**Annexure- CM - Urology**

**Spectrum of Surgical Procedures performed by the department of Urology:** Spectrum of procedures available in the department in last 3 years

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| --- | --- |
| **Spectrum of Surgical Procedures (Indicative Spectrum of Diagnosis is listed below)** | **Year wise no. of Clinical / Surgical Procedures** |
| **2019** | **2018** | **2017** |
| Renal Transplantation |  |  |  |
| TURP |  |  |  |
| PCNL |  |  |  |
| URS |  |  |  |
| VIU |  |  |  |
| TVT-0 |  |  |  |
| Radical Nephrectomy with IVC thrombectomy |  |  |  |
| Radical Nephrectomy |  |  |  |
| Partial Nephrectomy |  |  |  |
| Radical Cystectomy |  |  |  |
| Urethroplasty |  |  |  |
| Cystolithotripsy |  |  |  |
| Varioelectomy |  |  |  |
| Laparoscopic Nephrectomy |  |  |  |
| Laproscopic Ureterlithotomy |  |  |  |
| Laparoscopic deroofing of renal cyst |  |  |  |
| ACF creation |  |  |  |
| Permcath insertion |  |  |  |
| Others |  |  |  |

**Date:**

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| **Signatures of Head of the Department** **with stamp** | **Signature with official stamp of Administrative Head of the Institute/Hospital**(Authorized signatory on behalf of applicant hospital) |