSERY, KANNUR

SCHEDULE: XXVII:

SIGNIFICANT ACCOUNTING POLICIES AND NOTES ON ACCOUNTS FORMING PART OF ACCOUNTS FOR THE YEAR ENDED 31ST MARCH 2013.

(i) SIGNIFICANT ACCOUNTING POLICIES:

(1) BASIS OF PREPARATION OF FINANCIAL STATEMENTS:

- (a) The financial statements have been prepared under the historical cost convention and are based on accrual basis of accounting.
- (b) Accounting policies not specifically referred to otherwise are consistent with generally accepted accounting principles followed by the Society.

(2) GRANT IN-AID:

Grant in aid received from Govt. of Kerala under non plan fund has been considered as revenue grant and credited in the income and expenditure account and Grant in aid received from Govt. of Kerala, MPLAD Scheme and Govt. of India for Tertiary Cancer Centre under plan fund for infrastructure development have been considered as capital grant and shown in the balance sheet.

(3) FIXED ASSETS:

Fixed assets are stated at cost of acquisition less accumulated depreciation.

(4) DEPRECIATION:

Depreciation on fixed assets has been charged under written down value method at the rates prescribed under the Income-Tax Rules.

(5) CLOSING STOCK:

Closing Stock comprises of stock of drugs, chemicals, consumables and stationery. Valuation has been made on the basis of cost price or net realisable value whichever is less.

(6) RETIREMENT BENEFITS:

No provision has been made in the accounts for the accrued liability of retirement benefits due to the employees as on 31-03-2013, as the same is accounted on cash basis.

(7) REVENUE RECOGNITION:

Revenue is generally recognized on accrual basis. However, in the case of inpatients the amount due by them as on 31.03.2013 on various accounts like Room rent, Investigation charges, Surgery charges, Service charges etc. are billed and accounted only at the time of discharge.

(8) PROVISIONS, CONTINGENT LIABILITIES AND CONTINGENT ASSETS:

A provision is recognized when the entity has an obligation as a result of a past event, which can be reliably estimated and it is certain that an outflow of resources will be required to settle such obligation. Contingent liabilities are not recognized but are disclosed at their estimated value in notes on accounts. Contingent assets are neither recognized nor disclosed in the financial statements.

(9) IMPAIRMENT OF ASSETS:

An asset is treated as impaired when the carrying cost of such assets exceeds its recoverable value. The carrying cost of assets are reviewed at each balance sheet date to determine if there is any indication of impairment based on external/internal factors.

(10) WELFARE FUND:

A patients' welfare fund is created with the donations received from the discharged patients, their relatives, general public and voluntary contribution from employees. Amount receivable from discharged/ deceased patients which has no scope for recovery, outside investigation charges, medicines, food expenses, and traveling expenses etc. for the poor patients are generally debited to this fund.

B. NOTES ON ACCOUNTS:

1. The Society is in possession of the building and hospital equipments gifted by a foreign source. The value of the said assets were not taken into account for want of proper details from the donor till 31-03-2005. Since the AG's audit team had suggested to capitalise the value of assets donated by SNC Lavlin, the management of the society had made a valuation of assets as on 31-03-2001 as Rs.10,85,37,233/- and it was accounted as Fixed assets and added to the Capital fund on 01-04-2005. The accumulated depreciation upto 31-03-2005 amounting to Rs.4,51,82,866/- was accounted as prior period expenses in the accounts for the year ended 31-03-2006. Since then normal depreciation on the above said fixed assets has been charged in the accounts.
2. Though the Society has obtained prior permission from the Ministry of Home Affairs, Government of India, vide their letter No: 11/21022/94(506) / 2000-FCRA-IV dated 26/04/2001 under section 6(IA) of Foreign Contribution (Regulation) Act, 1976, for the receipt of foreign contribution to the tune of Rs. 25.30 crores from M/s SNC Lavlin Inc. Canada, no foreign contribution has been received during the year ended 31-03-2013.
3. The Society is in possession of land acquired and handed over by the state govt. It is learned that some of the land owners have filed suits for enhanced compensation on land acquisition. The Sub Court, Thalassery has ordered enhancement in few cases. The govt. of kerala has filed appeals before the Hon'ble High Court against the said enhancement and the High Court has ordered stay in few cases. As the land is being acquired by the state govt. and they are fighting against the suits, we have not made any provision for enhanced compensation in the accounts for the year ended 31-03-2013.
4. Donation received in kind are taken into fixed assets on an estimated value certified by the management and normal depreciation has been charged on it at the rate allowable under the I.T. Rules.
5. An amount of Rs.10,000/- to M/s. Heavy Engineering Co., towards inspection fee Rs.9,750/- excess payment made to M/s. Mittal International, Kannur in 2001-'02 and Rs.15,000/- paid to M/s. Aqua Chemicals and Systems Ltd, Chennai in 2002-'03 are still shown under deposits and advances pending settlement.
6. Closing stock value consists of expired medicines and amount receivable on account of expired medicines returned amounting to Rs.6,79,419/-. Usually expired medicines are either replaced or value of such medicines reimbursed by the suppliers. Hence no provision has been made in the accounts as on 31.03.2013.
7. Out of the capital grant received under plan fund, the amount utilized for infrastructure development and put in to use during the year is transferred to Capital Fund and the concerned assets are shown under fixed assets and depreciation charged accordingly. However the amount utilized for infrastructure development which are not yet commissioned is shown under work in progress in the Balance sheet as at 31-03-2013.
8. The society has not received any intimation from suppliers regarding their status under the Micro, Small and Medium Enterprises Development Act, 2006 and hence disclosures, if any, relating to amount unpaid as at the year end together with the interest paid/payable as required under the said Act have not been furnished.
9. The contributions received from suppliers and outsiders are credited in an account named seminar expense fund to meet the seminar expenses of academic staff.
10. Previous year's figures have been regrouped / reclassified wherever necessary in order to suit current year's disclosure.



SCHEDULE : XXI- FIXED ASSETS:

PARTICULARS	GROSS BLOCK				DEPRECIATION				NET BLOCK	
	ADDITION / DELETION		Total	As on 31-03-2013	Upto 31-03-2012	Rate	For the year	Upto 31-03-2013	As on 31-03-2012	As on 31-03-2013
	Before 01-10-2012	After 01-10-2012								
1 LAND	1,45,67,000	-	-	1,45,67,000	-	-	-	-	1,45,67,000	1,45,67,000
2 BUILDING	87,61,323	37,771	5,71,586	93,32,909	28,14,989	10%	6,25,101	34,40,090	59,46,334	58,92,819
3 PARTITIONS AND CURTAINS	4,97,696	3,34,758	1,77,586	10,10,040	1,64,834	15%	1,13,462	2,78,296	3,32,862	7,31,744
4 FURNITURE AND FITTINGS	14,71,465	-	-	14,71,465	7,20,357	10%	75,111	7,95,468	7,51,108	6,75,997
5 COMPUTER SYSTEM	16,27,429	2,34,575	65,200	19,27,204	14,49,329	60%	2,67,165	17,16,494	1,78,100	2,10,710
6 BOOKS	7,39,497	32,646	1,29,641	9,01,784	3,53,966	15%	72,450	4,26,416	3,85,531	4,75,368
7 ELECTRICAL FITTINGS	2,23,858	5,700	83,478	3,13,036	55,201	10%	21,610	76,811	1,68,657	2,36,225
8 COMMUNICATION EQUIPMENTS	81,284	3,990	27,535	1,08,819	50,476	15%	6,986	57,462	30,808	51,357
9 GENERAL EQUIPMENTS	1,23,041	-	-	1,23,041	74,874	15%	7,225	82,099	48,167	40,942
10 FAX MACHINE	34,800	-	-	34,800	28,068	15%	1,010	29,078	6,732	5,722
11 BOREWELL	71,446	-	-	71,446	66,011	15%	815	66,826	5,435	4,620
12 WATER SUPPLY AND SANITARY FITTINGS	1,60,966	-	-	1,60,966	1,44,037	15%	2,539	1,46,576	16,929	14,390
13 REFRIGERATOR	1,81,639	-	10,400	1,92,039	1,10,151	15%	11,503	1,21,654	71,488	70,385
14 AIR CONDITIONER	3,66,800	38,000	1,89,190	5,93,990	1,66,710	15%	49,903	2,16,613	2,00,090	3,77,377
15 OXYGEN CYLINDER	23,328	-	-	23,328	20,962	15%	355	21,317	2,366	2,011
16 CLINICAL EQUIPMENTS	1,70,803	15,000	15,000	1,85,803	1,00,070	15%	12,860	1,12,930	70,733	72,873
17 CLINICAL INSTRUMENTS	5,37,779	-	13,552	5,51,331	2,16,078	15%	49,272	2,65,350	3,21,701	2,85,981
18 CLOCKS	3,605	-	-	3,605	2,819	15%	118	2,937	786	668
19 TYPE WRITER	4,000	-	-	4,000	3,527	15%	71	3,598	473	402
20 WATER BED	24,500	-	-	24,500	10,398	15%	2,115	12,513	14,102	11,987
21 NOTICE BOARD	11,340	-	-	11,340	7,375	15%	595	7,970	3,965	3,370
22 TV STAND	1,500	-	-	1,500	1,082	10%	42	1,124	418	376

[Signature]
DIRECTOR
MALABAR CANCER CENTRE

PARTICULARS

PARTICULARS	GROSS BLOCK			DEPRECIATION			NET BLOCK			
	ADDITION / DELETION			Rate	For the year	Up to	As on			
	Before	After	Total				31-03-2012	31-03-2013		
As on 01-04-2012	01-10-2012	01-10-2012	31-03-2013	Up to 31-03-2012	Up to 31-03-2013	Up to 31-03-2013	As on 31-03-2012	As on 31-03-2013		
23 CD PLAYER	6,600	-	-	6,600	5,220	15%	207	5,427	1,380	1,173
24 TELEVISION	62,240	-	47,800	1,10,040	17,017	15%	10,368	27,385	45,223	82,655
25 CHEST REFRIGERATOR	-	-	-	-	-	-	-	-	-	-
WITH STABILIZER	1,50,000	-	-	1,50,000	1,34,785	15%	2,282	1,37,067	15,215	12,933
26 CANON DIGITAL LASER COPIER	1,37,150	12,400	12,400	1,49,550	93,195	15%	8,453	1,01,648	43,955	47,902
27 SLIDE PROJECTOR	14,644	-	-	14,644	12,334	15%	347	12,681	2,310	1,963
28 WHEEL CHAIR	39,200	-	69,500	1,08,700	13,241	15%	9,106	22,347	25,959	86,353
29 AUTOMATIC FILM PROCESSOR	3,849	-	-	3,849	3,329	15%	78	3,407	520	442
30 FLAME PHOTOMETER	45,000	-	-	45,000	35,533	15%	1,420	36,953	9,467	8,047
31 SOLAR WATER HEATER	1,37,975	-	-	1,37,975	1,30,170	80%	6,244	1,36,414	7,805	1,561
32 DRINKING WATER PIPE	-	-	-	-	-	-	-	-	-	-
LINING AND PUMP	4,54,782	7,40,739	-	11,95,521	3,38,583	15%	1,28,541	4,67,124	1,16,199	7,28,397
33 50 KVA DIESEL GENERATOR	5,06,227	-	-	5,06,227	3,84,514	15%	18,257	4,02,771	1,21,713	1,03,456
34 SOFTWARE FOR ENDOSCOPY	49,258	-	-	49,258	48,896	60%	217	49,113	362	145
35 LAPAROSCOPE	10,49,849	-	-	10,49,849	8,71,671	40%	71,271	9,42,942	1,78,178	1,06,907
36 OLYMPUS BRONCHO VIDEOSCOPE	7,00,000	-	-	7,00,000	6,71,160	40%	11,536	6,82,696	28,840	17,304
37 OPEN WELL AND PUMP HOUSE	9,03,746	-	-	9,03,746	6,42,998	15%	39,112	6,82,110	2,60,748	2,21,636
38 MUSIC SYSTEM	1,818	-	-	1,818	1,235	15%	87	1,322	583	496
39 TOOLS	21,881	11,064	-	46,810	7,961	15%	4,787	12,748	13,920	34,062
40 VACCUM CLEANER	4,995	-	16,980	21,975	3,253	15%	1,535	4,788	1,742	17,187
41 INCINERATOR CHIMNEY	2,46,221	-	-	2,46,221	1,67,288	15%	11,840	1,79,128	78,933	67,093
42 TELECOBALT MACHINE	2,96,11,679	-	-	2,96,11,679	2,14,52,449	40%	32,63,692	2,47,16,141	81,59,230	48,95,538
43 FILM STORAGE BOX	16,594	-	-	16,594	10,806	15%	868	11,674	5,788	4,920
44 O2N2 MANIFOLD SYSTEM	1,14,020	-	-	1,14,020	57,180	15%	8,526	65,706	56,840	48,314

DIRECTOR
MALABAR CANCER CENTRE

PARTICULARS	GROSS BLOCK			DEPRECIATION				NET BLOCK		
	ADDITION / DELETION		Total	Rate	For the year	Upto 31-03-2013	As on 31-03-2012	Upto 31-03-2013	As on 31-03-2012	As on 31-03-2013
	Before 01-10-2012	After 01-10-2012								
45 LCD PROJECTOR WITH BOARD	1,88,350	-	40,000	40,000	15%	17,137	94,104	1,11,241	94,246	1,17,109
46 AMPLIFIER WITH MICROPHONE	22,665	-	6,000	6,000	15%	1,643	14,715	16,358	7,950	12,307
47 MAMMOGRAPHY WITH STEREOTACTIC ATTACHMENT	26,00,000	-	-	26,00,000	15%	39,559	23,36,276	23,75,835	2,63,724	2,24,165
48 500 MA X RAY WITH FLUROSCOPY DX	6,92,000	-	-	6,92,000	15%	10,529	6,21,810	6,32,339	70,190	59,661
49 60 MA X RAY MOBILE UNIT	1,20,000	-	-	1,20,000	15%	1,826	1,07,828	1,09,654	12,172	10,346
50 ULTRASOUND SCANNER	36,09,150	-	-	36,09,150	15%	3,44,503	13,12,462	16,56,965	22,96,688	19,52,185
51 REDSIDE MONITOR(DASH 2000)/ OT MONITOR (DASH 3000)	22,15,000	-	-	22,15,000	15%	1,34,369	13,19,205	14,53,574	8,95,795	7,61,426
52 3 CHANNEL ECG MACHINE WITH PRINTER/MAC 500 SMART	61,000	-	-	61,000	15%	928	54,813	55,741	6,187	5,259
53 DEFIBRILLATOR CUM MONITOR (CARDIO SERVICE)	5,30,000	-	-	5,30,000	40%	51,680	4,00,800	4,52,480	1,29,200	77,520
54 DARK ROOM ACCESSORIES SET	87,000	-	-	87,000	15%	1,324	78,175	79,499	8,825	7,501
55 SEMI AUTO ANALYSER	3,70,150	-	-	3,70,150	15%	12,712	2,85,403	2,98,115	84,747	72,035
56 AUTOMATED ELISA PLATE READER AND AUTOMATED PLATE WASHER A UTHOS FLUIDE	4,95,000	-	-	4,95,000	15%	7,531	4,44,791	4,52,322	50,209	42,678
57 BLOOD GAS ANALYSER	9,35,000	-	-	9,35,000	15%	45,104	6,34,305	6,79,409	3,00,695	2,55,591
58 ELECTROLYTE ANALYSER	1,75,000	-	-	1,75,000	15%	2,663	1,57,249	1,59,912	17,751	15,088
59 ELECTROPHORESIS WITH DENSITOMETER	6,66,600	-	-	6,66,600	15%	10,142	5,98,985	6,09,127	67,615	57,473
60 AUTOMATIC BLOOD CELL										


 DIRECTOR
 MALABAR CANCER CENTRE

PARTICULARS	GROSS BLOCK				DEPRECIATION				NET BLOCK		
	ADDITION / DELETION		Total	As on 31-03-2013	Upto 31-03-2012	Rate	For the year	Upto 31-03-2013	As on 31-03-2012	As on 31-03-2013	
	As on 01-10-2012	Before 01-10-2012									
COUNTER (18 PARAMETERS)	5,75,000	-	-	5,75,000	5,16,677	15%	8,748	5,25,425	58,323	49,575	
61 COAGULATION/FIBRIN TIMER (COAGULOMETER)	2,64,000	-	-	2,64,000	2,37,222	15%	4,017	2,41,239	26,778	22,761	
62 BINOCULAR MICROSCOPE	1,89,200	1,76,000	-	3,65,200	71,198	15%	44,100	1,15,298	1,18,002	2,49,902	
63 BACK-UP CALORIEMETER	40,572	-	-	40,572	36,456	15%	617	37,073	4,116	3,499	
64 LABORATORY MEDIUM DUTY TUBE SEALER	1,56,800	-	-	1,56,800	1,40,896	15%	2,386	1,43,282	15,904	13,518	
65 ELECTRONIC BALANCE	1,07,085	-	-	1,07,085	96,223	15%	1,629	97,852	10,862	9,233	
66 CYTO CENTRIFUGE	3,02,500	-	-	3,02,500	2,71,816	15%	4,603	2,76,419	30,684	26,081	
67 BINOCULAR RESEARCH MICROSCOPE	43,705	-	-	43,705	39,271	15%	665	39,936	4,434	3,769	
68 BINOCULAR RESEARCH MICROSCOPE	99,273	-	-	99,273	89,204	15%	1,510	90,714	10,069	8,559	
69 BLOOD BANK REFRIGERATOR	3,92,080	-	-	3,92,080	1,06,886	15%	42,779	1,49,665	2,85,194	2,42,415	
70 BLOOD SHAKER WEIGHT MONITOR	1,12,000	-	-	1,12,000	1,00,640	15%	1,704	1,02,344	11,360	9,656	
71 HOT AIR OVEN	1,10,073	-	-	1,10,073	98,907	15%	1,675	1,00,582	11,166	9,491	
72 INCUBATOR	54,000	-	-	54,000	48,523	15%	822	49,345	5,477	4,655	
73 WATER BATH	20,000	-	-	20,000	13,480	15%	978	14,458	6,520	5,542	
74 AUTOCLAVE (VERTICAL)	90,800	-	-	90,800	38,342	15%	7,869	46,211	52,458	44,589	
75 LAMINAR FLOW CABINET (HORIZONTAL & VERTICAL)	1,11,843	-	-	1,11,843	1,00,498	15%	1,702	1,02,200	11,345	9,643	
76 PH METER	8,000	10,000	-	18,000	7,188	15%	1,622	8,810	812	9,190	
77 WATER DE-IONIZER	38,500	-	-	38,500	34,594	15%	586	35,180	3,906	3,320	


 DIRECTOR
 MALABAR CANCER CENTRE

PARTICULARS	GROSS BLOCK				DEPRECIATION				NET BLOCK	
	ADDITION / DELETION				Upto 31-03-2012	Rate	For the year	Upto 31-03-2013	As on 31-03-2012	As on 31-03-2013
	As on 01-04-2012	Before 01-10-2012	After 01-10-2012	Total						
78 VDRL ROTATOR	11,000	-	-	-	9,885	15%	167	10,052	1,115	948
79 MICROTOME CRYSTAT AUTOMATIC	2,26,600	-	-	-	2,03,615	15%	3,448	2,07,063	22,985	19,537
80 BONE DECALCIFIER	14,850	-	-	-	13,344	15%	226	13,570	1,506	1,280
81 ROTARY MICROTOME	35,000	-	-	-	31,450	15%	533	31,983	3,550	3,017
82 KNIFE SHARPNER	24,000	-	-	-	21,566	15%	365	21,931	2,434	2,069
83 ELECTRIC TISSUE FLOAT BATH	8,000	-	-	-	7,188	15%	122	7,310	812	690
84 AUTOMATIC SLIDE STAINER	72,600	-	-	-	65,236	15%	1,105	66,341	7,364	6,259
85 TISSUE PROCESSOR AUTOMATIC	80,080	-	-	-	71,957	15%	1,218	73,175	8,123	6,905
86 VORTEX MIXER	10,890	-	-	-	9,785	15%	166	9,951	1,105	939
87 GENERAL PURPOSE CENTRIFUGE	66,890	-	-	-	51,122	15%	2,365	53,487	15,768	13,403
88 LABORATORY FURNITURE	2,00,000	-	2,873	2,873	1,37,238	10%	6,420	1,43,658	62,762	59,215
89 WEIGHING BALANCE	38,500	-	-	-	34,594	15%	586	35,180	3,906	3,320
90 ELECTRONIC MICROSCOPE (MONOSCOPE)	8,000	-	-	-	7,188	15%	122	7,310	812	690
91 ANALYTIC MAX 200 gm SENSITIVITY 0.1 mg PRECISION	38,500	-	-	-	34,594	15%	586	35,180	3,906	3,320
92 VIDEO ENDOSCOPY SET	23,90,000	-	-	-	22,18,877	40%	68,449	22,87,326	1,71,123	1,02,674
93 ANAESTHESIA MACHINE WITH VENTILATOR	5,17,000	-	-	-	4,79,983	40%	14,807	4,94,790	37,017	22,210
94 OT TABLE (GENERAL SURGERY)	94,000	-	-	-	84,466	15%	1,430	85,896	9,534	8,104


DIRECTOR
MALABAR CANCER CENTRE

PARTICULARS

**GROSS BLOCK
ADDITION / DELETION**


DEPRECIATION

NET BLOCK

	As on	Before	After	Total	As on	Upto	Rate	For the year	Upto	As on	As on
	01-04-2012	01-10-2012	01-10-2012		31-03-2013	31-03-2012		31-03-2013	31-03-2013	31-03-2013	31-03-2012
95 OT LIGHT-CEILING MOUNTED	92,000	-	-	-	92,000	82,668	15%	1,400	84,068	9,332	7,932
96 OT LIGHT- MOBILE	15,000	-	-	-	15,000	13,479	15%	228	13,707	1,521	1,293
97 SURGICAL DIATHERMY	4,34,500	-	-	-	4,34,500	1,73,598	15%	39,135	2,12,733	2,60,902	2,21,767
98 SUCTION MACHINE	1,14,222	-	-	-	1,14,222	23,085	15%	13,671	36,756	91,137	77,466
99 INFUSION PUMP	46,000	-	-	-	46,000	41,334	15%	700	42,034	4,666	3,966
100 SYRING PUMP	85,000	-	1,45,000	1,45,000	2,30,000	50,294	15%	16,081	66,375	34,706	1,63,625
101 NEBULIZER	11,500	-	2,700	2,700	14,200	5,842	15%	1,051	6,893	5,658	7,307
102 HIGH PRESSURE AUTOCLAVE	26,000	-	-	-	26,000	23,363	15%	396	23,759	2,637	2,241
103 STERILIZER HIGH PRESSURE											
RECTANGULAR, HORIZONTAL	3,95,000	-	-	-	3,95,000	3,54,934	15%	6,010	3,60,944	40,066	34,056
104 PULSE OXIMETER	1,40,000	-	-	-	1,40,000	1,25,799	15%	2,130	1,27,929	14,201	12,071
105 VENTILATOR MONNELL D	2,40,000	-	-	-	2,40,000	2,35,733	40%	1,707	2,37,440	4,267	2,560
106 HOSPITAL FURNITURES	30,73,996	79,560	83,080	1,62,640	32,36,636	15,82,435	10%	1,61,266	17,43,701	14,91,561	14,92,935
107 OFFICE FURNITURES	20,52,503	7,718	1,27,199	1,34,917	21,87,420	7,66,830	10%	1,35,699	9,02,529	12,85,673	12,84,891
108 INCINERATOR	4,40,000	-	-	-	4,40,000	3,95,370	15%	6,695	4,02,065	44,630	37,935
109 DENTAL CHAIR	2,65,000	-	-	-	2,65,000	1,75,764	15%	13,385	1,89,149	89,236	75,851
110 OT AND WARD, OP LAB EQUIP- MENTS AND ACCESSORIES	19,16,962	-	3,00,000	3,00,000	22,16,962	10,00,494	15%	1,59,970	11,60,464	9,16,468	10,56,498
111 VACUUM CIRCUIT BREAKER	3,77,000	54,502	-	54,502	4,31,502	2,82,873	10%	14,863	2,97,736	94,127	1,33,766
112 TRANSFORMER 1600 KVA	17,85,000	-	-	-	17,85,000	13,39,332	10%	44,567	13,83,899	4,45,668	4,01,101
113 DG SET AND ACCESSORIES	17,68,000	-	25,668	25,668	17,93,668	13,26,577	10%	45,426	13,72,003	4,41,423	4,21,665
114 ELEVATOR	10,30,000	-	-	-	10,30,000	7,72,837	10%	25,716	7,98,553	2,57,163	2,31,447
115 EPABX WITH CABLES	2,73,223	-	7,140	7,140	2,80,363	1,76,039	10%	10,075	1,86,114	97,184	94,249

DIRECTOR
MALABAR CANCER CENTRE

PARTICULARS	GROSS BLOCK				DEPRECIATION				NET BLOCK	
	ADDITION / DELETION		Total	As on 31-03-2013	Upto 31-03-2012	Rate	For the year 31-03-2013	Upto 31-03-2013	As on 31-03-2012	As on 31-03-2013
	Before 01-10-2012	After 01-10-2012								
116 AIR CONDITIONING IN OT AREA	12,31,000	36,500	-	36,500	9,23,651	10%	34,385	9,58,036	3,07,349	3,09,464
117 PANEL BOARD	98,000	-	-	98,000	73,532	10%	2,447	75,979	24,468	22,021
118 ELECTRICAL FITTINGS	25,42,587	-	-	25,42,587	18,71,579	10%	67,101	19,38,680	6,71,008	6,03,907
119 ELECTRIFICATION WORK	64,37,896	-	71,598	65,09,494	47,76,840	10%	1,71,476	49,48,316	16,61,056	15,61,178
120 TREATMENT PLANT WITH ALL PUMPS AND CONTROL PANEL	11,41,800	-	-	11,41,800	8,56,721	10%	28,508	8,85,229	2,85,079	2,56,571
121 5 HP MOTOR WITH BELT DRUM AIR BLOWER	50,000	-	-	50,000	37,516	10%	1,248	38,764	12,484	11,236
122 1 HP SUBMERSIBLE PUMP	13,000	-	-	13,000	9,756	10%	324	10,080	3,244	2,920
123 PUMP SET (HIGHER PRESSURE FILTER FEED PUMP)	24,200	-	-	24,200	18,157	10%	604	18,761	6,043	5,439
124 ALUM DOSING PUMP	2,000	-	-	2,000	1,501	10%	50	1,551	499	449
125 CFT AND TOD METER	1,50,000	17,600	45,502	2,13,102	1,41,677	80%	38,939	1,80,616	8,323	32,486
126 SUBMERSIBLE PUMP 7.5 HP	77,782	-	-	77,782	58,362	10%	1,942	60,304	19,420	17,478
127 BUILDING	7,23,21,000	-	-	7,23,21,000	4,96,25,906	10%	22,69,509	5,18,95,415	2,26,95,094	2,04,25,585
128 ALUMINIUM LADDER	3,328	23,250	-	26,578	2,073	15%	3,676	5,749	1,255	20,829
129 PAINTINGS	33,500	-	-	33,500	20,866	15%	1,895	22,761	12,634	10,739
130 WATER PURIFIER	58,270	2,500	8,000	68,770	21,084	15%	6,553	27,637	37,186	41,133
131 MOBILE FILE STORAGE SYSTEM HDR BRACHY THERAPY	2,79,300	-	-	2,79,300	1,44,439	15%	20,229	1,64,668	1,34,861	1,14,632
132 AND RT SIMULATOR	2,91,35,942	-	8,28,885	8,28,885	1,50,23,654	15%	21,79,010	1,72,02,664	1,41,12,288	1,27,62,163
133 CT SCANNER	2,43,44,162	43,605	-	2,43,87,767	1,21,22,094	15%	18,39,851	1,39,61,945	1,22,22,068	1,04,25,822
134 1 HP KIRLOSAR MONO BLOCK	10,000	-	-	10,000	5,563	15%	666	6,229	4,437	3,771


 DIRECTOR
 MALABAR CANCER CENTRE

PARTICULARS	GROSS BLOCK				DEPRECIATION				NET BLOCK			
	ADDITION / DELETION		Total	As on 31-03-2013	Upto 31-03-2012	Rate	For the year	Upto 31-03-2013	As on 31-03-2012	As on 31-03-2013	As on 31-03-2012	As on 31-03-2013
	As on 01-10-2012	Before 01-10-2012										
135 FCG MACHINE - MAC 500	46,200	-	-	46,200	23,892	15%	3,346	27,238	22,308	18,962		
136 COIR MATTRESS	2,69,354	-	-	2,69,354	90,468	15%	26,833	1,17,301	1,78,886	1,52,053		
137 BRACHY THERAPY ROOM	48,40,719	-	-	48,40,719	25,03,350	15%	3,50,605	28,53,955	23,37,369	19,86,764		
138 RADIOLOGY BLOCK	85,55,331	-	-	85,55,331	44,24,340	15%	6,19,649	50,43,989	41,30,991	35,11,342		
139 TALLY GOLD MULTI USER SOFTWARE	36,250	-	-	36,250	34,626	60%	974	35,600	1,624	650		
140 COMPUTER PRINTER AND DIGITAL CAMERA FOR COMMUNITY ONCOLOGY	46,540	-	-	46,540	44,455	60%	1,251	45,706	2,085	834		
141 SAMSUNG WASHING MACHINE	5,250	-	-	5,250	2,510	15%	411	2,921	2,740	2,329		
142 5 HP KIRLOSKAR PUMPSET	23,165	-	-	23,165	11,073	15%	1,814	12,887	12,092	10,278		
143 DORMITARY BUILDING	9,90,000	-	-	9,90,000	2,68,290	10%	72,171	3,40,461	7,21,710	6,49,539		
144 CENTRIFUGE FOR BLOOD BANK	1,45,000	-	67,618	2,12,618	48,095	15%	19,607	67,702	96,905	1,44,916		
145 ELECTRIC LAWN MOVER	37,000	-	-	37,000	12,273	15%	3,709	15,982	24,727	21,018		
146 ECG MACHINE - BPL	50,900	-	41,000	91,900	15,518	15%	5,307	20,825	35,382	71,075		
147 HARMONIC SCAPEL	15,87,000	-	-	15,87,000	5,26,388	15%	1,59,092	6,85,480	10,60,612	9,01,520		
148 ICU VENTILATOR	12,48,000	-	-	12,48,000	8,43,648	40%	1,61,741	10,05,389	4,04,352	2,42,611		
149 UPS 10 KVA ONLINE WITH BATTERIES	3,10,000	-	97,000	4,07,000	49,868	10%	30,863	80,731	2,60,132	3,26,269		
150 RADIOTHERAPY ACCESSORIES	8,75,310	-	-	8,75,310	2,83,641	15%	88,750	3,72,391	5,91,669	5,02,919		
151 TELE MEDICINE UNIT												
Air Conditioner	1,07,760	-	-	1,07,760	29,903	15%	11,679	41,582	77,857	66,178		
Flex Board	2,080	-	-	2,080	395	10%	169	564	1,685	1,516		
False Ceiling	8,245	-	-	8,245	2,288	15%	894	3,182	5,957	5,063		
Furniture	64,703	-	-	64,703	12,037	10%	5,267	17,304	52,666	47,399		


DIRECTOR
 MALABAR CANCER CENTRE

PARTICULARS	GROSS BLOCK				DEPRECIATION				NET BLOCK			
	ADDITION / DELETION		Total	As on 31-03-2013	Upto 31-03-2012	Rate	For the year 31-03-2013	Upto 31-03-2013	As on 31-03-2012	As on 31-03-2013		
	As on 01-10-2012	Before 01-10-2012										
170 NURSES HOSTEL	1,60,28,198	-	-	1,60,28,198	30,45,326	10%	12,98,287	43,43,613	1,29,82,872	1,16,84,585		
171 SYRINGE INFUSION PUMP	1,44,000	-	-	1,44,000	39,960	15%	15,606	55,566	1,04,040	88,434		
172 DIGITAL VOLUMETRIC INFUSION PUMP	1,23,000	-	-	1,23,000	34,133	15%	13,330	47,463	88,867	75,537		
173 MINI BUS	7,90,000	-	-	7,90,000	2,19,225	15%	85,616	3,04,841	5,70,775	4,85,159		
174 MICRO VASCULAR DVD RECORDER	10,000	-	-	10,000	2,775	15%	1,084	3,859	7,225	6,141		
175 PALLIATIVE TRAINING CENTRE:												
Computer	32,120	-	-	32,120	23,126	60%	5,396	28,522	8,994	3,598		
Projector	37,555	-	-	37,555	8,028	15%	4,429	12,457	29,527	25,098		
Furniture	23,033	-	-	23,033	3,340	10%	1,969	5,309	19,693	17,724		
Books	76,649	-	-	76,649	16,384	15%	9,040	25,424	60,265	51,225		
Steel cupboard	6,000	-	-	6,000	600	10%	540	1,140	5,400	4,860		
176 5 HP KIRLOSAR MONO BLOCK PUMP SET	23,056	-	-	23,056	1,729	15%	3,199	4,928	21,327	18,128		
177 5 HP OPEN WELL SUBMERSIBLE PUMP	30,765	-	-	30,765	1,538	10%	2,923	4,461	29,227	26,304		
178 BACTERIAL FILTER	17,850	-	-	17,850	8,925	100%	8,925	17,850	8,925	-		
179 CYSTOSCOPE	6,50,000	-	-	6,50,000	97,500	15%	82,875	1,80,375	5,52,500	4,69,625		
180 ENDOSCOPES	32,34,990	-	-	32,34,990	12,03,996	40%	7,76,398	20,70,394	19,40,994	11,64,596		
181 WATER HEATER	10,500	-	-	10,500	1,575	15%	1,339	2,914	8,925	7,586		
182 OPHTHALMOSCOPE	15,000	-	-	15,000	2,250	15%	1,913	4,163	12,750	10,837		
183 ROTARY MICROTOME	3,93,750	-	-	3,93,750	59,063	15%	50,203	1,09,266	3,34,687	2,84,484		
184 SHROMETER	1,04,000	-	-	1,04,000	7,800	15%	14,430	22,230	96,200	81,770		
185 TRINOCULAR MICROSCOPE	1,45,000	-	-	1,45,000	10,875	15%	20,119	30,994	1,34,125	1,14,006		
186 DIGITAL CALORIMETRE			4,887	4,887		15%	366	366		4,521		
187 FIRE EXTINGUISHERS		41,560		41,560		15%	6,234	6,234		35,326		
188 FOGGING MACHINE		29,500		29,500		15%	4,425	4,425		25,075		


 DIRECTOR
 MALABAR CANCER CENTRE

PARTICULARS	GROSS BLOCK			DEPRECIATION			NET BLOCK			
	ADDITION / DELETION									
	As on 01-04-2012	Before 01-10-2012	After 01-10-2012	Total	As on 31-03-2013	Upto 31-03-2012	Rate	For the year 31-03-2012	Upto 31-03-2013	As on 31-03-2013
187 TREATMENT BLOCK		1,79,59,662		1,79,59,662	1,79,59,662		10%	17,95,966	17,95,966	1,61,63,696
189 FLEXIBLE CYSTOSCOPE/URETEROSCOPE WITH ACCESSORIES			16,00,000	16,00,000	16,00,000		15%	2,40,000	2,40,000	13,60,000
191 PEDIATRIC ENDOSCOPE SYSTEM			27,44,700	27,44,700	27,44,700		40%	5,48,940	5,48,940	21,95,760
192 HT DIESEL GENERATOR AND BUILDING: Building		2,37,513		2,37,513	2,37,513		10%	11,876	11,876	2,25,637
Generator		72,98,339		72,98,339	72,98,339		15%	5,47,375	5,47,375	67,50,964
193 MRI SCANNER		4,69,44,869		4,69,44,869	4,69,44,869		15%	70,41,730	70,41,730	3,99,03,139
194 EFFLUENT TREATMENT PLANT		19,28,723		19,28,723	19,28,723		10%	1,92,872	1,92,872	17,35,851
195 EQUIPMENTS FOR MEDICAL RECORDS DIVISION		5,58,000		11,22,003	11,22,003		15%	1,26,000	1,26,000	9,96,003
196 EQUIPMENTS FOR PHYSICS DIVISION			2,94,976	2,94,976	2,94,976		15%	22,123	22,123	2,72,853
197 CAMERA FOR BRACHY O T			4,400	4,400	4,400		15%	330	330	4,070
198 DIGITAL CAMERA			6,100	6,100	6,100		15%	458	458	5,642
	41,64,60,909	7,11,37,575	2,10,92,623	9,22,30,198	50,86,91,107	17,28,99,910		4,59,86,932	21,88,86,842	24,35,60,999
										28,98,04,265


DIRECTOR
MALABAR CANCER CENTRE

Photo gallery



MEDIA SCAN

വേദനയല്ലാതെ കാൻസർ ചികിത്സ: 'ഗാബ്രി' ഡയറക്ടർ എം.സി.സി. സന്ദർശിച്ചു



മലബാർ കാൻസർ സെന്ററിന്റെ പുതിയ ഓപ്പറേഷൻ മുഖ്യമന്ത്രി ഉമ്മൻചാണ്ടി പരിപാടിയിൽ പങ്കെടുത്തു. മലബാർ കാൻസർ സെന്ററിന്റെ പുതിയ ഓപ്പറേഷൻ മുഖ്യമന്ത്രി ഉമ്മൻചാണ്ടി പരിപാടിയിൽ പങ്കെടുത്തു. മലബാർ കാൻസർ സെന്ററിന്റെ പുതിയ ഓപ്പറേഷൻ മുഖ്യമന്ത്രി ഉമ്മൻചാണ്ടി പരിപാടിയിൽ പങ്കെടുത്തു.

മലബാർ ക്യാൻസർ സെന്ററിന് പുതിയ വെബ്സൈറ്റ്

മലബാർ ക്യാൻസർ സെന്ററിന് പുതിയ വെബ്സൈറ്റ് ലോൻ്റ് ചെയ്തു. മലബാർ ക്യാൻസർ സെന്ററിന് പുതിയ വെബ്സൈറ്റ് ലോൻ്റ് ചെയ്തു. മലബാർ ക്യാൻസർ സെന്ററിന് പുതിയ വെബ്സൈറ്റ് ലോൻ്റ് ചെയ്തു.

എം.സി.സി.ക്ക് സംസ്ഥാന കാൻസർ സെന്റർ പദ്ധതി പ്രഖ്യാപനം - 2013



മലബാർ കാൻസർ സെന്ററിന്റെ പുതിയ ഓപ്പറേഷൻ മുഖ്യമന്ത്രി ഉമ്മൻചാണ്ടി പരിപാടിയിൽ പങ്കെടുത്തു. മലബാർ കാൻസർ സെന്ററിന്റെ പുതിയ ഓപ്പറേഷൻ മുഖ്യമന്ത്രി ഉമ്മൻചാണ്ടി പരിപാടിയിൽ പങ്കെടുത്തു.



മലബാർ ക്യാൻസർ സെന്ററിന്റെ പുതിയ വെബ്സൈറ്റ് ലോൻ്റ് ചെയ്തതിൽ പങ്കെടുത്തു.

THE HINDU
MCC to get more funds
SOCIAL COOPERATIVES
മാതൃഭൂമി

കാഴ്ച
കൊല്ലാം ക്യാൻസറിനെ

ദേശാഭിമാനി KNR | വിജയാശം 2013 ജനുവരി

Online press releases from Directorate, Thiruvananthapuram on 28/01/2013

മലബാർ കാൻസർ സെന്ററിന് പുതിയ വെബ്സൈറ്റ്

മലബാർ കാൻസർ സെന്ററിന് പുതിയ വെബ്സൈറ്റ് ലോൻ്റ് ചെയ്തു. മലബാർ കാൻസർ സെന്ററിന് പുതിയ വെബ്സൈറ്റ് ലോൻ്റ് ചെയ്തു. മലബാർ കാൻസർ സെന്ററിന് പുതിയ വെബ്സൈറ്റ് ലോൻ്റ് ചെയ്തു.

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How to Support MCC

An Appeal :

As you are aware that cancer treatment is expensive and many people could not afford the expenditure without some kind of financial assistance. Our centre is also committed to offer free treatment to financially and socially backward patients and others on a concessional rate. Many of our patients had already applied for financial assistance from various agencies. So many broad-minded organizations and agencies had already helped our poor patients and so many of them were expressing their willingness to help such patients in future also.

Generous donations are welcome to realize the dream: It may please be noted that donations to MCC are exempted from income tax according to rule 80G of the Income Tax Act.

Donations to MCC may be forwarded to Director, Malabar Cancer Centre or to the following Account in IDBI, Thalassery Branch:

Account Number	Bank	Branch	IFSC Code
1154104000017958	IDBI	Thalassery	IBKL0001154

Patients Free Food Scheme :

Recently MCC had started a "Patients Free Food Scheme" for all patients in MCC, irrespective of their financial status. MCC is looking forward for financial assistance as donations from individuals, corporate institutions, State owned Corporations, in this regard. Since November 2008, this programme has been running successfully. However as more and more patients are visiting the Centre the funds kept for this purpose are likely to be exhausted. In this regard MCC hereby request for financial aid to run this charity work and seek help from likeminded people and organizations to join hands for this noble venture.

Generous donations are welcome to realize the dream: Donations to MCC may be forwarded to Director, Malabar Cancer Centre or to the following Account in SBI:

Account Number	Bank	Branch	IFSC Code
30469577061	State Bank of India (SBI)	Thalassery	SBIN0000926

For further details Contact:

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