

**PATIENTS AND THEIR RELATIONS  
RATED NATIONAL HOSPITAL HIGH**

Approximately 68% of 1000 respondents (patients and their relations) interviewed had rated the National Hospital performance high.

In a service improvement survey conducted in the Hospital in the last quarter of 2007, respondents were asked: How would you rate the quality of services of the Hospital?. The respondents responses are as indicated below:-

RATINGS	NO OF RESPONDENTS	RESPONSES %
Excellent	108	10.8
Very Good	220	22.0
Good	343	34.3
Average	274	27.4
Poor	43	4.3
Very Poor	12	1.2
<b>Total</b>	<b>1000</b>	<b>100</b>

Out of 1000 respondents, a total of 671 representing approximately 68% rated the performance of the Hospital ranging from excellent (10.8%) to very good (22%) and good (34.3%). Not less than 27.4% or 343 respondents rated the Hospital averagely. While

insignificant number of 43 respondents (4.3%) rated the Hospital poor, 12 respondents (1.2%) rated it very poor.

Not less than 94.5% that rated the Hospital between excellent and average based their assessment on efficient and effective diagnoses and treatments, cleanliness of the Hospital, uninterrupted water and electricity supply as well as the aesthetic beauty of the Hospital.

About 5.5% of the respondents who rated the Hospital poor and very poor based their assessment on long waiting time and not very good courteous attitude of some few unidentified members of staff.

**NATIONAL HOSPITAL, ABUJA IVF  
CENTRE CONSOLIDATED**

The status of the National Hospital In-Vitro Fertilization Centre, established in March, 2006 was consolidated in 2007.

The Centre, first of its kind in government owned Hospitals in Nigeria, produced a test-tube baby (a girl) on 8<sup>th</sup> March, 2007 weighing 2.25kg at 34<sup>th</sup> week.

Since its inception, the Centre has produced ten babies and currently

twelve pregnancies are on-going. Cost remains N300,000.00 excluding drugs.

### **A LEADING NEPHROLOGIST IN GERMANY PAID A COURTESY VISIT TO NATIONAL HOSPITAL**

A leading Nephrologist in Germany, a specialist in hypertension and the Chief Medical Director, Department of Internal Medicine, Cologne University Teaching Hospital, Germany, Professor Manfred Weber paid a courtesy visit to the Chief Medical Director, Dr. Z. O. Ajuwon OON on the 17<sup>th</sup> January, 2008.

Professor Weber was on a week visit to Nigeria under the auspices of Gemini Pharmaceuticals Nigeria Limited.

The CMD thanked the visiting six-man team for the visit and emphasized the need for the National Hospital to partnership with the Cologne University Teaching Hospital in a bid to improve service delivery.

The representatives of the two health institutions agreed to establish German – Nigerian medical cooperation; a mutually rewarding collaborative endeavour especially in the area of kidney diseases. The details of this endeavour will come your way in the subsequent editions.

Professor Weber and his team lead by Deputy Chairman, Medical Advisory Committee, (C-MAC), Dr. Emmanuel

Anteyi later visited facilities in A&E, Haemodialysis Unit and Medical Wards.

Professor Weber commended the Hospital for its wonderful hospitality and friendly disposition.

### **TELEMEDICINE PRACTICE IN THE NATIONAL HOSPITAL, ABUJA**

Telemedicine proof of concept was launched in the National Hospital, Abuja on 31<sup>st</sup> October, 2007.

Telemedicine is a technology for carrying out medical consultations using special equipment that enable medical consultation and care without the patient being physically present. It is a new invention in the area of medicine to make the patient enjoy the expertise of specialist Doctor without going to meet such specialist physically.

National Hospital Newsletter Correspondent, Hajia Rabiah Labaran met the Consultant in charge of the ENT Unit, Dr. A. D. Olusesi, who is the anchor person overseeing the progress of the implementation.

He defined telemedicine in simple terms as a “provision of remote medical diagnosis and treatment across a distance which ranges from the use of a simple telephone to a more complex satellite based video conferencing machine. It may also be extended to encompass not mere

examination and consultation but also remote surgery depending on the “peripherals” (electrical accessories) available to the telemedicine system. The proximity (distance between the Doctor and the patient) ranges from next room to the next continent”.

The telemedicine machine was donated by INTEL in collaboration with Federal Ministry of Health which proposed the choice of National Hospital and Federal Medical Centre, Bida as the core centre for the take-off experiment.

This current telemedicine programme practiced in National Hospital, Abuja is called Nigerian proof-of-concept. It involves experimenting the programme to see how practicable it is. Presently, two hospitals are involved – National Hospital as the anchor having the specialists on one hand, and Federal Medical Centre, Bida being a local hospital on the other hand. The choice of F.M.C., Bida was precipitated by the fact that it is short of key specialists in certain areas of medicine i.e ENT and Paediatrics.

The consultation is done through an audio-visual interaction between the consultant on one side and the Doctor and patient in the local hospital on the other side. It may involve a mere medical advice or may even extend to direct diagnosis by the Consultant on the patient with the help of a Nurse through a Special Telemedicine

Machine. In this case, the Nurse or Doctor carries out the instructions of the consultant on the patient all through.

Telemedicine could also be practiced through a teleconferencing machine. In this case, Consultants/Doctors engage in brain storming while in different places using telephone and video connections. This helps the participants to enrich themselves with a more current approach to treatments of ailments. This could go a long way to avert unnecessary deaths and pain to the patient due to distance or using cliché method and treatment.

The benefits that could be derived from this type of telemedicine practice are enormous. They include tests of expertise of our medical personnel to show case to the world how effective their services are. It also exposes them to socialize with the outside world, thereby expanding their scope and experience. This practice is medically safe, cheap and is particularly targeted at the indigent patients and those with serious complications, who by moving them to another place for treatment will cause adverse complication on them.

This programme if successfully implemented may extend to other Hospitals within Abuja, Nigeria, and the world at large.

So far two cases were managed before the launch, two during the launch and only one case after the launch. The programme had to discontinue due to satellite failure. This connectivity problem brought the programme that was widely welcomed by patients to a temporal halt. The service providers are presently working on their satellite to enable them reactivate the programme in the near future.

Dr. A. D. Olusesi, the Head of Ear/Nose/Throat Department when asked if they receive any remuneration for the extra efforts they are putting aside their heavy clinic duties said plans are underway by the Management to approve some incentives for participants here in National Hospital. It is indeed commendable effort that should be sustained for the benefit of humanity.

**MAINS SERVICE AREAS**

Our main service points are:

- i. - Accident and Emergency Unit which operates on 24 hours basis
- ii. - Anaesthetic Unit with routine EPIDURAL analgesia for pain-free labour
- iii. - Ambulance services with basic ACLS
- iv. - Cancer treatment services using a Linear

- v. - Accelerator, Brachytherapy, etc  
Dental and Maxillofacial services
- vi. - Dietetic services
- vii. - Ear, Nose and Throat (ENT) services
- viii. - Family Medicine; GOPD, GPOPD and VIP/ Private Wing
- ix. - Family Planning and Reproductive Health services
- x. - Haemodialysis services for patients with kidney malfunction
- xi. - In-Patients Wards comprising VIP/Private Wing, Semi-Private and Open Wards
- xii. - Intensive Care Unit (ICU) to cater for serious medical and surgical cases
- xiii. - In-Vitro Fertilization (IVF) Services
- xiv. - Labour Ward/Theatres for deliveries and infant care facilities
- xv. - Laboratory services in microbiology/parasitology, haematology/blood transfusion, morbid anatomy/histopathology, chemical pathology, immunology, etc
- xvi. - Medical Physics
- xvii. - Medicine Department

- xviii. - Non-Clinical Services such as Administration, Engineering, Finance, etc
- xix. - Nuclear Medicine with fully functional Gamma Camera
- xx. - Nursing Services
- xxi. - Obstetrics and Gynaecology
- xxii. - Ophthalmology
- xxiii. - Oncology and Radiotherapy
- xxiv. - Paediatrics and neonatal care services for sick children
- xxv. - Pharmacy
- xxvi. - Physiotherapy services
- xxvii. - Psychiatry services
- xxviii. - Radio-Diagnostic services using ultra-modern X-ray machines such as mammography, CT-Scan, Magnetic Resonance Imaging (MRI), etc.
- xxix. - Surgery: General, Orthopaedic, Neurosurgery and Spine where a full range of minor and major operations including endoscopic procedures are performed
- xxx. - Urology services.