



IAPSM - PUBLIC HEALTH INFOGRAPHICS (IPHI)



Graphic-e-Health



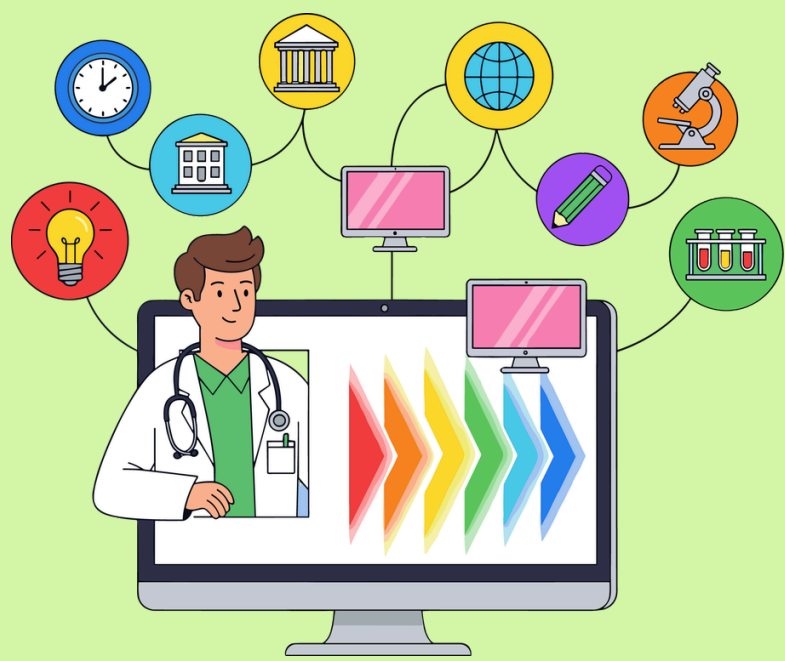
Edition: 2



Issue: 2



January 2026



THEME

FROM PAPER TO PLATFORM: INDIA'S DIGITAL HEALTH

IPHI TEAM:

Chairperson

Dr. Annarao Kulkarni

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Infographics iapsm



iapsm_infographics



Channel: IAPSM Public Health Infographic



MORE INFO





IAPSM - PUBLIC HEALTH INFOGRAPHICS (IPHI)



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K S Gowda

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4 Dr. Mohamed Farris
Masthan

5 Dr. Manishkumar
Bhoi



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Dr. Nudhan
Sabarish R **7**

Dr. Monesh Verma **8**

Dr. Nudhan
Sabarish R **9**

Dr. Koningston
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HOW IT STARTED: THE PAPER ERA

- Health records maintained in handwritten files
- No uniform system across facilities
- Records difficult to retrieve and share
- Poor continuity of care

THE TURNING POINT: GOVERNMENT ACTION

Ayushman Bharat Digital Mission (ABDM)

- Launched in September 2021
 - Implemented by National Health Authority
 - Under Ministry of Health & Family Welfare
- Aim:** Integrated and interoperable digital health system

THE CORE: ABHA HEALTH ID

- ABHA = Ayushman Bharat Health Account
- Unique digital health identity
- Links medical records securely
- Voluntary, free, consent-based

HOW IT WORKS

1. Citizen creates ABHA
2. Health records generated digitally
3. Records linked to ABHA
4. Patient gives consent
5. Doctor accesses records

HOW IT IS GOING: CURRENT IMPACT

- ~ 80 crore ABHA accounts created
- ~ 67 crore records linked
- ~ 4.1 lakh facilities registered

WHY IT MATTERS

- Easy access to medical history
- Better clinical decision-making
- Improved health system planning

HOW IT GOES FORWARD

- Telemedicine integration
- Rural digital expansion
- Stronger data privacy

SOURCES

- <https://www.mohfw.gov.in/>
- <https://nha.gov.in/>
- <https://www.digitalth.gov.in/>
- <https://www.india.gov.in/>

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From Paper to Platform: India's Digital Health Transformation

Leveraging Digital Platforms for Efficient, Accessible, and Integrated Public Health Systems



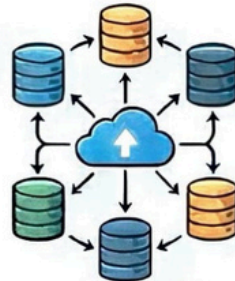
"Digital Undivided"



Paper Records



Digitization
Converting physical records into electronic formats to ensure data portability and storage



Integration
Connecting disparate digital data sources into a unified health information network



Analytics
Processing integrated data to identify trends, patterns, and health insights



Decision Support
The final stage where data insights are used to guide clinical and administrative decision-making

KEY DIGITAL HEALTH PLATFORMS



ABHA (Ayushman Bharat Digital Mission)
Provides a Universal Health ID to patients for seamless health record access across the country



eSanjeevani Telemedicine
A national platform enabling remote clinical consultations and healthcare access



Integrated Health Information Platform
A primary tool focused on real-time disease surveillance across the nation



Reproductive & Child Health (RCH)
Specialized platform for disease surveillance and health tracking for mothers and children



HMIS (Health Management Information System)
The digital architecture managing overall hospital information and health data reporting

APPLICATIONS AND IMPACT



Disease Surveillance & Early Warning
Monitoring health trends to detect and respond to outbreaks before they escalate

Hospital Information
Streamlining facility management and patient flow through integrated data



Data-driven actions
Using real-time metrics to inform public health interventions and policy

Cost-effective care
Reducing systemic waste and optimizing resource allocation through digital efficiency



BENEFITS OF DIGITAL HEALTH



Reduced Delays
Faster access to records and streamlined workflows lead to quicker patient care



Improved Outcomes
Enhanced data accuracy and accessibility lead to better clinical results for patients



Data-driven Actions
Ensuring that public health responses are based on evidence and real-time statistics



Cost-effective Care
Leveraging digital scale to provide high-quality care while minimizing financial overhead

ATTRIBUTION AND TEAM

MyTeam: Dr (Maj) Preetham KS Gowda, Junior Resident, Community Medicine, AFMC.

IPHI & Team



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Assistant Coordinators
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Dr. Nanda Kumar
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Chairperson
Dr. Annarao Kulkarni
Co-Chairperson
Dr. Krupal Joshi



1 AYUSHMAN BHARAT DIGITAL MISSION- 2021

- 2.HEALTH FACILITY REGISTRY:**
 - Database of all public and private facilities.
- 1.ABHA ID:**
 - unique 14 digit Id
 - Links health records digitally
- 3.HEALTH PROFESSIONAL REGISTRY:**
 - Registry of doctors and health professional.
- 4.PERSONAL HEALTH RECORD APP:**
 - Citizen controlled access of digital record.
- 5. CONSENT MANAGER:**
 - ensures security of data patient authorised data sharing.

73.90 crore ABHA IDS SO FAR...



REGISTER YOURSELF & GET TREATED AT YOUR COMFORT

34 cr consultations Via E Sanjeevani

- ## 2 E SANJEEVANI 2019
- E SANJEEVANI AB-HWC specialist consultation**
HWC- Specialist
 - E SANJEEVANI PATIENT TO DOCTOR online consultation**
e prescription ✓
follow up ✓

3 TELE MANAS- 2022

- for any mental health related issues.
- Talk with counsellor
- specialist consultation

24 LAKH+ Calls so far



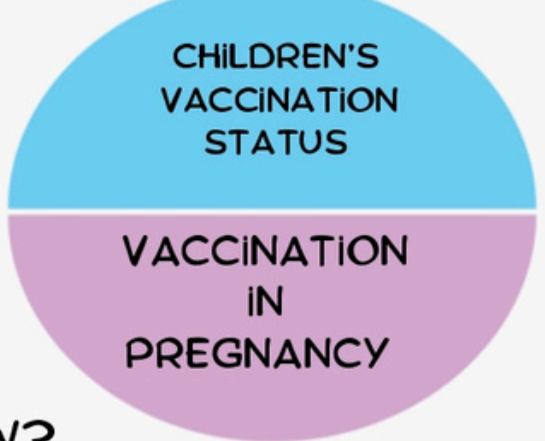
SAY NO TO SUICIDE!

Open
call to **14416**
Worries sorted out at a dial

download and track



4 U WIN PORTAL- 2023



WHAT ARE AVAILABLE ONLINE NOW?

- Consultation
- E Prescription
- Counselling (mental health)
- Vaccination status

STOP SCROLLING REELS
Instead scroll about health
When your health is at your fingertips

Sources:
1. <https://telemanas.mohfw.gov.in/home>
2. <https://abha.abdm.gov.in/abha/v3>
<https://uwin.mohfw.gov.in/home>

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FROM PAPER TO PLATFORM: INDIA'S DIGITAL HEALTH

TRADITIONAL PAPER-BASED HEALTH SYSTEM

INEQUITY IN CARE + INSUFFICIENT DATA FOR PLANNING



CHALLENGES

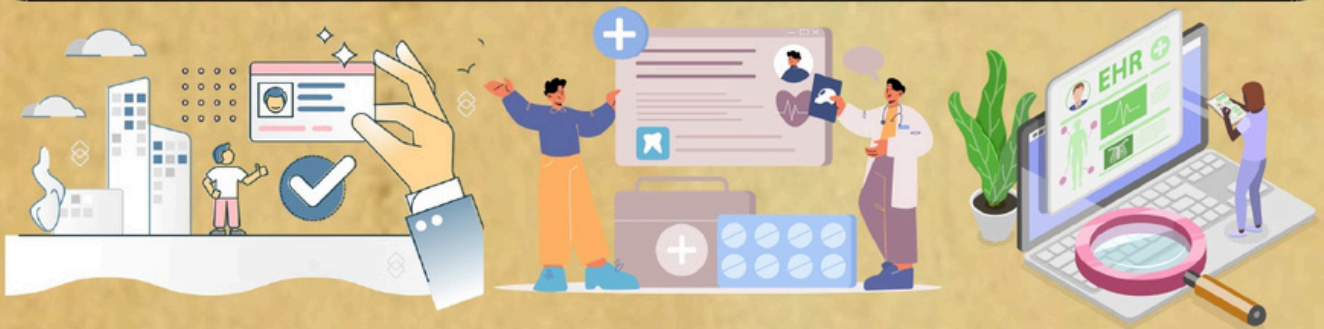
Fragmented medical records
Delayed continuity of care
Rural-urban digital divide
Limited surveillance capability



AYUSHMAN BHARAT DIGITAL MISSION: SYSTEM-LEVEL DIGITAL REFORM

CREATING A UNIFIED DIGITAL HEALTH ARCHITECTURE

ABHA: Digital Health Identity
HPR / HFR: Provider & Facility Registry
Health Data Exchange: Interoperable Health Records



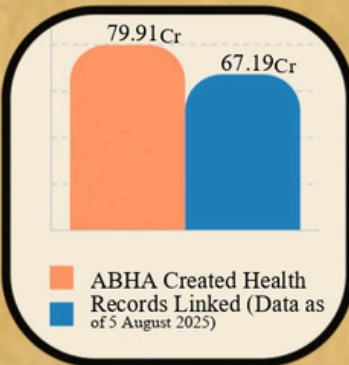
ABDM PLATFORM ERA: INTEGRATED DIGITAL CARE



CARE DELIVERY	DATA ECOSYSTEM	GOVERNANCE
Teleconsultation	Real-time reporting	Standardisation
E-prescriptions	Disease dashboards	Privacy framework
Longitudinal patient records	Facility connectivity	Evidence-based planning

ABHA-ENABLED RISE OF DIGITAL HEALTH ECOSYSTEM

INTERACTIONS TO INSIGHTS: POPULATION IMPACT



Improved continuity of care
Faster outbreak detection
Stronger NCD follow-up

Early NCD care
Disease surveillance
Rural-urban linkage
Evidence-based planning

ABDM: FROM CLINICAL SILOS TO CONNECTED COMMUNITIES

- Strengthens Primary Health Care
- Enables Continuum of Care
- Supports Universal Health Coverage
- Improves Health Equity Facilitates
- Evidence-Based Planning

"...INDIA'S DIGITAL HEALTH ECOSYSTEM NOW INTEGRATES AI TECHNOLOGY FOR SURVEILLANCE, SCREENING, AND TELE-HEALTH.."



Created by: Dr. M. Mohamed Farris Masthan, Final Year Postgraduate, Department of Community Medicine, SBMCH, Chennai

Sources: 1. Update on Ayushman Bharat Digital Mission, Press Information Bureau, Government of India. <https://www.pib.gov.in/PressReleasePage.aspx?PRID=2155449®=3&lang=2>

2. Transforming Healthcare Delivery Through Artificial Intelligence, Press Information Bureau, Government of India. <https://www.pib.gov.in/PressReleaseDetail.aspx?PRID=2227410®=3&lang=2>



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OUR DATA.
OUR HEALTH.
OUR POWER.



INDIA'S DIGITAL HEALTH TRANSFORMATION UNDER - AYUSHMAN BHARAT DIGITAL MISSION



Buidling an Integrated digital health ecosystem for better care and population health

Challenges In Paper based Healthcare

- Fragmented medical records
- Poor continuity of care
- Limited data for planning
- Rural–urban health information gap
- Delayed disease surveillance

KEY COMPONENTS OF ABDM

- **ABHD ID** - Unique digital health identity for every citizen.
- **Health Professional Registry** - Database of verified healthcare providers.
- **Health Facilities Registry** - Directory of healthcare facilities.

Solution: Ayushman Bharat Digital Mission

- ABDM (Launched 2021) - A National initiative to create a Unified Digital Health Infrastructure across India
- Key Objective : Enable secure digital health records and seamless healthcare delivery.



ABHA ID
(e.g.)



AYUSHMAN BHARAT DIGITAL MISSION

DIGITAL HEALTHCARE SERVICES

- Teleconsultation
- E- prescription
- Digital health records
- Real time health data reporting
- Disease surveillance dashboard
- Evidence based health policy planning

PUBLIC HEALTH IMPACT

- Improved continuity of care
- Better NCD monitoring
- Strengthened primary healthcare
- Faster outbreak detection
- Better NCD monitoring
- Evidence based health policy Planning

SUMMARY

“The Ayushman Bharat Digital Mission (ABDM) represents a major step toward transforming India’s healthcare system. By enabling interoperable digital health records, teleconsultation, and real-time data systems, ABDM strengthens continuity of care and supports evidence-based public health planning. This digital transformation will play a key role in achieving Universal Health Coverage in India.”

Created by

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SMIMER Medical College, Surat, Gujarat.

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Dr. Krupal Joshi



INDIA'S DIGITAL HEALTH TRANSFORMATION UNDER — AYUSHMAN BHARAT DIGITAL MISSION



Consult the AI, Call the MD.

Don'ts X

Scenario 1:

- "I have chest pain."
- Could be anxiety, muscle strain, or indigestion.
- Person: Antacids. Goes to sleep.



Reality: Early heart attack

DON'T rely only on AI

- ✗ Chest pain → "Acidity"
- ✗ Worst headache → "Migraine"



Sources: MO Digital Health Guideline 2021
Lancet Digital Health 2025
Ayushman Bharat Digital Mission (ABDM)

Do's ✓

Clarifying Lab Results

- Person: My lab report says I have "Microcytic Anemia". What does that mean in plain English?

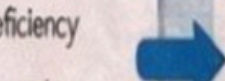
UNDERSTANDING MICROCYTIC ANEMIA

NORMAL RED BLOOD CELLS

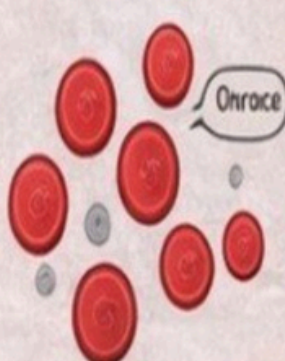
Lab test

- Iron deficiency
- Thalassemia
- Chronic disease

Iron 100
Vitamin B12 200
Folate 10



MICROCYTIC ANEMIA



Oxygen 80 Hemoglobin 200

Reality: Anxiety Reductions Through Health Literacy

✓ DO ≠ Rely only on AI

- ✓ Heart attack → Migraine
- ✓ Subarachnoid hemorrhage →

PUBLIC HEALTH MESSAGE

- ✓ Health education
- ✓ Understanding lab reports



Created by: Dr. Aditya Seth

PGY-1 Resident: MD Community Medicine
SGRRIMHS, Dehradun

For more information visit:
<https://lapsm.org>

IPHI TEAM



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Dr. Nidhi Patel



Digital Health



Core Concept

Harnessing the power of digital technologies to accelerate global well-being

A TRANSFORMATIVE APPROACH

Challenge:

Moving from "siloes" or fragmented systems

Solution:

Implementing shared digital platforms that integrate human, animal, and environmental data

The Four Pillars of Enablement



Global Monitoring

Protecting health security through shared data



Country Programs

Data-driven workflows to improve care



Digital Enablement

Modernizing tools to collect and analyze data



Common Infrastructure

Secure internet and ICT for health workers

Innovation & Impact

- **Safe AI** for public health
- **Telehealth** and virtual care access
- **mHealth** for self-monitoring (e.g., blood pressure)
- **HMIS**

Result

Boosting digital health can help prevent millions of deaths from noncommunicable diseases

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For more information

https://www.who.int/health-topics/digital-health#tab=tab_1

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YES ! WE CAN END TB

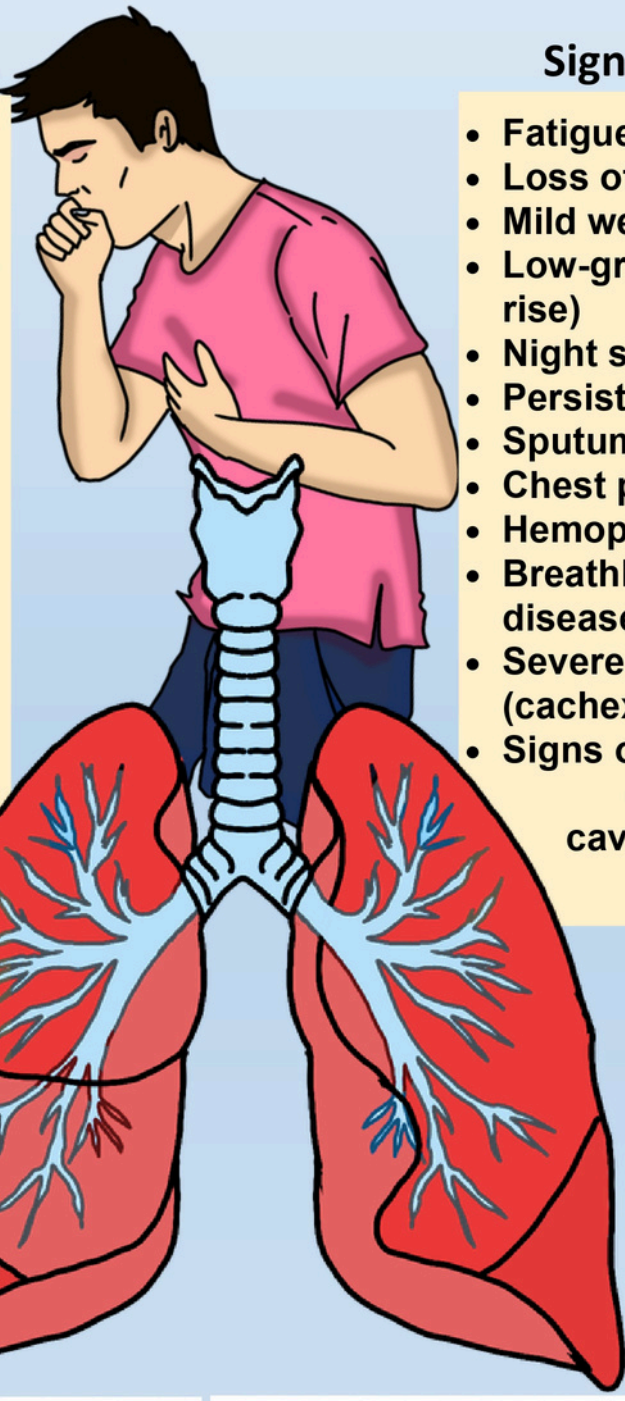


LED BY COUNTRY, POWERED BY PEOPLE

24 TH MARCH- WORLD TB DAY

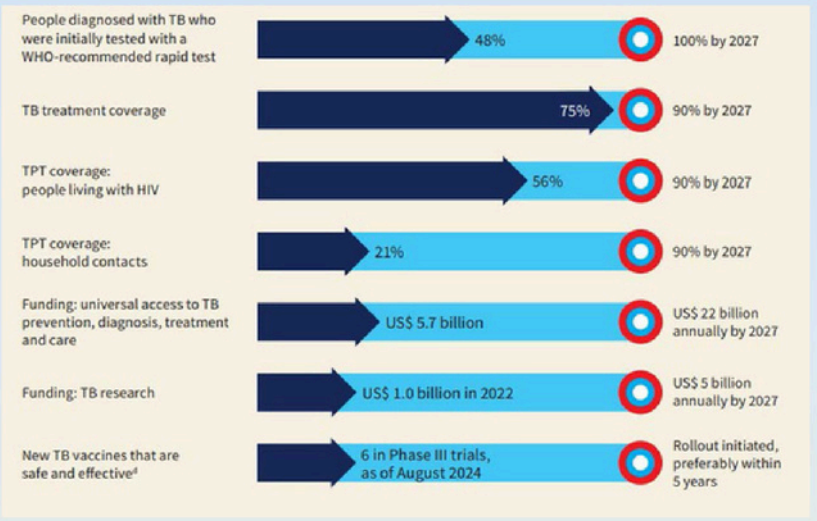
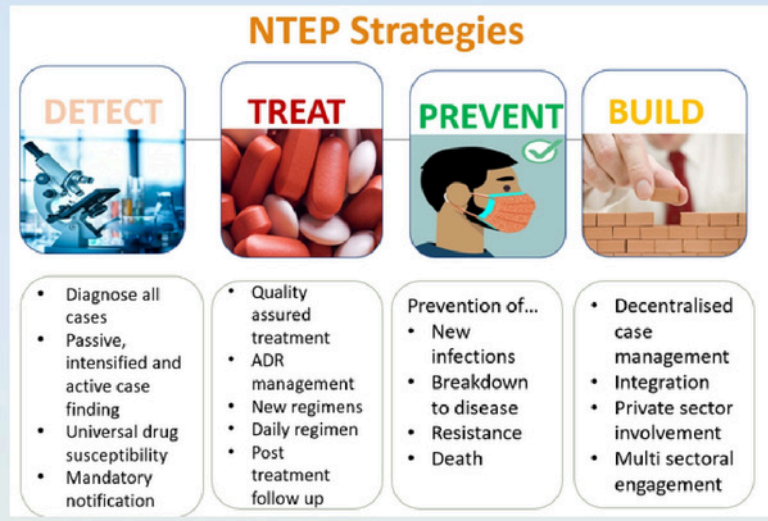
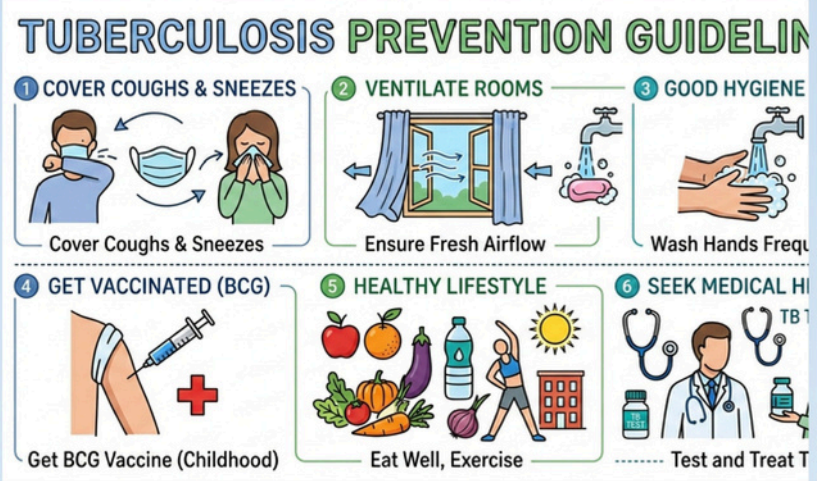
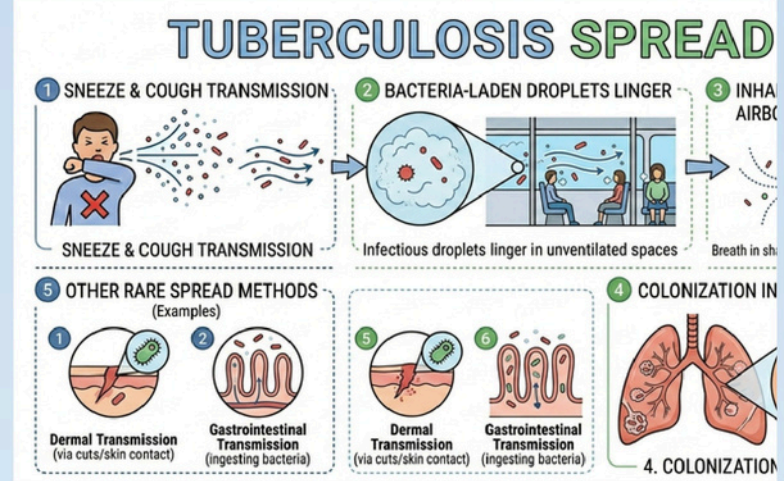
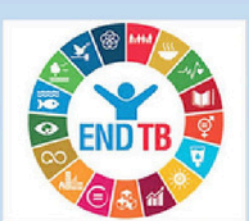
Risk Factors for Tuberculosis

- **Mycobacterium tuberculosis infection** (primary and essential cause)
- **Airborne droplet transmission from an active pulmonary TB patient**
- **HIV infection** (strongest risk factor for progression to active TB)
- **Diabetes mellitus**
- **Overcrowding and poor ventilation**
- **Low socioeconomic status**
- **Immunosuppressive therapy** (steroids, chemotherapy)
- **Smoking**
- **Alcohol abuse**
- **Malnutrition**
- **Chronic kidney disease**
- **Extremes of age** (children and elderly)



Signs and Symptoms

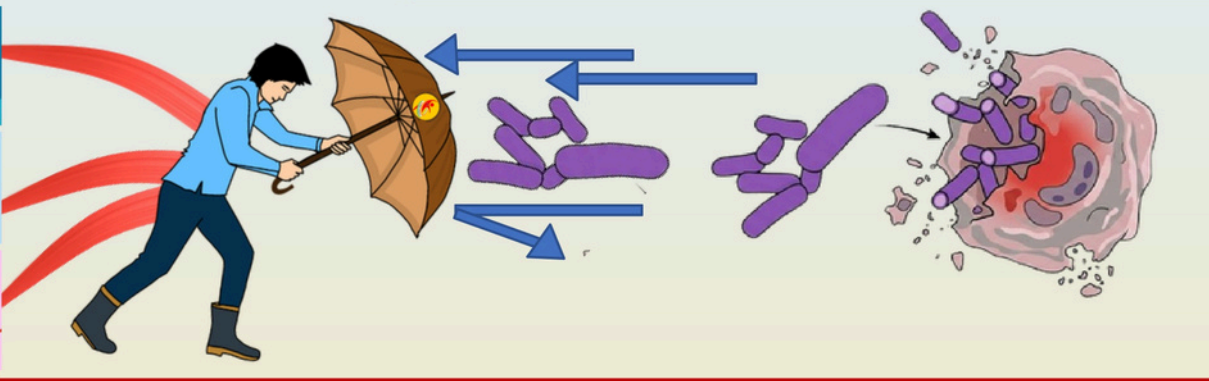
- **Fatigue and malaise**
- **Loss of appetite (anorexia)**
- **Mild weight loss**
- **Low-grade fever** (evening rise)
- **Night sweats**
- **Persistent cough** (>2 weeks)
- **Sputum production**
- **Chest pain**
- **Hemoptysis**
- **Breathlessness** (advanced disease)
- **Severe weight loss** (cachexia)
- **Signs of complications** (pleural effusion, cavitation, respiratory distress)



PRADHAN MANTRI TB MUKT BHARAT ABHIYAN

CLICK HERE TO JOIN AS A **Ni-kshay Mitra**

Nikshay Poshan Yojar
Nutritional Support to TB patients



Created by-

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References :

- National Tuberculosis Elimination Programme (NTEP) – Documents [Internet]. Available from: <https://ntep.in/Documents>. Accessed on 3 Mar 2026.
- Rajesh Kumar M, et al. A comprehensive review of tuberculosis: epidemiology, diagnosis, treatment, prevention, and research. *Int J Sci Res Sci Eng Technol.* 2025 Jul–Aug;12(4):129–154.



One Health



Interconnected Health

Human, animal, and environmental health are closely linked.

Growing Relevance

Changing interactions among people, animals, and ecosystems increase health risks.

Integrated Action

OneHealth promotes collaborative, multisectoral solutions to prevent and control health threats.



Impact of Past, Present & Future

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For more information

<https://www.cdc.gov/one-health/about/index.html>

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“HANDS THAT PROTECT THE CITY DESERVE PROTECTION”



EFFECTIVENESS OF A SOAP PAPER-BASED HAND HYGIENE INTERVENTION IN REDUCING OCCUPATIONAL HEALTH RISKS AMONG SANITARY WORKERS IN SOUTH INDIA: A PRE-POST INTERVENTIONAL STUDY

WHY THIS STUDY?

- Sanitary workers are a high-risk occupational group due to:
- Continuous exposure to waste & contaminated environments
 - Inadequate hygiene infrastructure
 - Frequent skin infections & communicable diseases
 - Poor hand hygiene practices
- Hand hygiene is a simple, cost-effective, evidence-based prevention strategy



OBJECTIVES

- Among sanitary workers in Greater Chennai Corporation:
- ✓ Evaluate impact of hand hygiene awareness intervention using Soap Paper Sheets.
 - ✓ Assess reduction in occupational health risks post-intervention

METHODOLOGY

Study Design: Pre-Post Interventional Study
 Study Period: February 2025 – April 2025
 Sample Size: 72 participants
 Sampling Method: Purposive Sampling

Inclusion Criteria:

- Age 18–60 years
- Engaged in waste handling/cleaning duties
- Provided informed consent

Study Procedure

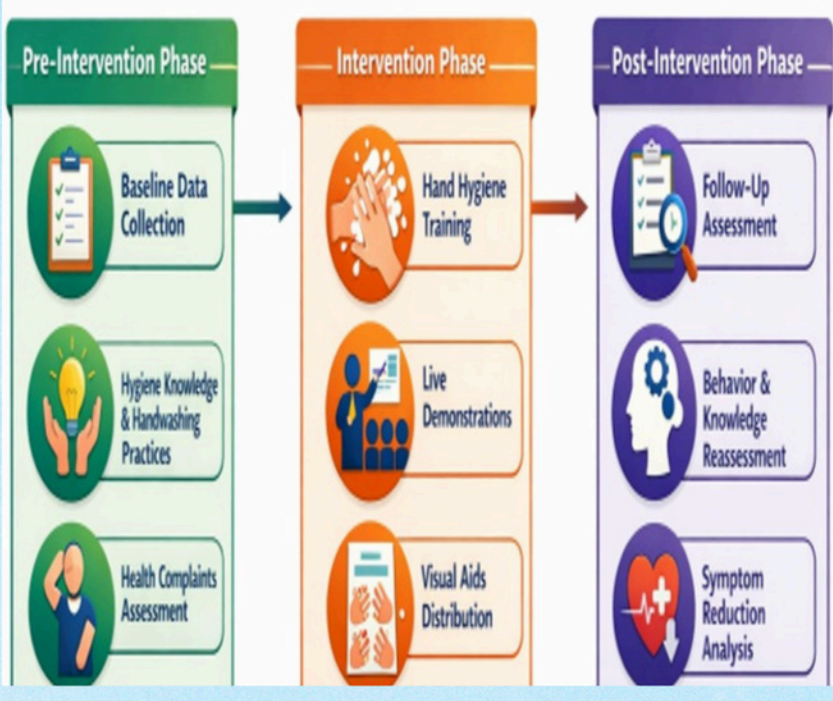


Table 1: Socio Demographic Details of the Participants (n=72).

Characteristic	Category	Frequency (n)	Percentage (%)
Age (years)	Mean ± SD (Range)	41.3 ± 9.2 (23–58)	
Gender	Male	49	68.1
	Female	23	31.9
Educational Qualification	No formal education	11	15.3
	Primary education	33	45.8
	Secondary education	28	38.9
Years of Experience	< 5 years	22	30.6
	5–10 years	30	41.7
	> 10 years	20	27.7

Table 2: Impact of Hand Hygiene Intervention on Key Behavioural Parameters (n=72).

Parameter	Pre-Intervention (Mean ± SD)	Post-Intervention (Mean ± SD)	Mean Difference	% Improvement	t-value	p-value
Frequency of Handwashing (per day)	3.2 ± 1.1	6.8 ± 1.3	+3.6	+112.5%	9.21	<0.001
Use of Soap paper sheets During Handwashing (%)	58.3 ± 10.4	92.5 ± 8.7	+34.2	+58.6%	10.35	<0.001
Compliance to WHO 5 Moments (%)	45.6 ± 12.2	84.2 ± 10.1	+38.6	+84.6%	8.76	<0.001

Table 3: Observed Occupational Health Symptoms Before and After Intervention (n=72).

Health Symptom	Prevalence Pre-Intervention (n, %)	Prevalence Post-Intervention (n, %)	p-value
Skin Irritation	31 (43.0%)	12 (16.7%)	0.002
Respiratory Issues	24 (33.3%)	9 (12.5%)	0.004
Gastrointestinal Discomfort	18 (25.0%)	6 (8.3%)	0.006
Hand/Finger Infections	27 (37.5%)	10 (13.9%)	0.001

CONCLUSION

- A simple, low-cost intervention produced measurable behavioral change
 - Soap paper improved accessibility and compliance
 - Structured training translated knowledge into practice
 - Scalable model for municipal and occupational health programs
- Protecting sanitation workers strengthens community infection prevention.

PUBLIC HEALTH IMPLICATIONS

Integrating structured hand hygiene training using soap paper into municipal policies can:

- Improve worker safety
- Reduce disease transmission
- Enhance productivity

• Strengthen public health systems

Created by:

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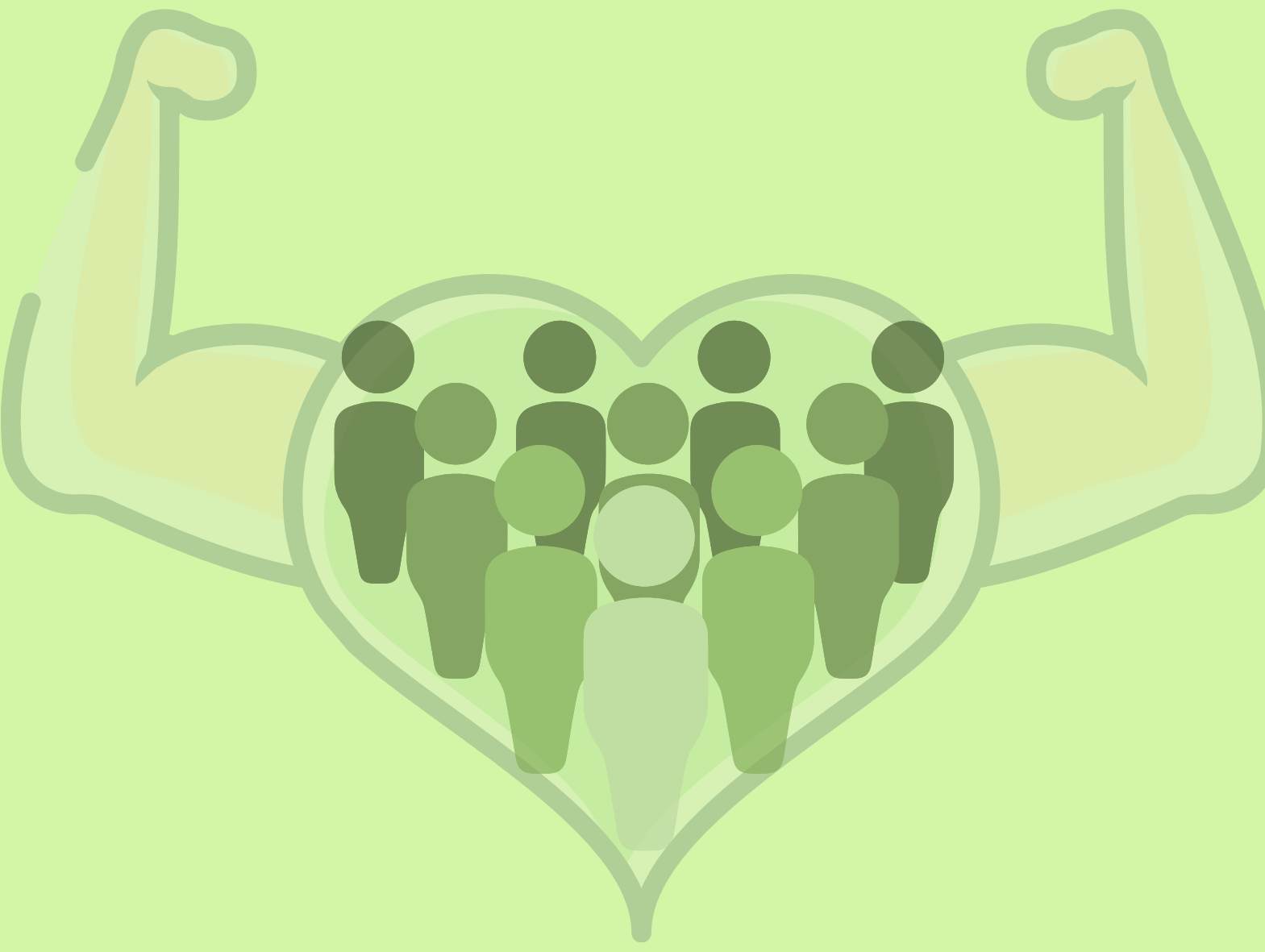


Highlights how infographics can educate the public about the health system and its services

Represents use of infographics to enhance collaboration and communication between public health professionals and the community

Tagline for this initiative

Represents the role of infographics in making public health data clear and simplified



Dear IAPSM Members,

“ Thank you for taking the time to explore our latest Public Health Infographics Edition. It is gratifying to know that these visual resources contribute to enhancing public health knowledge within our IAPSM community.

Your continued support and engagement with the Public Health Infographics initiative are truly appreciated. Our aim is to consistently improve the quality and relevance of our content, ensuring it serves as a useful resource for all. If you have any suggestions, feedback, or ideas for future infographic topics, we encourage you to reach out to us at iapsminfographics.iphi@gmail.com. We welcome your insights and are eager to incorporate changes that can enrich your experience.

Together, let's make this initiative even more impactful for our community.”



Best Regards,
Team IAPSM Public Health Infographics

CONTACT US



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MORE INFO



Visit iapasm.org or scan for more information