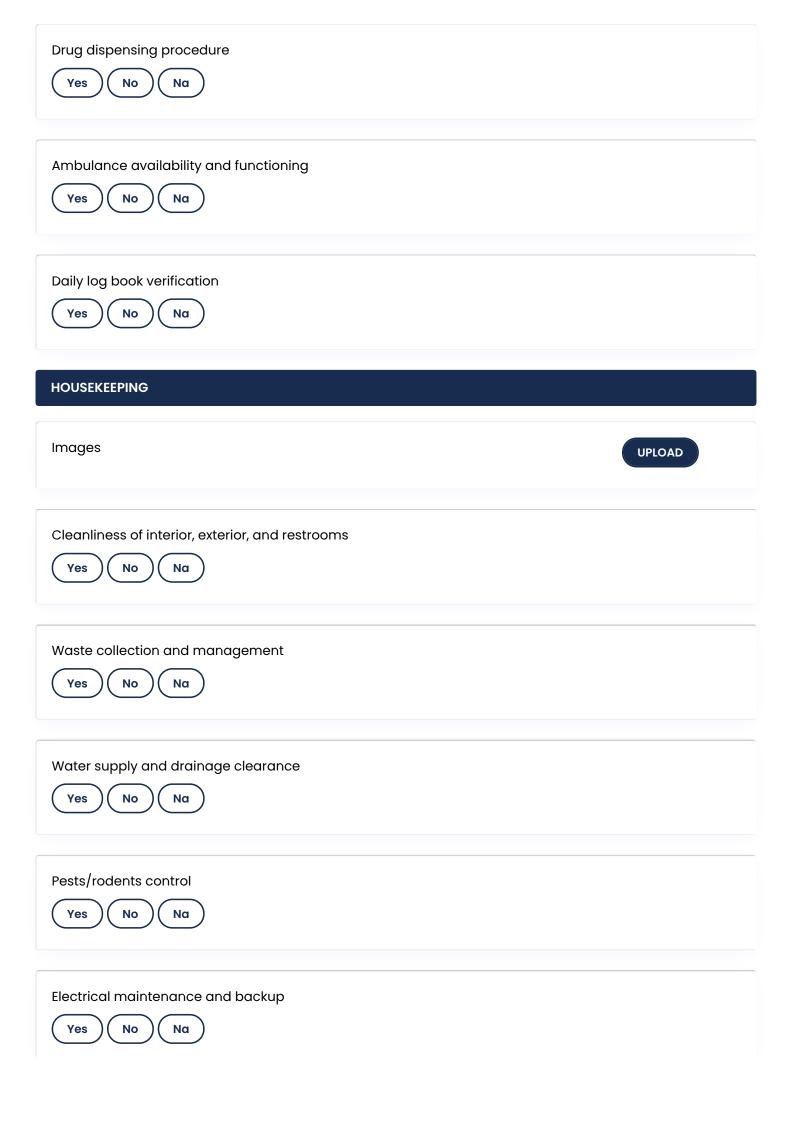
Eating Disorder Inspection

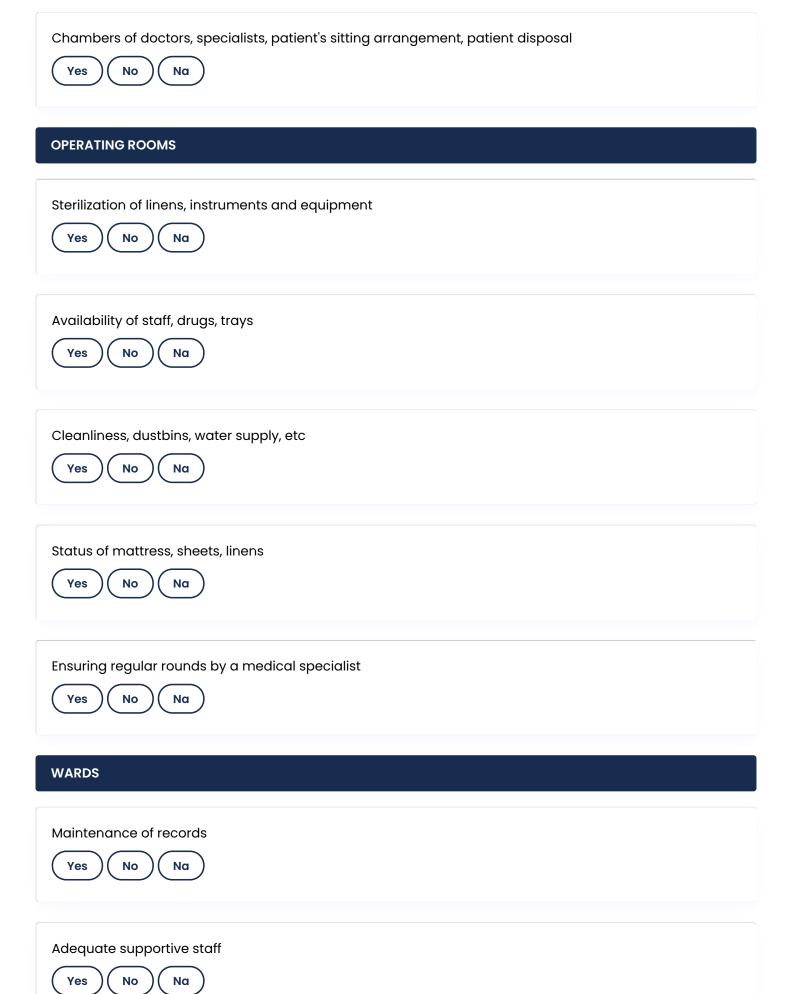
Health Services

DIAGNOSTICS Equipment and their functioning status No Yes Provision of reports Yes No Na Storage of medicines and administration Yes No Na **DISPENSARY** Availability of emergency tray Yes No Na Status of the emergency ward Yes No Na Availability of sufficient drug stock Yes No Na Stock book entry, daily expenditure, and entry verification No Yes Na



Restroom maintenance and fittings Yes No Na	
Functioning of HVAC Yes No Na	
Cleanliness of utensils Yes No Na	
Timings of food supply Yes No Na	
Sanitization of kitchen and meal consumption areas Yes No Na	
Additional information	
Images	UPLOAD
Inspectors Name/signature:	SIGNATURE
Inspection Date:	DATE
2017-01-01	

MEDICATION Pharmacy check Na Yes No Availability of supportive staff No Na OPD Reception and help desk Yes No Na Are all patient records properly maintained? Yes No Na Patient guidance, information regarding services, and doctor Yes No Na Stationary, prescription slips, registration forms Yes No Na Counters and display Yes No Na Complaint box and grievance redressal Yes No Na



Feedback from patients

Yes

No

Na