



CONTINUING EDUCATION CELL
NATIONAL INSTITUTE OF TECHNOLOGY RAIPUR
G.E. Road, Raipur – 492010 (C.G.) Ph- (0771)2253934

Notice

Continuing Education Cell, NIT Raipur is going to offer a “STTP on Holistic Approach to Design of Hospitals” The details are mentioned below:

Course Name	Tentative schedule	Details
Holistic Approach to Design of Hospitals (Online mode)	22 nd – 26 th July 2024 (09:00 AM to 05:00 PM each day)	Annexure-A

Interested candidates/organizations can apply in the prescribed application form(Annexure-B) along with the details of course fee. The course Fee is given as follows:

Course Fee	Students of NIT Raipur	₹1000 + 18% GST = ₹1180
	Outside Students (other than NIT Raipur)/ NIT Staff	₹1,500 + 18% GST = ₹1770
	Faculty/ Industry Personnel	₹2,000 + 18% GST = ₹2360

The payment can be done either in the form of a Demand Draft (DD) in favour of “Director, NIT, Raipur” payable at Raipur or **through online mode (account details in the last page of this document)**. For online payment, the scanned copy of the application form along with the proof of payment should be sent to cec_assistant@nitrr.ac.in by the due date (**7th July 2024**). For payment made through DD, the hard copy of the application along with the DD should be sent to the **Chairman, Continuing Education CELL, NIT Raipur, Raipur, Pin: 492010** by the due date (**7th July 2024**). After payment, participant is required to fill the following google form:

<https://forms.gle/fmQVMNe32Lt8PYye8>

For any clarification, please contact the course coordinators, **Dr. Himanshu Poptani** (Email: hpoptani.arch@nitrr.ac.in/Mobile: 8770178887) Assistant Professor, and **Dr. Shruti S. Nagdeve** (Email: ssnagdeve.arch@nitrr.ac.in/Mobile: 9701967690), Assistant Professor, Department of Architecture and Planning, NIT Raipur, for course details kindly refer to Annexure- A. Conduction of the course is subjected to enrolment of minimum number of students.

Dr. Subhojit Ghosh
Chairman,
CEC NIT, Raipur



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Tentative Course Content

STTP on Holistic Approach to Design of Hospitals

Day I: Classification, Norms & Disaster Management

- Classification Matrix of Hospitals, Norms. Standards for Designing Hospitals
- Architectural Programming of Hospitals, Project brief, Project Reports.
- Disaster Management in Hospitals

Day II: Planning & Designing of Hospitals

- Planning and Designing of Hospitals: An overview
- Designing for Critical Care
- Landscape design for Hospital campus: An overview

Day III: Specialty Hospitals & Facilities Management

- Specialty Hospital Design : Cancer Hospitals
- Hospital Support services: CSSD, Dietary, Laundry, Mortuary
- Facilities Management in Hospitals

Day IV: Engineering Services in Hospitals

- Engineering Services in Hospital: An Overview (HVAC)
- Engineering Services in Hospital: An Overview (Plumbing & Fire-Fighting)
- Engineering Services in Hospital: An Overview (Electricals)

Day V: Trauma Care & Future of Hospital Design

- Making Way out of Trauma
- Paradigm shift in Hospital Design: Impact of COVID 19
- Future of Hospital Design



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APPLICATION FORM

Name of the Course Applied:

Name:

Father's/Husband's Name:

Date of Birth: Sex: Male ☐ Female ☐

Occupation:

Qualification:

Address.....

.....

..... *E-mail ID:.....

Phone (with STD code): Residence: Mobile:

Aadhar Number :

Time: Tick whichever is applicable,

(A) Batch-I (Morning - 07:15 AM to 09:15 AM)

(B) Batch-II (Evening - 05:30 PM to 07:30 PM)

Fee Details:

Amount: DD No.: Date:.....

Name of Bank.....

(Please write your name and course applied for in the back of the Demand Draft also.)

Date:

Signature of the Applicant

Note:

1. Time/Batch will be allotted as per the convenience of the applicant in general, however candidate may be asked to change the batch as per the requirement of the course.
2. The Fee Deposited for any course is non-refundable & non-transferable.
3. Information regarding the classes will be sent to through mail after registration.
4. If applicant is in Government service, they need to apply through proper channel.

For Office Use Only

Course and Time allotted:

Fee Details:

Place & Date:

Signature of CEC-Chairman

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ACCOUNT DETAILS FOR ONLINE PAYMENT

Bank Name:	State Bank of India
Account Number	38027633250
Account Holder Name	Director NIT Raipur
Branch Name and Address	NIT Branch, G. E. Road Raipur, Chhattisgarh 492010, India
IFSC Code	SBIN0002852
MICR Code	492002004
Swift Code	SBININBB646
PAN Card Number	AAAJN0643G
GSTIN Number	22AAAJN0643G1ZN