

Form - IV
(See rule 13)
ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

Sl. No.	Particulars		
1.	Particulars of the Occupier	:	Fortis Hospital Kalyan
	(i) Name of the authorised person (occupier or operator of facility)	:	Dr. Supriya Amey
	(ii) Name of HCF or CBMWTF	:	Fortis Hospital Kalyan
	(iii) Address for Correspondence	:	Opp. APMC Market, shill road. Near Bail Bazar, Kalyan (W)
	(iv) Address of Facility	:	Opp. APMC Market. shill road. Near Bail Bazar, Kalyan (W)
	(v) Tel. No, Fax. No	:	9819078547
	(vi) E-mail ID	:	supriya.amey@fortishealthcare.com
	(vii) URL of Website	:	http://cms.fortishealthcare.com
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	(State Government/Private)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: 1.0/BO//PSO/HOD-05 18.1.2016 valid up to 18.8.2020
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 18.8.2020
2.	Type of Health Care Facility	:	Tertiary Care Hospital
	(i) Bedded Hospital	:	No. of Beds: 63
	(ii) Non-bedded hospital	:	
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	
	(iii) License number and its date of expiry	:	KDMC/HD/BNHRA/01/134/2009-10
3.	Details of CBMWTF	:	N/A
	(i) Number healthcare facilities covered by CBMWTF	:	N/A
	(ii) No of beds covered by CBMWTF	:	N/A
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	N/A

	(iv) Quantity of biomedical waste treated or disposed by CBMWTF :	N/A																																																
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis) :	Yellow Category: 481 Kgs/Per month Red Category: 749 Kgs/Per Month White: 76 Kgs/Per month Blue Category : 78 kgs/per month																																																
5	Details of the Storage, treatment, transportation, processing and Disposal Facility																																																	
	(i) Details of the on-site storage facility :	Size : 253 sq.feet Capacity : Provision of on-site storage : (cold storage or any other provision)																																																
	(ii) Details of the treatment or disposal facilities :																																																	
		<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity in kg</th> <th>Quantity treated or disposed per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td>N/A</td> <td></td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td>N/A</td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td>N/A</td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td>N/A</td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td>N/A</td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td>N/A</td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer Sharps</td> <td>N/A</td> <td></td> <td></td> </tr> <tr> <td>encapsulation or concrete pit</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Deep burial pits:</td> <td>N/A</td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td>N/A</td> <td></td> <td></td> </tr> <tr> <td>Any other treatment equipment:</td> <td>N/A</td> <td></td> <td></td> </tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity in kg	Quantity treated or disposed per annum	Incinerators	N/A			Plasma Pyrolysis	N/A			Autoclaves	N/A			Microwave	N/A			Hydroclave	N/A			Shredder	N/A			Needle tip cutter or destroyer Sharps	N/A			encapsulation or concrete pit				Deep burial pits:	N/A			Chemical disinfection:	N/A			Any other treatment equipment:	N/A		
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Chemical disinfection:	N/A																																																	
Any other treatment equipment:	N/A																																																	
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum. :	Red Category (like plastic, glass etc.) N/A																																																
	(iv) No of vehicles used for collection and transportation of biomedical waste :	N/A																																																

	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Quantity generated Incineration N/A Ash N/A ETP Sludge N/A	Where disposed
	(vi) Name of the Common BioMedical Waste Treatment Facility Operator through which wastes are disposed of	M/S Envision Enviro Engineers (P) Ltd. CBWTF, Adharwadi Jail Road, Mutha College. Umbarde Gaon, Kalyan (W) 421301	
	(vii) List of member HCF not handed over bio-medical waste.	N/A	
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	YES	
7	Details trainings conducted on BMW		
	(i) Number of trainings conducted on BMW Management.	18 trainings conducted (Which includes Nurses, Doctors, Technicians and housekeeping Staff)	
	(ii) number of personnel trained	421	
	(iii) number of personnel trained at the time of induction	50	
	(iv) number of personnel not undergone any training so far	Nil	
	(v) whether standard manual for training is available?	Infection Control Manual (BMW SOP)	
	(vi) any other information)	Nil	
8	Details of the accident occurred during the year		
	(i) Number of Accidents occurred	0	
	(ii) Number of the persons affected	0	
	(iii) Remedial Action taken (Please attach details if any)		
	(iv) Any Fatality occurred, details.	No	
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	N/A	
	Details of Continuous online emission monitoring systems installed	N/A	
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	N/A	

11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		N/A
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator) N/A

Certified that the above report is for the period from : 1st January 2018 to 31st December 2018

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Emhaisan

Dr. Supriya A. Amey

Name and Signature of the Head of the Institution

Date: 12/6/2019

Place: Kalyan

SRD
13/6/19
 प्रादेशिक कार्यालय, कल्याण
 पत्रनि मंडळ
 मिश्री विभाजन संकुल,
 भाग २२२ मलबा, लोक बाप,
 कोरवा रोड, इंदूरवाडी (२),
 जिल्हा - दाखे.

STATIONERY FOR REPORTS & BILLING ONLY

FORM-I

ACCIDENT REPORTING

1. Date and time of accident: Nil
2. Type of Accident: Nil
3. Sequence of events leading to accident: Nil
4. Has the Authority been informed immediately: Nil
5. The type of waste involved in accident: Nil
6. Assessment of the effects of the accidents on human health and the environment: Nil
7. Emergency measures taken: Nil
8. Steps taken to alleviate the effects of accidents: Nil
9. Steps taken to prevent the recurrence of such an accident: Nil
10. Does your facility has an Emergency Control policy? If yes give details: Yes, COE guidelines followed.

Date... 12/6/19

Place... kalyan

Signature... *A. Swagh*
(Apeksha Swagh)
Designation... Infection Control Nurse



SRD
13/6/19
प्रतिष्ठित कार्यालय, कल्याण
महानि पाठक
शिवाजी विद्यापीठ संकुल,
मोड ह्या पत्राला, अंके बागा,
स्टेशन रोड, कल्याण (प),
महाराष्ट्र - ठाणे.

First and the only NABH accredited Multi Speciality Hospital in Kalyan-Dombivli Region

FORTIS HEALTHCARE LIMITED

Regd. Office : Escorts Heart Institute and Research Centre, Okhla Road, New Delhi - 110 025 (India)

Tel: +91 11 2682 5000, Fax: +91 11 4162 8435 CIN : U93000DL2009PLC222166

GSTIN No. 27AABCF3718N1ZE PAN No. AABCF3718N ST No. AABCF3718NSD008

Attendance Sheet

Name of the Programme: BMW Management
 Name of the Facilitator: Budget Robert
 Unit: Kalyan
 Date: 28/11/18

Sl No.	Emp.Code	Names	Department	Signature
1	191280	Sujitha kumar	Msg	<i>Sujitha</i>
2	195253	Anusha Paul	Msg	<i>Anusha</i>
3	195354	Biby Cherian	Msg	<i>Biby</i>
4	195356	Sagar khandagale	Msg	<i>Sagar</i>
5		Dr. Santosh	ICU/ICU	<i>Santosh</i>
6	258435	Dr. Hemant	ICU	<i>Hemant</i>
7		Dr. Sagar	ER	<i>Sagar</i>
8	10197	Apeksha Wagh	Msg	<i>Apeksha</i>
9	100878	Purva Laxwal	Msg	<i>Purva</i>
10	105266	Meegha Khordji	Msg	<i>Meegha</i>
11	100959	Aratibha Shilpi	Msg	<i>Aratibha</i>
12	100285	Sali Chacko	Msg	<i>Sali</i>
13	192708	Anju Mathew	Msg	<i>Anju</i>
14	188668	Sahal Joseph	Msg	<i>Sahal</i>
15	186900	Beaula. Alexander	Msg	<i>Beaula</i>
16		Silla Elsa	Msg	<i>Silla</i>
17	182310	Smita Paupal	Msg	<i>Smita</i>
18	100253	Mary Jose	Msg	<i>Mary</i>
19	91900	Dr. Mayuri Salva	Med.	<i>Mayuri</i>
20	959064	Dr. Manasi	ICU	<i>Manasi</i>
21	959081	Dr. Rueli	ICU	<i>Rueli</i>





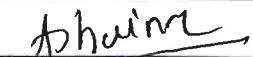


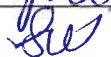


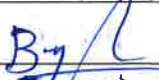


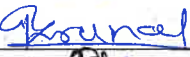


FHL Attendance Sheet


1 hr

Program Name		Bsw management		
Program Date		9/2/18		
S No.	Participant Name	Department	Global ID	Signature
1	Jessynole Raju	Nsg sup	100609	JM
2	Smita S. Pampati	ICU	182310	h
3	Divya Das	ICU		Divya
4	Nilam Govilwadi	ICU		Govilwadi
5	Sayli Bhopatkar	ICU		Sayli
6	Greta Baber	ICU	193236	Greta
7	Anju K. Mathew	ICU	192708	Anju
8	DR PRINA RUMOH	ICU	98904	Prina
9	Megha Bae	ICU	100253	Megha
10	Dr. Karan	ICU	956441	Karan
11	Aarti Shukla	L3		Aarti
12	Silla Elsa	L3		Silla
13	Little Ana Mathew	L3		Little
14	Aleyanna Cyra	C L3	184809	Aleyanna
15	Shubha P.N	Nsg	104928	Shubha
16	Jace Khambh	Diet	118772	Jace
17	Sanel Joseph	ICU	188650	Sanel
18	Vijesha Vasave	ICU	194295	Vijesha
19	Beacala Alexander	ICU-2	186900	Beacala
20	Reju Shiju	ICU	119532	Reju
21	POSHONA GAHATRAI	ICU-1	118168	Poshona
22	DR. HEMANT UJREY	ICU	958435	Hemant
23	DR. RUCHI SAVDEKAR	ICU		Ruchi
24	DR. YOGEN BELKAR	ICU		Yogen


25 Dr. Aathira Kair RMO 959105 Aathira

FHL Attendance Sheet

FHL Attendance Sheet				
Program Name				
Program Date				
S.No	Participant Name	Department	Global ID	Signature
25	Snehal Pawar	Pharmacy	104809	
26	Mayuri Vate	pharmacy		
27	Aditya Shrem	store	182333	
28	Ganesh Ganate	pharmacy HK		
29	Ashwini Z	Pharmacy	105244	
30	Vaheer	level 3	193852	
31	Rajit	level - 3	191777	
32	Sonia	L-3 dialy	129990	
33	Udaising Desai	Dialysis	101611	
34	NANDA	HK		
35	Bala Vagale	Pathology	3429	
36	Uswala Kokate	Pathology	8811	
37	Shivkumar	Pathology	6341	
38	Krunal	Pathology	9707	
39	Sapna	level-1	-	
40	Sujata S. Sonawane	Level: 1	124463	

41. Nilam Gaikwad level - 1 

Jann Samuel LT 105512 

42. Dr. Deepak ward office 

43. Sitl Sachin ma CT 100285 




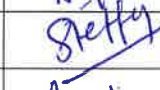

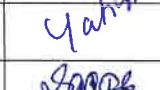


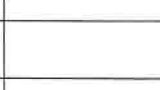
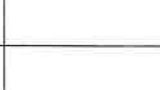

44. Elizabeth Asha 195628 

FHL Attendance Sheet

Department (OT)

Program Name Biomedical Waste Mgmt - 2hr

Program Date 12/2/18 (Bridget Robert)

S No.	Participant Name	Department	Global ID	Signature
1				
2	Archana Nair	OT	184997	
3	Veena Kharvi	OT	126344	
4	Afana Mahe	OT	105383	
5	Honey	OT	185776	
6	Amiya	OT	188147	
7	Steffy	OT	188744	
8	Sebastian	OT		
9	Dhananjay	OT	104029	
10	Jalish	OT	184156	
11	Sagar	OT	195356	
12	Steffy	OT	188744	
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March

FHL Attendance Sheet

12/3/18

2 hours














50







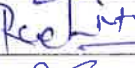

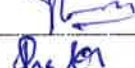
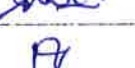
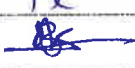
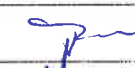



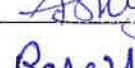







Kiji Toy.

Program Name		Hand hygiene / NSI / BMW.		
Program Date				
S No.	Participant Name	Department	Global ID	Signature
1	Anju Joseph	Level 1		Anju
2	Jinymary Varghese	level 3		Jinymary
3	Preetha, N.S	L3	118773	Preetha
4	Sali Chacko	OPD	100255	Sali
5	JOSHUNA GAHATRAJ	ICU-1	118168	
6	DR. Ashwini S.	Med. ser.	193399	Ashwini
7	Arantosh Sanyal	ICU-1	900970	Arantosh
8	Apeksha Wagh	L-2	101282	Apeksha
9	Anju Joseph	OT	188147	Anju
10	Jolly Mathew	OT	100912	Jolly
11	Jessymol Raju	NSG	100609	Jessymol
12	Pooja Bhasin	Endo	100959	Pooja
13	Maya Joe	ICU	100253	Maya
14	Shreya Rathnam	NSG	104908	Shreya
15	Feba Tiju	ER	185538	Feba
16	Joshua.	ICU		Joshua
17	Anika R. Nair	ICU.	181394	Anika
18	Vaniqa sawal	L-3	103806	Vaniqa
19	Terin Samuel	L-1	105592	Terin
20	gmita Parpati.	L-4 ICU	182310	gmita
21	Mehal Khanam	L-4 ICU	105512	Mehal
22	Bridget Robert	ICU	183774	Bridget
23	Steffy Thomas	OT	188744	Steffy
24	Veena Kharvi	OT	126344	Veena
	Honey Rijo	OT	185776	Honey

FHL Attendance Sheet

21/3/18 (2hrs)

Program Name		Bmw + Infection Control		
Program Date		Budget Robert		
S No	Participant Name	Department	Global ID	Signature
25	Anita	ICU	181394	
26	Greeta	ICU	193256	
27	Korolin	ICU	-	
28	Sonal	ICU	188650	
29	Shamli	ICU	191623	
30	Toby	ICU	118521	
31	Vijay	ICU	194293	
32	Nihal	ICU	-	
33	Kajal	ICU	-	
34	Rekha	ICU	-	
35	Suverna	L-1	-	
36	Anya	L-1	-	
37	Shiny	ER	183874	
38				
39				
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FHL Attendance Sheet				
Trainer name: <u>Bmw</u>		Date: <u>28/3/18</u>		Duration: <u>1hr</u>
Program Name: <u>BMAI</u>				
Program Date: <u>28/3/18</u>		<u>Bridget Robert</u>		
SR No.	Participant Name	Department	Global ID	Signature
1	Jessyraj Raju	NSG	100609	JM
2	Sindhu mal matha	CT Scans	100258	SD
3	Megha. Mandali	E.R.	105246	ced
4	Dr. Manasi	RMO	959064	
5	Pratishr shimpi	Endo swpt	100904	
6	Dr. Md. Shakeef	Head AGE		
7	Salu chakra	ops	100255	
8	Miyabi Likhe	Diet	130877	
9	Joni Samuel	L-1	105542	
10	Ruchita sagvelkar	SD ICU		
11	Dr. Deepak	Naw	@	
12	Purnan Loniwani	L-1	100878	
13	Dr. Sara	physio	920033	
14	Mangesh	MRB	119024	
15	Bhushan	xray		
16	Ramiz	X-RAY	130795	
17	Jomy.	C.T Scan		
18	Libina Liju	L-1	125397	
19	Canesh Camaree	HK		
20	Apelsha Wagh	Level. 2	101952	
21	Ravesh R Dethle.	HK		
22	Tushar Kadam	HK Supervisor		
23	Manisha Hirve.	Pathology.		
24	Balasarbel Vgale	Pathology	3429	
25	Dr. Manish	RMO	959246	
26	Dr. Subhash Auti	Infectiologist	959259	

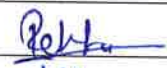

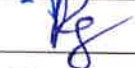










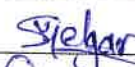





FHL Attendance Sheet

Program Name				
Program Date				
S No	Participant Name	Department	Global ID	Signature
25	Ajay K. Jadar	Leb	2891	<u>Ajay</u>
26	Sheeja Abbar	L-3	190546	<u>Sheeja</u>
27	Marykally Thomas	L3	100741	<u>Mary</u>
28	vidya kulkarni	L3	124464	<u>Vidya</u>
29	Do snali	L-3	T00028	<u>Do</u>
30	Dr Anurje	L-3	958391	<u>Anurje</u>
31	Dr Aalline	Sup Reg	959105	<u>Aalline</u>
32	ATC/CTC	HK		<u>B</u>
33	Kamma	HK		<u>Kamma</u>
34	Sorep. Dattar	L-3	185760	<u>Sorep</u>
35	Udaising Devi	Dialysis	1686880	<u>Udaising</u>
36	Sonia Ali	L-3 dialysis	124490	<u>Sonia</u>
37	Sheeba Ratheeshan	Nsg	104928	<u>Sheeba</u>
38	Bramila Raut	Nsg	196421	<u>Bramila</u>
39				
40				

6/4/18

2 hrs.

FHL Attendance Sheet

Program Name		BMW management		
Program Date		Bridget Robert		
S No.	Participant Name	Department	Global ID	Signature
1	Rekha T	ER		
2	Msunali C.	ER		
3	Asha R	ER	195628	
4	Srinidhi M	CT	10254	
5	Janal Joseph	ICU	188650	
6	Vijesing Vasave	ICU	194293	
7	Anji K Mathu	ICU	192708	
8	Shirin Joseph	I.C.U.		
9	Anji Soman	L-2	120005	
10	Steffy Thomas	L-3	188744	
11	Vaishya	L-3	193852	
12	Aleyamma Cysiac	L-3	184889	
13	Sonia Alex	L-3 chialyi	129990	
14	Chhaya Manekar	Cathlab	190071	
15	Vaishya Velkar	Cathlab	00030	
16	Alka Halhe	Cathlab	102724	
17	Prithvi Jogdekar	Cathlab	119936	
18	Ashwin Velkar	Cathlab	126345	
19	Harati Singh	L-3	196607	
20				
21				
22				
23				
24				

22 May 2018



OT + Nsg + Doctors

2hr

FHL Attendance Sheet

Program Name		BMW Management		
Program Date		Bridget Robert		
S No.	Participant Name	Department	Global ID	Signature
1	Archana Nair	OT	184997	[Signature]
2	Dharmajay Amhite	OT	104029	[Signature]
3	Ullasa	OT	126344	[Signature]
4	Sagar Khandagale	OT	195356	[Signature]
5	Santosh padekar	OT		[Signature]
6	Mehesh Pawar	OT		[Signature]
7	Arju Joseph	OT	188147	[Signature]
8	Affana Mande	OT	105383	[Signature]
9	Dr. Aditya Bhat	OT	959466	[Signature]
10	Apeksha Wagh	Nsg	101902	[Signature]
11	Purva Langwal	Nsg	100826	[Signature]
12	Megha Khande	Nsg	105246	[Signature]
13	Dratibha Shimpi	Nsg	100989	[Signature]
14	Sali Chakre	Nsg	100205	[Signature]
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FHL Attendance Sheet

Trainer name:

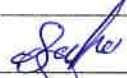




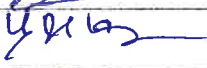









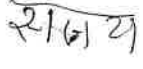
Date: 26/05/18

Duration: 2hr

Program Name

Program Date

BMW management
(Bridget Robert) (Housekeeping)

S No.	Participant Name	Department	Global ID	Signature
1	Sandesh padellar	Genel- OT	H.K	
2	Mahesh Pawar	Leath- OT	H.K	
3	Sangeeta Pawar	C.S.SD	H.K	Sangeeta
4	NANDA charan	Dialysis	H.K	Nanda
5	GOLU KUMAR	L-3	H.K	Golu
6	Khanda Photakar	OT	HK	Khanda
7	Prashant Madik		H.K	Prashant
8	Vasant P.	Lobby	H.K.	Vasant
9	Lalito V. Kadam	OPD	H.K.	Ladham.
10	Amol Kumble	Causalty.	H.K.	
11	Suman Rane	L-1	H.K	Suman
12	Ranjana S.	L-3		
13	Binu	L-4	H.K	
14		L-2	HK	
15		L-4	HK	
16	Rohit S Gaikwad	L-1	H.K	
17	Shirish R Sawant	L-3	H.K	Shirish
18	Kamal Dalave	L-1	H.K	
19	Sachin. Kadam	L-3	H.K.	Sachin
20		L-4	H.K	
21	Saika Gajanan Chauhan	L-3	H.K	Saika
22	Swaraj Kambale	L-4	H.K	Swaraj
23	Ranjeet Ghanghar	L-4	H.K	
24	Divya. Behel	L-3	H.K	
		L-3	H.K	

15/7/18

2 hrs.




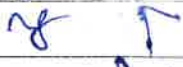




FHL Attendance Sheet

Program Name		BMW management		
Program Date		Bridget Robert		
S No.	Participant Name	Department	Global ID	Signature
1	John P. T	ICU	118521	[Signature]
2	Smite Parpati	ZICU	181310	[Signature]
3	Anita P. Nani	ICU	181394	[Signature]
4	Kavita Bhoste	ICU	197795	Kavita
5	Pratibha Bansode	ZICU	197682	[Signature]
6	Kounal Pujare	Lab	9707	[Signature]
7	Bala Vagle	Lab	3429	[Signature]
8	Ujwala Rokade	Lab	8811	[Signature]
9	Rishori Vanage	Lab	5195	[Signature]
10	Poornima Ankelekar	Level-4	Trainee	[Signature]
11	Sonali Bengde	L-4	-	[Signature]
12	Akshata Gaware	L-4	-	[Signature]
13	Dr. Jyoti Sury	L-4	-	[Signature]
14	Dr. Ashwini Bairagi	Surg reg.		[Signature]
15	Jyoti Gaware	L-4	104500	[Signature]
16	Statimol Mathu	CT	100252	[Signature]
17	Priyanka Jodaro	L-3	189259	[Signature]
18	Peupal Gupta	L-3	100060	[Signature]
19	Lina Mary Thomas	L3		[Signature]
20	Sonia Alex	L3 dialysis	129990	[Signature]
21	Anjn Saman	L-1	129965	[Signature]
22	Veera Karvi	OT	126344	[Signature]
23	Afana Maule	OT	105383	[Signature]
24	Shuffy Thomas	OT	188744	[Signature]

25. Gayatri Sawant NSG 197804 [Signature]

26. Roshni Tribhuvan NSG 197859 [Signature]

FHL Attendance Sheet












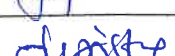
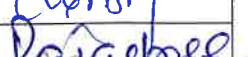

Program Name				
Program Date				
S No	Participant Name	Department	Global ID	Signature
25	Sabubhon M	O.T	190698	
26	Arju Joseph	OT	188147	
27	Rajin S	ICU	184532	
28	Karoline V	ICU	193769	
29	Gosthona G	ICU	118168	
30	Suzi Bhopatkar	ICU		
31	Shyamali	ICU	191622	
32	Anuja Kulkarni	ICU	192208	
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FHL Attendance Sheet

 Trainer name: Apeksha Nlagh Date: 19/9/18 Duration: 2 hrs

 Program Name: BKIM Management & NSI Mgmt

Program Date:

S No.	Participant Name	Department	Global ID	Signature
1	Sujata Asulkar	ICU	18278	
2	Jadhya. cp	ER		
3	Vandana Sawant	L-3	103806	
4	Dr. Veronica	L-3	197849	
5	Vandhana. T.V	ICU	-	
6	Rupal Yerrunkar.	ICU	-	
7	Mrunali Chandekar	L-1	-	
8	Poorvima. A.	L-4	-	
9	Teena Dominic	ICU	192345	
10	Jyotsna Khetre	L-3	19258	
11	Jyoti Raju	L-4	100609	
12	Christy Varghese	NSG	188299	
13	Rajashree Mane	NSG	198640	
14	Dr. Anudita Gupta	Intensivist	959763	
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2br.

Name of the Programme:

Name of the Facilitator:

Unit:

Date:

BMTW Regmt with BIOLOGICAL SKILL
Apeksha Wagh RIT.
Kalyan 9/11/18.

Sr. No.	Emp.Code	Names	Department	Signature
1.	T00078	Sonia Singh	Level-3	[Signature]
2.	T00084	Anny	Level-2	[Signature]
3.	T00081	Sreyas Antony	Level-2	[Signature]
4.	T00077	Athira k-c	OT	[Signature]
5.	199119	Vandhana P.V	ICU	[Signature]
6.	T00082	Sneha K. Raju	ICU	[Signature]
7.	-	Sarika More	Level 1	[Signature]
8.	-	Merinta Mariam Saji	Level 1	[Signature]
9.	T00083	Azhar V S	Level II	[Signature]
10.		Jepali Kadamade	Level II th	[Signature]
11.	199124	Bhakti Wankar	Level 4	[Signature]
12.	196607	Aarti Shukla	Level-3	[Signature]
13.	100673	ANNA PICTER	Level-1	[Signature]
15.	100288	Priyanka Bhargava	Level-1	[Signature]
16.	182310	Smriti Panspahi	ICU	[Signature]
17.		Rekha Yadav	ICU	[Signature]
18.	198640	Rajashree More	ER	[Signature]
19.		Pravile Mahesh	Physio	[Signature]
20.		Riya Sadana	Physio	[Signature]
21.	199123	Shimily	CI	[Signature]
22.		Varshavani Yelgar	CI	[Signature]
23.	100253	Maya Jose	ICU	[Signature]
24.	100497	Ursamma A. Josepu	ICU	[Signature]

24 100497 Ursamma A. Josepu ICU

25

FHL Attendance Sheet

Apeksha Wagh

Program Name		BMW Mgmt & NEST protocol		
Program Date		28/11/18 2 hrs		
S No.	Participant Name	Department	Global ID	Signature
1	Bss Vijesing Vasave	ICU-1	194293	[Signature]
2	Anupriya K. Mahan	L.C.U	192708	[Signature]
3	Anita. R. Nani	ICU	181394	[Signature]
4	Sneha. K. Raju	ICU		[Signature]
5	JOSHUNA GAHATRAS	ICU	118168	[Signature]
6	Megh Dore	ICU	100283	[Signature]
7	Smita Panpatil	ZLU	182310	[Signature]
8	Jywal Thomas	ICU	199120	[Signature]
9	Balashree Ugale	Pathology	3429	[Signature]
10	Kishori Vanage	Pathology	5195	[Signature]
11	Leelha Padav	Trainee		[Signature]
12	Shumilya Jose	CL	199123	[Signature]
13	Rupal Yerunkar	ICU		[Signature]
14	Shreebee Jadhav	ICU	HC	[Signature]
15	Suvamrao Kamble	ICU	HC	[Signature]
16	Dr. Ravikiran Faldale	RMO		[Signature]
17	DR. Mridul	RMO		[Signature]
18	Dr. Piyush Kumar	RMO	959978	[Signature]
19	Dr. Preeti S	RMO		[Signature]
20	Bhakti	Level 4	199124	[Signature]
21	Rohit S Gaikwad	L-1 HK		[Signature]
22	Jolly Mathew	OT	100912	[Signature]
23	Jai	Diet	118715	[Signature]
24	Nijah	- - -		[Signature]

25 Dr. Piyush Kumar Med. 959978

26 Dr. Rameez Akhtar Med 959988

[Signatures]

FHL Attendance Sheet

FHL Attendance Sheet				
Program Name				
Program Date				
S No	Participant Name	Department	Global ID	Signature
25	Dr Sreeja S.	Med. Services	700048	Sreeja
26	Sreeja VS	NSG	118273	Sreeja
27	Priyanka	L-3	189259	Priyanka
28	Varita	L-3	163866	Varita
29	Jyotsna	L-3	192588	Jyotsna
30	Aarti	L-3	196607	Aarti
31	Datti	L-3	199457	Datti
32	Megha	ER	105246	Megha
33	Dr. Shakeel	ER	959205	Dr. Shakeel
34	Shalini	OT den	100258	Shalini
35	Monika Aade	L-1	Trainee	Monika
36	Purva Kulkarni	L-1	100878	Purva
37	Sr. Vanshika	DCO	100493	Vanshika
38	Poornima	L-4	199840	Poornima
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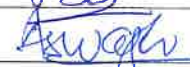

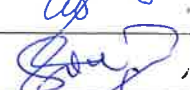
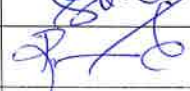






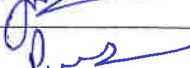


FHL Attendance Sheet

Trainer name:

Date: 29/11/2018 Duration: 2 pm - 3 pm

Program Name HIC meeting

Program Date

S No.	Participant Name	Department	Global ID	Signature
1	Dr. Swati Suryawanshi	MS	130905	
2	Dr. Supriya Amey	FD	124804	
3	Mini John	CNO	100792	
4	VARSAMMA JOSEPH	DCND	100497	
5	Mary Jose	ICU	100253	
6	Apelsha Nagh	ICU	101902	
7	Megha Masdi	ER	105246	
8	Dr. Sandeep Pruthi	ICU	900098	
9	Dr. Raghavendra	Ortho		
10	S. Kavita Das	Pathology	10218	
11	Dr. Shweta Samp	Med. Ca	193399	
12	Hiji Jay	USG	184901	
13	Dr. Kiran Sabnis	ICU		
14	Devenchro Charkhadkar Maintenance			
15	Jolly Trakheerol Inchan		100912	
16	Purnima Langiral	LI	100878	
17	Pratibha Shimpi	Surgical nurse	100909	
18	Dr. Dr. Anshok Boring	Cerebral Surgery		
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FHL Attendance Sheet

Trainer name: Apeksha Wagh Date: 28/12/18 Duration: 2 hrs.

Program Name: BMW Management
 Program Date: 28/12/18

SR No.	Participant Name	Department	Global ID	Signature
1	NANBA. charan	H.K		NANBA.
2	GOLU KUMAR.	H.K.		Golu
3	shaidhar	H.K		SS
4	Kalpene Anbhale	H.K		K.Anbhale
5	Jyoti Pawar	H.K		Pawar
6	सविता वडले	H.K		सविता
7	Karemma Pedda	H.K		Karemma
8	Sunil Bate	H.K		Sunil Bate
9	अंजली प्रजेकर	H.K		अंजली
10	अमित दसा	H.K		अमित
11	असो जेकर	H.K		असो
12	अरुण	H.K		अरुण
13	clara Arabel	Nursing	100257	clara
14	Vandana Sawant	Nursing	103806	Vandana
15	Aleyamma Gyniac	nursing	184869	Aleyamma
16	Jyoti Graceclo	Nursing	104500	Jyoti
17	Annette B. George	Nursing	199127	Annette
18	Sindhurmal	Nsg	100258	Sindhurmal
19	Joby. P.T	Nsg	118521	Joby
20	Jeena Domkarc	Nsg	192545	Jeena
21	Anila. Nani	Nsg	181394	Anila
22	Vandhana.T.V	Nsg	199119	Vandhana
23	Anjali K. Mathia	Nsg	192701	Anjali
24	अनिता	catlab	102724	अनिता

NAME OF COMMITTEE: Hospital Infection Control Committee Meeting

- 1. Date & Time: 27th April 2018**
- 2. Total no. of Members in the committee: 14**
- 3. Number of members attended (attach attendance sheet): 14**
 - Dr. Kirti Sabnis (Consultant- Infectious Disease)
 - Dr. Swati Suryawanshi (MS)
 - Ms. Mini John (Chief Nursing Officer)
 - Dr. Kavita Das (Pathologist)
 - Dr Ashwini Sanap (Quality Co-Ordinator)
 - Ms Jolly Mathew(OT In charge)
 - Ms. Liji Joy (Nurse Educator)
 - Ms Apeksha Wagh (Level-4 In charge)
 - Ms Valsamma Joseph (DCNO)
 - Ms Purva Lanjwal (Nursing Incharge)
 - Ms Megha Mardi (ER Incharge)
 - Ms Bridget Robert (Infection Control Nurse)
 - Dr. Ashok Borisa (General Surgeon)
 - Dr. Sandeep Patil (Chief Intensivist)
- 4. Chairman, convener & Mandatory Members present (Yes/No): Yes**
- 5. Details of essential members who neither attended nor sent a representative: None**
- 6. Agenda circulated prior to meeting (Yes/No): Yes**
- 7. Discussion on Action Taken Report on action items / recommendations from previous meeting (Yes/No) : Yes**
 - 1) Project on Hand Hygiene Compliance in ICU done during the meeting.
- 8. Details of action items open from previous meetings: None**
- 9. Summary of discussion on Reports / documents of all essential Agenda items presented**

Audit Findings: On random round it was found that visitors of OT patients been called inside the OT and Cleanliness of bed before taking the patient in OT was not done properly. Sensitization to all OT team and housekeeping staff given for the same.

a. **Surveillance samples report was discussed**

R.O water (Endotoxin)

- March 2018- Within Normal limit
- February 2018- Within Normal limit
- January 2018- Within Normal limit

Potable water:

- March 2018- Within Normal limit
- February 2018- Within Normal limit
- January 2018- Within Normal limit

Food sampling on quarterly basis:

Sent in December 2017- complying with the Standards. Next Sample to be sent in April-2018

Vaccination Status:

- Hepatitis B Vaccination**
- Nursing Staff: 100%**
- Doctors: 100%**
- Technicians and Paramedical staff: 100%**
- Housekeeping staff: 88.3%**
- F& B vaccination : 89.4%**
- Hepatitis A and Typhoid vaccination- 100 %**

Hand Hygiene Audits:

March 2018 :

Nurse -76.71%

April-18

CLABSI- (1)

54547/59 year male admitted to ICU with right hemiplegia secondary to left MCA infarct with anterior wall MI with DM. Decompressive craniotomy done on 17/3/18. Tracheostomy done on 23/3/18. Blood culture on 19/3/18 had acinetobacter Baumannii in IJV and peripheral line. WBC counts on 10/3/18 was 18.6 but patient had no fever. From 16/3/18 patient developed fever. On 17/3/18 decompressive craniotomy done. Counts were 14.3 and patient was febrile 100 F. On 19th WBC was 19.6 and fever of 100 F. On 1/4/18 he got discharged.

RCA-

- Faulty techniques of handling Clave connectors
- Hand Hygiene Compliance to be increased.
- Incorrect hand hygiene techniques by the doctors while inserting lines.

CAPA :

- Clave connectors handling training done by ICN and departmental in charges to all the staff.
- To Continue to impart to training on hand hygiene and on monthly basis.
- Training on Safe injection and infusion practices done.

HAPU –April(3)

- 1) 58260/ 74yrs male was admitted to ICU with DCM with post cardiac arrest status with hypoxic ischemic brain damage with status epilepticus with seizure disorder with sepsis with DM with MODS. This patient a long stay patient on ventilator. Patient got expired on 23/4/18.
- 2) 59331/57yrs/female was admitted to ICU with a c/o left femur sub trochantric fracture with a k/c/o Ca buccal mucosa with pericardial metastasis with sepsis with MODS. Patient had severe pain on mobilization and was not able to move.
- 3) 58842/66yrs/male was admitted to ICU with post CABG with DM with HTN with old CVA with AF. This patient was not maintaining saturation and was on venti. Even the slightest movement was making the patient desaturated. So was not mobilized for 2 days.

Reasons identified :

- Limited mobility
- Poor blood circulation
- Partial compliance to 2 hourly positioning
- Profuse sweating
- Poor nutrition

Action points:

- ✓ Mandate use of cavlon sprays for prone cases
- ✓ Use of mepilex dressing on prone pressure point areas
- ✓ Proactively place patient on air mattress after checking braden scale
- ✓ Sensitization of all nurses.
- ✓ Conducted certification program on awareness of HAPU .
- ✓ Identified 2 HAPU nurses for critical and non critical areas
- ✓ HAPU free department award every quarterly.
- ✓ Formed HAPU prevention team which consist of a nurse, doctor, HK, nutritionist and physiotherapist

Doctors – 70.07%
Housekeeping - 75.71%

February 2018 :

Nurse -74.48%
Doctors – 72.09%
Housekeeping - 70.41%

January 2018:

Nurse -74.05%
Doctors – 70.05%
Housekeeping - 71%

- **CSSD** –No expiry items found
FIFO was maintained throughout in all the departments
- **Kitchen**- Raw material has to be sealed after opening.
- **Linen** - Handling is within compliance.
- **HK** -Heavy duty gloves used while handling waste.
- **Bio Medical Waste Management**- Staffs are aware of Biomedical waste policies.

New Recommendations:

Overall Cleanliness of food handlers to be monitored.

Assure Cleanliness of bed before taking the OT.

Avoid Calling the visitors inside the OT in case of any explanation to be given.

Quarterly Hand Hygiene departmental Presentations to be done.

Trainings conducted:

- 1)Care Bundles
- 2)Hand Hygiene
- 3)Care of Patient on Ventilator
- 4)Disinfectants used in hospital
- 5)Central line care
- 6)Mouth Care
- 7)HAPU



Chairman

Dr. Kirti Sabnis



Convener

Ms. Bridget Robert

NAME OF COMMITTEE: Hospital Infection Control Committee Meeting

- 1. Date & Time: 29th August 2018**
- 2. Total no. of Members in the committee: 16**
- 3. Number of members attended (attach attendance sheet): 16**
 - Dr. Kirti Sabnis (Consultant- Infectious Disease)
 - Dr. Supriya Amey (Facility Director)
 - Dr. Swati Suryawanshi (MS)
 - Ms. Mini John (Chief Nursing Officer)
 - Dr. Kavita Das (Pathologist)
 - Ms. Devendra Chandwadkar (Maintenance Engineer)
 - Dr. Ashwini Sanap (Quality Co-Ordinator)
 - Ms. Jolly Mathew (OT Incharge)
 - Ms. Liji Joy (Nurse Educator)
 - Ms. Apeksha Wagh (ICN)
 - Ms. Valsamma Joseph (DCNO)
 - Ms. Purva Lanjwal (Nursing Incharge)
 - Ms. Megha Mardi (ER Incharge)
 - Ms. Pratibha Shimpi (Surgical Care Nurse)
 - Dr. Ashok Borisa (General Surgeon)
 - Dr. Sandeep Patil (Chief Intensivist)
- 4. Chairman, convener & Mandatory Members present (Yes/No): Yes**
- 5. Details of essential members who neither attended nor sent a representative: None**
- 6. Agenda circulated prior to meeting (Yes/No): Yes**
- 7. Discussion on Action Taken Report on action items / recommendations from previous meeting (Yes/No) : Yes**
 - 1) Pull on mats outside the OT for wheel to get clean
 - 2) Food Handlers training done
 - 3) Training & Sensitization to Housekeeping staff done
 - 4) Training & Sensitization to OT Team & Security done.
- 8. Details of action items open from previous meetings: None**
 - Summary of discussion on Reports / documents of all essential Agenda items presented**
 - Surveillance samples report was discussed.**

Audit Findings: on random round it was found that the sterile syringes and ryles Tube feeding syringes were kept together in the sterile tray in ICU.

To confirm the findings few more audits were conducted and it was concluded that it was single observation.

It was found that the cleaning of equipment according to checklist was not proper in each shift.

R.O water: (Bacterial Endotoxin level):

- May-2018 : Within normal limits
- June 2018 : Within normal limits
- July 2018: Within normal limits

Potable water:

- May-2018 : Within normal limits
- June 2018 : Within normal limits
- July 2018: Within normal limits

Food sampling in quarterly basis:

Sent in July 2018- complying with the standards. Next sample to be sent Oct-2018.

- Hepatitis B Vaccination**
- Nursing Staff: 100%**
- Doctors: 100%**
- Technicians and Paramedical staff: 100%**
- Housekeeping staff: 100%**
- F& B vaccination : 100%**
- Hepatitis A and Typhoid vaccination- 100 %**

Hand Hygiene Audits

- August 2018- Nurse -84%**
Doctors – 81.54%
Housekeeping - 77.78%

➤ **CSSD –No expiry items found**

FIFO was maintained throughout in all the departments

- **Kitchen-** Needs to be more organised.
- **Linens** - Handling is within compliance.
- **HK** -Heavy duty gloves used while handling waste.
- **Bio Medical waste management-** Staffs are aware of Biomedical waste policies.
- **AMS DATA:**
 - Justification forms filled for all the 13 prescribed restricted antibiotics 100% compliance for surgical prophylaxis.

New Recommendations:

- 1) Hand washing before entering ICU mandatory even for consultants.
- 2) Cleaning and disinfection of equipment's in each shift mandatorily.
- 3) Sterile tray near patient bedside for ICU patients.

Trainings conducted:

Hand Hygiene
Session on VAP
Disinfectants used in hospital
BMW Management
NSI protocols
Culture sample collection
Endoscopic procedures
Nipro IV cannulation
Safe infusion practices - B Braun
Session on culture sample collection by SRL Microbiologist



Chairman

Dr. Kirti Sabnis



Convener

Ms. Apeksha Wagh

CAUTI- 1 (July)

88885/60860 34 year female a case of dilated cardiomyopathy with gross CCF with pulmonary embolism, past history of nephroblastoma with large uterine fibroid admitted on 3/7/18. Foleys catheter inserted on 3rd July. On 7th July she had fever and counts raised to 18,000 and further to 20,000. Culture was sent on the same day which had growth of klebsiella pneumoniae. She was given Inj Sevipime forte 2 gm for 7 days followed by inj monocef 1 gm for 3 days. She got discharge on 14/7/18

Analysis:

July

- Two shifts catheter care was not given as at a time there was multiple new admissions.
- Improper Insertion technique discussed with staff.

CAPA

- Sensitization on catheter care
- Instructed all the nurses to ask for help in case they find difficulty in handling their shifts
- Corrective technique and follow up session taken by In charges and the ICN

NSI-3 (July)

- 1) Staff from ICU got a prick while assisting for blood collection.
- 2) Staff from ICU got a prick from novafine needle post insulin administration
- 3) Staff from level 1 got a prick from novafine needle after giving insulin administration

Analysis:

- Partial compliance amongst the HCW's regarding sharps management.
- Tendency to complete the work ASAP

Action plan:

- Continue Regular Monthly training program

VAP-1 (Aug)

61313/30year old male admitted on 24/7/18 to ICU a case of acute necrotising pancreatitis with sepsis with exploratory laprotomy with pancreatic necrosectomy done on 14/8/18. He was on o2 by nasal prongs @4lit. On 14/8/18 he was intubated . On the same day he had fever 101.8 F , WBC-14.6, HR-110, FiO2-40%PEEP-5. On 16/8/18 he was extubated and was maintaining o2 by nasal prongs. On 20/8/18 he was again intubated and his counts were 22.5. He is on Polymixin B and inj Zienam.

Reasons identified:

- Recurrent Intubation.
- Patient was debilitated
- Prolongation of ventilator days due to Pancreatitis.
- Reduced Hand Hygiene Compliance.

Action taken:

- Training given on proper technique of suctioning.
- On job demonstrations done.
- Written test conducted on suction techniques.
- Emphasis given on compliance to closed suctioning.
- Live audits conducted.
- Strict Vigilance.
- Early sign & Symptoms of infections are picked up to prevent VAP.
- Strict Emphasis daily review of lines and weaning protocols.

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NAME OF UNIT: Kalyan Fortis

NAME OF COMMITTEE: Hospital Infection Control Committee Meeting

- 1. Date & Time: 29th Nov 2018**
- 2. Total no. of Members in the committee: 15**
- 3. Number of members attended (attach attendance sheet): 15**
 - Dr. Kirti Sabnis (Consultant- Infectious Disease)
 - Dr. Swati Suryawanshi (MS)
 - Ms. Mini John (Chief Nursing Officer)
 - Dr. Sandeep Patil (Chief Intesivist)
 - Mr Devendra Chandwadkar (Maintenance Engineer)
 - Dr. Kavita Das (Pathologist)
 - Ms Jolly Mathew(OT Incharge)
 - Ms Apeksha Wagh (ICN)
 - Ms Valsamma Joseph (DCNO)
 - Ms Purva Lanjwal (Nursing Incharge)
 - Ms Megha Mardi (ER Incharge)
 - Ms Pratibha Shimpi (Surgical Care Nurse)
 - Ms Liji Joy (Nurse Educator)
 - Dr. Ashok Borisa (General Surgeon)
 - Dr. Sandeep Patil (Chief Intensivist)
- 4. Chairman, convener & Mandatory Members present (Yes/No): Yes**
- 5. Details of essential members who neither attended nor sent a representative: None**
- 6. Agenda circulated prior to meeting (Yes/No): Yes**
- 7. Discussion on Action Taken Report on action items / recommendations from previous meeting (Yes/No) : Yes**
 - 1) Hand Washing training to Security staff given
 - 2) Cleaning checklist for housekeeping implemented
 - 3) Sterile tray near to the patients who have invasive lines.
- 8. Details of action items open from previous meetings: None**

- Summary of discussion on Reports / documents of all essential Agenda items presented.**

Nosocomial infection data revealed one SSI for neurosurgical patient received for the month of September.

- Surveillance samples report was discussed**
- R.O water: Bacterial endotoxin levels**
 - Sept- 2018- within normal limits
 - Oct-2018-Within normal limits
 - Nov- 2018- Within normal limits

Potable water:

NOV- 2018- No Growth

- Food sampling in quarterly basis:**

Sent in OCT- 2018- complying with the standards. Next sample to be sent Dec-2018.

- Vaccination Status:**

- Hepatitis B Vaccination**
- Nursing Staff: 98.5%**
- Doctors: 100%**
- Technicians and Paramedical staff: 100%**
- Housekeeping staff:100%**
- F& B vaccination : 100%**

Hepatitis A and Typhoid vaccination- 100 %

- Hand Hygiene Audits**

- NOV- 2018-**

Nurse -82.47%

Doctors – 78.03%

Housekeeping - 79.60%

- **CSSD** –No expiry items found
FIFO was maintained throughout in all the departments
- **Kitchen**- Cleanliness maintained.
- **Linen** - Handling is within compliance
- **HK** – Handling of Waste is within Compliance.
- **Bio Medical Waste Management**- Staffs are aware of Biomedical waste policies.

➤ **AMS DATA:**

- ❖ Justification forms filled for all the 22 prescribed restricted antibiotics
- ❖ 100% compliance for surgical prophylaxis.

New Recommendations:

- ❖ Sterile sheets for Neuro surgey cases.

Trainings conducted:

- 1)Hand Hygiene
- 2)BMW Management
- 3)NSI protocols
- 4)Airway Suctioning
- 5)Sample Collection

Signature

Chairman

Dr. Kirti Sabnis



Convener

Ms.Apeksha Wagh

SSI-1 (Sep)

47 year old female a case of IC bleed - operated for post decompressive craniotomy with EVD insertion done on 27/7/18. She developed fever, erythema, swelling and oozing @ the operated site on 2/8/18. On 2/8/18 blood culture done which had klebsiella pneumonia MDR. She was on Inj Polymixin B and Zeinam. Tracheostomy done on 3/8/18. 7/8/18 DSA done which shows temporo parital AVM .On 9/8/18 MRI brain was done which shows right SDH. On 8/8/18 blood culture repeated it was negative. Her culture for cerebro spinal fluid was send on. On 14/8/18 EVD done. Inj Vanlid started on 21/8/18. EVD removed. On 29/8/18 cranioplasty done with VP shunting. On 3/9/18 she had fever and oozing from surgical site, tapping was done for that and culture send-report had pseudomonas aeruginosa. Inj Meropenum 2 gm started. On 15/9/18 she went discharge.

RCA

Overall pre-operative care and Hand Hygiene of operating unit readdressed

CAPA:

Discussed with primary neurosurgeon.

Meeting held with care team (neurosurgeon , ICU chief intensivist , In charge, Anesthetist) regarding overall preoperative care and hand hygiene

OCT-18

CLABSI-

1) (UHID- 11185 IP- 63071) 81yr/M admitted on 17/10/18 as a c/o SAIO (Subacute intestinal obstruction) with sepsis with DM with HTN in ICU. Pt was breathless on admission Vitals T- Afeb HR-104/mt Spo2- 98%.on 2 lit o2 With WBC -15.5. CRP-201.5. he had developed fever spike of 100 F on 19/10/18. Blood culture sent on 20/10/18 S/O Candida Krusei in Rt IJV and Rt hand peripheral. Pt was on Inj. Merocrit 500mg IV BD & Inj. Metro 100ml IV TDS then according to culture sensitivity pattern Pt was put on Inj Caspofungin 70mg IV OD for 5 days. Pt shifted to ward on 26/10/18. Central line removed on day -9. Then Peripheral line was put Pt's repeat Blood culture sent on 29/10/18 it showing no growth till date. Again pt developed breathlessness on 3/11/18 so central line put on Lt side pt was on Inj. Tazin 4.5gm IV TDS and then patient discharged on 10/11/2018.

October:

- Multiple antibiotics
- Prolonged and recurrent hospital admissions
- Extreme of age and reduce immune resistance

- Partial compliance of scrubbing the hub before accessing the lines

CAPA :

- Mainly patient related factors
- Strengthening of staff education on central line care was done.
- Emphasis on daily review of lines

NSI- Oct (1)

A staff nurse got an NSI after checking HGT of the patient. She got the prick while discarding the lancet needle into the kidney tray. She was vaccinated and the patients viral markers were negative. Informed the CMO and inj TT was given.

NSI- Nov (2)

1) Staff nurse got a NSI from a sero positive patient while recapping the syringe of LMWH. Immediately NSI protocols followed. Patients viral load status was done and was <40. Staff P24 was done which was negative. She is started on tab Viraday HS for 28 days

2) H/K staff got sharp injury while segregating the waste in D.U room on his toe and got punctured. Sharp was not used for patient so as per the regimen Inj.TT 0.5ml IM was given to the staff.

Analysis:

- Partial compliance amongst the HCW's regarding sharps management.
- Tendency to complete the work ASAP

Action plan:

- Continue Regular Monthly training program

