



GPMS Universal Health Care Information Therapy Transportal Common Integrated Dashboard



DEPARTMENT OF HEALTH AND FAMILY WELFARE – GOVT. OF KARNATAKA

भारत सरकार GOVERNMENT OF INDIA	स्वास्थ्य एवं परिवार कल्याण मंत्रालय MINISTRY OF HEALTH AND FAMILY WELFARE	GPMS Transportal Toll free number: 1800-8437-100	Select Language	
	DEPARTMENT OF HEALTH AND FAMILY WELFARE			
Government of Karnataka Health and Family Welfare Services				
HOME	GET IN TOUCH	HELP DESK	LOGIN	



Integrated GPMS Transportal For Universal Healthcare* Sustainable Action for Transforming Human capital (SATH) program



About Ministry of Health and Family Welfare

The Ministry of Health and Family Welfare is an Indian government ministry charged with health policy in India. It is also responsible for all government programs relating to family planning in India

The Department of Health deals with health care, including awareness campaigns, immunization campaigns, preventive medicine, and public health.



सत्यमेव जयते

Ministry of Health and Family Welfare
Government of India

<https://mohfw.gov.in>



About NHM:



The National Health Mission (NHM) encompasses its two Sub-Missions, the National Rural Health Mission (NRHM) and the newly launched National Urban Health Mission (NUHM). The main programmatic components include Health System Strengthening in rural and urban areas Reproductive-Maternal-Neonatal-Child and Adolescent Health (RMNCH+A), and Communicable and Non-Communicable Diseases. The NHM envisages achievement of universal access to equitable, affordable & quality health care services that are accountable and responsive to people's needs.

Ensure that all public health care facilities or publicly financed private care facilities provide assured quality of health care services.

nhm.gov.in



About

Health & Family Welfare Department, Government of Karnataka

Karnataka state is one of the pioneer states in the country in providing comprehensive public health services to its people. Even before the concept of Primary Health Centers was conceived by the government of India, the state had already made a beginning in establishing a number of PHU's for providing comprehensive Health Care, and a delivery system consisting of curative, preventive, promotive and rehabilitation health care, to the people of the state. "HEALTH" is an asset to every person.

Government of Karnataka caters to its citizens' health related needs through NHM programs and hospitals. NHM – National health mission – executes several programs to prevent, early detection and management of communicable and non-communicable diseases, to track, immunize and monitor and ensure stable mother and child health and to procure and distribute necessary health related products to citizens of Karnataka

www.karnataka.gov.in/hfw



**Department of
Health & Family Welfare**



About Indian CST:

Indian Centre For



Social Transformation

A Public Charitable Trust (Regd.)

Indian Centre for Social Transformation (Indian CST) is a registered Public Charitable Trust (Registration No. HLS-4-00228-2009-10 dated 26/12/2009) whose mission is to work towards realization of a national vision set out in Article 51A (j) of the Indian Constitution- which prescribes the Fundamental Duty for Indian Citizens and exhorts them “to strive towards excellence in all spheres of individual and collective activity so that the nation constantly rises to higher levels of endeavour and achievement.”

The goal of Indian CST is to promote through this one stop portal, a number of projects that will deliver cost effective computing, best practices, knowledge management systems and critical applications at affordable costs to masses across India. Indian CST truly believes in 'IT for Social Change'.

www.indiancst.in & www.indiancst.com



GPMS TRANSPORTAL FOR UNIVERSAL HEALTHCARE

**Initiative by the Ministry of Health and Family Welfare, Niti Aayog,
Govt. of India, Department of Health and Family Welfare
Government of Karnataka (KARHFW), Powered by Indian CST**

<https://indiancst.com/India/universalhealthcare>



GPMS Universal Health Care Information Therapy Transportal Common Integrated Dashboard



Improving Healthcare for a better Karnataka.

Department of Health & Family Welfare Services

Indian CST has inked the MOU with Karnataka State Government Health and Family Welfare Department, Govt. of Karnataka (HFWD) to be in force for a period of 10 years (till 27.04.2027) Indian CST's Make in India Innovative Integrated GPMS Transportal for Universal Healthcare Cloud Computing Solutions Platform is been rolled through out in the KTK State 30 districts, 30,000 health centers which includes Govt and private too for real time monitoring of Mother and Child with Citizens Electronic Health Record with all Clinical Parameters that will allow Multiple Ministry / Stakeholders / Hospitals/ PHC's/ Doctors / Associated healthcare Projects / Schemes to work on this single platform and the 4.5 crores patients / citizens who will be given access online to view their own medical records data online, any time , from anywhere, on any device. and further enabling the implementation of SDG-3 in the State of Karnataka.

“SATH”

<http://www.karnataka.gov.in/hfw/Pages/Home.aspx> <https://indiancst.com/India/universalhealthcare/>

- ♦ SATH is an initiative through which NITI Aayog will partner with three states and to transform the health sector of the Indian states.
- ♦ NITI Aayog (the premier think tank of the Government of India) has selected Karnataka to improve healthcare delivery and key outcomes along with Uttar Pradesh and Assam.

Universal, easily accessible, affordable primary healthcare

Comprehensive primary health care package with geriatric, palliative and rehabilitative care.	Health Card for access to primary healthcare facility services anytime, anywhere.
Free drugs and diagnostics along with low cost pharmacy chains (Jan Aushadhi stores)	Free health care to victims of gender violence in public and private sector.










AFFORDABLE HEALTHCARE FOR ALL





IMPLEMENTATION OF SDG 3: ENSURE HEALTHY LIVES AND PROMOTE WELLBEING FOR ALL AT ALL AGES IN KARNATAKA STATE

SUSTAINABLE DEVELOPMENT GOALS | **3** | **ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES**

<p>Target 3.1</p> <p>By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births.</p> 	<p>Target 3.2</p> <p>By 2030, end preventable deaths of newborns & children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births & under 5 mortality to at least as low 25 per 1,000 live births.</p> 	<p>Target 3.3</p> <p>By 2030, end the epidemic of AIDS, tuberculosis, malaria & neglected tropical diseases & combat hepatitis, water-borne diseases & other communicable diseases.</p> 
<p>Target 3.4</p> <p>By 2030, reduce by one third premature mortality from non-communicable diseases through prevention & treatment & promote mental health & well-being.</p> 	<p>Target 3.5</p> <p>Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol.</p> 	<p>Target 3.6</p> <p>By 2030, halve the number of global deaths & injuries from road traffic accidents.</p> 
<p>Target 3.7</p> <p>By 2030, ensure universal access to sexual & reproductive health-care services, including for family planning, information and education, & the integration of reproductive health into national strategies and programmes.</p> 	<p>Target 3.8</p> <p>Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines & vaccines for all.</p> 	<p>Target 3.9</p> <p>By 2030, substantially reduce the number of deaths & illnesses from hazardous chemicals and air, water & soil pollution and contamination.</p> 

Patients to access records held electronically whenever and wherever they need it.



THE VISION OF SATH (Sustainable Action for Transforming Human capital)

Program initiated by NITI Aayog, is to transform Education and Health Sectors, by working closely with state level officials and other institutional level workers. In the states of Assam, Uttar Pradesh and Karnataka (selected by a transparency process), a futuristic role model is sought to be established. The road map of interventions, governance structures, monitoring and tracking mechanisms and hand holding of institutions through execution stage, entails measured steps to achieve the end objectives. This Single Integrated Dash Board using the GPMS Transportal for Universal Healthcare of [Indian CST](#) facilitates real time data capture at source and aggregation at institutional, District and State levels, of all existing software applications used in the State so that Policy interventions become data driven.



GPMS Universal Health Care Information Therapy Transportal Common Integrated Dashboard





GPMS Universal Health Care Information Therapy Transportal Common Integrated Dashboard



Ayushman Bharat is a National Health Protection Scheme, which will cover **over 10 crore poor and vulnerable families (approximately 50 crore beneficiaries)** providing coverage upto 5 lakh rupees per family per year for secondary and tertiary care hospitalization.

Improving Health for a Better Karnataka

GPMS Transportal for Universal Healthcare cloud computing platform has been further customized and developed for allowing digital access to Multiple Ministries at Central or State /District/ Urban Level /Rural Level / all Stakeholders / Govt. and Private Hospitals/ PHC's/ Sub-Centers / Doctors / GP's / Nurses / Multiple Stake holders / Associated with Healthcare Projects / Programs/ Schemes etc. To Work on This Single Cloud Computing integrated Platform For Monitoring of Mother and Child with Citizens Electronic Health Record with all Clinical Parameters

Any Karnataka State Citizens can access medical or ID records held electronically whenever and wherever they need it.

<https://indiancst.com/India/universalhealthcare>



GPMS Universal Health Care Information Therapy Transportal Common Integrated Dashboard



Visit: <https://indiancst.com/India/universalhealthcare>

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GOVERNMENT OF INDIA | MINISTRY OF HEALTH AND FAMILY WELFARE | Toll free number: 1800-8437-100

DEPARTMENT OF HEALTH AND FAMILY WELFARE

Government of Karnataka
Health and Family Welfare Services

Select Language

HOME GET IN TOUCH HELP DESK LOGIN

LOGIN SIGN UP

Enter your email/Username and password to sign in

Username/Email

Password

SUBMIT

Sign in with Facebook

Sign in with Google+

Enter **user name and password** details and click on **SUBMIT** button.



GPMS Universal Health Care Information Therapy Transportal Common Integrated Dashboard



GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
DEPARTMENT OF HEALTH AND FAMILY WELFARE
Government of Karnataka

Select Language: ▼ INDIANCST DDP

GPMS Universal HealthCare

Integrated Dashboard

GPMS Universal Health Care Information Therapy Transportal

Monitoring of Mother and Child with Citizens Electronic Health Record with all Clinical Parameter
Across Multiple Ministry (Banshodhan, Prasthika, PHCs, Doctors/Associated Healthcare Projects, Schemes To Work on this Single Platform

0. MASTERS	1. TOTAL POPULATION: 6,10,95,297	2. RATION CARD HOLDERS: 1,16,99,815	3. BENIFICIARIES: 5,23,74,906
4. FIXED PRICE SHOPS: 18837	5. PHCs: 2522	6. SUB-CENTERS: 9130	7. DOCTORS
8. ASHA WORKERS: 32860	9. ANMs: 1133	10. TOTAL AMBULANCE: 1550	11. PATIENT REGISTRATION: 92,937
12. IDR	13. ICU	14. BIRTH: 3,01,999	15. DEATH: 11,211
16. STILL BORN: 8460	17. STOP-TB ANALYTICS: 6,33,593	18. MALARIA: 30,560	19. DENGUE: 142
20. CHIKUNGUNYA: 1435	21. CHOLERA: 58	22. DIABETES: 23,423	23. EPILEPSY: 1169
24. CARDIAC: 461	25. HYPER TENSION: 33,735	26. CANCER: 408	27. FSSAI
28. REIMBURSEMENTS: 5,55,98,064	29. HEALTH INFRASTRUCTURE: 15,130	30. NRC	31. NCD
32. NVBDCP	33. ERAKTKOSH	34. PHC-MIS	35. KPME
36. SNCU	37. PCPNDT	38. SAST	39. E-AROGYA
40. MENTAL HEALTH	41. ASHA SOFT	42. MSHS	43. MCTS
44. JEEVA SANJEEVINI	45. ELAJ	46. DRUG INVENTORY	47. RSBY
48. UHC	49. DISABILITY SOFTWARE	50. TELE MEDICINE	51. RNTCP
52. IDSP	53. HMIS	54. E-HOSPITAL	55. E-KIRANA
56. RBSK	57. HELP DESK	58. TMIS	

<https://indiancst.com/India/universalhealthcare>



GPMS TRANSPORTAL FOR UNIVERSAL HEALTHCARE

NATIONAL VECTOR BORNE DISEASE CONTROL PROGRAMME (NVBDCP) ONLINE NEW MODULE DEVELOPED AND INTEGRATED

<https://indiancst.com/India/universalhealthcare>



NVBDCP Online New Module developed And Integrated

The National Vector Borne Disease Control Programme (NVBDCP)

The National Vector Borne Disease Control Programme (NVBDCP) is an umbrella programme for prevention and control of Vector borne diseases. Earlier the Vector Borne Diseases were managed under separate National Health Programmes, but now NVBDCP covers all Vector borne diseases namely:

- Malaria
- Dengue
- Chikungunya
- Japanese Encephalitis
- Filariasis



NVBDCP Online New Module developed And Integrated

The screenshot displays the dashboard for IndianCST DvP. The top left shows the user's profile and status (Online). A red dashed box highlights the 'GPMS Universal HealthCare - NVBDCP' link in the navigation menu. The main content area features a large 'Welcome IndianCST DvP' message. Below this is a 'Quick Email' form with fields for 'Email to:' and 'Subject:', and a rich text editor with options for Bold, Italic, Underline, and Small. To the right, there is a map of India and a calendar for July 2018.



GPMS TRANSPORTAL FOR UNIVERSAL HEALTHCARE

NVBDCP – DENGUE AND CHIKUNGUNYA NEW MODULE DEVELOPED AND INTEGRATED

<https://indiancst.com/India/universalhealthcare>



NVBDCP - Online New Module developed And Integrated Dengue and Chikungunya Control Program

One of the most important resurgent tropical infectious disease is dengue. Dengue Fever and Dengue Haemorrhagic Fever (DHF) are acute fevers caused by four anti-genitically related but distinct dengue virus serotypes (DEN 1,2,3 and 4) transmitted by the infected mosquitoes, *Aedes aegypti*. Dengue outbreaks have been reported from urban areas from all states. All the four serotypes of dengue virus (1, 2, 3 and 4) exist in India. The Vector *Aedes aegypti* breed in peri-domestic fresh water collections and is found in both urban and rural areas.

Chikungunya is a viral illness that is spread by the bite of infected mosquitoes. The disease resembles dengue fever, and is characterized by severe, sometimes persistent, joint pain (arthritis), as well as fever and rash. It is rarely life-threatening. Chikungunya occurs in Africa, India and Southeast Asia. It is primarily found in urban /peri-urban areas. There is no specific treatment for Chikungunya. Prevention centres on avoiding mosquito bites in areas where Chikungunya virus may be present, and by eliminating mosquito breeding sites.



NVBDCP - Online New Module developed And Integrated

Dengue and Chikungunya Control Program Objective

- Surveillance for disease and outbreaks
- Early diagnosis and prompt case management
- Vector control through community participation and social mobilization
- Capacity building



NVBDCP - Online New Module developed And Integrated

Dengue and Chikungunya Screening and Treatment Work Flow

- ANMs screens citizens and suspected cases of dengue and Chikungunya are registered in “MAR” and referred to PHC
- PHCs calls patient or patient himself comes
- Serum received in sentinel surveillance lab is tested for Chikungunya or Dengue
- Confirmed patients are reported to District level office.
- PHCs receive diagnosis results and track patient
- PHCs reports diagnosis and death to Taluks
- Taluks compile all PHCs data and send to District
- Districts compile all PHCs data and send to States. States makes a final report



GPMS TRANSPORTAL FOR UNIVERSAL HEALTHCARE

LINE LISTING FOR DENGUE ONLINE NEW MODULE DEVELOPED AND INTEGRATED

<https://indiancst.com/India/universalhealthcare>



NVBDCP- DENGUE Line listing New Module Developed and Integrated

IndianCST DvP
Online

GPMS Universal HealthCare - NVBDCP

- Home
- Dashboard
- Line Listing of Dengue cases
- View
- Create
- Consolidated Report
- Line Listing of Chikungunya cases
- Line Listing of JE cases
- Line Listing of Filaria cases
- Malaria Incidents
- Monthly Reports of NVBDCP

Dengue Test

Home > NVBDCP > Dengue > Create

Personal Details

MR NO *	Patient ID *	PHC *	Patient Name *
<input type="text"/>	<input type="text"/>	<input type="text" value="Select One"/>	<input type="text"/>
Age	Sex	Caste	Email Id
<input type="text"/>	<input type="text" value="Select One"/>	<input type="text" value="Select One"/>	<input type="text"/>
Marital Status	Blood Group	Occupation	Head of the family
<input type="text" value="Select One"/>	<input type="text" value="Select One"/>	<input type="text" value="Select One"/>	<input type="text"/>
Mobile No. *			
<input type="text"/>			

Test Details

Year*	Month*	Lab Code
<input type="text" value="Select One"/>	<input type="text" value="Select One"/>	<input type="text"/>
Institute from where sample received	Samples received date	Duration of fever
<input type="text"/>	<input type="text"/>	<input type="text" value="(in days)"/>
Samples tested date	Date of onset of symptoms	Lab where the test is confirmed
<input type="text"/>	<input type="text"/>	<input type="text"/>
ICD Description		
<input type="text" value="Select One"/>		



GPMS TRANSPORTAL FOR UNIVERSAL HEALTHCARE

LINE LISTING FOR CHIKUNGUNYA NEW ONLINE MODULE DEVELOPED AND INTEGRATED

<https://indiancst.com/India/universalhealthcare>



NVBDCP- CHIKUNGUNYA Online New Module Developed and Integrated

NVBDCP- Chikungunya

Chikungunya is a viral illness that is spread by the bite of infected mosquitoes. The disease resembles dengue fever, and is characterized by severe, sometimes persistent, joint pain (arthritis), as well as fever and rash



NVBDCP- CHIKUNGUNYA Online New Module Developed and Integrated

Chikungunya Test Home > NVBDCP > Chikungunya > Create

Personal Details

MR NO *	Patient ID *	PHC *	Patient Name *
<input type="text"/>	<input type="text"/>	Select One	<input type="text"/>
Age	Sex	Caste	Email Id
<input type="text"/>	Select One	Select One	<input type="text"/>
Marital Status	Blood Group	Occupation	Head of the family
Select One	Select One	Select One	<input type="text"/>
Mobile No. *	<input type="text"/>		

Test Details

Year*	Month*	Lab Code
Select One	Select One	<input type="text"/>
Institute from where sample received	Samples received date	Samples tested date
<input type="text"/>	<input type="text"/>	<input type="text"/>



GPMS TRANSPORTAL FOR UNIVERSAL HEALTHCARE

JAPANESE ENCEPHALITIS (JE) ONLINE LINE LISTING ONLINE NEW MODULE DEVELOPED AND INTEHGRTAED

<https://indiancst.com/India/universalhealthcare>



NVBDCP- JE Online New Module Developed and Integrated

Japanese Encephalitis (JE)

Japanese encephalitis (JE) is a zoonotic disease and caused by an arbovirus, group B (Flavivirus) and transmitted by Culex mosquitoes. This disease has been reported from 26 states and UTs since 1978, only 15 states are reporting JE regularly. The case fatality in India is 35% which can be reduced by early detection, immediate referral to hospital and proper medical and nursing care. The total population at risk is estimated 160 million. The most disturbing feature of JE has been the regular occurrence of outbreak in different parts of the country.



NVBDCP- JE Online New Module Developed and Integrated

Japanese Encephalitis Control Program Objective :

- Strengthening early diagnosis and prompt case management at PHCs, CHCs and hospitals through training of medical and nursing staff
- IEC for community awareness to promote early case reporting, personal protection, isolation of amplifier host
- Vector control measures mainly fogging during outbreaks, space spraying in animal dwellings, and ant larval operation where feasible
- Development of a safe and standard indigenous vaccine. Vaccination for high risk population particularly children below 15 years of age



NVBDCP- JE Online New Module Developed and Integrated

Japanese Encephalitis Control Program Work flow

- ANMs screens citizens and suspected cases of JE are registered in “MAR” and referred to PHC
- PHCs calls patient or patient himself comes
- Blood sample is collected and Serum is separated
- Serum received in sentinel surveillance lab is tested
- In case of JE diagnosis, if someone is detected with AES will be reported in a separate column
- PHCs receive diagnosis results and track patient
- PHCs reports diagnosis and death to Taluks
- Taluks compile all PHCs data and send to District
- Districts compile all PHCs data and send to States. States makes a final report



NVBDCP- JE Online New Module Developed and Integrated

Japanese Encephalitis Prevention Workflow – Component

- Residual Spray (Cases found)
- Fogging (Epidemic)



NVBDCP- JE Online New Module Developed and Integrated

- Line Listing of JE cases
- View
- Create
- Consolidated Report
- Line Listing of Filaria cases
- Malaria Incidents
- Monthly Reports of NVBDCP

Select One Select One Select One

Mobile No.*

Lab Details

Lab Code	Institution name from where sample was received	Category
		Select
IP/OP NO	Month	Year
	Select One	2016-2017
Samples received date	Sample tested date	Date of onset of symptoms
Lab where the test is confirmed		

Lab Test

Type of sample	JE IgM ELISA	Symptoms
Select		



GPMS TRANSPORTAL FOR UNIVERSAL HEALTHCARE

FILARIA LINE LISTING ONLINE NEW MODULE DEVELOPED AND INTEGRATED

<https://indiancst.com/India/universalhealthcare>



NVBDCP- FILARIA Online New Module Developed and Integrated

Filaria Control Program

Filariasis caused by *Wuchereria bancrofti*, which is transmitted to man by the bites of infected mosquitoes - *Culex*, *Anopheles*, *Mansonia* and *Aedes*. Lymphatic filaria is prevalent in 18 states and union territories. Bancroftian filariasis is widely distributed while brugian filariasis caused by *Brugia malayi* is restricted to 6 states - UP, Bihar, Andhra Pradesh, Orissa, Tamil Nadu, Kerala, and Gujarat. The National Filaria Control Programme was launched in 1955.



NVBDCP- FILARIA Online New Module Developed and Integrated

Filaria Control Program Objective

Reduction of the problem in un-surveyed areas □ Control in urban areas through recurrent anti-larval and anti-parasitic measures

Filaria Control Program Work Flow

- Bases on the detected cases of Filariasis, which area to screen is decided at State level
- Night Clinics conduct night-blood survey
- Clinics will test for the disease
- Filariasis positive are given treatment and recorded
- The patient details are rolled up to District and State



NVBDCP- FILARIA Online New Module Developed and Integrated

- Dashboard
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Age

Sex

Caste

Email Id

Marital Status

Blood Group

Occupation

Head of the family

Mobile No.*

Filaria Disease Affected Part

LEG	HANDS	SCROTUM	BREASTS
Yes <input type="radio"/> No <input checked="" type="radio"/>	Yes <input type="radio"/> No <input checked="" type="radio"/>	Yes <input type="radio"/> No <input checked="" type="radio"/>	Yes <input type="radio"/> No <input checked="" type="radio"/>

OTHERS

Further Details

<p>Period of disease manifestation</p> <input type="text" value="(in months)"/>	<p>Place of origin</p> <p>Native <input type="radio"/> Migrant <input checked="" type="radio"/></p>	<p>Date of survey</p> <input type="text"/>
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GPMS TRANSPORTAL FOR UNIVERSAL HEALTHCARE

MALARIA

ONLINE FORM M1 AND M4 DEVELOPED

NEW MODULE DEVELOPED AND INTEGRATED

<https://indiancst.com/India/universalhealthcare>



NVBDCP- MALARIA Online New Module Developed and Integrated

Malaria Control Program

One of the serious public health problems in India. At the time of independence malaria was contributing 75 million cases with 0.8 million deaths every year prior to the launching of National Malaria Control Programme in 1953.

A countrywide comprehensive programme to control malaria was recommended in 1946 by the Bhore committee report that was endorsed by the Planning Commission in 1951. The national programme against malaria has a long history since that time. In April 1953, Govt. of India launched a National Malaria Control Programme (NMCP).

Multipurpose Ground Force screen people(Active) in village and collect data and Sample. They either conduct RDT and update relevant record or sent smear to the lab with a requisition form- M2.M1 data and Passive patient data are merged to create M4 - Fortnightly report cases and M4 – Provider wise and sent to PHC. This process is repeated at every level PHC, Taluk, District and State



NVBDCP- MALARIA Online New Module Developed and Integrated

Objective of Malaria Control Program

To bring down malaria transmission to a level at which it would cease to be a major public health problem.



NVBDCP- MALARIA Online New Module Developed and Integrated Malaria Control Program - M1 report of surveillance

- M1-Report of surveillance
- ▢ View
- ▢ Create
- M4-Fortnightly Report of case
- ▢ Monthly Reports of NVBDCP <

Test Details

Duration of fever(Days)	Date of RDTI/BSC	Date of Starting treatment
<input type="text"/>	<input type="text"/>	<input type="text"/>
RDT-Pf	Pregnant	
Pos(+) <input type="radio"/> Neg(-) <input checked="" type="radio"/>	Yes <input type="radio"/> No <input checked="" type="radio"/>	

Blood Slides

Slide No(SI No Pd/VII Cd/SCI Cd)	Date of dispatch of slide to lab	Date of Receiving
<input type="text"/>	<input type="text"/>	<input type="text"/>
Pv	Pf	
Pos(+) <input type="radio"/> Neg(-) <input checked="" type="radio"/>	Pos(+) <input type="radio"/> Neg(-) <input checked="" type="radio"/>	

Treatment (Number of tablets)

CQ	PQ(2.5mg)	PQ(7.5mg)
<input type="text"/>	<input type="text"/>	<input type="text"/>
ACT Blister	QS	Injection Quinine
<input type="text"/>	<input type="text"/>	<input type="text"/>

Further Details

Date of Referral	Date of Death	Verified By
<input type="text"/>	<input type="text"/>	<input type="text"/>



NVBDCP- MALARIA Online New Module Developed and Integrated Malaria Control Program -M4 - Fortnightly report cases

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Online

GPMS Universal HealthCare - NVBDCP

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 - M4-Fortnightly Report of cases**
 - View
 - Create
- Monthly Reports of NVBDCP

Malaria M4 Test

Home > NVBDCP > Malaria M4 > Create

State Report Details By Name

Country Select One	State Select One	District Select One	Taluk Select One
Panchayat Select One	Village Select One	PHC Select One	Subcenter Select One

Report Details

Population []	Total fever cases recorded during fortnight in M1 []
-------------------	--

RDT

Number of RDT performed []	Number of RDT positive []
--------------------------------	-------------------------------

Blood Slides

Number of slides taken []	Pv []	Pf []
-------------------------------	-----------	-----------



ONLINE HELP DESK MODULE

Click on **GET IN TOUCH** to view the contact information Of Health Department

Home / Get in touch

Get in touch

C.K. Mishra
Secretary (H & FW)
#Address:
Department of Health and Family Welfare
Ministry of Health and Family Welfare, Government of India
Nirman Bhavan, New Delhi-110011
India
Off Phone: +911123063024, +911123063513, +911123061661
Fax: +9111-23063221
Email: secyhw@gmail.com

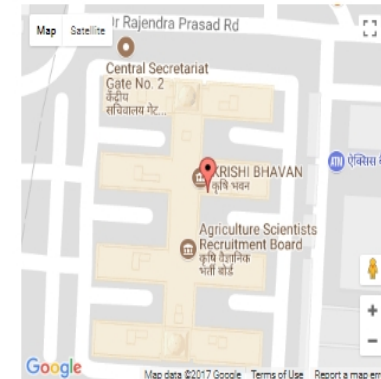
Shri. Amitabh Kant,
CEO(NITI Aayog)
#Address:
Department of Health and Family Welfare
Sansad Marg,
Sansad Marg Area, New Delhi-110011
India
Off Phone: +910112309 6622, +911123096576
Email: CEO-niti@gov.in

Dr. Shalini Rajneesh. IAS
Principal Secretary to Govt. of Karnataka
#Address:
Health & Family Welfare Services
#105, I Floor, Vikas Soudha,
Bengaluru - 560 001
India
Off Phone: +918022255324, +918022034234

Nirman Bhawan



Our Location





ONLINE HELP DESK MODULE

Click on **HELP DESK** menu to raise and view the complaints

भारत सरकार | स्वास्थ्य एवं परिवार कल्याण विभाग | GPMS Transportal
 GOVERNMENT OF INDIA | MINISTRY OF HEALTH AND FAMILY WELFARE | Toll free number: 1800-8437-100

DEPARTMENT OF HEALTH AND FAMILY WELFARE
 Government of Karnataka
 Health and Family Welfare Services

Select Language | f | | | in

HOME GET IN TOUCH **HELP DESK** LOGIN

Home / Online Helpdesk

Quick Links

- Dashboard
- Raise Complaints**
- View Complaints

GPMS Transportal Welcome to Online Help Desk

Helpdesk is a portal, or an application which is an integral part of project GPMS Applications.

It is designed to provide the general public to log in and submit complaints or any issues regarding application. The complaints raised are sent over to the administrator of the portal and Admin may assign the raised issues to an appropriate member of the management team for resolving the problem.

Raise Complaints : The user can use this interface to raise complaints, along with the complaint against, subject of the issue, and contact details.

View Complaints : The user can view his complaint and its status under the option 'View Complaints'.

Using this portal, User can upload pdf document, images, audios, videos, photos, signature related to the complaint.





ONLINE HELP DESK MODULE

Click on **Raise complaints** menu to raise the complaint, and the complaint will be attended by a respective officer

HOME	GET IN TOUCH	HELP DESK	LOGIN
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Home / Raise Complaints

GPMS Transportal Online Complaint Monitoring System

Raise Your Complaint / Requirement / Feedback / Suggestion

Quick Links

- Dashboard
- Raise Complaints
- View Complaints

Select			
Subject*	Write the subject for your complaint		
Your Message*	<div style="border: 1px solid #ccc; padding: 5px;"> <p>Rich text editor toolbar with options for Bold, Italic, Underline, Paragraph, Font Family, Font Size, Bulleted List, Numbered List, Indent, Outdent, Undo, Redo, Link, Unlink, Image, Table, etc.</p> </div>		
Path: p		Words: 0	
Enter Your Contact Information (Your contact information is invisible to others)		File Upload (Upload gif, jpeg, jpg, png images, pdf and doc files)	
Your Name*	Ex: Write Your Name	Choose File No file chosen	
Your Contact Number*	Mobile No. Ex: 9988776655 Telephone No. Ex: 08023568956	No File Name Remove	
Your Mail-Id*	Ex: username@domain.com		
Your Location Details*	Ex: Enter Your Location Address		
Submit		Reset	



ACKNOWLEDGEMENT

- Initiative by the Ministry of Health and Family Welfare, Govt. of India, NITI AAYOG, Govt. of Karnataka Health and Family Welfare.
- Powered by Indian CST And Team.
- Principal Secretary to Government of Health & Family Welfare Department, Government of Karnataka
- Hosted on India's own Super Computing infrastructure facility at CSIR 4PI.
- Mr. Mahesh, PS To Principal Secretary, Government of Health & Family Welfare Department, Government of Karnataka
- Dr. Sridhar S M, Deputy Director, e-hospital program, NHM
- Dr. Rajani, Deputy Director, Child Health
- Dr. Rajani P, Deputy Director, Mental Health
- Dr. R. Narayana, Deputy Director, EMRI



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- Dr. Vishwanath, UNICEF Consultant, NHM
- Deputy Director, NVBDCP, NHM
- Deputy Director, NCD, NHM
- Deputy Director, PCNDT, NHM
- Deputy Director, State Blood Cell
- Dr. Prabhu, Deputy Director, Child Health
- Deputy Director, FSSAI
- Deputy Director, State Blood Cell
- Dr. Rajkumar, Project Director, RCH
- Dr. Sanjay, Joint Director(TB)



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- Mr. Venkataesh, Technical Director, NIC, Karnataka
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- Mr. Vishwanath, M&E Official, NHM
- Mr. Prasanna, IT Consultant, NHM
- Mrs. Ashwini G K, Programmer, NHM
- Ms. Anusha Naik, Programmer, NHM
- Ms. Nikhila S. H. State M&E Manager, Demography Section
- Mrs. Shalini K S, Senior Programme Manager, NHM
- Ms. Praveena P, Programmer, e-Hospital
- Mr. Prabjoth, Project Manager, BIOCON
- SAST Consultant, NHM



GPMS TRANSPORTAL FOR UNIVERSAL HEALTHCARE

GPMS TRANSPORTAL FOR UNIVERSAL HEALTH CARE – USER REGISTRATION WITH LOGIN CREDENTIALS

<https://indiancst.com/India/universalhealthcare>



GPMS TRANSPORTAL FOR UNIVERSAL HEALTHCARE DIGITAL ACCESS

GPMS Transportal for Universal Healthcare cloud computing platform has been further customized and developed for allowing digital access to Multiple Ministries at Central or State /District/ Urban Level /Rural Level / all Stakeholders / Govt. and Private Hospitals/ PHC's/ Sub-Centers / Doctors / GP's / Nurses / Multiple Stake holders / Associated with Healthcare Projects / Programs/ Schemes etc



GPMS TRANSPORTAL FOR UNIVERSAL HEALTHCARE DIGITAL ACCESS

User ID created for the Programme officers – Health and Family Welfare Services Department	87
User ID created for the DHO Karnataka	30
User ID created for the Health Directorates Karnataka	44
User ID (HOD) District hospital for Health Karnataka	42
User ID Taluk/Sub divisional hospital for Health Karnataka	146
User ID (HOD) community Health Centres for Health Karnataka	204
User ID Primary health Centres for Health Karnataka	2523
Registered all the Asha workers with respective PHC	34591



GPMS TRANSPORTAL FOR UNIVERSAL HEALTHCARE DIGITAL ACCESS

Registered and provided user id for all the private hospital members	10,000
District Tuberculosis officers	30
District RCHO –Reproductive child health officers	30
District RCHO –Reproductive child health officers	30
Total	47,727



ANNEXURE

1. Memorandum of Understanding between Health & Family Welfare Department, Government of Karnataka and Indian Center for Social Transformation, Bengaluru (First Part).
2. Memorandum of Understanding between Health & Family Welfare Department, Government of Karnataka and Indian Center for Social Transformation, Bengaluru (Second Part).
3. Proceedings of the Government of Karnataka –
Government Order No. HFW 76 FPE 2017, Bengaluru Dt: 06.05.2017
4. Project Management and Monitoring Of health care projects: Minutes of Meeting-Krishna Hall: 15/05/2017.
5. Minutes of Meeting: Integration of Primary Indicators-HMIS, MCTS, ASHA SOFT, SNCU, IDSP, NCD, NVBDCP, RNTCP, Disability software, Drug Inventory, Jeeva Sanjeevini, Doctors and Hospital Details etc. – Vikas Soudha-Bengaluru: 24/05/2017
6. Minutes of Meeting: Meeting with IT support Team for Data for Organizational registration and integration of medical records- NHM: 7/06/2017
7. Minutes of Meeting: Meeting with IT support Team for medical records- NHM: 13/06/2017.



8. Minutes of Meeting: Project Management and Monitoring Of health care projects linked into Sustainable Development Goal, Integration of Health care Solution into GPMS Trans Portal- Vikas Soudha-Bengaluru: 24/07/2017.
9. Minutes of Meeting: Demo on GPMS Healthcare Portal- NHM, Krishna Hall, Anand Rao Circle, Karnataka: 11/08/2017
10. Important-complete meeting date-Meeting Schedule for ICST meeting as per email sent by Nodal Officer Ehospital dated 26/08/2017.
11. Proceedings of "Integration of Softwares into Single Dashboard" meeting which was held on 9/10/2017 at 3pm with ICST technical team under the chairmanship of Deputy Director, e-Hospital Program, NHM in Krishna Hall, 3rd Floor, NHM Bengaluru.
12. Proceedings of "ICST Status Review and Training Session" meeting which was held on 11/10/2017 at 1:00pm with ICST technical team under the chairmanship of Deputy Director, e-Hospital Program, NHM in Krishna Hall, 3rd Floor, NHM Bengaluru.
13. Minutes of Meeting: Integration of New API s and Programs into GPMS Transportal –Universal Health Common Dashboard- NHM, Krishna Hall, Anand Rao Circle, Karnataka: 14/12/2017.
14. Minutes of Meeting: Demo on Integrated GPMS Universal Healthcare Common Dashboard- MHFW-Karnataka- SAST,-TTMC A block, BMTC - building –Bengaluru: 17/03/2018

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Indian CST Research Publications

Structure based drug discovery for designing leads for the non-toxic metabolic targets in multi drug resistant Mycobacterium Tuberculosis

Divneet Kaur¹, Shalu Mathew², Chinchu G. S. Nair², Azitha Begum², Ashwin K. Jainanarayan^{1,5}, Mukta Sharma¹ and Samir K. Brahmachari^{1,2,3,4*}

Kaur et al. J Transl Med (2017) 15:261

<https://doi.org/10.1186/s12967-017-1363-9>

<https://link.springer.com/article/10.1186/s12967-017-1363-9>

Spatio-Temporal Network Dynamics of Genes Underlying Schizophrenia

Anirudh Chellappa S¹, Ankit Kumar Pathak², Prashant Sinha², Ashwin K.

Jainarayanan³, Sanjeev Jain⁴, Samir K. Brahmachari^{1,2,5,6,*} <https://doi.org/10.1101/369090>

<https://www.biorxiv.org/content/biorxiv/early/2018/07/13/369090.full.pdf>

<https://indiancst.com/India/universalhealthcare>

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Indian CST Team's Achievements

- ❑ GPMS TRANSPORTAL becomes world first cloud computing integrated make in India solution platform
- ❑ GPMS Transportal for Universal Healthcare also becomes the world's first where integrating 100 plus healthcare different systems into a single dashboard for providing affordable healthcare for all
- ❑ Open Innovation Center - The latest being the insilico validation methodology in open source for finding MTb new 20 novel drugs of which 4 are approved drugs which also becomes the world's first

<https://indiancst.com/india/universalhealthcare>



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For DEMO of the GPMS UNIVERSAL
HEALTHCARETRANSPORTAL
Please Contact:
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Indian Centre for Social Transformation



**GPMS Universal Health Care Information Therapy Transportal
Common Integrated Dashboard**



For any clarification, please contact

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www.indiancst.in

www.indiancst.com

www.epashuhaat.gov.in

www.indiancst.com/India/universalhealthcare

<https://tscl.indiancst.com>

<https://municipality.indiancst.com>