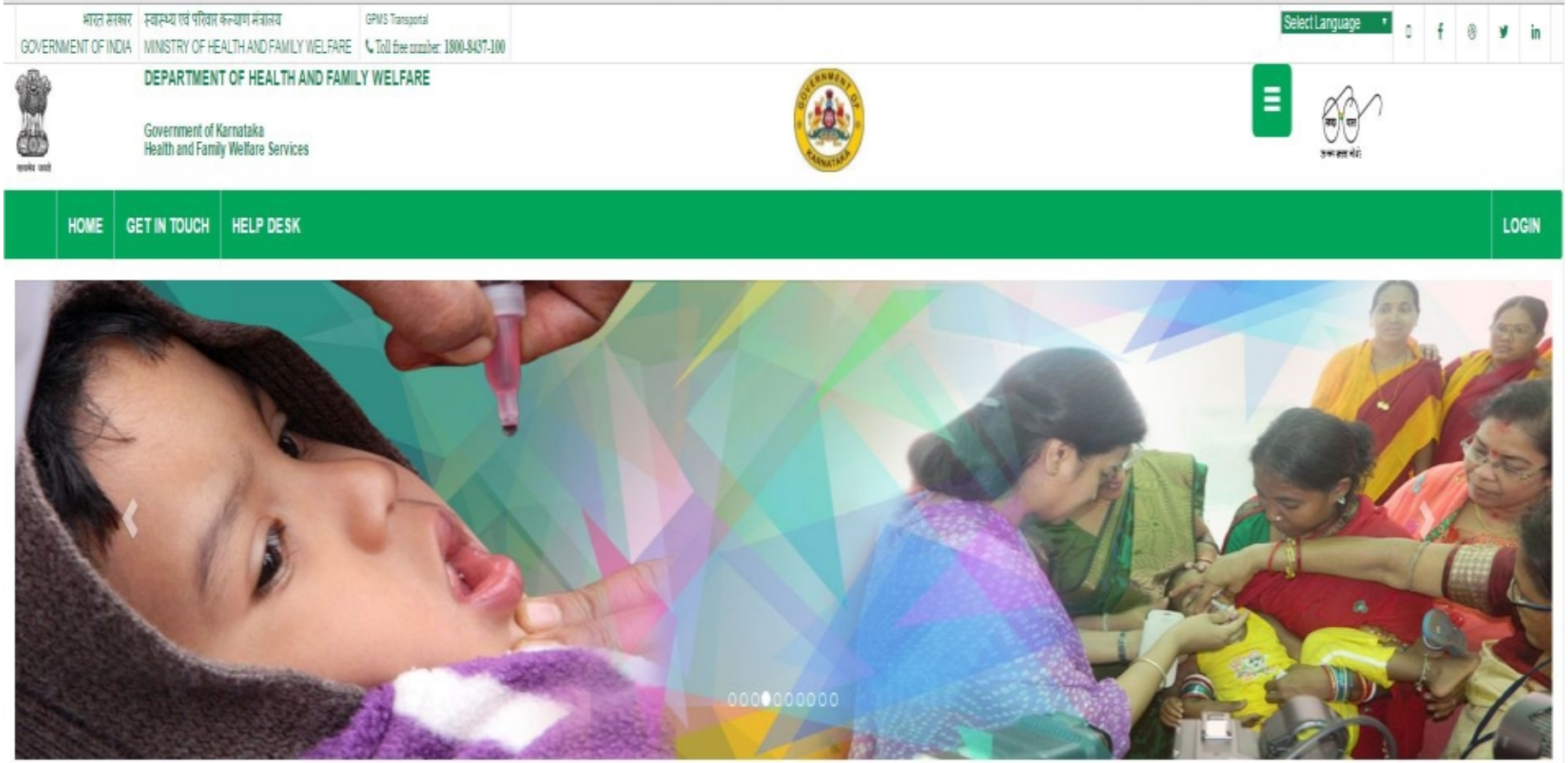
GPMS Universal Health Care Information Therapy Transportal
Common Integrated Dashboard

DEPARTMENT OF HEALTH AND FAMILY WELFARE – GOVT. OF KARNATAKA



Integrated GPMS Transportal For Universal Healthcare*

Sustainable Action for Transforming Human capital (SATH) program

About
Ministry of Health and Family Welfare

Ministry of Health and Family Welfare
Government of India

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.

https://mohfw.gov.in

About NHM:

Government of India

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

Department of
Health & Family Welfare

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

About Indian CST:

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.

http://www.karnataka.gov.in/hfw/Pages/Home.aspx

"SATH"

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.

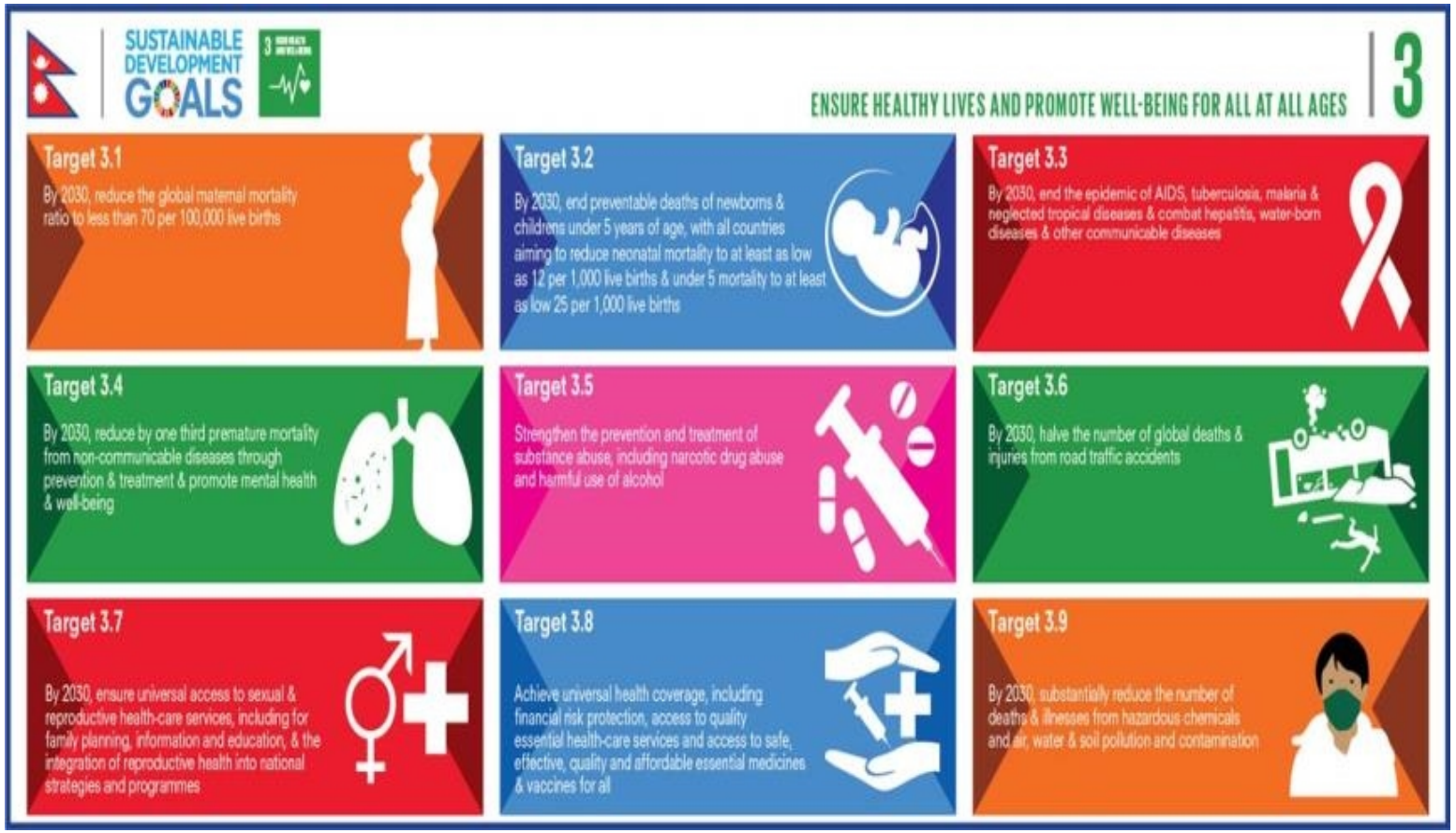
Health Card for access to primary healthcare facility services anytime, anywhere.

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



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.

Sustainable Action for
Transforming Human Capital (SATH)
Improving Health for a Better Karnataka
State Consultative Workshop

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

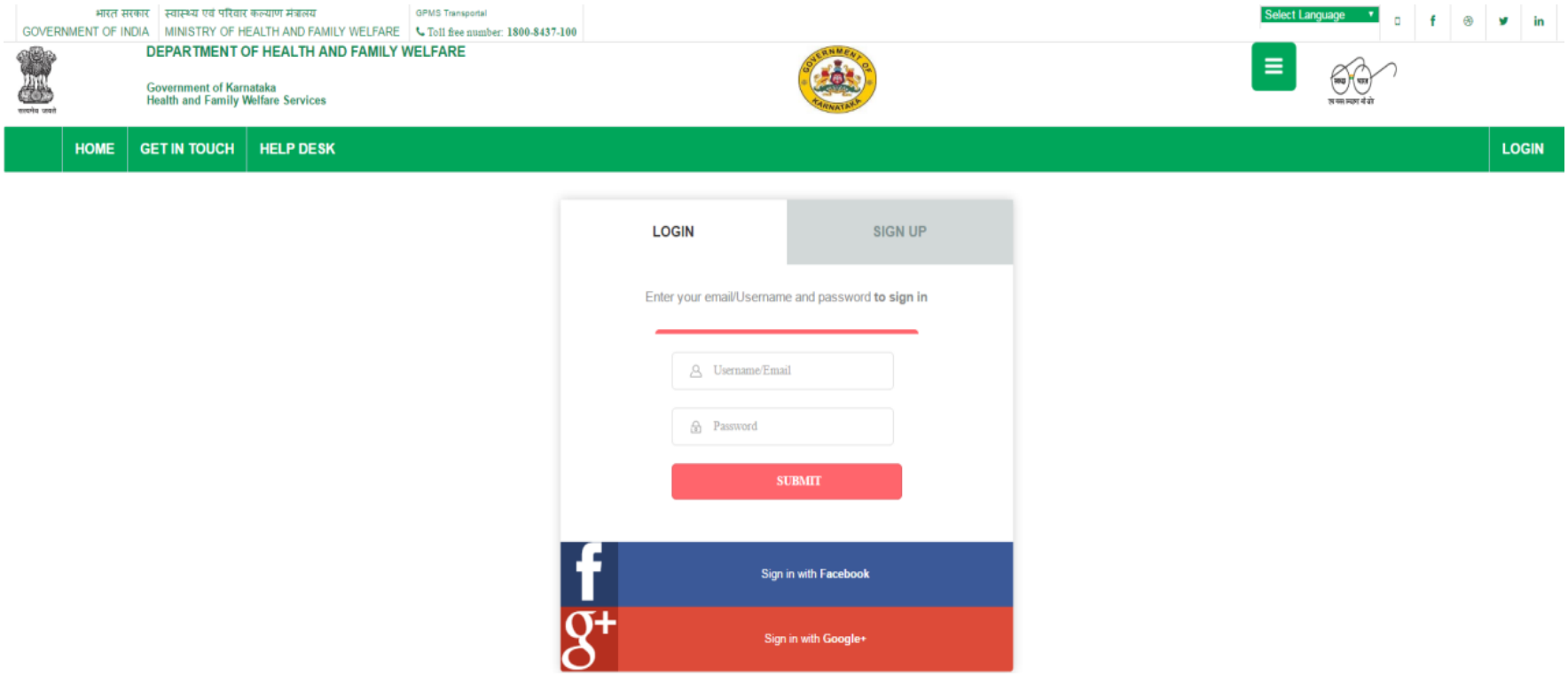
GPMS Transportal for Universal Healthcare cloud computing platform has been further customized and developed for allowing digital access to Multiple Ministries at Central or State /District/ Urban Level /Rural Level / all Stakeholders / Govt. and Private Hospitals/ PHC's/ Sub-Centers / Doctors / GP's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

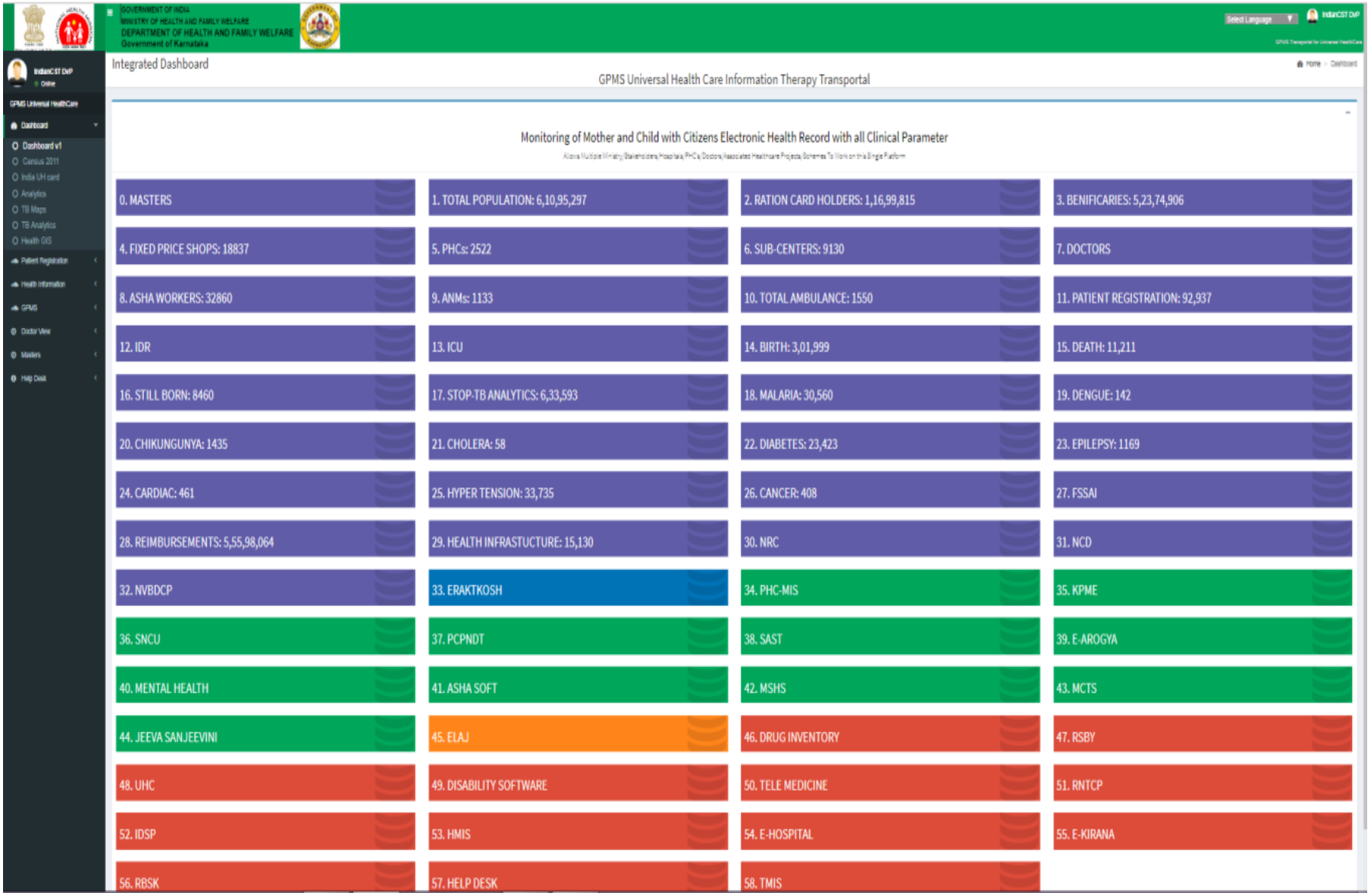
Initiative by the Ministry of Health and Family Welfare, Govt. of India, NITI AAYOG, Govt. of Karnataka Powered by Indian CST.

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



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

GPMS Universal Health Care Information Therapy Transportal
Common Integrated Dashboard



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

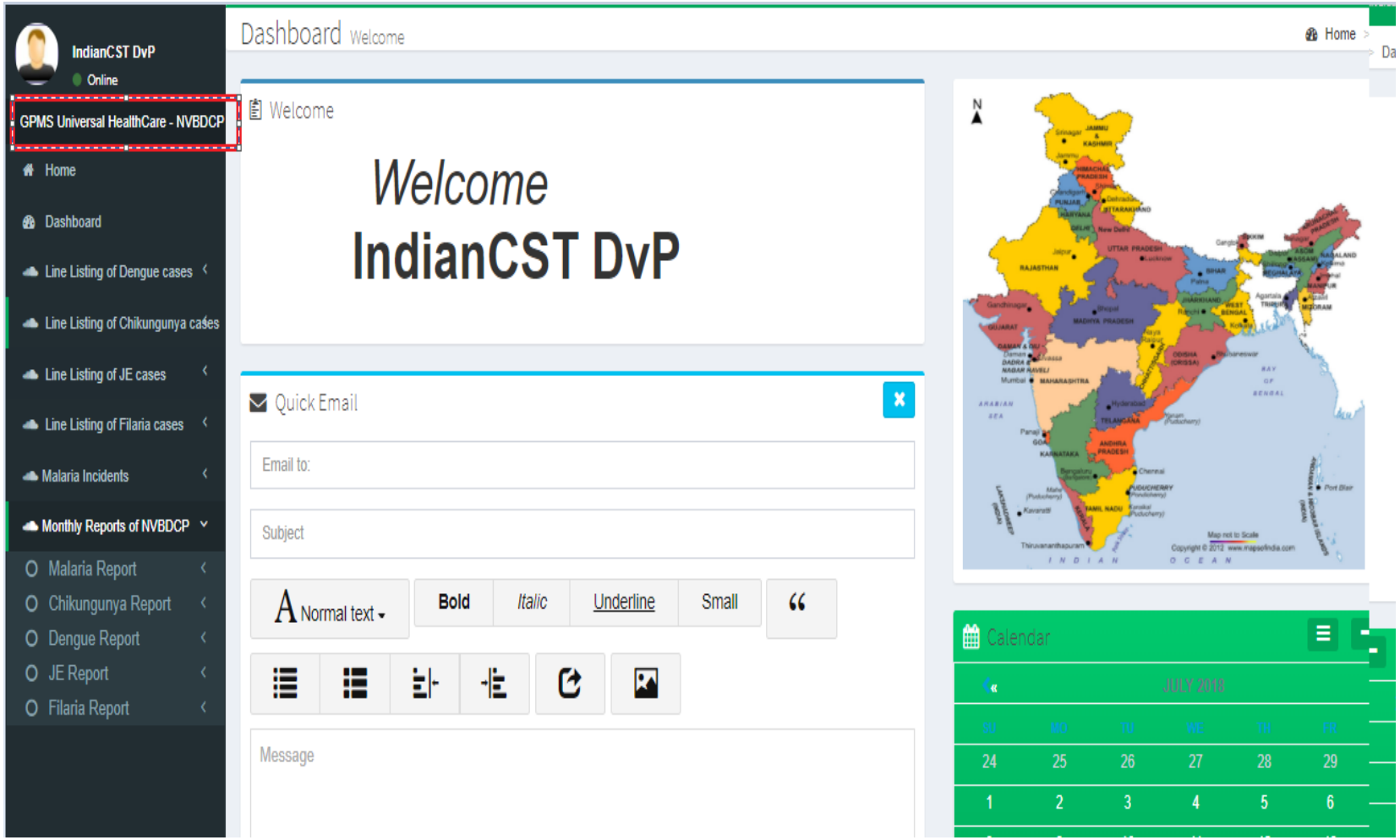
NVBDCP Online New Module developed And Integrated

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
- Filaria

NVBDCP Online New Module developed And Integrated



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

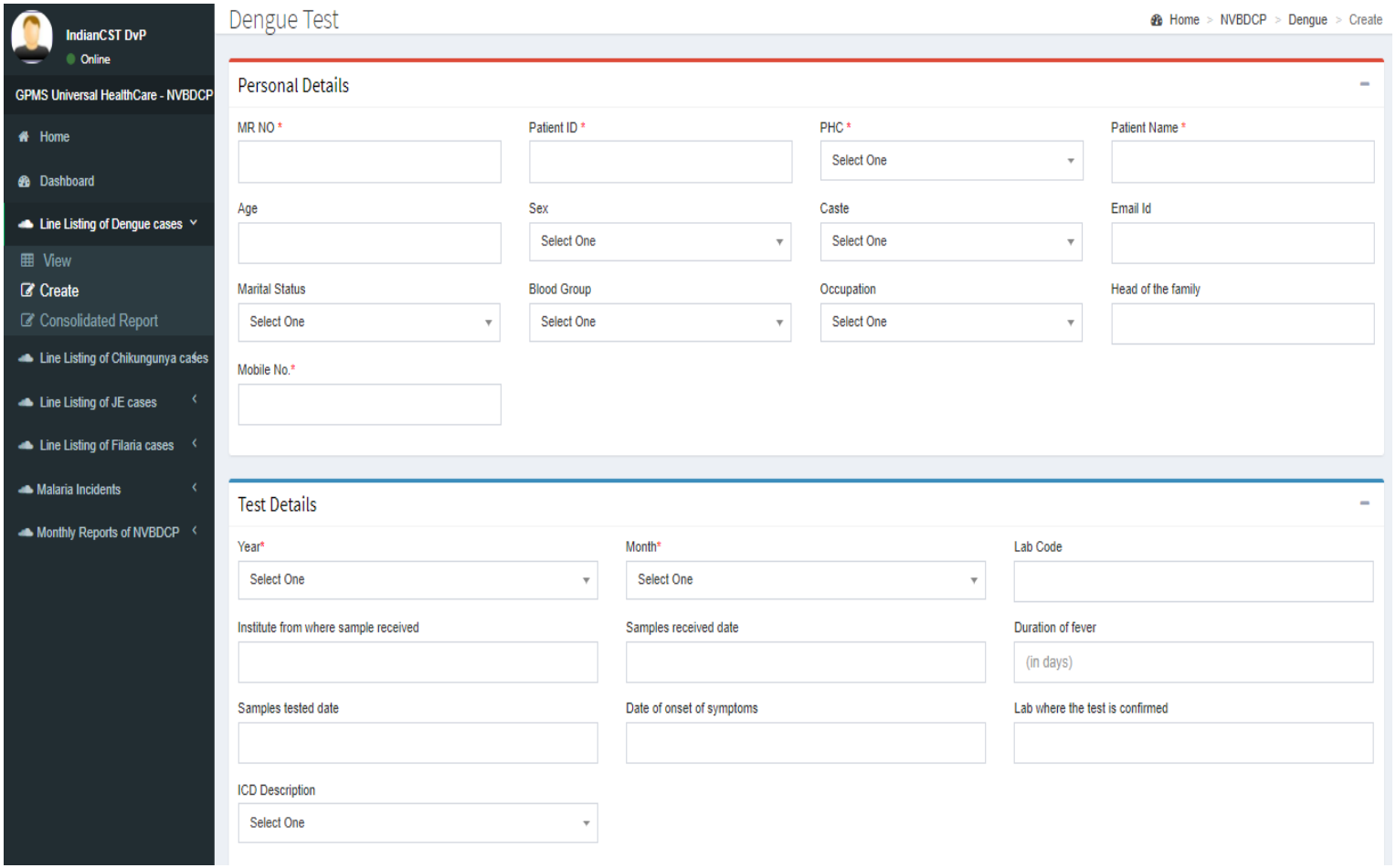
- ANMs screens citizens and suspected cases of dengue and Chikungunya are registered in "MAR" and referred to PHC
- PHCs calls patient or patient himself comes
- Serum received in sentinel surveillance lab is tested for Chikungunya or Dengue
- Confirmed patients are reported to District level office.
- 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



GPMS TRANSPORTAL FOR UNIVERSAL HEALTHCARE

LINE LISTING FOR CHIKUNGUNYA NEW ONLINE MODULE DEVELOPED AND INTEGRATED

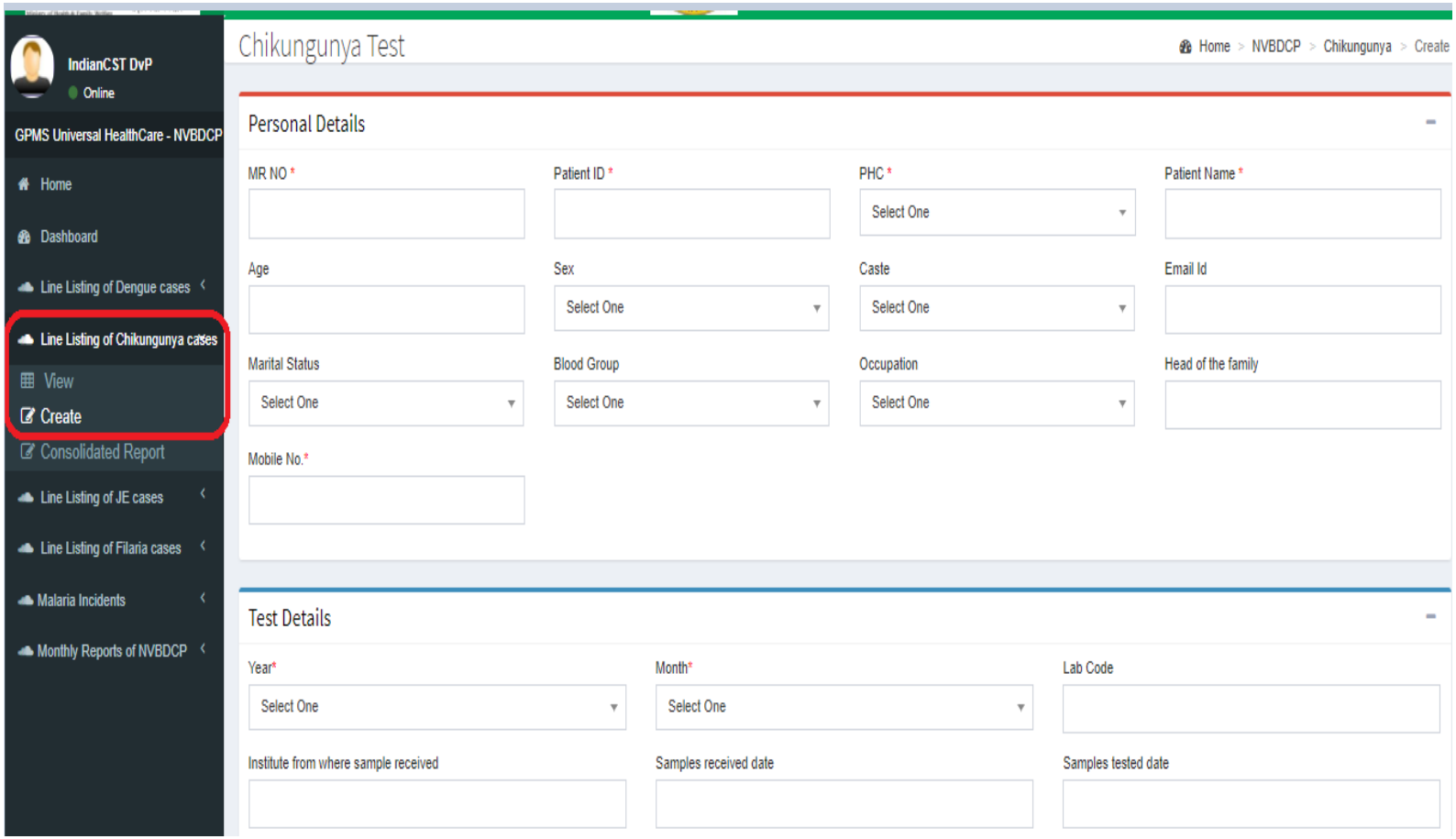
https://indiancst.com/India/universalhealthcare

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



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

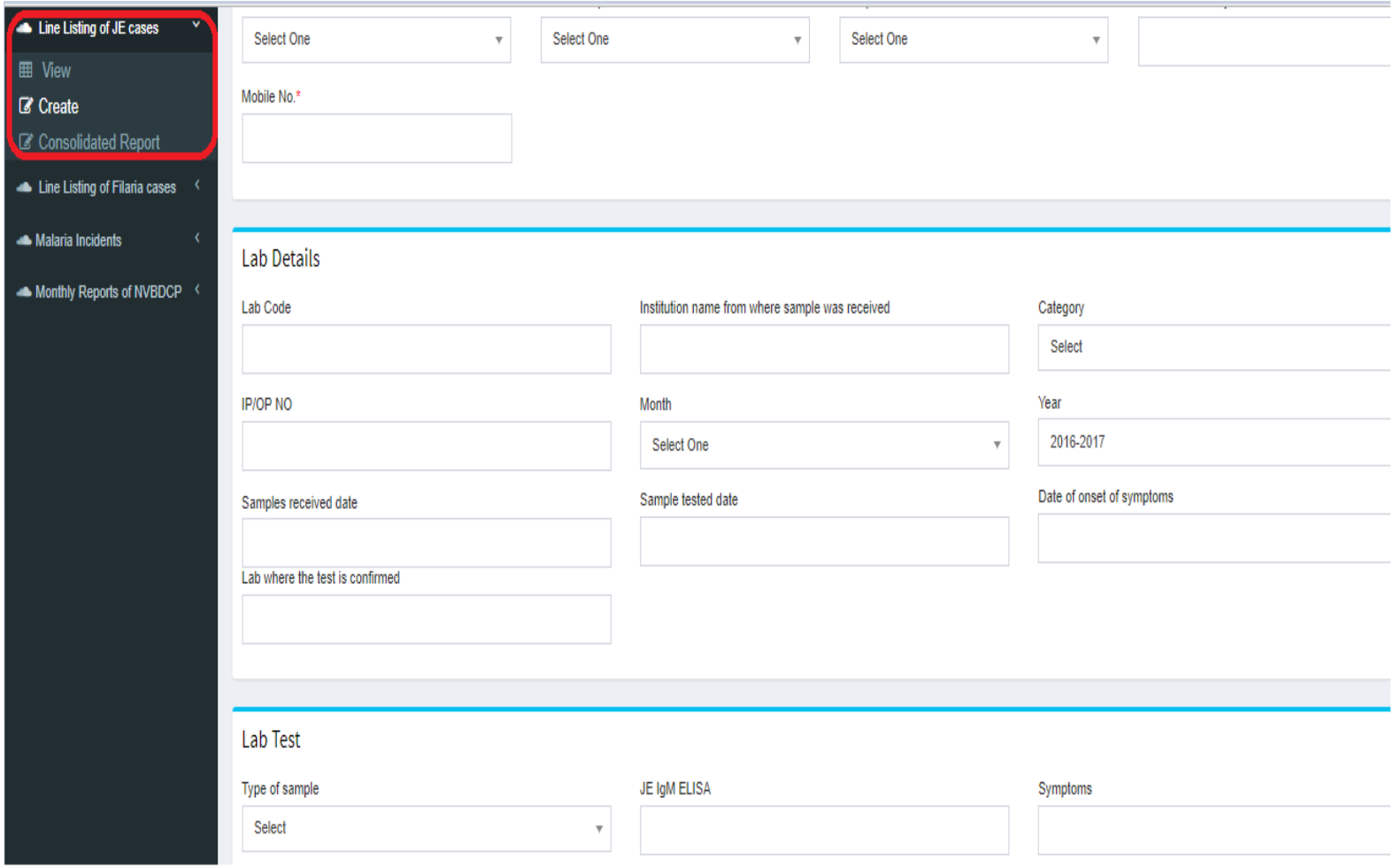
- ANMs screens citizens and suspected cases of JE are registered in "MAR" and referred to PHC
- PHCs calls patient or patient himself comes
- Blood sample is collected and Serum is separated
- Serum received in sentinel surveillance lab is tested
- In case of JE diagnosis, if someone is detected with 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



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. Lymphatia filaria is prevalent in 18 states and union territories. Bancrftian 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

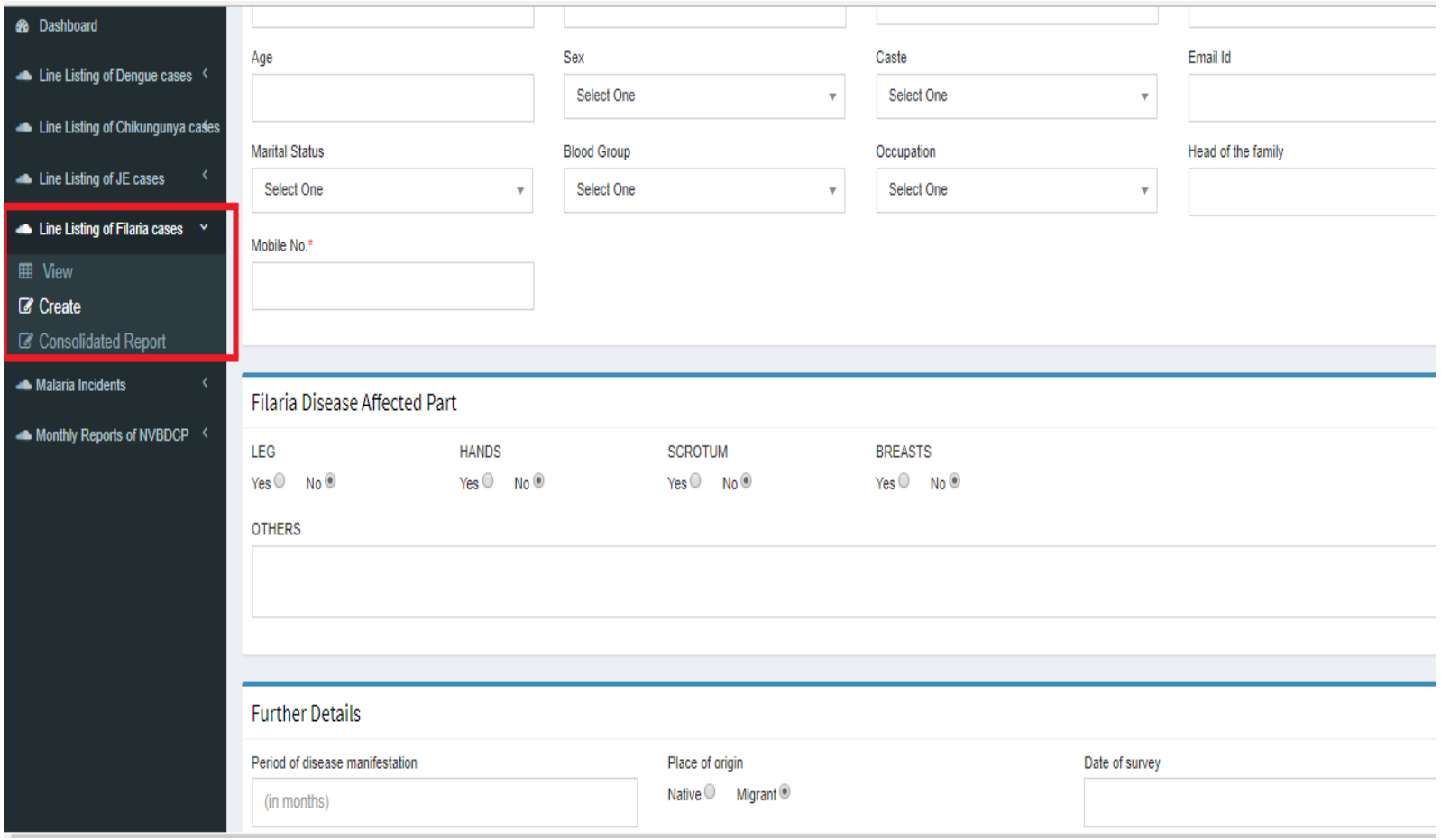
Filaria Control Program Objective

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



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

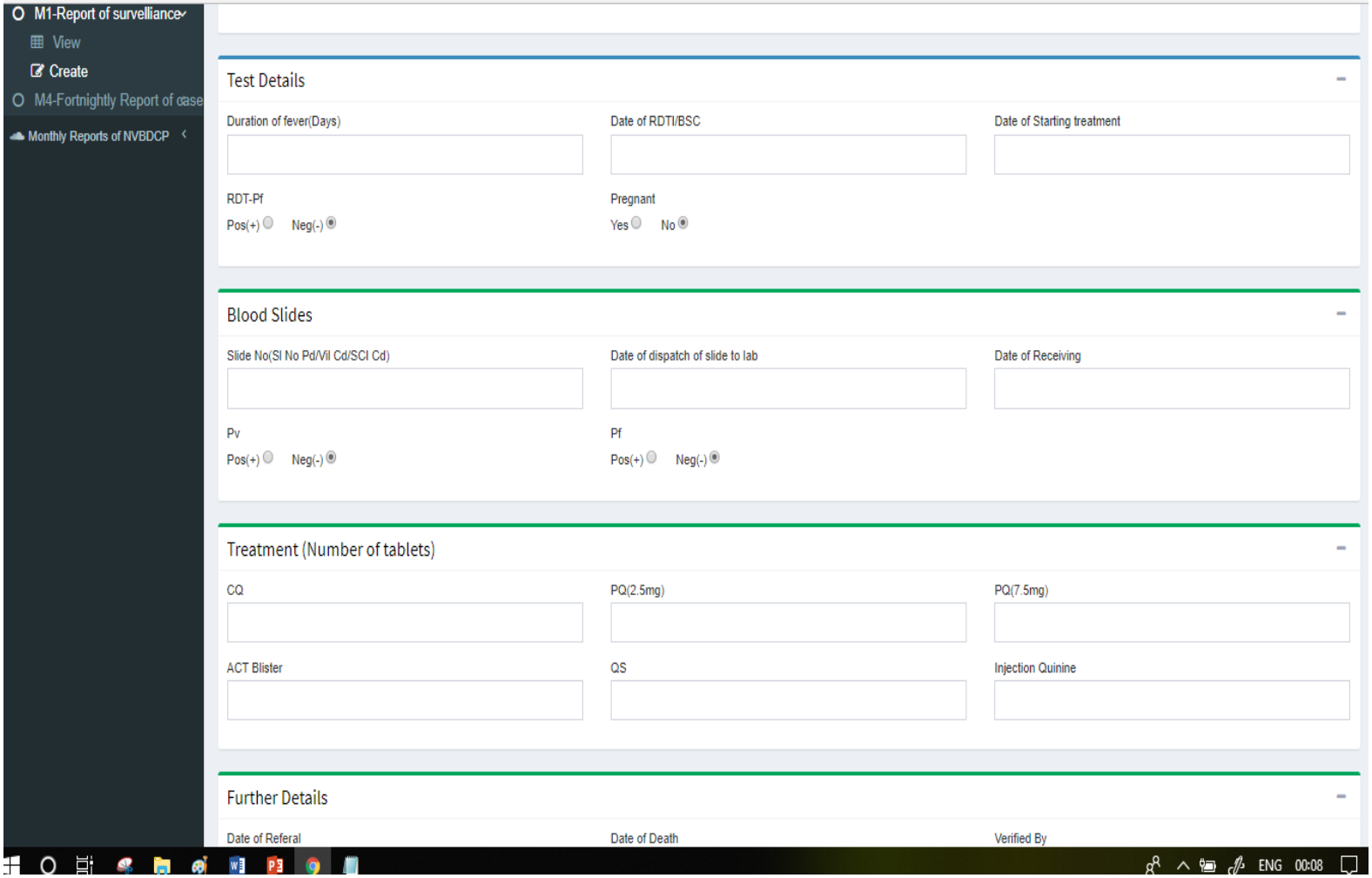
NVBDCP- MALARIA Online New Module Developed and Integrated

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.

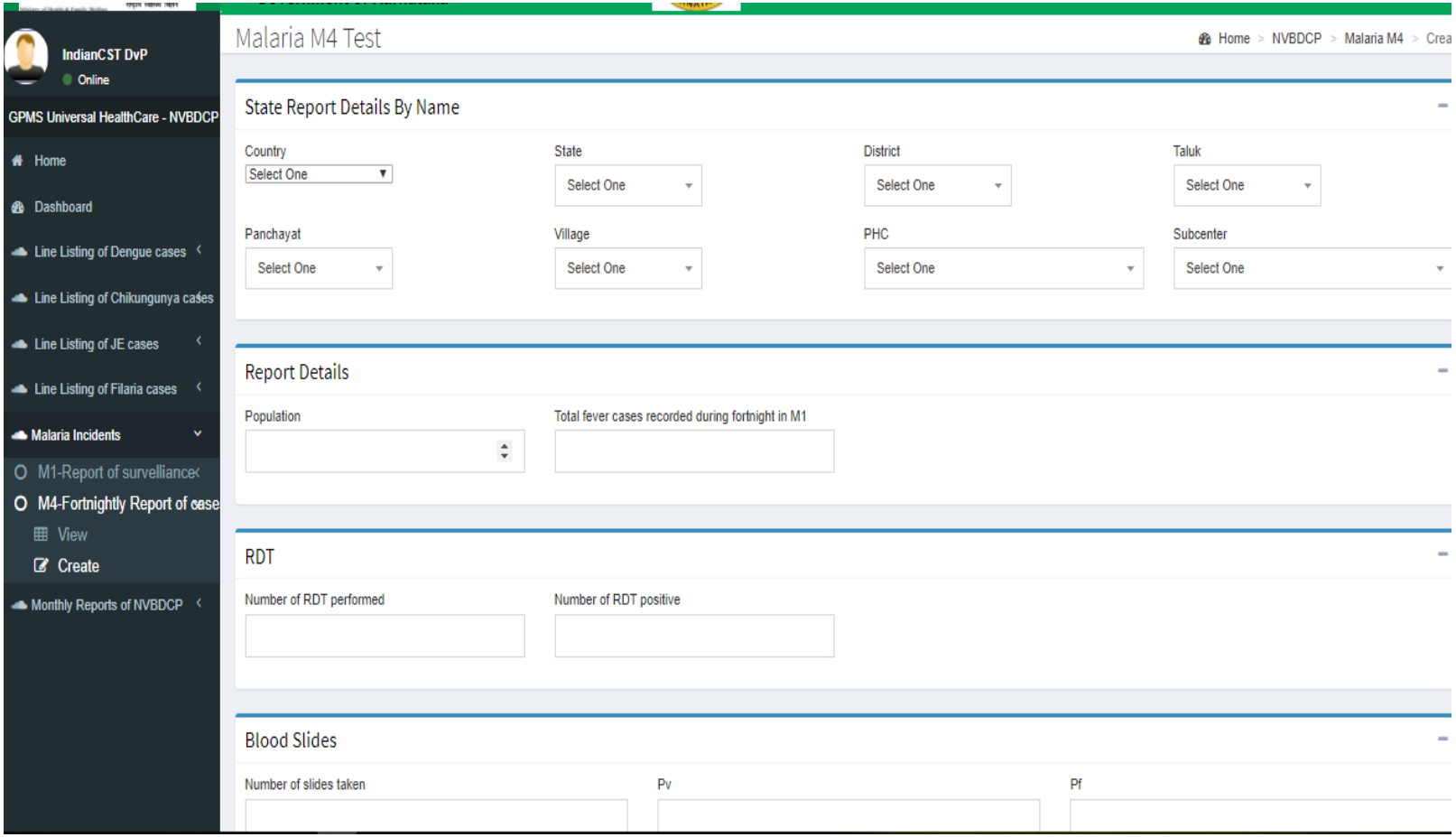
NVBDCP- MALARIA Online New Module Developed and Integrated

Malaria Control Program - M1 report of surveillance



NVBDCP- MALARIA Online New Module Developed and Integrated

Malaria Control Program -M4 - Fortnightly report cases



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:secyhfw@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

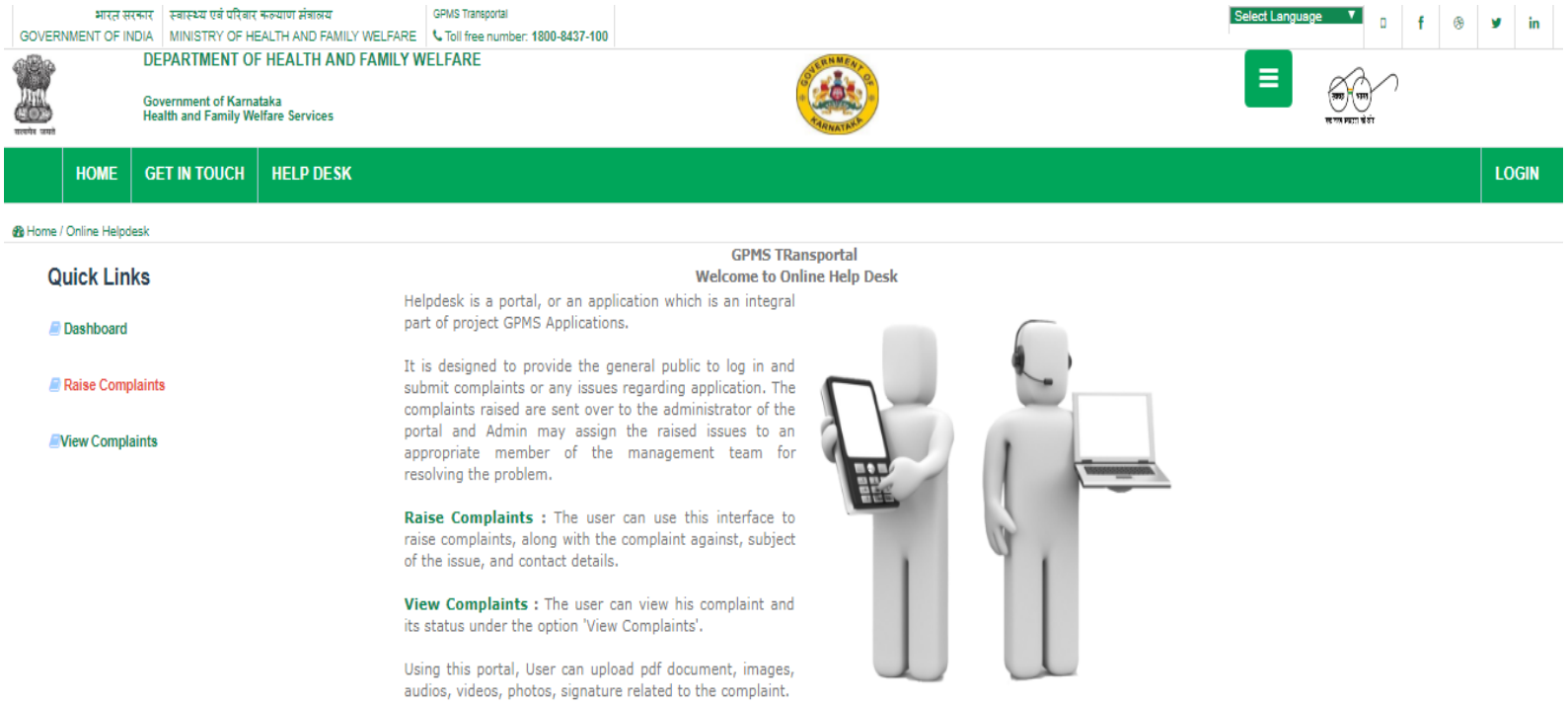
Dr. Shalini Rajneesh. IAS
Principal Secretary to Govt. of Karnataka
Address:
Health & Family Welfare Services
#105, I Floor, Vikas Soudha,
Bengaluru - 560 001
India
Off Phone: +918022255324, +918022034234

Nirman Bhawan

Our Location

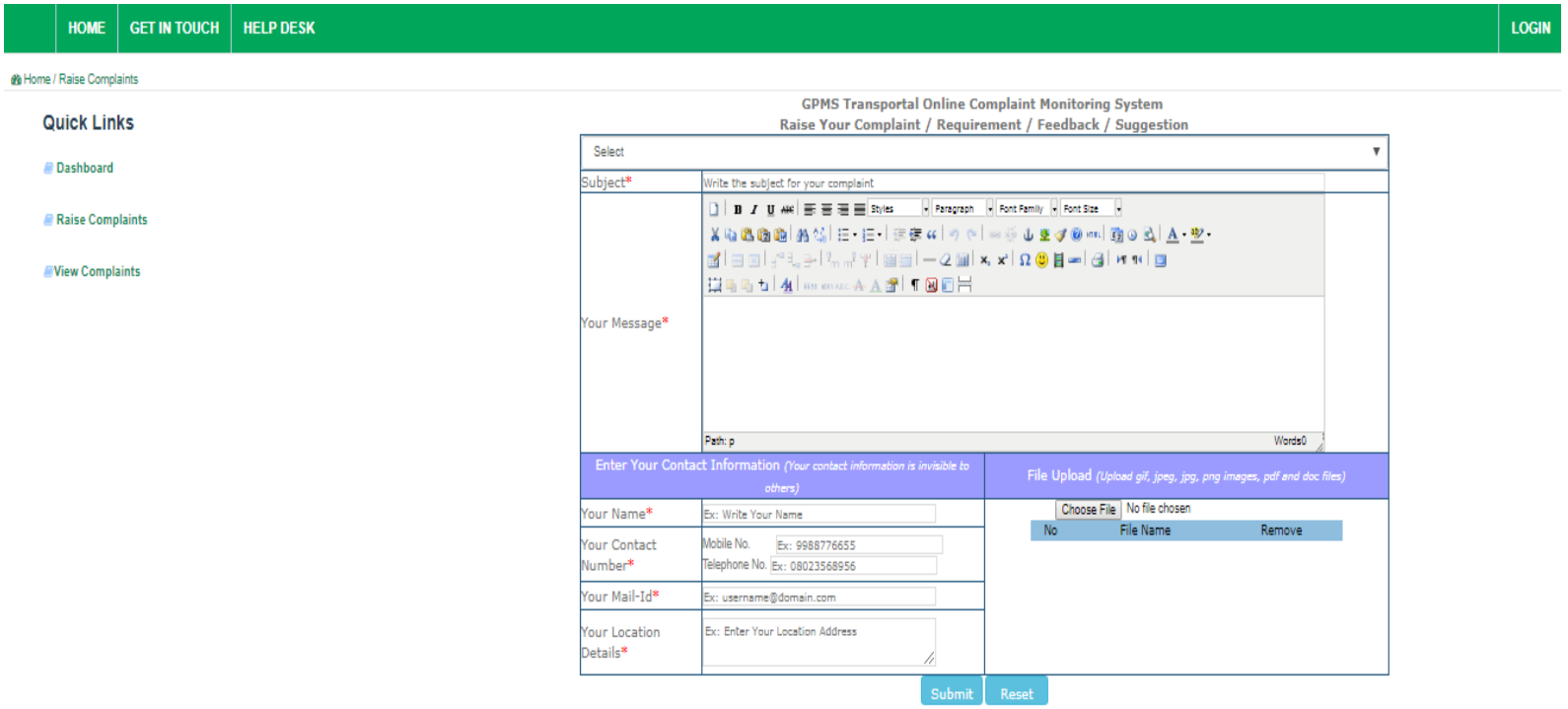
ONLINE HELP DESK MODULE

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



ONLINE HELP DESK MODULE

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



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

ACKNOWLEDGEMENT

- Dr. C. S. Nagalakshmamma, Deputy Director, Immunization
- Mrs. Aaliya Sulthan, Technical Officer, Nutrition
- 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)

ACKNOWLEDGEMENT

- Mr. Venkataesh, Technical Director, NIC, Karnataka
- Mr. Madhukar M V, Co-ordinator CH, NHM
- 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

Indian Centre For Social Transformation
A Public Charitable Trust (Regd.)

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. Jainanarayan1,5, Mukta Sharma1and Samir K. Brahmachari1,2,3,4*
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 Pathak 2, Prashant Sinha2, Ashwin K. Jainarayanan3,Sanjeev Jain4, Samir K. Brahmachari1,2,5,6,* https://doi.org/10.1101/369090
https://www.biorxiv.org/content/biorxiv/early/2018/07/13/369090.full.pdf

https://indiancst.com/India/universalhealthcare

Indian Centre For

Social Transformation

A Public Charitable Trust (Regd.)

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

Indian Centre For

Social Transformation

A Public Charitable Trust (Regd.)

For DEMO of the GPMS UNIVERSAL HEALTHCARE TRANSPORTAL
Please Contact:
Indian Centre for Social Transformation
+918073536006

Indian Centre for Social Transformation

www.indiancst.com www.indiancst.in

For any clarification, please contact

Raja Seevan Founder Trustee
Indian Centre for Social Transformation
Mobile No.+918073536006 or +919739047849

Empowering Nation ... Empowering Citizens
www.indiancst.in
www.indiancst.com
www.epashuhaat.gov.in
www.indiancst.com/India/universalhealthcare
https://tscl.indiancst.com
https://municipality.indiancst.com