<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIIMS</td>
<td>All India Institute of Medical Sciences</td>
</tr>
<tr>
<td>AERB</td>
<td>Atomic Energy Regulatory Board</td>
</tr>
<tr>
<td>CRFMS</td>
<td>Cancer Relief Fund Monitoring System</td>
</tr>
<tr>
<td>CS</td>
<td>Civil Surgeon</td>
</tr>
<tr>
<td>DC</td>
<td>Deputy Commissioner</td>
</tr>
<tr>
<td>DHS</td>
<td>Director Health Services</td>
</tr>
<tr>
<td>EMO</td>
<td>Emergency Medical Officer</td>
</tr>
<tr>
<td>GMCH</td>
<td>Government Medical College and Hospital</td>
</tr>
<tr>
<td>GOI</td>
<td>Government of India</td>
</tr>
<tr>
<td>HOD</td>
<td>Head of the Department</td>
</tr>
<tr>
<td>HBC</td>
<td>Hospital Based Cancer Registry</td>
</tr>
<tr>
<td>IFSC</td>
<td>Indian Financial System Code</td>
</tr>
<tr>
<td>ID</td>
<td>Identity Document</td>
</tr>
<tr>
<td>KB</td>
<td>Kilo bytes</td>
</tr>
<tr>
<td>MB</td>
<td>Mega Bytes</td>
</tr>
<tr>
<td>MMPCRK</td>
<td>Mukh Mantri Punjab Cancer Rahat Kosh</td>
</tr>
<tr>
<td>NHM</td>
<td>National Health Mission</td>
</tr>
<tr>
<td>NGO</td>
<td>Non Governmental Organisation</td>
</tr>
<tr>
<td>NCD</td>
<td>Non Couminicable Disease</td>
</tr>
<tr>
<td>PBCR</td>
<td>Population Based Cancer Registry</td>
</tr>
<tr>
<td>PGI</td>
<td>Post Graduate Institute</td>
</tr>
<tr>
<td>PDF</td>
<td>Portable Document Format</td>
</tr>
<tr>
<td>RTGS</td>
<td>Real Time Gross Settlement</td>
</tr>
<tr>
<td>SMO</td>
<td>Senior Medical Officer</td>
</tr>
<tr>
<td>SC</td>
<td>Schedule Caste</td>
</tr>
<tr>
<td>ST</td>
<td>Schedule Tribes</td>
</tr>
<tr>
<td>SMS</td>
<td>Short Message Service</td>
</tr>
<tr>
<td>SHRC</td>
<td>State Health Resource Centre</td>
</tr>
<tr>
<td>TCCS</td>
<td>Tertiary Cancer Care Centers</td>
</tr>
<tr>
<td>UTR</td>
<td>Unique Transaction Reference</td>
</tr>
</tbody>
</table>
Cancer Control Program

Introduction

Recent times have seen an increase in the incidence of cancer. This is mainly attributed to urbanization, industrialization, lifestyle changes, population growth and increased life span (in turn leading to an increase in the elderly population). In India, the life expectancy at birth has steadily risen from 45 years in 1971 to 62 years in 1991, indicating a shift in the demographic profile. It is estimated that life expectancy of the Indian population will increase to 70 years by 2021-25. This has caused a paradigm shift in the disease pattern from communicable diseases to non-communicable diseases like cancer, diabetes and hypertension.

Among men, lung, esophagus, stomach, oral and pharyngeal cancers are more prevalent, while in women cancers of cervix and breast are most common, followed by those of stomach and esophagus.

Magnitude of Problem

World:
Cancer in all forms causes about 12% of deaths throughout the world. In the developed countries cancer is the second leading cause of death next to only cardiovascular diseases, accounting for 21% of deaths. in the developing countries, cancer ranks third as the cause of death an accounts for 9.5% of all deaths. India:
Cancer prevalence in India is estimated to be around 2.0 to 2.5 million, with over 7-9 lakh new cases being detected every year due to this disease. More than 70% of the cases report for diagnostic and treatment services in the advanced stages of the disease, which has lead to a poor survival and high mortality rate.

Punjab
A survey was conducted by the Health Department in June 2005 in 4 districts of Muktsar, Bathinda, Faridkot and Mansa to know the number of cancer patients in these districts. The results of the survey are:

<table>
<thead>
<tr>
<th>S. No.</th>
<th>District</th>
<th>Population</th>
<th>Number. of cancer patients</th>
<th>Number. of cancer patients per lakh population</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Muktsar</td>
<td>8,27,906</td>
<td>453</td>
<td>54.7</td>
</tr>
<tr>
<td>2</td>
<td>Bathinda</td>
<td>12,00,736</td>
<td>711</td>
<td>59.2</td>
</tr>
<tr>
<td>3</td>
<td>Faridkot</td>
<td>5,85,500</td>
<td>164</td>
<td>28.0</td>
</tr>
<tr>
<td>4</td>
<td>Mansa</td>
<td>7,31,535</td>
<td>420</td>
<td>57.4</td>
</tr>
</tbody>
</table>

Crude Incidence Rate (2002)

Ropar: 33.68/1, 00,000 population
Patiala: 33.56/1, 00,000 population
Bathinda: 35.26/1, 00,000 population
Mukatsar: 24.21/1, 00,000 population
Faridkot: 25.67/1, 00,000 populations Source: Atlas of Cancer

<table>
<thead>
<tr>
<th>District</th>
<th>Cancer Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bathinda</td>
<td>424</td>
</tr>
<tr>
<td>Faridkot</td>
<td>163</td>
</tr>
<tr>
<td>Mukatsar</td>
<td>221</td>
</tr>
<tr>
<td>Patiala</td>
<td>641</td>
</tr>
<tr>
<td>Ropar</td>
<td>381</td>
</tr>
</tbody>
</table>
Leading sites of Cancer in 3 districts Ropar, Bathinda and Patiala of Punjab as per report of NCRP (2002) are given in the tables below:

According to ICMR report 2002 the number of cancer cases from districts is as follows:-

### Leading sites of Cancer in District Patiala

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Larynx</td>
<td>Breast</td>
</tr>
<tr>
<td>2.</td>
<td>Oesophagus</td>
<td>Cervix Uteri</td>
</tr>
<tr>
<td>3.</td>
<td>Prostate</td>
<td>Oesophagus</td>
</tr>
<tr>
<td>4.</td>
<td>Bladder</td>
<td>Ovary</td>
</tr>
<tr>
<td>5.</td>
<td>NHL</td>
<td>Gallbladder</td>
</tr>
<tr>
<td>6.</td>
<td>Tongue</td>
<td>Corpus Uteri</td>
</tr>
<tr>
<td>7.</td>
<td>Tonsil</td>
<td>Bladder</td>
</tr>
<tr>
<td>8.</td>
<td>Oth. Skin</td>
<td>Hypopharynx</td>
</tr>
<tr>
<td>9.</td>
<td>Lung</td>
<td>Vagina</td>
</tr>
<tr>
<td>10.</td>
<td>Hypopharynx</td>
<td>Colon</td>
</tr>
</tbody>
</table>

**Total**\[337\]** Total**\[304\]

### Leading sites of Cancer in District Bathinda

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Oesophagus</td>
<td>Breast</td>
</tr>
<tr>
<td>2.</td>
<td>Mouth</td>
<td>Cervix Uteri</td>
</tr>
<tr>
<td>3.</td>
<td>Tongue</td>
<td>Ovary</td>
</tr>
<tr>
<td>4.</td>
<td>Prostate</td>
<td>Myel. Leuk</td>
</tr>
<tr>
<td>5.</td>
<td>Myel. Leuk</td>
<td>Oesophagus</td>
</tr>
<tr>
<td>7.</td>
<td>Conn. Tissue</td>
<td>Hypopharynx</td>
</tr>
<tr>
<td>8.</td>
<td>Bladder</td>
<td>Tongue</td>
</tr>
<tr>
<td>9.</td>
<td>Rectum</td>
<td>Oth. Skin</td>
</tr>
<tr>
<td>10.</td>
<td>Oth. Skin</td>
<td>Conn. Tissue</td>
</tr>
</tbody>
</table>

**Total**\[183\]** Total**\[241\]

### Leading sites of Cancer in District Ropar

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Larynx</td>
<td>Breast</td>
</tr>
<tr>
<td>2.</td>
<td>NHL</td>
<td>Cervix Uteri</td>
</tr>
<tr>
<td>3.</td>
<td>Bladder</td>
<td>Ovary</td>
</tr>
<tr>
<td>4.</td>
<td>Oesophagus</td>
<td>Oesophagus</td>
</tr>
<tr>
<td>5.</td>
<td>Mouth</td>
<td>Mouth</td>
</tr>
<tr>
<td>6.</td>
<td>Hypopharynx</td>
<td>Conn. Tissue</td>
</tr>
<tr>
<td>7.</td>
<td>Brain, NS</td>
<td>NHL</td>
</tr>
<tr>
<td>8.</td>
<td>Lung</td>
<td>Corpus Uteri</td>
</tr>
<tr>
<td>9.</td>
<td>Prostate</td>
<td>Uterus Uns.</td>
</tr>
<tr>
<td>10.</td>
<td>Tongue</td>
<td>Lung</td>
</tr>
</tbody>
</table>

**Total**\[166\]** Total**\[215\]}
Study:
An epidemiological study of cancer cases reported from villages of Talwandi Sabo block of district Bathinda of Punjab revealed prevalence of histologically confirmed cancer cases as 125.4 per 1,00,000 population. The study has also shown that there were 51 deaths per lakh population in the study block. The common sites of cancer reported are breast, uterus/cervix, leukemia/lymphoma, esophagus, skin and ovary. The leading causes of cancer deaths are cancers of esophagus, leukemia/lymphoma uterus/cervix, breast and ill-defined digestive organs.

Risk Factors
According to epidemiological studies, 80-90% of all cancers are due to environmental factors of which, lifestyle related factors are the most important and preventable. Causation of cancer is multi-factorial.

A) Environmental Factors: These are generally held responsible for 80-90% of all cancers. The major environmental factors include:-

1. **Tobacco:** Tobacco in various forms of usage of smoking, chewing etc. is the major environmental cause of cancers of the lung, larynx, mouth, pharynx, esophagus, lip, urinary bladder, pancreas, uterus, cervix, breast and kidney also. In India more than 40% of cancer cases are due to tobacco. Smoking is by far the leading risk factor for lung cancer.
   If a person doesn't smoke but breathes in the smoke of others (called passive smoking or second hand smoke), he is also at an increased risk of lung cancer. Smokeless tobacco i.e. snuffs and chewing tobacco also contains 28 carcinogens i.e. cancer causing agents.
   Other than lung cancer, tobacco use has also been linked to **Head and Neck Cancers, Urinary bladder & kidneys, Cervix & Breast, and Colon**

2. **Alcohol:** Excessive intake of alcoholic beverages is associated with esophageal and liver cancer. Some studies have also suggested that beer consumption may be associated with rectal cancer. It is estimated that alcohol contributes to about 3% of all cancer deaths. Alcohol consumption is linked to the following cancers:
   - Breast cancer in women
   - Primary liver cancer
   - Ovarian cancer
   - Prostate cancer
   - Thyroid cancer

3. **Dietary factors:** Smoked fish may be related to stomach cancer, lack of dietary fiber to intestinal cancer, beef consumption to bowel cancer, high fat diet to breast cancer. Food additives and contaminants may also be the causative agents.

4. **Occupational exposures:** Accounts for one to five % of all human cancers. These include exposure to benzene, arsenic, cadmium, chromium, asbestos, polycyclic hydro carbons.
5. **Viruses**: Hepatitis B & C may lead to hepatic cancer. HIV virus may lead to Kaposi Sarcoma. The Ebstein Barr virus is associated with Burkitt's lymphoma and nasopharyngeal carcinoma. Hodgkin disease is also believed to be caused by virus.

6. **Parasites**: Parasitic infections may increase the risk of cancer e.g. schistosomiasis in Middle East producing carcinoma of the bladder.

7. **Customs, habits & life styles**: Familiar examples are association between smoking and lung cancer, tobacco & betel chewing & oral cancer etc.

8. **Others**: Environmental factors e.g. sunlight, radiation air pollution and water pollution, medication; pesticides etc. are related to cancer.

**B) Genetic factors**: Genetic influences have long been suspected e.g. Retinoblastoma occurs in children of the same parent, Mongols are more likely to develop cancer (leukemia) than normal children. However genetic factors are less conspicuous and more difficult to identify.

**Prevention of Cancer**

**A) Primary Prevention of Cancer:**

- **Control of Alcohol & Tobacco consumption**: Primary prevention offers the greatest hope for reducing the number of tobacco-induced and alcohol related cancer deaths. It has been estimated that control of tobacco smoking alone would reduce the total burden of cancer by over a million cancers each year.

- **Personal Hygiene**: Improvement in personal hygiene may lead to decline in certain types of cancer like cancer cervix.

- **Radiation**: Special efforts should be made to reduce the amount of radiation including medical radiation received by each individual to a minimum without reducing the benefits.

- **Occupational exposures**: Measures to protect workers from exposure to industrial carcinogens should be enforced in industries.

- **Immunization**: In case of primary liver cancer, immunization against Hepatitis B virus may have some beneficial effect.

- **Foods, Drugs & Cosmetics**: These should be tested for carcinogens.

- **Air Pollution**: Control of air pollution is another preventive measure.

- **Treatment of Precancerous lesions**: Early detection and prompt treatment of precancerous lesions such as cervical tears, intestinal polyps, warts, chronic gastritis, chronic cervicitis etc. is one of the important steps in cancer prevention.

- **Legislation**: Legislation also has a role in primary prevention. The solution to problem of cancer is not to be found in research laboratories but in legislatures e.g. legislation to control environmental carcinogens like tobacco, alcohol, air pollution.
• **Health Education:** This is an important aspect of primary prevention. It aims at motivating people to seek early diagnosis and early treatment. Some important warning signals or cancer are:

- A lump or hard area in the breast
- A change in a wart or mole
- A persistent change in digestive and bowel habits
- A persistent cough or hoarseness of voice
- Excessive loss of blood at the monthly period or loss of blood outside the usual dates
- Blood loss from any natural orifice (opening)
- A swelling or sore that does not get better
- Unexplained weight loss

B) **Secondary Prevention of Cancer:**

  - **Cancer Registration:** It provides a base for assessing the magnitude of the problem and for planning the necessary services. Cancer registries are basically of two types:

    - **Hospital Based Registries:** This includes all patients treated by a particular institution, whether in-patients or out-patients. Since hospital population will always be selected population, the use of these registries for epidemiological purposes is limited.

    - **Population based Registries:** The aim of this is to cover the complete cancer population in a given geographic area. The data from such registries can provide the incidence rate of cancer and useful tool in epidemiology.

  - **Early Detection of cases:** Cancer screening is the main tool for early detection of cancer at a pre-invasive or pre-malignant stage. Effective screening program have been developed for cervical cancer, breast cancer & oral cancer.

  - **Treatment:** Cancer can be treated by Surgery, by Chemotherapy, by Radiotherapy and by Palliative care.
Steps taken by Punjab Government for the treatment & control of Cancer

- Punjab Government organized Mass Cancer Screening and Treatment Camps to aware general masses regarding cancer. 87403 patients were detected as symptomatic in the 1st Phase of State Wide Cancer Awareness &Symptom Based Early Detection Door to Door Campaign, out of which 42813 patients came for checkup and 2201 patients were confirmed to have cancer. (SHRC-NHM PB Source)

- During second phase Punjab Government organized Mass Cancer Screening and Treatment Camps in collaboration with Private Empanelled Hospitals under Mukh Mantri Punjab Cancer Rahat Kosh Scheme & other NGOs (IMA, Rotary, Lions etc.) in all the 22 Districts including Medical Colleges of Patiala, Amritsar & Faridkot of Punjab on 28-29th September 2013 for further investigations/treatment of remaining approx. 44590 (51%) untraced patients. During these camps, 20900 patients were examined, 299 patients were confirmed to have cancer. (SHRC-NHM PB Source)

- Cancer registry
  - Population Based Cancer Registry (PBCR): Population Based Cancer Registry is established in collaboration with ICMR, Ministry of Health, Govt. of India at Govt. Medical College, Patiala. The report for the year 2012-13 has been received now which is under analysis so that future planning can be done accordingly.
  - Cancer Registry at Mansa, Sangrur, Sahibzada Ajit Singh Nagar (Mohali) & Chandigarh has been started in collaboration with Tata Memorial Centre, Mumbai & is collecting data.
  - Hospital Based Cancer Registry has been started at PGI Chandigarh & is collecting data. When this statistics will be made available, it will help to know the data of this disease & further help in future planning.

- A 300 bedded cancer Hospital at Mullanpur:-Bhabha Atomic Search Centre along with Tata Memorial Cancer Research Centre, Mumbai is setting up a 300 bedded Cancer Treatment Centre at Mullanpur (Medicity, New Chandigarh). The layout plan is under process.

- A 100 bedded Advanced Cancer Diagnostic Treatment and Research Centre is being set up at Bathinda by State Government.

- Government of Punjab has established Cancer and Drug addiction Treatment Infrastructure fund Act 2013 for providing better prevention & treatment facilities to cancer patients.

- Homi Bhabha Cancer care Facility in District Hospital Sangrur is being established in collaboration with TMC, Mumbai.

- All Medical Colleges in the State have been provided with State of the Art equipment.
• Free Travel Facility: Free Travel Facility in Punjab Roadways & PRTC Buses is provided for cancer patients for availing treatment. (PMH branch source)

• National Program for Prevention and Control of Cancer, Diabetes, Cardiovascular diseases & Stroke (NPCDCS)
  o State NCD Cell is established at Directorate of Heath & Family Welfare, Punjab and is operational.
  o NPCDCS Program is implemented in all the 22 districts of the state under which four diseases Cancer, Diabetes, Cardiovascular diseases and Stroke are being covered.
  o For creating awareness in general public, health messages are being broadcasted to 15 lakh mobile users across Punjab state.
  o Regional Cancer Care Centers:-
    o Tertiary Cancer Care Centre, Fazilka :- Government of India has approved a 50 bedded Tertiary Cancer Care Centre (TCCC) at District Fazilka.
    o Tertiary Cancer Care Centre (TCCC), Hoshiarpur :- The proposal for establishing Tertiary Cancer Care Centre (TCCC), Hoshiarpur has been submitted to Government of India and approval for same is yet to be received.
    o State Cancer Institute, Amritsar:- State Cancer Institute is being established at Govt. Medical College, Amritsar.
  o For the prevention of cervical cancer, HPV Vaccine has been introduced in the state. The Vaccine is given to the 9672 girls of 11-13 years age groups. In the first phase, it was given to 6th class girls of all the government schools of districts Bathinda and Mansa which have highest prevalence of Cervical Cancer in the State. The Vaccine is being introduced in the rest of the State in a phased manner.
Mukh Mantri Punjab Cancer Raahat Kosh

Mukh Mantri Punjab Cancer Raahat Kosh Scheme was initiated by Government of Punjab with a view to provide financial assistance to Punjab resident cancer patients. Financial assistance up to Rs. 1.50 Lakh (One lakh fifty thousand) is provided for the treatment of each cancer patient except Government employees, ESI employees and their dependents, those patients who have any kind of facility of medical reimbursement or any other persons who have opted for health insurance by insurance companies.

Web Application for Cancer Patients
Mukh Mantri Punjab Cancer Raahat Kosh Scheme (MMPCRKS)

Financial assistance up to Rs. 1.50 Lakhs (One lakh fifty thousand) shall be provided for the treatment of each cancer patient under this scheme. All those Cancer patients who are resident of the Punjab State shall be eligible under this scheme.

Nine Government and Nine Private Hospitals are empanelled under this scheme for the treatment of cancer patients. List of the empanelled hospital available at \[http://pbhealth.gov.in/List%20of%20Empaneled%20Hospitals%20(1).pdf\]

As per guidelines under Mukh Mantri Punjab Cancer Raahat Kosh during year 2011, Patient / or his relative was to fill the application form & submit to district and sanction was generated by State Cancer Control Cell, Punjab. In whole of the procedure, time span was of 5-7 days and it caused harassment for the patient,

- To ease the whole process & to provide cashless and paperless treatment to cancer patients, Web Application / Software has been developed for Mukh Mantri Punjab Cancer Raahat Kosh.

- In this software, all empanelled hospitals, Civil Surgeons, Deputy Commissioners and State Headquarter are connected through email and Patient through SMS.

Mandatory Documents

2. Voter card, Driving License, Passport, Arms License, Kisan Credit Card with photo, Aadhar Card (optional), Photograph- for more information available at the website
3. Along with the confirmation report, blood group of the patient is mandatory.

Details to be filled by Private Empaneled Hospital:
Hospital should ensure that above mentioned documents are mandatory before registering under this scheme
1. Open link www.mmpcrk.gov.in Home page will be opened.

2. Please Log In by entering:
   a. User Name:
   b) Password:
   b. Enter Captcha: letters shown in the box in front of the screen

3. Online Application to be filled by Concerned Empaneled Hospital.

**Open Patient Registration**

1. **Open Patient Registration Details:**
   - Application form will open in new window.
   - Fill the all columns mandatory
   - Upload Photograph (upto 150 kb size).
   - Whether Declaration Signed by self-Click Yes or No
   - At the end of application form, **Tick** Patient is not himself /herself or none of his family is members/are dependent upon Punjab Government or ESI.

   *Then press Submit.*

   Registration Number will be generated automatically (Keep the record)

2. **If funds have already been sanctioned under this scheme, then fill the previous sanction number & date and amount sanctioned in the columns. If not sanctioned previously, then leave the column blank.**

3. **Application Editing :**
   - If any change is to be made in above said information, then editing can be made upto this point only.
   - After filling the estimate, application can-not be edited.

4. **Patient Treatment Estimate:**
Fill the estimate proforma as per estimate given by treating doctor like :-

<table>
<thead>
<tr>
<th>Type of Treatment/ investigation</th>
<th>Tentative time</th>
<th>Estimated Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eg. Lab Investigation</td>
<td>Twice a month</td>
<td>7724/-</td>
</tr>
</tbody>
</table>

Remarks

Mentioned in the box

a. Can add more Treatments/ Investigations by the same procedure.
b. Editing is possible upto this point, if any editing is required. Ensure that above mentioned information is absolutely correct.
c. Then Press Freeze & save.
d. (Save as pdf ).

5. Generation of Application Details:

• All documents will generated by automatically (Name, Address etc... all columns)
• Save as pdf document
  1) Application form

6. Self-Declaration generated automatically save as a pdf format. Required

Scanned the documents in pdf format (Max size 4 MB). Mandatory - Residence Proof, Cancer confirmation report, Estimate form, application form, Self Declaration

7. Uploading of Documents by Hospital:

• Application Form
• Mandatory Residence Proof
• Confirmation report
• Estimate proforma
• Self-Declaration, etc. if applicable

Then Continue & Save Record.

An Email will be automatically generated to the Hospital & Concerned Civil Surgeon

Civil Surgeon Module (Directly Submitted the application)

Concerned Civil Surgeon: -
According to MMPCRKS guidelines, in Government hospitals (PGI, GMCH 32 Chandigarh, GCH Amritsar, Patiala & Faidkot) concerned patient can directly submit the file in the hospital.
If patient comes with the case on prescribed proforma, then CS office will fill the application at this portal.

1. Open link www.mmpcrk.gov.in Home page will be opened.
2. Please Log In by entering:
   a. User Name: b) Password:
   b. Enter Captcha: letters shown in the box in front of the screen

Online Application to be filled by Concerned Civil Surgeon.

Open Patient Registration

8. Open Patient Registration Details:
   • Application form will open in new window.
   • Fill the all columns mandatory
   • Upload Photograph (up to 150 kb size).
   • Whether Declaration Signed by self-Click Yes or No
   • At the end of application form, **Tick** Patient is not himself /herself or none of his family is members/are dependent upon Punjab Government or ESI.
Then press Submit.

Registration Number will be generated automatically (Keep the record)

9. If funds have already been sanctioned under this scheme, then fill the previous sanction number & date and amount sanctioned in the columns. If not sanctioned previously, then leave the column blank.

10. Application Editing:
If any change is to be made in above said information, then editing can be made upto this point only, After filling the estimate, application can-not be edited.

11. Patient Treatment Estimate:
Fill the estimate proforma as per estimate given by treating doctor like:-

<table>
<thead>
<tr>
<th>Type of Treatment/ investigation</th>
<th>Tentative time</th>
<th>Estimated Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eg. Lab Investigation</td>
<td>Twice a month</td>
<td>7724/-</td>
</tr>
</tbody>
</table>

Remarks
Mentioned in the box

e. Can add more Treatments/ Investigations by the same procedure.
f. Editing is possible upto this point, if any editing is required. Ensure that above mentioned information is absolutely correct.
g. Then Press Freeze & save.
h. (Save as pdf).

12. Generation of Application Details:
• All documents will be generated automatically (Name, Address etc… all columns)
• Save as pdf document
  1) Application form

13. Self-Declaration generated automatically save as a pdf format required. Scanned the all documents as a pdf format (Max size 4 MB). Mandatory - Residence Proof, Cancer confirmation report, Estimate form, application form, Self Declaration

14. Uploading of Documents by the Civil Surgeon

• Application Form
• Mandatory Residence Proof
• Confirmation report
• Estimate proforma
• Self-Declaration, etc if applicable

Then Continue & Save Record.

An Email will be automatically generated to the Hospital & Concerned Civil Surgeon.

Civil Surgeon Module
see the all application submitted by Private as well as Govt hospital – if application received & filled by the CS )

• Open Patient Registration
  1. Open Patient Registration Details:

• Application form will open in new window.
• Fill the columns (mandatory & upload photograph (Maximum size 150 kb).
• At the end of application form, Tick √ Patient is not himself / herself or none of
his family members are dependent upon Punjab Government or ESI. Then Submit.

- Registration Number will be generated (Keep the record).
- Upload Photograph (up to 150 kb size).
- Then click continue.

2. If funds have already been sanctioned under this scheme, then fill the previous sanction number & date and amount sanctioned in the columns. If not sanctioned previously, then leave the column blank.

3. Application Editing:
   - If any change is to be made in above said information, then editing can be made up to this point only. After filling the estimate, application cannot be edited.

4. Patient Treatment Estimate:
   Fill the estimate proforma as per estimate given by treating doctor like

<table>
<thead>
<tr>
<th>Type of Treatment/ investigation</th>
<th>Tentative time</th>
<th>Estimated Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eg. Lab Investigation</td>
<td>Twice a month</td>
<td>7724/-</td>
</tr>
</tbody>
</table>

Remarks
Mentioned in the box

- Can add more Treatments/ Investigations by the same procedure.
- Editing is possible up to this point, if any editing is required. Ensure that above mentioned information is correct.
- Then Press Freeze & save
- (Save as pdf)
5. Generation of Application Details:

- All documents will be generated automatically (Name, Address etc all columns)
- Save as pdf document i) Application form, ii) Self-Declaration
- Required scanned documents in pdf format (Max size 4 MB). Mandatory Residence Proof, Confirm Cancer confirmation report.

6. Uploading of Documents by Hospital:

- Application Form, b) Mandatory Residence Proof, c) Confirmation report (Attachment as a pdf is mandatory), d) Estimate, Application, e) Self-Declaration etc., f) Then Continue, g) Record Save.

Office Use only …………………………………………………

- After screening the documents payment will be made as per old procedure.
- UTR number will be generated & email alert will be sent to the concerned hospital.
- Email will be automatically generated to the Hospital & Concerned Civil Surgeon.

Verification Module

- Click the Verification Module.
- Press Civil Surgeon Verification Module.
- Select the patient registration number & Select.
- Press View attachment.
- All required documents uploaded by the hospital will open automatically -- Voter Card, Cost of Estimate, Self Declaration, Medical Report, Birth Certificate & patient Application Detail.

Select anyone & view one by one
Note: Please view all the documents carefully.

- Press application status.
  
  o Accept/ Reject: select any one as per the requirement.
  o Mention in the Remarks in the column

- Press the Upload status.

After this portal, the application will open at the DC portal. An Email will be automatically generated to the Hospital & Concerned Civil Surgeon/ DC regarding status of the application.

District Committee Module (By Concerned DC)

- Press Registration Number
- Search concerned patient
- Click to view the attachments
- All required documents uploaded by the hospital will open automatically--- Voter Card, Cost of Estimate, Self Declaration, Medical Report, Birth Certificate & Patient Application Detail.
- Select anyone & view one by one.

Generation of Post facto sanction

- Select the name of home district of the patient.
- Automatically pdf file will open in the shape of a noting.
- Take the print & send to the concerned authority for the post facto sanction approval.
Hospital Module

Utilization Certificate

- Hospital will again fill up/open log in Id & Password, then open Utilization Module
- Utilization Module (second part of the software)
  - Press Patient treatment Utilization Detail & the registration numbers registered after submitting the application of the patient will be automatically displayed.
  - Select Registration number & Patient Name & Search.
  - Now UC for the treatment of concerned patient will open.
  - If patient expired during the treatment, Press Yes or No.

- Treatment Type:
  Major / Medicine/ Non CGHS Rate/ Radiology. After selecting one, press enter

- Treatment Detail
  - Enter Rate, No of Unit, Start Date & End Date
  - Mention the remarks.
  - Can add more types of Treatments.

  - Treatment Editing:
    - If any change is to be made in above said information, then editing can be made up to this point only, after that editing is not Possible

- Ensure that original Prescription & Original Bills are there as per treatment chart
  - Then Freeze & Print.

- Automatically UC will be generated save as a pdf format.

- The documents to be submitted to concerned CS:
  - Sanction letter
  - Cancer confirmation report
  - Mandatory Residence proof
  - Prescription
- Indoor File, OPD certificate, discharge certificate (if applicable), transfer letter/ certificate (if applicable) and original bills duly verified by the hospital.

- **Upload Utilization details**

  Search the Utilization Number and the registration numbers will be automatically displayed.

  - **Upload the mandatory documents (Max 4 MB & pdf format only)**
    - Prescription, Bills, Indoor File (highlight the claimed treatment & Utilization Certificate)
    - Press Save. Data will be saved automatically
    - Email alert will be sent to Hospital, DC & CS and Headquarter & SMS alert will be sent to concerned patient.
    - Concerned Civil Surgeon will open the file when concerned hospital will submit the all the records with all documents to the concerned Civil Surgeon.
    - After that previous procedure will be applicable according to MMPCRK guidelines and instructions by the State Head Quarter.

**Hospital Case Transfer** - If due to any reason, case is to be transferred to another hospital

- Press Hospital Case transfer
- Then press case transfer
- Select the registration number of the patient.
- Press Search
- Upload the required mandatory documents.
- Select the hospital to which the patient is to be transferred.
- Print the transfer receipt and save as a pdf file.
- Please ensure that final UC is submitted for the treatment availed in the hospital for this patient to Civil Surgeon/ Director Health Services Punjab: **Press √**

- An Email will be automatically generated to the Hospital & Concerned Civil Surgeon/DC/ DHS and SMS alert to the patient regarding status of the application will be sent.
**Treatment Utilization Approval Module (at level of CS)**

- Press Registration Number
- Search for the concerned patient

- Click & View attachments

  Prescription, Indoor file, OPD treatment card, Other documents, Bills, Others documents
  (NOTE- Highlight the treatment part)

- Accept/ Reject: Select any one as per the requirement.
  
<table>
<thead>
<tr>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mention the reason in the Remarks in the column</td>
</tr>
</tbody>
</table>

- Whether original bills have been submitted in CS office: Click Yes or No.
- Update the status (Record Updated successfully)

- Click the Utilization approval upload.
  
  o Search Registration number
  o Upload the UC.

**DHS Module (at the level of Headquarters)**

- Login using the DHS ID & Password
- Click the Utilization module
- Click the DHS pharmacist allocation.
• Select the Pharmacist
  o 1, 2....

**Pharmacist Module**
- Enter Login & Password
- Click pharmacist operation
- Click Pharmacist approval.
- Select the patient
- **View the attachments** as per requirements according to MMPCRK guidelines.
  (Eg. Prescription, Indoor file, OPD treatment card, Bills and Other documents.)
- Number of Units approved. (Can be increased/ decreased according to the guidelines).
- Five types of treatments will be shown. Note- if more are required, then press next.
- If everything is according to MMPCRK, then submit the document.
- Record will be updated automatically.(SMS will be displayed).

**DHS Utilization Module**
- **DHS Utilization bill approval** - Direct Case utilization details are also available. (Applicable to PGI, AIIMS, GMCH 32 etc.).

**Search for the registration number**
- View attachments as per requirement - Prescription, Indoor file, OPD treatment card, Other documents, Bills
- **Update the application status**

• **Accept/ Reject**: Select any one as per the requirement.
Mention the reason in the remarks column

- Update the status

- Bank letter Generation.

  - This procedure is manual. (this software is not linked with any bank)

  - Bank letter will automatically open in a new window as a pdf file.

    - Take the print out.

    - Manage the UTR number

    - When the UTR number is mentioned in the web application.

An Automatically Email will be automatically generated to Hospital & Concerned Civil Surgeon/DC/DHS.

**Master Data: (Authority at level of Headquarter)**

1. **Addiction:** eg., Alcohol, smoking, drugs etc.
2. **Bank Detail:** eg. (Name of the bank; State Bank of India, Account number, RTGS, IFSC code)
3. **Category:** (General, SC/ST etc…)
4. **Designation:** eg., DC, CS, HOD, SMO, Pathologist, Surgeon etc…
5. **District Name:** eg., Amritsar, Kapurthala, Hoshiapur, etc.
6. **Email ID’s:** Eg. ramanhospital@.......com
7. **Hospital Master:** Name of the hospital eg. ABCD hospital & Research Centre
8. **Rate Contract List of Anti-Cancer Drugs.**
9. **State Master:** Punjab, Haryana etc…
10. **Town Master:** Mahilpur, Banga etc…
11. **Tehsil Master:** Dasuya, Payal, etc…
12. **Village Master:** eg: Pandori, Sangat, Panam etc.

13. **Test Master:** Radiology, Pathology,

**Reports**

1. **Patient details:** eg
   a. **Name wise patient detail:** AB son/ BC, Village…., Tehsil…district………..
   b. **Cause wise patient detail:** Addiction eg alcohol, Smoking etc…
   c. **Cancer wise Patient detail:** eg Breast, Lung etc….
   d. **Laboratory wise patient detail:** eg ABCD Path lab, Number of patients tested in this lab.
   e. **Summary Report:** All records Sex wise, category wise, Site of cancer wise.

2. **Patient detail granted district approval:** Hospital wise & District wise

3. **Patient detail to whom pre facto sanction has been issued:** Hospital wise & District wise

4. **Patient detail to whom post facto sanction has been issued:** Hospital wise & District wise

5. **Timeline report:** Hospital timeline

6. **Pre facto:** district wise

7. **Log in history details.**

**Cashless and Paperless Web. Application- Mukh Mantri Punjab Cancer Raahat Kosh Scheme.**

Mukh Mantri Punjab Cancer Raahat Kosh Scheme was initiated by Government of Punjab with a view to provide financial assistance up to Rs. 1.50 Lakhs (One lakh fifty thousand) is provided for the treatment to each cancer patient except Government employees, ESI employees and their dependents, those patients who have any kind of facility of medical reimbursement or any other persons who have opted for health insurance by insurance companies.

**EARLIER PROCEDURE**

At the level of Empanelled Hospital After confirmation of the cancer patient goes to the Empanelled hospital & follow the below mentioned procedure:-
a) Application filed by the patient/Relative, attached the required documents along with estimate proforma which was issued by the empanelled hospital.
b) Patient had to submit the number of documents and the same to be submitted (BY the patient/Relative) at the concerned Civil Surgeon office.
c) The application security at the Civil Surgeon office & same is sent to the Deputy Commissioner for recommendation.
d) After recommendation from the Deputy Commissioner the same application along with all required documents are send to the State Head Quarter by the Civil Surgeon office through special messenger.
e) To issue a pre-facto sanction it takes 4-5 days at State Head Quarter.
f) During the earlier procedure, time span of 5-7 days was taken which was one of major cause for the delay in the cashless treatment of the patient.
g) In the earlier procedure the patient was not able to make the expenditure accrued in his treatment.

Significance of the Software

NOW WITH THE LAUNCH OF WEB APPLICATION CASHLESS & PAPERLESS

- This software will make easy the whole procedure as it will be paperless,
- It will help to fasten up the whole procedure required to be followed by the patients:-
  ✓ With this web application the treatment started immediately as soon as the data is uploaded.
  ✓ In this software there is provision for alert SMS’s to the patient regarding the application and time to time accrued
This software also helpful for providing transparency of the funds issued to the hospitals.

- All the data related to the scheme will be collected in a uniform pattern which will be very helpful for developing the Atlas of Cancer in Punjab.
- This will give us the clear picture regarding the spread of cancer area wise.
- This software will help us to collect all the statistics related to the cancer like type and site of cancer.
- These statistics will be very helpful in the treatment of the patient and to frame the cancer policy in future.
- This software also creating awareness regarding cause of cancer in particular area.
- This Software will be also give vitals statics regarding spread of cancer, cause of cancer and number of patients in particular area and helpful for making future policy for the treatment & developing the infrastructure in the state.

### MIS:
**Steps in Cancer Treatment cashless under MMPCRKS**

- [www.mmpcrk.gov.in](http://www.mmpcrk.gov.in)
- When window opened/ Log in
- There should open
- Two options

Private Empaneled Hospitals & Government Empaneled Hospitals

**Online generation checking:**
- Formats to be downloaded by CS for signatures by DC & all Committee members auto populated
Generation of District Level Committee Form for Government Empaneled Hospitals (PGIMER, GMCH 32, Acharya Tulsi Cancer Hospital Bikaner, AIIMS) & Private Empaneled Hospitals

Generation of Hospital Level Committee Form for three Government Medical College & Hospitals Amritsar, Faridkot

In both District Level Committee Form & Hospital Level Committee Form, add the column regarding which proof is attached as residence proof as per guidelines

Regarding Utilization Certificate (only for Private Empaneled Hospital)

Generation of UCs at Private Empaneled Hospital level @ 25% at one time (Submit & Save)

Submit directly to concerned Civil Surgeon
Next three UCs of 25% each submit directly to State Headquarter (only show at CS level but non-editable) (Save & Submit)

Last in UC, there should be a column mentioning whether treatment completed or referred to other Hospital.

If referred, Concerned hospital will upload Refer slip & UC and will send directly to State Headquarter

State Headquarter will generate Refer letter and Upload the same. 
Regarding Utilization Certificate (For Medical College Amritsar, Faridkot, Patiala, GMCH 32, AIIMS & Acharya Tulsi Bikaner)
Separate UCs for Medical College Amritsar, Faridkot, Patiala, GMCH 32, AIIMS & Acharya Tulsi Bikaner Cancer Hospital with rates of these hospitals including RC list by Punjab Government

Concerned Hospital will deal with UC itself and send the compiled report to State Headquarter (MIS: Hospital RC, Punjab Government RC & Without RC)
Regarding SMS Alert to Patient

SMS’s Alert to the concerned patient:-

**Wording for Email/ SMS**
Registration of Patient at empanelled Hospital

SMS Alert to Patient

Wording for Email alert to Hospital, CS & DC (mention all in subject)
Application Submitted: Pt Name……… Village…..District………………estimated Amount Rs…..

Wording for Email alert to the patient
मजीन दर रण ....... पिंडी ....... निलु.... दो आकाश उ मेव, आकाश और कुपड़े.... दी मेवसर .......लम्हल्ल हु सभी बख लहरी आकाश आल -शहीद उ दिंडी लहरी है। दुपहे नगराथरी लहरी मयिये लम्हल्ल/लिंहल महसूल सं मेडिकल वैल्स लहरी 104 दे लिखवू बने।

(Submit & Save)

Civil Surgeon Office- Acceptance & generation of District Level Committee format

(Submit & Save)

Scan & Upload signed format by Civil Surgeon
State Headquarter

(Submit & Save)

D.C./Civil Surgeon/Hospital

Generation of UCs at hospital level @ at least 25% at one time
(Submit & Save)

Wording for Email alert to Hospital, CS & DC (mention all in subject):

District level Committee recommended: Pt
Name....................Village.....District............
.... Amount Rs.....

Wording for Email alert to Hospital, CS & DC (mention all in subject):

Sanctioned Rs.............: Pt
Name............Village.....District.......Amount Rs........

SMSs alert to patient:

अवीन लघु श्रम ...... रिजर्व निलया.. दी अवीन लघु श्रम उपाधि विभाग विभाग के संचालन मंडल या केन्द्र सचिव के स्वीकृति के तहत। दी नीवल उपाधिया वर्ग में संचालन उपाधि, विभाग सँचालन तथा मंडल सचिव ट्रेड विभाग 104 दे संदेश दें।

Wording for Email alert to Hospital, CS & DC (mention all in subject):

UC Submitted: Pt
Name....................Village.....District.......Amount Rs.....

SMSs alert to Patient:

अवीन लघु श्रम ...... रिजर्व निलया.. दी अवीन लघु श्रम उपाधि विभाग विभाग के संचालन मंडल या केन्द्र सचिव के स्वीकृति के तहत। दी नीवल उपाधिया वर्ग में संचालन उपाधि, विभाग सँचालन तथा मंडल सचिव ट्रेड विभाग 104 दे संदेश दें।
Civil Surgeon
(Save & Submit)

Wording for Email alert to Hospital, CS & DC (mention all in subject).
UC verified & forwarded: Pt
Name………………Village…..District,
Amount Rs…..

State Headquarter
(Submit & Save)

Wording for Email alert to Hospital, CS & DC (mention all in subject).
Transferred Rs…………………..: Pt
Name………………Village…..District……
…………………..
पुष्टि 1:- आपकी स्वास्थ्य अपील साक्षरता समाज स्वास्थ्य गाइडलाइंस क्रिया वे, सैलूक की वक्ता स्वास्थ्य के?

झुंठे:- लिंग स्वास्थ्य अपील लगभग है, गाइडलाइंस दी अट्ठ वारे:- http://pbhealth.gov.in/cancer.html रेंड़े। लिंग स्वास्थ्य अपील स्वास्थ्य गाइडलाइंस क्रिया वे, सैलूक की वक्ता स्वास्थ्य के।

पुष्टि 2:- लिंग स्वास्थ्य अपील दिनां के वक्ता स्वास्थ्य क्रिया वे?

झुंठे:- लिंग स्वास्थ्य अपील दिनां के वक्ता स्वास्थ्य गाइडलाइंस क्रिया वे, दी अट्ठ वारे:- http://pbhealth.gov.in/cancer.html रेंड़े।

पुष्टि 3:- लिंग स्वास्थ्य अपील दिनां के वक्ता स्वास्थ्य गाइडलाइंस क्रिया वे, दी अट्ठ वारे:- http://pbhealth.gov.in/cancer.html रेंड़े।

पुष्टि 4:- लिंग स्वास्थ्य अपील दिनां के वक्ता स्वास्थ्य गाइडलाइंस क्रिया वे?

झुंठे:- लिंग स्वास्थ्य अपील दी अट्ठ वारे:- http://pbhealth.gov.in/cancer.html रेंड़े।

पुष्टि 5:- लिंग स्वास्थ्य अपील स्वास्थ्य गाइडलाइंस क्रिया वे, दी अट्ठ वारे:- http://pbhealth.gov.in/cancer.html रेंड़े।

पुष्टि 6:- लिंग स्वास्थ्य अपील स्वास्थ्य गाइडलाइंस क्रिया वे, दी अट्ठ वारे:- http://pbhealth.gov.in/cancer.html रेंड़े।

द्विभाषी गाइडलाइंस क्रिया वे, 104 (24x7) जैसी से दी अट्ठ वारे दी अट्ठ वारे 0172-2972782 (भंवर दी अट्ठ वारे दी अट्ठ वारे) दे।
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For Emergency medical response service dial toll free 108
For further information please visit www.pbhealth.gov.in/cancer.html
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