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Dr. Ulhas Patil Medical O. T. FUMIGATION

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College & Hospital, Jalgaon (Kh.) REGISTER

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College & Hospital, Jalgaon (Kh.)

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Dr. Ulhas Patil Medical College & Hospital

Jalgaon - Bhusawal Road. N. H. No. 6, Jalgaon Khurd., Jalgaon - 425309 (M.S.) Ph.: 0257 - 2366722

Central Clinical Laboratory

DEPARTMENT OF MICROBIOLOGY

Sr. No.	28	Lab No.	OT/28/21	Date		14/10/2021
Hospital Nam	e:	Godavari Hospita	I Medical College	Jalgaon kh.	- Tray	
Department:		OT	OT No. /Wa	The state of the s	TOT	
Specimen:		O. T. Swabs	Laboratory	Investigation	An	aerobic culture

O.T SWAB - CULTURE REPORT

Specimens -

- 1. Swab from OT Table
- · 2.Swab from OT Trolly
- 3.Swab from OT Ground Floor
- 4.Swab from OT Wall
- 5.Swab from OT Phaco
- 6.Swab From OT Microscope

Total no. of specimen- 06

Laboratory investigation: Anaerobic culture

Report: Negative for the Clostridium tetani and other Clostridial group of organism.

Positive for (Table, Wall, Microscope)

Note: Fumigation not satisfied, repeat the procedure and send the OT swab sample again

Dr. Ulhas Patil Medical College

& Hospital, Jalgaon Kh.

18.10.2021

Date of Reporting

Duty -Incharge

Dept. Of Microbiology Dr.Ulhas Patil Medical College & Hospital, Jalgaon Kh.

Dr. Ulhas Patil Medical College&Hospital, Jalgaon KH

Phone no. (0257) 3058557 Fax: 0257-3058548

DEPARTMENT OF MICROBIOLOGY

O.T Swab -culture Report

Sr.no. 05 lab.no 03 Hospital name Dupinc 97.

Date 07 09 4

DEPARTMENT 07 Ward/O.T NO. 14014

Specimens-

1) Swab from Bed 2) Swab from Medicine Locker 3) Swab from Monitor Stand 4) Swab from Cardiac Table 5)Swab From Floor

Total no. of specimen-... 7. x.14=98
Laboratory investigation: Angerobic... Culture

Report:

All specimens are Negative for the clostridium tetani and other clostridial group of organism.

Date: 18/09/4

Dr. Ulhas Path Medical College & Hospital, Jalgaon Kh.

Dr. UIHAS PATIL MEDICAL COLLEGE&HOSPITAL, JALGAON KH

Phone no.(0257)3058557 Fax:0257-3058548

DEPARTMENT OF MICROBIOLOGY

O.T Swab -culture Report

Sr.no. lab.no 03 Hospital name DupmcHlH.
Date 10 02 2020
DEPARTMENT OT Ward/O.T NO. 11014
Specimens- 1) Swab from Bed 2) Swab from Medicine Locker 3) Swab from Monitor Stand 4) Swab from Cardiac Table 5)Swab From Floor
Total no. of specimen TXL4=98 Laboratory investigation: Anci. e. 20bl.c. culture

Report:

All specimens are Negative for the clostridium tetani and other clostridial group of organism.

Date:- 17/02/2020

Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.

Dr. UIHAS PATIL MEDICAL COLLEGE&HOSPITAL ,JALGAON KH

Phone no.(0257)3058557 Fax :0257-3058548

DEPARTMENT OF MICROBIOLOGY

O.T Swab -culture Report

Sr.nolab	.no	03	Hospit	al name	DUP	nc4.	8 H.
Date 12 1091							
DEDARTMENT	07	Ward	/O T NO	110	14		

Specimens-

1) Swab from Bed 2) Swab from Medicine Locker 3) Swab from Monitor Stand 4) Swab from Cardiac Table 5)Swab From Floor

Total no. of specimen- 7 + 14=98

Laboratory investigation: Analogobic culture.

Report:

All specimens are Negative for the clostridium tetani and other clostridial group of organism.

Date: 19/04/2020

Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.

GODAVARI FOUNDATION'S

Dr. ULHAS PATIL MEDICAL COLLEGE& HOSPITAL, JALGAON KH

Phone no.(0257) 3058557 Fax: 0257-3058548

DEPARTMENT OF MICROBIOLOGY

O.T Swab - culture Report

Sr. no. 20 lab .no .. 03 Hospital name DUPMC4H

Date 12/2/19

DEPARTMENT DT Ward/O.T.NO. 1 HO 9

Specimens- 1) Swab from wall 2) Swab from operation table 3) Swab from O.T floor 4)Swab from lamp 5) Swab from instrument trolley 6) Swab from suction machine 7) Boyle's apparatus 8)any other

Total no. of specimen $0.7 \times 9 = 6.3$

Laboratory investigation An alobic culture.

Report:

All specimens are Negative for the clostridium tetani and other clostridial group of organism

& Hospital, Jalgaon Kh.

Date:-19/2/19

Dr. UIHAS PATIL MEDICAL COLLEGE&HOSPITAL, JALGAON KH

Phone no.(0257)3058557 Fax :0257-3058548

DEPARTMENT OF MICROBIOLOGY

O.T Swab -culture Report

Sr.nolab.no	03	Hospital name	DUPMCH 8 H.
Date 7 - 09-20	019		
DEPARTMENT	Ward/	O.T NO. 1109)

Specimens-

1) Swab from Bed 2) Swab from Medicine Locker 3) Swab from Monitor Stand 4) Swab from Cardiac Table 5)Swab From Floor

Total no. of specimen-... 7 ×09 = 63

Laboratory investigation: ... 9 9 embic cultible.

Report:

All specimens are Negative for the clostridium tetani and other clostridial group of organism.

Date: 14 09 2019

Dr. Ulhas Patik Medical College & Hospital, Jalgaon Kh.

Dr. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL, JALGAON KH.

Phone No. (0257) 3058557 Fax: 0257 – 3058548 DEPARTMENT OF MICROBIOLOGY O. T. Swab- culture Penert

O.T. Swab- culture Report



Date. 7/2/18

Sr.No. 03/18 Lab. No. 03 Hospital Name. DUPMC&H

Department....

Ward / O.T. No. 150.9.....

Specimens

- 1) Swab from wall 2) Swab from operation table 3) Swab from O.T. floor
- 4) Swab from lamp 5) Swab from instrument trolley 6) Swab from suction machine
- 7) Boyle's apparatus 8) any other

Total no. of specimen. 7x09=63

Laboratory investigation. once arbic culture

Report:

All specimens are Negative for the *clostridium tetani* and other clostridial group of organism.

Date. 14/2/18

JAL CAON KH

Duty in charge

Dr. Ulhas Path Medical Golleg & Hospital, Jalgaen Kh.

Dr. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL, JALGAON KH.

Phone No. (0257) 3058557 Fax: 0257 - 3058548

DEPARTMENT OF MICROBIOLOGY

O.T.Swab-culture Report

Sr.No.9.45 Lab No./hospital name DUPMC) GH ,Date. 09/18
Department 0 T Ward/OT no 1 70 9
Specimens –1) Swab from wall 2) Swab from operation table 3) Swab from O.T.floor 4) Swab from lamp 5) Swab from instrumental trolley 6) Swab from suction machine 7) Boyle's apparatus 8) any other
Total no. of specimen. 779 763 Laboratory investigation. Anaemobic CVIFUTC
Report:
All specimens Negative for the <i>Clostridium tetani</i> and other Clostridial group of organisms.
Date 16/9/18 Manufacture of the dical College [ALCADY KII] Sar Ulhas Path Medical College & Hospital, Jalgaon Kh.

Dr. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL, JALGAON KH.

Phone No. (0257) 3058557 Fax: 0257 - 3058548

DEPARTMENT OF MICROBIOLOGY

O.T.Swab-culture Report



Department
Specimens –1) Śwab from wall 2) Swab from operation table 3) Swab from O.T.floor 4) Swab from lamp 5) Swab from instrumental trolley 6) Swab from suction machine 7) Boyle's apparatus 8) any other
Total no. of specimen. $7 \times 9 = 63$.
Laboratory investigation Pragrobic Coulture.
All specimens Negative for the Clostridium tetani and other Clostridial group of organisms.
Date 6 10 20 (7) Dr. Ulhas Paul Medical College & Hospital, Jalgaon Kh.

Ovuavani rvunuativn s

Dr. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL, JALGAON KH.

Phone No. (0257) 3058557 Fax: 0257 - 3058548

DEPARTMENT OF MICROBIOLOGY

O.T. Swab- culture Report (Before)

Junization Date. 14/02/17

Sr.No. 36/17 Lab. No. 36 Hospital Name. Dr. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL

Department...... Ward / O.T. No. 01 To 09

Specimens

- 1) Swab from wall 2) Swab from operation table 3) Swab from O.T. floor
- 4) Swab from lamp 5) Swab from instrument trolley 6) Swab from suction machine
- 7) Boyle's apparatus 8) any other

Total no. of specimen. $07 \times 9 = 63$

Laboratory investigation. Anaerobic culture

Re rt:

All specimens are Negative for the *clostridium tetani* and other clostridial group of organism.

Date. 27/02/17

Dr. Ulhas Patil Medical College & Hospital, Julgaon Kh.

Dr. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL ,JALGAON KH.

Phone No.(0257)3058557 Fax:0257-3058548

Central Sterile Supply Department

Specimens (CSSD) Culture Report Form

TO,

The head of department

Dept. of Microbiology

DUPMC & H. Jalgaon

Subject: Specimens regarding sterilization control.

Respected Sir,

After sterilization process Dt ... 1.022..., I am sending following specimens as controls of sterilization procedure .

& Hospital, Jalgaon Kh.

Thanking you.

- A. Swab from artery forceps.
- B. Swab from artery Scissor.
- C. Swab from tooth forceps.
- D. Piece of Gauze pad.
- E. Piece of cotton bandages.
- F. Biological indicator strip.

Date: 7 022

You're sincerely

Duty in charge (CSSD)

Dr. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL, JALGAON KH.

Phone No. (0257)3058557 Fax: 0257-3058548

Department of Microbiology

Specimens (CSSD)-Culture Report

To, The In Charge

CSSD,

DUPMC& H, Jalgaon.

Subject: Sending Culture report of Specimen

Concer with sterilization controls.

Respected sir,

Following Specimens Processed for Anaerobic CULTURE On. 2092

Dr. Ulhas Pa

A.Swab from artery forceps - No Bacterial Growth.

B. Swab from artery Scissor-

No Bacterial Growth.

C. Swab from tooth forceps-

No Bacterial Growth.

D. Piece of Gauze pad-

No Bacterial Growth.

E. piece of cotton bandages -

No Bacterial Growth.

F. Biological indicator strip-

No Bacterial Growth.

& Hospital, Jalgaon Kh.

Date: 9109/24

Duty in charge

Department of Microbiology

Dr. ULHAS PATIL MEDICAL COLLEGE &HOSPITAL, JALGAON KH.

Phone No. (0257)3058557 Fax: 0257-3058548

Department of Microbiology

Specimens (CSSD)-Culture Report

To, The In Charge

CSSD,

DUPMC& H, Jalgaon.

Subject: Sending Culture report of Specimen

Concer with sterilization controls.

Respected sir,

Following Specimens Processed for Aerobic CULTURE On. 21 102 2020

& Hospital, Jalgaon Kh.

A.Swab from artery forceps - No Bacterial Growth.

B. Swab from artery Scissor- No Bacterial Growth.

C. Swab from tooth forceps- No Bacterial Growth.

D. Piece of Gauze pad- No Bacterial Growth.

E. piece of cotton bandages - No Bacterial Growth.

F. Biological indicator strip- No Bacterial Growth.

Date 23 02 2020

Duty in charge

Department of Merobiolog

Dr. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL, JALGAON KH.

Phone No. (0257)3058557 Fax: 0257-3058548

Department of Microbiology

Specimens (CSSD)-Culture Report

To, The In Charge

CSSD,

DUPMC& H, Jalgaon.

Subject: Sending Culture report of Specimen

Concer with sterilization controls.

Respected sir,

Following Specimens Processed for Aerobic CULTURE On. 17109 2020

A.Swab from artery forceps - No Bacterial Growth.

B. Swab from artery Scissor-

No Bacterial Growth.

C. Swab from tooth forceps-

No Bacterial Growth.

D. Piece of Gauze pad-

No Bacterial Growth.

E. piece of cotton bandages –

No Bacterial Growth.

F. Biological indicator strip-

No Bacterial Growth.

Date 20 09 2020

Medical Compage & Holo

Dr. Ulha Palit Medical College & Hospital, Jalean 17. Duty in charge

Department of Microbiology

Dr. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL, JALGAON KH.

Phone No. (0257) 3058557 Fax: 0257 - 3058548

Central Sterile Supply Department

Specimens (CSSD)- culture Report Request form

To,

The head of department,

Dpt of Microbiology,

DUPMC & H. Jalgaon.

Subject: Specimens regarding sterilization control.

Respected sir,

After sterilization process Dt .202191 am sending following specimens as controls of sterilization procedure.

Thanking you.

- A. Swab from artery forceps.
- B. Swab from artery Scissor.
- C. Swab from tooth forceps.
- D. Piece of Gauze pad.
- E. Piece of cotton bandages.
- F. Biological indicator strip

Date

Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh. Your Sincerely

Duty In charge(CSSD)

Dr. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL, JALGAON KH.

Phone No. (0257) 3058557 Fax: 0257 - 3058548

Department of Microbiology

Specimens (CSSD) - Culture Report

To,

The In charge,

CSSD,

DUPMC &H, Jalgaon.

Subject: Sending culture report of specimens

Concern with sterilization controls.

Respected sir,

Following specimens processed for Anaerobic culture on 20.1.2.19

A. Swab from artery forceps - No Bacterial Growth.

B. Swab from artery Scissor - No Bacterial Growth

C. Swab from tooth forceps - No Bacterial Growth

D. Piece of Gauze pad - No Bacterial Growth

E. Piece of cotton bandages- No Bacterial Growth

F. Biological indicator strip- No Bacterial Growth

Date: 27/2/19

Duty In charge

Department of Microbiology

r. Ulhas Patil Medical College & Hospital, Jalgaon Kh.

Dr. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL, JALGAON KH.

Phone No. (0257) 3058557 Fax: 0257 - 3058548

Central Sterile Supply Department

Specimens (CSSD)- culture Report Request form

To,

The head of department,

Dpt of Microbiology,

DUPMC & H. Jalgaon.

Subject: Specimens regarding sterilization control.

Respected sir,

After sterilization process Dt 21/2/18, I am sending following specimens as controls of sterilization procedure.

Thanking you.

- A. Swab from artery forceps.
- B. Swab from artery Scissor.
- C. Swab from tooth forceps.
- D. Piece of Gauze pad.
- E. Piece of cotton bandages.
- F. Biological indicator strip

Your Sincerely

Duty In charge(CSSD)

Date: 21/2/18

: Ulhas Paul Medical College & Hospital, Jalgaon Kh.

Dr. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL, JALGAON KH.

Phone No. (0257) 3058557 Fax: 0257 - 3058548

Central Sterile Supply Department

Specimens (CSSD)- culture Report Request form

To,

The head of department,

Dpt of Microbiology,

DUPMC & H. Jalgaon.

Subject: Specimens regarding sterilization control.

Respected sir,

Thanking you.

A. Swab from artery forceps.

B. Swab from artery Scissor.

C. Swab from tooth forceps.

D. Piece of Gauze pad.

E. Piece of cotton bandages.

F. Biological indicator strip

Your Sincerely

Duty In charge(CSSD)

Date: 1/9/18

Dr. Ulhas Pacif Medical College & Hospital, Jolgaon Kh.

DR.ULHAS PATIL MADICAL COLLEGE & HOSPITAL JALGAON KH.

Phone No. (0257-3058557) Fax: 0257 - 3058548

Department of Microbiology

From: Prof & HOD

Department of Microbiology

Dr.U.P.M.C. Jalgaon

To,

The Incharge

CSSD

Dr.U.P.M.C. Jalgaon

Subject: regarding control Specimens

I am sending the culture report regarding the control specimens received dated on 15-2-17

aerobic Culture Report

- A. Swab from artery forceps———No Bacterial Growth
- B. Swab from scissor-----No Bacterial Growth
- C. Swab from tooth forceps-----No Bacterial Growth
- D. Piece of quaze pad-----No Bacterial Growth
- E. Piece of cotton bandage-----No Bacterial Growth

Your Sincerely

Prof & HOL

Department of Microbiology Dr.U.P.M.C. Jalgaon

& Haspital, Jalgaon Kh

Dr. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL, JALGAON KH.

Phone No. (0257) 3058557 Fax: 0257 - 3058548

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- D. Piece of Gauze pad.
- E. Piece of cotton bandages.
- F. Biological indicator strip

Your Sincerely

Duty In charge(CSSD)

Date: 26/9/17

Pr. Ulhas Payil Medical College & Hospital, Jalgaon Kh.

(B
App	proved by
	HICC,
	Dept of
Mid	crobiology

Dr .Ulhas Patil medical college Jalgaon

STANDARD OPERATING PROCEDURE Hand hygiene

HICC/NO/01
25/04/2020
1.00
1 TO 2

- 1.1 Aim: To guide the staff how and when to wash hands in a proper technique.
- 1.2 <u>Scope and objective</u>: Healthcare workers should wash hands with soap and water when hands are visibly dirty, contaminated or soiled and use an alcohol-based hand rub when hands are not visibly soiled to reduce bacterial counts.

Handwashing with soap and water-Steps.

- 1 Wet hand with water
- 2 Apply enough soap to cover all hand surfaces
- 3 Rub hands together, palm to palm.
- 4 Right palm over left dorsum with interlaced fingers and vice versa
- 5 Palm to palm with fingers interlaced backs of fingers to opposing
- 6 Palms with fingers interlocked
- 7 Rotational rubbing of left thumb clasped in right palm and vice versa
- 8 Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa
- 9 Rinse hands with water
- 10 Dry thoroughly with a single use towel

1.3 Cleaning with alcohol-based hand rub-Steps

- 1 Apply a palmful (2-5ml) of the product in a cupped hand and cover all surfaces.2 Rub hands together, palm to palm.
- 3 Right palm over left dorsum with interlaced fingers and vice versa
- 4 Palm to palm with fingers interlaced backs of fingers to opposing
- 5 Palms with fingers interlocked
- 6 Rotational rubbing of left thumb clasped in right palm and vice versa
- 7 Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa. Dry it properly.

Nedical College National Medical College Natio

Or. Ulhas Paul Medical College & Hospital, Jalgaon Kh.

How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB



Duration of the handwash (steps 2-7): 15-20 seconds

Duration of the entire procedure: 40-60 seconds





Wet hands with water;





Apply enough soap to cover all hand surfaces;





Rub hands palm to palm;





Flight palm over left dorsum with interlaced fingers and vice versa;





Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;





Rotational rubbing of left thumb clasped in right palm and vice versa;





Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;





Rinse hands with water;





Dry hands thoroughly with a single use towel;





Use towel to turn off faucet;







Your hands are now safe.



Patient Safety

SAVE LIVES
Clean Your Hands



Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.



DR. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL,

Recognized by Medical Council of India, Approved by Central Govt. of India, New Delhi,
Letter no. MCI-34(41)/2012-med./158127, dated 05/02/2013

Affiliated to Maharashtra University of Health Sciences, Nashik [College Code-1306]

Jalgaon-Bhusawal Road, NH-6, Jalgaon Kh, Tal. & Dist. Jalgaon 425309

Tel. No. (0257)2366657, 2366678 Fax No. 0257-2366648

Email ID: dupmcj@yahoo.in Web Site: www.dupmc.ac.in

INFECTION CONTROL TEAM

• The ICT (Infection control team) consists of the following members were for the period of 2010 to 2018:

Chairperson - Dean - Dr. N.S. Arvikar

Medical Superitendent - Dr. Chandraya Kante Medicine

Secretary- Dr. Nagendra A.N. HOD Microbiology

Senior Microbiologist .- - Dr. Kailash wagh

Infection control officer- Dr. Kailash wagh / Mr Deb

Infection Control Nurses - Mr. Arun kumar

All heads of Department Members

Dr. Angha amale HOD Dept. Of Pathology

Dr.Devendra Chaudhari HOD Dept. Of Pharmacology

Dr.Sunil Chaudhari HOD Dept. Of General Medicine

Dr.Jeevan Kulkarni HOD Dept. Of Paediatrics

Dr. Deepak Patil HOD Dept. Of TB Chest

Dr.Nilesh Bhirud HOD Dept. Of Skin VD

Dr. Mayur Muthe HOD Psychaitry

Dr. Shivaji Sadulwad HOD Dept. Of General Surgery

Dr.Dwarkadas Tapadiya HOD Dept. Of Orthopedics

Dr.Bhalchandra Paike HOD Dept. Of ENT

Dr. Narayan Arvikar HOD Dept. Of Opthalmology

Dr. Maya Arvikar HOD Dept. Of OBGY

Dr. Jayant Deshmukh HOD Dept. Of Anaesthesia

Dr. Kiran Patil HOD Dept. Of Radiology

Dr. Dillip Dhekale HOD Dept. Of Community medicine

Other

- Nodal officer HMW Members- Mr. Jitendra Patil
- Nursing in charges Mrs. Aruna R. Karosiya
- CPWD Incharge Members- Mr. sanjay bhirud

Dean

Dr. Ulhas Patil Medical College JALGAON KH

& Hospital, Jalgaon Kh.

Dr.Ulhas Patil Medical College Department of Microbiology

• The ICT (Infection control team) consists of the following members were for the period of 2018 to 2019:

<u>Chairperson-Dean</u> - Dr. N.S.Arvikar

Medical Superitendent -Dr. Chandraya Kante Medicine

Secretary- Dr. Kailash wagh HOD Microbiology

Senior Microbiologist. - - Dr. Kailash wagh

Infection control officer- Dr.Kamesh

Infection Control Nurses - Mr. Arun kumar

All heads of Department Members

Dr. Angha amale HOD Dept. Of Pathology

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Dr. Jeevan Kulkarni HOD Dept. Of Paediatrics

Dr. Deepak Patil HOD Dept. Of TB Chest

Dr. Nilesh Bhirud HOD Dept. Of Skin VD

Dr. Shivaji Sadulwad HOD Dept. Of General Surgery

Dr.Dwarkadas Tapadiya HOD Dept. Of Orthopedics

Dr.Bhalchandra Paike HOD Dept. Of ENT

Dr. Narayan Arvikar HOD Dept. Of Opthalmology

Dr. Maya Arvikar HOD Dept. Of OBGY

Dr. Jayant Deshmukh HOD Dept. Of Anaesthesia

Dr. Dillip Dhekale HOD Dept. Of Community medicine

Other

- Nodal officer HMW Members- Mr. Jitendra Patil
- · Nursing in charges Mrs. Aruna R. Karosiya
- · CPWD Incharge Members- Mr. sanjay bhirud

Dr.Ulhas Patil Medical College Department of Microbiology

• The ICT (Infection control team) consists of the following members were for the period of 2019 to february 2021:

Chairperson-Dean - Dr. N.S. Arvikar

Medical Superitendent -Dr. Chandraya Kante Medicine

Secretary- Dr. Kailash wagh HOD Microbiology

Senior Microbiologist. - Mr Prashant

Infection control officer- Mr.Bitopan

Infection Control Nurse - Mr Chinmay shukla

Dean

Dr. Ulhas Patil Medical College

& Hospital, Jalgaon Kh.

All heads of Department Members

Dr. Angha amale HOD Dept. Of Pathology

Dr.Devendra Chaudhari HOD Dept. Of Pharmacology

Dr. Sunil Chaudhari HOD Dept. Of General Medicine

Dr.Jeevan Kulkarni HOD Dept. Of Paediatrics

Dr. Deepak Patil HOD Dept. Of TB Chest

Dr.Nilesh Bhirud HOD Dept. Of Skin VD

Dr. Shivaji Sadulwad HOD Dept. Of General Surgery

Dr.Dwarkadas Tapadiya HOD Dept. Of Orthopedics

Dr.Bhalchandra Paike HOD Dept. Of ENT

Dr. Narayan Arvikar HOD Dept. Of Opthalmology

Dr.Maya Arvikar HOD Dept. Of OBGY

Dr. Jayant Deshmukh HOD Dept. Of Anaesthesia

Dr. Dillip Dhekale HOD Dept. Of Community medicine

Other

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- CSSD & Nursing in charges Mrs. Manisha Kharat
- CPWD Incharge Members- Mr. sanjay bhirud

Dr.Ulhas Patil Medical College Department of Microbiology

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Chairperson

Head of the institute -Dean - Dr. N.S. Arvikar

Medical Superitendent -Dr. Chandraya Kante Medicine

Secretary- Dr Harshda shaha and Dr. Kailash wagh HOD Microbiology

Senior Microbiologist. - Mr Prashant

Infection control officer- Mr.Bitopan

Infection Control Nurse - Mr Chinmay shukla

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Dr.Dinesh Nehte HOD Dept. Of General Medicine

Dr.Jeevan Kulkarni HOD Dept. Of Paediatrics

Dr. Deepak Patil HOD Dept. Of TB Chest

Dr. Nilesh Bhirud HOD Dept. Of Skin VD

Dean

Dr. Ulhas Patil Medical College
& Hospital, Jalgoon Kh.

Medical Co

Dr.Shivaji Sadulwad HOD Dept. Of General Surgery

Dr.Rajendra Sarode HOD Dept. Of Orthopedics

Dr.Bhalchandra Paike HOD Dept. Of ENT

Dr. Kiran bhirud HOD Dept. Of Opthalmology

Dr. Maya Arvikar HOD Dept. Of OBGY

Dr. Jayant Deshmukh HOD Dept. Of Anaesthesia

Dr. Dillip Dhekale HOD Dept. Of Community medicine

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- · CPWD Incharge Members- Mr. sanjay bhirud

Medical College &

Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.

Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.

The ICT consists of the following members.

Head of the institute – <u>Dean</u>: - Dr. Narayan S. Arvikar

Chairperson

Medical Superitendent – Dr. Chandrayya Kante

Secretary

Dr. Anantha Nagendra - HOD Microbiology

Infection control officer (Senior Microbiologist Dr. Kailash B. Wagh)

All heads of Department Members.

Sr. No	Name of members	Department	Designation	Sign
01	Dr. Anantha S. Nagendra	Microbiology	Professor & HOD	9m
02	Dr. Vilas M. Sangole	Pathology	Professor & HOD	Maryle
03	Dr. Balwant D. Samant	Pharmacology	Professor & HOD	Bolman
04	Dr. Sunil V. Chaudhari	Gen. Medicine	Professor & HOD	Clour,
05	Dr. Jeevan M. Kulkarni	Pediatric	Professor & HOD	300
06	Dr. Deepak O. Patil	Respiratory Medicine	Professor & HOD	Pup
07	Dr. Nilesh R. Bhirud	DVL	Professor & HOD	A Bhirod
08	Dr. Mayur K. Muthe	Psychiatry	Professor & HOD	400
09	Dr. Shivaji P. Sadulwad	Gen. Surgery	Professor & HOD	Sauce
10	Dr. Dwarkadas G. Tapadiya	Orthopedic	Professor & HOD	Grapadiza
11	Dr. Bhalchandra H. Paike	ENT	Professor & HOD	BY
12	Dr. Ragini R. Patil	Ophthalmology	Professor & HOD	pppatt
13	Dr. Maya N. Arvikar	OBGY	Professor & HOD	
14	Dr. Jayant M. Deshmukh	Anesthesiology	Professor & HOD	Deshmuser
15	Dr. Kiran C. Patil	Radiology	Professor & HOD	for
16	Dr. Harikisan B. Rathi	PSM	Professor & HOD	BRodh

Other:-

Nodal Officer HMW Members

:- Mr. Jitendra Patil

Nursing Incharge all patients care units Members: - Mrs. Aruna R. Karosiya

edical Co

CPWD Incharge Members

:- Mr. Sanjay Bhirud

Infection Control Nurses Members

- Mr. Arun Kumar

Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.

Meeting

Effective work practices and procedures such as environmental management practices

8/06/2015 15701/205

15-06-015

meeting was successfully ended with following outline.

I gendeline of above topic were. discused regerraling was last subject problems All were solved.

Following members was present. Dean Da N. S. Arrikare. Homes

medició supembendent: Dr. chandrakant secretory: - Dr. Anant Nagendra. senior microbiologist: - &

Dr. Ulhas Paul M & Hospital, Jalgaon Kh.



The ICT consists of the following members.

Dean: - Dr. Narayan S. Arvikar Head of the institute

Chairperson

Medical Superitendent - Dr. Chandrayya Kante

Secretary

- Dr. Anantha Nagendra - HOD Microbiology

- Infection control officer (Senior Microbiologist Dr. Kailash B. Wagh)
- All heads of Department Members.

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01	Dr. Anantha S. Nagendra	Microbiology	Professor & HOD	and
02	Dr. Vilas M. Sangole	Pathology	Professor & HOD	allegie
03	Dr. Devendra R. Chaudhari	Pharmacology	Professor & HOD	(200
04	Dr. Sunil V. Chaudhari	Gen. Medicine	Professor & HOD	lear
05	Dr. Jeevan M. Kulkarni	Pediatric	Professor & HOD	5m
06	Dr. Deepak O. Patil	Respiratory Medicine	Professor & HOD	Kons
07	Dr. Nilesh R. Bhirud	DVL	Professor & HOD	2 Blowned
08	Dr. Mayur K. Muthe	Psychiatry	Professor & HOD	THE
09	Dr. Shivaji P. Sadulwad	Gen. Surgery	Professor & HOD	Boeneel.
10	Dr. Dwarkadas G. Tapadiya	Orthopedic	Professor & HOD	Gapadala
11	Dr. Bhalchandra H. Paike	ENT	Professor & HOD	BU
12	Dr. Ragini R. Patil	Ophthalmology	Professor & HOD	PEPaH
13	Dr. Maya N. Arvikar	OBGY	Professor & HOD	
14	Dr. Jayant M. Deshmukh	Anesthesiology	Professor & HOD	Deshmumo
15	Dr. Kiran C. Patil	Radiology	Professor & HOD	latt
16	Dr. Harikisan B. Rathi	PSM	Professor & HOD	3BR oth

Other:-

Nodal Officer HMW Members

:- Mr. Jitendra Patil

Nursing Incharge all patients care units Members :- Mrs. Aruna R. Karosiya

CPWD Incharge Members

:- Mr. Sanjay Bhirud eAron Kumar

JALGAON HH

Infection Control Nurses Membe

Dr. Ulhas Patil Medical College

& Hospital, Jalgaon Kh.

Meeling	was	succe	88fully	g ended	weith
gollenoing	oul	lines	v J		

@ All juidelines of said topic" Health checking in health care werker" were discussed

Decheeked / serciewed,

Jollesong repubers vocre present

OM. S. Dupmes 4

3 secretory Jung

@ senior Mierobiologist of

Dr. Ulhas Paul Medical College & Hospital, Jalgaon Kh.



The ICT consists of the following members.

Head of the institute – <u>Dean</u>: - Dr. Narayan S. Arvikar

Chairperson

Medical Superitendent - Dr. Chandrayya Kante

Secretary

Dr. Anantha Nagendra - HOD Microbiology

Infection control officer (Senior Microbiologist Dr. Kailash B. Wagh)

· All heads of Department Members.

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01	Dr. Anantha S. Nagendra	Microbiology	Professor & HOD	(Oin)
02	Dr. Vilas M. Sangole	Pathology	Professor & HOD	Rough
03	Dr. Devendra R. Chaudhari	Pharmacology	Professor & HOD	de
04	Dr. Sunil V. Chaudhari	Gen. Medicine	Professor & HOD	Soil.
05	Dr. Jeevan M. Kulkarni	Pediatric	Professor & HOD	Sm
06	Dr. Deepak O. Patil	Respiratory Medicine	Professor & HOD	pur
07	Dr. Nilesh R. Bhirud	DVL	Professor & HOD	Berrand
08	Dr. Mayur K. Muthe	Psychiatry	Professor & HOD	TAR
09	Dr. Shivaji P. Sadulwad	Gen. Surgery	Professor & HOD	Bassel
10	Dr. Dwarkadas G. Tapadiya	Orthopedic	Professor & HOD	Fapadazs
11	Dr. Bhalchandra H. Paike	ENT	Professor & HOD	BV
12	Dr. Ragini R. Patil	Ophthalmology	Professor & HOD	RRPatil
13	Dr. Maya N. Arvikar	OBGY	Professor & HOD	
14	Dr. Jayant M. Deshmukh	Anesthesiology	Professor & HOD	Deshmurn
15	Dr. Kiran C. Patil	Radiology	Professor & HOD	Hatt.
16	Dr. Harikisan B. Rathi	PSM	Professor & HOD	BReshi

Other:-

Nodal Officer HMW Members

:- Mr. Jitendra Patil

Nursing Incharge all patients care units Members: - Mrs. Aruna R. Karosiya

CPWD Incharge Members

Infection Control Nurses Members

:- Mr. Sanjay Bhirud

:- Mis Arun Kurijar

Dr. Ulhas Paul Medical College & Hospital, Jalgaon Kh. Meeting was successfully ended with following outlines.

- O All quidelines of said lopics Review of policies regarding prevention of the emergence and spread of antibiotics resistante organisms
- 2) All problems regarding last topic were reviewed & recherked.

following members were present

1) Dean OUPMCet

[Mmile]

- 2) Mis of DUPMCEH ON
- 3) Secretary of Iccr Cents.
 - 5) Senior microbiologia Ject

Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh



The ICT consists of the following members.

Dean: - Dr. Narayan S. Arvikar Head of the institute

Chairperson

Medical Superitendent – Dr. Chandrayya Kante Secretary - Dr. Anantha Nagendra HOD Microbiology

Infection control officer (Senior Microbiologist Dr. Kailash B. Wagh)

All heads of Department Members.

• All	heads of Department Member	Dtwomt	Designation	Sign
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No	S Nagandra	Microbiology	Professor & HOD	Accept
01	Dr. Anantha S. Nagendra	Pathology	Professor & HOD	VIGOROS
02	Dr. Vilas M. Sangole Dr. Devendra R. Chaudhari	Pharmacology	Professor & HOD	12000
03	Dr. Sunil V. Chaudhari	Gen. Medicine	Professor & HOD	sue
04	Dr. Jeevan M. Kulkarni	Pediatric	Professor & HOD	Stocke
05	Dr. Deepak O. Patil	Respiratory	Professor & HOD	08-19
06	Dr. Deepak O. Fatin	Medicine		boolor
07	Dr. Nilesh R. Bhirud	DVL	Professor & HOD	Noten
08	Dr. Mayur K. Muthe	Psychiatry	Professor & HOD	Madrice
09	Dr. Shivaji P. Sadulwad	Gen. Surgery	Professor & HOD	000
10	Dr. Dwarkadas G. Tapadiya	Orthopedic	Professor & HOD	Dlod
11	Dr. Bhalchandra H. Paike	ENT	Professor & HOD	Programi
12	Dr. Ragini R. Patil	 Ophthalmology 	Professor & HOD Professor & HOD	Marina
13	Dr. Maya N. Arvikar	OBGY	Professor & HOD	Jayant
14	Dr. Jayant M. Deshmukh	Anesthesiology	Professor & HOD	
15	Dr. Kiran C. Patil	Radiology	Professor & HOD	
16	Dr. Harikisan B. Rathi	PSM	Professor & from	- 1)-

Other:-

Nodal Officer HMW Members

:- Mr. Jitendra Patil

Nursing Incharge all patients care units Members: - Mrs. Aruna R. Karosiya

CPWD Incharge Members

:- Mr. Sanjay Bhirud

Infection Control Nurses Members

:- Mr. Arun Kumar

JALGAON KH

Dr. Ulhas Patil Med & Hospital, Jalgaon Kh.

Meeting

Universal Precautionse e.g. hondwashing, hundling of Shourps, Personal protection, use of single use devices, asoptic techniques etc.

Meeting was successfully onded with Following willise and with Following willise

1) All guidhner of above topic Subject were discussed

2) All problem regarding last subject were solved

Following members was present

(D Dean. Dr. N'S AWIKON

medical superitendent: Dr chandralcute

(11) Secretary :- Dr Mount Nigendra

(1) Senier microliologist: Dr. Kailash B. wyl

Dr. Ulhas Pati Medical College & Hospital, Jalgaon Kh.



Hospital Infection Control Committee of Dr. Ulhas Patil Medical College & Hospital, Jalgaon and following members are appointed for the Committee.

01	Head of the Institute Chairperson Dean, Dr. N. S. Arvikar.	11	Dr. Nilesh bhirud, HOD Dept. of Skin & XD
02	 Addl. Medical Superintendent Member Medical Superintendent, Dr. Chandrayya A. Kante. 	12	Dr. Mayur Muthe, Me HOD Dept. of Psychlatry
03	 Infection Control Nurses Member HOD Dept. of Microbiology Secretary Dr kailash wagh. 	13	Dr. Shivaji P. Sadulwad, HOD Dept. of General Surgery
04	• Infection Control Officer (Senior Microbiologist) Mr Prashant .	14	Dr. Dwarkadas G. Tapadiya, HOD Dept. of Orthopedics
	 All Heads of Department Members. 	15	Dr. Bhalchandra H. Paike,
05	Dr. Dr kailash wagh, HOD Dept. of Microbiology	16	Dr N. S. Arvikar, Mannelogy
06	Dr. Vilas M. Sangole, Aunyde HOD Dept. of Pathology	17	Dr. Maya N. Arvikar, HOD Dept. of OBGY
07	Dr.Devendra chaudhari, MAN HOD Dept. of Pharmacology	18	Dr. Jayant M. Deshmukh, HOD Dept. of Anaesthesia
08	Dr. Sunil V. Chaudhari, ADDV HOD Dept. of General Medicine	19	Nodal officer HMW Members Mr. Jitendra Patil
09	Dr. Jeevan Kulkarni, 108 HOD Dept. of Paediatrics	20	Nursing in charge all patient care unit Member
10	Dr. Deepak O. Patil, Appell HOD Dept. of TB & Chest	21	Mrs. Aruna R. KarosiyaCPWD in charge MembersMr. Sanjay Bhirud

Dr. Ulhas Paul Medical College & Hospital, Jalgadn Kh. JALGAON KII

Meeting was arranged on . 12-10.2019
The Jagorda of meeting was.
New quedlines about Jambiniciobial
presculning pattorn.

Akeeling was ended to with thouls to

Jellewing membeis were present.

Dr. Uihas Patil Medical College & Hospital, Jalgaon Kh.



Annexure -I

The ICT consists of the following members:

Chairperson

Head of the institute -Dean - Dr. N.S.Arvikar

Medical Superitendent -Dr. Chandraya Kante . Medicine

Secretary-

Dr. Kailash wagh HOD Microbiology

Senior Microbiologist.-Mr. Prashant kumar

Infection control officer

All heads of Department Members

Dr. Vilas Sangole HOD Dept. Of Pathology

Dr.Devendra Chaudhari HOD Dept. Of Pharmacology

Dr.Sunil Chaudhari HOD Dept. Of General Medicine

Dr.Jeevan Kulkarni HOD Dept. Of Paediatrics

Dr. Deepak Patil HOD Dept. Of TB Chest

Dr. Nilesh Bhirud HOD Dept. Of Skin VD

Dr. Mayur Muthe HOD Psychaitry

Dr.Shivaji Sadulwad HOD Dept. Of General Surgery

Dr. Dwarkadas Tapadiya HOD Dept. Of Orthopedics

Dr.Bhalchandra Paike HOD Dept. Of ENT

Dr. Narayan Arvikar HOD Dept. Of Opthalmology

Dr.Maya Arvikar HOD Dept. Of OBGY

Dr. Jayant Deshmukh HOD Dept. Of Anaesthesia

Dr. Kiran Patil HOD Dept. Of Radiology

Dr. Dillip Dhekale HOD Dept. Of Community medicine

Other

Nodal officer HMW Members

Mr. Jitendra Patil

Nursing in charges all patient care units Members

Mrs. Aruna R. Karosiya

A.

Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.

- CDMD Incharge Members- Mr. sanjay bhirud

The meeting was held to discuss the

Deglishing quidelines of enfection presention control in coxiding ward.

1 To prepare other So.P. .

following nombers were present,

Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh. INTEGRICAL COLLEGE INTEGRAL IN

Page No. Your

Dr. Ulhas Patil medical college and Hospital Jalgaon

The ICT consists of the following members:
 Chairperson

Head of the institute -Dean - Dr. N.S.Arvikar

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Secretary-

Dr. Kailash wagh HOD Microbiology

Senior Microbiologist.-Mr. Prashant kumar

Infection control officer

All heads of Department Members

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Dr. Nilesh Bhirud HOD Dept. Of Skin VD

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Dr.Shivaji Sadulwad HOD Dept. Of General Surgery

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Dr.Maya Arvikar HOD Dept. Of OBGY

Dr. Jayant Deshmukh HOD Dept. Of Anaesthesia

Dr. Kiran Patil HOD Dept. Of Radiology

Other

Nursing in charges all patient care units Members
 Mrs. Aruna R. Karosiya

· CPWD Incharge Members- Mr. sanjay Phire

· Infection Control Nurses Members- Mr

Dr. Ulhas Patil Medical College & Hospital, Jalgaco Kh



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DR. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL

Recognized by Medical Council of India, Approved by Central Govt. of India, New Delhi,
Letter no. MCI-34(41)/2012-med./158127, dated 05/02/2013

Affiliated to Maharashtra University of Health Sciences, Nashik [College Code-1306]
Jalgaon-Bhusawal Road, NH-6, Jalgaon Kh, Tal. & Dist. Jalgaon 425309

Tel. No. (0257)2366657, 2366678 Fax No. 0257-2366648

Email ID: dupmcj@yahoo.in Web Site: www.dupmc.ac.in

Hospital Infection Control Committee

Date: 05-01-2022

A Meeting of HICC meeting held on 5th January 2022.

Time: 11.00 to 11.45 AM

Venue: Dean's Office.

The members are attended the meeting as follows:

Chairperson Dean - Dr. N.S. Arvikar

Medical Superitendent -Dr. Chandraya Kante Medicine

Secretary- Dr Harshda shaha and

Dr. Kailash wagh HOD Microbiology

Senior Microbiologist. - Mr Prashant

Infection control officer- Mr. Bitopan

Infection Control Nurse - Mr Chinmay shukla

All heads of Department Members

Dr. Angha amale HOD Dept. Of Pathology

Dr. Devendra Chaudhari HOD Dept. Of Pharmacology

Dr.Dinesh Nehte HOD Dept. Of General Medicine

Dr.Jeevan Kulkarni HOD Dept. Of Paediatrics

Dr. Deepak Patil HOD Dept. Of TB Chest

Dr.Nilesh Bhirud HOD Dept. Of Skin VD

Dr.Shivaji Sadulwad HOD Dept. Of General Surgery

Dr. Rajendra Sarode HOD Dept. Of Orthopedics

Dr.Bhalchandra Paike HOD Dept. Of ENT

Dr. Kiran bhirud HOD Dept. Of Ophthalmology

Dr.Maya Arvikar HOD Dept. Of OBGY

Dr. Jayant Deshmukh HOD Dept. Of Anaesthesia

Dr. Dillip Dhekale HOD Dept. Of Community medicine

Nodal officer HMW Members- Mr. Jitendra Patil

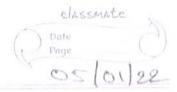
CSSD & Nursing in charges Mrs. Manisha Kharat

CPWD Incharge Members- Mr. sanjay bhirud

Dear

redica/

Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.



Subsect: Incident of Paparting of needle stick

meeting was conducted on spoiler in Decaris office of 11 pm.

- DAI the Procedures for nearly stick intriversed.
- 2) Profilacting measures & to Luton should be informed. was discussed & aggrowd.

meeting was ended at 12 PM by thanking all the members.

MJCAN

Dr. Ulhas Paul Medical College

& Hospital, Julgaon Kh.

Medical College Malcaon KH 20 Malcaon KH 20



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Tel. No. (0257)2366657, 2366678 Fax No. 0257-2366648

Email ID: dupmcj@yahoo.in Web Site: www.dupmc.ac.in

Hospital Infection Control Committee

Date: 09-02-2022

A Meeting of HICC meeting held on 9th February 2022.

Time: 11.00 to 11.45 AM

Venue: Dean's Office.

The members are attended the meeting as follows:

Chairperson Dean - Dr. N.S. Arvikar

Medical Superitendent -Dr. Chandraya Kante Medicine

Secretary- Dr Harshda shaha and

Dr. Kailash wagh HOD Microbiology

Senior Microbiologist. - Mr Prashant

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Dr. Dillip Dhekale HOD Dept. Of Community medicine

Nodal officer HMW Members- Mr. Jitendra Patil

CSSD & Nursing in charges Mrs. Manisha Kharat

CPWD Incharge Members- Mr. sanjay bhirud

Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.

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Subsect: Expression & diped of BMW. for Final disposal

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DEnded at 12 PM

Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.



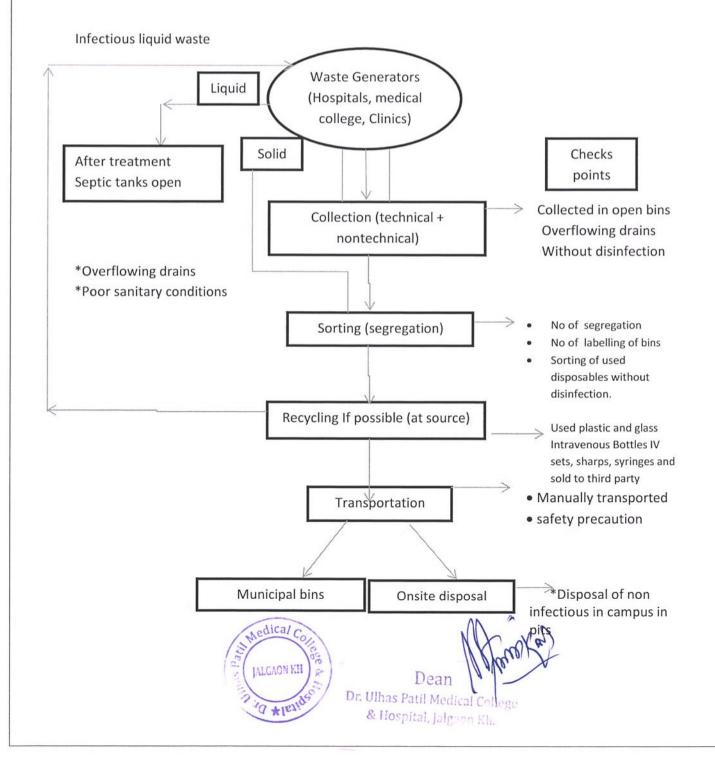
HICC, Dept of Microbiology

Dr .Ulhas Patil medical college Jalgaon

STANDARD OPERATINGPROCEDURE

FLOW CHARTS OF HOSPITAL WASTE MATRIAL

Document no	HICC/NO/09	
Date of issue	25/04/2020	
Version	1.00	
Page no	1	





Godavari Foundation's (Registered under the Bombay Public Trusts Act. 1950)

DR. ULHAS PATIL MEDICAL COLLEGE, JALGAON PHARMACOVIGILANCE COMMITTEE

NH 6 (Jalgaon-Bhusawal Highway)
Jalgaon Khurd (Dist. Jalgaon) M. S. Pin - 425

Phone: (0257) 2366657 Fax: (0257) 2366648

PVC/ 2021/ Minutes of Meeting

DATE: 10/06/2021

Location: Dean's Office

Recorded By: Dr.D.R. Chaudhari

MEETING ATTENDED BY

Sr No	Name	Title	Organization	Signature
1	Dr. Devendra R. Chaudhari	Chairman	DUPMC, Jalgaon	hard
2	Dr. Chandrayya Kante	Member	DUPMC, Jalgaon	Jeale
3	Dr. Nilesh R. Bhirud	Member	DUPMC, Jalgaon	ital net o
4	Dr. Sachin Ingle	Member	DUPMC, Jalgaon	Single
5	Dr. Sunil V. Chaudhari.	Member	DUPMC, Jalgaon	an
6	Dr. Rahul P. Bhavasar	Member	DUPMC, Jalgaon	Direction of the second

1 MEETING LOCATION

Dr. Ulhas Patil Medical College and Hospital Jalgaon (Kh) at Dean's Office

2 MEETING START TIME

Meeting Schedule Start: 03.00 pm Meeting Actual Start: 03.05 pm

3 AGENDA

- i) To discuss the Adverse Drug Reactions reported by clinicians from hospital & periphery
- ii) To assess their causality with the drug
- iii) To see whether such reactions are reported from other places
- iv) Reporting this ADR to ADR monitoring centre (AMC).
- v) Discussion about increasing awareness of ADR monitoring and reporting

Minutes of meeting:-

- 1) DR. Prajakta from PG from skin department has reported 5 ADRs
 - Fixed drug eruption by ofloxacin and metronidazole on 5th April 2021
 - Fixed drug eruption on 10th April 2021 by ofloxacin and ornidazole.
 - Erythematous maculopapular lesion by perfenidone on 10th May 2021
 - d. Toxic epidermal necrosis by carbamazepine on 18th May 2021
 - e. Maculopapular rash by paclitaxel on 7th June 2021
- 2) These reactions were discussed and causality was assessed.
- It was decided to send the ADR forms to zonal centre.

 Meeting ended with thanks to Chairman and Collembers.

Wihas Patil Medical College & Hospital, Jalgaon Kh.

Page I of 2



Godavari Foundation's (Registered under the Bombay Public Trusts Act. 1950)

DR. ULHAS PATIL MEDICAL COLLEGE, JALGAON PHARMACOVIGILANCE COMMITTEE

4 MEETING END

Meeting Schedule End: 04.00 pm Meeting Actual End: 4.15 pm

> Or. D. R. Chaudhari Chairman

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SUSPECTED ADVERSE DRUG REACTION REPORTING FORM

For VOLUNTARY reporting of Adverse Drug Reactions by Healthcare Professionals

INDIAN	PHARMACO	POEIA C	OMMI	SSION			772	:0	177	ic/Nec	USEDNI	V.			
INDIAN PHARMACOPOEIA COMMISSION (National Coordination Centre-Pharmacovigilance Programme of India) Ministry of Health & Family Welfare, Government of India							AMC Report No. :								
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National Coordination Centre Pharmacovigilance Programme of India Ministry of Health & Family Welfare, Government of India Sector-23, Raj Nagar, Ghaziabad-201002 Tel.: 0120-2783400, 2783401, 2783392

> Fax: 0120-2783311 www.ipc.nic.in

Pharmacovigilance Programme of India for Assuring Drug Safety

ADVICE ABOUT REPORTING

A. What to report

- Report serious adverse drug reactions. A reaction is serious when the patient outcome is:
 - Death
 - Life-threatening
 - Hospitalization (initial or prolonged)
 - Disability (significant, persistent or permanent)
 - Congenital anomaly
 - Required intervention to prevent permanent impairment or damage
- > Report non-serious, known or unknown, frequent or rare adverse drug reactions due to Medicines, Vaccines and Herbal products.

Note-Adverse Event Following Immunization can also be reported in Serious AEFI case Notification Form available on http://ipc.nic.in/showfile.asp?lid=650&EncHid=)

B. Who can report

> All healthcare professionals (Clinicians, Dentists, Pharmacists and Nurses) can report adverse drug reactions

C. Where to report

- > Duly filled Suspected Adverse Drug Reaction Reporting Form can be send to the nearest Adverse Drug Reaction Monitoring Centre (AMC) or directly to the National Coordination Centre (NCC).
- Call on Helpline (Toll Free) 1800 180 3024 to report ADRs.
- Or can directly mail this filled form to pvpi@ipcindia.net or pvpi.ipcindia@gmail.com
- A list of nationwide AMCs is available at:
 - http://www.ipc.gov.in, http://www.ipc.gov.in/PvPI/pv_home.html

D. What happens to the submitted information

- Information provided in this form is handled in strict confidence. The causality assessment is carried out at AMCs by using WHO-UMC scale. The analyzed forms are forwarded to the NCC through ADR database. Finally the data is analyzed and forwarded to the Global Pharmacovigilance Database managed by WHO Uppsala Monitoring Centre in Sweden.
- The reports are periodically reviewed by the NCC-PvPI. The information generated on the basis of these reports helps in continuous assessment of the benefit-risk ratio of medicines.
- > The information is submitted to the Steering committee of PvPI constituted by the Ministry of Health & Family Welfare. The Committee is entrusted with the responsibility to review the data and suggest any interventions that may be required.

E. Mandatory field for suspected ADR reporting form

> Patient initials, age at onset of reaction, reaction term(s), date of onset of reaction, suspected medication(s) and reporter information.

For ADRs Reporting Call on PvPI Helpline (Toll Free)

1800 180 3024

(9:00 AM to 5:30 PM, Working Doys) Dr. Ulhas Patil Medical College

JALGAON K

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SUSPECTED ADVERSE DRUG REACTION REPORTING FORM

For VOLUNTARY reporting of Adverse Drug Reactions by Healthcare Professionals

INDIAN PHARMACOPOEIA COMMISSION								FOR AMOUNDOUSE ONLY							
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National Coordination Centre
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Ministry of Health & Family Welfare,
Government of India
Sector-23, Raj Nagar, Ghaziabad-201002
Tel.: 0120-2783400, 2783401, 2783392
Fax: 0120-2783311
www.ipc.nic.in

Pharmacovigilance
Programme of India for
Assuring Drug Safety

ADVICE ABOUT REPORTING

A. What to report

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For ADRs Reporting Call on PyPI-Helpline (Toll Free)

1800 180 3024

(9:00 AM to 5:302 W. Working Cays)

Dr. Ulhas Patil Medical College
& Hospital, Jalgaon Kh.





For VOLUNTARY reporting of Adverse Drug Reactions by Healthcare Professionals

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National Coordination Centre Pharmacovigilance Programme of India

Ministry of Health & Family Welfare, Government of India

Sector-23, Raj Nagar, Ghaziabad-201002 Tel.: 0120-2783400, 2783401, 2783392

Fax: 0120-2783311 www.ipc.nic.in Pharmacovigilance
Programme of India for
Assuring Drug Safety

ADVICE ABOUT REPORTING

A. What to report

- Report serious adverse drug reactions. A reaction is serious when the patient outcome is:
 - · Death
 - · Life-threatening
 - Hospitalization (initial or prolonged)
 - Disability (significant, persistent or permanent)
 - · Congenital anomaly
 - Required intervention to prevent permanent impairment or damage
- Report non-serious, known or unknown, frequent or rare adverse drug reactions due to Medicines, Vaccines and Herbal products.

Note- Adverse Event Following Immunization can also be reported in Serious AEFI case Notification Form available on http://ipc.nic.in/showfile.asp?lid=650&EncHid=)

B. Who can report

- > All healthcare professionals (Clinicians, Dentists, Pharmacists and Nurses) can report adverse drug reactions
 - C. Where to report
- Duly filled Suspected Adverse Drug Reaction Reporting Form can be send to the nearest Adverse Drug Reaction Monitoring Centre (AMC) or directly to the National Coordination Centre (NCC).
- > Call on Helpline (Toll Free) 1800 180 3024 to report ADRs.
- Or can directly mail this filled form to pvpi@ipcindia.net or pvpi.ipcindia@gmail.com
- A list of nationwide AMCs is available at: http://www.ipc.gov.in, http://www.ipc.gov.in/PvPI/pv_home.html

D. What happens to the submitted information

- Information provided in this form is handled in strict confidence. The causality assessment is carried out at AMCs by using WHO-UMC scale. The analyzed forms are forwarded to the NCC through ADR database. Finally the data is analyzed and forwarded to the Global Pharmacovigilance Database managed by WHO Uppsala Monitoring Centre in Sweden.
- The reports are periodically reviewed by the NCC-PvPI. The information generated on the basis of these reports helps in continuous assessment of the benefit-risk ratio of medicines.
- The information is submitted to the Steering committee of PvPI constituted by the Ministry of Health & Family Welfare. The Committee is entrusted with the responsibility to review the data and suggest any interventions that may be required.

E. Mandatory field for suspected ADR reporting form

Patient initials, age at onset of reaction, reaction term(s), date of onset of reaction, suspected medication(s) and reporter information.

For ADRs Reporting Call on Papi Helphine (Toll Free)

1800 180 302 (9:00 AM to 5:30 PM, Working De Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.





For VOLUNTARY reporting of Adverse Drug Reactions by Healthcare Professionals

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Medical College

National Coordination Centre Pharmacovigilance Programme of India

Ministry of Health & Family Welfare,

Government of India

Sector-23, Raj Nagar, Ghaziabad-201002 Tel.: 0120-2783400, 2783401, 2783392

Fax: 0120-2783311

www.ipc.nic.in

Pharmacovigilance Programme of India for Assuring Drug Safety

ADVICE ABOUT REPORTING

A. What to report

- Report serious adverse drug reactions. A reaction is serious when the patient outcome is:
 - Death
 - Life-threatening
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- > Duly filled Suspected Adverse Drug Reaction Reporting Form can be send to the nearest Adverse Drug Reaction Monitoring Centre (AMC) or directly to the National Coordination Centre (NCC).
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- > The reports are periodically reviewed by the NCC-PvPI. The information generated on the basis of these reports helps in continuous assessment of the benefit-risk ratio of medicines.
- > The information is submitted to the Steering committee of PvPI constituted by the Ministry of Health & Family Welfare. The Committee is entrusted with the responsibility to review the data and suggest any interventions that may be required.

E. Mandatory field for suspected ADR reporting form

> Patient initials, age at onset of reaction, reaction term(s), date of onset of reaction, suspected medication(s) and reporter information.

For ADRs Reporting Call on PvPI Helpline (Toll Free

1800 180 3024

(9:00 AM to 5:30 PM, Working Days)

Medical JALGAON KI





For VOLUNTARY reporting of Adverse Drug Reactions by Healthcare Professionals

INDIAN PHARMACOPOEIA	COMMISSION		FOR IAMIC/NOC USE ONLY				
(National Coordination Centre-Pharmacovig Ministry of Health & Family Welfare,		a)	AMC Report No. :				
Sector-23, Raj Nagar, Ghazir			Reg. No. /IPD No. /OPD No./CR no.: No info avai				
Report Type o Initial o Follow up			Worldwide Unique No. :				
PATIENT INFORMATION	Commence and the commence of t	25210000000	12. Relevant tests/ laboratory data with dates				
Patient Initials 2. Age at time of Event or Date of	3. M.d Fo Oth	er D	None.				
Birth 55 YM	4. Weight 62	Kes					
. SUSPECTED ADVERSE REACTION Date of reaction started (dd/mm/yyyy)	11 (101		Relevant medical/ medication history (e.g. allergies, race, pregnancy, smoking, alcohol use, hepatic/renal dysfunction etc.)				
Date of recovery (dd/mm/yyyy)	1 6 21						
Describe reaction or problem	11 6 21		Dm :: 18 yeu				
Maculanin	0 1		14. Seriousness of the reaction: No □ if Yes □ (please tick anyone)				
Maculopapular	Rash		□ Death (dd/mm/yyyy) □ Congenital-anomaly				
			☐ Life threatening ☐ Required intervention to Prevent permanent				
			☐ Hospitalization/Prolonged impairment/damage				
			Disability				
			15. Outcomes				
			Recovered Recovering Not recovered				
SUSPECTED MEDICATION(S)	AN VARIOUS RESIDENCE DATE	CONTRACTOR OF	☐ Fatal ☐ Recovered with sequelae ☐ Unknown				
THE REPORT OF THE PERSON NAMED IN COLUMN			\$P\$ 19 20 10 10 10 10 10 10 10 10 10 10 10 10 10				
No (Brand/Generic) (If known) / Lot N		Noute 1	equency Therapy dates (OD, BD Indication Causality				
	lo. (if known) used	used	etc.) Date started Date stopped Indication Assessment				
Paditaxel -		₩.IV	OD 1/6/21/2/6/21 Prostate PossTh				
III			carcinoma				
V							
No 9. Action Taken (please tick)		10	O. Reaction reappeared after reintroduction (please tick)				
er C withdrawn Dose increased Dose	Dose not Not	Unkn	THE PROPERTY OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.				
withdrays reduced	changed applicable	e own	Yes No Effect unknown Dose (if reintroduced)				
ii ii							
list .							
iv							
11. Concomitant medical product including se	f-medication and her	bal remedie	es with therapy dates (Exclude those used to treat reaction)				
.No Name (Brand/Generic) Dose	used Route used	Frequer	ency Therapy dates Indication				
-		(OD, BD,	, etc.) Date started Date stopped				
S .							
in a							
Additional Information:		10	D. REPORTER DETAILS				
			6. Name and Professional Address: NT 'HOUNKOY Tolleto				
			DUPMC , Tallagan.				
		P)	Pin: 425309 E-mail V - HO				
		0	Decupation Dermatelo graf Signature: Halle				
		THE PERSON NAMED IN COLUMN					
		1	7. Date of this report (dd/mm/ww):				
Confidentiality: The patient's identity is	held in strict con	fidence a	and protected to the fullest except Proposition staff is not to a required from the public. Subgrission of a record does not				

Dr. Ulhas Patil Medil College

National Coordination Centre Pharmacovigilance Programme of India Ministry of Health & Family Welfare, Government of India

Sector-23, Raj Nagar, Ghaziabad-201002 Tel.: 0120-2783400, 2783401, 2783392

Fax: 0120-2783311

www.ipc.nic.in

Pharmacovigilance Programme of India for Assuring Drug Safety

ADVICE ABOUT REPORTING

A. What to report

- Report serious adverse drug reactions. A reaction is serious when the patient outcome is:
 - · Death
 - Life-threatening
 - Hospitalization (initial or prolonged)
 - · Disability (significant, persistent or permanent)
 - · Congenital anomaly
 - Required intervention to prevent permanent impairment or damage.
- Report non-serious, known or unknown, frequent or rare adverse drug reactions due to Medicines, Vaccines and Herbal products.

Note- Adverse Event Following Immunization can also be reported in Serious AEFI case Notification Form available on http://ipc.nic.in/showfile.asp?lid=650&EncHid=)

B. Who can report

- > All healthcare professionals (Clinicians, Dentists, Pharmacists and Nurses) can report adverse drug reactions C. Where to report
- > Duly filled Suspected Adverse Drug Reaction Reporting Form can be send to the nearest Adverse Drug Reaction Monitoring Centre (AMC) or directly to the National Coordination Centre (NCC).
- > Call on Helpline (Toll Free) 1800 180 3024 to report ADRs.
- Or can directly mail this filled form to pvpi@ipcindia.net or pvpi.ipcindia@gmail.com
- A list of nationwide AMCs is available at:

http://www.ipc.gov.in, http://www.ipc.gov.in/PvPI/pv_home.html

D. What happens to the submitted information

- Information provided in this form is handled in strict confidence. The causality assessment is carried out at AMCs by using WHO-UMC scale. The analyzed forms are forwarded to the NCC through ADR database. Finally the data is analyzed and forwarded to the Global Pharmacovigilance Database managed by WHO Uppsala Monitoring Centre in Sweden.
- The reports are periodically reviewed by the NCC-PvPI. The information generated on the basis of these reports helps in continuous assessment of the benefit-risk ratio of medicines.
- The information is submitted to the Steering committee of PvPI constituted by the Ministry of Health & Family Welfare. The Committee is entrusted with the responsibility to review the data and suggest any interventions that may be required.

E. Mandatory field for suspected ADR reporting form

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For ADRs Reporting Call on PvPI Helpline (Toll Free)

1800 180 3024

(9:00 AM to 5:30 PM, Working Days)

Dr. Ulhas Patil Medical C & Hospital, Jalgaon Kh.

Godavari Foundation's



Dr. Ulhas Patil Medical College & Hospital

Recognised by Medical Council of India, Approved by Central Govt. of India, New Delhi, and Affiliated to Maharashtra University of Health Science, Nashik

N.H.6 (Jalgaon-Bhusawal Road), Jalgaon (Kh.) - 425 309 Tal & Dist - Jalgaon Ph. No. (0257) 2366657 Fax: 2366648 E-Mail Id: dupmcj@yahoo.in

Date:-8/06/2021

CIRCULAR

All members of Pharmacovigilance committee are informed that meeting is arranged in Dean's office on 10/06/2021 at 3.00 pm

All members are requested to attend meeting

Copy to all members

Dr. Arvikar N. S.

Dean

Dr. Ulhas Patil Medical College & Hospital, Jalgaon kh

Sr No	Name
1	Dr. D. R. Chaudhari
2	Dr. Chandrayya Kante
3	Dr. Nilesh R. Bhirud
4	Dr. Sachin Ingle
5	Dr. S. V.Chaudhari
6	Dr.Rahul Bhavasar

Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.





Godavari Foundation's (Registered under the Bombay Public Trusts Act. 1950)

DR. ULHAS PATIL MEDICAL COLLEGE, JALGAON

PHARMACOVIGILANCE COMMITTEE

NH 6 (Jalgaon-Bhusawal Highway) Jalgaon Khurd (Dist. Jalgaon) M. S. Pin - 425 309 Phone: (0257) 2366657 Fax: (0257) 2366648

DATE: 30/01/2021 Location: Dean's

Office

Recorded By: Dr.D.R. Chaudhari

PVC/ 2021/ Minutes of Meeting

MEETING ATTENDED BY

Sr No	Name	Title	Organization	Signature
1	Dr. Devendra R. Chaudhari	Chairman	DUPMC, Jalgaon	W.
2	Dr. Chandrayya Kante	Member	DUPMC, Jalgaon	Soule
3	Dr. Nilesh R. Bhirud	Member	DUPMC, Jalgaon	Whiche
4	Dr. Sachin Ingle	Member	DUPMC, Jalgaon	Single
5	Dr. Sunil V. Chaudhari.	Member	DUPMC, Jalgaon	(010)
6	Dr. Rahul P. Bhavasar	Member	DUPMC, Jalgaon	Blee

MEETING LOCATION

Dr. Ulhas Patil Medical College and Hospital Jalgaon (Kh) at Dean's Office

MEETING START TIME

Meeting Schedule Start: 03.00 pm Meeting Actual Start: 03.05 pm

AGENDA

- i) To discuss the Adverse Drug Reactions reported by clinicians from hospital & periphery
- ii) To assess their causality with the drug
- iii) To see whether such reactions are reported from other places
- iv) Reporting this ADR to ADR monitoring centre (AMC).
- v) Discussion about increasing awareness of ADR monitoring and reporting

Minutes of meeting:-

- 1) DR. Prajakta from PG from skin department has reported 2 ADRs
 - Erythema multiforme developed from SODIUM VALPROATE on 7th January 2021
 - Fixed drug eruption by meftal spas (dicyclomine + mefenamic acid) on 20th January 2021.
- 2) These reactions were discussed and causality was assessed.
- 3) It was decided to send the ADR forms to zonal centre.

Da Ulhas Path Medical College & Hospital, Jalgaon Kh.



Meeting ended with thanks to Chairman and All Members.

5 MEETING END

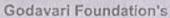
Meeting Schedule End: 04.00 pm Meeting Actual End: 4.15 pm

> Dr. D. R. Chaudhari Chairman

> > edical Co

Page 2 of 2

Dn Umas Patil Medical College & Nospital, Jalgaon Kh.





D.

Dr. Ulhas Patil Medical College & Hospital

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N.H.6 (Jalgaon- Bhusawal Road), Jalgaon (Kh.) - 425 309 Tal & Dist - Jalgaon Ph. No. (0257) 2366657 Fax : 2366648 E-Mail ld : dupmcj@yahoo.in Date:-28/01/2021

CIRCULAR

All members of Pharmacovigilance committee are informed that meeting is arranged in Dean's office on 30/01/2021 at 3.00 pm

All members are requested to attend meeting

Copy to all members

Dr. Arvikar N. S.

Dean

Dr. Ulhas Patil Medical College & Hospital, Jalgaon kh

Sr	Name
No_	
1	Dr. D. R. Chaudhari
2	Dr. Chandrayya Kante
3	Dr. Nilesh R. Bhirud
4	Dr. Sachin Ingle
5	Dr. S. V.Chaudhari
6	Dr.Rahul Bhavasar

Death
Death
Death
Whas Patil Medical College
& Mospital, Jalgaon Kh.







For VOLUNTARY reporting of Adverse Drug Reactions by Healthcare Professionals

INDIAN PHARMACOPOEIA COMMISSION	FOR AMC/NCC USE ONLY				
(National Coordination Centre-Pharmacovigilance Programme of India) Ministry of Health & Family Welfare, Government of India	AMC Report No. : Reg. No. //PD No. /OPD No./CR no. : No. info. available Worldwide Unique No. : IN-7, PC-301517455				
Sector-23, Raj Nagar, Chaziatiad-201002					
port Type o Initial of Follow up					
PATIENT INFORMATION	12. Relevant tests/ laboratory data with dates None-				
Patient Initials 2. Age at time of S. M to Ex Other to					
SVF Birth 38 4 4. Weight 56 Kgs					
SUSPECTED ADVERSE REACTION	13. Relevant medical/ medication history (e.g. allergies, race, pregnancy, smoking, alcohol use, hepatic/renal dysfunction etc.)				
Date of reaction started (dd/mm/yyyy) 7 202					
Date of recovery (dd/mm/yyyy) 18 1 2.0 2 2	· Alcohol · use : 5 yrs.				
Esythema Multiforma	14. Seriousness of the reaction: No □ if Yes □ (please tick anyone)				
Juliana					
	☐ Ufe threatening ☐ Required intervention to Prevent permanent				
	☐ Hospitalization/Prolonged impairment/damage				
	☐ Disability ☐ Other (specify)				
	15. Outcomes				
	☐ Recovered ☐ Recovering ☐ Not recovered				
SUSPECTED MEDICATION(S)	☐ Fatal ☐ Recovered with sequelae ☐ Unknown				
	equency Therapy dates				
	OD, BD Indication Causality				
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Concomitant medical product including self-medication and herbal remedie	s with therapy dates (Exclude those used to treat reaction)				
Name (Brand/Generic) Dose used Route used Frequen (OD, 80, 4	ncy Therapy dates Indication				
Nonc					
ditional Information:	REPORTER DETAILS				
	5. Name and Professional Address: Dx PON (OL) 10 (C)				
	n: 425300 E-mail pankon rate to a grant (or)				
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177	7. Date of this report (dd/mm/yyyy): 10/1/2].				
nfidentiality: The patient's identity is held in strict confidence an pected to and will not disclose the reporter's identity in response to	a regularit from the public Cohmission of a separt the net				
nstitute an admission that medical personnel or manufacturer or the	product caused of contributed to the reaction.				
A SAME STATE OF THE PARTY OF TH					
	MAN SA MICHONER CO				
	Dr. Ulhas Pati Medical College				

a mospital, Jalgaon Kh.

National Coordination Centre
Pharmacovigilance Programme of India
Ministry of Health & Family Welfare,
Government of India
Sector-23, Raj Nagar, Ghaziabad-201002
Tel.: 0120-2783400, 2783401, 2783392
Fax: 0120-2783311

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Pharmacovigilance
Programme of India for
Assuring Drug Safety

ADVICE ABOUT REPORTING

A. What to report

- > Report serious adverse drug reactions. A reaction is serious when the patient outcome is:
 - · Death
 - Life-threatening
 - · Hospitalization (initial or prolonged)
 - · Disability (significant, persistent or permanent)
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- Report non-serious, known or unknown, frequent or rare adverse drug reactions due to Medicines, Vaccines and Herbal products.

Note- Adverse Event Following Immunization can also be reported in Serious AEFI case Notification Form available on http://ipc.nic.in/showfile.asp?lid=650&EncHid=)

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 C. Where to report
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E. Mandatory field for suspected ADR reporting form

Patient initials, age at onset of reaction, reaction term(s), date of onset of reaction, suspected medication(s) and reporter information.

For ADRs Reporting Call on PvPI Helpline (Toll Free)

1800 180 3024

(9:00 AM to 5:30 PM, Working Days)

Dr. Ulhas Patil Medical College of * [Exident Patil Medical College o

& Hospital, Jalgaon Kh.





For VOLUNTARY reporting of Adverse Drug Reactions by Healthcare Professionals

INDIAN PHARMACOPOEIA COMMISSION (National Coordination Centre-Pharmacovigilance Programme of India) Ministry of Health & Family Westere, Government of India Sector-23, Rej Naper, Ghaziabad-201002 Report Type of Initial Displayer, Ghaziabad-201002 Report Type of Initial Displayer, Ghaziabad-201002 A PATIENT INFORMATION 1. Patient Initials 2. Age at time of Event or Date of Birth 26 495 4. Weight 53 kgs BI SUSPECTED ADVERSE REACTION 5. Date of reaction started (dd/mm/yyyy) 2. 0 1 2 2 1 2 1 2 1 2 1 2 1 1 2 1 1 1 1 1	fo avaiable 00 51 7387
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ATS. Event or Date of Birth 26 4y5 4. Weight 53 kgs BI SUSPECTED ADVERSE REACTION 5. Date of reaction started (dd/mm/yyyy) 20. 1 2 pregnancy, smoking, alcohol use, hepatic/rena	
4. Weight 53 Kgs BI SUSPECTED ADVERSE REACTION 5. Date of reaction started (dd/mm/yyyy) 20 1 2 pregnancy, smoking, alcohol use, hepatic/rena	
5. Date of reaction started (dd/mm/yyyy) 20 1 2 pregnancy, smoking, alcohol use, hepatic/rena	
	allergies, race,
Date of recovery (dd/mm/yyyy) 2 = 1 11 1	dysfunction etc.)
7. Describe reaction or problem None None	
Fixed Drug Cruption 14. Seriousness of the reaction: No Different	
	(please tick anyone
1 crythematoric _ L. V . Death(Death(Congenita	l-anomaly
Politiches; 1 over 14 perpignented Death (D	intervention to
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The UL. Disability Other (spe	rcify)
□ Recovering	D W
□ Fatal □ Recovered with sequelae	□ Not recovered
SUSPECTED MEDICATION(S)	C disknown
8. Name Manufacturer Batch No. Exp. Date Dose Route Frequency Therapy dates	
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dditional Information: D. REPORTER DETAILS	CHECK CONTRACTOR
16. Name and Professional Address: Dr Ponto	i la lela
None Pin: 425309 E-mail for Kai - Tatele &	Mmcni
None Pin: 425 309 E-mail Parizaj Tatala & Tel. No. (with STD code) 9970 2 2731	aman, colo
Occupation: Desmatolog 194: Signature: Pr	alele:
17. Date of this report (dd/mm/yyyy): 9.2 1	
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	100
Dr. Ulhas Patil Medi Mollege & Hospital, Jalgaro Ch	JALGAON KH
& Hospital, Jalgaon Kh.	() E

National Coordination Centre Pharmacovigilance Programme of India

Ministry of Health & Family Welfare, Government of India

Sector-23, Raj Nagar, Ghaziabad-201002 Tel.: 0120-2783400, 2783401, 2783392

> Fax: 0120-2783311 www.ipc.nic.in

Pharmacovigilance
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For ADRs Reporting Call on PvPI Helpline (Toll Free

1800 180 3024

(9:00 AM to 5:30 PM, Working Days) Dr. Ulhas Pa

Dr. Ulhas Patil Medical Colla

edical c

LGAON KH

& Hospital, Jalgaon Kh.

Godavari Foundation's



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Date:-23/02/2021

CIRCULAR

All members of Pharmacovigilance committee are informed that meeting is arranged in Dean's office on 25/02/2021 at 3.00 pm

All members are requested to attend meeting

Copy to all members

Dr. Arvikar N. S.

Dr. Ulhas Patil Medical College & Hospital, Jalgaon kh

Sr No	Name
1	Dr. D. R. Chaudhari
2	Dr. Chandrayya Kante
3	Dr. Nilesh R. Bhirud
4	Dr. Sachin Ingle
5	Dr. S. V.Chaudhari
6	Dr.Rahul Bhavasar

Dr. Ulias Pasil Modical College & Husbler Meaon Kh.





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DR. ULHAS PATIL MEDICAL COLLEGE, JALGAON

PHARMACOVIGILANCE COMMITTEE

NH 6 (Jalgaon-Bhusawal Highway) Jalgaon Khurd (Dist. Jalgaon) M. S. Pin - 425 309 Phone: (0257) 2366657 Fax: (0257) 2366648

PVC/ 2021/ Minutes of Meeting

DATE: 25/02/2021 Location: Dean's

Recorded By: Dr.D.R. Chaudhari

MEETING ATTENDED BY

C- No	Name	Title	Organization	Signature
Sr No	Dr. Devendra R. Chaudhari	Chairman	DUPMC, Jalgaon	K
1		Member	DUPMC, Jalgaon	Mante
2	Dr. Chandrayya Kante	Member	DUPMC, Jalgaon	Robert
3	Dr. Nilesh R. Bhirud		DUPMC, Jalgaon	Sange
4	Dr. Sachin Ingle	Member	The second secon	
5	Dr. Sunil V. Chaudhari.	Member	DUPMC, Jalgaon	awi
6	Dr. Rahul P. Bhavasar	Member	DUPMC, Jalgaon	Wes-

2 MEETING LOCATION

Dr. Ulhas Patil Medical College and Hospital Jalgaon (Kh) at Dean's Office

3 MEETING START TIME

Meeting Schedule Start: 03.00 pm Meeting Actual Start: 03.05 pm

AGENDA

- i) To discuss the Adverse Drug Reactions reported by clinicians from hospital & periphery
- ii) To assess their causality with the drug
- iii) To see whether such reactions are reported from other places
- iv) Reporting this ADR to ADR monitoring centre (AMC).
- v) Discussion about increasing awareness of ADR monitoring and reporting

Minutes of meeting:-

- 1) DR. Prajakta from PG from skin department has reported 2 ADRs
 - a. Fixed drug eruption by etoricoxib on 10th February 2021
 - b. Acral erythema & erythrodysthesia developed from Docetaxel on 16th February 2021.
- These reactions were discussed and causality was assessed.
- It was decided to send the ADR forms to zonal centre.

Meeting ended with thanks to Chairman and All Members.

Dr. Ulhas Patil Medical College & Mesnital, Jalgaon Kh.

edica/

5 MEETING END

Meeting Schedule End: 04.00 pm Meeting Actual End: 4.15 pm

> Dr. D. R. Chaudhari Chairman

Dean Markey

Br. Ulhas Patil Medical College & Nespital, Jalgaon Kh.



Page 2 of 2

Godavari Foundation's



Dr. Ulhas Patil Medical College & Hospital

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N.H.6 (Jalgaon- Bhusawal Road), Jalgaon (Kh.) - 425 309 Tal & Dist - Jalgaon Ph. No. (0257) 2366657 Fax :2366648 E-Mail Id : dupmcj@yahoo.in

Date:-24/03/2021

CIRCULAR

All members of Pharmacovigilance committee are informed that meeting is arranged in Dean's office on 25/03/2021 at 3.00 pm

All members are requested to attend meeting

Copy to all members

Dr. Arvikar N. S.

Dr. Ulhas Patil Medical College & Hospital, Jalgaon kh

Sr No	Name
1	Dr. D. R. Chaudhari
2	Dr. Chandrayya Kante
3	Dr. Nifesh R. Bhirud
4	Dr. Sachin Ingle
5	Dr. S. V.Chaudhari
6	Dr.Rahul Bhavasar

Dr. Ulhas Patil Medical College & Mospital, Jalgaon Kh.





Godavari Foundation's (Registered under the Bombay Public Trusts Act. 1950)

DR. ULHAS PATIL MEDICAL COLLEGE, JALGAON PHARMACOVIGILANCE COMMITTEE

NH 6 (Jalgaon-Bhusawal Highway) Jalgaon Khurd (Dist. Jalgaon) M. S. Pin - 425 309

Phone: (0257) 2366657 Fax: (0257) 2366648

PVC/ 2021/ Minutes of Meeting

DATE: 25/03/2020 Location: Dean's

Office Recorded By: Dr.D.R. Chaudhari

edical /

MEETING ATTENDED BY

Sr No	Name	Title	Organizati	
1	Dr. Devendra R. Chaudhari	Chairman	Organization	Signatúre
2	Dr. Chandrayya Kante		DUPMC, Jalgaon	W
		Member	DUPMC, Jalgaon	Nerbe
3	Dr. Nilesh R. Bhirud	Member	DUPMC, Jalgaon	Whelie
4	Dr. Sachin Ingle	Member	A STATE OF THE PARTY OF THE PAR	Imaline
5	Dr. Sunil V. Chaudhari.	THE RESERVE OF THE PARTY OF THE	DUPMC, Jalgaon	Ssingle
6		Member	DUPMC, Jalgaon	BM
U	Dr. Rahul P. Bhavasar	Member	DUPMC, Jalgaon	10-

2 MEETING LOCATION

Dr. Ulhas Patil Medical College and Hospital Jalgaon (Kh) at Dean's Office

MEETING START TIME

Meeting Schedule Start: 03.00 pm Meeting Actual Start: 03.05 pm

4 AGENDA

- i) To discuss the Adverse Drug Reactions reported by clinicians from hospital & periphery
- ii) To assess their causality with the drug
- iii) To see whether such reactions are reported from other places
- iv) Reporting this ADR to ADR monitoring centre (AMC).
- v) Discussion about increasing awareness of ADR monitoring and reporting

Minutes of meeting:-

- 1) DR. Prajakta from PG from skin department has reported 2 ADRs
 - a. Multiple oral ulcers by amoxicillin on 6th March 2021
 - b. Maculopapular rash on 8th March 2021.
- 2) These reactions were discussed and causality was assessed.
- 3) It was decided to send the ADR forms to zonal centre. Meeting ended with thanks to Chairman and All Members.

Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.

5 MEETING END

Meeting Schedule End: 04.00 pm Meeting Actual End: 4.15 pm

> Dr. D. R. Chaudhari Chairman

IDean Has Patil Medical College

& Hospital, Jalgaon Kh.



Page 2 of 2



For VOLUNTARY reporting of Adverse Drug Reactions by Healthcare Professionals

			COMMISSION			FOR AMC/NCC USE ONLY			
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Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.

TO VIENIES

National Coordination Centre Pharmacovigilance Programme of India

Ministry of Health & Family Welfare, Government of India

Sector-23, Raj Nagar, Ghaziabad-201002 Tel.: 0120-2783400, 2783401, 2783392

> Fax: 0120-2783311 www.ipc.nic.in

Pharmacovigilance
Programme of India for
Assuring Drug Safety

ADVICE ABOUT REPORTING

A. What to report

- Report serious adverse drug reactions. A reaction is serious when the patient outcome is:
 - · Death
 - · Life-threatening
 - · Hospitalization (initial or prolonged)
 - Disability (significant, persistent or permanent)
 - · Congenital anomaly
 - · Required intervention to prevent permanent impairment or damage
- Report non-serious, known or unknown, frequent or rare adverse drug reactions due to Medicines, Vaccines and Herbal products.

Note- Adverse Event Following Immunization can also be reported in Serious AEFI case Notification Form available on http://ipc.nic.in/showfile.asp?lid=650&EncHid=)

B. Who can report

- All healthcare professionals (Clinicians, Dentists, Pharmacists and Nurses) can report adverse drug reactions
 C. Where to report
- Duly filled Suspected Adverse Drug Reaction Reporting Form can be send to the nearest Adverse Drug Reaction Monitoring Centre (AMC) or directly to the National Coordination Centre (NCC).
- Call on Helpline (Toll Free) 1800 180 3024 to report ADRs.
- Or can directly mail this filled form to pvpi@ipcindia.net or pvpi.ipcindia@gmail.com
- A list of nationwide AMCs is available at: http://www.ipc.gov.in, http://www.ipc.gov.in/PvPI/pv_home.html

D. What happens to the submitted information

- Information provided in this form is handled in strict confidence. The causality assessment is carried out at AMCs by using WHO-UMC scale. The analyzed forms are forwarded to the NCC through ADR database. Finally the data is analyzed and forwarded to the Global Pharmacovigilance Database managed by WHO Uppsala Monitoring Centre in Sweden.
- The reports are periodically reviewed by the NCC-PvPI. The information generated on the basis of these reports helps in continuous assessment of the benefit-risk ratio of medicines.
- The information is submitted to the Steering committee of PvPI constituted by the Ministry of Health & Family Welfare. The Committee is entrusted with the responsibility to review the data and suggest any interventions that may be required.

E. Mandatory field for suspected ADR reporting form

Patient Initials, age at onset of reaction, reaction term(s), date of onset of reaction, suspected medication(s) and reporter information.

1800 Por ADRs Reporting Call on Port Helpline (Toll Free)

1800 Dean

(9:00 AM to 5:30 PM, Working Doys) Dr. Ulhas Patil Medical College
& Hospital, Jalgaon Kh.





For VOLUNTARY reporting of Adverse Drug Reactions by Healthcare Professionals

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Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.

National Coordination Centre Pharmacovigilance Programme of India

Ministry of Health & Family Welfare,

Government of India

Sector-23, Raj Nagar, Ghaziabad-201002 Tel.: 0120-2783400, 2783401, 2783392

> Fax: 0120-2783311 www.lpc.nic.in

Pharmacovigilance
Programme of India for
Assuring Drug Safety

ADVICE ABOUT REPORTING

A. What to report

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- The information is submitted to the Steering committee of PvPI constituted by the Ministry of Health & Family Welfare. The Committee is entrusted with the responsibility to review the data and suggest any interventions that may be required.

E. Mandatory field for suspected ADR reporting form

Patient initials, age at onset of reaction, reaction term(s), date of onset of reaction, suspected medication(s) and reporter information.

1800 1803 Dean

(9:00 AM to 5:30 PM) Working Coys)

Dr. Ulhas Patil Med SI College

A Hospital, Jalgaon Kh.





For VOLUNTARY reporting of Adverse Drug Reactions by Healthcare Professionals

National Coordination Centre Pharmacoviglance Programme of India) Ministry of Health & Family Welfare, Covernment of India Section-23, Rig Magar, Character's 201002 Report Type Official Display Follow up A. PATIENT INFORMATION 1. Patient Initials 2. Age at time of Event or Date of Birth HO Us A. Welght 60 Kgs B. SUSPECTED ADVERSE REACTION 5. Date of reaction started (old/mm/ywy) 16 3 21 7. Describe reaction or problem No information Death D
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expected to and will not disclose the reporter's identity in response to a request from the public. Submission of a report does not constitute an admission that medical personnel or manufacturer or the product coursed or contributed to the reaction.
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National Coordination Centre
Pharmacovigilance Programme of India
Ministry of Health & Family Welfare,
Government of India

Sector-23, Raj Nagar, Ghaziabad-201002 Tel.: 0120-2783400, 2783401, 2783392

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www.ipc.nic.in

Pharmacovigilance
Programme of India for
Assuring Drug Safety

ADVICE ABOUT REPORTING

A. What to report

- > Report serious adverse drug reactions. A reaction is serious when the patient outcome is:
 - Death
 - · Life-threatening
 - Hospitalization (initial or prolonged)
 - Disability (significant, persistent or permanent)
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- Report non-serious, known or unknown, frequent or rare adverse drug reactions due to Medicines, Vaccines and Herbal products.

Note- Adverse Event Following Immunization can also be reported in Serious AEFI case Notification Form available on http://ipc.nic.in/showfile.asp?lid=650&EncHid=)

B. Who can report

- All healthcare professionals (Clinicians, Dentists, Pharmacists and Nurses) can report adverse drug reactions
 C. Where to report
- Duly filled Suspected Adverse Drug Reaction Reporting Form can be send to the nearest Adverse Drug Reaction Monitoring Centre (AMC) or directly to the National Coordination Centre (NCC).
- > Call on Helpline (Toll Free) 1800 180 3024 to report ADRs.
- Or can directly mail this filled form to pvpl@ipcindia.net or pvpi.ipcindia@gmail.com
- A list of nationwide AMCs is available at: http://www.ipc.gov.in, http://www.ipc.gov.in/PvPI/pv_home.html

D. What happens to the submitted information

- Information provided in this form is handled in strict confidence. The causality assessment is carried out at AMCs by using WHO-UMC scale. The analyzed forms are forwarded to the NCC through ADR database. Finally the data is analyzed and forwarded to the Global Pharmacovigilance Database managed by WHO Uppsala Monitoring Centre in Sweden.
- The reports are periodically reviewed by the NCC-PvPI. The information generated on the basis of these reports helps in continuous assessment of the benefit-risk ratio of medicines.
- The information is submitted to the Steering committee of PvPI constituted by the Ministry of Health & Family Welfare. The Committee is entrusted with the responsibility to review the data and suggest any interventions that may be required.

E. Mandatory field for suspected ADR reporting form

Patient initials, age at onset of reaction, reaction term(s), date of onset of reaction, suspected medication(s) and reporter information.

For ADRs Reporting Call on PvPI Helpline (Toll Free)

1800 18 (Adie (C.) 4

(9:00 AM to 5:30 PM, Working Only)

Dr. Ulhas Patel Michael College

& Ilospital, Jalgaon Kh.



For VOLUNTARY reporting of Adverse Drug Reactions by Healthcare Professionals

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Safety Manual	Date of Issue: 01/09/2016
	Rev Number:00

Dr. Ulhas Patil Medical College and General Hospital, Jalgaon

Safety Manual



Dr. Ulhas Petil Medical College & Hospital, Jalgaon Kh.

Safety Manual	Date of Issue: 01/09/2016
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	1.Care Environment
	2.Safety Management
	3. Diagnostic Services Safety Manual
	4.Risk Management
	5.Communcable Disease
	6.Regulation and Standard
	7. Hospital Safety Committee
	8. Hospital Safety Officer
	9. Safety Inspection and Records
	10.Hazard Communication and Reporting of Event



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A. Purpose: This Safety Management Plan serves to describe the policies and processes in place to minimize safety risks to patients and staff through a comprehensive hazard surveillance program and analysis of aggregate information.

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B. Scope: The Safety Management Plan defines the mechanisms for controlling hazards, promoting and implementing safety measures for the patients, staff in particular and the hospital in general.

C. Policy:

1. Care Environment (CE): is made up of three components: building(s), equipment, and people. The following are identified as elements and issues that can contribute to positively or negatively influencing patient outcomes, satisfaction, patient and staff safety that are appropriate and consistent with the clinical philosophy, security, orientation and access to the outside environment, ease in traversing both the inside and outside of facilities, efficient layouts that support staffing and overall function.

To effectively manage the CE the following should be done:

- Reduce and control environmental hazards and risks
- Prevent accidents and injuries
- Maintain safe conditions for patients, staff, students and visitors
- Maintain CE that is sensitive to patient needs for comfort, social interaction, and positive distraction
- Maintain CE that minimizes unnecessary environmental stresses for patients, staff and visitors.

2. SAFETY MANAGEMENT:

a. HAZARD IDENTIFICATION & RISK ANALYSIS (HIRA) PROGRAMME:

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- The purpose of this programme is to ensure the level of safety compliance at the hospital
 and to identify any situation that detracts from our goal of providing a safe and secure
 environment for our patients, employees and visitors.
- The HIRA Program is based on review of incident reports, employee accident reports, facility rounds, Infection Control and Security Reports. In addition, reports from outside agencies, such as Fire Department, Electrical Inspectors, etc., will be used in this Program.
- The Quality & Safety Committee will review the hospital's performance based on problem indicators selected by the Committee developed from the data collected from the HIRA program. E.g. for Indicators – Needle stick injury, reducing the patient falls, etc.
- Facility Inspection Round is carried out once a month. This tour will be done by the members of Safety Committee. Depending on the need other members also participate in this activity.
- All the employees report any deviation from safety norms observed in their work areas. In order to achieve this all the employees are trained to identify the deviations on a regular basis.

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- The Safety & Risk Management Committee will monitor the effectiveness of action taken based on the established indicators.
- The Quality & Safety Committee will be responsible for making revisions to indicators and action taken if process is not effective.
- The Committee will determine when an indicator is no longer needed, based on effective resolutions to the problem identified.

Hazard identification is the process used to identify all possible situations in the hospital where people (patient, staff, visitors etc.) may be exposed to injury, infections or disease. The risk management authorities undertake periodic evaluation of safety precautions to be followed by each department.

For hazard recognition the following steps will be undertaken:

- 1. Both Clinical and Non-clinical audits will be undertaken on a periodical basis to identify the measures taken to prevent/reduce the impact of the potential hazards.
- 2. All the staff of the hospital will be encouraged to routinely assess all activities to identify potential hazards.
- 3. Departmental Heads will identify hazards within their specific area of control. The same should be notified to the appropriate hospital authorities for immediate corrective actions.

b. ELECTRICAL SAFETY:

The following measures are undertaken to ensure Electrical safety:

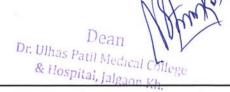
- 1. Routine Inspection of the power outlets throughout the hospital by the electrician.
- 2. Trip Switches are located in different parts of the hospital to prevent short circuits.
- 3. Periodic inspection of wires to ensures that they are in appropriate conditions.
- 4. Before any electrical appliance is brought into DUPMCH, a safety inspection is Provided.
- 5. Electrical equipment not required during night are switched off.

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- 6. Areas around electrical switchboards must be kept clear for a distance of at least 1 meter.
- 7. ABC type fire extinguisher will be located adjacent to electrical switchboards.

i) POWER LOSS:



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The Hospital may experience temporary power losses due to

- Storms
- 2. Power company disruptions, or damage to the service lines entering the hospital.
- 3. Malfunctioning of the internal electrical wire system of the hospital.

ii) IMMEDIATE ACTION:

In the event of power loss, every effort should be made to immediately turn off all electrical equipment (if required) within an employee's work area before power is restored to protect the equipment.

iii) REPORTING POWER LOSSES:

In general, the loss of power or the disruption in normal electrical service should be reported immediately to the Electrician.

Maintenance staff will investigate the scope and condition of power loss and proceed to correct the matter accordingly.

c) BIOLOGICAL HAZARD:

Two primary sources for biological hazards has been identified which are:

- 1. Infectious Sharp objects.
- 2. Blood and Body fluid spills.

I) INFECTIOUS SHARP OBJECTS:

- Sharps are any medical or non-medical equipment that is capable of cutting and/or puncturing the skin.
- Sharps' injuries represent the major occupational cause of accidents involving potential exposure to blood borne illnesses.

1. The Hospitals policy on Sharps Handling is:

- Any equipment designated as a sharp must be handled and disposed of safely
- Sharps are to be handled carefully at all times.
- Sharps are designated as clinical waste.

2. PROCEDURE

Sharps must be disposed of at point of use.

Used needles:

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- Must not be recapped after use unless using an appropriate device.
- Must not be removed from syringes by hand.
- Must not be bent, broken or otherwise manipulated by hand.
- Must be destroyed immediately after its use.
- Used disposable sharps are disposed of in a designated, clearly marked, puncture resistant container.
- Reusable sharps are disposed of in a clearly labeled, puncture resistant container for transport to the reprocessing area (CSSD).
- Sharps' containers must be sealed and replaced when 3/4th full.

ii. BLOOD AND BODY FLUID SPILLS:

1. The Hospitals policy on Blood and Body Spills is:

- Blood and body fluid spills must be cleaned up immediately or as soon as possible.
- Standard precautions must be used when cleaning up spills of blood or body fluids.
- Gloves and other personal protective equipment appropriate for the task must be worn.
- Hands must be washed properly after the spill has been cleaned up.

2. Procedure

The following points should be taken into account while cleaning up body fluids:

- Type of body fluid
- Size of spill
- Surface type area involved

Impervious Surfaces:

- a. Wipe the spill up using absorbent paper towel.
- b. Wash the area with water and detergent.
- c. If there is a likelihood of bare skin contact with the surface, the area is disinfected with sodium hypochlorite solution.

Spill kit should be kept at each floor for cleaning of large spills

Operating theatres

a. Spills should be attended to as soon as it is safe to do so.

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b. Area to be disinfected with sodium hypochlorite.

Bathrooms and toilets



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- a. Spill are hosed off into sewerage system and are flushed with water and detergent.
- b. The area is disinfected with sodium hypochlorite.

A detailed inference to the preventive measures undertaken to control biological hazards can be drawn from the following manual:

1. Hospital Infection Control Manual.

The Infection Control Manual can be referred for instruction guidelines regarding management of hazardous waste.

d. FIRE PROTECTION:

Incidents of fire has been termed as "CODE RED".

In an incident of fire the staff has been instructed not to shout the word "FIRE" instead of that the word "CODE RED" to be used for informing the other staff about the incidence of fire.

The two-fold objectives of the Fire Safety Plan are:

- i. **Fire Prevention:** To prevent the incidence of fire by implementing appropriate measure to control fire hazards in the building and by the maintenance of the building facilities provided for the safety of the occupants.(patients, staff, visitors etc).
- a. The hospital has been declared 'No Smoking' zone.
- b. Smoke Detection Devices are placed in different parts of the hospital, incase of the fire, on detecting smoke the devices are activated and an hooter is alarmed in the security office.
- c. Fire Extinguisher: Fire extinguishers, in appropriate sizes and types (ABC), are provided throughout the hospital in every floor of the hospital. Extinguishers are inspected as required by a qualified contractor. The theft of or tampering with an extinguisher should be reported immediately to the Maintenance In charge.
- ii. **Emergency Evacuation:** To establish a systematic method of safe and orderly evacuation of an area or building, by and of its occupants, in case of fire or other emergency.

The following procedures are observed to minimize the effects of Fire Accidents in the hospital:

iii. The R.A.C.E. Procedure is followed:

RESCUE

Remove patients or others in immediate danger, and the door behind is closed. If the person is busy in rescue effort, he should shout "CODE RED" so that other employees can pull the alarm/dial code red emergency Notical

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· Alarm:

Break open Alarm system are placed in different parts of the hospital which can be activated at the time of fire by breaking the glass panel.

Smoke detectors are also located in different parts of the hospital which in the event of detecting smoke will activate the alarm system in the in house telephone exchange.

Contain:

Contain the fire by closing doors and windows so that it does not spread to other parts of the hospital.

Extinguish/evacuate

- i. Extinguish fire if possible.
- ii. Use correct extinguisher for the type of fire.
- iii Evacuate all persons to a safe area, if necessary.
- iv. Follow directions of Safety Officer, Fire Department or Nursing Supervisor.

Fire plan is placed in every floor which indicates the exact location of the **fire exits** and **fire extinguishers** hence in case of any fire accidents; the nearest fire exit in the floors can be easily traced.

The procedure for use of any fire extinguisher is:

- 1. Pull Pin (from handles)
- 2. Aim at base of fire
- 3. Squeeze handles
- 4. Sweep nozzle or hose from side to side

iv) Fire Training and Drills:

Fire Training and Fire drills are held at periodic intervals .All employees are provided adequate fire training, they are informed about the fire evacuation procedures including fire exits located in their work places.

The following special precautions are also undertaken:

v) Exits:

No obstructions may be placed in front of or upon any exit dop

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No aisle, exit access, or stairway may be obstructed with furniture or other obstructions so
as to reduce the required width of the exit unless it is required for some maintenance
purpose or during night hours when the main entrance is closed.

vi) Railings, Steps and Walks:

The area immediately outside of building exits will be maintained free of material at all times. Vehicles are not permitted on sidewalks immediately adjacent to an exit.

5) The policy on laboratory services and radiology services can be referred for laboratory and radiation safety procedures observed by the department in particular and the hospital n general.

6) RISK MANAGEMENT:

DUPMCH recognizes and attaches greatest importance to and concern for, the safety of all its patients, hospital staff and the users of the premises under its control .Consequently the hospital strives to ensure that accidents, incidents and near misses are identified, reported and action taken to help ensure the safety and security of all staff, patients, visitors and other users of the hospital.

7) COMMUNICABLE DISEASE

DUPMCH is committed to assure, to the extent possible, that each employee enjoys safe and healthful work conditions. The Hospital, in its effort to control communicable diseases on the hospital, has adopted this provision.

- i. Persons infected or reasonably believed to be infected with communicable diseases will not be restricted in their access to Hospital services or facilities unless medicallybased judgments in individual cases establish restriction is necessary to the welfare of the individual, patients and other members of the institution, or others associated with the institution through clinical, cooperative, intern, or other such experience, involving the general public.
- ii. Persons known to have, or have a reasonable basis for believing, that they have been infected
 - or have a communicable disease which may pose a threat to others are expected to seek expert
 - advice about their health circumstances and are obligated, ethically and legally, to conduct

themselves so as to protect themselves and others.

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iii. Employees or Applicants Currently Infected

Any applicant or currently enrolled employee who is known to have a communicable disease (including human immunodeficiency virus (HIV), hepatitis B, and other blood borne disease) will be individually evaluated and all enrollment decisions concerning the individual will be based upon a consideration of the following factors:

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- a) The potential harm that the individual poses to other people,
- b) The ability of the individual to accomplish the objectives of the assignment, and
- c) Whether or not a reasonable accommodation can be made that will enable the individual to safely and efficiently accomplish the objectives and specific tasks for the assignment without significantly exposing the individual or other persons to the safety of infection. All employees who have a known communicable disease will be assessed as needed by appropriate medical staff. The evaluation of an applicant or currently enrolled employee with a known communicable disease will include a physician's statement of the individual's health status as it relates to the individual's ability to adequately and safely accomplish the essential objectives of the applicant's or employee's assignment. The physician's statement must also indicate the nature and extent of the individual's susceptibility to infectious diseases often encountered when accomplishing the objectives of the individual's assignment.

Each new employee is required to undergo pre employment medical examination prior to their reporting to duty and all the existing employees of the organization have to undergo annual medical check on a regular basis. The Food Handlers are required to under medical check up once every six month.

6. Regulations and Standards:

The Hospital ensures strict adherence to the required standards and performs its operations within the purview of the law of the land so as ensure utmost safety for its patients ,staff ,visitors etc. The required licenses and other regulatory requirements are duly satisfied.

7. Hospital Quality &Safety Committee:

The Hospital Quality &Safety Committee is a multidisciplinary committee consisting of five members. It meets at least six times in a year to evaluate the various quality and safety aspects of the hospital .The Committee undertakes detail analysis of the ongoing monitoring activities and gives its feedback on the same .The Committee submits its report to the hospital administrator.

- i. The Hospital Quality &Safety Committee evaluates the ongoing monitoring activities on various aspects of the following problems:
- Injuries to patients/ visitors
- Property damage.
- Occupational illnesses and injuries to staff
- Hazardous materials and waste spills, exposures, and other related incidents
- Security incidents involving patients staff, students and visitors at DUPMCH.

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- Fire-safety management problems, deficiencies, and failures.
- Medical equipment-management problems, failures, and user errors
- Utility systems management problems, failures, or user errors.
- Staff Unavailability (such as mass casualty, natural disasters)

ii. Role of the Committee:

- A. Provide guidance and direction in all phases of the Quality &Safety Management Program.
- B. Pro-active safety risk assessments of the clinical and clinical support areas of hospital.
- C. Facilitates the Environmental Monitoring Rounds.
- D. Advising management of unsafe conditions or of non-compliance with regulations and standards.
- E. Conducts on-going safety education classes.
- F. Responsible for proposing/revising safety policies.

iii. Records and Reports:

- 1. Both the quarterly and annual reports are to evaluate the objectives, scope, performance and effectiveness of each of the CE management plans.
- Both quarterly and annual reports are compiled, trended and presented to the Hospital Quality &Safety Committee.
- 3. The Hospital Quality & Safety Committee submits the reports to the hospital Administrator.
- 4. The annual evaluation includes recommendations for Performance Improvement during the following year.

8.HOSPITAL SAFETY OFFICER -

i. Authority

- Appointed by the Hospital Administrator
- Reports to the designated authorities on all matters pertaining to safety matters

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- Has the authority to shut down any process that is considered to be in violation of policy until the issue is resolved by Head of Department or Officer
- Has the authority to enter all areas of the Hospital, assess safety practices

ii. Responsibilities

Administer safety policies of the hospital and department

Liaise with hospital authorities and other regulatory authorities

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- Inspect laboratories and other areas to ensure safety practices are being observed
- Advise Head of Department of the various department on new and proposed legislation, together with safe work practices needed for compliance
- Ensure suitable personnel are appointed to positions to oversee biohazards, chemicals and radiation matters within the respective department
- Prepare Departmental procedures dealing with health and safety issue within the Department
- Identify training needs and arrange for Departmental staff and student training in consultation with Hospital Officers.

9. SAFETY INSPECTION AND RECORDS:

The hospital undertakes periodic inspection of the safety precautions undertaken either internally or with the help of an appropriate external agency. The reports of the safety inspections are reviewed by the hospital's safety committee and the same is submitted to appropriate authority as and when required.

The Safety Officer or Committee may require periodic assessment of the following inventory:

- a. Environmental (lighting, dusts, gases, sprays, noises).
- b. Hazardous materials (flammable and caustic).
- c. Equipment (biomedical equipment's etc.).
- d. Power equipment (boilers, motors, etc.).
- e. Electrical equipment (switches, breakers, fuses, outlets, connections).
- f. Hand tools.
- g. Personal protective equipment (safety glasses, ventilators, radiation safety aprons etc).
- h. Personal service/first aid supplies (Medical Check Up).
- Fire protection equipment (alarms and extinguishers).
- Walkways/roadways (sidewalks, roadways).
- k. Transportation equipment (Ambulances, lifts).
- Containers (hazardous waste bags).
- m. Structural openings (windows, doors, stairways).
- n. Buildings/structures (floors, roofs, planter walls, fences).

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o. Miscellaneous (any items not covered above).

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Each inspection report will record pertinent safety management violations, noncompliance items, and observe deficiencies. Employees directly involved in the use or operation of the facilities or function being inspected is to participate in the inspection process.

10. HAZARD COMMUNICATION:

a. General

Any incident in the hospital which effects the safety policies of the hospital will be investigated by the Hospital Quality &Safety Committee and the report would be forwarded to the appropriate higher authority for further action .The following incidents should be immediately informed to the Safety Officer of the hospital:

- 1. Serious injury to patients.
- 2. Serious injury to employees.
- 2. Serious injury, caused by Hospital operations, to another party.
- 3. Major loss of Hospital equipment or property.
- 4. Major loss of equipment or property belonging to another party caused by hospital operations.

b. Reporting Accidents

i. Any accident should be immediately investigated by the employee's supervisor or appropriate staff member.

- ii. Incident Report Form should be completed and filed as soon as possible with the Safety Officer for reporting purposes and for further investigation and resolution.
- iii. Upon learning of a serious accident involving employees, patients, or equipment, an employee must notify the Hospital Safety Officer immediately. Serious accidents will be investigated by the Hospital Safety Officer. Reports for any such incident is to be forwarded

to the Quality & Safety committee of the hospital.

c. Release of Information

In the case of accidents, supervisors and employees must not release information to thenews media so as to avoid creation of unwanted panic among the people. Information to the media is to be provided by the top management authorities. If contacted by the media please refer these individuals to the appropriate persons

d. Safety education:

The Hospital requires all new employees to attend new employee safety orientation programme. This orientation is intended to provide new employees withan awareness of safety importance and their responsibility for maintaining a safety andhealthy work

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environment, and to give an overview of workplace safety basics. Theresults should be more safety conscious employees who are receptive to learning and practicing the specifics of a safe, healthy workplace.

Safety Orientation for New Employees

All new employees receive safety orientation. The orientation will consist of the following information: The Safety Management Officer or external instructors will present the general safety policies of the Hospital, and the new employee's supervisor will present:

- 1. Procedures and policies specific to the new employee's position
- 2. Fire reporting procedures
- 3. Fire extinguisher location and use
- 4. Fire prevention
- 5. Safe lifting techniques
- 6. Any information the supervisor feels will provide the new employee with a safe environment.

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Surgical Safety Checklist (To be filled by the Anaesthetist, Surgeon and Nurse)

	Patient Name:	
· Chaplillat	Gender:	Age:
CHECKIIST	Reg. No.:	IPD N
ist, Surgeon and Nurse)	Ward	Bed N

Age:	IPD No.:	Bed No.
2	list of the	

Date:

Consultant:

⇒ SIGN OUT	Before patient leaves the operating room	Nurse verbally confirms with team	 Instruments, swabs and sharp counts are complete 	□Yes □ N.A.	 Name of the procedure been recorded 	 Specimens been labelled (including patient name)? 	and sent to Path lab	☐Yes ☐ N.A.	ipment problen	Yes No	◆ Team members review the key concerns for	recovery and Management of the Patient	Procedure:			Name		Surgeon	Asst. Surg.		Anaes.	Asst. Anaes.	iscrub Nurse	SHEER	JALGAON KH S	Dedn Dedn	& Hospital, Jalgaon Kh.
TIME OUT	Before start of procedure / skin incision	◆ ☐ Introduction of team members	themselves by name and role	◆ ☐ Patient's name confirmed	♦ ☐ Site - Marked & Visible / N.A.	◆ ☐ All members discussed planned procedure	Reviews on Anticipated Critical Events Surgeon	☐ Anticipated blood loss	Critical or Unexpected steps	0perative duration	Equipment concern confirmed	Anaesthetist	Any patient specific concern	Specific levels of support required	Seruh & Circulating Nurse	oci ub & cii cuiating ivui se	Sterilization indicator confirmed	Equipment concerns	- 1	- Antibiotic prophylaxis within last 60 min Yes N.A.	- Patient warming	- Glycaemic control	 Relevant images properly labelled & displayed 	☐ Yes	• Has VTE prophylaxis been undertaken?	☐ Yes ☐ N.A.	
SIGN IN	efore induction of anaesthesia at holding area	Patient has confirmed	☐ Identity ☐ Site	Procedure All consents	Surgical site marked	☐ Yes ☐ Not applicable	ative preparati	NBM Premedication	History and Clinical Record	[] lewellery/Lenses/dentures etc. removed	Pre anaesthesia assessment	Hair removal as per SSI measures	Co-morbid Condition Explained	Does the patient have a Known allergy?	□ No □ Yes	Anaesthesia Safety Check Completed	Difficult airwav/aspiration risk?	□No □ Yes	If Yes, equipment/assistance available	Risk of >500ml blood loss (7ml/kg in children	□ No □ Yes	If Yes, adequate IV Access & Fluid available	Blood Availability	equipments required during procedure are checked with Special Equipments	Surgical Anaesthetic	Medication Check Complete	ach section to be read out loudly



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Letter no. MCI-34(41)/2012-med./158127, dated 05/02/2013

Affiliated to Maharashtra University of Health Sciences, Nashik [College Code-1306]

Jalgaon-Bhusawal Road, NH-6, Jalgaon Kh, Tal. & Dist. Jalgaon 425309

Tel. No. (0257)2366657, 2366678 Fax No. 0257-2366648

Email ID: dupmcj@yahoo.in Web Site: www.dupmc.ac.in

Date: 08/09/2022

PROGRAM REPORT

Title of Program	Training on Biomedical waste Handling and Sample Collection
Objective of Program	Training on Biomedical waste collection Training on sample collection
Participant Type (tick applicable)	Interns, residents, nursing staff
Date and Duration of Program	06/ 09/ 2022 From: 10 am To: 12 noon Number of Hours (duration): 2
Venue of the program/event	Lecture Hall, Second floor, Hospital building
Program Organized by (Department/Committee/Unit)	Dept. of Microbiology(Hospital Infection Control Committee)
Program in-charge	Dr. Kailash Wagh
Name of Faculty / Guest Speaker	Dr. Prashant Gudetti, Mr. Bitopan and Mr. Bhavani Verma.
Supporting staff member	Dr. Jayant Deshmukh
Vote of thanks presented by	Dr. Kailash Wagh
Geo-tagged photos (tick applicable)	Soft copy: Yes / No Hard Copy: Yes / No
Number of participants (attended program / event)	28
Brief about the Program (Activity/Event details)	Participants were given training in biomedical waste segregation and collection. Also they were demonstrated sample collection techniques

Prepared by Coordinator

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N.H.6 (Jalgaon- Bhusawal Road), Jalgaon (Kh.) - 425 309 Tal & Dist - Jalgaon Ph. No. (0257) 2366657 Fax : 2366648 E-Mail Id : dupmcj@yahoo.in

Obatel: 03/09/22

This is here by informed you that **Training Workshop On Sample Collection And Biomedical Waste Management** has been arranged by Department of Microbiology (<u>Hospital Infection Control Committee</u>) on a.6./09/2022 in Lecture Hall 2nd Floor, Hospital Building at 10.00 am. All clinicians are requested to present along with their concern Staff (Intern, Resident/Brothers/Sisters).

Programme outline given here

- 1.) Dr. Kailash wagh: Importance of Hospital acquired infection- 30 mins.
- Dr.Prashant: Proper sample collection techniques in microbiology -45 mins.
- 3.) Mr.Bitopan and Mr. Bhavani : Biomedical waste management in hospital 45 mins.

Professor & HOD

Dept. of Microbiology

Or. Uthas Patil Medical College & Hospital
Jalgaon Kh, Jalgaon

Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.

DR. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL JALGAON DEPARTMENT OF MICROBIOLOGY INFECTION CONTROL COMMITTEE

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Training on Biomedical waste Handling and Sample Collection on 06/09/2022











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Email ID: dupmcj@yahoo.in Web Site: www.dupmc.ac.in

Date: 20/11/22

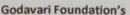
PROGRAM REPORT

Title of Program	Use of disinfectants in OT		
Objective of Program	Training on use of disinfectants in OT To give basic knowledge of fogging in OT		
Participant Type (tick applicable)	Interns, residents, nursing staff on OT		
Date and Duration of Program	18/ 11/ 2022 From: 3.00 pm To: 5.00 pm Number of Hours (duration): 1.30		
Venue of the program/event	Operation Theatre		
Program Organized by (Department/Committee/Unit)	Dept. of Microbiology(Hospital Infection Control Committee)		
Program in-charge	Dr. Kailash Wagh		
Name of Faculty / Guest Speaker	Dr. Prashant Gudetti		
Supporting staff member	Mr. Bitopan		
Vote of thanks presented by	Dr. Kailash Wagh		
Geo-tagged photos (tick applicable)	Soft copy: Yes / No Hard Copy: Yes / No		
Number of participants (attended program / event)	26		
Brief about the Program (Activity/Event details)	Participants were given training in basic knowledge of fogging in operation theatre; They were training in safe and appropriate use of disinfectants.		

Prepared by Coordinator

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Hospital Infection Control Committee

GF/DUPMC/D.O/ 2022/HICC

Workshop on Use of Disinfectants in O.T has been arranged in O.T.

Time: 03.00 to 04.30 PM

Venue: O.T. DUPMC & H (Hospital side)

All concern representative of O.T (O.T. Incharge and nursing staff) are requested to attend the workshop.

Agenda-

- 1. Introduction about basic knowledge of process of fogging.
- 2. How to use Disinfectant in O.T.



Chairman

HICC, DUPMC

Date: 18-11-2022

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Dr. Ulhas Patil Medical College

& Hospital, Jalgaon Kh.

DR. ULHAS PATIL MEDICAL COLLEGE & HOSPITAL JALGAON DEPARTMENT OF MICROBIOLOGY INFECTION CONTROL COMMITTEE

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24)	Prabhasini B Sanawane	BHMS Intern	The state of the s
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Use of disinfectants in Operation Theatre







