Enrolment Procedure for MvPI



URL: https://adrmsipc.in/adrms/index.html

Account Type Programme Coordinator



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Prerequisites for Enrollment Procedure as MDMC under MVPI

Institution Details:

- Institute Name
- Institute Address

Key Personnel Information:

Head of Institution:

- Name
- Designation
- Contact Information

Coordinator:

- Name
- Designation
- Contact Information

Deputy Coordinator:

- Name
- Designation
- Contact Information

Logistics & Infrastructure Facilities:

- Name of Department functioning as MDMC: e.g. Biomedical, Quality, Pharmacology Computer & Logistic Facilities available for MvPI
- Workplace allocated for MvPI activities



Steps to register in ADRMS as Medical Device Monitoring Centre (MDMC)



Programme coordinator in the Materiovigilance Programme of India(MvPI) is responsible for overseeing the monitoring, reporting, and management of adverse events related to medical devices to ensure patient safety and regulatory compliance.



How to create new account in ADRMS?



Require south

Step 1: Click on "Sign up Here" to create new account

How to create new account in ADRMS? Contd.







New password must be 8-20 characters long, contain at least one lowercase letter, one uppercase letter, one number, and one special character(~!@#%^&()_+?:).

How to create new account in ADRMS? Contd.

Create new ac	count	×
Date of birth		
Day 🗸	Month ~	Year 🗸
Gender		
Select		~
Mobile no.		
One Time Passw	vord	GET OTP
	Back	
	Create new accoun	t
	<u>u</u>	





How to Sign In?







How to Setup Profile of Programme Coordinator?



ADRMS - Indian Pharmac	copoeia Commission		
💧 Home 🛛 🛢 Master 🗸			C Search
Dashboard AMC Application	MDMC Application	Add Institute Request	

Programme Coordinator Dashboard

Initially, dashboard of Programme Coordinator contains "AMC application", "MDMC application" and "Add Institute Request".

How to Setup Profile of Programme Coordinator? Contd.





How to add Institute?



ADRMS - Indian Pharmacopoeia Commission		PROGRAMME COORDINATOR
💧 Home 🛛 🖷 Master 🗸		Search
Dashboard AMC Application MDMC Application	Add Institute Request	

Step 1: Click on "Add Institute Request". The form to add Institute will appear.

How to add Institute? Contd.

ADRMS - Indian Pharmacopoeia Commis	ssion			PROGRAM	IME COORDINATOR	Step 2: Enter the following de
Home 📕 Master 🗸				Q Search		
d Institute Request						
stitute name		Institute type Select	~	Institute category Select	~	Write all details and click on Save. In Request list saved Institute Request wi
Address		0/150 Pin code				add.
District	State		Country			
Phone no. Ema	v li address	~			~	
()						Write Institute name, Address, Pin code, Phone
Cancel					Save	no., & Eman address.
show 10 entries Excel PDF				Search:		
INSTITUTE NAME II TYPE II C	CATEGORY DISTRICT	11 STATE 11 COUNTRY	CREATED	ON 11 STATUS		
	No d	ita available in table				
Step 3: Click	on "Save	" to save th	ie Inst	titute. IP	C-	Select Institute type, Institute category, District State & Country.

In the "Institute Type" section, there are three options available. If you select "hospital" as the institute type, only the hospital-related details will be enabled.

RCUHA SUA

Submission Process



Institute Request

Show 10 entries Excel F	PDF							Search:	
INSTITUTE NAME	†↓ ТҮРЕ	11 CATEGORY	DISTRICT	1↓ STATE	14 COUNTRY	11 CREATED ON	11 STATUS	t1	11
-	Medical College	Government	Ghaziabad	Uttar Pradesh	India	03/18/2025	Approval Pending	/ 1	

After submitting the **Institute Request** to NCC-MvPI, email the screenshot of the **approval pending** (as shown above) to <u>mvpi-ipc@gov.in</u>. Once you receive the acknowledgment from NCC-MvPI, you will be able to proceed with adding the MDMC application.



Click on "MDMC Application", to enrol the Institute as MDMC.

सत्यमेव जयते

In application form there are five sections to be filled which are as follows: *All fields marked with an asterisk * are mandatory.*





I. Institutional information:

М

ADRMS - Indian Pharmacopoeia Commissio	on		
Home			
DMC Application			
I. Institutional information			on THIS PAGE - I. Institutional information
Name of the institution Add Institu	te Request	Name of the hospital affiliated Add Institute Request	- II. Logistic/infrastructural facilities to function as a Medical Device Monitoring
Select	~	Select	Center (MDMC) under MvPI - III. Technical information
institution type		Institution category	- IV. Contact details - V. Upload signature of head of the
Select	~	Select ~	institution
Distance between hospital & institution in km		No. of beds in the hospital	
			All fields are mandatory
Patient statistics (Inpatient/ Outpatient)		Total no. of departments	

Enter the following details

- Name of the institution
- Name of hospital affiliated



II. Logistic/ Infrastructural facilities to function as a MDMC under MvPI:



	tion as a medical bevice monitoring center (mbino)	
lame of department to function as an MDM	Total no. of faculties in the dep	artment
Vhether workplace is allocated for MvPI	Whether computer & logistic facilities available for M	vPI

Enter Name of department to function as an MDMC contain letters, numbers, spaces and special characters (./()-), and must not exceed 100 characters length.

Enter Total Number of faculties in the department

Whether computer & logistic facilities available for MvPI: Select "Yes" or "No"

Whether workplace is allocated for MvPI: Select "Yes" or "No"





I. Technical information			All fields are mandatory
a. Details of the propos	ed coordinator		
Name			
Designation	Qualification		
Total experience in yr			
Experience in materiovigila		0/500	
	ince	0,000	
Details of training/ CME on	MvPl attended in last 2 years	0/1000	

Enter "Details of the proposed coordinator"

Enter "Designation, Qualification, Total experience in year, Experience in Materiovigilance and Details of training/CME on MvPI attended in last 2 year".

III. Technical information (b. Details of the proposed deputy coordinator):

Name	Designation	
Qualification	Total experience in y	r
Experience in materiovigilance		0/50
Details of training/ CME on MvPI attended	l in last 2 years	0/100

Enter "Details of the proposed deputy coordinator"

Enter "Designation, Qualification, Total experience in year, Experience in Materiovigilance and Details of training/CME on MvPI attended in last 2 year"



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IV. Contact details (a. Principal/ Dean/ Medical Superintendent/ In charge):

/. Contact details	All fields are mandatory
a. Principal/ Dean/ Medical Superintendent/ Incharge	
Designation Name	
Select ~	
Mobile no. Email address	

Enter contact details of "Details Principal/ Dean/ Medical Superintendent/ In charge "

Enter "Designation, Mobile Number and Email Address"

IV. Contact details (b. Coordinator): Write all details.

Desimation	News		
Designation	Name		
Mobile no	Email address		
	Emanadoress		

Enter the "Contact details of Coordinator and Deputy Coordinator"

IV. Contact details (c. Deputy Coordinator): Write all details.

Designation	Name	
Mobile no.	Email address	



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IV. Contact details (d. Complete postal address of proposed MDMC):



undergo "terms of reference" and click on "We have undergone terms of reference"

Finally, click on "Next - Preview & submit" to submit the application. IPC-MvPI will approve the request.





Submission Process



MDMC Application

MDMC Application - View

FORM NO.: ADRMS/MvPI/MDMC/2024/142, SUBMITTED ON: 09 December 2024, STATUS:
Pending for approval, DOWNLOAD:

After submitting the **MDMC Application** to NCC-MvPI, email the screenshot of the **approval pending** (As shown above) to <u>mvpi-ipc@gov.in</u>.. Once you receive the acknowledgment from NCC-MvPI, you can start reporting through ADRMS.

Your Institute will be approved as MDMC as per the Procedure to accept the institution/Hospital as MDMC on Page no. 22.

Procedure to accept the institution/Hospital as MDMC

As part of the evaluation process for recognizing your center as a Medical Device Adverse Event Monitoring Centre (MDMC) under the Materiovigilance Programme of India (MvPI), the following procedure will be followed:

- Verification of the details provided during registration.
- Assessment of the infrastructure and resources at the hospital/institute to support the MvPI.

Your center is expected to demonstrate active participation in MvPI by fulfilling any one or more of the following criteria:

- 1. Submission of medical device adverse event (MDAE) reports—quality, quantity, and frequency will be assessed.
- 2. Conducting training and promotional activities to create awareness about MvPI at your institution or in your region.
- 3. Any other outstanding activities that contribute towards the objectives of MvPI.
- Upon successful evaluation based on the deliverables submitted in any one of the above areas, your center will be formally recognized as an MDMC.
- A progress report detailing your activities must be submitted to the MvPI for final assessment and approval.

How to Sign Out?



Click on "Sign out" to sign out of your account



You have successfully signed out

Thank you for using our services. Please share your valuable feedback.

Share feedback \rightarrow

← Take me home

Contact Information



If you have any queries, feel free to contact us through Email – <u>mvpi-ipc@gov.in</u>,<u>shatrunjay.ipc@gov.in</u> Phone – 0120-2783400, 2800500