

MIMER MEDICAL COLLEGE , TALEGAON DABHADE

Link for Documents pertaining to quality of care and patient safety practices followed by the teaching hospital

INDEX

Sr.No	Particulars	Page No.
1	Basic life support	2 – 19
2	Fire Mock drills	20-29
3	HICC	30-75
4	SOP's	76-124
5	Students seminars	125-127
6	Internship programme	128-152
7	Safe Blood Transfusion	153-162
8	iGOT training for COVID	163-173
9	Resident Training for COVID	174-179
10	COVID Duty Schedule	180-203



॥ स्वास्थ्य-सेवा-सुशिक्षणम् ॥
MIMER MEDICAL COLLEGE

MAEER MIT PUNE'S

MAHARASHTRA INSTITUTE OF MEDICAL EDUCATION AND RESEARCH ,
MEDICAL COLLEGE (ESTD – 1995)

DR. BHAUSAHEB SARDESAI TALEGAON RURAL HOSPITAL

Accredited by NAAC with 'A' Grade

Talegaon Dabhade, Pune – 410 507, Maharashtra, India.

■ Tel. (02114) 308300 ■ Fax : 02114- 223916

■ Website : www.mitmimer.com ■ Email :-info@mitmimer.com

COURSE IN BASIC LIFE SUPPORT (BLS)

Course Objective: At the end of the course 1st MBBS students should be able to explain the importance of early BLS and to perform basic life support effectively

Specific Objectives: At the end of the course 1st MBBS students should be able to -

1. Explain the importance of early BLS
2. Enumerate the indications of BLS
3. Explain the Physiological basis of different steps of BLS
4. Perform Basic Life Support effectively

Duration of course: 6 hours

Number of seats: 150

Eligibility Criteria: 1st MBBS Students

Resources: Faculty from Anaesthesia, Medicine & Physiology department


PRINCIPAL
MIMER MEDICAL COLLEGE
TALEGAON DABHADE
PUNE -410507



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Detailed course structure:

Sr. No	Topic	Method	Duration
1	Pre test	MCQs	15 minutes
2	Introduction, Indications and steps of BLS procedure & its Physiological basis	Lecture & Demonstration	1 ½ hours
3	Techniques of performing BLS	Hands on training on mannequin	2 hours
4	Tutorials related to Basic Life Support Techniques	Videos related to ideal BLS technique & Role play by the students	2 hours
5	Post test	MCQs	15 minutes

MIMER Medical College, Talegaon Dabhade
Department of Anaesthesiology

Department of Anaesthesiology had organized the workshop on “Basic Life Support and Airway Management” on 11/09/2019 for Interns of MAEER’S Physiotherapy College.

There was lecture regarding Introduction of Basic Life Support followed by hands - on training on simulator regarding chest compression and Airway Management. Around 40 Interns attended workshop & trained well. Pre and Post training test of the Interns was also conducted. The workshop was organized under the guidance of Dr. Shilpa Y. Gurav, Prof. & HOD, Dept. of Anaesthesiology.

Photos are attached herewith.

Date : - Wednesday 11 September 2019.

Time :- 2 pm to 4 pm.



MAEER'S Physiotherapy College

Talegaon (D)

&

Dept. of Anaesthesiology, MIMER Medical College

Workshop on

"Basic Life Support and AirWay Management"



Pre Test



LECTURE ON “Basic Life Support & Airway Management”



Training Of "Chest Compression"



Training Of "Chest Compression"



Airway Training



Airway Training



Post workshop group photo with Physiotherapy Interns.

MIMER Medical College, Talegaon Dabhade
Department of Anaesthesiology

Department of Anaesthesiology had organized the workshop on “Basic Life Support” on 23/10/2018 for Interns. Occasion was also special “ World Restart A Heart Day” which is celebrated all over India. There was lecture regarding Introduction of Basic Life Support followed by hands - on training on simulator regarding chest compression and Airway. Around 60 Interns attended workshop & trained well. The workshop was organized under the guidance of Dr. Shilpa Y. Gurav, Prof. & HOD Dept. of Anaesthesiology. Photos are attached herewith.

Date : - Tuesday 23 October 2018.

Time :- 2 pm to 4 pm.



Lecture on “Basic Life Support”



Training Of “Chest Compression”



Training Of "Chest Compression"



Training Of "Chest Compression"



Airway Training



Airway Training



Workshop "BLS" for Interns



ANAESTHESIOLOGY DEPARTMENT <anaesth@mitmimer.com>

Adult Basic Life Support Workshop 2017 in the department of Anaesthesia

1 message

ANAESTHESIOLOGY DEPARTMENT <anaesth@mitmimer.com>

Thu, Jan 12, 2017 at 3:36 PM

To: SURGERY DEPARTMENT <surgery@mitmimer.com>

To,

All HOD's

MIMER Medical College,

Talegaon Dabhade

Subject:- Adult Basic Life Support Workshop 2017 in the Department of Anaesthesiology

Respected Sir/madam,

It gives us immense pleasure to inform you that we are organizing a workshop on "Adult Basic Life Support" on simulator for the PG Residents of all the departments on

Friday, 13 January 2017. 9.00 AM onwards.

This workshop is mainly intended to teach " Basic Life Support" to the Postgraduate(MD/MS) students on simulator. Detail program attached herewith. All HODs are cordially invited to join for tea & breakfast.

Your presence will be valuable to us.

Thanking You

Dr. Shilpa Gurav

Prof. & HOD

Dept. of Anaesthesiology

Basic Life Support Workshop Program Details.docx

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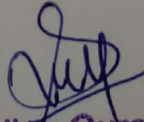
M.I.M.E.R. MEDICAL COLLEGE &
DR.BHAUSAHEB SARDESAI TALEGAON RURAL HOSPITAL, PUNE
DEPARTMENT OF ANAESTHESIOLOGY

ADULT BASIC LIFE SUPPORT WORKSHOP 2017

13TH January 2017
PROGRAM DETAILS

Time	Session	Faculty
9.00 AM TO 9.30 AM	Registration	--
9.30 AM TO 9.45 AM	Overview of Basic Life support	Dr. Anita Kulkarni
9.45AM TO 9.50	Introduction to workshop & welcome	Dr. Shilpa Gurav
9.50AM TO 9.55 AM	Remarks by Principal	Dr. R. P. Gupta
9.55AM TO 10.00AM	Remark by Director- Higher Education Research & Development	Dr. Arun Jamkar
Session I		
10.30 AM TO 12.00PM	Airway, AED, Chest Compression	--
Session II		
12.00PM TO 1.30PM	BLS Case Scenario, Airway Management	--

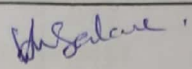
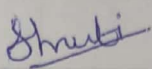
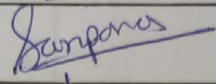
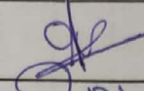
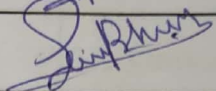
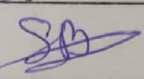
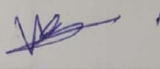
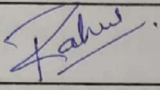

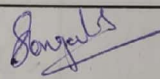

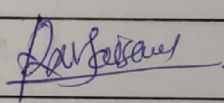

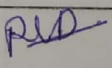
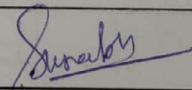
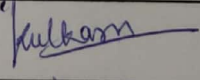
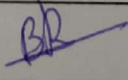
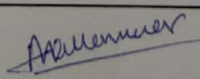
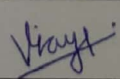
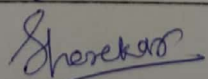
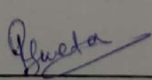

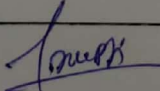
Venue - Clinical Pharmacology Hall, 2ND Floor,
Department of Pharmacology
M.I.M.E.R. Medical College & Dr.B.S.T.R.Hospital, Pune - 410507


Dr. Shilpa Gurav
Prof. & HOD
Reg. No. 85506
Dept. of Anaesthesiology
MIMER Medical College
Talegaon Dabhade

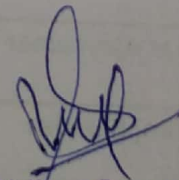
MIMER MEDICAL COLLEGE, TALEGAON DABHADE

Attendance of PG students

Adult Basic Life Support Workshop 2017 January 13

Sr. No.	Name of the student	Sign
1	Salve Vidyasagar Manikrao	
2	Desale Shruti Sunil	
3	Shinde Aparna Balasaheb	
4	Chile Aditya Vijay	
5	Shah Nishita Paresh	
6	Bhagat Sayali Shrikant	
7	Badadhe Vaishali Vasantao	
8	Patil Rahul Dinkarrao	
9	Lodha Piyush Dilip	
10	Sangle Omkar Madhukar	
11	Talele Jatin Jankiram	
12	Jaiswal Rahul Narendra	
13	Mundhe Ashwini Dattatray	
14	Daga Rushabh Vijayjumar	
15	Nikumbh Saurabh Shivraj	
16	Kulkarni Rushikesh P.	
17	Sonawane Bhushan Ramesh	
18	Allamwar Ajaykumar Ramlu	
19	Bhoir Viraj Ramdas	
20	Herekar Sujay Girish	
21	Pandey Shweta Ajay	
22	Dhakne Swapnil Ramesh	
23	Patil Trupti Dilipsingh	

24	Chatterjee Debopriya Utpal Papia	<u>Debopriya</u>
25	Kadale Prajakta Gulabrao	<u>Kadale</u>
26	Dahale Siddhant Milind	<u>SD</u>
27	Deokar Vikas Bhimrao	
28	Hodgar Digvijaysinha Shaligram	<u>Digvijaysinha</u>
29	Dhake Sayali Pradeep	<u>Sayali</u>
30	Pol Devayani Jalinder	
31	Kanwar Aryamman Singh	<u>Aryamman</u>
32	Dadge Maruti Sidram	<u>MD</u>
33	Thorat Abhijeet Shivaji	<u>Thorat</u>
34	Bhat Apoorv Raghunath	<u>Abhijeet</u>
35	Deshpande Samir Shyamsundar Hema	<u>Shyamsundar</u>
36	Thosar Sidheshwar Shrikrushna	
37	Desai Sameer Deepak	<u>Sameer Desai</u>
38	Nimmalwar Archana Ashok	<u>Archana</u>
39	Patil Abhijeet Bhaidas	<u>AB</u>
40	Barse Sharin Pradeep	<u>Barse</u>



Dr. Shilpa Gurav
Prof. & HOD
Reg. No. 85508
Dept. of Anaesthesiology
MIMER Medical College
Mumbai

MIMER Medical College, Talegaon Dabhade

Activity Report

Department :- Anaesthesiology

Name Of Activity :- Basic Life Support workshop for PG Students.

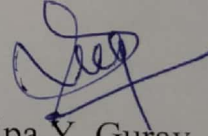
Duration of Activity :- 13 January 2017, 09 Am Onwards.

Participants : No. of Students :- 36

Brief description of the Activity :-

Dept. of Anaesthesiology conducted a Basic Life Support workshop on Simulator for the Students of MIMER Medical College on 13 January 2017, Under the Heading of

1. Airway
2. AED
3. Chest Compression



Dr. Shilpa Y. Gurav

Prof. & HOD

Dept. Of Anaesthesiology

MIMER Medical College, TD

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To,
MIMER MEDICAL COLLEGE
&
BSTR HOSPITAL
PUNE.

Dt -1/7/2021

Subject-Demonstration certificate

Dear sir,

We have conducted six monthly demonstration for use of fire extinguishers in case of fire accidents in your college premises. The training is given for medical, non medical staff & students. Further we have certify that all persons are well trained to face fire incidence by use of all types of fire extinguishers.

Thanks & Regards,

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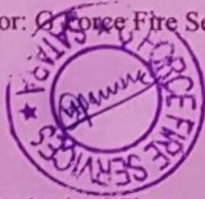
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Dt -1/7/2017

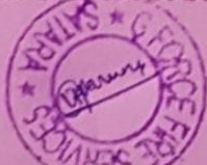
Subject-Demonstration certificate

Dear sir,

We have conducted six monthly demonstration for use of fire extinguishers in case of fire accidents in your college premises. The training is given for medical, non medical staff & students. Further we have certify that all persons are well trained to face fire incidence by use of all types of fire extinguishers.

Thanks & Regards,

For: G Force Fire Services



Authorised Signature

G-Force Fire Services

ISO 9001: 2008 Certified

Authorized Sale-Distributors

In All Kinds of Fire Extinguishers, Appliances & Safety Equipments Specialized in Fire Hydrant System, Fire System, Sprinkler System

Pune Office Address: - 54/2, Nanasaheb Khedekar Nagar, Near Navale Hospital, Sharada Sankul Phase II, Shop No: 1, 2, 3 & 4, Narhegaon, Taluka Haveli, District Pune-411041. **Mob. 9850317711**

Satara Office Address: - G - 9, Deelaxmi Complex, Behind Union Bank, Radhika Road Satara

Off no-7722013370/75

Other Branches: Solapur **Email - gffireservices@gmail.com Website- www.gforcefireservices.com**

To,
MIMER MEDICAL COLLEGE
&
BSTR HOSPITAL
PUNE.

Dt -1/1/2017

Subject-Demonstration certificate

Dear sir,

We have conducted six monthly demonstration for use of fire extinguishers in case of fire accidents in your college premises. The training is given for medical, non medical staff & students. Further we have certify that all persons are well trained to face fire incidence by use of all types of fire extinguishers.

Thanks & Regards,

For: G Force Fire Services



Authorised Signature

MIMER MEDICAL COLLEGE, TALEGAON DABHADE

No./MIMER/Cir/ 1654 /2019

Date: 03.09.2019

CIRCULAR- Bed Occupancy Meeting

**To -
HOD - Pre/Para/Clinical departments -**

Today there is Bed occupancy meeting followed by Hospital Infection Control Committee Meeting at 2:15pm in Conference Hall. For Bed Occupancy meeting the residents & Unit Head should also be present.



Principal
Principal
MIMER Medical College
Talegaon Dabhaade -410 507

Copy to

- Medical Director
- Executive Director (P. & D.)
- Executive Director (H.A.)
- Director - P.G. Programme - R. & D.
- Medical Supdt.
- Asst. Registrars
- HR Head
- I/C MRD Section

3/9/19

The hospital Infection Control committee meeting held on 3/9/19 following members were present.

Name	Dept	Sign
1) Dr. A.V. Zinkar	Dir PG	
2) Dr. P.S. Kamalt	MS	
3) Dr. R.P. Gupta	Principal	
4) Dr. Derek Dsouza	Dentistry	
5) Dr. Shikha Sharma	Ob Gyn	
6) Dr. Shilpa Gurav	Anaesthesia	
7) Dr. Arvita Kulkarni	Anaesthesia	
8) Dr. Prajakta Sambray	Ophthalmology	
9) Dr. S.S. Kulkarni	Micro	
10) Dr. Komal DP	ENT	
11) Dr. Tushar Khachare	Surgery	
12) Dr. Anurag S. Bhat	Psychiatry	
13) Dr. Ganesh Pestewar	Pharmacy	
14) Dr. Vijay Bhanwar	Pop Sci	
15) Dr. Sudam Khutkar	Med / Ar	
16) Dr. Rajarajoo Powar	Prof to Micro	
17) Dr. Ashok Chavhan	Prof to HoD	
18) Dr. Santosh Borkar	Prof to Ar	
19) Dr. S.U. Chelolikar	Prof Med	
20) Mrs. H.D. Jagdale	Matron	
21) Mrs. N.D. Dhinse	OT H/c	
22) Mrs. Ashwini Shirde	Genl	
23) Mrs. Radhika Joshi	Genl	
24) Dr. Sadhana Chak	Asst. Micro	
25) Dr. Shilpa Gurav	Anaesthesia	

MINUTES OF MEETING OF THE HOSPITAL INFECTION CONTROL COMMITTEE

HICC meeting was held on 03/09/2019

Following members were presents

Dr. Jamkar Sir	Dr. R.P. Gupta
Dr. S.S.Kulkarni	Dr. Derek D'souza
Dr. Shilpa Gurav	Dr. S.S.Chate
Dr. Anita Kulkarni	Dr. Ashok Ohatkar
Dr.Prajakta Sambare	Dr. Rajaram Powar
Dr. Sushma Sharma	Dr. Kotnis
Dr. Tushar Khachane	Dr P.S.Kamat
Dr. Sudam Khedkar	Dr.Aneesh Bhat
Dr.Ganesh Pentewar	Dr. Ajay Bhawari
Dr. Santosh Borkar	Dr. Sanjay Chincholikar
Mrs. H.D. Jagdale (Matron)	Mrs. Nilima Shinde
Mrs .Ashwini Shinde	Mrs. Radhika Zade

- 1) There was NICU outbreak in the month of May after that we have started NICU surveillance. Feedback was taken from Dr. Bhavari sir . He told that for each bed in NICU there is now separate stethoscope & sterilium is available for hand disinfection . Handwash facility in NICU should be outside preferably.
- 2) Advised to switch over to Cidex instead of savlon in each ward.
- 3) There was discussion on water used in the hospital & college whether chlorinated or not? PSM dept. is looking after water testing & Keeping its record. Dr Chincholikar sir told that water is coming from river to our well & is chlorinated in

the tanks. He also told that we should have water t/t plant for supply of pure water

.Tap water should be checked for Pseudomonas in NICU & O.T.

- 4) All departments should create VED i.e. Vital, Essential & desirable list of material required for their department & inform to purchase department.
- 5) Nurses who have been send for training should teach other nurses what they have learned in the training.

Silvate
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MIMER MEDICAL COLLEGE
TALEGAON DABHADE

Hospital Infection Control Committee (HICC) meeting

Inbox x



Microbiology Department <micro@mitmimer.com>

12:07 PM (2 minutes ago)

to OBST, OPHTHALMOLOGY, ORTHOPAEDICS, E.N.T., DENTISTRY, PAEDIATRICS, SURGERY, Medicine, SKIN, T.B., PRINCIPAL, ANAESTHESIOLOGY, Hospital-Admin., PSYCHIATRY, Community, Pharmacology, Medical

Date : 04/06/2019

Respected Sir/Madam

This is to inform you that Hospital Infection Control Committee (HICC) meeting is on 05/06/2019 in the Conference Hall after the bed occupancy meeting. The attendance of HOD is mandatory for the meeting. The meeting will be held in the presence of Executive Director. Kindly attend the meeting,

Thanking you,

Secretary
HICC

Chairman
HICC

Agenda of the meeting-

- 1) Outbreak in NICU
 - 2) OT Surveillance & CSSD surveillance
- Any other point raised by the chair

5/6/19

The Hospital Infection Control Committee meeting held on 5/6/19
Following members were present

Name	Dept	Sign
1. Dr. R-P Gupta	Principal	
2. Dr. Sadhana Chate	Micro	Sadhana
3. Dr. Sandhya Kulkarni	Micro	Kulkarni
4. Dr. P.S. Kamal	Mis. (Ortho)	P.S. Kamal
5. Dr. Smrita Pawar	Ophthalm	Smrita
6. Dr. Vjwala Keskar	Paeds	Vjwala
7. Dr. Darpan	Ortho	Darpan
8. Dr. Shilpa Gureav	Anaesth.	Shilpa
9. Dr. Tushar Khaichane	Surg	Khaichane
10. Dr. Ashok Chakkar	Ortho	Ashok
11. Dr. Ranjeet Wagh	Pharmac	Ranjeet
12. Dr. Ratna Mujumdar	Comm. med	Mujumdar
13. Mrs. Helan Jagdale	Metron	Helan
14. Mrs. Radhika Zade	ZEN	Radhika
15. Mrs. Ashwini Shinde	ZEN	Ashwini
16. Dr. Sushma Sharma		Sushma
17. Dr. Swarn Khedkar		Swarn
18. Dr. Derek D'Souza		D'Souza

MINUTES OF MEETING OF THE HOSPITAL INFECTION CONTROL COMMITTEE


- The meeting was held on 05/06/2019
- Following members were present for the meeting.

Dr. P.S.Kamat	Dr. S.S.Kulkarni
Dr. Shilpa Gurav	Dr. S.S.Chate
Dr. Smita Pawar	Dr. Ashok Ohatkar
Dr.Ranjeet Wagh	Dr. Ketaki Pathak
Dr. Sushma Sharma	Dr. Ratna Mujumdar
Dr. Tushar Khachane	Mrs. Ashwini Shinde
Dr. Ujjawala Keskar	Dr. Sudam Khedkar
Dr. Derek D'souza	Dr.Darpan Maheshgauri
Mrs. H.D. Jagdale (Matron)	Mrs. Radhika Zade
Mrs .Ashwini Shinde	

Meeting was called as there is a outbreak in NICU Blood culture 5 babies grown MDR Klebsiella spp.

- 1) In view of the above the advice was given to HOD paediatrics either isolate the babies or discharge & transfer them to other hospital & fumigate the ward urgently by HOD Microbiology Dr. Sandhya Kulkarni.
- 2) Dr. Sadhana Chate, Dr.Ketaki Pathak, Mrs. Radhika – ICN & Mrs. Shubhangi – technician visited NICU & Labour room on 31/05/2019 & report of the visit was given to the principal & Medical Supd. Environment samples were collected from NICU - Central suction tube, warmer bed side, O2 hood Monitor, Trolley, chital solution, Ventilator, weighing machine ,feeding syringe.

- 3) From most of these sample MRSA was isolated. But from the central suction tube Klebsiella spp was isolated & when the sensitivity was done the isolated Klebsiella was Multi drug resistant.
- 4) Report of environmental swab was send to Principal, Medical Superintendent HOD Paediatrics on 01/06/2019 & 03/06/2019
- 5) Samples were also collected from Labour room & the organisms isolated were MRSA mainly & Pseudomonas Spp.. Report was communicated to Principal, Med supd. HOD OBGY on 05/06/2019
- 6) Remedial measures were also advised to HOD OBGY & Paediatrics, ICNS & NICU incharge sisters.
- 7) Multidisciplinary interventions are needed to control the NICU outbreak
- 8) Infection control training was given to all staff in NICU by Dr. Ujjwala Keskar
- 9) Hence forth we are going to start NICU surveillance. The copy the reports will be send to principal & Medical Supd. till the things will be smooth.


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TALEGAON DABHADE

Hospital Infection Control Committee (HICC) meeting

Inbox x



Microbiology Department <micro@mitmimer.com>

10.24 AM (2
minutes ago)

to OBST, OPHTHALMOLOGY, ORTHOPAEDICS, E.N.T., DENTISTRY, PAEDIATRICS, SURGERY, Medicine, SKIN, T.B., PRINCIPAL, ANAESTHESIOLOGY, Hospital-Admin., PSYCHIATRY, Community, Pharmacology, Medical

Date : 04/03/2019

Respected Sir/Madam,

This is to inform you that Hospital Infection Control Committee (HICC) meeting is on 05/03/2019 in the Conference Hall. Kindly attend the meeting,

Thanking you,

Secretary
HICC

Chairman
HICC

Agenda of the meeting-

- 1) OT surveillance, CSSD surveillance & HAI surveillance
 - 2) Biomedical waste
 - 3) ICNs training on BMW
- Any other point raised by the chair

MINUTES OF MEETING OF THE HOSPITAL INFECTION CONTROL COMMITTEE

- The meeting was held on 05/03/2019
- Following members were present for the meeting.
 - Dr. P.S.Kamat Dr. S.S.Kulkarni
 - Dr. Shilpa Gurav Dr. S.S.Chate
 - Dr. Smita Pawar Dr. Ashok Ohatkar
 - Dr.Ranjeet Wagh Dr. Ketaki Pathak
 - Dr. Sushma Sharma Dr. Ratna Mujumdar
 - Dr. Tushar Khachane Mrs. Ashwini Shinde
 - Dr. Ujjawala Keskar Dr. Sudam Khedkar
 - Dr. Derek D'souza
 - Mrs. H.D. Jagdale (Matron) Mrs. Radhika Zade

- 1) HAI cases documented regularly by Infection control nurses. No any outbreak reported in the last 3 months.
- 2) O.T. & CSSD surveillance is done regularly & the reports were satisfactory.
- 3) HAICC members should give surprise visit to O.T. & see whether the person in OT are using cap, mask, chappals & shoes, if not they should be fined Rs. 100/- person.
- 4) Our ICNs were send for training on BMW – 2018 guidelines & new innovations of disinfection at Ruby hall clinic by HIS Pune Forum
- 5) Henceforth all operated patients should be observed for HAI. Unit Head ward incharge sister & infection control nurses should look into the matter& should report in the register.
- 6) Workshop on hospital infection control for Nurses was organized by Bharti Vidhyapeeth (Deemed University) medical College & hospital on 16th & 17th 2019 .The letter regarding that was forwarded to Medical Suptd. & Matron for the necessary action.
- 7) Training Program on proper hand washing was given to our both canteen people & Ladies & boys hostel canteen staff (35 people attended the training program) on 10/01/2019 & 18/01/2019

Hospital Infection Control Committee (HICC) meeting

Inbox x



Microbiology Department <micro@mitmimer.com>

11:33 AM
(1 minute ago)

to OBST, OPHTHALMOLOGY, ORTHOPAEDICS, E.N.T., DENTISTRY, PAEDIATRICS, SURGERY, Medicine, SKIN, T.B., PRINCIPAL, ANAESTHESIOLOGY, Hospital-Admin., PSYCHIATRY, Community, Pharmacology, Medical

Date : 11/12/2018

Respected Sir/Madam,

This is to inform you that Hospital Infection Control Committee (HICC) meeting is on 12/12/2018 in the Conference Hall. Kindly attend the meeting,
Thanking you,

Secretary
HICC

Chairman
HICC

Agenda of the meeting-

- 1) OT surveillance, CSSD surveillance & HAI surveillance
- 2) Biomedical waste
- 3) Any other point raised by the chair

12/12/18

The hospital Infection Control Committee meeting was held on 12/12/18 following members were present-

Name	Dept	Sign
Dr. R.P. Gupta	Principal	
Dr. P.S. Kamal	ortho	PKM
Dr. Ashok Ohatkar	ortho	Ashok
Dr. Sadhana Chate	Micro	SShate
Dr. Sandhya Kulkarni	Micro	KSandhya
Dr. Poojita Sambarey	Ophthalm	Sambarey
Dr. Sushma Shormia	Obgy	
Dr. Tushar Khasare	Surg	TKhasare
Dr. Sudam Khedkar	Medicine	
Dr. Derek D'Souza		
Dr. Rayeeet Wagh	Pharmac	RWagh
Dr. Ratna Mujumdar	Comm med	RMujumdar
Dr. Vijay Bhavani	Paeds	
Mrs Helen Jugdale	Metron	HJugdale
Mrs. Pradhika Zade	JEN	Zade
Mrs. Ashmini Shinde	JEN	AShinde


Total meetings in 2018 = 4

MINUTES OF MEETING OF THE HOSPITAL INFECTION CONTROL COMMITTEE

- The meeting was held on 12/12/2018
- Following members were present for the meeting.

Dr. R.P Gupta	Dr. S.S.Kulkarni
Dr. Shilpa Gurav	Dr. P.S.Kamat
Dr. Prajkta Sambare	Dr. Ashok Ohatkar
Dr.Ranjeet Wagh	Dr. Ketaki Pathak
Dr. Sushma Sharma	Dr. Ratna Mujumdar
Dr. Tushar Khachane	Mrs. Ashwini Shinde
Dr. Vijay Bhavari	Dr. Sudam Khedkar
Dr. Derek D'souza	Dr. S.S.Chate
Dr. Ujjawala Keskar	
Dr. S.S.Chate	Mrs. H.D. Jagdale (Matron) Mrs. Radhika Zade

- 1) O.T. & CSSD surveillance done regularly & the reports were satisfactory.
- 2) HAI cases documented regularly by Infection control nurse. No any outbreak of infection reported in last 3 months.
- 3) Biomedical waste disposal – colour Coded bag & buckets are not of same colour also personal protective measures are inadequate.
- 4) Training program on Hand washing & hospital infection control was taken for Nurses & Nonteaching staff on 15/10/2018 & 16/10/2018
Total 130 people attended the training program
- 5) In the last meeting some members (HOD) were absent so mail was send them regarding the their absence & they were advised to attend the meeting regularly.
- 6) It was decided in the meeting that hand washing training should be given to our canteen people also.


PROFESSOR
DEPTT.OF MICROBIOLOGY
MIMER MEDICAL COLLEGE
TALEGAON DABHADE

Subject: about absence in last HICC meeting held on 21/08/2018



2:33 PM (2 minutes ago)

Microbiology Department <micro@mitmimer.com>
to SURGERY, E.N.T., PAEDIATRICS, SKIN, PRINCIPAL

To,

The Head of the Department,

Respected Sir/Madam,

The HICC meeting was held on 21/08/2018 after the bed occupancy meeting . As all clinical dept HODs are the members of the committee, the attendance of HOD is mandatory for the meeting . As you have not attended the meeting so please give the clarification about it.

Chairman

HICC

Secretary

HICC

Subject: Feedback of Hospital infection control committee – allocated work

Inbox x



Microbiology Department <micro@mitmimer.com>

3:46 PM (22 hours ago)

to OBST, OPHTHALMOLOGY, ORTHOPAEDICS, E.N.T., DENTISTRY, PAEDIATRICS, SURGERY, Medicine, SKIN, T.B., PRINCIPAL, ANAESTHESIOLOGY, Hospital-Admin., PSYCHIATRY, Community, Pharmacology, Medical

To,

All HOD, Clinical Dept.

Respected Sir / Madam,

The work distribution of Hospital infection control committee (HICC) already done in small subcommittees. Still I am sending the attachment regarding distribution of work of HICC. So please give your feedback regarding your allocated work for last three months (May, June & July).

Henceforth feedback is taken regularly from these subcommittees in every HICC meeting.

Thanking you,

Dr. Sadhana Chate

Secretary , HICC

Hospital Infection Control Committee (HICC) meeting

Inbox x



Microbiology Department <micro@mitmimer.com>

11:41 AM
(1 minute ago)

to OBST, OPHTHALMOLOGY, ORTHOPAEDICS, E.N.T., DENTISTRY, PAEDIATRICS, SURGERY, Medicine, SKIN, T.B., PRINCIPAL, ANAESTHESIOLOGY, Hospital-Admin., PSYCHIATRY, Community, Pharmacology, Medical

Date : 21/08/2018

Respected Sir/Madam,

This is to inform you that Hospital Infection Control Committee (HICC) meeting is on 21/08/2018 in the Conference Hall after the bed occupancy meeting. Kindly attend the meeting, Thanking you,

Secretary
HICC

Chairman
HICC

Agenda of the meeting-

- 1) OT surveillance, CSSD surveillance & HAI surveillance
- 2) Biomedical waste
- 3) Hepatitis B vaccination
- 4) Training program - **Prevention and control of Hospital acquired Infection**
- 5) Any other point raised by the chair

21-08-2018

The hospital infection control committee meeting held on 21-08-2018

Following members were present.

Name	Dept.	Sign.
Dr. Arun Jankar	Dire PK.	
Dr. Prayakta Sambarey	Ophth	Sambarey
Dr. Shripa Gurav	Anaesthesia	Gurav
Dr. Anita Kulkarni		Anita
Dr. Shivamurthy HM.	OBG	HM
Zade Radhika H.	ICU/ICCU	zade
Mrs. H.D. Jagdale	Matron	Jagdale
Mrs. Nilima D. Shinde	OT & e	Shinde
Mrs. Ashwini S. Shinde	Obg & F	Ashwini
Dr. Derek D Souza	Dental Surgery	D Souza
Dr. Vinayak Nore	MS	Nore
Dr. Bhose	Med	Bhose
Dr. P.S. Kamath	Ortho.	Kamath
Dr. Ganesh Pentekar	pharmacology	Pentekar
Dr. Anesh Bhat	Psychiatry	Anesh
Dr. Ratna Majumdar	Com. Med	RM
Dr. Sadhana Chate	Microbiology	SChate

MINUTES OF MEETING OF THE HOSPITAL INFECTION CONTROL COMMITTEE

- The hospital infection control committee meeting held on 21/08/2018 at 2.30 pm in the Conference hall.
- Following members were present for the meeting.

Dr. Jamkar	Dr. V.B. More
Dr. S. S. Chate	Dr. Aneesh Bhat
Dr. Anita Kulkarni	Dr. Kamat
Dr. Bhoge	Dr. Shilpa Gurav
Dr. Shivmurty	Dr. Derek Dsouza
Dr. Mujumdar	Dr. Prajakta Sambare
Dr. Pentewar	
Mrs. H.D. Jagdale (Matron)	Mrs. Nilima Shinde(OT-I/C)
Mrs. Zade Radhika (ICU-ICN)	Mrs. Ashwini Shinde(ICN)

Minutes of last meeting were discussed.

1. O.T & CSSD Surveillance done regularly & the reports were satisfactory.
2. HAI cases documented regularly by ICN in May June & July. No any on break of infection reported . There is a another ICN Mrs. Ashwini Shinde appointed by metron for the work of HAI
3. In O.T. many people (Particularly intern & PGs) are coming with mobiles. Also they are using O.T. slippers, chappals in toilets of O.T. So Toilet should not be in O.T.
4. Hepatitis vaccination now we have stopped as most of our class III,IV & doctors already vaccinated & now no one is coming for that.
5. Rubella vaccination?
6. Food handlers in our college canteens & hostel canteens should be vaccination for hepatitis A & E .
7. In Kitchen people are coming with chappals from outside even after repeated instructions

8. Some members were absent so feedback of their allocated work was not possible.

9. Training program on prevention & control of Hospital acquired infection will be taken in the September/October.

Sulake
PROFESSOR
DEPTT. OF MICROBIOLOGY
MIMER MEDICAL COLLEGE
TALEGAON DABHADE

Hospital Infection Control Committee (HICC) meeting

Inbox x



Microbiology Department <micro@mitmimer.com>

12:07 PM (2
minutes ago)

to OBST, OPHTHALMOLOGY, ORTHOPAEDICS, E.N.T., DENTISTRY, PAEDIATRICS, SURGERY, Medicine, SKIN, T.B., PRINCIPAL, ANAESTHESIOLOGY, Hospital-Admin., PSYCHIATRY, Community, Pharmacology, Medical

Date : 07/05/2018

Respected Sir/Madam

This is to inform you that Hospital Infection Control Committee (HICC) meeting is on 11/05/2018 in the Conference Hall after the bed occupancy meeting.

The attendance of HOD is mandatory for the meeting. The meeting will be held in the presence of Executive Director. Kindly attend the meeting,

Thanking you,

Secretary
HICC

Chairman
HICC

Agenda of the meeting-

- 1) ICN meet & training by -HIS Pune forum.
- 2) OT Surveillance & CSSD surveillance
- 3) Hand hygiene
- 4) Any other point raised by the chair

MINUTES OF MEETING OF THE HOSPITAL INFECTION CONTROL COMMITTEE


The hospital infection control committee meeting held on 11/05/2018 at 2.30 pm in the Conference hall.

Following members were present for the meeting.

Dr. Suchitra Karad Nagre	Dr. R. P. Gupta
Dr. Jamkar	Dr. V.B. More
Dr. Sandhya Kulkarni	Dr. S. S. Chate
Dr. Bhoge	Dr. Kamat
Dr. Bhardwaj	Dr. Madhavi Bansode
Dr. Shivmurty	Dr. Sandesh Gawade
Dr. Mujumdar	Dr. Subhash Japtiwale
Dr. Vaishali Korde	Dr. Darpan Maheshgauri
Dr. Shilpa Gurav	Dr. Sushma Sharma
Dr. Pentewar	Dr. Tushar Khachane
Dr. Derek Dsouza	Dr. Aneesh Bhat
Dr. Ashush Ubhale	Dr. Nithun TM
Mrs. Zade Radhika (ICN)	Mrs. H.D. Jagdale (Matron)
Mrs. Veena Telore (Assit. Nsg Supdt.)	

Minutes of last meeting were discussed.

1. O.T. surveillance done regularly and the reports were satisfactory.
2. CSSD surveillance done regularly & the reports were satisfactory.
3. HIS Pune forum along with BD organised the first Infection control nurse meet On 20th April which was attended by our ICN Mrs. Radhika zade
4. On the occasion of hand hygiene day on 5th may print outs of hand hygiene were send to all wards & OPD
5. HAI cases documented regularly by infection control nurse.


PROFESSOR
DEPTT.OF MICROBIOLOGY
MIMER MEDICAL COLLEGE
TALEGAON DABHADE

Hospital Infection Control Committee (HICC) meeting

Inbox x



Microbiology Department <micro@mitmimer.com>

11:05 AM (0 minutes ago)

to OBST, OPHTHALMOLOGY, ORTHOPAEDICS, E.N.T., DENTISTRY, PAEDIATRICS, SURGERY, Medicine, SKIN, T.B., PRINCIPAL, Pharmacology, ANAESTHESIOLOGY, Hospital-Admin., PSYCHIATRY, Community

Date : 31/01/2018

Respected Sir/Madam

This is to inform you that Hospital Infection Control Committee (HICC) meeting is on 01/02/2018 at 2.30 pm in the Conference Hall.

The attendance of HOD is mandatory for the meeting. The meeting will be held in the presence of Executive Director. Kindly attend the meeting,

Thanking you,

Secretary
HICC

Chairman
HICC

Agenda of the meeting-

- 1) Distribution of work of HICC among members
- 2) Pune infection - 9th & 10th December 2017
- 3) Hospital infection society Pune **forum** meeting & workshop on 2nd Feb.2018
- 4) O.T. surveillance & CSSD surveillance
- 5) Any other point **raised** by the chair



Click here to [Reply](#), [Reply to all](#), or [Forward](#)

Distribution of HICC work amongst the members of HICC



Microbiology Department <micro@mitmimer.com>

11:10 AM (3 minutes ago)

to medical

Sir , as per the discussion in the last HICC meeting and as per our discussion on it I have prepared the Distribution of HICC work amongst the members of HICC.

Please see attached file and if any change required do it and forward to the members of HICC

THANKING YOU,

Dr. SADHANA CHATE

Attachments area

1) O.T. surveillance – Settle plates, Anaerobic culture-

HOD Anesthesia - Dr.Shilpa Gurav

O.T. Incharge – Mrs.Vaishali Londhe , Matron - Mrs. H.D. Jagdale

2) Kitchen , laundry, BioMedical Waste & Hepatitis B vaccination for – Teaching staff, UG, PG, Nonteaching staff -

BMW- Secretary --- Dr. Mujumdar,

Chairman HICC - Medical Superintendent - Dr. More

3) Antibiotic Policy ---the emergence of drug resistance & use of different antimicrobial agents. Incidence & type of infections & Antimicrobial sensitivity pattern of the prevalent pathogens

-

Chairman Antibiotic Policy committee - Dr.Sandhya Kulkarni

Secretary Antibiotic Policy committee – Dr.Jaishree Puri

HOD Pharmacology -- Dr.Wagh

4) Watch on Sterilization & disinfection procedures – CSSD & O.T visit

- Autoclave register maintainance – tape colour-

Anesthesia- Dr. Anita Kulkarni

O.T. Incharge – Mrs.Vaishali Londhe / Mrs.Tilore / Kumbhar

5) Availability of protective measures, Disposable material gloves, mask, bags etc & Disinfectants (supply)-HOD Medicine - Dr.Bhoge

HOD Psychiatry- Dr.Anish Bhat

Matron - Mrs. H.D. Jagdale

Col. Laxmanan

6) Importance of handwashing & Renovation, construction any leakage in ward/ O.T.

HOD Ophthalmology- Dr.Sambarey
HOD Skin VD- Dr.Nithun TM
HOD Dentistry -Dr.Subhash Japtiwale
Mr. Kiran Sawant- Engineer

7) Hospital environment, Cleanliness –

Chairman HICC- Medical Superintendent - Dr. More
Hospital Committee members
Dr. Desouza
Matron - Mrs. H.D. Jagdale
Sanitary Inspector - Mr.Sonawane

8) Documentation of HAI ,Record –

Infection Control Nurse – Mrs.Radhika Zade
Secretary HICC- Dr. Sadhana Chate
MRD Incharge - Dr.Vivek
Dr. Desouza

9) HICC –Meetings- Record keeping , HICC activities like SOP for collection & transport of various samples for C/S ,CME , Training Programme on Prevention & Control of HAI for Interns, Residents, Tutor, Nonteaching staff -

Chairman HICC- Medical Superintendent - Dr. More
Secretary HICC - Dr. Sadhana Chate

10) Implementation of SOP-

Chairman HICC- Medical Superintendent - Dr. More
HOD Medicine - Dr.Bhoge,
HOD Ortho -Dr Kamat,
Surgery -- Dr.Bhardwaj
HOD Dentistry - Dr.Subhash Japtiwale

01-02-2018

The hospital infection control committee meeting held on 01-02-2018

Following members were present.

Name	Dept.	Sign.
DR. Shelita Karad Mayam		
DR. Arun Jankar	DR PG	
1) DR. R. P. Gupta		
2) DR. Vinayak More		
3) DR. Sandhya Kulkarni	Micro	
4) Dr. Shyamprasad	DR PG	
5) Dr. Subhash Japtiwale	HOD	Dentistry
6) Sadhana Chate	Prof	Schack
7) Dr. Rakna Majumdar	Prof	RM
8) Dr. Smitha Pawar	Assoc. Prof	Ophthalm.
9) Dr. Anesh Bhat	Asso. Prof.	Psychiatry
10) Dr. NITHIN TM	Asst. Prof.	OTL
11) Dr. Derek Dfousa	Prof	Dentistry
12) Dr. Santosh Mane	Asst. Prof.	ERT
13) Dr. Bhoje Df	Med.	
14) Dr. R. N. Bhavadasy	Prof. Surgery	
15) DR. Shweta Guroal	Prof. Anaesthesia	
16) Dr. Deepali Ambekar	Prof. Paediatrics	
17) Dr. Nirayon Pathale	Asst. Prof. Med. In	
18) Dr. P. S. Kamal	HOD Ortho.	
19) DR. VINAYK JASITAN	Dist. Prof. Surgery	
20) Dr. Ganesh Pentekar	Pharmacology	
21) Mrs. H. D. Jagdeh.	Nation	
22) Mrs. H. D. Sinde	OTL	
23) Mrs. Zade P. H.	SIC	
24) Dr. R. J. Wagh	Pharmacol	
25) Dr. V. B. Powar	Blood bank	

MINUTES OF MEETING OF THE HOSPITAL INFECTION CONTROL COMMITTEE

The hospital infection control committee meeting held on 01/02/2018 at 2.30 pm in the Conference hall.

Following members were present for the meeting.

Dr. Suchitra Karad Nagare	Dr. R. P. Gupta
Dr. Jamkar	Dr. V.B. More
Dr. Sandhya Kulkarni	Dr. S. S. Chate
Dr. Bhoge	Dr. Kamat
Dr. Bhardwaj	DR. Santosh Mane
Dr. Shivmurty	DR. V.B. Powar
Dr. Deepali Ambike	Dr. Sandesh Gawade
Dr. Mujumdar	Dr. Subhash Japtiwale
Dr. Vaishali Korde	Dr. Darpan Maheshgauri
Dr. Shilpa Gurav	Dr. Sushma Sharma
Dr. R.J.Wagh	DR. Niranjana Pathak
Dr. Pentewar	Dr. Tushar Khachane
Dr. Derek Dsouza	Dr. Aneesh Bhat
Dr. Ashush Ubhale	Dr. Nithun TM
Dr. Prajakta Sambarey	Dr. Madhavi Bansode
Mrs. Zade Radhika (ICN)	Mrs. H.D. Jagdale (Matron)
Mrs. Veena Telore (Assit. Nsg Supdt.)	

Following point were discussed

- 1) Distribution of HICC work was done among members
- 2) As Microbiology department got mail from HIS pune forum regarding workshop for CSSD & OT staff , So we send OT incharge & Nursing superintendent(Mrs. Veena Telore) for workshop. Certificate of participation was given to them. After the workshop there was a lecture for the members that was attended by me.
- 3) O.T surveillance & CSSD surveillance done regularly in last 3 months and the reports were satisfactory.

4) HAI cases documented regularly by infection control nurse.

5) On the occasion of hand hygiene day I have send the prints to wards & OPD related to hand washing.

Sulake
PROFESSOR
DEPTT.OF MICROBIOLOGY
MIMER MEDICAL COLLEGE
TALEGAON DABHADE

Hospital Infection Control Committee (HICC) meeting

Inbox x



Microbiology Department <micro@mitmimer.com>

Sep 22 (4 days ago)

to OPHTHALMOLOGY, ORTHOPAEDICS, E.N.T., DENTISTRY, PAEDIATRICS, SURGERY, Medicine, SKIN, T.B., PRINCIPAL, Pharmacology, ANAESTHESIOLOGY, Hospital-Admin., PSYCHIATRY, Community, OBST, Dr

Date : 22/09/2017

Respected Sir/Madam

This is to inform you that Hospital Infection Control Committee (HICC) meeting is on 26/09/2017 after Bed occupancy meeting in the Conference Hall.

The attendance of HOD is mandatory for the meeting. The meeting will be held in the presence of Executive Director.

Kindly attend the meeting.
Thanking you,

Secretary
HICC

Chairman
HICC

Agenda of the meeting-

- 1) Training Programme on documentation of HAIs
- 2) Waste disposal
- 3) O.T. and CSSD Surveillance
- 4) Availability of Disinfectant and personal protective measures

26-09-2017

The hospital infection control committee meeting held on 26-09-2017

Following members were present.

Name	Dept.	Sign.
1) Dr. Vaishali Urde	OBGY	[Signature]
2) Dr. Sushma Sharma	"	[Signature]
3) Dr. R P GUPTA	Princip	[Signature]
4) Dr. A.N. Santalke	Dir. Admin	[Signature]
5) Dr. A.V. Jambhale	Dir PG (HODM)	[Signature]
6) Dr. V B More	Med Sup	[Signature]
7) Dr. Dr. Bhege	HOD MED	[Signature]
8) Mr. Jyotesh Bhowade	SURGERY	[Signature]
9) Dr. Shikha Dhongade	Med	[Signature]
10) Dr. Darpan Nalkegani	Ortho	[Signature]
11) Dr. Mahesh Asarkar	Asso. Prof Obgy	[Signature]
12) Dr. Prashant Kamate	Ortho	[Signature]
13) Dr. Tushar Khachane	Surgery	[Signature]
14) Dr. Derek Dsouza	Dental Surgery	[Signature]
15) Mr. Anish Bhat	Psychiatry	[Signature]
16) Dr. Ashish Ubbale	Psychiatry	[Signature]
17) Dr. Nishant M	Skin	[Signature]
18) Dr. Prajakta Sambarey	Ophth	[Signature]
19) Dr. Shikha Gaurav	Anaesthesia	[Signature]
20) Dr. Madhu Bansode	Medicine	[Signature]
21) Dr. Deepali Ambekar	paediatrics	[Signature]
22) Dr. H.D. Jaydeh	Matrn	[Signature]
23) Ms. Vena Telare	AMS	[Signature]
24) Mr. Zade R.H.	SE IIV	[Signature]
25) Dr. Sodhana Chak	Prof (Miro)	[Signature]

2017- Total 4 meetings

MINUTES OF MEETING OF THE HOSPITAL INFECTION CONTROL COMMITTEE

The hospital infection control committee meeting held on 26/09/2017 at 2.30 pm in the Conference hall.

Following members were present for the meeting.

Dr. V.B. More	Dr. R. P. Gupta
Dr. A.N. Sontakke	Dr. Jamkar
Dr. S. S. Chate	Dr. Bhoge
Dr. Shekhar Dhongade	Dr. Sandesh Gawade
Dr. Vaishali Korde	Dr. Darpan Maheshgauri
Dr. Shilpa Gurav	Dr. Sushma Sharma
Dr. Mahesh Asarkar	Dr. Deepali Ambike
Dr. Prashant Kamat	Dr. Tushar Khachane
Dr. Derek Dsouza	Dr. Aneesh Bhat
Dr. Ashush Ubhale	Dr. Nithun TM
Dr. Prajakta Sambarey	Dr. Madhavi Bansode
Mrs. Zade Radhika (ICN)	Mrs. H.D. Jagdale (Matron)
Mrs. Veena Telore (Assit. Nsg Supdt.)	

Minutes of last meeting were discussed.

1. O.T. Surveillance is done regularly.
2. CSSD surveillance is also done regularly
3. Biomedical waste disposal – colour coded bag & buckets are not of same colour in CCL, & wards (bags are deficient). Also disinfectants & personal protective measure used in the hospital s are inadequate. So Dr. Dhanaji Jadhav told to look into the matter.
4. Training program on documentation of hospital acquired infections was taken for nursing staff on 23/08/2017 at 2.30 to 3.30 in pathology Lect. Hall
5. Infection control manual (23 copies) were distributed to ward (one for each ward) he **Infection control manual** should remain in the ward only. Ward incharge should take care of it. The Nursing staff & doctors should read it to document the cases of Hospital acquired infection and help Infection control Nurse .

6. Mail – regarding 5th National Certificate course in Infection control-
from 27th to 29th October at Hyderabad, Telangana- Doctors – MBBS, MD, DNB,
Administrators, Quality Co-ordinators , Nursing staff, ICN can attend the same.
7. Mail from Ortho dept.-regarding documentation of hospital acquired infection
(proforma)


PROFESSOR
DEPTT.OF MICROBIOLOGY
MIMER MEDICAL COLLEGE
TALEGAON DABHADE

Regarding closing O.T. at 12 noon on every Saturday



Microbiology Department <micro@mitmimer.com>

Jul 21 (1 day ago)

to medical

Respected Sir,

Please see attached file. Do necessary changes if required.

Thanks .

Dr. SADHANA CHATE
Attachments area

MIMER MEDICAL COLLEGE, TALEGAON DABHADE, PUNE

Date: 21/07/2017

CIRCULAR

To,
All HODs

Subject: Regarding closing O.T. at 12 noon on every Saturday for washing, cleaning & fumigation.

Respected Sir / madam,

As per the decision taken in Hospital infection control committee held on 19/07/2017 ,operation theatre should be free after 12 noon on every Saturday so that it is available for washing, cleaning & fumigation on Saturday after 12 noon. On Sunday settle plates should be collected by O.T. person from CCL microbiology technician at 9.00 a.m.sharp & after exposing it in different O.T.for 30 min. will be returned to the same technician at 10.00 a.m. The reports of settle plates should be given orally upto 9.30 a.m. on Monday. The written settle plate reports should send to O.T. upto 11 a.m.

Thanking you,

Chairman
HICC

19/07/2017

The hospital infection control committee meeting held on 19/07/2017

Following members were present:

Name	Dept.	Signature
1) Dr. R.P. Gupta	Principal	[Signature]
2) Dr. More	MS.	[Signature]
3) Dr. Sadhana Chak	Microbiology	[Signature]
4) Mr. H.D. Jagdhan	Nation	[Signature]
5) Dr. Anita Kulkarni	Anaesthesia	[Signature]
6) Dr. Ratna Majumdar	Comm. Med.	[Signature]
7) Dr. Monali Nikalje	Dentistry	[Signature]
8) Dr. Shekhar Dhongade	MS	[Signature]
9) Dr. Niranjan Patil	Medicine	[Signature]
10) Dr. Meenakshi Sume	OBGYN	[Signature]
11) Vaishali S. Londhe	J.O.T.	[Signature]

MINUTES OF MEETING OF THE HOSPITAL INFECTION CONTROL COMMITTEE

The hospital infection control committee meeting held on 19/07/2017 at 2.30 pm in the Conference hall.

Following members were present for the meeting.

Dr. V.B. More	Dr.R.P.Gupta
Dr. S. S. Chate	Dr. Ratna Majumdar
Dr. Anita Kulkarni	Dr. Manali Nikalje
Dr. Shekhar Dhongade	Dr. Meenakshi sume
Dr. Niranjana Pathak	Mrs. H.D. Jagdale
Mrs. Vaishali Londhe (ICS)	


Minutes of last meeting were discussed.

1. CSSD should be adjacent to O.T.
2. Review of Hepatitis B Vaccination of nonteaching staff & doctor was taken from Dr.Mujumdar (PSM).She said vaccination is for only new people.Booster is not given.
3. OT. surveillance – Settle plate reports of O.T. are positive (unsatisfactory) discussed this with Dr. Anita Kulkarni , O.T. in charge Mrs. Vaishali Londhe (ICS)& Dr. Shekhar ---- due to overwork in O.T.
- 4.Many cases of resuturing are done in OT in last 1-2 month .
5. There is need to decrease the workload of O.T. Even on Saturdays O.T. is busy upto 4 p.m. So it becomes difficult for washing, cleaning & fumigation & done after 4 pm. & on Sunday also.
- 6.Settle Plates they get on Monday at 8.00 a.m. & after exposure for ½ hr, they send it to Microbiology at 9.30 a.m. & get report on Tuesday at 10a.m. It was discussed that why reports are not getting on Monday. (One day surgeons work in O.T.without settle plate reports is dangerous.So it was decided that on Saturday OT should be free after 1.30p.m. & available for washing ,cleaning & fumigation .

7. On Sunday settle plates should be collected by O.T. person from CCL microbiology technician at 9.00 a.m. sharp & after exposing it in different O.T. for 30 min. will be returned to the same technician at 10.00 a.m. The reports of settle plates should be given orally upto 9.30 a.m. on Monday. The written settle plate reports should send to O.T. upto 11 a.m. on the same day.

8. OT incharge should not allow overcrowding in OT. Strict vigilance should be done for them who are entering in OT sterile zone (should be with mask, Cap & OT Chappals)

9. Mrs. Radhika Zade - Joshi is appointed as new infection control nurse.


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DEPT. OF MICROBIOLOGY
MIMER MEDICAL COLLEGE
TALEGAON DABHADE

Hospital Infection Control Committee (HICC) meeting

Inbox x



Microbiology Department <micro@mitmimer.com>

Apr
20

to OBST, OPHTHALMOLOGY, ORTHOPAEDICS, E.N.T., DENTISTRY, PAEDIATRICS, SURGERY, Medicine, SKIN, T.B., PRINCIPAL, Pharmacology, DR.WAGHMARE, ANAESTHESIOLOGY, Hospital-Admin., PSYCHIATRY

Date : 20/04/2017

Respected Sir/Madam

This is to inform you that Hospital Infection Control Committee (HICC) meeting is on 21/04/2017 at 2.30 pm in the Pharmacology Hall.

Kindly attend the meeting, if unavailable please depute next person for the meeting.
Thanking you,

Secretary
HICC

Chairman
HICC

Agenda of the meeting-

- 1) O.T. Surveillance
- 2) Hepatitis B Vaccination status
- 3) Hand Washing

21/04/2017

The hospital infection control committee meeting held on 21/04/2017

Following members were present.

Name	Dept.	Signature
1) Dr. Manali Nikalje	Dentistry	
2) Dr. Niranjan Pathak	General medicine	
3) Dr. Sadhana Chate	Microbiology	
4) Dr. Vinayale Mru	Med. sep.	
5) Dr. Prajakta Sambarey	Ophthal	
6) Dr. Shiepa Y. Guram	Anaesthesia	
7) Dr. Jaishree Puri	Microbiology	
8) Mr. H.D. Jagdale	Nurses	
9) Dr. Prajakta Sambarey	Ophthal	
10) Dr. Anesh Bhat	Psychiatry	
11) Dr. Shekhar Dhongade	MRD	
12) Dr. Subhash S. Poyekar	Pediatrics	
13) Vaishali S. Londhe	O.T.	
14) Dr. Nilima Shinde	OT	
15) Dr. Jaya Borkar	Ons/ gynae	
16) Dr. RP GUPTA	Principal	

MINUTES OF MEETING OF THE HOSPITAL INFECTION CONTROL COMMITTEE

The hospital infection control committee meeting held on 21/04/2017 at 2.30 pm in the pharmacology hall.

Following members were present for the meeting.

Dr. V.B. More	Dr. S.S.Chate
Dr. Shilpa Gurav	Dr. R.P.Gupta
Dr. Prajkta Sambare	Dr. Manali Nikalje
Dr. Shekhar Dhongade	Dr. S.S. Poyekar
Dr. Jaya Barla	Dr. Jaishree Puri
Dr. Niranjana Pathak	Mrs. H.D. Jagdale
Dr. Aneesh Bhat	Mrs. Veena Telore (Assit. Nsg Supdt.)
Mrs. Nilima Shinde (OT- I/C)	Mrs. Vaishali Londhe (ICS)

Minutes of last meeting were discussed.

- 1) Continuous surveillance of Operation theatre is being done regularly as per the state level guidelines. Washing and fumigation is being done on every Saturday /Sunday. Every Monday settle plate is been done. On 1st Monday of every month swabs from various sites of each OT are being collected & send for aerobic & anaerobic culture
- 2) Surprise visit to CSSD also -- CSSD- working has been periodically reviewed
- 3) Biomedical Waste- is collected by the contractor regularly and as per the instructions. The contractor is supplying color coded bags as per requirement. Satisfactory working of an Incinerator has been periodically reviewed. Training regarding BMW
- 4) Importance of handwashing was discussed
- 5) Hepatitis B vaccination- review was taken.
- 6) Any fever after 48 hours of hospitalization should be noted as hospital acquired and urine and Blood of the patients should be sent for culture

7) In ICU if the patient is with central line, blood should be sent for culture and urine of catheterized patient should be sent for culture.

8) Henceforth all operated patients should be strictly observed for HAI. Unit head, Ward Incharge sister and infection control nurse should look into the matter and should report it in the register.

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TALEGAON DABHADE

16-2-2017

The hospital infection control committee meeting held on 16-02-2017

Following members were present.

AV V. B. More

V.M. U

- 1) Dr. Sadhana Chate - Asso. Prof (Micro) - Schate
- 2) Dr. Anita Kalekarni - Asso. Prof. (Anesthesio)
- 3) Dr. Ratna Majumdar - Professor (Micro) ^{Rajwade}
- 4) Dr. Nityanari Pathak Asst. Prof. Gen. Med. ^{Path}
- 5) Dr. ~~...~~ Asst. Prof. ^{...}
- 6) Ms. V. K. Telore - Asst. neg. supdt. ^{Velu}
- 7) Dr. S. S. Poyekar ^{Pediatrics} ^{SS}
8. Wagh R J. ^{Pharmacol.} ^(B)
- 9) Dr. Sapna Parab ^{Prof - ENT} ^{SP}
- 10) Dr. Prajakta Sambhaji ^{Prof Ophth.} ^{Sambhaji}
- 11) E.E. Nilima Shinde ^{OT Director} ^{Shinde}
- 12) Vaishali S. Londhe ^{O.T. QC} ^{Shinde}
- 13) Dr. Shekhar Dhongde ^{...} ^{Shinde}

MINUTES OF MEETING OF THE HOSPITAL INFECTION CONTROL COMMITTEE

The hospital infection control committee meeting held on 16/02/2017

Following members were present for the meeting.

Dr. V.B. More	Dr. S.S.Chate
Dr. Anil Kulkarni	Dr. Niranjan Pathak
Dr. Prajka Sambare	Dr. Mahesh Asalkar
Dr. Shekhar Dhongade	Dr. S.S. Poyekar
Dr. Ratna Majumdar	Dr. V. B. Pawar
Mrs. H.D. Jagdale	Dr. Wagh.R.J
Dr. Sapna Parab	Mrs. Veena Telore (Assit. Nsg Supdt.)
Mrs. Nilima Shinde (OT- I/C)	Mrs. Vaishali Londhe (ICS)

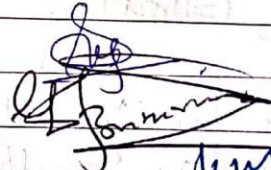
- 1) There are no chappals in OT. even for doctors. Stocking, leggings & slippers are needed for O.T. patients.
- 2) Nail c/s & Nasal swabs c/s of every person entering in O.T. should be done to find the carriers. The carriers should be treated properly. After t/t the same nasal swabs c/s repeated to check again.
- 3) HAICC should do surprise visit to operation theater & see whether the person in O.T are using cap,mask, chappals, shoes, if not they should fined Rs.100/- person.
- 4) Members should do surprise visit to CSSD also
- 5) Any fever after 48 hours of hospitalization should be noted as hospital acquired and urine and Blood of the patients should be sent for culture
- 6) In ICU if the patient is with central line ,blood should be sent for culture and urine of catheterized patient should be sent for culture .
- 7) Henceforth all operated patients should be strictly observed for HAI. Unit head, Ward Incharge sister and infection control nurse should look into the matter and should report it in the register.


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TALEGAON DABHADE

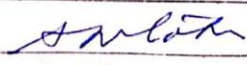

20/12/2016

The hospital infection control committee meeting held on 20/12/2016

Following members were present

- | | | |
|---------------------------|--------------|---|
| 1) DR. Shilpa Gaurav | | |
| 2) Dr. R.M. Bhandary | |  |
| 3) or Mon | | BMU |
| 4) Dr. S. S. Kulkarni | | Ksqandhyg HOD Micro |
| 5) Dr. Jayakta Sambarey | | Sambarey HOD Opath |
| 6) Dr. Mohali Nikalje | | Sambarey Dentistry |
| 7) Jlc Nilima Shinde | OT | N Shinde |
| 8) Jlc Vaishali S. Londhe | OT | Shinde |
| 9) A Veera Telore - ANS | | Telore |
| 10) Dr. Ninad Khaledkar | SKIND | Shinde |
| 11) Dr. Anush Bhat | Psychiatry | Shinde |
| 12) Dr. Deepali Ambekar | paediatrics | Shinde |
| 13) Dr. P. S. Kamath | Orthopaedics | PK |
| 14) Dr. Ratna Majumdar | Com. Med | RM |
| 15) Dr. V. B. Powar | BTO | Shinde |
| 16) Ms. H. D. Jagdekar | Matron | Shinde |
| 17) Dr. Sadhana Chate | Al. Microbio | Shinde |

Co opt Members

- | | | |
|-----------------------|--|------------|
| 1) DR. A. N. SONTAKRE |  | Dir. Admin |
| 2) Dr. R. P. GUPTA |  | Principal |

Total meetings held - 4

MINUTES OF MEETING OF THE HOSPITAL INFECTION CONTROL COMMITTEE

- The hospital infection control committee meeting held on 20/12/2016
- Following members were present for the meeting.

Dr. V.B. More	Dr. S.S.Kulkarni
Dr. Shilpa Gurav	Dr. S.S.Chate
Dr. Prajкта Sambare	Dr.Vinod Khaladkar
Dr. Manali Nikalje	Mrs. Veena Telore
Dr. Deepali Ambike	Dr. Aneesh bhat
Dr. R.N. Bharadwaj	Dr. Ninad Khaladkar
Dr. Ratna Majumdar	Dr. V. B. Pawar
Mrs. H.D. Jagdale	Dr. P.S.Kamat
Mrs. Nilima Shinde (OT- I/C)	Mrs. Vaishali Londhe

- Revised the members of HAICC – formation according to Govt. of India.
- Formation of subcommittee Hospital acquired infection control team (HAICT)
 - a) Infection control officer I.C.O – Dr. Sadhana Chate
 - b) Infection control sister - Mrs. Vaishali Londhe
 - c) Clinician – Dr. Dilip Bhoge & Dr. Sushma Sharma
- No Hospital acquired infection noted in the last 3 months
- There is a separate Antibiotic policy committee & Biomedical waste management committee , so issues regarding that will be discussed in those meeting only.
- HICC meeting should be once a month (On every 3rd Wednesday of each month at 2.30pm


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TALEGAON DABHADE

21/09/2016

The hospital infection control committee meeting held on 21/09/2016

Following members were present.

- 1) Dr. V.B. More - I.M.O.
- 2) Dr. Sandhya Kulkarni - Krandhya
- 3) Dr. Sadhana Chate - Asso-Prof. (Micro) - SChate
- 4) Dr. V.B. Powar - B.T.O. *ofc*
- 5) Dr. S.S. Poyekar - Pediatrics *SS*
- 6) Dr. Jaishree Puri - Microbiology *Jaishree*
- 7) Dr. Monali Nikalje - Dentistry. *Monali*
- 8) Dr. Anila More - DBQYN *Anila*
- 9) Dr. Prajakta Sambarey - Ophth *Sambarey*
- 10) Dr. S.S.
- 11) Dr. Shilpa Guwad - Anaesthesia *Shilpa*
- 12) Dr. Anilima Suse. O.T.I.C. *Anilima*
- 13) Dr. Misanjan Pathak - General Medicine *Misanjan*
- 14) Dr. Nimad Khaladkar - Skim V.D. *Nimad*
- 15) Dr. Anees Bhat - Psychiatry *Anees*
- 16) Dr. Jagan Mahadgawri - Otho *Jagan*


MINUTES OF MEETING OF THE HOSPITAL INFECTION CONTROL COMMITTEE

The meeting was held on 21/09/2016.

Following members were present for the meeting.

Dr. V.B. More	Dr. S.S.Kulkarni
Dr. Shilpa Gurav	Dr. S.S.Chate
Dr. Prajкта Sambare	Dr. Niranjana Pathak
Dr. Manali Nikalje	Dr. Jaishree Puri
Dr. Aneesh bhat	Dr. Darpan Maheshgauri
Dr. Subhash Poyekar	Dr. Vinod Khaladkar
Mrs. Nilima Shinde (OT- I/C)	

1. Wardwise Workload of June to August 2016 in microbiology dept. was presented
2. No any outbreak or HAI reported in the month of June to August 2016 by the clinical Depts.
3. Contineous surveillane of Operation theatre is being done regularly.
4. In the Meeting in the June, some members requested Medical superintendent to increase the number of paramedical staff & class IV in O.T.& wards for following all the above aseptic measures. But O.T. staff was not increased.
5. Repeatedly Members requested that Antibiotic policy should be prepared for our hospital .So Antibiotic policy committee is formed & its work started .
6. Some members suggested that mupirocin t/t should be given to the staff as Staph. aureus is the most common organism isolated in our hospital. If so what will be the cost ?
7. Discussion on starting Chikungunya test – how many suspected cases come in OPD
8. Many HODs & members remain absent for meeting - so Dr. More suggested to have meeting on Tuesday after bed occupancy meeting


PROFESSOR
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MIMER MEDICAL COLLEGE
TALEGAON DABHADE

MIMER MEDICAL COLLEGE & Dr.BSTRH Talegaon (D)**Infection Control Training**

Dr Sadhana Chate, Secretary, HICC

Radhika Zade, Infection control nurse

Ashwini shinde, Infection control nurse

Date	Dept	Conducted by	Attended by	Total no
11/04/2016	Microbiology	Dr Sadhana Chate, Prof, dept of microbiology Radhika zade Ashwini shinde	Junior Residents, Interns	17
13/04/2016	Microbiology	Dr Sadhana Chate, Prof, dept of microbiology Radhika zade Ashwini shinde	Junior Residents, Interns, Lab technicians	18
16/04/2016	Microbiology	Dr Sadhana Chate, Prof, dept of microbiology Radhika zade Ashwini shinde	Nursing staff	61
18/04/2016	Microbiology	Dr Sadhana Chate, Prof, dept of microbiology Radhika zade Ashwini shinde	Nursing staff	56 + 39
05/04/2018	Microbiology	Dr Sadhana Chate, Prof, dept of microbiology Radhika zade Ashwini shinde	Nursing staff (incharge of wards)	19
15/10/2018	Microbiology	Dr Sadhana Chate, Prof, dept of microbiology Radhika zade Ashwini shinde	Nursing staff, Lab technicians	60
16/10/2018	Microbiology	Dr Sadhana Chate, Prof, dept of microbiology Radhika zade Ashwini shinde	Nursing staff, Lab technicians	70
10/01/2019	Microbiology	Dr Sadhana Chate, Prof, dept of microbiology Radhika zade Ashwini shinde	Mirchi foods(canteen)	28
18/01/2019	Microbiology	Dr Sadhana Chate, Prof, dept of microbiology Radhika zade Ashwini shinde	Mirchi foods(canteen)	17

MIMER MEDICAL COLLEGE, TALEGAON DABHADE

Policy & SOP for quality of care and patient safety procedures.

Policy for maintaining quality of care in hospital

Patient Input – Classified as

1. New patient
2. Already registered patient
3. Referred patient
4. Pick up by ambulance
5. Walk in/ brought in patient
6. Sent from OPD

Service given	Control point
OPD	OPD paper, OPD register, speciality register
Admission in ward/ ICU	Case file- history and findings, progress notes, referral sheets, consent and preanaesthetic check-up notes, OT list, blood transfusion forms, OT register, patient clinical register, police intimation register
Transfer/ Discharge	Transfer letter, referral form, discharge card, ambulance register
DAMA/ Death	DAMA consent form, discharge card
Death	Death certificate, postmortem referral letter

Patient Output –

1. Treated and sent as outpatient OPD paper.
2. Admission in ward/ICU.
3. Transfer, discharge at request

4. Discharge against medical advice

5. Death

Policy for uniform care of patients

- All patients are to be treated alike irrespective of religion, caste, social status, financial ability.
- Similar care is given in different settings which are guided by applicable laws and regulations. Setting may include right from admission to discharge for IPD services, in OPD services and emergency services. All protocols are uniformly given in the same manner to all patients irrespective of the category status.
- Clinical practice and SOP's are adopted whenever possible.

SOP for reception of patients in emergency room (casualty)

- Emergency staff shall ensure availability of wheelchairs and stretcher trolleys at the emergency room main door.
- After examining the patient and immediate resuscitative and stabilization care the chief medical officer (CMO) shall contact the consultant on call in the relevant specialty by means of the telephone and inform the registrar on call (who is sitting in the casualty) in the relevant specialty.
- Registrars/ CMO shall inform the consultant of the patient's condition and take instructions regarding investigations and treatment.
- Registrar/ CMO shall write admit in the casualty paper if the patient requires admission after consultant advice
- Patient shall be transferred to the allocated bed at the earliest after screening diagnostic test or if the patient's condition so requires it.
- Entry to be made in the casualty register about patients name, diagnosis and treatment given.
- CMO shall inform concerned police station if it is a medicolegal case.
- If a patient is to be transferred to a higher facility adequate details about treatment given. If necessary ambulance facility will be provided after informing the medical superintendent who will also decide the staff(doctor/nurse) to accompany patient to higher center.
- If there are economic issues in treatment CMO/ registrar will inform the medical superintendent to waive off emergency charges for few patients investigations and/or treatment.
- Custody of medicolegal case records shall be under the CMO on duty. MLC records shall be kept under lock and key.
- In case of dying patient a senior staff of the hospital remains with the patients' relatives and permits them to complete the formalities. Death certificate and death summary will be handed over to the police. Body to be handed over to the police to be/ shifted for post mortem in case of death of patient.
- If patient is posted for emergency surgery registrar of concerned specialty follows instructions for surgery. Patient should be shifted to minor OT/ major OT depending on the complexity of the case.
- Arrange for blood if necessary instructions from blood bank.

SOP for triaging in casualty

Policy of prioritizing patients based on their individual need for medical care

Under normal working conditions patients shall be triaged and allotted beds in the emergency room as per the urgency of their medical needs using ESI scores.

During external disasters (code red) patients shall be triaged as red, yellow and black.

Red - First priority, most urgent

Life threatening shock or hypoxia is present or imminent but patient can be stabilized and if given immediate care shall probably survive.

Examples of red: -

- Compromised airway
- Respiratory arrest or survive respiratory distress or SpO2 < 90
- Trauma patient who is unresponsive or requires immediate fluid resuscitation
- Overdose with a respiratory rate of 6
- Severe bradycardia or tachycardia with signs of hypo-perfusion, chest pain, pale, diaphoretic, blood pressure < 70 mmHg (palpatory method)
- Anaphylactic reaction
- Baby that is flaccid
- Hypoglycemia

Yellow - Second priority, urgent

Injuries have systemic implications or effects but patient is not yet in life threatening shock or hypoxia although systemic decline shall ensue and given appropriate care patient seems able to withstand a 45-60 min wait without immediate risk.

Examples of yellow: -

Following diagnosis with stable blood pressure

- Acute abdominal pain
- Gastrointestinal bleeding
- Acute arterial occlusion
- Fever in immunocompromised patients
- Testicular torsion
- Acute renal failure
- Ectopic pregnancy
- Spontaneous abortion
- Meningitis
- Acute cerebrovascular accident
- Vomiting/diarrhea in children.
- Acute asthmatic attack
- Pleural effusion
- Spontaneous pneumothorax
- Road traffic accident with transient loss of consciousness.

Green -Third priority, non-urgent

Injuries are localized and without systemic implications, with a minimum of care.

Black - Dead

The above color coded ID bands shall be used during a code red.

SOP for ICU

1. Each patient shall be under the care of one nurse, always maintaining the patient to nurse ratio of 1:1 for patients on ventilator and 1:2 for their patients in ICU
2. Intensive care areas shall follow infection control practices
3. Visitors shall not be allowed in ICU except in special situations during visiting hours- one relative only
4. One empty bed shall be reserved at all times for emergency patients
5. Patients requiring emergency care only are to be admitted or shifted to the ICU. After substantial resolution of the problems responsible for admission patient may be transferred to the ward- after order by the treating specialist
6. Specialized life support equipment like ventilators, infusion pumps, defibrillators, central oxygen supply and suction must be readily available in the ICU. Biomedical engineer shall check this equipment on weekly basis
7. Staff on duty should be trained to handle specialized equipment

Infectious cases need isolation from other patients in ICU

Surgical Safety Checklist

Sign in- Before induction and anesthesia

1. Patient has confirmed (identity, site, procedure and consent)
2. Site marked/ not applicable
3. Pulse oximeter placed n patient and is functioning
4. Check for any known allergies that the patient has
5. Difficult airway/ aspiration risk – Yes/No
6. Equipment/ Assistance/ IV Access available- Yes/ No
7. NBM status- Yes/ No
8. Blood Availability- Yes/ No

Time out- Before skin incision

1. Confirm whether all team members have introduced themselves
2. Surgeon, anesthetist and nurse confirm patient, site and procedure
3. Surgeon reviews critical step, operative duration, anticipated blood loss
4. Anesthetist reviews patient specific concerns
5. Nursing team reviews sterility of the OT and equipment
6. Antibiotic prophylaxis given- Yes/No
7. Essential imaging displayed- Yes/ No

Sign out- After operation

1. Nurse confirms procedure name, specimen, instruments used, sponge count
2. Surgeon/ Anesthetist/ Nurse reviews key concerns for postoperative recovery

Patient safety in ward protocol

1. Identification band with patient's name and other important details around wrist or ankle.
2. All hospital staff members have to wear identity cards at all times on duty.
3. All hospital staff must maintain privacy and security of patient's health information at all times.
4. Washing hands properly by patient after using toilet is compulsory. Also, washing hands by staff after coming in contact with a patient is compulsory.
5. Dressings must be done by only resident doctor on duty with autoclaved dressing material only with the help of trained staff in ward. Dressing trolley to be checked for infection before dressing.
6. Patient must do deep breathing exercises during their ward stay to prevent chest inflation.
7. Sister in charge to see that patient's skin is clean and dry. All patients must change their position in bed every one hour to prevent development of bed sore/ water bed to be provided to patients at risk of bed sore.
8. Medical superintendent and nursing in charge to ensure proper cleaning of wards daily by concerned staff.
9. To prevent fall related injuries patient to keep personal items within reach to get them. Patient must ask for help when patient needs to get out of bed for toilet if patient is feeling unsteady. Patient's slippers or other footwear should be checked so that they are proper and no slippery. For some patient in need proper walking aid should be provided. Appropriate railings may be provided to bed of patient at risk of falling.
10. Personal and hospital owned electrical appliances should be checked by electrician regularly (at least once weekly)
11. It is not allowed to bring food from outside hospital for patients without informing the nursing staff on duty for food safety.
12. Patients are not allowed to consume any medicine without consent of medical team/ if it is not prescribed by doctor.

13. Patient should not keep jewelry, lot of money or valuable personal items to ward.

14. Visitor's access to ward is limited to two visitors per day during visiting hours only. However for pediatric patients and those patients in need, one or two relatives can stay with the patient.

SOP FOR OPD

1. The registration desk is arranged at the entrance lobby.
2. Opd paper dispensing is available near the entrance lobby.
3. Waiting area with efficient spacing is available near the opd registration desk.
4. Patients are directed to specialized opd based on their symptoms.
5. Patients with acute symptoms and emergency conditions are directly shifted to emergency department.
6. Ramps and elevators are available for immediate shifting of such patients.
7. The help desk always guides the patient regarding specialized opd, registration counters, cash counters, emergency departments, restrooms etc.
8. Restrooms available for males, females and handicapped.
9. Doctors, nurses and cleaning staff are checked regularly for symptoms, body temp etc.
10. Hand washing facilities in all OPD clinics, wards, emergency, ICU and OT areas. There shall be proper written handwashing protocols
11. Sanitization practices are followed before and after checking a patient
12. Surface cleaning and disinfection including doors, handles, elevator buttons and frequently touched surfaces.
13. Safe clinical practices as per standard protocols to prevent health care associated infections and other harms to patients.
14. Restrooms are cleaned and disinfected .
15. Wheel chair, trolleys and other transport equipments are available handy and staff to carry the patients are well trained and available at all hours.
16. Formation of Infection control team and provision of trained Infection Control nurses.
17. Hospital shall develop standard operating procedure for minor opd aseptic procedures, culture surveillance
18. Safe Injection administration practices as per prescribed protocols.

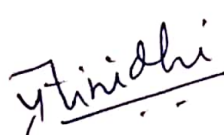
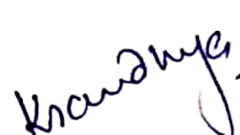
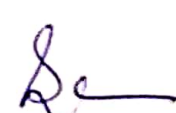
- 19.Ensuring Safe disposal of Bio-medical waste as per rules (National Guidelines to be followed)
- 20.Immunization of Health care workers against Tetanus and Hepatitis B.
- 21.Provision of round the clock Post exposure prophylaxis against HIV in cases of needle sticks injuries.
- 22.During opd consultation and minor procedures, female patients are always attended by a female attendant.
- 23.Arrangements made for medicine dispensing in the same premises of opd.
- 24.Medicines once dispenced are crosschecked and schedule of such drugs explained to the patient by the treating consultant.

MIMER MEDICAL COLLEGE

DR. BHAUSAHEB SARDESAI TALEGAON RURAL HOSPITAL, TALEGAON (D)

CENTRAL CLINICAL LABORATORY (CCL)

STANDARD OPERATING PROCEDURE (SOP)

STANDARD OPERATING PROCEDURE (SOP)- CENTRAL CLINICAL LABORATORY (CCL)			
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CONTENTS:

- 1) SAMPLE COLLECTION**
 - Instructions to patients
 - Instructions to phlebotomists for different sample collection
 - Instructions to physicians/pathologists for different sample collection
 - Procedure for rejection of unacceptable samples
- 2) SAMPLE PROCESSING**
 - Procedure for handling urgent samples
 - Procedure for assuring quality of test result
 - Procedure for storage, retention & disposal of samples
- 3) REPORTING**
 - Procedure for resolution of complaints
- 4) PROCEDURE FOR EQUIPMENT MAINTENANCE**
- 5) PROCEDURE FOR HOUSEKEEPING**
- 6) BIOMEDICAL WASTE (BMW)- MANAGEMENT AND HANDLING**
 - Collection
 - Segregation
 - Storage
 - Transportation
 - Disposal
- 7) BIOSAFETY (UNIVERSAL SAFETY PRECAUTIONS)**

1) **SAMPLE COLLECTION**

INSTRUCTIONS TO PATIENT FOR DIFFERENT SAMPLE COLLECTIONS

Fasting instructions

- For Blood sugar fasting and Insulin fasting: fasting period of 8 to 10 hrs is required. Fasting allows only water consumption till blood collection.
- For Lipid Profile: fasting period of 10 to 12 hours is required.

Specific timed collections

- Post-prandial Blood sugar and post-prandial Insulin: blood specimens collected exactly at 2 hrs after completion of meal. (Note: for diabetics regular medication should be continued on the day of the test).
- GTT: Patient should be in a position to wait at the lab/hospital for at least 2–3 hours, since 3 blood specimens are collected at the interval of 1 hour or as per clinician's prescription.
- Cortisol: blood specimens are collected twice, once at 8.00 am and then at 4.00 pm. The timing of blood collection has clinical significance and hence must be clearly specified on the tubes.

24 hours Urine collection

- Instruct the patient about the preservative and restrict him from discarding the same from the can provided to collect the urine sample.
- To start collection, ask the patient to discard the first urine passed in the morning. Note down the exact time (for e.g. 7:00 am). From this time onwards collect all subsequent urine samples in the container provided. Collection should be continued till same time the next day (i.e. 7:00 am). This is the 24 hours Urine sample.
- Patient should submit the 24 hours urine sample container to the lab within 1 hour.

Test (24 Hours Urine)	Preservation	Quantity
Albumin	Boric Acid	10 – 15 g
Calcium	HCL	3 ml HCL + 12 ml D/W
Chloride	Boric Acid	10 – 15 g
Creatinine	Boric Acid	10 – 15 g
Glucose	Boric Acid	10 – 15 g
Phosphorous	HCL	3 ml HCL + 12 ml D/W
Potassium	No Preservative	--
Proteins	Boric Acid	10 – 15 g
Sodium	No Preservative	--
Urea	HCL	3 ml HCL + 12 ml D/W
Uric Acid	Boric Acid	10 – 15 g

Urine collection for routine and microscopy

- Remove the underclothing and sit comfortably on the seat.
- Be sure to wash well and rinse well before you collect the urine sample.
- Collect clean catch, mid-stream urine sample.
- Place the lid on the container immediately.

- Clean the container from the outside if soiled with urine.
- Submit the sample to the laboratory as soon as possible (within 30 min).

Urine collection for Culture

- The sample to be collected should be as fresh a sample as possible (early morning sample only if it can be transferred to the lab within half an hour).
- Remove the underclothing and sit comfortably on the seat.
- Be sure to wash well and rinse well before you collect the urine sample.
- Wash the organ well 3 times with soap water and once with clean water in a front to back motion.
- Open the culture container.
- Hold yourself apart and allow the first few drops of urine to pass into the toilet bowl. Hold the culture container on the outside and pass the remaining urine into the cup.
- Place the lid on the container immediately.
- Clean the container from the outside if soiled with urine.
- Submit the sample to the laboratory as soon as possible (within 30 min).
- If a delay is expected, kindly refrigerate the sample.

Stool/Feces Sample

- Use clean, wide-mouthed containers, which can be covered with tight-fitting lid for collection of feces specimens.
- Ensure that the containers are free of preservatives, detergents and metal ions.
- Avoid contamination of feces specimen with urine.
- In case of collection of rectal swabs just insert the swab beyond anal sphincter, avoiding direct contact with fecal material in the rectum.
- Inoculate the swabs immediately onto culture media or place in a suitable transport system to prevent drying.

Sputum sample

- Collect the sputum before any antibiotic therapy is started and when the patient first coughs on waking in morning.
- Collect sputum in a disposable, wide-mouthed, screw-capped plastic container of about 100 ml capacity.
- Ask the patient to brush their teeth and gargle with water before collecting sputum for culture.
- Instruct the patient to wait until he feels material coughed into his throat and then to spit it directly into the opened container without spilling over the rim. Tightly screw on the cap of the container. Wipe off any spilled material on its outside with a tissue moistened with disinfectant.

Semen Collection

- The patient should be instructed to collect semen after three days and no longer than five days of sexual abstinence in a sterile plastic container. The Semen sample collected outside laboratory should be delivered to the laboratory within 30 min after collection.
The semen sample should never be refrigerated and should be processed at the earliest.

INSTRUCTIONS TO PHLEBOTOMIST FOR DIFFERENT SAMPLE COLLECTION

Plasma for coagulation tests

- Blood must be collected in a blue top Sodium Citrate tube up to the mark only.
- Blood containing tube must be gently inverted 4 -5 times to ensure proper mixing of specimen with the anticoagulant.
- The tube must be suitably labeled indicating patient's name and identity no.
- Centrifuge at 3000 rpm for 15 minutes twice.

- Label the plastic transfer vial specifying anticoagulant used to obtain plasma and time of collection. Ensure that the above details match with the details given on the label of the specimen containing original tube.
- Transfer separated plasma to this vial with the help of a pipette after ensuring that the plasma is free from Hemolysis and turbidity.
- Note: Do not store the sample at 2-8°C. Coagulation tests are very sensitive specialized tests, proper specimen collection, processing and transport under specified conditions is mandatory to obtain accurate reports.

Bleeding time and clotting time

- It should be performed by phlebotomist in the lab OPD as well as he/she should attend the patient in casualty also.
- Write findings in register.

EDTA Whole Blood

- Blood must be collected in a specific EDTA anticoagulant containing tube (i.e. lavender top EDTA for tests such as Hb, CBC etc.), up to the mark.
- This specimen containing tube must be gently inverted 7-8 times to ensure proper mixing of blood and the anticoagulant. The specimen quality must be checked, and should be free from hemolysis, clots and must be in recommended quantity.
- The tube must be suitably labeled indicating patient's name and identity number.

Serum

- Blood must be collected in a properly labeled red top plain or gel tube.
- Tube must be gently inverted 4-5 times.
- Allow the blood to clot for 30-35 min.
- Centrifuge the specimen at 3500 rpm for 10 minutes if centrifuge is with swing head & 3800 rpm for 15 minutes if centrifuge with angle head is used (for gel tubes cooling centrifuge is used).
- In case of delay in processing separate the serum in to another vial. Transfer separated serum to this vial with a pipette after ensuring that the serum is free from hemolysis and turbidity.
- Ensure that the quantity of serum specimen is sufficient for all the tests requested.

Collection of Throat swab

- Instruct the patient to tilt the head back and breathe deeply. Gently depress the tongue with a tongue blade to visualize the tonsillar fossae and posterior pharynx. Extend the swab between the tonsillar pillars and behind uvula. Avoid contact of the lateral walls of the buccal cavity or tongue to minimize contamination with commensal bacteria.
- Use cotton-wool swab to collect as much exudates as possible from the tonsils, posterior pharyngeal wall and any other area that is inflamed or bears exudates.
- If the patient permits, rub the swab with rotation over one tonsillar area, then the arch of the soft palate and uvula, the other tonsillar area, and finally the posterior pharyngeal wall.
- Ensure an adequate view of the throat by good lighting and use disposable wooden spatula to pull outwards and so depress the tongue.
- Place the swab into a sterile tube or other suitable container.

INSTRUCTION TO PHYSICIAN/PATHOLOGISTS FOR DIFFERENT SAMPLE COLLECTION

Cerebrospinal Fluid (CSF)

- CSF collection procedure should be done by experienced medical officer only. CSF is obtained by lumbar puncture, subdural tap or ventricular aspiration. Other specimens for diagnosis of Central Nervous System Infections include brain abscess (obtained by aspirate) and brain tissue. CSF obtained from lumbar spinal puncture is the most common Central Nervous System specimens.

- Perform lumbar puncture under strict aseptic condition and collect CSF from arachnoids spaces between the 4th and 5th lumbar vertebrae by using sterile wide bore needle and transfer to a sterile container.
- Do not refrigerate CSF samples and process as early as possible.

Tissue Biopsy for Histopathology

- Tissue Biopsy must be received in 10 % formalin in a leak proof container.
- Quantity of formalin added to preserve the tissue specimen, must be ten times the volume of tissue biopsy.

Tissue Biopsy for Microbiology

- Tissue biopsy must be received in normal saline in a leak proof container.
- Do not accept sample in formalin for microbiological testing.

Body Fluids

- Body fluid collected by the treating physician is received by the laboratory as it is.
- The specimen container must be examined for adequate label indicating patient's name and specimen type.

Specimens for Eye Infections

- Specimens for diagnosis of eye infections are to be collected by a medical practitioner only.
- Conjunctivitis is usually diagnosed with a swab of the affected conjunctiva, which can be placed in an appropriate transport medium.
- Keratitis is addressed by scrapings of the affected lesion.
- If a bacterial or fungal etiology is suspected material is often inoculated directly onto appropriate media by the clinician.

Collection of Pus/wounds/exudates

- Decontaminate the site from which the culture is to be obtained with 70% ethyl or isopropyl alcohol after which wash the wound well with sterile saline and dry.
- Remove the material (from wound or pus from the site) with syringe and needle. Remove the needle safely and replace with a non sharp syringe cap.
- In case any delay of more than 30 minutes before processing transfer the specimen to a transport container.
- If a very small amount of fluid is obtained (i.e. entire specimen is within the needle) recap the needle carefully, secure the cap and transport the syringe and needle in a puncture-proof container ensuring that the needle is contained within. Wash the needle with broth to obtain material from culture.
- If material cannot be obtained with a needle and syringe, use swabs for the same. Clean the site carefully as described earlier.
- For collecting pus swab, load the swab well with the material. If possible, send two swabs taken from the depths of the wound or lesion. One is for smear for microscopy and the other for seeding of cultures.
- Moisten dry swab with a little sterile broth or saline.
- It might be necessary either to separate the wound margins with the thumb and forefinger of one hand (wearing a protective glove) or to make a small opening in a closed abscess with a scalpel blade before extending the tip of the swab deeply into the depths of the lesion with other hand.
- Do not touch the adjacent skin margins. Place the swab immediately into an appropriate transport container.

Fine needle aspiration cytology

- Ensure that patient had some food before the procedure.
- Take proper consent.

- Prepare both air dried and alcohol fixed smears.
- Properly label and send smears to department of pathology as earliest.

PROCEDURE FOR REJECTION OF UNACCEPTABLE SAMPLE

A sample should be rejected by the laboratory if:

- It is unlabelled, incompletely labeled or the identity on the form does not match that on the specimen.
- Lack of patient's details and relevant history (Where it is crucial for releasing a report). Note: These specimens may be accepted after responsible individual makes proper identification and collects relevant history.
- Specimen collected with improper preservative or anticoagulant.
- Quantity of specimen insufficient to perform test.
- The specimen container is leaking.
- There is too long delay in the specimen reaching the laboratory or it has not been transported correctly. (Note: Irrecoverable specimens such as CSF, cord blood, biopsy or specimen taken prior to antibiotic therapy will not be discarded).

2) SAMPLE PROCESSING

- The laboratory receives samples in either of the following ways:
 - Collection of samples from the patients who come to the lab (OPD patients), the patients carry a list of tests suggested by the referring doctor or tell the reception staff the tests that are to be done.
 - Samples already collected and brought to the lab (IPD samples), these are accompanied by a test list suggested by the referring doctors from OPD or ward.
 - Samples collected by lab personnel either in hospitals, these are accompanied by a test list suggested by the referring doctors.
- If the sample is satisfactory, it is routed in the following manner:
 - For tests which employ whole blood, the respective sample tube is sent to the respective section.
 - If serum or plasma needs to be separated, the respective tube is centrifuged and sent to the respective section for testing. If serum is separated in another tube, the secondary tube is labeled with the patient's registration number and name. Technicians verify that there is no error in labeling the secondary tube.
- If on separation, the serum or plasma is found to be unsuitable for testing, a fresh sample is sought.
- If testing is not undertaken immediately, the sample tubes are stored in the refrigerator.
- The samples are accompanied by the test requisition form (TRF). Technicians refer to the (TRF) for tests to be carried out.

PROCEDURE FOR HANDLING OF URGENT SAMPLES

- Some specimens like CSF, blood specimen of newborn, specimen for Arterial blood gas (ABG); Troponin-T, CK-MB, Amylase, liquid stool, and samples for culture should be given top priority in the laboratory testing.
- A list of all urgent samples & the nature of the sample must be made at the reception in CCL.
- The test report must be informed to the concerned doctor or patient after completion of test.
- When there is a breakdown of major equipment and Turnaround time (TAT) cannot be met, all samples should be sent to the designated outsource laboratory for processing. Information of the same should be shared with referring doctors/ respective wards.

PROCEDURE FOR ASSURING QUALITY OF TEST RESULT

Routine QC operation:

- Routine operation depends on obtaining current control results and using them to determine whether the testing process is performing as expected. It is "expected" that the current control results fall within the established control limits if the testing process is working okay. It is unexpected for the control results to exceed a control limit or violate a control rule unless there is a problem with the testing process.
- Analyze control materials with each analytical run. The run is defined by the QC guidelines.
- Review and interpret the control results to determine control status.
- When control results are "in-control", accept the run and report the patient test results.
- When control results are "out-of-control", reject the run and do not report patient test results. Inspect the process, identify the source of difficulty, correct the problem, and then reanalyze the patients and controls. Once a problem is fixed, it may be best to reanalyze the controls first to determine control status, and then reassay the patient samples.
- Document any control problems and what was done to solve them.

PROCEDURE FOR STORAGE, RETENTION & DISPOSAL OF SAMPLES

Follow these guidelines:

- All EDTA samples are stored at 2-8°C for 48 hrs.
- All Citrate plasma samples are separated and stored at room temperature for 48 hrs.
- All Fluoride samples stored at 2-8°C for 48 hrs.
- All Serum samples are stored at 2-8°C for 48 hrs.
- Urine and Stool samples are discarded same day.
- All Microbiology samples are stored at 2-8°C till report is signed.
- All samples are discarded as per BMW protocol.

3) REPORTING

- Following points needs to be verified before releasing Reports:
 - Identification of the examination requested with the procedure used.
 - Identification of the patient.
 - Name of the referral doctors.
 - Identification of the sample examined.
 - Results of the examination done in traceable units.
 - Reference ranges of the test performed.
 - Method by which test is performed.
 - Interpretation of the result where necessary.
 - Other comments like result rechecked, possible contamination etc if required.
 - The signature of the doctor who releases the report.
 - Result rechecked Comment when repeated.
- The reports are issued to OPD patients in general as hard copies.
- IPD reports are given to respective ward as hard copies.
- The reports of IPD patients are informed to the wards/ICU etc. by telephone in case of urgent requirement or if the values are critically abnormal.
- Turnaround time (TAT) for routine tests is 4 hours and for emergency tests it is 2 hours. It may vary depending upon type of sample & investigation.
- Following reports are not to be given on phone:
 - Blood group

- HIV
- Hepatitis B, HCV
- VDRL test
- Pregnancy test
- Any information related to sexually transmitted diseases
- Any information, which may jeopardize patient's secrecy and confidentiality.

PROCEDURE FOR RESOLUTION OF COMPLAINTS

- If any non-conformity or any deviation from procedure is discovered, the responsibility of staff concerned is determined. Necessary corrective and preventive actions are taken.
- If any correction to the report issued is necessary, a supplementary report is issued.
- All instruments are cleaned and maintained by respective department in charge technician with the help of lab technician.

4) PROCEDURE FOR EQUIPMENT MAINTENANCE

- Technicians operating the equipment carry out scheduled daily, weekly and monthly maintenance of the testing equipment according to the manufacturer's instructions.
- Manufacturer's engineers carry out periodic preventive maintenance as specified in the annual service contract.
- In case of minor malfunction Senior Technician trouble shoots the problem and monitors its effectiveness. In case of major malfunctions observed senior technician informs to Manufacturer's engineers to trouble shoot the problem.
- At the time of instrument breakdown work load shifted to another backup instrument so that TAT will not get affected.
- Equipment is checked by the technicians by running internal quality controls after each scheduled or breakdown service and is brought in use only when the results obtained are in limits.
- Technicians operating the equipment start up and shut down the equipment in the recommended manner.
- Technicians operating the equipment carry out intermediate checks of the equipment as recommended by the manufacturer to:
 - Check equipment calibration
 - Check lamps, cuvettes, syringes
 - Ensure that equipment is in proper working order.
- After shut down, the equipment is stored properly to protect it from dust, heat or any other damage.

5) PROCEDURE FOR HOUSE KEEPING

- At 7.30 am, concerned person clean the working areas and other areas with disinfectant (1% Sodium Hypochlorite).
- At the change of duty shift, new housekeeping person will clean the working area.
- Cleaning is done repeatedly and as and when required.
- At the same time, washrooms are also cleaned. A person is posted to clean it periodically as & when required.

6) BIO-MEDICAL WASTE (BMW)- MANAGEMENT AND HANDLING

- Bio-medical Waste is defined as any waste generated during the diagnosis, treatment or immunization of human being or animals or in the research activity pertaining thereto, or in the

production of biological including waste like pathological, Pharmaceutical, Chemical, Microbiological, Genotoxic and Radioactive.

- Guidelines for Bio-medical Waste (Management & Handling) at Collection, Segregation, Storage, Transportation and Final disposal are as follows:

COLLECTION

- The waste is collected by the trained hospital staffs.
- Personal safety measures- Wearing thick plastic gloves/ boot/ apron is mandatory.
- Waste should be collected in metal bins/plastic bags.
- Bags should be filled $\frac{3}{4}$ th of its capacity.
- Close by thread but never staple.
- Bag should have Biohazard symbol.
- Bag should have water-proof labels.
- New amendment says Barcoding system.

Four colored bags are used in BMW management and for General waste as per the local guidelines: Yellow, Red, White (translucent), Blue and Black:

Category	Type of Waste	Type of Bag or Container to be used	Treatment and Disposal options
(1)	(2)	(3)	(4)
Yellow	(a) Human Anatomical Waste: Human tissues, organs, body parts and fetus below the viability period (as per the Medical Termination of Pregnancy Act 1971, amended from time to time	Yellow coloured non-chlorinated plastic bags	Incineration or Plasma Pyrolysis or deep burial*
	(b) Animal Anatomical Waste : Experimental animal carcasses, body parts, organs, tissues, including the waste generated from animals used in experiments or testing in veterinary hospitals or colleges or animal houses.		
	(c) Soiled Waste: Items contaminated with blood, body fluids like dressings, plaster casts, cotton swabs and bags containing residual or discarded blood and blood components.		and Incineration or Plasma Pyrolysis or deep burial* In absence of above facilities, autoclaving or micro-waving/ hydroclaving followed by shredding or mutilation or combination of sterilization and shredding. Treated waste to be sent for energy recovery.
	(d) Expired or Discarded Medicines: Pharmaceutical waste like antibiotics, cytotoxic drugs including all items contaminated with cytotoxic drugs along with glass or plastic ampoules, vials etc.	Yellow coloured non-chlorinated plastic bags or containers	Expired cytotoxic drugs and items contaminated with cytotoxic drugs to be returned back to the manufacturer or supplier for incineration at temperature >1200 OC or to common bio-medical waste treatment facility or hazardous waste treatment, storage and disposal facility for incineration at >12000C Or Encapsulation or Plasma Pyrolysis at >12000C. All other discarded medicines shall be either sent back to manufacturer or disposed by incineration.
	(e) Chemical Waste: Chemicals used in production of biological and used or discarded disinfectants.	Yellow coloured containers or non-chlorinated	Disposed of by Incineration or Plasma Pyrolysis or Encapsulation in hazardous waste treatment, storage and disposal facility.

		plastic bags	
	(f) Chemical Liquid Waste : Liquid waste generated due to use of chemicals in production of biological and used or discarded disinfectants, Silver X-ray film developing liquid, discarded Formalin, infected secretions, aspirated body fluids, liquid from laboratories and floor washings, cleaning, house-keeping and disinfecting activities etc.	Separate collection system leading to effluent treatment system	After resource recovery, the chemical liquid waste shall be pre-treated before mixing with other wastewater. The combined discharge shall conform to the discharge norms given in Schedule III.
	(g) Discarded linen, mattresses, beddings contaminated with blood or body fluid.	Non-chlorinated yellow plastic bags or suitable packing material	Non-chlorinated chemical disinfection followed by incineration or Plasma Pyrolysis or for energy recovery. In absence of above facilities, shredding or mutilation or combination of sterilization and shredding. Treated waste to be sent for energy recovery or incineration or Plasma Pyrolysis
	(h) Microbiology, Biotechnology and other clinical laboratory waste: Blood bags, Laboratory cultures, stocks or specimens of microorganisms, live or attenuated vaccines, human and animal cell cultures used in research, industrial laboratories, production of biological, residual toxins, dishes and devices used for cultures.	Autoclave safe plastic bags or containers	Pre-treat to sterilize with nonchlorinated chemicals on-site as per National AIDS Control Organisation or World Health Organisation guidelines thereafter for Incineration.
Red	Contaminated Waste (Recyclable) (a) Wastes generated from disposable items such as tubing, bottles, intravenous tubes and sets, catheters, urine bags, syringes (without needles and fixed needle syringes) and vaccutainers with their needles cut) and gloves	Red coloured non-chlorinated plastic bags or containers	Autoclaving or micro-waving/ hydroclaving followed by shredding or mutilation or combination of sterilization and shredding. Treated waste to be sent to registered or authorized recyclers or for energy recovery or plastics to diesel or fuel oil or for road making, whichever is possible. Plastic waste should not be sent to landfill sites.
White (Translucent)	Waste sharps including Metals: Needles, syringes with fixed needles, needles from needle tip cutter or burner, scalpels, blades, or any other contaminated sharp object that may cause puncture and cuts. This includes both used, discarded and contaminated metal sharps	Puncture proof, Leak proof, tamper proof containers	Autoclaving or Dry Heat Sterilization followed by shredding or mutilation or encapsulation in metal container or cement concrete; combination of shredding cum autoclaving; and sent for final disposal to iron foundries (having consent to operate from the State Pollution Control Boards or Pollution Control Committees) or sanitary landfill or designated concrete waste sharp pit.
Blue	(a) Glassware: Broken or discarded and contaminated glass including medicine vials and ampoules except those contaminated with cytotoxic wastes.	Cardboard boxes with blue colored marking	Disinfection (by soaking the washed glass waste after cleaning with detergent and Sodium Hypochlorite treatment) or through autoclaving or microwaving or hydroclaving and then sent for recycling.
	(b) Metallic Body Implants	Cardboard boxes with blue colored marking	

SUMMARY

YELLOW COLOR BAGS

Contaminated waste (Solid/ Liquid) which cannot be recycled

- Human or Animal anatomical waste
- Expired / discarded medicine
- Microbiological, other clinical laboratory waste- Blood bags, live/ attenuated vaccines.
- Discarded linen contaminated with Blood /body fluid /mask

Treatment / disposal options: Incinerator/ Plasma Pyrolysis / hydroclaving

RED COLOR BAGS

Contaminated waste which can be recycled

- Plastic bags, tubing's, saline bottles, i/v tubes/set, gloves, syringes without needles, vacutainers with needle cut

Treatment / disposal options: Autoclaving /hydroclaving /microwaving

WHITE TRANSLUCENT COLOR BAGS

- Puncture proof leak proof, tamper proof
- Needle, Scalpel, Blades, any contaminated sharps

Treatment / disposal options: Autoclaving/ dry heat/encapsulation in metal container or cement concrete landfill/ concrete waste sharp pit

BLUE COLOR BAGS

- Puncture proof , leak proof
- Glassware's – broken / discarded and contaminated glass (medicine vials & ampoules- except those contaminated with cytotoxic waste)
- Metallic body implants

Treatment / disposal options: Disinfection (sodium hypochlorite 1-2% concentration) or Autoclaving/ hydroclaving/microwaving and then sent for recycling

SEGREGATION

- Basic separation of different categories of waste
- Done at point of generation
- By segregation a hospital can:
 - reduce total treatment cost
 - reduce impact on community
 - reduce chances of infection of health care workers

STORAGE

(Waste should not be stored for more than 8 -10 hours in big hospitals & 24 hours in nursing homes)

- Waste should not be stored for more than 48 hours
- First In First Out (FIFO) policy is used.
- Stored away from hospital , should have
 - Impermeable floor
 - Good water supply for cleaning
 - Good lightening & ventilation
 - Easily accessible to the staff
 - Locking facilities

Segregation at source & safe storage is the key to whole Hospital Waste Management.

TRANSPORTATION

A. Internal transport:

- Wheeled trolley /hand cart. (Manual loading avoided)
- Cleaned & disinfected daily by 1% hypochlorite solution

B. External transport:

- Special vehicle should be airtight (Should not be risk to public health)
- Cleaned & disinfected daily by 1% hypochlorite solution regularly.
- Signed document

DISPOSAL

- As per BMW (1998), Disposal facilities preferably be in the own premises. But as per BMW 2016 occupier need not have disposal facilities if outsourcing facilities is available within 75kms.
- Selection of the technology should be complete in itself & should not convert one form of the waste to another which is equally dangerous.

Disposal methods depends upon

- Capital cost
- Associated environmental and health risk
- Regulatory requirement
- Reliability of the system
- Public acceptance
- Suitability of the waste generated
- Efficiency of the treatment

Technology employed

Needle cutter	Autoclave	Plasma Pyrolysis
Syringe crusher	Hydroclave	Encapsulation
Shredder	Microwave	Inertization
	Incinerator	
	Land burial	Vermiculture

7) BIO SAFETY (UNIVERSAL SAFETY PRECAUTIONS)

Along with above mentioned specific guidelines, following Universal Precautions must always be followed while working in the Laboratory:

- All body fluids must be handled in accordance with the Centre for Disease Control's Universal Precautions that are intended to prevent parenteral, mucous membrane and non-intact skin exposure of healthcare workers to blood borne pathogens. Universal precautions imply that all body fluids are treated as if known to be infectious for Human Immunodeficiency Virus (HIV), Hepatitis B Virus (HBV), or other blood borne Pathogens.
- All employees shall wash their hands immediately or as soon as possible after removal or gloves or other personal protective equipment (i.e. gloves, lab coats and aprons) and after hand contact with blood or other potentially infectious material.
- Eating, drinking, smoking, applying cosmetics of lip balm and handling of contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure.
- Food and drink shall not be stored in refrigerators, freezers, shelves, cabinets or on countertops or bench tops where blood or potentially infectious materials are stored.
- Gloves shall be worn when the employee has the potential for the hands to have direct skin contact with blood or other potentially infectious materials. In addition, gloves shall be worn when handling any equipment with the biohazard symbol. Disposable (single use) gloves shall be replaced as soon as possible when visibly soiled, torn, and punctured or when their ability to function as a barrier is compromised. Gloves shall neither be removed nor decontaminated for future use.

- Laboratory coats shall be worn if there is a potential for soiling of clothes with blood or other potentially infectious materials. It is compulsory to wear laboratory coats at all times in the laboratory.
- All procedures involving blood or other potentially infectious materials shall be performed in such a manner as to minimize splashing, spraying and aerosolization of these substances.
- Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.
- Centrifuges, specimen holders, instrument sampling racks, bins, pails, cans and similar receptacles intended for reuse which have a potential for becoming contaminated with blood or other potentially infectious materials shall be inspected, cleaned and disinfected.
- In case of needle stick injury, bleed the puncture site freely by applying gently pressure until the bleeding stops. Then wash thoroughly with disinfectant soap and water. He/she shall immediately notify his or her senior/faculty available there of the exposure so that further management can be initiated.

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ANTIBIOTICS				
Amikacin	IV 24 Hrly	0 - 7 D	8 - 28 D	> 28 D
	≤ 29 wk	7.5 mg/kg	10 mg/kg	15 mg/kg
	30 - 33 wk	10 mg/kg	15 mg/kg	15 mg/kg
	≥ 34 wk	15 mg/kg	15 mg/kg	15 mg/kg
Ampicillin	50 mg/kg/dose IV			
	≤ 29 wk	0 - 28 D	12 Hrly	
		> 28 D	8 Hrly	
	30 - 36 wk	0 - 14 D	12 Hrly	
		> 14 D	8 Hrly	
	≥ 37 wk	0 - 7 D	12 Hrly	
> 7 D		8 Hrly		
Azithromycin	10 mg/kg/dose IV/PO 24 Hrly			
Cefotaxime	50 mg/kg/dose IV			
	≤ 29 wk	0 - 28 D	12 Hrly	
		> 28 D	8 Hrly	
	30 - 36 wk	0 - 14 D	12 Hrly	
		> 14 D	8 Hrly	
	≥ 37 wk	0 - 7 D	12 Hrly	
> 7 D		8 Hrly		
Ceftriaxone	50 mg/kg/dose IV Sepsis - 12 Hrly, Meningitis - 8 Hrly			
Cefuroxime	50 mg/kg/dose IV 8 Hrly			
Chloramphenicol	Load: 20 mg/kg/dose IV over 1 Hr			
	After 24 Hrs, 5 mg/kg/dose IV 6 Hrly			
Ciprofloxacin	10 - 15 mg/kg/dose IV 12 Hrly			
Clarithromycin	7.5 mg/kg/dose IV/PO 12 Hrly			
Clindamycin	5 - 7.5 mg/kg/dose IV			
	≤ 29 wk	0 - 28 D	12 Hrly	
		> 28 D	8 Hrly	
	30 - 36 wk	0 - 14 D	12 Hrly	
		> 14 D	8 Hrly	
	≥ 37 wk	0 - 7 D	12 Hrly	
> 7 D		8 Hrly		
Coistin	Load: 10 mg/kg/dose IV (1 MU = 80 mg)			
	After 24 Hrs, 5 mg/kg/dose IV 12 Hrly			
Cotrimoxazole	TMP: 4 - 6 mg/kg/dose IV/PO 12 Hrly			
Gentamycin	IV 24 Hrly Over 1 Hr			
	≤ 29 wk	0 - 7 D	4 mg/kg	
		> 7 D	5 mg/kg	
	30 - 34 wk	0 - 7 D	4 mg/kg	
		> 7 D	5 mg/kg	
≥ 35 wk	All	5 mg/kg		
Imipenem	Non CNS Infection: 20 - 25 mg/kg/dose IV 12 Hrly			
Levoflox	10 mg/kg/dose IV 12 Hrly			
Linezolid	10 mg/kg/dose IV/PO, 0 - 7 D: 12 Hrly, > 7 D: 8 Hrly			
Meropenem	Sepsis: 20 mg/kg/dose IV			
	< 32 wk	0 - 14 D	12 Hrly	
		> 14	8 Hrly	
	≥ 32 wk	0 - 7	12 Hrly	
		> 7 D	8 Hrly	
Meningitis: 40 mg/kg/dose IV 8 Hrly				

Metronidazole	Load: 15 mg/kg/dose IV over 1 Hr		
	After 24 Hrs, 7.5 mg/kg/dose IV		
	≤ 29 wk	0 - 28 D	24 Hrly
		> 28 D	12 Hrly
	30 - 36 wk	0 - 14 D	24 Hrly
		> 14 D	12 Hrly
≥ 37 wk	0 - 7 D	24 Hrly	
	> 7 D	12 Hrly	
Netilmicin	5 mg/kg/dose IV 24 Hrly		
Piperacillin Tazobactam	100 mg/kg/dose IV, over 1 Hr		
	≤ 29 wk	0 - 28 D	12 Hrly
		> 28 D	8 Hrly
	30 - 36 wk	0 - 14 D	12 Hrly
		> 14 D	8 Hrly
	≥ 37 wk	0 - 7 D	12 Hrly
> 7 D		8 Hrly	
Polymyxin B	10000 - 20000 IU/kg/dose IV 12 Hrly		
Ticoplanin	Load: 16 mg/kg/dose IV over 1 Hr		
	After 24 Hrs, 8 mg/kg/dose IV 12 Hrly		
Tigecycline	Load: 2 mg/kg/dose IV over 1 Hr		
	After 24 Hrs, 1 mg/kg/dose IV 12 Hrly		
Vancomycin	Sepsis: 10 mg/kg/dose IV		
	Meningitis: 15 mg/kg/dose IV		
	< 37 wk	0 - 14 D	12 Hrly
		> 14 D	8 Hrly
	≥ 37 wk	0 - 7 D	12 Hrly
> 7 D		8 Hrly	

ANTIFUNGAL MEDICATION	
Amphotericin B Conventional	1 - 1.5 mg/kg/dose IV 24 Hrly IV Infusion over 2 - 3 Hr
Amphotericin B Lipid Complex	2.5 - 5 mg/kg/dose IV 24 Hrly IV Infusion over 2 - 3 Hr
Amphotericin B Liposomal	3 - 5 mg/kg/dose IV 24 Hrly IV Infusion over 2 - 3 Hr
Caspofungin	2 mg/kg/dose IV 24 Hrly IV Infusion over 2 Hr
Fluconazole	Prophylaxis: 6 mg/kg/dose IV/PO Twice a wk Treatment: 12 mg/kg/dose IV/PO 24 Hrly

ANTIVIRAL MEDICATION	
Acyclovir	Herpes Simplex Encephalitis > 32 Weeks, > 1.2 kg 20 mg/kg/dose IV 8 Hrly
Gancyclovir	Congenital CMV 6 mg/kg/dose IV Over 1 Hr, 12 Hrly, for 6 weeks
Nevirapine	Perinatal HIV 2 mg/kg PO, Single Dose Within 72 Hrs of Birth
Zidovudine	Perinatal HIV 2 mg/kg/dose PO < 35 Wk: 8 Hrly, ≥ 35 Wk: 6 Hrly

Acetaminophen	10 - 15 mg/kg/dose IV/PO 6 - 8 Hrly				
Acetazolamide	Metabolic Alkalosis 5 mg/kg/dose PO 24 Hrly x 3 days				
Acetylcysteine	TPN induced cholecystitis 100 mg/kg/day IV Infusion				
	Nebulisation 1 - 2 ml of 20% Sol, 1:1 Dil, 6 - 8 Hrly				
Adenosine	SVT: 0.05 mg/kg/dose Rapid IV Every 2 min, increment of 0.05 mg/kg, 3 doses				
Adrenaline	Resuscitation: 1:10000 Solution IV: 0.1 - 0.3 ml/kg, ET: 0.3 - 1 ml/kg				
	Nebulisation (1:1000): 0.5 ml/kg + 3ml NS				
	0.01 - 0.1 mcg/kg/min IV Infusion				
Alpostin (PGE1)	50 - 100 ng/kg/min IV Infusion				
Albumin	0.5 - 1 gm/kg IV over 2 Hr				
Aminophylline	Load: 5 - 6 mg/kg IV				
	M ⁿ : 1 - 2 mg/kg/dose IV 6 - 8 Hrly				
Amiodarone	Load: 5 mg/kg IV over 1 Hr				
	M ⁿ : 5 - 15 mcg/kg/min IV Infusion				
Atropine	0.02 mg/kg/dose IV, Min 0.1 mg, Max 0.6 mg				
Budesonide	Nebulisation: 0.25 - 0.5 mg + 3 ml NS				
Caffeine Citrate	Load: 20 mg/kg IV				
	M ⁿ : 5 - 10 mg/kg IV/PO 24 Hrly				
Calcium Gluconate 20%	1 - 2 ml/kg/dose, 1:1 Dil, 6 - 8 Hrly				
Calcium - Oral	100 - 125 mg/kg/dose PO 12 Hrly				
Carnitine	50 mg/kg/dose IV/PO 12 Hrly				
Chloral Hydrate	25 - 50 mg/kg/dose PO				
Dexamethasone	Extubation: 0.15 mg/kg/dose IV 8 Hrly, 4 doses				
Dextrose 10%	Hypoglycemia: 2 ml/kg IV				
Digoxin	mcg/kg	≤ 29 wk	30-36 wk	≥ 37 wk	
	LOAD IV	15	20	30	
	PO	20	25	40	
	M ⁿ doses 24 Hrly	M ⁿ IV	4	5	4
		PO	6	6	5
Dobutamine	5 - 20 mcg/kg/min IV Infusion				
Domperidone	0.3 mg/kg/dose PO 6 - 8 Hrly				
Dopamine	5 - 20 mcg/kg/min IV Infusion				
Dornase Alfa (Mesna)	Intratracheal: 0.2 ml/kg				
	Nebulisation: 1.25 - 2.5 ml, 1:1 Dil, 12 - 24 Hrly				
Doxapram	Load: 2.5 - 3 mg/kg IV over 1 Hr				
	M ⁿ : 1 - 2.5 mg/kg/Hr IV Infusion				
Enoxaparin	Treatment: 1.75 mg/kg/dose SC 12 Hrly				
	Prophylaxis: 0.75 mg/kg/dose SC 12 Hrly				
Erythromycin	Prokinetic: 5 mg/kg/dose 6 Hrly, 5 days				
Erythropoietin	200 - 400 U/kg/dose IV/SC 3 times a week				
Fentanyl	Bolus: 1 - 2 mcg/kg IV				
	1 - 2 mcg/kg/Hr IV Infusion				
Flecainide	2 - 4 mg/kg/dose PO 12 Hrly				
Fludrocortisone	CAH: 0.05 - 0.3 mg PO 24 Hrly				
FosPhenytoin 50 mg PE/ml	Load: 15 mg PE/kg				
	M ⁿ : 2 - 3 mg PE/kg/dose IV 12 Hrly				
Furosemide (Lasix)	Bolus: 0.5 - 2 mg/kg IV/PO 8 - 12 Hrly				
	0.06 - 0.25 mg/kg/Hr IV Infusion				

Glucagon	Hypoglycemia: 0.02 - 0.03 mg/kg/dose IV/SC			
Glycerine	0.5 ml/kg/dose, 1:1 Dil, PR 12 - 24 Hrly			
Glycopyrrolate	4 - 10 mcg/kg/dose IV 4 - 8 Hrly			
Heparin	IV Patency: 0.5 - 1 U/ml of IVF			
	Thrombosis: Load: 75U/kg over 10 min			
	M ⁿ : 28 U/kg/Hr IV Infusion			
Hydrochlorothiazide	1 - 2 mg/kg/dose PO 12 Hrly, with food			
Hydrocortisone	Shock: 2 mg/kg/dose IV 6 - 8 Hourly			
	Stress: 0.5 - 1 mg/kg/dose IV/PO 12 Hrly			
Ibuprofen	PDA: 10 - 5 - 5 mg/kg/dose IV/PO 24 Hrly			
Indomethacin	PDA: ___ mg/kg/dose IV 12 - 24 Hrly, Over 1 Hr			
	< 48 Hr	0.2	0.1	0.1
	2 - 7 D	0.2	0.2	0.2
	> 7 D	0.2	0.25	0.25
	IVH Prophylaxis: 0.1 mg/kg/dose IV 24 Hrly x 3D			
Insulin	Bolus: 0.05 U/kg IV/SC			
	0.05 - 0.2 U/kg/Hr IV Infusion			
Ipratropium Bromide	Nebulisation: 0.25 mg + 3ml NS 6 - 12 Hrly			
Iron - Oral	2 - 3 mg/kg/dose PO 12 hrly, Elemental Iron			
Isoproterenol	0.05 - 2 mcg/kg/min IV Infusion			
IVIG	1 gm/kg/day IV over 4 - 5 Hr, 3 - 5 days			
Kayexelate (K Bind)	1 - 2 gm/kg/dose PO/PR 4 - 6 Hrly			
Ketamine	1 - 2 mg/kg/dose IV			
Ketorolac (Eye Drops)	2 Drops Each Eye 6 Hrly, 3 days			
Levetiracetam	10 mg/kg/dose IV/PO 12 Hrly			
Levothyroxine	10 mcg/kg/dose PO 12 Hrly			
Lidocaine	Bolus: 1 - 2 mg/kg/dose IV over 2 min			
	20 - 50 mcg/kg/min IV Infusion			
Lorazepam	0.05 - 0.1 mg/kg/dose IV			
Magnesium Sulfate	25 - 50 mg/kg/dose IV over 1 Hr, 4 - 6 Hrly			
Metoclopramide	0.1 - 0.2 mg/kg/dose IV/PO 8 - 12 Hrly			
Metoprolol	1 - 2 mg/kg/dose IV/PO 12 Hrly			
Midazolam	Bolus: 0.1 mg/kg IV			
	0.2 - 1 mcg/kg/min IV Infusion			
Milrinone	Load: 0.05 mg/kg IV over 30 min			
	M ⁿ : 0.33 - 0.75 mcg/kg/min			
Morphine	Bolus: 0.05 - 0.1 mg/kg IV			
	10 - 20 mcg/kg/Hr IV Infusion			
Naloxone	0.1 mg/kg/dose IV, Repeat 2 - 3 min			
Noradrenaline	0.01 - 0.5 mcg/kg/min IV Infusion			
Octreotide	Chylothorax: 1 - 4 mcg/kg/Hr IV Infusion			
Omeprazole	0.5 - 1.5 mg/kg/dose IV 24 Hrly			
Ondansatrone	0.1 mg/kg/dose IV/PO 8 - 12 Hrly			
Pantoprazole	1 - 1.5 mg/kg/dose IV 24 Hrly			
Phenobarbitone	Load: 20 mg/kg IV			
	M ⁿ : 2.5 - 3 mg/kg/dose IV/PO 12 Hrly			
	Jaundice: 2 - 3 mg/kg/dose PO 8 - 12 Hrly			
Phenytoin	Load: 15 mg/kg IV			
	M ⁿ : 2 - 3 mg/kg/dose IV/PO 12 Hrly			
Phytonadione (Vit K1)	<2kg: 0.5 mg, > 2kg: 1 mg IV/IM			
Propranolol	Arrythemia: 0.1 mg/kg/dose IV Push			
Ranitidine	1 mg/kg/dose IV 12 Hrly			
Rocuronium	1 mg/kg/dose IV			

Salbutamol	Nebulisation: 0.03 ml/kg + 3ml NS 6 - 8 Hrly
Sildenafil	Load: 0.4 mg/kg IV over 3 Hr
	0.067 mg/kg/Hr IV Infusion
	Oral: 0.5 - 2 mg/kg/dose 6 - 8 Hrly
Sodium Bicarbonate	1 - 2 mEq/kg/dose IV, 1:1 Dil, Over 1 Hr
Spironolactone	1 - 2 mg/kg/dose PO 12 Hrly
Succinyl Choline	1 - 2 mg/kg/dose IV
Sucrose 24%	32 - 37 wk: 1 ml PO 2 min before procedure
	> 37 Wk: 2 ml PO 2 min before procedure
Tropicamide 0.5%	1 Drop each eye, Every 5 min, 3 times
Ursodiol	Cholestasis: 10 - 15 mg/kg/dose PO 8 Hrly
Vasopressin	0.0001 - 0.0003 U/kg/min IV Infusion
Vecuronium	0.1 mg/kg IV
Vitamin A	5000 IU, IM, 3 days a week, 12 doses
Vitamin D3	400 - 1000 IU PO 24 Hrly
Vitamin E	25 IU PO 24 Hrly
Warfarin	0.1 - 0.2 mg/kg/dose PO 24 Hrly

NICU RESUSCITATION DRUGS	
Oxygen	
Sodium Bicarbonate	1 - 2 ml/kg IV, 1:1 Dilution, Over 1 Hr
Adrenaline	1:10000, 0.1 ml/kg IV, 0.3 ml/kg ET
Calcium Gluconate	1 - 2 ml/kg IV, 1:1 Dilution, Over 1 Hr
Lidocaine	1 mg/kg IV, Over 1 Hr
Atropine	0.02 mg/kg, 0.1 mg Minimum, IV
Dextrose 10%	2 ml/kg IV
Adenosine	0.05 mg/kg Rapid IV F/by 5ml NS Flush
Midazolam	0.1 mg/kg IV

VARIOUS INTUBATION DRUGS	
Atropine	0.02 mg/kg, 0.1 mg Minimum
Fentanyl	1 mcg/kg
Ketamine	1 mg/kg
Midazolam	0.1 mg/kg
Rocuronium	1 mg/kg
Vecuronium	0.1 mg/kg
Succinyl Choline	1 mg/kg
Propofol	2 mg/kg
Thiopentone	2 mg/kg

Scoring System for Starting Antibiotic

No	Criteria	Score
1	Intrapartum Vaginal Examination > 3	6
2	Clinical Chorioamnionitis	6
3	PROM > 12 Hours	6
4	Maternal Fever / Sepsis - Last 7 days	3
5	Home Delivery	3
6	Preterm / Premature onset of Labour	3
7	Outside NICU Stay > 24 hours	3
8	Male Gender	3
9	Birth Weight < 1.2 kg	2
10	Gestation < 30 weeks	2

Total Score: 0 - 10	Total Score \geq 10
No Antibiotics CBC, CRP at Admission & 48 Hr Monitor Clinically	Sent CBC, CRP Send Blood Culture Start First Line Antibiotic

Prophylactic	Criteria
Antifungal in Neonates	BW < 1.2 kg, GA < 32 weeks
Dose: 6 mg/kg/dose	TPN > 7 Days
Frequency: Twice a week	Invasive Lines > 7 Days
Route: IV / Oral	Mechanical Ventilation > 7 Days
Till 4 weeks or risk factor +	Broad Spectrum Antibiotics > 7 Days

Caloric Calculation

EBM - Term	0.68 kcal/ml	10% D	0.34 kcal/ml
EBM-Preterm	0.67 kcal/ml	5% D	0.17 kcal/ml
Pre Nan	0.79 kcal/ml	Aminoven 10%	0.4 kcal/ml
Nan 1	0.67 kcal/ml	Lipid 20%	2 kcal/ml
Latogen	0.67 kcal/ml	HMF	7.5kcal/Sachet
Lactodex LBW	0.88 kcal/ml	MCT Oil	0.39 kcal/drop

Protocols for USG Brain	< 1 kg < 30 week	1 - 1.5 kg 30 - 34 week	> 1.5 kg > 34 week
Day 0 - 3	✓		
Day 3 - 5		✓	High Risk Pt
Day 7 - 10	✓ If Sick		High Risk Pt
Day 28	✓	✓	High Risk Pt

Repeat USG Brain to be planned as per the findings of the 1st Scan

High Risk Patient	RDS, Sepsis, Asphyxia, HIE, Pneumothorax, Base Deficit > 10, Shock requiring Inotropes, , Maternal Pre-Eclampsia
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Guidelines for ROP Screening / Eye Check

< 28 week	At Corrected 31 weeks
≥ 28 week	At Postnatal 4 weeks
Term	If Risk Factor - At Postnatal 2 weeks/Before Discharge
High Risk	Ventilation > 72 Hr, Prolonged O2 need, RDS,Sepsis,CHD, Shock requiring Inotrope, Blood Transfusion,ExchangeTransfusion

NICU IV Fluid Protocol

	< 1 kg	1 - 1.5 kg	> 1.5 kg
Day 1	100 ml/kg/day	80 ml/kg/day	60 ml/kg/day
	500ml 10% Dextrose + 10ml* Calcium Gluconate		
Day 2	110 ml/kg/day	90 ml/kg/day	70 ml/kg/day
	500ml 10% Dextrose + 10ml* Calcium Gluconate		
Day 3	120 ml/kg/day	100 ml/kg/day	80 ml/kg/day
	500ml 0.45 DNS + 5ml MVI		

Dextrose Conc. To be changed according to RBS monitoring

* Add 20ml Calcium to 500ml in c/o Birth Asphyxia, IDM, IUGR, LGA

NICU Blood Investigation Protocol - Routine

Time	< 1 kg	1 - 1.5 kg	> 1.5 kg
0 Hr Admission	CBC, CRP Blood Group G6PD (in Male) ABG (Resp Case)	CBC, CRP Blood Group G6PD (in Male) ABG (Resp Case)	CBC, CRP Blood Group G6PD (in Male) ABG (Resp Case)
	Blood Culture in High Risk Group (See Antibiotic Scoring System)		
24 Hr SOS	Na, K, iCa, Creat, S.Bil	Na, K, iCa, Creat, S.Bil	-----
48 Hr	CBC, CRP Na, K, iCa, Creat, S.Bil	CBC, CRP Na, K, iCa, Creat	CBC, CRP Na, K, iCa, Creat
@ Full Feeds	CBC Na, K	CBC Na, K	CBC Na, K
@ 4 Weeks	iCa, PO ₄ Alk Phosphatase	iCa, PO ₄ Alk Phosphatase	-----

Further Ix guided by previous reports and clinical condition

Arterial Blood Gas Values - Normogram

ABG	< 30 wk	30 - 36 wk	Term	BPD
pH	>7.25	>7.25	7.35-7.45	7.50-7.60
PCO ₂	40-50	40-60	35-45	45-65
PO ₂	45-65	50-70	80-100	60-80

Suggested Actions following ABG Report

ABG Result	Possible Reason	Suggested Changes
PCO ₂ - OK/Low PO ₂ - Low	Atelectasis with V/A Mismatch	↑ PEEP
PCO ₂ - OK/Low PO ₂ - OK/High	Over Ventilated	↓ PIP ↓ PIP & PEEP ↓ Rate
PCO ₂ - OK/High PO ₂ - Low	Atelectasis with Resultant Low TV	↑ PIP ↑ PIP & PEEP
PCO ₂ - OK/High PO ₂ - High	Inadequate minute ventilation with at least adequate FRC	↓ PEEP ↑ Rate ↑ PIP

Infusion in 20 ml Syringe

Medication	Dose @ 1ml/hr	_____ ml in 20 ml	_____ Kappa in 20 ml
Dopamine 40 mg/ml	10 mcg/kg/min	0.3 x Wt	30 x Wt
	20 mcg/kg/min	0.6 x Wt	60 x Wt
Dobutamine 50 mg/ml	10 mcg/kg/min	0.24 x Wt	24 x Wt
	20 mcg/kg/min	0.48 x Wt	48 x Wt
Adrenaline 1 mg/ml	0.05 mcg/kg/min	0.06 x Wt	6 x Wt
	0.1 mcg/kg/min	0.12 x Wt	12 x Wt
	0.5 mcg/kg/min	0.6 x Wt	60 x wt
Norad 1 mg/ml	0.05 mcg/kg/min	0.06 x Wt	6 x Wt
	0.1 mcg/kg/min	0.12 x Wt	12 x Wt
Milrinone 1 mg/ml	Load - 0.05 mg/kg	0.05 x Wt	5 x Wt
	0.33 mcg/kg/min	0.4 x Wt	40 x Wt
Sildenafil 0.8 mg/ml	Load - 0.4 mg/kg	0.5 x Wt	50 x Wt
	0.067 mg/kg/hr	1.7 x Wt	-----
Lasix 10 mg/ml	0.06 mg/kg/hr	0.12 x Wt	12 x Wt
	0.125 mg/kg/hr	0.25 x Wt	25 x Wt
Fentanyl 50 mcg/ml	1 mcg/kg/hr	0.4 x Wt	40 x Wt
	2 mcg/kg/hr	0.8 x Wt	80 x wt
Morphine 10 mg/ml	1 ml Morphine + 9 ml NS = 1 mg/ml		
	10 mcg/kg/hr	0.2 x Wt	20 x Wt

Infusion in 50 ml Syringe

Medication	Dose @ 1ml/hr	_____ ml in 50 ml	_____ Kappa in 50 ml
PGE1 500 mcg/ml	50 ng/kg/min	0.3 x Wt	30 x Wt
	100 ng/kg/min	0.6 x Wt	60 x Wt
Vasopressin 20 U/ml	0.0005 U/kg/min	0.075 x Wt	7.5 x Wt
	Start @ 0.6 ml/hr = 0.0003 U/kg/min		

IV Anticonvulsant

Midazolam 1 mg/ml	0.1 mg/kg/dose	10 kappa/kg/dose
Lorazepam 2 mg/ml	0.1 mg/kg/dose	5 kappa/kg/dose
Phenobarbitone 200 mg/ml	Load - 20 mg/kg	Load - 10 kappa/kg
	For Maintenance: 1 ml Phenobarb + 9 ml NS	
	2.5 mg/kg/dose	13 kappa/kg/dose
Fosphenytoin 50 mg PE/ml	Load - 15 mg/kg	Load - 30 kappa/kg
	2.5 mg/kg/dose	5 kappa/kg/dose

Oral Anticonvulsant

Gardenal 20mg/5ml	2.5 mg/kg/dose	0.6 ml/kg/dose
	3 mg/kg/dose	0.75 ml/kg/dose
Eptoin 30mg/5ml	2.5 mg/kg/dose	0.4 ml/kg/dose
	3 mg/kg/dose	0.5 ml/kg/dose

Silverman-Anderson Score

Feature	Score 0	Score 1	Score 2
Chest Movement	Equal	Respiratory Lag	Seesaw Respiration
Intercostal Retraction	None	Minimal	Marked
Xiphoid Retraction	None	Minimal	Marked
Nasal Flaring	None	Minimal	Marked
Expiratory Grunt	None	Audible with stethoscope	Audible w/o stethoscope
Total Score of 4-6 Moderate Distress - CPAP sos		Total Score of 7-10 Severe Distress - Ventilation	

Endotracheal Intubation	ET Size Selection			
Pre Medication For Planned Intubation	Wt in Kg	Gest Weeks	ET Size	Fix @ Lip
Atropine 0.1 mg 16 kappa	< 1	< 28	2.5	6 - 7
Midazolam 0.1 mg/kg (10 x Wt) Kappa	1 - 2	28 - 34	3	7 - 8
Fentanyl 1 mcg/kg 1ml+9ml, (20 x Wt) Kappa	2 - 3	34 - 38	3.5	8 - 9
Rocuronium 1 mg/kg (10 x Wt) Kappa	> 3	> 38	3.5	9 - 10

Surfactant				
Product	Type	Dose	Phospholipid	Vial
Neosurf	Bovine	5 ml/kg	27 mg/ml	3 ml / 5 ml
Survanta	Bovine	4 ml/kg	25 mg/ml	4 ml / 8 ml
Curosurf	Porcine	2.5 ml/kg	80 mg/ml	1.5 ml / 3 ml
Infasurf	Calf Lung	3 ml/kg	35 mg/ml	3 ml
Exosurf	Synthetic	4 ml/kg	25 mg/ml	4 ml / 8 ml

INSURE Criteria

Preterm ≥ 30 weeks

Birth Wt. ≥ 1.2 kg

Spontaneous Respiration Present

Moderate to Severe HMD on CXR

$FiO_2 \geq 40\%$ / CPAP (PEEP - 6, $FiO_2 \geq 30\%$) with $SpO_2 < 90\%$

Good Perfusion, CRT < 3 Sec, No Inotrope Requirement

Intubate → Give Surfactant → Extubate to CPAP

Switch from CPAP to Intubation, Consider 2nd Surfactant

Continuing Retractions / Grunt on CPAP for > 6 Hours

Recurrent Apneas on CPAP

RR ≥ 80 /min or increasing

CPAP > 7 cm H₂O

FiO_2 requirement $> 60\%$

$PaCO_2 > 55$, Poor respiratory efforts

$SpO_2 < 85\%$ / $PaO_2 < 50$ on CPAP > 6 cm H₂O & $FiO_2 > 50\%$

Important Calculations

Line	Insertion Depth	Tip Position
UAC	$(3 \times \text{Wt in Kg}) + 9 \text{ cm}$	T6 - T9
UVC	High: $(1.5 \times \text{Wt in Kg}) + 5.5 \text{ cm}$	1 cm above Diaphragm
UVC	Low: $\text{Wt in Kg} + 3 \text{ cm}$	
NG	Distance(cm) Xiphoid process to ear lobe to tip of nose	
IV Protien	1 gm/kg/day to 4 gm/kg/day	
Aminoven 10%	$(10 \times \text{___ gm/kg/day} \times \text{Wt in Kg}) \div 24 = \text{___ ml/hr}$	
IV Lipid	1 gm/kg/day to 3 gm/kg/day	
Intralipid 20%	$(5 \times \text{___ gm/kg/day} \times \text{Wt in Kg}) \div 24 = \text{___ ml/hr}$	
GIR mg/kg/min	$\frac{\% \text{Dextrose} \times 10 \times \text{IV Rate in ml/hr}}{60 \times \text{Wt in Kg}}$	
Oxygenation Index (OI)	$\frac{\text{MAP} \times \text{FiO}_2}{\text{PaO}_2}$	OI > 15 Need for HFOV OI > 20 Need for iNO
AaDO ₂	$[(\text{FiO}_2 \times 713) - \text{PaCO}_2] - \text{PaO}_2$, FiO ₂ in Decimal AaDO ₂ < 200 = Normal, > 400 = ALI, > 600 = ARDS	
a / A Ratio	$\frac{\text{PaO}_2}{(\text{FiO}_2 \times 713) - \text{PaCO}_2}$	0.6 - 0.9 = Normal < 0.4 = ALI, < 0.2 = ARDS

Blood Transfusion Guidelines

Hb < 12 gm/dl PCV < 35	Severe Respiratory Distress Requiring High Ventilatory Pressures
Hb < 10 gm/dl PCV < 30	Ventilatory Requirement Hypovolemic Shock Symptomatic PDA BPD with FiO ₂ > 30% Pre Surgery
Hb < 8.5 gm/dl PCV < 25	Preterm < 2 week old Poor Feeding Poor Weight Gain: < 10 gm/kg/day for > 3 days Significant Apnea >8 in 24 Hr / >2 req Bag & Mask Persistent Tachycardia: HR > 170 bpm Persistent Tachypnea: RR > 70 / min
Hb < 7 gm/dl PCV < 20	Transfuse regardless

PCV Transfusion: 15 ml/kg/dose over 4 - 5 Hours

Mid-transfusion Inj Lasix 1 mg/kg (Decide Clinically)

Keep NBM - 2 hours before and 6 hours after Transfusion

Platelet Transfusion Guidelines

Plt < 20000	Transfuse regardless	
Plt < 40000	Active Bleeding	24 Hr Pre surgery
	Hypotension	3 Days Post Surgery
	Inotrope Need	Seizure last 72 Hr
	DIC	Culture Positive Sepsis
	Rising CRP / ↓TC	On Indomethacin / Brufen
	Platelet showing Downward Trend	
	Wt < 1.2 kg / GA < 32 wks with Probable Sepsis	
	Clinical deterioration last 48 Hr - Suspected Sepsis	

Platelet Transfusion: 15 ml/kg, Over 20-30 min, No Lasix/No NBM

FFP	15 ml/kg over 1 hr, No NBM For DIC, Coagulation Defects, Severe Sepsis
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MIMER MEDICAL COLLEGE, TALEGAON DABHADE

SOP'S FOR HEALTH CARE WORKERS (During COVID-19 Pandemic)

- 1) WEAR CAP, MASK, SHIELD AND GLOVES AT WORK COMPULSARILY
- 2) DO NOT VISIT OTHER WARDS AND PLACES ON DUTY.
- 3) PATIENTS RELATIVES NOT TO BE ALLOWED INSIDE THE LABOUR ROOM.
- 4) IN WARD ONLY ONE RELATIVE WITH ONE PATIENT SHOULD BE ALLOWED.
- 5) ALL FORMALITIES CONCERNED WITH THE RELATIVES LIKE FORM GIVING, RECEIPT COLLECTION AND FILE SIGNATURE TO BE DONE AT THE TABLE OUTSIDE THE WARD.
- 6) FOLLOW SOCIAL DISTANCING AT ALL THE TIME.
- 7) TAKE PROPER ADDRESS, OCCUPATION OF PATIENT AND OCCUPATION OF ALL MEMBERS IN THE FAMILY.
- 8) CHECK TEMPERATURE, PULSE RATE AND BLOOD PRESSURE, O2 SATURATION OF THE PATIENT. FETAL HEART RATE TO BE RECORDED.
- 9) IN CASE OF SUSPICION OF COVID SYMPTOMS INFORM THE LECTURER ON ED BEFORE TOUCHING THE PATIENT.
- 10) WHILE IN CASUALTY, ENSURE AVAILABILITY OF HAND SANITIZER, GLOVES, GOWN AND INFORM REGARDING DEFECIENCIES IF ANY.

SOP FOR (OPD) DURING COVID 19 PANDEMIC.

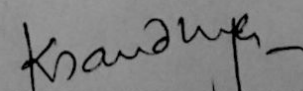
1. WEAR GOWN, CAP, MASK, SHIELD AND GLOVES AT WORK COMPULSARILY
2. DO NOT VISIT OTHER OPD, WARDS AND PLACES ON DUTY
3. EVERY WALK IN PATIENT TO BE INFORMED TO THE LECTURER IN OPD
4. MAKE AN OPD PAPER OF THE NEW PATIENT AND WRITE COMPLETE HISTORY.
5. TAKE PROPER ADDRESS, OCCUPATION OF PATIENT AND OCCUPATION OF ALL MEMBERS IN THE FAMILY
6. CHECK TEMPERATURE, PULSE RATE AND BLOOD PRESSURE OF THE PATIENT
7. ENSURE ONLY ONE DOCTOR IN ONE CABIN
8. ENSURE ONLY ONE PATIENT AT A TIME
9. NO RELATIVES SHOULD BE ALLOWED UNTILL WARRENTED AND CONFIRMED WITH THE LECTURER IN OPD
10. IN CASE OF ANY DOUBT, INFORM AND TAKE HELP FROM LECTURER IN OPD

SOP FOR (OT) DURING COVID 19 PANDEMIC.

1. SEPARATE OT DESIGNATED FOR COVID -19 PREPARED WITH NO CONNECTIVITY WITH NON-COVID OT.
2. SEPARATE PATHWAY/LIFTS FOR SHIFTING COVID PATIENTS FROM COVID WARDS TO OPERATIVE THEATER.
3. PATIENTS/ATTENDANTS/ RELATIVES STRICTLY PROHIBITED TO ENTER THE OT.
4. PROPER DORNING AND DOFFING AREAS SHOULD BE USED IN THE DESIGNATED OT AREA.
5. SANITIZERS SHOULD BE ADEQUATELY BEFORE AND AFTER THE OPERATIVE PROCEDURE BY PATIENTS AND STAFF.
6. PPE KIT WITH HOOD, MASKS, AND BOOTS SHOULD BE WORN BY ALL THE STAFF IN THE OT AREA.
7. NUMBER OF PEOPLE(STAFF) IN OT AREAS SHOULD BE RESTRICTED TO THE MINIMUM.
8. CONSIDER EACH CASE AS A SUSPECTED CASE.
9. ONE CASE SHOULD BE DONE COMLETELY BY ONE ANESTHETIST RIGHT FROM HISTORY TAKING TILL PATIENT BEING SHIFTED TO RECOVERY.
10. FOR ANESTHETIST: DISCARD ONE MASK AND ONE PAIR OF GLOVES AFTER INTUBATION AND CONTINUE WITH OTHER.
11. DISCARD ET TUBE AND SUCTION CATHETER AFTER THE CASE
12. COMPULSORY USED HME FILTER FOR GA.
13. AFTER USE ALL AIRWAY INSTRUMENTS SHOULD BE KEPT IN DISPOSABLE COVER AND IMMERSSED IN CIDEX.
14. AFTER REMOVING GLOVES AVOID TOUCHING FACE, HEAD, AND PREFER HAND HYGEINE.
15. HAND HYGIENE SHOULD BE FOLLOWED STRICTLY FOR EVERY CASE.
16. AFTER THE CASE REMOVE ALL DISPOSABLE DRAPES AND DISINFECT HIGH TOUCH SURFACES ON ANAESTHESIA MACHINE AND WORK AREA.
17. SANITIZATION OF OT WALL, DOOR, KNOB, TABLE AND TROLLEY.
18. SANITIZATION OF OT SHOES, SLIPPERS DAILY.
19. PROPER DISPOSAL OF ALL PROTECTIVE EQUIPMENT AS PER BIOMEDICAL WASTE MANAGEMENT.

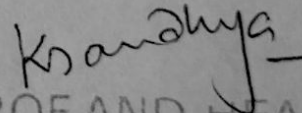
Department of Microbiology
Students Seminar Health Care Associated Infections

Date	Students Name	Topic	Guide
11/07/2017	BHASKARE AISHWARYA MANISH	Hospital Acquired UTI	Dr. Sadhana Chate
	J MADHUMITHAA R JAGANNATHAN	Hospital Acquired UTI	
	SHANTANU SHARMA/ SHITOLE	Hospital Acquired Infection	
	KORE AMAR DATTATRAY	Healthcare Associated Bloodstream Infection	
	SAVLA KHUSHBOO SAMIR	Healthcare Associated Pneumonia	
04/04/2018	Anagha Raghunandan	Health Care associated Infections	Dr. Ketaki Kulkarni
	Madhavi Katta		
	Vrushali Kolle		
06 /06/2019	KHOT SHUBHAM HANMANT	Health care associated infections	Dr. Sandhya Kulkarni
	MAIYA RAJAT RAGHAVENDRA		
	MASNE SHIVANI ANIL		
	NAGRE ABHISHEK DNYANOBA		


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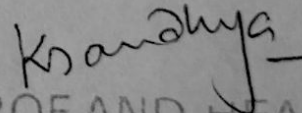
Department of Microbiology
Students Seminar Tuberculosis

No	Date	Students Name	Topic	Guide
	5/1/17	GARULE MUGDHA DILIP	Mycobacterium Leprae	Dr. Jaishree Puri
		GUGALE TANVI ANIL	Mycobacterium TB	
		MANALEE DAS	Extrapulmonary TB	
		ANDRADE KINJAL MALCOLM	Atypical Mycobacterium	
	28/03/2018	Jaspreet kaur	Tuberculosis	Dr. Sadhana Chate
		Munazza Shaikh		
		Shweta Nalawade		
		Riya Barar		
	4/4/2019	KASBE SNEHAL SUNILRAO	Tuberculosis	Dr. Sandhya Kulkarni
		SURYAWANSHI INDRAJEET G.		
		KOTHAWADE SAHIL SHASHIKANT		
		QURESHI NISA ZUBER		


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 MIMER MEDICAL COLLEGE
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Department of Microbiology
Students Seminar Tuberculosis

No	Date	Students Name	Topic	Guide
	5/1/17	GARULE MUGDHA DILIP	Mycobacterium Leprae	Dr. Jaishree Puri
		GUGALE TANVI ANIL	Mycobacterium TB	
		MANALEE DAS	Extrapulmonary TB	
		ANDRADE KINJAL MALCOLM	Atypical Mycobacterium	
	28/03/2018	Jaspreet kaur	Tuberculosis	Dr. Sadhana Chate
		Munazza Shaikh		
		Shweta Nalawade		
		Riya Barar		
	4/4/2019	KASBE SNEHAL SUNILRAO	Tuberculosis	Dr. Sandhya Kulkarni
		SURYAWANSHI INDRAJEET G.		
		KOTHAWADE SAHIL SHASHIKANT		
		QURESHI NISA ZUBER		


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INTERNSHIP ORIENTATION PROGRAMME
06/03/2017 TO 10/03/2017
DEPT. OF COMMUNITY MEDICINE
Date : 06/03/2017

DAY :01 DATE 06/03/2013 - VENUE : Lecture Hall No 4 (4th Floor New wing college building)

Sr. No	Programme	Dept. & In-charge	Time & Venue
01	Case paper writing & record keeping	Dr. Sudam Khedkar, Assistant Professor, Dept. of Gen Medicine	9.30am to 10.30am
02	Discussion on activities rules & regulations	Dr. B. Patnaik, Professor & Head, Dept. of Community Medicine	10.30am to 11.30am
03	Internship Distribution Display of "Groups"	Dr. R. Majumdar , Professor ,Internship Incharge, Dept. Of Community Medicine	11.30am to 12.30am
04	Introduction to activities of CCL	Prof& HOD, Dept of Pathology Prof& HOD, Dept. of Bio-chemistry Prof& HOD, Dept . Of Microbiology	2.00pm to 4.00pm

DAY :02 DATE 07/03/2017 VENUE : Lecture Hall No 4 (4th Floor New wing college building)

01	PCPNDT ACT ,Abortion Care & Maternal Health	Dr. Gopalghare, Associate Professor, Dept. of Obstetrics & Gynaecology.	9.30am to 11.00am
02	Surgery & NSV	Dr. Sandesh Gawade , Associate Professor ,Dept. of Gen. Surgery	11.00am to 12.00am
03	INTERNSHIP INAUGURATION PROGRAMME VENUE : Lecture Hall No 1(Anatomy Lecture Hall)		12.00noon to 1.00pm
04	Orientation to field work	Dr.Aastha Pandey, Associate Professor, Dept. of Community Medicine Dr. Ashlesha Dandekar , Assistant Lecturer, Dept. of Community Medicine	2.30pm to 3.00pm

05	Internship Group Distribution	Dr. R. Majumdar , Professor ,Internship Incharge, Dept. Of Community Medicine	3.00pm to 4.00pm
DAY :03 DATE : 08/03/2017 - VENUE : VENUE : Lecture Hall No 4 (4th Floor New wing college building)			
01	Visit to NDRF First Aid Training	NDRF, Sudumbre	9.00am to 1.00pm
02	Prescription writing	Dr. Ranjit Wagh , Professor & H.O.D , Dept. of Pharmacology	2.30pm to 3.00pm
03	Bio Medical Waste management Training & Infection Control	Dr. R. Majumdar , Professor , Dept. Of Community Medicine Dr. Sadhana Chate , Professor, Dept. of Microbiology	3.00pm to 4.00pm
DAY :04 DATE : 09/03/2017 VENUE : Lecture Hall No 4 (4th Floor New wing college building)			
01	Bioethics & Communication Skill	Dr. Harashal Sabane, Assistant Professor, Dept. Of Community Medicine	10.00am to 11.00am
02	Sensitization to organ donation	Dr. S.J.Kulkarni , Assistant Professor, Dept. Of Community Medicine	11.00am to 12.00pm
03	Leprosy/ HIV/ STD,s	Dr. Nithun T. M., Assistant Professor Dept. of Dermatology, Venereology and Leprosy.	12.00pm to 1.00pm
04	End game Polio / Measles eradication	Dr. Madhura Ashturkar, Associate Professor, Dept. of Community Medicine	2.30pm to 3.30pm
05	Internship Groups distribution	Dr. Ratna Majumdar , Professor , Dept. Of Community Medicine	3.30pm to 4.00pm
DAY :05 DATE : 10/03/2017 VENUE : Lecture Hall No 4 (4th Floor New wing college building)			
01	Stress Management	Dr. Madhura Ashturkar, Associate Professor, Dept. of Community Medicine	10.00am to 11.00am
02	Internship Distribution	Dr. R. Majumdar , Professor , Dept. Of Community Medicine	11.00am to 12.00pm
03	Dental Health	Dr.Subhash Japtiwale, Professor &	12.00pm to 1.00pm
18			

		H.O.D, Dept. Dentistry	
04	Internship Distribution	Dr. R. Majumdar , Professor , Dept. Of Community Medicine	2.00pm to 4.00pm

Dr.(Mrs) B. Patnaik,
Professor & HOD,
Dept. of Community Medicine,
MIMER Medical College, Talegoan

Note:

- Orientation Programme is compulsory for Interns
- Interns must attend all sessions in time
- Interns must join the concerned Dept. on 10/03/2017 and give the joining report to HOD.

INTERNSHIP ORIENTATION PROGRAMME

01/08/2017 to 05/08/2017

DEPT. OF COMMUNITY MEDICINE

Date : 01/08/2017

DAY :01 DATE 01/08/2017 - VENUE : Demonstration Hall, Dept. Of Community Medicine			
Sr. No	Programme	Dept. & In-charge	Time & Venue
1	Discussion on activities rules & regulations	Dr. S.V. Chincholikar, Professor & Head, Dept. of Community Medicine	9.00am to 10.30am
2	INTERNSHIP INAUGURATION PROGRAMME	Dept. Of Community Medicine	10.30am to 11.30am
3	Internship Distribution Display of "Groups"	Dr. R. Majumdar, Professor, Internship Incharge, Dept. Of Community Medicine	11.30am to 12.30pm
4	Introduction to activities of CCL	Prof& HOD, Dept of Pathology Prof& HOD, Dept. of Bio-chemistry	2.00pm to 3.30pm

		Prof& HOD, Dept . Of Microbiology	
DAY :02 DATE 02/08/2017 - VENUE : Demonstration Hall, Dept. Of Community Medicine			
1	Bioethics Workshop	Dept. Of Community Medicine	9.30am to 3.30pm
DAY :03 DATE 03/08/2017 - VENUE : Demonstration Hall, Dept. Of Community Medicine			
1	Bio Medical Waste management Training & Infection Control	Dr. R. Majumdar , Professor , Dept. Of Community Medicine Dr. Sadhana Chate , Professor, Dept. of Microbiology	10.30am to 12.30pm
2	Communication Skills & Stress Management	Dr. Aneesh Bhat , Associate Professor, Dept. Of Psychiatry	2.00pm to 4.00pm
DAY :04 DATE 04/08/2017 - VENUE : Demonstration Hall, Dept. Of Community Medicine			
1	Medico legal Aspects	Dr. D.B. Deshmukh, Professor & Head, HOD, Dept. of FMT.	10.00am to 11.00am
2	Surgery & NSV	Dr. Sandesh Gawade , Associate Professor ,Dept. of Gen. Surgery	11.00am to 12.00noon
3	Leprosy Detection	Dr. P.M.Nithun, Associate Professor HOD, Dept.of Dermatology	12.00noon to 1.00pm
4	PCPNDT ACT ,Abortion Care & Maternal Health	Dr. Gopalghare, Associate Professor, Dept. of Obstetrics & Gynaecology.	2.00pm to 3.00pm
5	Orientation to field work RHTC & UHTC	Dr.Kulkarni S.J., Associate Professor, Dept. of Community Medicine Dr. Ashlesha Dandekar , Assistant Lecturer, Dept. of Community Medicine	3.00pm to 4.00pm
DAY :05 DATE 05/08/2017 - VENUE : Demonstration Hall, Dept. Of Community Medicine			
1	RNTCP	Dr. Madhura Ashturkar, Associate Professor, Dept. of Community Medicine	9.30am to 10.30am
2	Prescription writing	Dr. Ranjit Wagh , Professor & H.O.D , Dept. of Pharmacology	10.30am to 11.30am

3	Dental Health	Dr.Subhash Japtiwale, Professor & H.O.D, Dept. Dentistry	11.30am to 12.30pm
4	Internship Distribution	Dr. R. Majumdar , Professor , Dept. Of Community Medicine	2.00pm to 4.00pm

Dr. S.V.Chincholikar
Professor & HOD,
Dept. of Community Medicine,
MIMER Medical College,
Talegaon Dabhade

Note:

- Orientation Programme is compulsory for Interns
- Interns must attend all sessions in time
- Interns must join the concerned Dept. on 05/08/2017 and give the joining report to HOD.

INTERNSHIP ORIENTATION PROGRAMME
15/02/2018 To 20/02/2018
DEPT. OF COMMUNITY MEDICINE
Date : 15/02/2018

DAY :01 DATE 15/02/2018 -			
Sr. No	Programme	Dept. & In-charge	Time & Venue
1	Discussion on activities rules & regulations	Dr. S.V.Chincholikar, Professor & Head, Dept. of Community Medicine	10.00am to 10.30am Demo Hall, Dept. Of

			Community Medicine
2	INTERNSHIP INAUGURATION PROGRAMME	Dept. Of Community Medicine	11.00am to 12.00noon Anatomy Lecture Hall
3	Internship Distribution Display of "Groups"	Dr. R. Majumdar , Professor , Internship Incharge, Dept. Of Community Medicine	12.00 noon to 1.00pm Anatomy Lecture Hall
4	Introduction to activities of CCL	Prof& HOD, Dept of Pathology Prof& HOD, Dept. of Bio-chemistry (CCL) Prof& HOD, Dept . Of Microbiology	2.00pm to 3.30pm C.C.L

DAY: 02 DATE 16/02/2018 -

Sr. No	Programme	Dept. & In-charge	Time & Venue
1	Batch –A : NDRF Visit -Disaster Management -First aid &C.P.R	NDRF , Sudumbre	9.00am to 3.00pm NDRF , Sudumbre
2	Bioethics Workshop – Batch B	Dr. D. D'souza	9.30am to 3.00pm Demo Hall, Dept. Of Community Medicine

DAY: 03 DATE 17/02/2018 -

1	Batch –B : NDRF Visit -Disaster Management -First aid &C.P.R	NDRF , Sudumbre	9.00am to 3.00pm NDRF , Sudumbre
2	Bioethics Workshop – Batch A	Dr. D. D'souza	9.30am to 3.00pm Demo Hall, Dept. Of Community Medicine

DAY :04 DATE 19/02/2018

Sr. No	Programme	Dept. & In-charge	Time & Venue
1	Organ Donation	Dr. S.J.Kulkarni , Assistant Professor Dept. of Community Medicine	9.30am to 10.30am Lecture Hall No 04

2	Bio Medical Waste management	Dr. R. Majumdar , Professor , Dept. Of Community Medicine	10.30am to 11.30am Lecture Hall No 04
3	Infection Control	Dr. Sadhana Chate , Professor, Dept. of Microbiology	11.30am to 12.30pm Lecture Hall No 04
	Medical Certification and cause of death	Dr. Pujari, Associate Professor	12.30pm to 1.30pm Lecture Hall No 04
4	Prescription writing	Dr. Ganesh Pentewar , Assistant Professor , Dept. of Pharmacology	2.45pm to 3.45pm Lecture Hall No 04

DAY : 05 DATE 20/02/2018

Sr. No	Programme	Dept. & In-charge	Time & Venue
1	PCPNDT ACT ,Abortion Care & Maternal Health	Dr. Gopalghare, Associate Professor, Dept. of Obstetrics & Gynaecology.	10.00am to 11.00am Lecture Hall No 04
2	Communication Skills	Dr. Madhav Mutalik , Professor & Head, Dept. of Pharmacology, DY Patil Dental School	11.00am to 1.00pm Lecture Hall No 04
3	Internship Order Distribution	Dr. R. Majumdar , Professor, Dept. Of Community Medicine	1.30pm to 2.30pm DEMO HALL COMMUNITY MEDICINE
4	Stress Management	Dr. Aneesh Bhat , Dept. of Psychiatry	2.30pm to 4.00pm Lecture Hall No 04

Dr. S.V.Chincholikar
Professor & HOD,
Dept. of Community Medicine,
MIMER Medical College, Talegaon

Note:

- Orientation Programme is compulsory for Interns
- Interns must attend all sessions in time
- Interns must join the concerned Dept. on 20/02/2018 and give the joining report to HOD.

INTERNSHIP ORIENTATION PROGRAMME**11/02/2019 to 15/02/2019****DEPT. OF COMMUNITY MEDICINE****Venue: Lecture Hall No 04****DAY :01 DATE : 11/02/2019 (Monday) -**

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Case writing OPD & IPD	Dr. Ashok Ohatkar , Professor , Dept Of Orthopedics Dr. DarpanMaheshgauri, Professor , Dept Of Orthopedics	9.00am to 10.30am Lecture hall IV
2	INTERNSHIP INAUGURATION PROGRAMME	Dept. Of Community Medicine	11.00am to 12.00noon Lecture hall IV
3	Prescription writing	Dr. RanjitWagh, Professor & Head, Dept. of Pharmacology.	12.00 noon to 1.00pm Lecture hall IV
LUNCH 1.00PM TO 2.00 PM			
4	Introduction to activities of CCL , role of interns in CCL,	Professor & Head, Dept.of Pathology. Dept. of Bio-chemistry. Dept . Of Microbiology	2.00pm to 3.30pm C.C.L

DAY :02 DATE : 12/02/2019 (Tuesday)

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	NDRF Visit : Batch –A -Disaster Management -First aid & C.P.R	NDRF , Sudumbre Dr. PramodGiri	9.00am to 3.00 NDRF , Sudumbre
2	Bioethics Workshop – Batch B	Dr. D. D’souza Director, NBCIC.	9.30am to 3.00pm Demo Hall, Dept. Of Community Medicine

DAY :03 DATE: 13/02/2019 (Wednesday) -

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	NDRF Visit : Batch –B -Disaster Management -First aid & C.P.R	NDRF , Sudumbre Dr. PramodGiri	9.00am to 3.00pm NDRF , Sudumbre
2	Bioethics Workshop – Batch A	Dr. D. D’souza Director, NBCIC.	9.30am to 3.00pm Demo Hall, Dept. Of

Community Medicine

DAY :04 DATE: 14/02/2019 (Thursday)

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Overview of the Department, Superspeciality clinics with name of specilists, Departmental facilities, Role of interns in the department, their behavior.	Professor & Head, Dept. of Community Medicine	9.00am to 9.30am Lecture hall IV
2	Overview of the department ,Superspeciality clinics with name of specilists, Departmental facilities , Role of interns in the department ,their behavior	Professor & Head, Dept. of Orthopedics	9.30am to 10.00am Lecture hall IV
3	Overview of the department ,Superspeciality clinics with name of specilists, Departmental facilities ,Role of interns in the department ,their behavior	Professor & Head, Dept. of Pediatrics	10.00am to 10.30am Lecture hall IV
4	Overview of the department ,Superspeciality clinics with name of specilists, Departmental facilities ,Role of interns in the department ,their behavior	Professor & Head, Dept. of Gen. Medicine	10.30am to 11.00am Lecture hall IV
5	Overview of the department ,Superspeciality clinics with name of specilists, Departmental facilities ,Role of interns in the department ,their behavior	Professor & Head, Dept. of Surgery	11.00am to 11.30am Lecture hall IV
6	Overview of the department ,Superspeciality clinics with name of specilists, Departmental facilities ,Role of interns in the department ,their behavior .	Professor & Head, Dept. of OBGY	11.30am to 12.00noon Lecture hall IV

7	Overview of the department ,Superspeciality clinics with name of specilists, Departmental facilities ,Role of interns in the department ,their behavior	Professor & Head, Dept. of Skin & V.D	12.00noon to 12.30pm Lecture hall IV
8	Overview of the department ,Superspeciality clinics with name of specilists, Departmental facilities ,Role of interns in the department ,their behavior	Professor & Head, Dept. of Psychiatry	12.30pm to 1.00pm Lecture hall IV
LUNCH 1.00PM TO 1.30 PM			
9	Overview of the department ,Superspeciality clinics with name of specilists, Departmental facilities ,Role of interns in the department ,their behavior .	Professor & Head, Dept. of TB & Chest	1.30pm to 2.00pm Lecture hall IV
10	Overview of the department ,Superspeciality clinics with name of specilists, Departmental facilities ,Role of interns in the department ,their behavior	Professor & Head, Dept. of Anesthesia	2.00pm to 2.30pm Lecture hall IV
11	Overview of the department , Superspeciality clinics with name of specilists, Departmental facilities ,Role of interns in the department ,their behavior	Professor & Head, Dept. of ENT	2.30pm to 3.00pm Lecture hall IV
12	Overview of the department ,Superspeciality clinics with name of specilists, Departmental facilities ,Role of interns in the department ,their behavior	Professor & Head, Dept. of Ophthalmology	3.00pm to 3.30pm Lecture hall IV
13	Overview of the department ,Superspeciality clinics with name of specilists, Departmental facilities ,Role of interns in the department ,their behavior	Professor & Head, Dept. of Dentistry	3.30pm to 4.00pm Lecture hall IV
DAY :05 DATE 15/02/2019 (Friday)			

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Organ Donation	Dr. S.J.Kulkarni , Assistant Professor ,Dept. of Community Medicine	9.30am to 10.00am Lecture hall IV
2	Bio Medical Waste management	Dr. R. Majumdar, Professor, Dept. Of Community Medicine	10.00am to 10.30am Lecture hall IV
3	Infection Control	Dr. SadhanaChate , Professor, Dept. of Microbiology	10.30am to 11.00am
4	Medical Certification and cause of death	Dr. Pujari, Associate Professor Dept. of FMT.	11.00am to 11.30am Lecture hall IV
5	Communication Skills	Dr. Aneesh Bhat, Dept. of Psychiatry .	11.30am to 12.00n Lecture hall IV
6	PCPNDT ACT ,Abortion Care & Maternal Health	Dr. Gopalghare, Associate Professor, Dept. of Obstetrics & Gynecology.	12.00no to 1.00pm Lecture hall IV
LUNCH 1.00PM TO 1.30 PM			
7	Internship Distribution ,Display of “Groups” Family allotment to the Interns	Dr. R. Majumdar, Professor, Dept. Of Community Medicine Dr. S.V.Chincholikar, Professor & Head, Dept. Of Community Medicine , Dr Maya Kshirsagr and DrAshleshaDandekar	1.30pm to 2.30pm Lecture hall IV
8	Stress Management	Dr. Aneesh Bhat , Dept. of Psychiatry.	2.30pm to 3.30pm Lecture hall IV
9	Internship Order Distribution	Dr. R. Majumdar , Professor, Dept. Of Community Medicine.	3.30pm to 4.00pm Lecture hall IV

Dr. S.V.Chincholikar
Professor & HOD,
Dept. of Community Medicine,
MIMER Medical College,
Talegaon Dabhade

Note:

- Orientation Programme is compulsory for Interns.
- Interns must attend all sessions in time .
- Interns must join the concerned Dept. on **15/02/2019** and give the joining report to concerned HOD.

INTERNSHIP ORIENTATION PROGRAMME

DEPT. OF COMMUNITY MEDICINE

26/8/2019 TO 30/08/2019

Day 01

26/08/2019

PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
Welcome, Brief about internship Internship Distribution , Display of “Groups”	Dr. S.V.Chincholikar, Professor & Head, Dept. Of Community Medicine , Dr.R.Majumdar, Professor r Dept Of Community Medicine	9.00am to 9.30am Dept Of Community Medicine
Case writing OPD & IPD Review of Dept	Dr. Ashok Ohatkar , Professor , Dept Of Orthopedics Dr. Darpan Maheshgauri, Professor Dept Of Orthopedics	9.30am to 11.00am Dept Of Community Medicine

Overview of the Department, Superspeciality clinics with name of specilists, Departmental facilities, Role of interns in the department,	Professor & Head, Department Of Surgery	11.00am to 11.30am Dept Of Community Medicine
Overview of the Department, Superspeciality clinics with name of specilists, Departmental facilities, Role of interns in the department, their behavior.	Professor & Head, Department Of CHEST & TB	11.30am to 12.00am Dept Of Community Medicine
Prescription writing	Dr. Ranjit Wagh, Professor & Head, Dept. of Pharmacology.	12.00 noon to 1.00pm Community Medicine.
Introduction to activities of CCL , role of interns in CCL,	Professor & Head, Dept.of Pathology.Dept. of Bio-chemistry. Dept . Of Microbiology.	2.00pm to 4pm C.C.L & BLOOD BANK

INTERNSHIP ORIENTATION PROGRAMME,

DEPT. OF COMMUNITY MEDICINE

Day 02

27/8/2019

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Communication Skills	Dr. Aneesh Bhat, Dept. of Psychiatry .	9.00am to 10.00am Dept Of Community Medicine
2	Stress Management	Dr. Aneesh Bhat, Dept. of Psychiatry .	10.00am to 11.00am Dept Of Community Medicine
3	Internship Inauguration Programme	Dept Of Community Medicine	11.00am to 12.00pm
4	Overview of the Department, Superspeciality clinics with name of specilists, Departmental facilities, Role of interns in the department, their behavior.	Professor & Head, Dept. of Community Medicine	12.00noon to 1.00pm Dept Of Community Medicine
Lunch 1.00pm to 2.00pm			
5	Overview of the Department, Superspeciality clinics with name of specilists, Departmental facilities, Role of interns in the department, their behavior.	Professor & Head, Dept. of Pediatrics	2.00pm to 2.30pm Dept Of Community Medicine
6	Overview of the Department, Superspeciality clinics with name of specilists, Departmental facilities, Role of interns in the department, their behavior.	Professor & Head, Dept. of Skin and Veneral Diseases	2.30pm to 3.00pm Dept Of Community Medicine
7	Overview of the Department, Superspeciality clinics with name of specilists, Departmental facilities, Role of interns in the department, their behavior.	Professor & Head, Dept. of Anaesthesia	3.00pm to 4.00pm Dept Of Community Medicine

INTERNSHIP ORIENTATION PROGRAMME

DEPT. OF COMMUNITY MEDICINE

Day 03

28/8/2019

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	NDRF Visit -Disaster Management -First aid & C.P.R	NDRF , Sudumbre Dr. PramodGiri	9.00am to 1.00pm NDRF , Sudumbre
Lunch 1.00pm to 2.00pm			
2	Overview of the Department, Superspeciality clinics with name of specilists, Departmental facilities, Role of interns in the department, their behavior.	Professor & Head, Dept. of OBGY	2.00pm to 2.30pm Dept Of Community Medicine
3	Overview of the Department, Superspeciality clinics with name of specilists, Departmental facilities, Role of interns in the department, their behavior.	Professor & Head, Dept. of General Medicine	2.30pm to 3.00pm Dept Of Community Medicine
4	Overview of the Department, Superspeciality clinics with name of specilists, Departmental facilities, Role of interns in the department, their behavior.	Professor & Head, Dept. of ENT	3.00pm to 3.30pm Dept Of Community Medicine

INTERNSHIP ORIENTATION PROGRAMME

DEPT. OF COMMUNITY MEDICINE

Day 04

29/8/2019

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Family allotment of Interns	Dr Aastha,Dr Ratna Majumdar Professor,Community Medicine	9 .00am to 10.00 am
2	PCPNDT ACT ,Abortion Care & Maternal Health	Dr. Gopalghare, Associate Professor, Dept. of Obstetrics & Gynecology.	10.00am to 11.00am Dept Of Community Medicine
3	Organ Donation	Dr. S.J.Kulkarni , Assistant Professor ,Dept. of Community Medicine	11.00am to 12.00noon Dept Of Community Medicine
4	Medical Certification and cause of death	Dr. Pujari, Associate Professor Dept. of FMT.	12.00noon to 1.00pm Dept Of Community Medicine
Lunch 1.00pm to 2.00pm			
5	Bio Medical Waste management	Dr. R. Majumdar, Professor, Dept. Of Community Medicine	2.00pm to 3.00pm Dept Of Community Medicine
6	Infection Control	Dr. Sadhana Chate , Professor, Dept. of Microbiology	3.00pm to 4.00pm Dept Of Community Medicine

INTERNSHIP ORIENTATION PROGRAMME

DEPT. OF COMMUNITY MEDICINE

Day 05

30/8/2019

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Bioethics Workshop	Dr. D. D'souza Director, NBCIC.	9.00am to 1.00pm Dept. Of Community Medicine
Lunch 1.00pm to 2.00pm			
2	Internship Order Distribution	Dr. R. Majumdar , Professor, Dept. Of Community Medicine.	2.00pm to 4.00pm Dept Of Community Medicine

Dr.S.V.Chincholikar
Prof.& Head
Dept.of Community Medicine,
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Talegaon Dabhade

Note:

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- Interns must join the concerned Dept. on 15/02/2019and give the joining report to concerned HOD.

INTERNSHIP ORIENTATION PROGRAMME

DEPT. OF COMMUNITY MEDICINE

DATE : 24/02/2020, MONDAY

Sr No.	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Welcome, Brief about internship	Dr. S.V.Chincholikar, Professor & Head, Dept. Of Community Medicine ,	9.00am to 9.30am Exam Hall No -04
2	Internship Distribution ,Display of "Groups"	Dr .R. Majumdar, Professor Dept. of Community Medicine	9:30am TO 10.00am Exam Hall No -04
4	Case writing OPD & IPD	Dr. Ashok Ohatkar , Prof.& Head , Dept Of Orthopedics	10.00am to 10.30am Exam Hall No -04
5	Overview of Department ,Role of intern in the department.	Dr. Darpan Maheshgauri, Professor, Dept.of Orthopedics.	10:30 am to 11.00am Exam Hall No -04
6	Overview of the Department, Role of interns in the department and their behavior.	Dr.Sandesh Gawade AssociateProfessor, Dept. of Surgery	11.00am to 11.30am Exam Hall No -04
7	Overview of the Department, Role of interns in the department and their behavior.	Dr.Rajashree Jadhav Professor & Head, Dept.of CHEST & TB	11.30am to 12.00noon Exam Hall No -04
8	Organ Donation	Dr. S.J.Kulkarni , Assistant Professor , Dept. of Community Medicine	12.00 noon to 1.00pm Exam Hall No -04
9	Introduction to activities of CCL , role of interns in CCL,	Professor & Head, Dept.of Pathology Dept.of Bio-chemistry. Dept .of Microbiology.	2.00pm to 4pm CCL & BLOOD BANK

INTERNSHIP ORIENTATION PROGRAMME,

DEPT. OF COMMUNITY MEDICINE

DATE : 25/02/2020, TUESDAY

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Communication Skills	Dr.Aneesh Bhat, Prof.&Head, Dept.of Psychiatry	9.00am to 10.00am Exam Hall No -04
2	Stress Management	Dr. Aneesh Bhat, Dept. of Psychiatry .	10.00am to 11.00am Exam Hall No -04
3	Internship Inauguration Programme	Dept. of Community Medicine	11.00am to 12.00pm Exam Hall No -04
4	Overview of the Department, Role of interns in the department and their behavior.	Dr Aastha Pandey Professor, Dept. of Community Medicine	12.00noon to 1.00pm Exam Hall No -04
Lunch 1.00pm to 2.00pm			
5	Empowerment of students through mind power	Mrs.Padma Venkataramanan, Strategist- Value Education	2.00pm to 4.00pm Exam Hall No -04

INTERNSHIP ORIENTATION PROGRAMME

DEPT. OF COMMUNITY MEDICINE

DATE : 26/02/2020, WEDNESDAY

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Guest Lecture on palliative care and pain management	Dr.Vivek S.Nirabhawane Cipla Palliative Care Centre Warje, Pune.	9.00am to 11.30am Exam Hall No -04
2	PCPNDT ACT ,Abortion Care & Maternal Health	Dr. Gopalghare, Professor Dept.of Obstetrics & Gynecology.	11.30am to 12.00noon Exam Hall No -04
3	Prescription Writing	Dr Ganesh Pentewar Associate Professor Dept. of Pharmacology	12.00noon to 12.30pm Exam Hall No -04
4	Medical Certification and cause of death	Dr. Deshmukh, Professor & Head Dept. of FMT.	12.30pm to 1.00pm Exam Hall No -04
Lunch 1.00pm to 2.00pm			
5	Bio Medical Waste management	Dr. R. Majumdar, Professor, Dept. Of Community Medicine	2.00pm to 3.00pm Exam Hall No -04
6	Interns Role in Skin	Dr. Shinde ,Professor and Head, Dept of Dermatology	3:00pm to 3:30pm Exam Hall No -04
7	Visit to BMW Plant	Dr. R. Majumdar, Professor, Dept. Of Community Medicine	3.30pm to 4.00pm Exam Hall No -04

INTERNSHIP ORIENTATION PROGRAMME

DEPT. OF COMMUNITY MEDICINE

DATE : 27/02/2020, THURSDAY

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Allotment of Internship Groups for Batch –A Visit to Cipla Palliative Care Centre for Batch - B	Dr Madura Ashturkar Mrs.Lalita Patil, MSW Dept.of Community Medicine	9.00am to 1.00pm Exam Hall No -04 A Cipla Palliative Care Centre B
Lunch 1.00pm to 2.00pm			
2	Overview of the Department, Role of interns in the department and their behavior.	Professor & Head, Dept. of ENT	2.00pm to 2.30pm Exam Hall No -04
3	Overview of the Department, Superspeciality clinics with name of specialists, Departmental facilities, Role of interns in the department, their behavior.	Professor & Head, Dept. of General Medicine	2.30pm to 3.00pm Exam Hall No -04
4	Overview of the Department, Role of interns in the department, their behavior.	Professor & Head, Dept. of OBGY	3.00pm to 4.00pm Exam Hall No -04

INTERNSHIP ORIENTATION PROGRAMME

DEPT. OF COMMUNITY MEDICINE

DATE : 28/02/2020, FRIDAY

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Allotment of Internship Groups for Batch –B Visit to Cipla Palliative Care Centre for Batch - A	Dr Ratna Majumdar Ms.Sunita Solanki MSW Dept.of Community Medicine	9.00am to 1.00pm Exam Hall No -04 B Cipla Palliative Care Centre A
Lunch 1.00pm to 2.00pm			
2	Infection Control	Dr.Sadhana Chate Professor, Dept.of Microbiology	2.00pm to 2.30pm Exam Hall No -04
3	Overview of the Department, Role of interns in the department and their behavior..	Professor & Head, Dept. of Anaesthesia	2.30pm to 3.00pm Exam Hall No -04
4	Overview of the Department, Role of interns in the department and their behavior..	Professor & Head, Dept. of Pediatrics	3.00pm to 4.00pm Exam Hall No -04

INTERNSHIP ORIENTATION PROGRAMME

DEPT. OF COMMUNITY MEDICINE

DATE : 29/02/2020, SATURDAY

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Internship Rules	Dr.Ratna Majumdar Professor, Dept.of Community Medicine	9.00am to 11.00am Exam Hall No -04
2	Internship Group Formation	Dr.Aastha Pandey Professor,Dept.of Community Medicine	11.00am to 1.00pm Exam Hall No -04
LUNCH 1.00pm To 2.00pm			
3	Distribution of Orders and reporting to respective departments	Dr.Ratna Majumdar Professor, Dept.of Community Medicine Dr.Aastha Pandey Professor,Dept.of Community Medicine	2.00pm to 4.00pm Exam Hall No -04

Dr.S.V.Chincholikar
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Note :

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- Interns must join the concerned Dept. on 01/03/2020 and give the joining report to concerned HOD.

**MIMER Medical College,
Talegaon Dabhade, Pune**

Established in the year 1995, MIMER Medical College and Dr. Bhausaheb Sardesai Talegaon Rural Hospital, is celebrating its Silver Jubilee year 2019-20.

To fulfil the dream of late Dr. Bhausaheb Sardesai to have a medical college and hospital in Maval region to serve the poor at affordable cost, MAEER's MIT, Pune established this Medical College in the Year 1995. Having started with 100 MBBS admissions, today the college is recognized for 150 MBBS seats and MD/MS in 11 subjects. The college is accredited by NAAC with Grade 'A'. Today, Dr. BSTR Hospital is having more than 700 beds and serves as a tertiary care center catering to the health needs of all sections of society.

The 8th Annual Research Society Conference and CME arranged on 20th & 21st December 2019 is part of this year-long celebration.

This Annual Research Society Conference is a small effort taken by the teachers and students of MIMER Medical College to promote a research oriented mindset amongst the medical fraternity. In addition to this, MIMER Medical College has its own journal, MIMER Medical Journal (www.mmj.net.in) which is indexed by various agencies like Index Copernicus, ProQuest and CrossRef.

Today, MIMER Medical College is working on many innovative and pioneering research projects of academic excellence which are recognized globally.

On this momentous occasion we, the dedicated faculty of MIMER Medical College, reaffirm our commitment to quality medical education aligned with moral, value-based universal education to produce globally competent Indian Medical Graduates to serve humanity.

PATRON

Prof. Dr. Vishwanath Karad

Founder, Executive President & Managing Trustee
MAEER's MIT Group of Institutions, Pune, INDIA.

Dr. Suresh Ghaisas

Medical Director & Trustee

Dr. Virendra Ghaisas
Trustee & Executive Director

Dr. Suchitra Nagare
Trustee & Executive Director

Dr. Arun Jamkar
Director, PG Programme R&D

Dr. (Col) R P Gupta
Principal

ORGANIZING COMMITTEE

CHAIRPERSONS

Dr. Sneha Joshi
Prof. & Head Pathology

Dr. Sandhya Kulkarni
Prof. & Head Microbiology

Dr. Rajendra Shende
Prof. & Head Skin & VD

ORGANIZING SECRETARIES

Dr. Smita Bhide
Professor Pathology

Dr. Rajaram Powar
Professor Microbiology

Dr. Aditi Deshmukh
Senior Resident Skin & VD

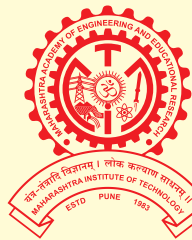
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8884066288

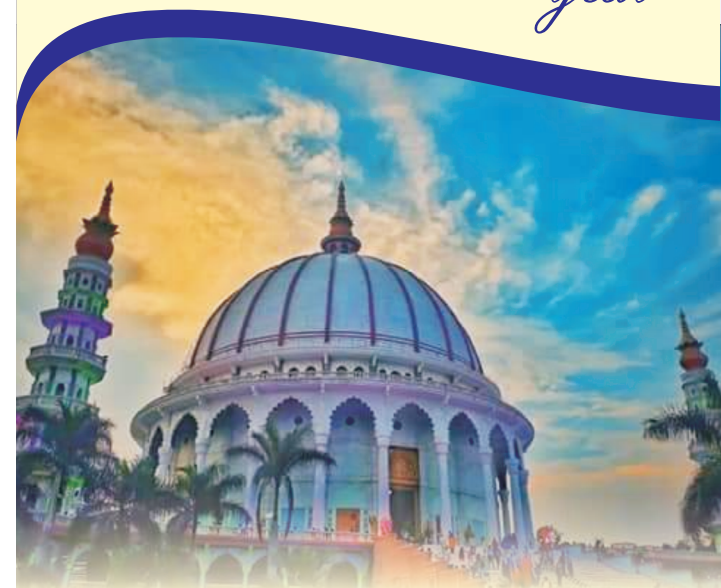
Dr Sadhana Chate : + 91 9371026268

E-mail: conference@mitmimer.com

Web: www.mitmimer.com



Celebrating
25th
year



**8th ANNUAL
RESEARCH SOCIETY
CONFERENCE**

20th & 21st December 2019

**'Leprosy –
Past, Present and Future'**

VENUE

Sushrut Hall, OPD Complex, 1st Floor

MAEER's

**M.I.M.E.R. MEDICAL COLLEGE &
Dr. B.S.T.R. HOSPITAL
Talegaon Dabhade, Dist. Pune**

INVITATION

Dear Delegate,

Leprosy is one of the oldest diseases known to man. Despite advances in all spheres of medical science, leprosy continues to be a public health challenge in countries like India. According to WHO, there were 2,08,619 new leprosy cases registered globally in 2018 from 159 countries including India.

The International Federation of Anti-Leprosy Association has declared this year's theme for World Leprosy Day as '**Ending discrimination, stigma and prejudice**'. In alignment with this theme, we at MIMER Medical College thought to take review of the Leprosy scenario in the country. So, the theme chosen for this 8th Annual Research Conference is '**Leprosy – Past, Present and Future**'. In India, 'Leprosy Day' is observed on 30th January every year to pay homage to Father of the Nation Mahatma Gandhi remembering his dedication towards leprosy patients.

This 8th Annual Research Society Conference will be an ideal platform for budding as well as experienced healthcare professionals to deliberate on many facets related to Leprosy. The outcome of this conference will definitely contribute towards a deeper understanding and evidence-based treatment of Leprosy.

We welcome you to the 8th Annual Research Society Conference and wish you an academically enriching experience.

**Expected 2 MMC Credit Points for Conference
Expected 1 MMC Credit Point for CME**

SCIENTIFIC PROGRAMME

Pre-Conference CME

Friday 20th Dec 2019

'Aiming towards Safe Blood Transfusion'

9:00am - 10:00am	Registration
10:00am - 10:05am	Opening Remarks
10:05am - 11:20am	Component Therapy and Recent Advances in Transfusion Medicine <i>Dr Atul Kulkarni</i>
11:20am - 11:30am	Tea
11:30am - 12:25pm	Blood Transfusion Reactions and Haemovigilance programme <i>Dr Snehal Mujumdar</i>
12:15pm - 1:00pm	Hospital Transfusion Practices <i>Dr Smita Joshi</i>
1:00pm - 1:15pm	Concluding Remarks
1:15pm - 2:00pm	Lunch

Annual Research Society Conference

Saturday 21st Dec 2019

'Leprosy – Past, Present & Future'

8:00am - 9:00am	Registration & Breakfast
9:00am - 10:30am	Scientific Session (I)
10:30am - 11:10am	Inauguration
11:10am - 11:15am	Tea
11:15am - 12:15pm	Key-Note Address Mycobacterium indicus pranali - the vaccine for leprosy - <i>Dr Umesh Gupta</i>
12:15pm - 1:00pm	Guest Lecture I Changing scenario in the therapy of leprosy - <i>Dr Vitthal Jadhav</i>
1:00pm - 1:10pm	Inauguration of Poster Competition
1:10pm - 2:20pm	Lunch
2:20pm - 2:40pm	Guest Lecture II Addressing disabilities and deformities in leprosy - <i>Dr Rohini Gaikwad</i>
2:40pm - 3:30pm	Scientific Session (II)
3:30pm - 4:00pm	Valedictory Function

REGISTRATION FORM

Name: _____

Age: _____ Gender: M / F

Designation: _____

Category: Delegate / PG Student

Institute / Hospital: _____

Address for correspondence: _____

City: _____ State: _____ Pin Code: _____

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Conference Registration

Consultant/Faculty Rs 1200/- PG students Rs 700/- Spot Rs 1500/-

CME Registration

Consultant/Faculty Rs 500/- PG students Rs 300/- Spot Rs 700/-

Registration is mandatory

Xerox / Scanned copy of this form will be accepted

Permission from HOD is must for PG students

Last date of submission of abstract: 22 November 2019

Acknowledgment

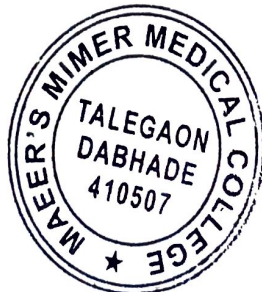
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Bhide
Dr. Smita Bhide
Reg. No. 73605
Professor
Department of Pathology
MIMER Medical College
(Talegaon Dabha), Puna

[Signature]
Dr. D.V. Gopalghare
MMC Observer

[Signature]

PROF. AND HEAD
DEPTT. OF MICROBIOLOGY
MIMER MEDICAL COLLEGE
TALEGAON DABHADE



To,

The Registrar,
Maharashtra Medical Council
Anand Complex, 1st Floor,
Sane Guruji marg, Arthur Road Naka,
Mumbai 400 011.

Date 27/12/2019

Subject : Submission of attendance Report of Faculty ,Delegates, Observer for credit points


Ref-1 : Your Application No. MMC201937418 and Date 19/11/2019

Ref-2 : Our CPD Code . MMC/MAC/2019/C-014346 and dated 20/12/2019


Respected Sir,

With reference to above mentioned subject , I am providing details of the CPD conducted by MAHARASHTRA INSTITUTE OF MEDICAL EDUCATION AND RESEARCH on dated 20/12/2019 the said CPD/Workshop attended the following Faculty , Delegates and Observer and we are allotted credit hour as under.


Sr. No	Registration No.	Name Of RMP	Type Of Attendance	CPD Points	Fees
1	2001021142	Dr. GOPALGHARE DATTATRAYA VITHALRAO	Observer	4	0.00
2	2000020770	Dr. ATUL ARUN KULKARNI	Speaker	1	10.00
3	80219	Dr. RAJENDRA CHANDRAKANT SHINDE	Speaker	1	10.00
4	71886	Dr. ROHINI CHABULAL YASHWANTE	Speaker	1	10.00
5	61280	Dr. SMITA RAVINDRA JOSHI	Speaker	1	10.00
6	86846	Dr. SONAL RAMESH DESHPANDE	Speaker	1	10.00
7	39726	Dr. VITHAL HARIBHAU JADHAV	Speaker	1	10.00
8	2014030565	Dr. AGARWAL SURABHI BABULAL	Delegate	3	30.00
9	2019030969	Dr. AGATE NIKHILA SHRIRAJ	Delegate	3	30.00
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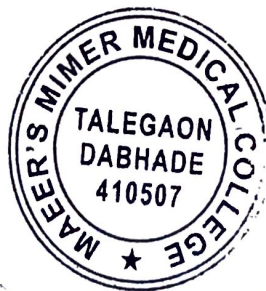
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235	2014041201	Dr. YELE AMIT ARUN	Delegate	2	20.00
236	2012061571	Dr. YEWALE AISHWARYA HARIDASRAO	Delegate	3	30.00
237	69546	Dr. ZOPE RAJENDRA DNYANESHWAR	Delegate	3	30.00
			Total	607	6070.00
			Processing Fees	0	22.42
			Grand Total	0	6092.42

Please Credit above mentioned credit points to individual account of RMP. Payment has been done online and attached here with the online payment receipt for your ready reference.

Thanking You,

Your truly,



S. Bhide
 Dr. Smita Bhide
 Pay No 75605
 Stamp & Signature of President/Secretary
 (MAHARASHTRA INSTITUTE OF MEDICAL EDUCATION AND
 RESEARCH)
 Department of Medical
 (Talegaon)

[Signature]
 Dr. D.V. Gopalghare
 Signature of Observer

Note : Observer Credit points amount not included in the statements.





Activity report

Department: Pathology in association with Research society, MIMER medical college.

Activity: Pre- Conference CME" Aiming towards Safe Blood Transfusion"

Duration: On 20th Dec 2019, from 9.00 am to 2.00 pm

Participants: No of faculty: 116

No. of students: 39

Objective of activity: A Pre- Conference CME titled

" Aiming towards Safe Blood Transfusion" was conducted on 20th Dec 2019. Dr Atul Kulkarni delivered a lecture on Component Therapy and recent advances in Transfusion Medicine. Dr Snehal Majumdar highlighted blood transfusion reactions and Haemovigilance Programme followed by a lecture by Dr Smita Joshi on Hospital Transfusion Practices. The objective of the activity was to sensitize and make the nursing staff, interns, residents and faculty members aware about the current transfusion practices.

Outcomes of activity: All the participants understood basics of component therapy, transfusion reactions and Haemovigilance programme and Hospital Transfusion practices that need to be carried out for a safe blood transfusion.



PROFESSOR AND HOD PATHOLOGY
MIMER'S MEDICAL COLLEGE
TALEGAON DABHADE-419 507

No: T-16017/5/2020-iGOT
Government of India
Ministry of Personnel, Public Grievances & Pensions
D/o Personnel & Training
(Training Division)

Old JNU Campus, New Delhi
Dated: 07th April, 2020

OFFICE MEMORANDUM

Subject: iGOT (Integrated Govt. Online Training) courses on DIKSHA platform on COVID-19 pandemic.

The undersigned is directed to say that as all are aware, India faces a significantly higher threat from COVID-19 pandemic. It will be pertinent to take note of the fact that India's first line of workers is already engaged in COVID relief and doing commendable job. However, a larger force will be needed to replace the first line and to tackle the exponential or geometric increase in positive COVID cases in the subsequent stages of the pandemic.

2. Accordingly, to take care of the training needs of the frontline workers, the launch of the iGOT platform has been fast-forwarded, and using the MoHRD DIKSHA as a host, has been retro-fitted to the purpose requested by the Empowered Group of Officers led by Shri Arun Panda.

3. A version of iGOT fitted to these needs has been launched with the following URL link - <https://igot.gov.in> . The platform will provide the training modules on flexitime and on site basis so that the COVID response can be delivered at scale for the workforce needed to tackle the pandemic.

4. Courses on iGOT have been launched for Doctors, Nurses, Paramedics, Hygiene Workers, Technicians, Auxiliary Nursing Midwives (ANMs), State Govt. Officers, Civil Defence Officials,

....02/-

various Police Organisations, National Cadet Corps (NCC), Nehru Yuva Kendra Sangathan (NYKS), National Service Scheme (NSS), Indian Red Cross Society (IRCS), Bharat Scouts & Guides (BSG) and other volunteers at this stage. The details are as under:

- (i) The URL link is <https://igot.gov.in> (QR Code is at Annexure-V).
- (ii) User Instructions Manual is at Annexure-I.
- (iii) Pamphlet of courses alongwith the Course QR Code is at Annexure-II.
- (iv) Instructions for content creation are at Annexure- III.
- (v) Launch Advertisements are at Annexure - IV & V.

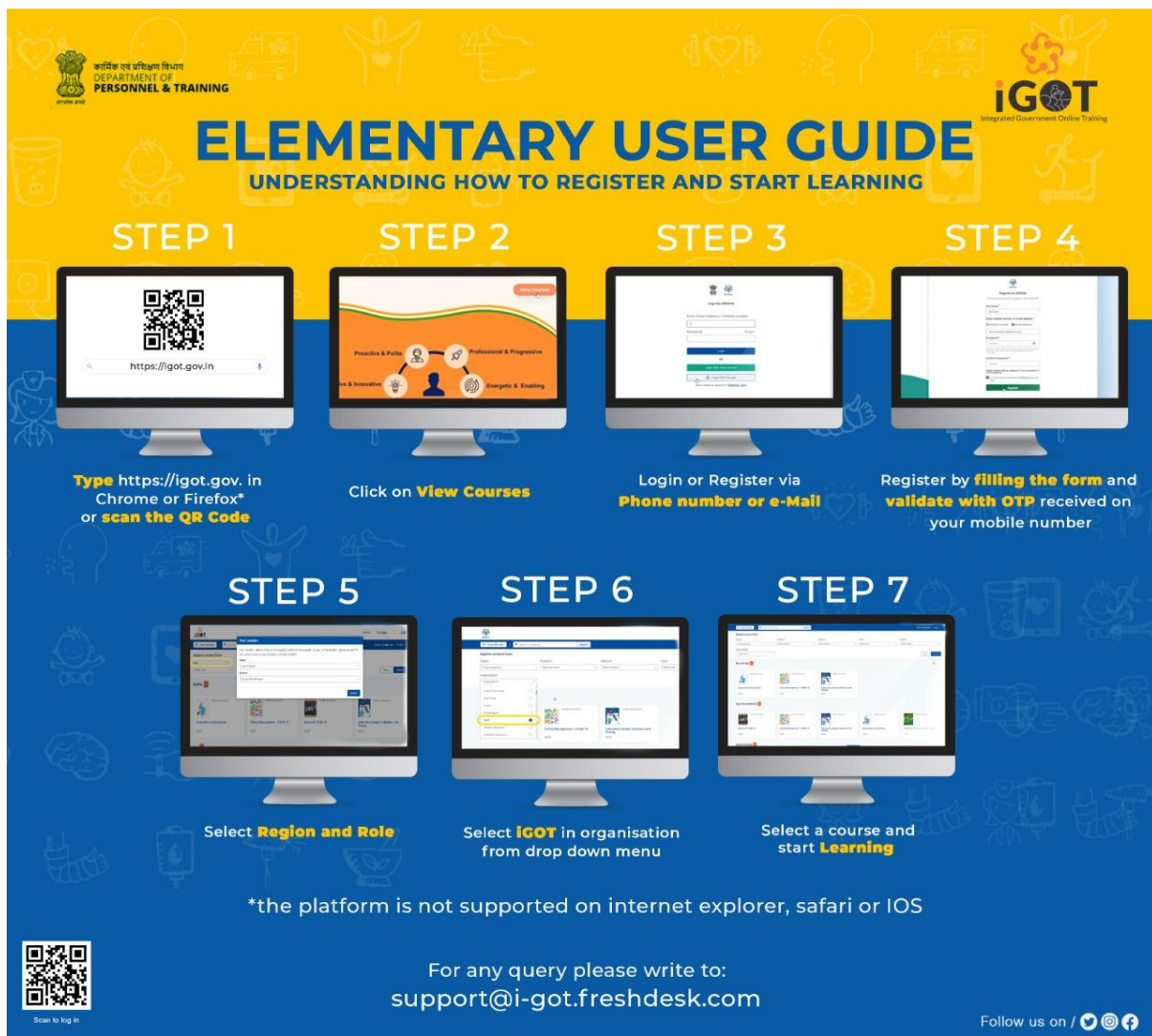
5. It is requested that wide publicity be made and more and more members of the organisations concerned be encouraged to onboard the iGOT platform and undergo online training so that the pandemic may be handled efficiently.



(Manoj Gupta)

Under Secretary to the Govt. of India

1. All Ministries/Departments of the Govt. of India
2. Chief Secretaries of all State Govts./Union Territories
3. Shri Arun Panda, Secretary, MSME - Chairman, Empowered Group on Augmenting Human Resources and Capacity Building.



The image is a user guide for the iGOT platform, titled "ELEMENTARY USER GUIDE: UNDERSTANDING HOW TO REGISTER AND START LEARNING". It features a yellow header with the Department of Personnel & Training logo and the iGOT logo. The guide is divided into seven steps, each illustrated with a computer monitor showing a specific screen from the platform. Step 1 shows a QR code and the URL https://igot.gov.in. Step 2 shows a "View Courses" button. Step 3 shows a login/register form. Step 4 shows a registration form with an OTP validation step. Step 5 shows a selection screen for "Region and Role". Step 6 shows a dropdown menu for selecting the organization "iGOT". Step 7 shows a course selection screen. A QR code for login is provided at the bottom left, and contact information for support is at the bottom center. Social media icons are at the bottom right.


DEPARTMENT OF PERSONNEL & TRAINING

iGOT
Integrated Government Online Training

ELEMENTARY USER GUIDE


UNDERSTANDING HOW TO REGISTER AND START LEARNING

STEP 1




Type **https://igot.gov.in** in Chrome or Firefox* or **scan the QR Code**

STEP 2




Click on **View Courses**

STEP 3




Login or Register via **Phone number or e-Mail**

STEP 4




Register by **filling the form** and **validate with OTP** received on your mobile number

STEP 5




Select **Region and Role**

STEP 6




Select **iGOT** in organisation from drop down menu

STEP 7






Select a course and start **Learning**

*the platform is not supported on internet explorer, safari or IOS



Scan to log in

For any query please write to:
support@i-got.freshdesk.com

Follow us on /   



Content Creation Guidelines for iGOT



1. Guidelines for Content Creation on i-GOT

I TYPE OF ASSET

- A. Video
- B. Slide Show
- C. Animation
- D. Interactive

II GUIDELINES: Please mark an X if the parameters will be met; NA if not applicable

Hygiene factors	X
Content does not have any factual errors	
Content is free from technical glitches	
Audio/Video is clear and in sync	
Content is not derogatory	
Content does not violate any IP rights or licencing agreement usage restrictions	
Technical Aspects	
Video content or animation should be between 1-7 minutes long	
Slide show should not exceed more than 15 frames/slides	
Content can easily load on a mobile phone	
Production aspects (for videos recorded on phones)	
Video should be recorded in landscape mode	
Video should be recorded using the back camera	
Subjects should not be lit from behind	
Content does not have distracting elements – like loud background music, too much animation etc.	
Usability Aspects	
Content lends itself well to dubbing or subtitling	
Appropriate instructions for content use are built into the content	

2. Technical Compliance for i-GOT

<i>Format compliance</i>	
Video (MP4/ WebM)	
Slideshow (ECML)	
Interactive (ECLM/ HTML zip/H5P)	
Document (PDF/ EPub)	
<i>File size</i>	
Less than 50 MB	



कार्मिक एवं प्रशिक्षण विभाग
DEPARTMENT OF
PERSONNEL & TRAINING



A BIG THANK YOU TO COVID-19 WARRIORS!

The Government is dedicated to equipping all our front line warriors
with capabilities to fight COVID -19 Pandemic

LAUNCHING TODAY



iGOT Platform is uniquely designed for our



Doctors



Nurses



Police &
Volunteers



ANMs,
Asha Workers,
Anganwaadis

& all others

Containing self-learning guide with all the
prevention techniques to fight COVID-19

Log on to <https://igot.gov.in>

THREE SIMPLE STEPS
LOG IN → ACCESS → LEARN

Scan to log in

*The platform is compatible with firefox and chrome only
For any query please write to: support@i-got.freshdesk.com



Follow us on





iGOT

Integrated Government Online Training

**FRONT LINE COVID WARRIORS:
WE CARE FOR THE ONES WHO CARE**

Building capabilities to fight the Pandemic better and equipping you (Covid-19 Warriors) to empower the Nation against Pandemic

iGOT Platform is uniquely designed for our



Doctors



Nurses



Police & Volunteers



ANMs, Asha Workers,
Anganwaadis

& all others




Containing self-learning guide with all the latest prevention techniques



Log on to <https://igot.gov.in>

THREE SIMPLE STEPS
LOG IN → ACCESS → LEARN

*The platform is compatible with firefox and chrome only
For any query please write to: support@i-got.freshdesk.com

Follow us on /   

Scan to log on



Attendance of IGOT courses on DIKSHA platform on COVID19 Pandemic			
	NAMES	DEPARTMENT	DESIGNATION
1	Dr. Sumit Raghute	Orthopaedics	Junior Resident
2	Dr. Rahul Patil	Orthopaedics	Junior Resident
3	Dr. Ameya Nandanwar	Orthopaedics	Junior Resident
4	Dr. Shrirang Godbole	Orthopaedics	Junior Resident
5	Dr. Abhilash Pawar	Orthopaedics	Junior Resident
6	Dr. Sagar Kulthe	Orthopaedics	Junior Resident
7	Dr. Nivea Surana	Ophthalmology	Junior Resident
8	Dr. Madhuri Digole	Ophthalmology	Junior Resident
9	Dr. Marina Ger	Ophthalmology	Junior Resident
10	Dr. Avdhoot Wagle	Ophthalmology	Junior Resident
11	Dr. Pankaj Gaikwad	Ophthalmology	Junior Resident
12	Dr. Sayali Kulkarni	Ophthalmology	Junior Resident
13	Dr Swapnil Durge	Dermatology	Junior Resident
14	Dr Zohra Ansari	Dermatology	Junior Resident
15	Dr Prerna Asawale	Dermatology	Junior Resident
16	Dr Juhee Kaithwas	Dermatology	Junior Resident
17	Dr Dipti Thakur	Dermatology	Junior Resident
18	Dr. Swati Ghunage	Obstetrics and Gynaecology	Junior Resident
19	Dr. Snehal Salunkhe	Obstetrics and Gynaecology	Junior Resident
20	Dr. Nikhila Agate	Obstetrics and Gynaecology	Junior Resident
21	Dr.Pramod Giri	PSM	Junior Resident
22	Dr. Laxmi Pol	Anaesthesia	Junior Resident
23	Dr. Maulika Kothari	Anaesthesia	Junior Resident
24	Dr. Leena Kavitate	Anaesthesia	Junior Resident
25	Dr.Divyangi Sarvankar	Surgery	Junior Resident

26	Dr.Harshwardhan Gandhi	Surgery	Junior Resident
27	Dr.Saurabh Dumbre	Surgery	Junior Resident
28	Dr.Balaji Patil	Surgery	Junior Resident
29	Dr.Ajinkya Patil	Surgery	Junior Resident
30	Dr.Pratik Bamane	Surgery	Junior Resident
31	Dr.Dr.Rishabh Gandhi	Surgery	Junior Resident
32	Dr.Rachana Kasture	Surgery	Junior Resident
33	Dr.Kadambari Borade	Surgery	Junior Resident
34	Dr.Shubhada Vaidya	Surgery	Junior Resident

**MIMER Medical College & Dr.BSTR Hospital,
Talegaon (D)
Tal. Maval, Dist. Pune**

Ref.No.MIMER/COVID19/879/2020

Date : 11/05/2020

In view of the impending epidemic of Covid 19 following residents and faculty are hereby instructed to attend the training program designed by Nodal Officer Dr.Sudeep Kumar.

Training is organized as per following schedule.

Sr.No	Particulars	Date
01	First Batch	13/05/2020
02	Second Batch	15/05/2020
03	Third Batch	18/05/2020
04	Final Batch	20/05/2020

Timing: 02.00 pm to 04.00 pm

Venue: Sushruta Hall, Hospital Building

Attendance is mandatory and any person having valid reason of being on call on the day of training should give prior information to Principal and Nodal Officer. Please maintain social distancing and hand hygiene during the training.



(Dr.Sudeep Kumar)
Nodal Officer – COVID -19

C.c to Principal MIMER Medical College, Talegaon

M.I.M.E.R. Medical College & Dr.B.S.T.R. Hospital, Talegaon (D)

TEAM FOR COVID – 19

	TEAM 'A'	TEAM 'B'	TEAM 'C'
Ward 22	Dr. Pravin Dumbre Jr.Resident (I), Gen.Surgery	Dr. Harshwardhan Gandhi Jr.Resident (I), Gen.Surgery	Dr.Balaji Patil Jr.Resident (I), Gen.Surgery
Ward 24	Dr.Divyangi Saravankar- Jr.Resident (I), Gen.Surgery	Dr. Sagar Kulthe – Jr.Resident (I), Ortho	Dr.Abhilash Pawar Jr.Resident (I), Ortho
Supervision in Moderate Ward in Help Desk COVID-19	Dr. Manisha Reddy Jr.Resident (I), Gen.Medicine	Dr. Arun Bagade Jr.Resident (I), Gen.Medicine	Dr.Kartik Jadhav Jr.Resident (I), Gen.Med.
Sr.Resident On Call cover 24 hours – Dr. Amit Yele & Dr.Yuvraj Badhe			
Once ICU starts the call cover will go to the Team posted in ICU			
ICU	1. Dr. Leena Kavitate – Jr.Resident, Anaesthesia 2. Dr. Rahul Naik Jr.Resident (II), Medicine 3. Dr. Sayali Kulkarni Jr.Resident (I), Ophthalmology	1. Dr. Ramesh Jadhav – Sr.Resident, Anaesthesia 2. Dr. Shrirang Patil – Jr.Resident-II, Gen.Medicine 3. Dr. Pankaj Gaikwad – Jr.Resident-I, Ophthalmology	1. Dr.Smita Musande Sr.Resident, Anaesthesia 2. Dr.Anant Suryawashi, Sr.Resident, Anaesthesia 3. Dr.Avdhoot Wagle Jr.Resident-II, Ophthal.
Medicine Ward and Calls	Dr. Bhagyashree Lahane – JR1 (Med) & Dr. Shubham Ahirrao – JR-II (Med)		

Level : A - Screening level

	Team 'A1'	Team 'A2'	Team 'A3'
Leader	Dr.Amey Nanadwar	Dr.Shrirang Godbole	Dr.Venkatesh Jaiswal
Members	Dr.Pankaj Gaikwad	Dr.Dipti Thakur	Dr.Juhee Kaithwas
	Intern	Intern	Intern
Co-ordinators	Dr.Shubhangi Rajput	Dr.Swapnil Gadhire	Dr. Pramod Giri

Level : B - Non - Critical Hospitalised Patients

	Team 'B1'	Team 'B2'	Team 'B3'
Leader	Dr.Dravina Shetty	Dr.Atif Baakza	Dr.Omkar Patil
Members	Dr.Sagar Kulthe	Dr.Abhilash Pawar	Dr.Sayali Kulkarni
	Dr.Saurabh Dumbre	Dr.Harshwardhan Gandhi	Dr.Balaji Patil
Co-ordinators	Dr.Virendrakumar Sutar	Dr.Vidya Ohatkar	Dr.Ashlesha Dandekar

Level : C - Critical Hospital Patients

	Team 'C1'	Team 'C2'	Team 'C3'
Leader	Dr. Yuvraj Badhe	Dr.Amit Yele	Dr.Bhausahab Kawade
Members	Dr.Shrirang Patil	Dr.Shubham Ahirrao	Dr.Rahul Naik
	Dr. Laxmi Pol	Dr.Maulika Kothari	Dr. Anant Phad
	Dr.Arun Bagde	Dr.M.Manisha Reddy	Dr. Kirti Jadhav
Co-ordinators	Dr.Alisha Naik	Dr.Shalaka Saraf	Dr.Prachi Kate

MAEER's MIMER Medical College, Talegaon (D)

Tal. Maval, Dist. Pune

Ref.No.MIMER/COVID/PG Training /580

Date : 16/03/2020

In view of the impending epidemic of Covid 19 following residents and faculty are hereby instructed to attend the training program designed by Nodal Officer Dr.Sudeep Kumar.


Training is organized as per following schedule.

Sr.No	Particulars	Date
01	First Batch	24/03/2020
02	Second Batch	26/03/2020
03	Third Batch	28/03/2020
04	Final Batch	31/03/2020

Timing: 02.00 pm to 04.00 pm

Venue: Sushruta Hall, Hospital Building

Attendance is mandatory and any person having valid reason of being on call on the day of training should give prior information to Principal and Nodal Officer. Please maintain social distancing and hand hygiene during the training.


(Dr.Sudeep Kumar)
Nodal Officer – COVID -19

C.c to Principal MIMER Medical College, Talegaon

MIMER Medical College, Talegaon (D)
List of Post Graduate (PG) Resident/Students

S N	Name	Dept
1	Dr. Naik Shramika Mahadev	Pathology
2	Dr. Pathak Vikas Dinesh	Pathology
3	Dr. Lahane Rupali Baliram	Pathology
4	Dr. Shalaka Saraf	Pathology
5	Dr. Alisha Naik	Pharmacology
6	Dr. Pramod Nagnath Giri	Community Medicine
7	Dr. Narawad Akshay G.	Medicine
8	Dr. Patil Praveen Jagdish	Medicine
9	Dr. Ghuge Badriprasad R.	Medicine
10	Dr. Bangar Nitin Laxmanrao	Medicine
11	Dr. Rahul Tejerao Naik	Medicine
12	Dr. Shrirang Dhananjay Patil	Medicine
13	Dr. Shubham Jaywant Ahirrao	Medicine
14	Dr. Anantrao Laxman Phad	Medicine
15	Dr. Jadhav Kartik M.	Medicine
16	Dr. Bagde Arun M.	Medicine
17	Dr. Musuku Manisha Reddy	Medicine
18	Dr. Lahane Bhagyashree	Medicine
19	Dr. Durge Swapnil Tulshiram	Skin & V.D.
20	Dr. Ansari Zohra Abdus Salam	Skin & V.D.
21	Dr. Prerana Yashwant Asawale	Skin & V.D.
22	Dr. Juhee kaithwas	Skin & V.D.
23	Dr. Dipti Thakur	Skin & V.D.
24	Dr. Rathod Chetan Dayaram	Surgery
25	Dr. Trivedi Harshkumar Kirtilal	Surgery
26	Dr. Pandya Rushin Amritlal	Surgery
27	Dr. Mishra Gopi Krishna	Surgery
28	Dr. Omkar Vishwanath Patil	Surgery
29	Dr. Atef Javed Baakza	Surgery
30	Dr. Dravina Laxman Shetty	Surgery

S N	Name	Dept
31	Dr. Venkatesh Sanjay Jaiswal	Surgery
32	Dr. Divyangi Saravankar G.	Surgery
33	Dr. Patil Balaji	Surgery
34	Dr. Gandhi Harshawardhan	Surgery
35	Dr. Dumbre Saurabh	Surgery
36	Dr. Sumit Raghute	Orthopaedics
37	Dr. Patil Rahul Vishwanath	Orthopaedics
38	Dr. Ameya Yogeshwar N.	Orthopaedics
39	Dr. Godbole Shrirang R.	Orthopaedics
40	Dr. Pawar Abhilash	Orthopaedics
41	Dr. Kulthe Sagar	Orthopaedics
42	Dr. Surana Nivea Ramesh	Ophthalmology
43	Dr. Digole Madhuri Namdev	Ophthalmology
44	Dr. Marina Richard Ger	Ophthalmology
45	Dr. Avdhoot Wagle	Ophthalmology
46	Dr. Gaikwad Pankaj	Ophthalmology
47	Dr. Kulkarni Sayali	Ophthalmology
48	Dr. Ghunage Swati S.	OBGY
49	Dr. Snehal Suresh Salunkhe	OBGY
50	Dr. Agate Nikhila Shriraj	OBGY
51	Dr. Aditi Karad	Gen. Medicine
52	Dr. Ashok Kale	Community Medicine
53	Dr. Viraj Bhoir	Orthopaedics

MIMER Medical College, Talegaon (D)

(Amended) Consultant Duty Schedule

Sr.No	Name	Designation	Dept	From	To
1	Dr.Gauri S. Metkar	Asso.Prof	Pathology	26/04/2021	1/5/2021
2	Dr.Vikram Wagh	Asst.Prof	Gen.Surgery	25/04/2021	30/04/2021
3	Dr.Rupali Baburdikar	Asso.Prof	Physiology	2/5/2021	7/5/2021
4	Dr.Santhosh Kumar	Asso.Prof	ENT	1/5/2021	6/5/2021
5	Dr.Avinash Pujari	Asst.Prof	FMT	8/5/2021	13/05/2021
6	Dr.Ashish Ubale	Asso.Prof	Psychiatry	7/5/2021	12/5/2021
7	Dr.Harsha Jaikar	Asso.Prof	Pathology	14/05/2021	19/05/2021
8	Dr.Ajit Jadhav	Asst.Prof	Gen.Surgery	13/05/2021	18/05/2021
9	Dr.Priyanka Murgod	Asso.Prof	Pathology	20/05/2021	25/05/2021
10	Dr.Swapnil Bhise	Asso.Prof	Orthopaedics	19/05/2021	24/05/2021
11	Dr.Rajendra Zope	Asso.Prof	Pathology	26/05/2021	31/05/2021
12	Dr.Mandar Kale	Asst.Prof	Paediatrics	25/05/2021	30/05/2021
13	Dr.Sonali Khake	Asso.Prof	Anatomy	1/6/2021	6/6/2021
14	Dr.Vijay Bhavari	Asso.Prof	Paediatrics	31/05/2021	5/6/2021
15	Dr.Janice Jaison	Asso.Prof	Pathology	7/6/2021	12/6/2021
16	Dr.Nikhil Phadke	Asso.Prof	Gen.Surgery	6/6/2021	11/6/2021
17	Dr.Madhura Asturkar	Asso.Prof	PSM	13/06/2021	18/06/2021
18	Dr.Shantaram Gulve	Asst.Prof	Gen.Surgery	12/6/2021	17/06/2021
19	Dr.Kiranmani Vedapalli	Asso.Prof	Physiology	19/6/2021	24/6/2021
20	Dr. Ujjwala Keskar	Asso.Prof	Paediatrics	18/06/2021	23/6/2021
21	Dr. S.J. Kulkarni	Asst.Prof	PSM	25/6/2021	30/6/2021
22	Dr.Sandesh Gawade	Asso.Prof	Gen.Surgery	24/6/2021	29/06/2021
23	Dr.Vivek Nirmale	Asso.Prof	Anatomy	1/7/2021	06/07/2021
24	Dr.Sachin Naik	Prof & HOD	Gen.Surgery	30/06/2021	5/7/2021



for *[Signature]*
27/4/21
PRINCIPAL

Date	Help Desk Counter & Counselling Center (10.00 am to 05.00 pm)
20-09-20	Dr.Shantaram Gulave, Asst.Prof, Gen.Surgery
21-09-20	Dr.Shantaram Gulave, Asst.Prof, Gen.Surgery
22-09-20	Dr.Shantaram Gulave, Asst.Prof, Gen.Surgery
23-09-20	Dr.Shantaram Gulave, Asst.Prof, Gen.Surgery
24-09-20	Dr.Shantaram Gulave, Asst.Prof, Gen.Surgery
25-09-20	Dr.Shantaram Gulave, Asst.Prof, Gen.Surgery
26-09-20	Dr.Shantaram Gulave, Asst.Prof, Gen.Surgery
27-09-20	Dr.Shantaram Gulave, Asst.Prof, Gen.Surgery

To co-ordinate with the wards for informing the Clinical condition of the patients to the relatives and prescribe Medicines.

for *Shantaram Gulave*
19/9/2020

Principal

MIMER Medical College & DR.B.S.T.R.Hospital,
Talegaon (D)



**MIMER MEDICAL COLLEGE, TALEGAON DABHADE
DEPARTMENT OF COMMUNITY MEDICINE**

The interns posted within two months to covid care center were:

- 1) Nilay Kelkar
- 2) Justina Koshy
- 3) Sayali Patil
- 4) Satyajeeet Rakh
- 5) Monit jadhav
- 6) Mugdha Garule
- 7) Tanvi Gugale
- 8) Shantanu Chitale

The Covid care center acted as an adjunct to MIMER medical college for admitting mild and asymptomatic positive cases to the center for the efficient functioning of Maval Taluka. The swabs were daily sent from all hospitals to COVID care center and were further transported to NIV-Pune for testing.

The CCC campus was divided into red and green zones where all the filing, records and paperwork was carried out in green zones whereas the suspected and the isolation wards were located in the red zones.

A different swab room with a lab technician was assigned.

The suspected patients used to be admitted for the day when the swab was taken and discharged the next day as they came negative.

The positive patients used to be further shifted to the isolation ward.

There were regular monitoring done by interns where we recorded temperature, pulse and spo2 thrice a day wearing fully equipped PPE and gave symptomatic treatment for headache, backache, and flu like symptoms.

The patients were referred to the CCC on the basis of a referral card sent by PHC or medical colleges.

Serious patients were immediately referred to MIMER medical college.

The experience of serving such patients was indeed a wonderful one and continuously counseling them about the current scenario, their good health and clean hygiene practices was also an amazing one.

It is now that people have started using terms like isolation, quarantine, flattening the curve, epidemiology etc.

This just shows the untapped potential of the subject of preventive and social medicine which would hopefully be explored to a greater extent in future. Thank you for the opportunity.

Attaching some images of the same



MIMER Medical College, Dr.BSTR Hospital, Talegaon (D)

(Amended) Duty schedule for COVID Wards / ICU

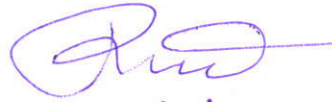
Sr.No	Ward No	From	To
1	Ward No.206	14/5/2021	19/05/2021
	07:30 am to 01:30 pm	JR.III (Med) Dr.Rahul Naik	
	01.30 pm to 07:30 pm	JR - II (Sur)Dr.Balaji Patil	
	07:30 pm to 01:30 am	JR-III. (Sur) Dr.Omkar Patil	
	01:30 am to 07:30 am	JR - I, (Ortho.)Dr.Vijith Hegde	
2	207 & 208 (Med.Resident)	15/5/2021	20/5/2021
	07:30 am to 01:30 pm	JR-III, (Med.) Dr. Shubham Ahirrao	
	01.30 pm to 07:30 pm	JR - II (Medicine) - Dr.Bhagyashree	
	07:30 pm to 01:30 am	JR - II (Medicine)-Dr.Arun Bagade	
	01:30 am to 07:30 am	JR - I (Medicine)-Dr.Urvi Patel	
	207 & 208 (Other Resident)	16/5/2021	21/05/2021
	08:30 am to 02:30 pm	JR.-I (Ortho) Dr.Shantanu Patil	
	02.30 pm to 08:30 pm	JR - I, (Ortho) Dr.Sunil Yadav	
	08:30 pm to 02:30 am	JR-I (Skin) Dr.Avani Gulani	
	02:30 am to 08:30 am	JR - I (Surg)Dr.Rachana Kasture	
3	Ward No.309	15/5/2021	20/5/2021
	08:30 am to 02:30 pm	JR.I, (Med.) Dr.Sunetra Pulsunge	
	02.30 pm to 08:30 pm	JR - I (Opthal) Dr.Bahekar Sujit	
	08:30 pm to 02:30 am	JR.III (Ortho)Dr.Shrirang Godbole / Dr. Nikhila	
	02:30 am to 08:30 am	JR - I (Sur) Dr.Rushbh Gandhi	
4	Ward No.22 & 24	15/05/2021	21/5/2021
	07:30 am to 01:30 pm	JR-III, (Patho) Dr.Rupali Lahane	
	01.30 pm to 07:30 pm	JR - II (Skin)Dr.Juhi Kaithawas	
	07:30 pm to 01:30 am	JR - II, (Ortho)Dr.Abhilash Pawar	
	01:30 am to 07:30 am	JR-II (Surg) Dr.Harsh Gandhi	
5	Ward No.18	14/05/2021	19/05/2021
	07:30 am to 01:30 pm	JR.II (OBGY) Dr.Nikhila Agate	
	01.30 pm to 07:30 pm	JR.III (Skin) Dr.Prerna Asawale	
	07:30 pm to 01:30 am	JR.III (Opthal)Dr.Marina Gar	
	01:30 am to 07:30 am	JR.II, (Opthal), Dr.Sayali Kulkarni	

Dr. Nikhila
19 to 20

Sr.No	Ward No	From	To
6	Ward No.20	12/5/2021	17/05/2021
	07:30 am to 01:30 pm	SR (Sur) Dr.Dinesh Badarshahi	
	01.30 pm to 07:30 pm	Asst.Prof (Ortho)Dr.Shushrut Pulgaonkar	
	07:30 pm to 01:30 am	JR.III, (Phar) Dr.Alisha Naik	
	01:30 am to 07:30 am	JR.I(Sur) Dr.Shubhada Vaidya	
7	Ward No.205	14/05/2021	19/05/2021
	07:30 am to 01:30 pm	Tutor (Patho) Dr.Vikas Pathak	
	01.30 pm to 07:30 pm	SR (Ophthal) Dr.Vibhavari Barhate	
	07:30 pm to 01:30 am	JR.III, (Sur) Dr.Venkatesh / Dr. Salayi	
	01:30 am to 07:30 am	SR (SUR) Dr.Kamladhar	

Dr. Salayi



17 to 19

Principal
MIMER Medical College
Talegaon Dabhade

MIMER Medical College, Dr.BSTR Hospital, Talegaon (D)

Duty schedule for COVID Wards / ICU

Sr.No	Ward No	From	To
1	206 (Med.Resident)	20/06/2021	25/06/2021
	07:30 am to 01:30 pm	JR-II (Med) Dr.Manisha Reddy	
	01.30 pm to 07:30 pm	JR- II (Med) Non-Covid ICU Call cover	
	07:30 pm to 01:30 am	JR-I (Med) Dr.Iqib Khan	
	01:30 am to 07:30 am	JR- I (Med) Non-Covid ICU Call cover	
	206 (Other Resident)	21/06/2021	26/06/2021
	08:30 am to 02:30 pm	JR-I (Skin) Dr.Avani Gulhani	
	02.30 pm to 08:30 pm	JR-I (Sur) Dr.Shubhada Vaidya	
	08:30 pm to 02:30 am	JR-I(Ortho)Dr.Sunil Yadav	
	02:30 am to 08:30 am	JR-I(Opthal) Dr.Viraj Padwal	



For Khandy
Principal
MIMER Medical College
Talegaon Dabhada
19-3-2021

MIMER Medical College, Dr.BSTR Hospital, Talegaon (D)
(Amended) Duty Schedule for COVID Wards / OPDs

Ward No.22 & 24 (27/04/21 to 02/05/21)	
Timing	Resident
07:30 am to 01:30 pm	JR.III (OBGY) Dr.Snehal Salukhe
01.30 pm to 07:30 pm	JR - II (Skin)Dr.Dipti Thakur
07:30 pm to 01:30 am	JR - II (Sur)Dr.Divyangi Saravankar
01:30 am to 07:30 am	SR (Sur) Dr.Yashodeep More

Ward No.20 (24/04/21 to 29/04/21)	
Timing	Resident
07:30 am to 01:30 pm	SR (Ortho) Dr.Rajeev Mundhe
01.30 pm to 07:30 pm	SR (Ortho) Dr.Rahul Patil(25-29/4)
07:30 pm to 01:30 am	JR.III, (Sur) Dr.Atef Baakza
01:30 am to 07:30 am	SR (Sur) Dr.Mohsin Khan

Anush Bhat
27/04/21

MIME.. Medical College, Dr.BSTR Hospital, Talegaon (D)

New Duty Schedule for COVID Wards / OPDs

Amended

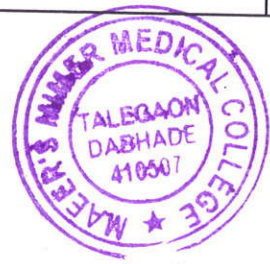
COVID ICU : 206	
Medicine Residents (from 21/4/21 to 26/04/21)	
Timing	Resident
07:30 am to 01:30 pm	JR - II (Medicine) - Dr.Bhagyashree
01.30 pm to 07:30 pm	JR - III (Medicine)- Dr.Rahul
07:30 pm to 01:30 am	JR - II (Medicine)-Dr.Arun
01:30 am to 07:30 am	JR - I (Medicine)-Dr.Urvi

Other Residents (COVID ICU : 206)(20/04/21 to 25/04/21)	
Timing	Resident
08:30 am to 02:30 pm	JR - I, (Ortho) Dr.Sunil Yadav
02.30 pm to 08:30 pm	JR - I (Surgery)Dr.Rachana Kasture
08:30 pm to 02:30 am	JR-I (Skin) Dr.Avani Gulani
02:30 am to 08:30.am	JR - II (Surgery)Dr.Harsh Gandhi

Ward No.309	
Other Residents (From 21/04/21 to 26/04/21)	
Timing	Resident
08:30 am to 02:30 pm	JR - I (Ophthal) Dr.Bahekar Sujit
02.30 pm to 08:30 pm	JR - II, Ortho(Dr.Abhishek Pawar)
08:30 pm to 02:30 am	JR.I, Med. Dr.Sunetra Pulsunge
02:30 am to 08:30 am	JR- I (Surgery) Dr.Rushbh Gandhi

COVID Ward ICU 207 & 208 (from 20/4/21 to 25/04/21)	
Timing	Faculty / Residents
07:30 am to 01:30 pm	JR-III, Med. Dr. Shubham Ahirrao
01.30 pm to 07:30 pm	SR-ENT, Dr.Amit Morey
07:30 pm to 01:30 am	JR.III, Surgery. Dr.Omkar Patil
01:30 am to 07:30 am	JR - I, Ortho. (Dr.Vijith Hegde

Anuraghat



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17-04-21*

MIMER Medical College, Dr.BSTR Hospital, Talegaon (D)

New Duty Schedule for COVID Wards / OPDs

Ward No.22 & 24 (22/04/21 to 27/04/21)

Timing	Resident
07:30 am to 01:30 pm	JR - I /II (Pathology)Dr.Sayali
01.30 pm to 07:30 pm	JR - II (Skin)Dr.Dipti Thakur
07:30 pm to 01:30 am	JR - II (Surgery)Dr.Balaji Patil
01:30 am to 07:30 am	JR.-I (Ortho) Dr.Shantanu Patil

Ward No.18 (22/04/21 to 27/04/21)

Timing	Resident
07:30 am to 01:30 pm	JR.III (Ophthal)Dr.Marina Gar
01.30 pm to 07:30 pm	JR.I (Psy) Dr.Swati Magare
07:30 pm to 01:30 am	JR.II, Ophthal, (Dr.Sayali Kulkarni)
01:30 am to 07:30 am	JR.III (Ortho)Dr.Shrirang Godbole

COVID & Flu OPD duty (from 19/04/21 onwards)

09.00 am to 03.00 pm	JR.III, Dr.Pramod Giri - PSM
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- Note : 1.The Medicine Residents on duty will also take brief round of other wards in regard to any critical patients
2. The respective ward Residents should place proper notes after examination and collect the reports before the rounds
3. The respective ward Residents should also co-ordinate the discharge & MJPJY formalities (ETI/Photographs).

Amended

Anuraghat



Dr. Jay

PRINCIPAL

Dr. Jay
17.04.21

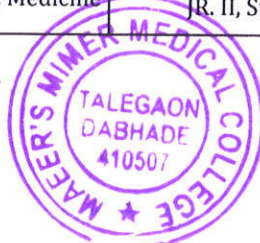
COVID ICU

Ammended duty schedule (Medicine & Ananesthesia)

Date	9 am to 3 pm	3 pm to 9 pm	9 pm to 3 am	3 am to 9 am
28-09-20	Dr.Bhauasheb Kawade (Asst.Prof, Anaesthesia)	Dr.Kartik Jadhav, JR.II, Medicine	Dr.Arun Bagade, JR.II, Medicine	Dr. Rahul Naik -JR.III, Medicine
29-09-20	Dr.Bhauasheb Kawade (Asst.Prof, Anaesthesia)	Dr.Kartik Jadhav, JR.II, Medicine	Dr.Arun Bagade, JR.II, Medicine	Dr. Rahul Naik -JR.III, Medicine
30-09-20	Dr.Bhauasheb Kawade (Asst.Prof, Anaesthesia)	Dr.Kartik Jadhav, JR.II, Medicine	Dr.Arun Bagade, JR.II, Medicine	Dr. Rahul Naik -JR.III, Medicine
01-10-20	Dr.Bhauasheb Kawade (Asst.Prof, Anaesthesia)	Dr.Kartik Jadhav, JR.II, Medicine	Dr.Arun Bagade, JR.II, Medicine	Dr. Rahul Naik -JR.III, Medicine
02-10-20	Dr.Bhauasheb Kawade (Asst.Prof, Anaesthesia)	Dr.Kartik Jadhav, JR.II, Medicine	Dr.Arun Bagade, JR.II, Medicine	Dr. Rahul Naik -JR.III, Medicine
03-10-20	Dr.Bhauasheb Kawade (Asst.Prof, Anaesthesia)	Dr.Kartik Jadhav, JR.II, Medicine	Dr.Arun Bagade, JR.II, Medicine	Dr. Rahul Naik -JR.III, Medicine
04-10-20	Dr.Bhauasheb Kawade (Asst.Prof, Anaesthesia)	Dr.Kartik Jadhav, JR.II, Medicine	Dr.Anant Phad - JR.III, Medicine	Dr. Rahul Naik -JR.III, Medicine
05-10-20	Dr.Bhauasheb Kawade (Asst.Prof, Anaesthesia)	Dr.Kartik Jadhav, JR.II, Medicine	Dr.Anant Phad - JR.III, Medicine	Dr. Rahul Naik -JR.III, Medicine
06-10-20	Dr.Bhauasheb Kawade (Asst.Prof, Anaesthesia)	Dr.Kartik Jadhav, JR.II, Medicine	Dr.Anant Phad - JR.III, Medicine	Dr. Rahul Naik -JR.III, Medicine
07-10-20	Dr.Bhauasheb Kawade (Asst.Prof, Anaesthesia)	Dr.Kartik Jadhav, JR.II, Medicine	Dr.Anant Phad - JR.III, Medicine	Dr. Rahul Naik -JR.III, Medicine

(Modified) Covid (ICU) (Other Doctors)

Date	9 am to 3 pm	3 pm to 9 pm	9 pm to 3 am	3 am to 9 am
28-09-20	Dr.Tushar Kanawade, JR-1, Medicine	Dr.Urvi Patel, JR.I, Medicine	Dr.Harshwardhan Gandhi, JR. II, Surgery	Dr.Prerna Aswale, JR.III, Skin & V.D
29-09-20	Dr.Tushar Kanawade, JR-1, Medicine	Dr.Urvi Patel, JR.I, Medicine	Dr.Harshwardhan Gandhi, JR. II, Surgery	Dr.Prerna Aswale, JR.III, Skin & V.D
30-09-20	Dr.Tushar Kanawade, JR-1, Medicine	Dr.Urvi Patel, JR.I, Medicine	Dr.Harshwardhan Gandhi, JR. II, Surgery	Dr.Prerna Aswale, JR.III, Skin & V.D
01-10-20	Dr.Tushar Kanawade, JR-1, Medicine	Dr.Urvi Patel, JR.I, Medicine	Dr.Harshwardhan Gandhi, JR. II, Surgery	Dr.Prerna Aswale, JR.III, Skin & V.D
02-10-20	Dr.Tushar Kanawade, JR-1, Medicine	Dr.Urvi Patel, JR.I, Medicine	Dr.Harshwardhan Gandhi, JR. II, Surgery	Dr.Prerna Aswale, JR.III, Skin & V.D
03-10-20	Dr.Tushar Kanawade, JR-1, Medicine	Dr.Urvi Patel, JR.I, Medicine	Dr.Harshwardhan Gandhi, JR. II, Surgery	Dr.Prerna Aswale, JR.III, Skin & V.D
04-10-20	Dr.Tushar Kanawade, JR-1, Medicine	Dr.Urvi Patel, JR.I, Medicine	Dr.Harshwardhan Gandhi, JR. II, Surgery	Dr.Prerna Aswale, JR.III, Skin & V.D
05-10-20	Dr.Tushar Kanawade, JR-1, Medicine	Dr.Urvi Patel, JR.I, Medicine	Dr.Harshwardhan Gandhi, JR. II, Surgery	Dr.Prerna Aswale, JR.III, Skin & V.D
06-10-20	Dr.Tushar Kanawade, JR-1, Medicine	Dr.Urvi Patel, JR.I, Medicine	Dr.Harshwardhan Gandhi, JR. II, Surgery	Dr.Prerna Aswale, JR.III, Skin & V.D
07-10-20	Dr.Tushar Kanawade, JR-1, Medicine	Dr.Urvi Patel, JR.I, Medicine	Dr.Harshwardhan Gandhi, JR. II, Surgery	Dr.Prerna Aswale, JR.III, Skin & V.D



(Modified) COVID Ward No.22 & Resident Quarters

Date	9 am to 3 pm	3 pm to 9 pm	9 pm to 3 am	3 am to 9 am
27-09-20	Dr. Alisha Naik, JR.III, Pharmacology	Dr.Juhee Kaithwas, JR.II, Skin & VD	Dr.Mohsin Khan, SR, Surgery	Dr.Amol Walke, SR, Ophthalmology
28-09-20	Dr. Alisha Naik, JR.III, Pharmacology	Dr.Juhee Kaithwas, JR.II, Skin & VD	Dr.Mohsin Khan, SR, Surgery	Dr.Amol Walke, SR, Ophthalmology
29-09-20	Dr. Alisha Naik, JR.III, Pharmacology	Dr.Juhee Kaithwas, JR.II, Skin & VD	Dr.Mohsin Khan, SR, Surgery	Dr.Amol Walke, SR, Ophthalmology
30-09-20	Dr. Alisha Naik, JR.III, Pharmacology	Dr.Juhee Kaithwas, JR.II, Skin & VD	Dr.Mohsin Khan, SR, Surgery	Dr.Amol Walke, SR, Ophthalmology
01-10-20	Dr. Alisha Naik, JR.III, Pharmacology	Dr.Juhee Kaithwas, JR.II, Skin & VD	Dr.Mohsin Khan, SR, Surgery	Dr.Amol Walke, SR, Ophthalmology
02-10-20	Dr. Alisha Naik, JR.III, Pharmacology	Dr.Juhee Kaithwas, JR.II, Skin & VD	Dr.Mohsin Khan, SR, Surgery	Dr.Amol Walke, SR, Ophthalmology
03-10-20	Dr. Alisha Naik, JR.III, Pharmacology	Dr.Juhee Kaithwas, JR.II, Skin & VD	Dr.Mohsin Khan, SR, Surgery	Dr.Amol Walke, SR, Ophthalmology
04-10-20	Dr. Alisha Naik, JR.III, Pharmacology	Dr.Juhee Kaithwas, JR.II, Skin & VD	Dr.Mohsin Khan, SR, Surgery	Dr.Amol Walke, SR, Ophthalmology
05-10-20	Dr. Alisha Naik, JR.III, Pharmacology	Dr.Juhee Kaithwas, JR.II, Skin & VD	Dr.Mohsin Khan, SR, Surgery	Dr.Amol Walke, SR, Ophthalmology
06-10-20	Dr. Alisha Naik, JR.III, Pharmacology	Dr.Juhee Kaithwas, JR.II, Skin & VD	Dr.Mohsin Khan, SR, Surgery	Dr.Amol Walke, SR, Ophthalmology

Note : Please Note in the ward No.22 posted doctors they have to look after their ward and help in the ward No.206 and take round of Resident Quarters. Orientation for Rapid antigen test by Mrs.Charan, Microbiology on 25/09/2020.

MIMSR Latur (COVID WARD NO.309)

Date	9 am to 3 pm	3 pm to 9 pm	9 pm to 3 am	3 am to 9 am
25-09-20	Dr.Marina Gar, JR.III, Ophthalmology	Dr.Sunil Yadav, JR.1, Orthopaedics	Dr.Dravina Sheety, JR.III, Surgery	Dr.Omkar Patil, JR.II, Surgery
26-09-20	Dr.Shaikh Misbah, JR.I, MIMSR, Latur	Dr.Shruti Jayabhaye, JR.I, MIMSR Latur	Dr.Dravina Sheety, JR.III, Surgery	Dr.Omkar Patil, JR.II, Surgery
27-09-20	Dr.Shaikh Misbah, JR.I, MIMSR, Latur	Dr.Shruti Jayabhaye, JR.I, MIMSR Latur	Dr.Dravina Sheety, JR.III, Surgery	Dr.Omkar Patil, JR.II, Surgery
28-09-20	Dr.Shaikh Misbah, JR.I, MIMSR, Latur	Dr.Shruti Jayabhaye, JR.I, MIMSR Latur	Dr.Dravina Sheety, JR.III, Surgery	Dr.Omkar Patil, JR.II, Surgery
29-09-20	Dr.Shaikh Misbah, JR.I, MIMSR, Latur	Dr.Shruti Jayabhaye, JR.I, MIMSR Latur	Dr.Dravina Sheety, JR.III, Surgery	Dr.Omkar Patil, JR.II, Surgery
30-09-20	Dr.Shaikh Misbah, JR.I, MIMSR, Latur	Dr.Shruti Jayabhaye, JR.I, MIMSR Latur	Dr.Dravina Sheety, JR.III, Surgery	Dr.Omkar Patil, JR.II, Surgery
01-10-20	Dr.Shaikh Misbah, JR.I, MIMSR, Latur	Dr.Shruti Jayabhaye, JR.I, MIMSR Latur	Dr.Dravina Sheety, JR.III, Surgery	Dr.Omkar Patil, JR.II, Surgery
02-10-20	Dr.Shaikh Misbah, JR.I, MIMSR, Latur	Dr.Shruti Jayabhaye, JR.I, MIMSR Latur	Dr.Dravina Sheety, JR.III, Surgery	Dr.Omkar Patil, JR.II, Surgery
03-10-20	Dr.Shaikh Misbah, JR.I, MIMSR, Latur	Dr.Shruti Jayabhaye, JR.I, MIMSR Latur	Dr.Dravina Sheety, JR.III, Surgery	Dr.Omkar Patil, JR.II, Surgery
04-10-20	Dr.Shaikh Misbah, JR.I, MIMSR, Latur	Dr.Shruti Jayabhaye, JR.I, MIMSR Latur	Dr.Dravina Sheety, JR.III, Surgery	Dr.Omkar Patil, JR.II, Surgery
05-10-20	Dr.Shaikh Misbah, JR.I, MIMSR, Latur	Dr.Shruti Jayabhaye, JR.I, MIMSR Latur		



COVID Ward No.24 (Ground Floor)				
Date	9 am to 3 pm	3 pm to 9 pm	9 pm to 3 am	3 am to 9 am
28-09-20	Dr.Shalaka Saraf, JR.II, Pathology	Dr.Shubhda Vaidya, JR.I. Gen.Surgery	Dr.Amit Morey, SR, Surgery	Dr.Abhay Topkhane, MO, PSM
29-09-20	Dr.Shalaka Saraf, JR.II, Pathology	Dr.Shubhda Vaidya, JR.I. Gen.Surgery	Dr.Amit Morey, SR, Surgery	Dr.Abhay Topkhane, MO, PSM
30-09-20	Dr.Shalaka Saraf, JR.II, Pathology	Dr.Shubhda Vaidya, JR.I. Gen.Surgery	Dr.Amit Morey, SR, Surgery	Dr.Abhay Topkhane, MO, PSM
01-10-20	Dr.Shalaka Saraf, JR.II, Pathology	Dr.Yash Shah, Asst.Prof, Orthopaedics	Dr.Amit Morey, SR, Surgery	Dr.Abhay Topkhane, MO, PSM
02-10-20	Dr.Varsha Garje, OBGY Dept	Dr.Yash Shah, Asst.Prof, Orthopaedics	Dr.Shantanu Patil, JR.1, Ortho	Dr.Abhay Topkhane, MO, PSM
03-10-20	Dr.Varsha Garje, OBGY Dept	Dr.Yash Shah, Asst.Prof, Orthopaedics	Dr.Shantanu Patil, JR.1, Ortho	Dr.Abhay Topkhane, MO, PSM
04-10-20	Dr.Varsha Garje, OBGY Dept	Dr.Yash Shah, Asst.Prof, Orthopaedics	Dr.Shantanu Patil, JR.1, Ortho	Dr.Abhay Topkhane, MO, PSM
05-10-20	Dr.Varsha Garje, OBGY Dept	Dr.Yash Shah, Asst.Prof, Orthopaedics	Dr.Shantanu Patil, JR.1, Ortho	Dr.Abhay Topkhane, MO, PSM
06-10-20	Dr.Varsha Garje, OBGY Dept	Dr.Yash Shah, Asst.Prof, Orthopaedics	Dr.Shantanu Patil, JR.1, Ortho	Dr.Abhay Topkhane, MO, PSM
07-10-20	Dr.Varsha Garje, OBGY Dept	Dr.Yash Shah, Asst.Prof, Orthopaedics	Dr.Shantanu Patil, JR.1, Ortho	Dr.Abhay Topkhane, MO, PSM

Note : Dr.Varsha Garje & Dr.Shantanu Patil, will worked upto 11/10/2020 & Dr.Yash Shah will worked upto 10/10/20



Wipro DCHC (Amended)

Following doctors posted in WIPRO DCHC W.E.F 27/09/2020

Sr. No	Date	On duty Doctors	Reserved Doctors
1	27/09/2020	<ol style="list-style-type: none">1. Dr. Swapnil Bhise – Asso.Prof, Orthopaedics2. Dr. Sachin Vedpathak – Asso.Prof, OBGY3. Dr. Pavan Dharurkar – Sr.Resident, Surgery4. Dr. Anand Khivansara, Sr.Resident, Orthopaedics5. Dr. Sunil Yadav, JR.I, Orthopaedics	Dr.Amit Yele, SR, Medicine
2	28/09/2020		
3	29/09/2020		
4	30/09/2020		
5	01/10/2020		
6	02/10/2020		
7	03/10/2020		
8	04/10/2020		
9	05/10/2020		
10	06/10/2020		

Sudeep

DR. SUDEEP KUMAR
NODAL OFFICER-COVID 19

C.c to all concern Teaching Staff / Resident



Date	Help Desk Counter & Counselling Center (10:00 am to 05:00 pm) 09:00 am to 04:00 pm
28-09-20	Dr.Astha Pandey, Prof, PSM
29-09-20	Dr.Astha Pandey, Prof, PSM
30-09-20	Dr.Astha Pandey, Prof, PSM
01-10-20	Dr.Astha Pandey, Prof, PSM
02-10-20	Dr.Astha Pandey, Prof, PSM
03-10-20	Dr.Astha Pandey, Prof, PSM
04-10-20	Dr.Astha Pandey, Prof, PSM
05-10-20	Dr.Astha Pandey, Prof, PSM
06-10-20	Dr.Astha Pandey, Prof, PSM
07-10-20	Dr.Astha Pandey, Prof, PSM
08-10-20	Dr.Astha Pandey, Prof, PSM
09-10-20	Dr.Astha Pandey, Prof, PSM
10-10-20	Dr.Astha Pandey, Prof, PSM
11-10-20	Dr.Astha Pandey, Prof, PSM
12-10-20	Dr.Astha Pandey, Prof, PSM

Sudeep

Dr. Sudeep Kumar, Nodal Officer, COVID 19
MIMER Medical College & DR.B.S.T.R.Hospital,
Talegaon (D)



COVID ICU

(Medicine & Ananesthesia)

Date	9 am to 3 pm	3 pm to 9 pm	9 pm to 3 am	3 am to 9 am
19-08-20	Dr.Bhausahab Kawade (Asst.Prof, Anaesthesia)	Dr. Sachin Khade - Asst.Prof, Medicine	Dr. Rahul Naik -JR.III, Medicine	Dr.Anant Phad - JR.III, Medicine
20-08-20	Dr.Bhausahab Kawade (Asst.Prof, Anaesthesia)	Dr. Sachin Khade - Asst.Prof, Medicine	Dr. Rahul Naik -JR.III, Medicine	Dr.Anant Phad - JR.III, Medicine
21-08-20	Dr.Bhausahab Kawade (Asst.Prof, Anaesthesia)	Dr. Sachin Khade - Asst.Prof, Medicine	Dr. Rahul Naik -JR.III, Medicine	Dr.Anant Phad - JR.III, Medicine
22-08-20	Dr.Bhausahab Kawade (Asst.Prof, Anaesthesia)	Dr. Sachin Khade - Asst.Prof, Medicine	Dr. Rahul Naik -JR.III, Medicine	Dr.Anant Phad - JR.III, Medicine
23-08-20	Dr.Bhausahab Kawade (Asst.Prof, Anaesthesia)	Dr. Sachin Khade - Asst.Prof, Medicine	Dr. Rahul Naik -JR.III, Medicine	Dr.Anant Phad - JR.III, Medicine
24-08-20	Dr.Bhausahab Kawade (Asst.Prof, Anaesthesia)	Dr. Sachin Khade - Asst.Prof, Medicine	Dr. Rahul Naik -JR.III, Medicine	Dr.Anant Phad - JR.III, Medicine
25-08-20	Dr.Bhausahab Kawade (Asst.Prof, Anaesthesia)	Dr. Sachin Khade - Asst.Prof, Medicine	Dr. Rahul Naik -JR.III, Medicine	Dr.Anant Phad - JR.III, Medicine
26-08-20	Dr.Bhausahab Kawade (Asst.Prof, Anaesthesia)	Dr. Sachin Khade - Asst.Prof, Medicine	Dr. Rahul Naik -JR.III, Medicine	Dr.Anant Phad - JR.III, Medicine
27-08-20	Dr.Bhausahab Kawade (Asst.Prof, Anaesthesia)	Dr. Sachin Khade - Asst.Prof, Medicine	Dr. Rahul Naik -JR.III, Medicine	Dr.Anant Phad - JR.III, Medicine
28-08-20	Dr.Bhausahab Kawade (Asst.Prof, Anaesthesia)	Dr. Sachin Khade - Asst.Prof, Medicine	Dr. Rahul Naik -JR.III, Medicine	Dr.Anant Phad - JR.III, Medicine

Covid (ICU) (Other Doctors)

Date	9 am to 3 pm	3 pm to 9 pm	9 pm to 3 am	3 am to 9 am
19-08-20	Dr. Dravina Shetty- JR-III, Surgery	Dr.Urvi Patel - JR-1 (Medicine)	Dr. Prerna Asawale - JR.III, Skin & VD	Dr. Tushar Kanawade- JR.1, Medicine
20-08-20	Dr. Dravina Shetty- JR-III, Surgery	Dr.Urvi Patel - JR-1 (Medicine)	Dr. Prerna Asawale - JR.III, Skin & VD	Dr. Tushar Kanawade- JR.1, Medicine
21-08-20	Dr. Dravina Shetty- JR-III, Surgery	Dr.Urvi Patel - JR-1 (Medicine)	Dr. Prerna Asawale - JR.III, Skin & VD	Dr. Tushar Kanawade- JR.1, Medicine
22-08-20	Dr. Dravina Shetty- JR-III, Surgery	Dr.Urvi Patel - JR-1 (Medicine)	Dr. Prerna Asawale - JR.III, Skin & VD	Dr. Tushar Kanawade- JR.1, Medicine
23-08-20	Dr. Dravina Shetty- JR-III, Surgery	Dr.Urvi Patel - JR-1 (Medicine)	Dr. Prerna Asawale - JR.III, Skin & VD	Dr. Tushar Kanawade- JR.1, Medicine
24-08-20	Dr. Dravina Shetty- JR-III, Surgery	Dr.Urvi Patel - JR-1 (Medicine)	Dr. Prerna Asawale - JR.III, Skin & VD	Dr. Tushar Kanawade- JR.1, Medicine
25-08-20	Dr. Dravina Shetty- JR-III, Surgery	Dr.Urvi Patel - JR-1 (Medicine)	Dr. Prerna Asawale - JR.III, Skin & VD	Dr. Tushar Kanawade- JR.1, Medicine
26-08-20	Dr. Dravina Shetty- JR-III, Surgery	Dr.Urvi Patel - JR-1 (Medicine)	Dr. Prerna Asawale - JR.III, Skin & VD	Dr. Tushar Kanawade- JR.1, Medicine
27-08-20	Dr. Dravina Shetty- JR-III, Surgery	Dr.Urvi Patel - JR-1 (Medicine)	Dr. Prerna Asawale - JR.III, Skin & VD	Dr. Tushar Kanawade- JR.1, Medicine
28-08-20	Dr. Dravina Shetty- JR-III, Surgery	Dr.Urvi Patel - JR-1 (Medicine)	Dr. Prerna Asawale - JR.III, Skin & VD	Dr. Tushar Kanawade- JR.1, Medicine



CASUALTY DUTY				Help Desk Counter & Counselling Center (10.00 am to 05.00 pm)
Date	Morning I/C (09.00 am to 04.00 pm)	Evening I/C (04.00 pm to 12.00 midnight)	Night I/C (12.00 midnight to 09.00 am)	
05-08-20	Dr.Aditi Deshmukh, SR,Skin	Dr. Santhosh Rajamani, Asso.Prof, ENT Dept.	Dr.Amol Walke, SR, Ophthal	Dr. Aneesh Bhat, Asso.Prof, Psychiatry
06-08-20	Dr.Aditi Deshmukh, SR,Skin	Dr. Santhosh Rajamani, Asso.Prof, ENT Dept.	Dr.Amol Walke, SR, Ophthal	Dr. Aneesh Bhat, Asso.Prof, Psychiatry
07-08-20	Dr.Aditi Deshmukh, SR,Skin	Dr. Santhosh Rajamani, Asso.Prof, ENT Dept.	Dr.Amol Walke, SR, Ophthal	Dr. Aneesh Bhat, Asso.Prof, Psychiatry
08-08-20	Dr.Aditi Deshmukh, SR,Skin	Dr. Santhosh Rajamani, Asso.Prof, ENT Dept.	Dr.Amol Walke, SR, Ophthal	Dr. Aneesh Bhat, Asso.Prof, Psychiatry
09-08-20	Dr.Aditi Deshmukh, SR,Skin	Dr. Santhosh Rajamani, Asso.Prof, ENT Dept.	Dr.Amol Walke, SR, Ophthal	Dr. Aneesh Bhat, Asso.Prof, Psychiatry
10-08-20	Dr.Aditi Deshmukh, SR,Skin	Dr. Santhosh Rajamani, Asso.Prof, ENT Dept.	Dr.Amol Walke, SR, Ophthal	Dr. Aneesh Bhat, Asso.Prof, Psychiatry
11-08-20	Dr.Aditi Deshmukh, SR,Skin	Dr. Santhosh Rajamani, Asso.Prof, ENT Dept.	Dr.Amol Walke, SR, Ophthal	Dr. Aneesh Bhat, Asso.Prof, Psychiatry
12-08-20	Dr.Aditi Deshmukh, SR,Skin	Dr. Santhosh Rajamani, Asso.Prof, ENT Dept.	Dr.Amol Walke, SR, Ophthal	Dr. Aneesh Bhat, Asso.Prof, Psychiatry
13-08-20	Dr.Aditi Deshmukh, SR,Skin	Dr. Santhosh Rajamani, Asso.Prof, ENT Dept.	Dr.Amol Walke, SR, Ophthal	Dr. Aneesh Bhat, Asso.Prof, Psychiatry
14-08-20	Dr.Aditi Deshmukh, SR,Skin	Dr. Santhosh Rajamani, Asso.Prof, ENT Dept.	Dr.Amol Walke, SR, Ophthal	Dr. Aneesh Bhat, Asso.Prof, Psychiatry

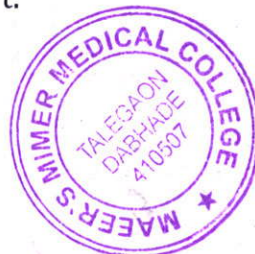
Note: The deployment of Senior Doctors in COVID patients care is required because the number of critical cases presenting to the hospital have increased and often the young Casualty Medical Officer and interns are unable to cope up with the increased load. To manage the casualty in an effective manner a senior doctors will co-ordinate the activities including the receiving of the patients, triage and admission so that the patients care is given optimally.

In addition a daily helpline and counselling center for the COVID patients and the relatives will be started by Psychiatry Dept. They will receive the anxious relatives, explain the current conditions of the serious and the critical patients. As a pre-emptive measure they will call each ICU patient relatives morning and evening and give telephonic support.

Dr. Sudeep Kumar MD (Medicine)
NODAL OFFICER
COVID-19

MIMER Medical College & Dr. BSTR Hospital
Talegaon (D) - 410507.

Sudeep
03/08/2020



Principal
03.08.20
Principal
MIMER Medical College
Talegaon Dabhadre

DUTY SCHEDULE

COVID ward (Ward No.22 & 24) from w.e.f. 21/07/2020

Date	08 am to 02 pm	02 pm to 08 pm	08 pm to 02 am	02 am to 08 am
21.07.2020	Dr.Toshita Jain MIMSR, Latur	Dr.Nikhil Kale (SR) Surgery	Dr.Yashodeep More (SR) Surgery	Dr.Rahul Patil (Exam Going) Ortho
22.07.2020	Dr.Toshita Jain MIMSR, Latur	Dr.Nikhil Kale (SR) Surgery	Dr.Yashodeep More (SR) Surgery	Dr.Rahul Patil (Exam Going) Ortho
23.07.2020	Dr.Toshita Jain MIMSR, Latur	Dr.Nikhil Kale (SR) Surgery	Dr.Yashodeep More (SR) Surgery	Dr.Rahul Patil (Exam Going) Ortho
24.07.2020	Dr.Toshita Jain MIMSR, Latur	Dr.Nikhil Kale (SR) Surgery	Dr.Yashodeep More (SR) Surgery	Dr.Rahul Patil (Exam Going) Ortho
25.07.2020	Dr.Toshita Jain MIMSR, Latur	Dr.Nikhil Kale (SR) Surgery	Dr.Yashodeep More (SR) Surgery	Dr.Rahul Patil (Exam Going) Ortho
26.07.2020	Dr.Toshita Jain MIMSR, Latur	Dr.Nikhil Kale (SR) Surgery	Dr.Yashodeep More (SR) Surgery	Dr.Rahul Patil (Exam Going) Ortho
27.07.2020	To be posted later	Dr.Nikhil Kale (SR) Surgery	Dr.Yashodeep More (SR) Surgery	Dr.Rahul Patil (Exam Going) Ortho
28.07.2020	To be posted later	Dr.Nikhil Kale (SR) Surgery	Dr.Yashodeep More (SR) Surgery	Dr.Rahul Patil (Exam Going) Ortho

Dr.Ahmed Sadique-MIMSR, Latur will do his duty on 22/07/2020 from 12.00 midnight to 07.00 am as special case and come back on day duty 23/07/2020 from 10.00 am to 04.00 p.m

WARD NO.206

Date	9 am to 3 pm	3 pm to 9 pm	9 pm to 3 am	3 am to 9 am
21.07.2020	Dr.Urvi Patel (JR-1, Medicine)	Dr.Shubham Gadkar (JR-1, Skin)	Dr.Abhishek Patil (JR-1, Ortho)	Dr.Sunil Yadav (JR-1, Ortho)
22.07.2020	Dr.Urvi Patel (JR-1, Medicine)	Dr.Shubham Gadkar (JR-1, Skin)	Dr.Abhishek Patil (JR-1, Ortho)	Dr.Sunil Yadav (JR-1, Ortho)
23.07.2020	Dr.Urvi Patel (JR-1, Medicine)	Dr.Shubham Gadkar (JR-1, Skin)	Dr.Abhishek Patil (JR-1, Ortho)	Dr.Sunil Yadav (JR-1, Ortho)
24.07.2020	Dr.Urvi Patel (JR-1, Medicine)	Dr.Shubham Gadkar (JR-1, Skin)	Dr.Abhishek Patil (JR-1, Ortho)	Dr.Sunil Yadav (JR-1, Ortho)
25.07.2020	Dr.Urvi Patel (JR-1, Medicine)	Dr.Shubham Gadkar (JR-1, Skin)	Dr.Abhishek Patil (JR-1, Ortho)	Dr.Sunil Yadav (JR-1, Ortho)
26.07.2020	Dr.Urvi Patel (JR-1, Medicine)	Dr.Shubham Gadkar (JR-1, Skin)	Dr.Abhishek Patil (JR-1, Ortho)	Dr.Sunil Yadav (JR-1, Ortho)
27.07.2020	Dr.Urvi Patel (JR-1, Medicine)	Dr.Shubham Gadkar (JR-1, Skin)	Dr.Abhishek Patil (JR-1, Ortho)	Dr.Sunil Yadav (JR-1, Ortho)
28.07.2020	Dr.Urvi Patel (JR-1, Medicine)	Dr.Shubham Gadkar (JR-1, Skin)	Dr.Abhishek Patil (JR-1, Ortho)	Dr.Sunil Yadav (JR-1, Ortho)

Sudeep
(Dr.Sudeep Kumar)
Nodal Officer – COVID -19

C.c to Dept. of Medicine, Skin & V.D, Orthopaedics, Gen.Surgery.

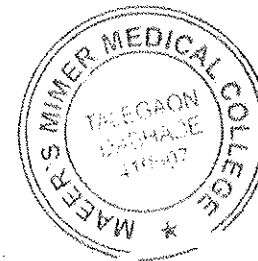
List of Duty Doctors from wef 21/07/2020 to 28/07/2020

Date	9 am to 3 pm	3 pm to 9 pm	9 pm to 3 am	3 am to 9 am
21.07.2020	Dr.Alisha Naik-Pharmac	Dr.Chetan Rathod(Sur)-Exam Going	Dr.Gopikrishna Misra(Sur)-Exam Going	Dr.Swapnil Durge (Skin)- Exam Going
22.07.2020	Dr.Alisha Naik-Pharmac	Dr.Chetan Rathod(Sur)-Exam Going	Dr.Gopikrishna Misra(Sur)-Exam Going	Dr.Swapnil Durge (Skin)- Exam Going
23.07.2020	Dr.Alisha Naik-Pharmac	Dr.Chetan Rathod(Sur)-Exam Going	Dr.Gopikrishna Misra(Sur)-Exam Going	Dr.Swapnil Durge (Skin)- Exam Going
24.07.2020	Dr.Alisha Naik-Pharmac	Dr.Chetan Rathod(Sur)-Exam Going	Dr.Gopikrishna Misra(Sur)-Exam Going	Dr.Swapnil Durge (Skin)- Exam Going
25.07.2020	Dr.Alisha Naik-Pharmac	Dr.Chetan Rathod(Sur)-Exam Going	Dr.Gopikrishna Misra(Sur)-Exam Going	Dr.Swapnil Durge (Skin)- Exam Going
26.07.2020	Dr.Alisha Naik-Pharmac	Dr.Chetan Rathod(Sur)-Exam Going	Dr.Gopikrishna Misra(Sur)-Exam Going	Dr.Swapnil Durge (Skin)- Exam Going
27.07.2020	Dr.Alisha Naik-Pharmac	Dr.Chetan Rathod(Sur)-Exam Going	Dr.Gopikrishna Misra(Sur)-Exam Going	Dr.Swapnil Durge (Skin)- Exam Going
28.07.2020	Dr.Alisha Naik-Pharmac	Dr.Chetan Rathod(Sur)-Exam Going	Dr.Gopikrishna Misra(Sur)-Exam Going	Dr.Swapnil Durge (Skin)- Exam Going

For orientation the above Resident should meet to the undersigned on Manday i.e. 20/07/2020 Medical OPD at 11.30 a.m

Sudeep Kumar
DR. SUDEEP KUMAR
 NODAL OFFICER – COVID 19.

c.c to Dept of Pharmacology, Gen. Surgery & skin & VD.



Duty Schedule of Wipro DCHC

Following doctors posted in WIPRO DCHC W.E.F 27/10/2020

Sr. No	Date	On duty Doctors	On Call & Rounds
1	27/10/2020	Dr. Pravin Baravkar, Asst.Prof, Biochemistry Dr. Ashish Arya, Asst.Prof, Psychiatry Dr. Marina Gar – JR.III, Ophthalmology Dr. Perna Asawale – JR.III, Skin &V.D Dr. Arun Bagade – JR.II, Medicine	
2	28/10/2020		
3	29/10/2020		
4	30/10/2020		
5	31/10/2020		
6	01/11/2020		
7	02/11/2020		
8	03/11/2020		
9	04/11/2020		
10	05/11/2020		



DR. SUDEEP KUMAR
NODAL – OFFICER, COVID 19

C.c to all concern Teaching Staff / Resident

(Amended) Duty Schedule of Wipro DCHC

Following doctors posted in WIPRO DCHC W.E.F 17/10/2020

Sr. No	Date	On duty Doctors	On Call & Rounds
1	17/10/2020	<ol style="list-style-type: none">1. Dr. Rahul Patil – SR, Orthopaedics2. Dr. Prachi Kate – Tutor, Pathology3. Dr. Sayali Kulkarni – JR.II, Ophthalmology4. Dr. Kartik Jadhav – JR.II, Gen.Medicine5. Dr. Rachana Kature – JR.I, Surgery	
2	18/10/2020		
3	19/10/2020		
4	20/10/2020		
5	21/10/2020		
6	22/10/2020		
7	23/10/2020		
8	24/10/2020		
9	25/10/2020		
10	26/10/2020		

C.c to all concern Teaching Staff / Resident

PRINCIPAL

Principal

MIMER Medical College
Talgaon Dabhade - 410 507

Wipro DCHC

Following doctors posted in WIPRO DCHC W.E.F 07/10/2020

Sr. No	Date	On duty Doctors	Reserved Doctors
1	07/10/2020	<ol style="list-style-type: none">1. Dr.Dinesh Badarshahi, SR, Surgery2. Dr.Abhilash Pawar, JR.II, Ortho3. Dr.Pankaj Gaikwad, JR.II, Ophthalmology4. Dr.Balaji Patil, JR.II, Surgery5. Dr.Rishabh Gandhi, JR.I, Surgery	Dr.Amit Yele, SR, Medicine
2	08/10/2020		
3	09/10/2020		
4	10/10/2020		
5	11/10/2020		
6	12/10/2020		
7	13/10/2020		
8	14/10/2020		
9	15/10/2020		
10	16/10/2020		



DR. SUDEEP KUMAR
NODAL OFFICER-COVID 19

C.c to all concern Teaching Staff / Resident

Wipro DCHC

Following doctors posted in WIPRO DCHC W.E.F 02/10/2020

Sr. No	Date	On duty Doctors	Reserved Doctors
1	02/10/2020	<ol style="list-style-type: none">1. Dr. Yash Shah, Asst.Prof, Orthopaedics2. Dr. Gauri Yadav – Tutor, Microbiology3. Dr. Shantanu Patil, JR.I, Orthopaedics4. Dr. Pratik Bamane, JR.I, Gen.Surgery5. Dr. Vijith Hegde, JR.I, Orthopaedics	
2	03/10/2020		
3	04/10/2020		
4	05/10/2020		
5	06/10/2020		
6	07/10/2020		
7	08/10/2020		
8	09/10/2020		
9	10/10/2020		
10	11/10/2020		

C.c to all concern Teaching Staff / Resident




(Dr.Rajendra Prasad Gupta)
Principal


Wipro DCHC

Following doctors posted in WIPRO DCHC W.E.F 02/09/2020

Sr. No	Date	On duty Doctors	Reserved Doctors
1	02/09/2020	1. Dr.Arun Bagade, JR.II, Medicine 2. Dr.Balaji Patil – JR.II, Surgery 3. Dr.Rachana Kature – JR.I, Surgery 4. Dr.Varsha Kumbhar – JR.I, OBGY	
2	03/09/2020		
3	04/09/2020		
4	05/09/2020		
5	06/09/2020		
6	07/09/2020		
7	08/09/2020		
8	09/09/2020		
9	10/09/2020		
10	11/09/2020		

C.c to all concern Teaching Staff / Resident




(Dr. Sudeep Kumar)
Nodal Officer – COVID -19

Wipro DCHC

AMENDED DUTIES

Following doctors posted in WIPRO DCHC W.E.F 03/08/2020

Sr. No	Date	On duty Doctors	Reserved Doctors	Jr. Consultant
1	03/08/2020			
2	04/08/2020	1. Dr. Swapnil More – Asst. Prof., Pathology		
3	05/08/2020	2. Dr. Manas Pusalkar – Asst. Prof, Orthopaedics		
4	06/08/2020	3. Dr. Dinesh Badarshahi – Sr. Resident, Surgery		
5	07/08/2020	4. Dr. Ashish Arya – Asst. Prof, Psychiatry.		
6	08/08/2020	5. Dr. Abhilash Pawar – JR-II, Orthopaedics		
7	09/08/2020	6. Dr. Kartik Jadhav- JR-II, Gen. Medicine		
8	10/08/2020	7. Dr. Rishabh Gandhi – JR-1, Gen. Surgery		
9	11/08/2020			
10	12/08/2020			

Team of Reserved doctors will be posted if required

Dr. Amit Yele – Asst. Prof, Gen. Medicine

Modified duty Schedule: - Dr. Swapnil More, Asst. Prof, Pathology replaced by Dr. Rishabh Gandhi, JR-1, Gen. Surgery w.e.f 05/08/2020



Sudeep
(Dr. Sudeep Kumar)
Nodal Officer – COVID -19

C.c to all concern Teaching Staff / Resident