ASSESSMENT OF MEDICAL / HEALTH AGENCIES DESIGNATED AS RESEARCH CENTRES IN NEPAL

FINAL REPORT

July 2011Kathmandu, Nepal

Prepared by
Nepal Health Research Council
(NHRC)



Supported by
Ministry of Health & Population
(MoHP)



Imprint

Published by

Nepal Health Research Council (NHRC) Ramshah Path, Kathmandu Nepal

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Print

Kathmandu, July 2011

ACKNOWLEDGEMENTS

I would like to offer my sincere thanks to the field researchers and data analysers (BhupendraNirajanKhaniya, PradeepBelbaseBikramDhimal andAmbikaShrestha) and data/information providers from the various research centres of Dhankutta,Jhapa, Morang, Saptari, Sunsari, Siraha, Bara, Mahottari, Bhaktapur, Chitwan, Dhading, Dhanusa, Kathmandu, Kavrepalchowk, Dolakha, Lalitpur, Makwanpur, Parsa, Rautahat, Sarlahi, Tanahu, Myagdi, Grokha, Kaski, Parbat, Palpa, Rupendehi, Bardiya, Banke, Dang, Surkhet, Kanchanpur, and Kailali districts.

I am also thankful with district (public) health officers of the concerned districts who have directly or indirectly contributed by providing their invaluable time and insight for this studyand respondents of various research centres.

I would like to appreciate and acknowledge the technical, administrative and financial coordination efforts made by Dr. ShankerPratap Singh, Mr.Nirbhay Kumar Sharma, Mr.Subodh Kumar Karna, and Mr.Bijay Kumar Jha of NHRC.

The study greatly benefitted from the guidance and cooperation of Dr.Laxmi Raj Pathak, the then Chief of Policy, Planning and International Co-operation Division (PPICD) and Dr.BaburamMarasini, Chief, Health Sector Reform Section of MoHP during tool development phase. I must thank MoHP for technical and financial supports for making this study successful.

I would like to give special thanks to Dr. Rajendra Kumar BC for carrying out the study and writing the report.

Professor (Dr.)Chop LalBhusal Executive Chairman Nepal Health Research Council

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ABBREVIATIONS

CDO Chief District Office

CDR Central Development Region

DDC District Development Committee

DHO District Health Office

EDR Eastern Development Region

ERB Ethical Review Board

FWDR Far-Western Development Region

GoN Government of Nepal

IRC Institutional Review Committee

MIC Ministry of Information and Communication

MoHP Ministry of Health & Population

MoI Ministry of Industry

MWDR Mid-Western Development Region

NGO Non-Government Organization

NHRC Nepal Health Research Council

NIB National Intelligence Bureau

PPICD Policy, Planning and International Co-operation Division

RCs Research Centres

RHDO Regional Health Directorate Office

SWC Social Welfare Council

TV Television

WDR Western Development Region

1. INTRODUCTION

Nepal Health Research Council (NHRC) Act (1991) has given more emphasis to regulate various kinds of health research activities in the country. This is basically to protect the rights and safety of human participants involved in the health research. National Ethical Guideline for Health Research (2001) stressed some direction towards conducting health research with application of ethical principles, but most of the organizations/individuals that are conducting health research in Nepal are not taking informed consent from the study participants, thus violating the rights and safety of such participants. Majority of organizations/individuals are not interested to submit their research proposal for ethical approval from any recognized review boards/committees.² Moreover, most of medical/health agencies (hospitals, polyclinics, NGOs etc.) designated as research centres were reluctant to collaborate and networking with each other. It has been argued that putting the word "Research" in any agency's name made easier to get the various things (equipments, medical supplies etc.) from abroad without paying or paying minimum or discounted government tax than others.³ It has been stated that more than 75 percent of the research centres that are functioning in the country are not conducting any health research although they have written the word "research" in their signboard. Study revealed that such practices were done to make their agency's name fancy and catchy for the public to draw their attention.²It seems that the most of the agencies/organizations are using the word "research" for the purpose of their business strategy, probably not at all for the purpose of uplifting the health research scenario in the country.

Ministry of Health & Population (MoHP) has provisioned that each and every centres that are holding "Research" word in their title name should have to conduct at least two researches per year in different topics of their relevant health areas with the permission from NHRC. If such research centres couldn't able to conduct any health researches within the period of two years after its establishments, the MoHP may warn such centres and they will have to take out the word "Research" from their signboard and relevant documents. It was a matter of huge discussion in the year 2005, not only in the national newspaper, but also in the famous TV channel (Image), run by the well-known

TV artist named Mr.KedarKhadka. Since then, NHRC and MoHP couldn't able to look back with their propositions and commitments to regulate such mal-practices in health research in the country. However, NHRC went on advocating the situations in different forums and meetings. Now, the time has come to initiate the same thing in different perspectives.

In this context, NHRC would like to update the number of Medical/Health Agencies (Hospitals, Polyclinics, NGOs etc.) designated as Research Centres established since 15 July 2005 to 31 December 2010, and assess those research centres that came into functional before 15 July 2005.

2. OBJECTIVES

The major objectives of the study were:

- To find out the existing number of Medical/Health Agencies (Hospitals, Polyclinics, NGOs etc.) designated as Research Centres till 31 December 2010,
- To find out the distribution of health related research centres in Nepal,
- To assess these research centres in terms of its research related characteristics, and
- To find out the reasons for putting the word "research" into their signboard.

3. METHODOLOGY

Assessment was done in order to find the number, at first Ministry of Industry (MoI) as well as Chief District Office (CDO) at the district level was contacted and collected the exact number of medical/health agencies (Hospitals, Polyclinics, NGOs etc.) that place the word "Research" in their title name since 15 July 2005 to 31 December 2010. Formative evaluation method was adopted in which information were added continuously, organized systematically and analysed periodically during the evaluation period. The evaluation period covered all the things conducted in the past to till the evaluation time. All the research based program documents including

progress reports, baseline study reports available during the study period were reviewed. Qualitative approach was used to examine the qualities of a specific research activities/programs carried out by the selected research centres. An evaluation tool was developed for the process.

Sampling Procedure

All the registered research centers were included in the sampling frame, from which 23 percent research centers were selected for the evaluation study by simple random sampling (SRS) method. The flow chart for sampling the research centers and locating these centers in the district is given below:

List of Health related Agencies designated as Research Centres

23% Research Centres selected by SRS Method

Locating Research Centres in District (district survey)

Contacting the Responsible Person of Research Centre

Informed Consent Taken

All the selected research centers were grouped in their respective regions and districts. The responsible person of such centers was contacted and their informed consent was taken. If the responsible person of the selected research center did not provide their consent to give the information, another research center was randomly selected from the list for information collection.

Recruitment and Training of Information Collectors

Four information collectors were recruited in order to collect the information from the sampled research centers. All of them were recruited from the central level. Intensive training was provided to them before information collection. During training, emphasis was given on information collection procedures focusing on interview technique. The information collection activities were supervised to ensure the quality of information. One field coordinator was also recruited for the evaluation study.

Entry to Study Area

District Health Officeswere contacted during the study. Their support was found to be essential for the success of the study. The responsible person in each selected research center was contacted and informed about the purpose and expected benefits of the study.

Evaluation of ResearchCenter

Each selected research centers situated in the district were visited, and information was collected using semi structured questionnaire (Annex-1) contained with cover letter (Annex-2). Pre-testing of the questionnaire was conducted in Kathmandu and necessary modification of questionnaire was done accordingly.

Data Management and Analysis

The data management system was developed, which incorporated a system of editing and documentation at all levels of the study. All the information forms were checked and rechecked for consistency by the field coordinator. After obtaining the information, researcher had transferred all the information to Nepal Health Research Council, Kathmandu for data processing. These data were entered into the computer using standard data entry software for preliminary data analysis. The calculation of frequency distribution and percentage was done. Proportions of health facilities and NGOs designated as research center in each districts were calculated.

Biases

The result of the study might be affected due to information bias during interviewing of responsible person of research center by different information collectors, but this was minimized to some extend by recruiting the educated information collectors and training. There was a little possibility of reporting wrong information to the information collectors, but these were minimized by asking the counter questions for tracking their real information.

Apart from these, following process was also adopted for sampled centres that actually conducted or involved in the research projects.

- Investigating team met the research team and discuss various aspects of their research projects/programs,
- If the selected centre has IRC, the team also met its members and try to assess
 whether they have followed the guidelines for IRCs for health research in Nepal
 (published by NHRC) or not,
- The team tries to look the research proposals if not submitted to NHRC,
- During discussion and spot observation, the team noted whether they have maintained their ethical standards while conducting the research projects in the identified research areas or not. The team also assessed the consistency of the methodology and objectives of the research,
- The resources needed for the project e.g. staffs, equipment, supplies, logistic support and fund whether available or not were supervised,
- Delays, difficulties and challenges encountered by the centre while conducting the research projects/programs at the field setting were assessed,
- The flow and quality of the data that were collected was also evaluated, and
- Proper communication and co-ordination of the centre with the study participants,
 collaborating groups and funding authorities were also evaluated.

4. FINDINGS AND DISCUSSIONS

The findings have been divided into following four sections:

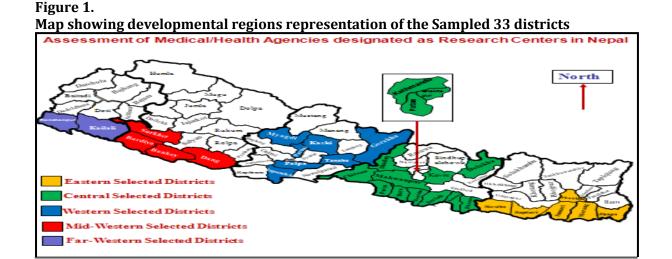
- (1) Distribution of health related research centres in Nepal,
- (2) Distribution of Involvement of Research Program Characteristics,
- (3) Distribution of Following Research Process Characteristics, and
- (4) Distribution of Reasons for Putting the Word "Research" in the Signboard.

Apart from this, there is a separate section of conclusions and recommendations.

SECTION 1

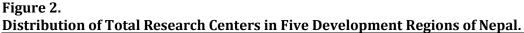
Distribution of Health related Research Centers in Nepal

There were altogether 370 health related research centers registered in MoI and CDO at the district level till 31 December 2010. These research centers were located in 33 districts of Nepal (Figure 1). The names of these districts were Dhankuta, Jhapa, Morang, Saptari, Sunsari, Siraha (eastern region), Bara, Bhaktapur, Chitwan, Dhadhing, Dhanusha, Kathmandu, Kavrepalanchowk, Lalitpur, Makawanpur, Parsa, Rautahat, Sarlahi, Dolakha, Mahottari (central region), Tanahu, Myagdi, Gorkha, Kaski, Prabat, Palpa, Rupendehi (western region), Banke, Dang, Surkhet, Bardiya (mid-western region), Kanchanpur, Kailali (far western region). It means that 44 percent of districts in Nepal have health related research centers.



Among these there were 65 (82%) health facilities and 305 (18%) NGOs designated as research centers. Their details such as names, addresses etc. were given in Appendix – A.

The region wise bar diagram (figure 2) showed that the range of number of research centers among five regions was 4 to 283. The highest number of research centers was found in Central Development Region (CDR) and lowest in Far-Western Development Region (FWDR). The distribution of health facility and NGOs related research centers by regions is given in Table 1.



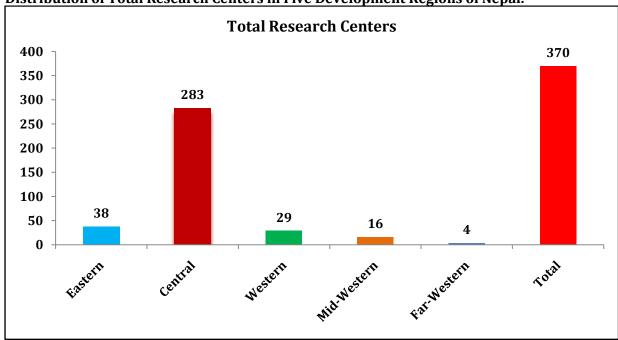


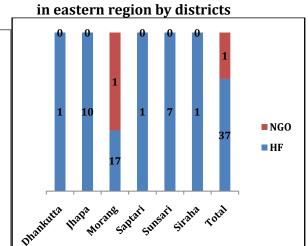
Table 1.
Distribution of Total Research Centers in Five Development Regions of Nepal.

Regions	Health Facil Research	•		elated h Center	Total Research Center		
	n = 305	%	n = 65	%	N = 370	%	
Eastern	37	12	1	1.5	38	10	
Central	223	73	60	92	283	76	
Western	29	10	3	5	32	9	
Mid-Western	12	4	1	1.5	13	4	
Far-Western	4	1	0	0	4	1	

The district wise bar diagram for eastern (figure 3), central (figure 4), western (figure 5), mid-western (figure 6) and far-western (figure 7) development regions showed that the range of number of research centers among 33 districts was one to 196.

Figure 3.1

Figure 3
Distribution of total research centers in eastern region



Distribution of types of research centers

The highest number of research centers was found in Kathmandu district. There were eight districts such as Dhankuta, Saptari, Siraha (eastern region), Mahottari, Dolakha, Makwanpur, Sarlahi (central region), and Myagdi (western region) having only one research center and that too health facility related research center except in Mahottari where it was NGO related research. Excluding Kathmandu district, the range of number of research centers would be one to 29. Considering this, there were only five districts (Jhapa, Morang, Dhanusha, Lalitpur, Parsa, and Kaski) that have more than 10 research centers.

We didn't find any NGOs related research center in 19 districts such as Dhankuta, Saptari, Sunsari, Siraha from eastern region (figure 3.1); Bara, Chitwan, Dolakha, Makwanpur, Sarlahi from central region (figure 4.1), Tanahu, Myagdi, Gorkha, Prabat, Palpa, Rupendehi from western region (figure 5.1), Dang, Surkhet from mid-western region (figure 6.1), Kanchanpur, Kailali from far western region (figure 7.1).

We didn't find any of those so called research centers in the rest of other 42 districts.



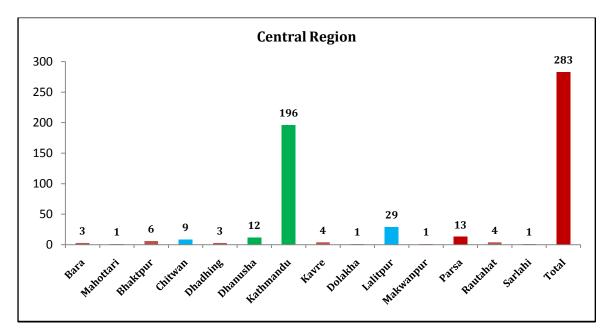


Figure 4.1
Distribution of types of research centers in central region by districts

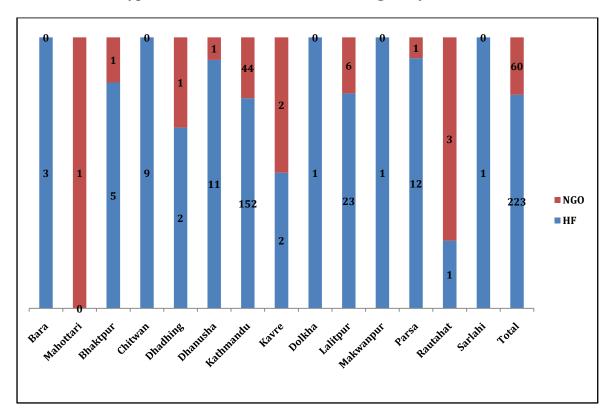


Figure 5
Distribution of total research centers in western region

Western Region

29

16

10

4 1 2 2 2 2 2

7 and My again kaski partiak partia

Figure 5.1
Distribution of types of research centers in western region by districts

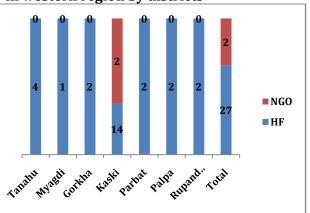


Figure 6
Distribution of total research centers in mid-western region

Mid-Western 18 16 16 14 12 10 8 5 5 6 3 4 2 Total Bardiya Banke Dang Surkhet

Figure 6.1
Distribution of types of research centers in mid-western region by districts

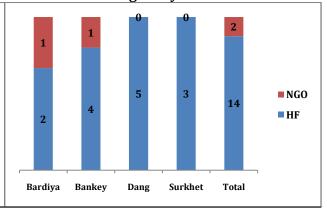


Figure 7
Distribution of total research centers in far-western region

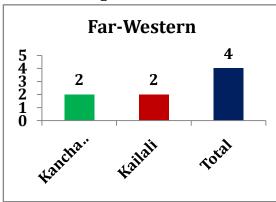
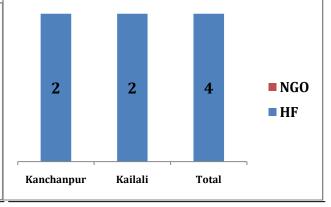


Figure 7.1
Distribution of type of research centers in far-western region by districts



Out of 370 research centers, 85 research centers (72 from among health facility related research centers and 13 from among NGO related research centers) were selected randomly for evaluation purpose, which represented 23 percent of sample selection. The sample selection was not below than 20 percent in each category of research centers (Table 2).

Twenty onedistricts were visited in order to locate the selected research centers. Visited districts were Dhankuta, Jhapa, Morang, Sunsari (eastern region), Bara, Bhaktapur, Chitwan, Dhanusha, Kathmandu, Kavrepalanchowk, Lalitpur, Parsa (central region), Kaski, Palpa, Rupendehi (western region), Banke, Dang, Surkhet, Bardiya (mid-western region), Kanchanpur, Kailali (far western region). Although we have found out from the register that there were two health facility related research centers in Rupendehi and Kailali districts, we didn't find any research centers in these districts during our study period. So we confined our evaluation study only in 19 districts (4 in eastern, 8 in central, 2 western, 4 in mid-western and 1 in far-western) (Table 2.1). All of these 85 research centers had given the informed consent to participate in the evaluation study.

Table 2
Distribution of types of sampled research centres by development regions

		cility related th Centers		related rch Centers	Total Research Centers			
Regions	Total n = 305	Sampled n = 72 (24)	Total n = 65	Sampled n = 13 (20)	Grand Total N = 370	Total Sampled N = 85 (23)		
Eastern	37	16 (43)	1	0 (0)	38	16 (42)		
Central	223	36 (16)	60	10 (17)	283	46 (16)		
Western	29	10 (34)	3	2 (67)	32	12 (38)		
Mid-Western	12	8 (67)	1	1 (100)	13	9 (69)		
Far-Western	4	2 (50)	0	0 (0)	4	2 (50)		

Note: Figure within the parenthesis is row percentage for its total appeared in the left side.

Table 2.1
Distribution of types of sampled research centres by districts

Region	S. N.	District's Name	Total No. of RCs	No. of HFs	No. of NGOs	No of Sampled HF	No of Sampled NGOs	No. of Sampled RCs	No. of Consented RCs
	1	Dhankutta	1	1	-	1	-	1	1
	2	Jhapa	10	10	-	8	-	8	8
Eastown	3	Morang	18	17	1	6	-	6	6
Eastern	4	Saptari	1	1	-	-	-	-	-
	5	Sunsari	7	7	-	1	-	1	1
	6	Siraha	1	1	-	-	-	-	-
	7	Bara	3	3	-	1	-	1	1
	8	Mahottari	1	-	1	-	-	-	-
	9	Bhaktpur	6	5	1	2	1	3	3
	10	Chitwan	9	9	-	3	-	3	3
	11	Dhadhing	3	2	1	-	-	-	-
	12	Dhanusha	12	11	1	6	1	7	7
Combanal	13	Kathmandu	196	152	44	15	6	21	21
Central	14	Kavre	4	2	2	1	1	2	2
	15	Dolakha	1	1	-	-	-	-	-
	16	Lalitpur	29	23	6	1	1	2	2
	17	Makwanpur	1	1	-	-	-	-	-
	18	Parsa	13	12	1	7	-	7	7
	19	Rautahat	4	1	3	-	_	-	-
	20	Sarlahi	1	1	-	-	-	-	-
	21	Tanahu	4	4	-	-	-	-	-
	22	Myagdi	1	1	-	-	-	-	-
	23	Gorkha	2	2	-	-	-	-	-
Western	24	Kaski	16	14	2	8	2	10	10
	25	Parbat	2	2	-	-	-	-	-
	26	Palpa	2	2	-	1	-	1	1
	27	Rupandehi	2	2	-	-	-	-	-
	28	Bardiya	3	2	1	1	-	1	1
Mid -	29	Banke	5	4	1	4	1	5	5
Western	30	Dang	5	5	-	3	-	3	3
	31	Surkhet	3	3	-	1	-	1	1
Far -	32	Kanchanpur	2	2	-	2	-	2	2
Western	33	Kailali	2	2	-	-	-	-	-
		Total	370	305	65	72	13	85	85
		Percentage	100%	84%	16%	22%	8%	20%	23%

Note: RCs - Research Centers, HFs – Health Facilities designated as RCs,

 $\ensuremath{\mathsf{NGOs}}$ - $\ensuremath{\mathsf{Non\text{-}Government}}$ Organizations designated as RCs

SECTION 2

Distribution of Involvement of Research Program Characteristics

One fifth research centers were found to conduct health related research progam. Among which majority (more than 50%) of NGO related research centers was found to conduct health research. There were few (14%) health facility related research centers that actually conducted health related research program. It means that the former centers were found to conduct health realted research nearly four folds more than the latter one (Table 3). While observing by development regions, it was appeared that research centers located in mid-western region claimed that they had conducted more health related research program than any other research centers located in other regions. However, there were none of the research centers carried out any health related research program in the far-western region (Table 3.1).

Table 3
Distribution of involvement of research program characteristics by the type of research centres

Involvement in Research Characteristics		Health Facil Research n=7	centers 72	NGO re Rese cent n=	arch ters 13	N=	
		N	%a	n	% ^a	N	%a
Conduction of any health related Research Program till date	Yes	10	14	7	54	17	20
Cond n of hea rela Rese Prog	No	62	86	6	46	68	80
ny	Yes	5	7	5	38	10	12
lined an earch Project	No	55	76	6	46	61	72
Pipelined any research Project	Not sure	12	17	2	15	14	16
Ever commun- icate about any research project	Yes	6	8	5	38	11	13
	No	66	92	8	62	74	87
Having Research Committee	Yes	6	8	5	38	11	13
Hav Resc Comi	No	66	92	8	62	74	87
involvement in any other research programs conducted by	Yes	2	3	4	31	6	7
involvemer in any other research programs conducted by	No	70	97	9	69	79	93

a: Column percentage to indicate the distribution of involvement of research program characteristics by the type of research centres

It was observed that the reasons for not conducting regular research programs were due to lack of research capacity and not having proper knowledge of research, research funds, proper infrastructure, and sufficient time to conduct research.

One tenth research centers informed us that they might have some research projects in days to come. We have observed that very less (7%) health facility related research centers pipelined some research projects to be conducted in future while more than five times of this preentage could be considered for the NGO related research centers. It indicates that NGO related research centers planned their research project more than health facility related research centers (Table 3). It was quite interesting to observe that there were not much difference in the distribution of percentages of having pipelined research project by all four regions except far-western region where none of the research centers planned any research project (Table 3.1).

Table 3.1
Distribution of research centre's involvement in research program characteristics by development regions

development regions													
Involvement in Resear			Eastern n=16		Central n=46		Western n=11		Mid western n=10		Far- Western n=2		tal 85
		n	%a	N	% ^a	n	% ^a	n	% ^a	n	%	N	%
Conducti on of any health related Research Program	Yes	2	12.5	10	22	2	18	3	30	0	0	17	20
Con or a he rela Rese Prog	No	14	87.5	36	78	9	82	7	70	2	100	68	80
٠	Yes	2	12.5	6	13	1	9	1	10	0	0	10	12
peline any searc oject	No	14	87.5	30	65	6	54	9	90	2	100	61	72
Pipeline any Research Project	Not sure	0	0	10	22	4	36	0	0	0	0	14	16
Ever Commun -icate about any research project?	Yes	0	0	11	24	0	0	0	0	0	0	11	13
Every Expension	No	16	100	35	76	11	100	10	100	2	100	74	87
Have Research Committe e?	Yes	1	6	7	15	2	18	1	10	0	0	11	13
Ha Rese Com	No	15	94	39	85	9	82	9	90	2	100	74	87
ement other arch ams icted / er ations	Yes	0	0	5	11	0	0	1	10	0	0	6	7
Involvement in any other research programs conducted by other organizations	No	16	100	41	89	11	100	9	90	2	100	79	93

a: Column percentage to indicate the distribution of research centre's involvement in research program characteristics by development regions.

Similarly, it was also found out that 13 percentage of research centers had started their communication about any research project and also had their research committees. It

came to our notice that very few (8%) health facility related research centers started their communication about any research project and also had their research committees (Table 3). While observing by development regions, only central region research centers were found to start their communication about any research project (Table 3.1). Regarding research committee, very few percentage (6%) of research center from easter region, 15 percent from central region, 18 percent from western region, and 10 percent from mid-western region had their research research, while none of the research centers located in far-western region had any research committees (Table 3.1).

Less number of research centers (7%) were found to be involved in other organizations research programs (Table 3). Such kind of involvement were found among those research centers located in central and mid-western regions, while rest other regions research centers were not found to be involved in other organizations research programs (Table 3.1). Very less number of health facility related research centers (3%) were found to be involved in other organizations research program wheareas nearly one third of the NGO related research centers were involved into such processes (Table 3).

SECTION 3

Distribution of Following Research Process Characteristics

Although it was said earlier that 20 percent of the research centers were found to conduct health related research progam, very less (5-7%) number of research centers were actually registered their research proposal to be submited to some review committees from where research permission could be obtained. However, one tenth of the research centers were taking the informed consent while conducting their research. It was also found that insignificant (6%) number of research centers were actually received the ethical approval letter from an authentic review board or committees. It was also indicated that majority (86%) of the research centers didn't start the research yet (Table 4).

While observing development region, it came to our notice thatonly central region's research centers (6%) were taking ethical permission from an authentic review board or committees. None of other regions research centers were taking such permission. However, one among 16 and one among 11 research centers located in eastern and western regions repectively were found to obtaining informed consent while carrying out their research (Table 4.1).

Table 4
Distribution of following research process characteristics by the type of research centres

Following the research process characteristics	Hea Faci rela Rese cent n=:	lity ted arch ers	NGO related Research centers n=13			otal =85
	N	% ^a	n	% ^a	N	%a
Registration of research Proposal	2	3	2	15	4	5
Submission of protocol according to the NHRC format/IRCs	2	3	4	31	6	7
Informed Consent	5	7	4	31	9	11
Permission letter of affiliated institute of researcher	5	7	2	15	7	8
Getting approval letter from IRCsor ERB of NHRC	1	1	4	31	5	6
Not started Yet	65	90	8	62	73	86

a: Column percentage to indicate the distribution of following research process characteristics by the type of research centres **Note**: IRCs: Institutional Review Committees, ERB: Ethical Review Boards

Table 4.1

Distribution of research centres that follow research process characteristics by development regions

Following the research process characteristics		Eastern n=16		Central n=46		Western n=11		lid etern :10	Far- Western n=2			tal :85
	n	% ^a	n	% ^a	n	% ^a	n	% ^a	n	%a	N	% ^a
Registration of research proposal	-	-	4	9	-	-	-	-	-	-	4	5
Submission of protocol according to the NHRC format/IRCs	-	-	6	13	-	-	1	-	-	-	6	7
Informed Consent	1	6	7	15	1	9	-	ı	-	-	9	11
Permission letter of affiliated institute of researcher	1	6	5	11	1	9	ı	ı	ı	ı	7	8
Getting approval letter from IRCs or ERB of NHRC	-	-	5	11	-	-	-	-	-	-	5	6
Not started Yet	15	94	38	83	8	73	10	100	2	100	73	86

a: Column percentage to indicate the distribution of research centres that follow research process characteristics by development regions

Note: IRCs: Institutional Review Committees, ERB: Ethical Review Boards

SECTION 4

Distribution of Reasons for Putting the Word "Research" in the Signboard

During our field observation cum interaction, it was found that majority (60%) of the research centres were informing us that the reason for putting the word "research" into their signboard was actually to conduct the research, but rest of the research centres didn't able to reply into this direction. It was quite interesting to know that 15 percent(13/85) research centres had written the word "research" into their signboard without properly knowing it (Table 5). This finding is in consistent with the previous findings. They said that somebody suggested them to write such word into their signboard, and these were 14 percent. There were some research centres (13%) that followed exactly what others in the same field were following (Table 5). It means that the reason behind writing such word is also due to the influence of other organization working in similar settings.

One of the staff of research centre informed us that some research centres are even unaware about what sort of research activities should they do by themselves.

Apart from these, some research centres (4%) said that routine examination of blood and urine samples was their research. It was also indicated that the main reason behind putting the word "Research" in their signboard was just to deduct the government and related tax (5%), make the word fancy and catchy for the public to draw their attention towards their centre (7%), and easy to get donation (8%) (Table 5).

One of the staff of research centre informed us that they knew about the issues related to research activities only after some news related to health research appeared in the newspaper and broadcasted in the radio.

We observed that health facility related research centres were found to be miss using such word more frequently than NGO related research centres as it was evident from the scenario that three fourth of such NGO centres indicated that they put such word just to conduct the research while one in two health facility related research centres

indicated the same thing. It means that more number of NGO related research centres were actually conducting the research compared to health facility related research centres (Table 5). However, all of the research centres offering academic courses were found to be involved in research and related activities and these were eight percent.

One of the staff of research centre informed us that their lawyer suggested that putting the word research into their health facility names will make them easy to convert that facility into hospital in future.

One of the staff of research centre informed us that medical report made from the agency designated as research centre will be considered reliable and valid for those who are supposed to get authentic laboratory report for submission to foreign employment agencies.

During field visit, we noticed that some research centres removed the word "research" from their signboard with white cement. When we asked with such centres, they were found to be very conscious while responding our quarries. It means, they knew that they were miss-using the word "research".

While observing the distribution of research centres in five development regions, all of those parameters of obtaining the information regarding reasons for putting the word "research" in the signboard were found to be more or less similar in percentage distribution except in some specific parameter and far-western region (Table 5.1).

Table 5 Distribution of reasons for putting the word "Research" in the signboard by the type of research centres

Reasons for putting the word "research" in the signboard	Hea Faci rela Resec cent n=:	lity ted arch eers	rela Rese	GO ated arch ters 13	_	otal =85
	n	% ^a	N	% ^a	N	% ^a
Just to conduct health research	41	57	10	77	51	60
Just to draw public attention	6	8	-	-	6	7
It is fancy and catchy word	7	10	ı	-	7	7
Most organizations are writing so we are writing	11	15	ı	-	11	13
It is easy to get donation	6	8	1	8	7	8
It is very easy to deduct government and related tax	4	6	ı	-	4	5
Can impress health service through research	6	8	1	8	7	5
We are examining routing laboratory test that's what we understood research	2	3	1	8	3	4
Somebody suggested us to write	11	15	1	8	12	14
Without knowing properly	13	18	-	-	13	15
It is an academic Institution	6	8	1	8	7	8

a: Column percentage to indicate the distribution of reasons for putting the word "Research" in the signboard by the type of research centres

Table 5.1 Distribution of research centres' reasons for putting the word "Research" in the signboard by development regions

Reasons for putting the word "research"in the signboard		Eastern n=16		Central n=46		Western n=11		lid stern =10	Far- Western n=2		Total n=85	
	N	%a	n	%a	n	%a	n	%a	n	%a	N	%a
Just to conduct health research	9	56	30	65	5	45	7	70	-	-	51	60
just to draw public attention	1	6	3	7	1	9	1	10	-	-	6	7
It is fancy and catchy word	1	6	4	9	1	9	1	10	-	-	7	8
Most org. are writing so we are writing	5	31	4	9	1	9	1	10	-	-	11	13
It is easy to get donation	-	-	3	7	1	9	2	20	1	50	7	8
It is very easy to deduct government and related tax	-	-	2	4	1	9	1	10	-	-	4	5
Can impress health service through research	2	13	3	7	1	9	1	10	1	1	7	8
We are examining routing laboratory test that's what we understood research	-	-	1	2	1	9	1	10	1	1	3	4
Somebody suggested us to write	2	13	7	15	-	-	1	10	2	100	12	14
Without knowing properly	2	13	6	13	3	27	1	10	1	50	13	15
It is an academic Institution	3	19	3	7	1	9	-	-	-	-	7	8

a: Column percentage to indicate distribution of research centres' reasons for putting the word "Research" in the signboard by development regions
*percent exceed >100 due to multiple responses

^{*}percent exceed >100 due to multiple responses

5. CONCLUSONS AND RECOMMENDATIONS

It has been concluded that there were 370 research centers presented in Nepal till 31 December 2010. It was also concluded that only 20 percent research centers were found to conduct health related research program in Nepal.Forty percent of the research centers in Nepal didn't know the actual reason for putting the word "research" into their signboard.

Based on the findings, the most important recommendations are given as follows:

- Mass awareness campaign need to be broadcasted through appropriate channel of media for those centres that are holding "Research" word in their title name should have to conduct at least two researches per year in different topics of their relevant health areas with the permission from NHRC.
- Develop capacity of those research centres that are willing to conduct some sort of health research in their working areas.
- Promote regional level research meeting and workshop so that such centres will get
 an opportunity to share their research ideas/activities/concept proposal and
 receive feedback in order to promote research work at regional level.
- Strengthen the networking and coordination between such research centres. For which NHRC should play a facilitative role.
- Delays and difficulties encountered by the research team of respective research centres while implementing the research projects at the field setting should have to be informed to NHRC.
- Encourage these research centres to submit their research proposal(s) either at the ERB of NHRC or IRCof the respective institution and take the ethical approval letter(s).
- Strengthen surveillance system for monitoring these research centres and maintain a good harmony with National Intelligence Bureau (NIB), Social Welfare Council (SWC), NGO Federation, Ministry of Information and Communication (MIC), Ministry of Industry (MoI), CDO, District Development Committees(DDC), Regional Health Directorate Office (RHDO) and District Health Offices (DHO).

- Prepare the Terms and Conditions for putting the word "Research" in the title name of any organization / agency / centre / institute / polyclinic / hospital.
- Conduct series of orientation workshop in order to make aware lawyers and senior officials of NIB, SWC, MIC, MoI, CDO, DDC, RHDO, DHO and umbrella organization of Foreign Employment Agencies regarding putting the word research in any health facility and NGO names.

6. BIBLIOGRAPHIC REFERENCES

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ANNEX - 1



NEPAL HEALTH RESEARCH COUNCIL

RAMSHAH PATH, KATHMANDU

Phone: 00977-1-4254220/4227460, **Fax:** 00977-1-4262469

Assessment of Medical/Health Agencies (Hospitals, Polyclinics, NGOs, etc) designated as Research Centers in Nepal

that NHRC is going to c (Hospitals, Polyclinics, NGC objective of the study is t goals/objectives, functional	from NHRC. This is to inform you onduct the Rapid Assessment of Medical/Health Agencies Os, etc.) designated as Research Centers in Nepal. The main to assess the health related research activities, program aspects of Institutional Review Committee (if existed) in the nation you will provide on behalf of your organization/agency
* *	dy will benefit your organization/agency in the long run. If you garding the assessment please feel free to call us.
	Signature & Seal:
Name of Organization/Agenc	y:
Given consent: Yes [If no, provide reason:	□ No □
	zation/Agency:Agency:
4. Full Address: (With phone number)	
5. Type of organization:	 □ Profit Making Health Organization/Agencies □ Non-Profit Making Health Organization/Agencies □ Academic Institution □ Others

6. l	Mai	n Goals or Objective(s) of the	Organizati	on / Ag	gencies	s: 				_
	Did date	your organization/agency cond?	Yes	ealth re	elated I	Research I	Program/Pr	oject t	ill th	is
If y	yes,	number of health related Rese	No arch Projec	ets/Pro	gram c	onducted	till date:]
		you please tell us the titles of shment?	your healt	h relate	ed rese	arch proje	ects/prograi	ms sino	ce its	3
Sì	Ŋ	Title	Study Area	Name	of PI	Funding Year	Funding Agency	Proje Durat		Status
8. 1		your organization/agency pipe Yes No Not sure yes, please mention the following		g to be	startec	l) any rese	earch proje	cts?		
	SN	Project Name	Study A	Area	Nar	ne of PI	Funding Ag	gency		roject ıration
9. 1	Do y	your organization/agency have				name list	of committe	ee men	ıbers	s)
10.	.Do	your organization/agency follo	Registration Submission Informed Permission	on of Ron of procession of procession of Ronald Ron	Researd rotocol nt of aff	th Proposal according	-	IRC fo	ormat er	

11. Was there any health related research programs/projects that are not conducted or incomplete although planned or pipelined? Yes No						
If yes, provide main reasons						
proje □ Y	your organization/agend ect/process? Yes No	cy ever co	mmunicate v	vith NHRC abou	t any researc	h
If yes, w	hat kind of communica	tion, men	tion it?			
If no, pl	ease mention reason?					
cond	your organization/agenducted by other organizates No lease mention the follow	ation / age	•	research progra	ms / projects	
S. N.	Project/Program Name	Study Area	Name of PI	Name of Organization	Funding Agency	Project Duration
organ consider J J J I I I I I I I I I I I I I I I I	r opinion regarding putt nization/agency's signbolered positive and "x" in negati ust to conduct health re ust to draw public attent t is fancy and catchy we Most organizations / age t is very easy to get don't t is very easy to deduct can impress our client the We are examining routing somebody suggesting us	oard. (Multive opinion) esearch ation ord encies are nation governmentation governmentation glaborat	writing so went and related by ide health sory test that's	e are also writing d tax services through	herever responde	nt's opinion

☐ We have written the word without knowing it prop	
☐ It is an academic institution so we put the word "re☐ Others (specify)	esearch
15. What could be the probable reason of not conducting/in program/project till date by your organization/agency? conduct/initiate any health research program/project) (Multiple of the conduct initiate any health research program/project) (Multiple of the conduct initiate any health research program/project) (Multiple of the conduct initiate any health research conduct research we don't have any capacity to conduct research we don't have fund to conduct research we don't know we need to conduct research conduct initiate any health research conduct research con	? (Ask with those who didn't
16. What would be your organization/agency's future strat Nepal?	tegy in terms of health research in
17. What would you require in order to uplift the research organization/agency?	capacity of your
Name of NHRC Staff:	Date:
Location:	_ Time:
Signature:	

Thank You!

ANNEX - 2

Sample Cover Letter during Data Collection

<u>ldlt_</u>M@^&÷!)÷@

<u>ljifo</u> Mljf: Yocg; Qufg; DaQuLljj/OfpknAwu/fQtbgxg.

pk/filmlj ifodf glkfn; /sf/, :j f: Yo t yf hg; Yof d@fno, glkfn: j f: Yo cg; @fg kl/ifbYdf/f; ~r fng eQixsf] Assessment of Medical/Health Agencies (Hospital, Polyclinics, NGOs, etc) designated as Research Centers in Nepal; Darby cVbog cg; @fg sfo&f] nflu; Darby Format cg; f/sf lj j/Of cg; @fg sfo&f; Darby o; kl/ifb\sf sdf f/lnfQoyfz l3|pknAwu/fQlog xg cg/flw5.

8f=zs/k;fkl; ≭ ; b:o-; lr a

gff Migkfn clwfhot el/ sg}klg l/; r {; j6/ gfds :j f: Yo ; #yf :yfkgf ubf{gkfn ; /sf/, :j f: Yo t yf hg; *Yof d@ifnosf]lghLt yf u}; /sf/L:j f: Yo ; #yf -c:kt fn t yf gl; *{ xfpl cfbl_:yfkgf, ; ~r fng gllt , dfkb08 F] +kj'f{vf/ lgb[zsf @/^! sf]-a_sf]abf g + & adf[lnd sg]klg l/; r {; j6/ gfdfs/0f xg]:j f: Yo ; #yfx?n]gkfn :j f: Yo cg; Qxfg kl/ifb\-NHRC_; E ; dGo u/Llj lwj t ?kdf j if{df sDlLdf @-bQ_j 6f :t/Lo cg; Qxfg kl/f u/sf]xg'kgf . c@yf ab; r {; j6/ Ægfdfs/0f x6fpg'kgf e@j].bj :yf /xsf]s/f o; kq; fy hfgsf/Lu/fQ65 .

ANNEX - 3

LIST OF RESPONDENTS

Name list of Respondents

S.N	Name	Designation	Affiliated Research Centre	Contact No.
1	Mr.Khandra Prasad Khatiwada	Secretary	Dhunkuta model Hospital & Research Centre	Dhankuta-7, 9842062440
2	Mr.Ratna Kumar Thamsuhang	Chairman	Jhapa Polyclinic & Research Centre	Birtamod, Jhapa, 9841702883
3	Mr.Hari Prasad Luitel	Director	Janasewa Dental Hospital & Research Centre	Damak-13, Jhapa, 023-584973
4	Mr.IshorKarki	President	Mechi Model Hospital & Research Centre	Damak-10, Jhapa, 023-543436
5	Dr.Pramod Kumar Ray	Director	Om International Machi Hospital & Research Hospital	Damak-11, 9842795185
6	Dr. Chandra DevYadav	Dentiest	Pro-public Dental Hospital & Research Centre	Amarmani-3, Birtamod, Jhapa,023541800
7	Mr.YuvarajGiri	Manager	Q&Q Hospital & Research Centre	Damak-10, Jhapa, 9852675546
8	Mr.Blteu Shah	Lab. Technnician	Ajay Diagnostic and Medical Research Centre	Damak-11, jhapa, 9842620815,023580 956
9	Mr.KuberBhattarai	M.D.	Namaste Health Care & Research Centre	Damak-13,Jhapa, 9842630545
10	Ms.SubaniMagar	Accountant	Morang Hospital & Research Centre	Pathari-7, Morang
11	Mr. Rajesh Rajbanshi	Dental Assistant	Chirayeu Dental Hospital & Research Centre	Pokharia-1, Biratnagar, 9852021970
12	Dr.Ashu Deep Sharma	Medical Director	Birat Nursing Home & Research Centre	Biratnagar-3, Morang, 021-522144
13	Dr.ShambuBdr. Karki	Campus Chief	Birat Health College and Research Centre	Biratnagar-5, Morang
14	Mr. Krishna Kumar Khawas	Manager	Green Cross hospital & Research Centre Pvt. Ltd.	Biratnagar-12, Morang, 9852020104
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16	Mr. Jay PrakashUranw	Lab. Asst.	JeevanJyotiDiognostic& Research Centre	Itahari-1, 02-585164
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58	Mr.DamodharAdhikar i	Accountant	Krishna Hospital & Research Centre	Birjung-4, 9845038023
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62	Mr.Binaya Kumar Srivastav	Mananger	Divine Institute of Health training and Research	Birjung-2, Parsa, 9845405658,051- 523628
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66	Mr. Ram Chandra Gaire	Accountant	Om Hospital Diognostic& Research Centre	Pokhara-9, 9846183807
67	Mr.GyaneshworParaju li	Vice- President	WatawaraniyaShikshaTathaAnusand han Nepal	Pokhara-2, 985602330
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71	Mr. Jay Bdr. Gurung	Chairman	Pokhara Hospital & Research Centre	New Road Pokhara, 061-528243
72	Mr.AmitNeupane	Treasurer	AyurbesicAnusandhanTathaBikas Kendra	Sarankot-9, Kaski, 9726137710
73	Mr.GopalBdr. Pokheral	Executive Chairman	Lumbini Medical College & Research Centre Pvt. Ltd.	Prabastansen, Palpa, 075-520840`
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78	Mr.ShisirSubedi	Medical Technologist	NHC Diagnostic And Research centre	Nepalgunj,081- 528020
79	Mr.GajendraBdr. Sahi	M.D.	Kohalpur Dental Hospital and Research Pvt. Ltd.	Kohalpur-3, Banke, 081-541113
80	Ms.Sita G.C.		Bishwas Medical & Research Polyclinic	Ghorahi-10, Dang
81	Mr. Jay PrakashOli	Lab. Technnician	Dirghayeu Polyclinic & Research Centre Pvt. Ltd.	Tulsipur, Dang, 082- 522683
82	Mr.Bhuwaneshwor Buda	M.D.	Subama Medical Solution & Research Centre Pvt. Ltd.	Ghorahi-10, Dang, 082-561270
83	Dr.PitambarSubedi	Consultant	BishesagyaBal Hospital & Research Centre	Surkhet, 083-525268
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8	85	Mr.RoshanNath	Adminstrator	Mahakali Dental Hospital & Research Centre Pvt. Ltd.	Mahendranagar, Kanchanpur,099- 520533
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