



TAGORE MEDICAL COLLEGE & HOSPITAL

Rathinamangalam, Melakkottaiyur Post, Chennai - 600127.
Phone : 044-30101111, Fax : 044-222 5555, Email: tagoremch@gmail.com



(Affiliated to the Tamil Nadu Dr.MGR Medical University & Recognized by the Ministry of Health & Family welfare. Govt. of India New Delhi)

PROGRAM REPORT

| | | | |
|---------------------------------------|---|--------------------------------------|--|
| Name/Title of the program | Virology Lab Training program | | |
| Date and Time | 3/1/2020 to 8/12/2022 | | 2 hours |
| Venue | Virology Lab – Hospital Block | | |
| Target audience/Stakeholder | Faculty of Microbiology and virology lab staff | | |
| Number of Participants | 1 to 13 per program | | |
| Program/Event Organized by | IQAC and Dept. of Microbiology | | |
| Resource Persons Name and Topic Taken | Name | Designation | Topic Taken |
| | Dr. P.R. Thenmozhiyal, M.D Dr.E.Premalatha, M.D Dr.Sony Paul, M.Sc., Ph.D | Faculties of Microbiology Department | 1. Standard Precautions 2. First Aid Measures and Safety Precautions 3. Hand Hygiene 4. Biomedical Waste Management |



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| | | | |
|--|---|--|--|
| | Dr.I.Kannan., M.Sc.,Ph.D Dr. P. Savetha, MD Dr. C.Malini Evangeline Rose, MD Dr. C.H.Naga Prashanthi, MD | | <ol style="list-style-type: none">5. Spill Management and Needle Stick Injury6. Maintenance and Cleaning of Lab Equipment's7. Patient Communication8. Informed Consent9. Sample Collection Procedure (H1N1 and HCV)10. Storage and Transport of Sample11. Documentation of Lab Report and Interim Reports12. Report Dispatch and Issue to the Patients13. Inter-lab Comparison of Results for Review14. QMS Internal Audit15. Role and Responsibility of Technical Staff16. QC and its Significance IQA - How to Perform and Evaluate |
|--|---|--|--|



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| | | | |
|---------------------------------|--|--|---|
| | | | <ul style="list-style-type: none">17. Introduction to PCR18. Lab Process and Procedure COVID-19 SOP19. Donning and Doffing20. Equipment Training (Bio-Rad) |
| Objective of the Program | <ul style="list-style-type: none">1. To ensure a safe, efficient, and standardized laboratory practice while maintaining patient confidentiality and delivering accurate and reliable results.2. To equip new joiners with the necessary knowledge and skills to meet NABL standards, follow best practices, and provide quality healthcare services through proper sample collection, handling, and adherence to quality management systems. | | |

Detailed report of the program

Based on the job responsibilities of the new joiners, they will be undergoing the following training programs:

1. Standard Precautions: This training program focuses on understanding and implementing standard precautions in the laboratory to prevent the spread of infections and ensure the safety of staff and patients.
2. First Aid Measures and Safety Precautions: Participants are trained in providing immediate medical assistance and understanding safety protocols to handle emergency situations effectively.
3. Hand Hygiene: This program emphasizes the importance of proper hand hygiene practices in the laboratory to prevent the transmission of pathogens and maintain a clean environment.



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4. **Biomedical Waste Management:** Participants learn about the appropriate segregation, handling, and disposal of biomedical waste to minimize the environmental impact and promote safety.
5. **Spill Management and Needle Stick Injury:** This training program covers the proper procedures for managing spills and preventing needle stick injuries, including prompt response, containment, and reporting.
6. **Maintenance and Cleaning of Lab Equipment:** Participants gain knowledge about the regular maintenance, calibration, and cleaning of laboratory equipment to ensure accurate and reliable results.
7. **Patient Communication:** This program focuses on developing effective communication skills with patients, including active listening, empathy, and providing clear instructions for sample collection and testing.
8. **Informed Consent:** Participants learn about the importance of informed consent and how to obtain it from patients before conducting any laboratory tests or procedures.
9. **Sample Collection Procedure (H1N1 and HCV):** This training program covers the specific protocols and techniques for collecting samples related to H1N1 and HCV infections, ensuring proper handling and preservation.
10. **Storage and Transport of Samples:** Participants understand the requirements for appropriate storage and transportation of samples to maintain their integrity and prevent contamination or degradation.
11. **Documentation of Lab Reports and Interim Reports:** This program focuses on accurate and comprehensive documentation of laboratory reports, including interim reports for timely communication of preliminary findings.
12. **Report Dispatch and Issuing to Patients:** Participants learn the proper procedures for dispatching final reports to patients, ensuring confidentiality and accuracy in reporting.
13. **Inter-lab Comparison of Results for Review:** This training program emphasizes the importance of participating in inter-laboratory proficiency testing programs to assess and improve the accuracy and reliability of results.
14. **QMS Internal Audit:** Participants are trained on conducting internal audits of the Quality Management System (QMS) to identify areas for improvement and ensure compliance with NABL standards.
15. **Role and Responsibility of Technical Staff:** This program clarifies the roles and responsibilities of technical staff members, emphasizing their contribution to maintaining quality and safety in the laboratory.



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16. QC and its Significance, Internal Quality Assurance (IQA): Participants learn about Quality Control (QC) measures and the significance of implementing IQA protocols to monitor and maintain the accuracy and precision of laboratory tests.
17. Introduction to PCR: This training provides an overview of Polymerase Chain Reaction (PCR) technology and its applications in molecular diagnostics.
18. Lab Process and Procedure COVID-19 SOP: Participants are trained on the specific laboratory processes and procedures outlined in the Standard Operating Procedures (SOP) for COVID-19 testing.
19. Donning and Doffing: This program focuses on the correct techniques for wearing and removing personal protective equipment (PPE) to minimize the risk of contamination.
20. Equipment Training (Bio-Rad): Participants receive training on specific equipment provided by Bio-Rad, covering its operation, maintenance, and troubleshooting.

These training programs are crucial to ensure that new employees understand and adhere to the necessary safety protocols, standard operating procedures, quality management practices, and effective communication with patients. They will also learn specific techniques and procedures related to sample collection, handling, storage, and transportation, as well as documentation and reporting requirements.

These training programs are provided based on the individual job responsibilities of the new joiners to ensure they receive the relevant knowledge and skills required for their roles. Additionally, periodic refresher training and continuous professional development should be considered to keep the employees updated with the latest advancements and standards in their field.

Organizing Secretary

Head of the Institution



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Virology Lab Training Program Schedule

| S.NO | Dates | Topic |
|------|------------|---|
| 1 | 3/1/2020 | Standard precautions |
| 2 | 10/1/2020 | First aid measures and safety precautions |
| 3 | 24/1/2020 | Hand hygiene |
| 4 | 7/2/2020 | Biomedical waste management |
| 5 | 14/2/2020 | Spill management and needle stick injury |
| 6 | 28/2/2020 | Maintenance and cleaning of lab equipment's |
| 7 | 4/3/2020 | Patient communication |
| 8 | 12/3/2020 | Informed consent |
| 9 | 17/3/2020 | Patients' instruction for patient collecting samples |
| 10 | 2/4/2020 | Sample collection procedure (H1N1 and HCV) |
| 11 | 27/4/2020 | Storage and transport of sample |
| 12 | 5/5/2020 | Documentation of lab report and interim reports |
| 13 | 24/5/2020 | Report dispatch and issue to the patients |
| 14 | 4/6/2020 | Inter lab comparison of results to review |
| 15 | 20/06/2020 | QMS internal audit Role and Responsibility of technical staff |
| 16 | 3/7/2020 | QC and its significance IQA How to perform and evaluate |



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| | | |
|----|--------------------------|--|
| 17 | 22/7/2020 | Importance of patient confidentiality and incident management |
| 18 | 30/7/2020 | Introduction to PCR |
| 19 | 31/7/2020 | Lab process and procedure Covid 19 SOP |
| 20 | 4/8/2020 | Donning and Doffing |
| 21 | 7/8/2020 | Equipment training Biorad |
| 22 | 27/8/2020 | Oropharyngeal and nasopharyngeal swab collection |
| 23 | 2/9/2020 | Oropharyngeal and nasopharyngeal swab collection |
| 24 | 5/10/2020 to 16/10/2020 | Viral rna extraction |
| 25 | 26/10/2020 | Oropharyngeal and nasopharyngeal swab std precautions |
| 26 | 4/12/2020 to 8/12/2020 | Viral rna extraction |
| 27 | 15/12/2020 | Oropharyngeal and nasopharyngeal swab |
| 28 | 21/12/2020 to 28/12/2020 | Viral rna extraction |
| 29 | 4/1/2021 to 16/1/2021 | Viral rna extraction |
| 30 | 25/1/2021 to 30/1/2021 | Viral rna extraction |
| 31 | 10/3/2021 to 13/3/2021 | Hand washing, BMW, Donning and Doffing, Oropharyngeal and nasopharyngeal swab collection |
| 32 | 16/3/2021 to 23/3/2021 | Viral rna extraction |
| 33 | 5/4/2021 to 7/4/2021 | Oropharyngeal and nasopharyngeal swab collection |
| 34 | 3/5/2021 to 7/5/2021 | Viral rna extraction, Donning and Doffing, BMW |
| 35 | 10/5/2021 to 12/5/2021 | Oropharyngeal and nasopharyngeal swab collection |



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| | | |
|----|--------------------------|--|
| 36 | 3/6/2021 to 5/6/2021 | Hand washing, BMW, Spill management and needle stick injury |
| 37 | 16/6/2021 | Maintenance and cleaning of lab equipment's |
| 38 | 29/6/2021 | Storage and transport of sample |
| 39 | 7/7/2021 | Patient communication, documentation of lab report and report dispatch |
| 40 | 28/7/2021 to 30/7/2021 | QMS internal audit Role and Responsibility of technical staff |
| 41 | 5/8/2021 | PCR training |
| 42 | 18/8/2021 | Importance of patient confidentiality, incident management |
| 43 | 8/9/2021 | QC and its significance IQA How to perform and evaluate |
| 44 | 3/11/2021 | Oropharyngeal and nasopharyngeal swab collection |
| 45 | 2/11/2021 to 12/11/2021 | PCR training |
| 46 | 22/11/2021 to 26/11/2021 | PCR training |
| 47 | 10/12/2021 | Nasopharyngeal and oropharyngeal swab collection |
| 48 | 10/12/2021 | Hand washing, BMW, Donning and Doffing, |
| 49 | 13/12/2021 to 18/12/2021 | PCR training |
| 50 | 10/1/2022 | Nasopharyngeal and oropharyngeal swab collection |
| 51 | 11/1/2022 | Standard precautions, donning, doffing |
| 52 | 11/1/2022 to 18/1/2022 | Viral extraction |
| 53 | 16/2/2022 | Standard precautions |
| 54 | 19/2/2022 | Maintenance and cleaning of lab equipment's |
| 55 | 4/5/2022 | Nasopharyngeal and oropharyngeal swab collection |



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|----|-----------------------|---|
| 56 | 5/5/2022 | Standard precautions, donning, doffing |
| 57 | 1/6/2022 to 10/6/2022 | Viral rna extraction |
| 58 | 24/6/2022 | Nasopharyngeal and oropharyngeal swab collection |
| 59 | 25/6/2022 | Standard precautions, donning, doffing |
| 60 | 6/7/2022 | Storage and transport of sample |
| 61 | 7/7/2022 to 9/7/2022 | PCR training |
| 62 | 26/7/2022 | Documentation of lab tests and results and interim reports. Report dispatch and issue to the patients |
| 63 | 5/8/2022 | QMS internal audit Role and Responsibility of technical staff, ILC and QC |
| 64 | 12/8/2022 | Fire safety training |
| 65 | 22/8/2022 | QMS training technical requirement 5.1 – 5.3 13015189- 2012 |
| 66 | 6/9/2022 | QMS training Technical requirement 5.4 |
| 67 | 21/9/2022 | QMS training Technical requirement 5.5 |
| 68 | 11/10/2022 | QMS training Technical requirement 5.6-5.7 |
| 69 | 27/10/2022 | QMS training Technical requirement 5.8-5.10 |
| 70 | 8/11/2022 | QMS training Technical requirement 4.1 -4.4 |
| 71 | 23/11/2022 | QMS training Technical requirement 4.5-4.10 |
| 72 | 8/12/2022 | QMS training Technical requirement 4.11-4.15 |



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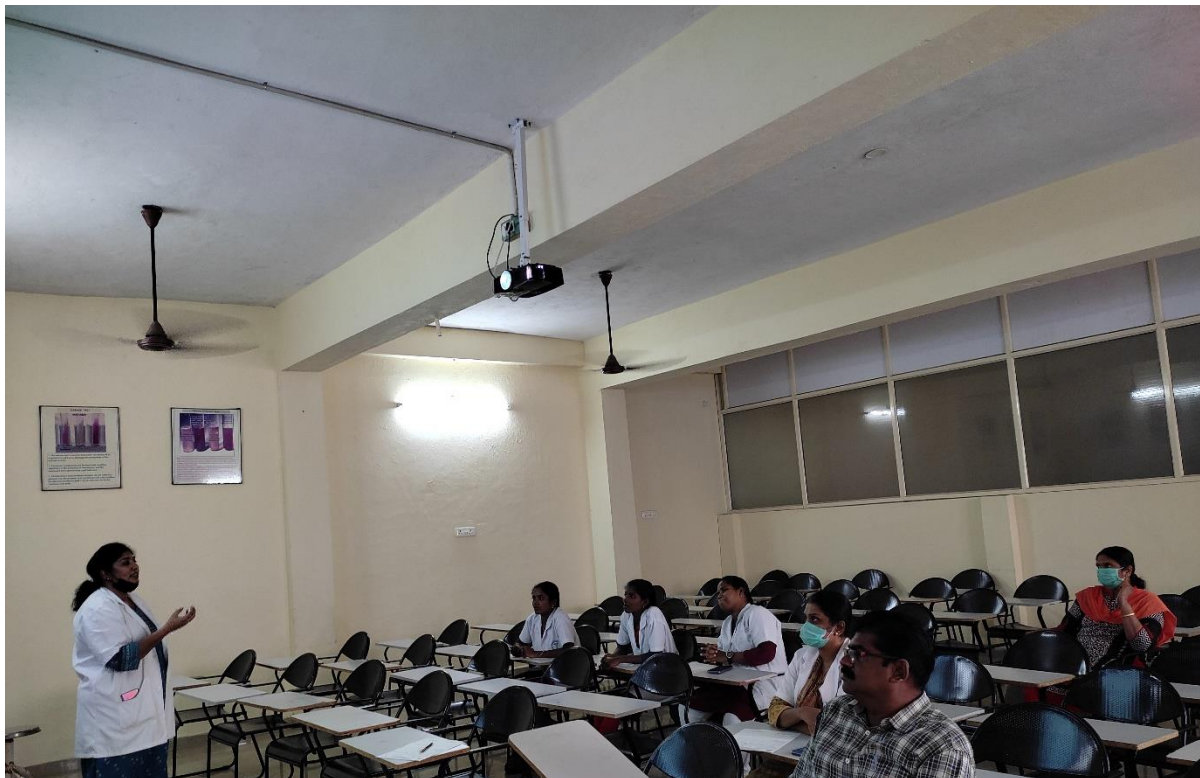
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Photos





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PROGRAMME REPORT

| | | | |
|---------------------------------------|---|---------------------------------|---|
| Name/Title of the program | NAAC Sensitization Program | | |
| Date and Time | 10 th November 2021 | | 1.00 PM To 3.00PM |
| Venue | 4 th Floor Auditorium – Hospital Block | | |
| Target audience/Stakeholder | Faculty | | |
| Number of Participants | 37 | | |
| Program/Event Organized by | IQAC & Medical Education Unit | | |
| Resource Persons Name and Topic Taken | Name | Designation | Topic Taken |
| | Dr.K.Sathy anarayanan | Director, ISDE Academy Ambattur | <ul style="list-style-type: none">• NAAC Sensitization Program• Discussion with criteria members |
| Objective of the Program | <ul style="list-style-type: none">• To familiarize with NAAC accreditation process, criteria, and guidelines• To help institutions comprehend the different criteria used by NAAC for assessment | | |


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Detailed report of the program

Faculty Development Program Organized by Medical Education Unit on the topic of “NAAC Sensitization Program” on 10th November 2021 from 12.30 PM to 3.00 PM at 4th Floor Auditorium – Hospital Block. The event was inaugurated by respected Dean Dr.Kumadha Lingaraj. M.D., and felicitated by Medical Superintendent. Dr. Karunanidhi. MS.

The speaker discussed various aspects such as the role of NAAC, the accreditation process, criteria and parameters for assessment, documentation requirements, self-assessment and quality improvement strategies, benchmarking, and best practices in higher education. Participants are given opportunities to ask questions, seek clarification, and engage in discussions with the experts. This interactive format allows for a deeper understanding of the accreditation process and its implementation. Participants gain insights into the accreditation process, understand the importance of self-assessment, and learn how to align their practices with quality indicators.

About 37 doctors participated in this event.

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| Organizing Secretary | Head of the Institution |



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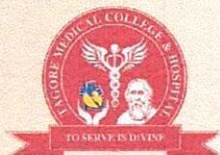
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Faculty Development Program NAAC Sensitization Programme



Dr.K. Sathyanarayanan

Director, ISDE Academy, Ambattur

- > NAAC Sensitization Program
- > Discussion with criteria members



Organized by

IOAC &

MEDICAL EDUCATION UNIT

Cordially welcomes all the

Faculty

On Wednesday, Nov 10th 2021
from 12.30 PM - 3.00 PM
VENUE: 4 th Floor Auditorium,
Hospital Block

DR. KUMUDHA LINGARAJ MD

Dean, TMCH

Will Preside

DR. KARUNANIDHI MS

Medical Superintendent

Will Felicitate

Patron:

Prof. Dr. M. MALA M.Phil., PhD.

Managing Trustee - Chairperson, Tagore Educational Trust, Chennai

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NAAC Sensitization Program PROGRAMME SCHEDULE

DATE : 10/11/2021

Venue :4th Floor Auditorium - Hospital Block

| Time | Events | Speakers |
|---------------------|-------------------------------------|--|
| 12.30 PM –12.40 PM | Welcome Address | Dr. Manikandan, Professor, Dept of physiology |
| 12.40 PM – 12.50 PM | Presidential Address | Dr.Kumudha Lingaraj M.D., Dean |
| 12.50PM – 1.00 PM | Felicitation | Dr. Karunanidhi M.S Medical Superintendent |
| Scientific Session | | |
| 1.00PM – 2.00 PM | NAAC Sensitization Program | Dr.K.Sathyanarayanan |
| 2.00PM – 3.00 PM | Discussion with criteria members | Director, ISDE Academy Ambattur |

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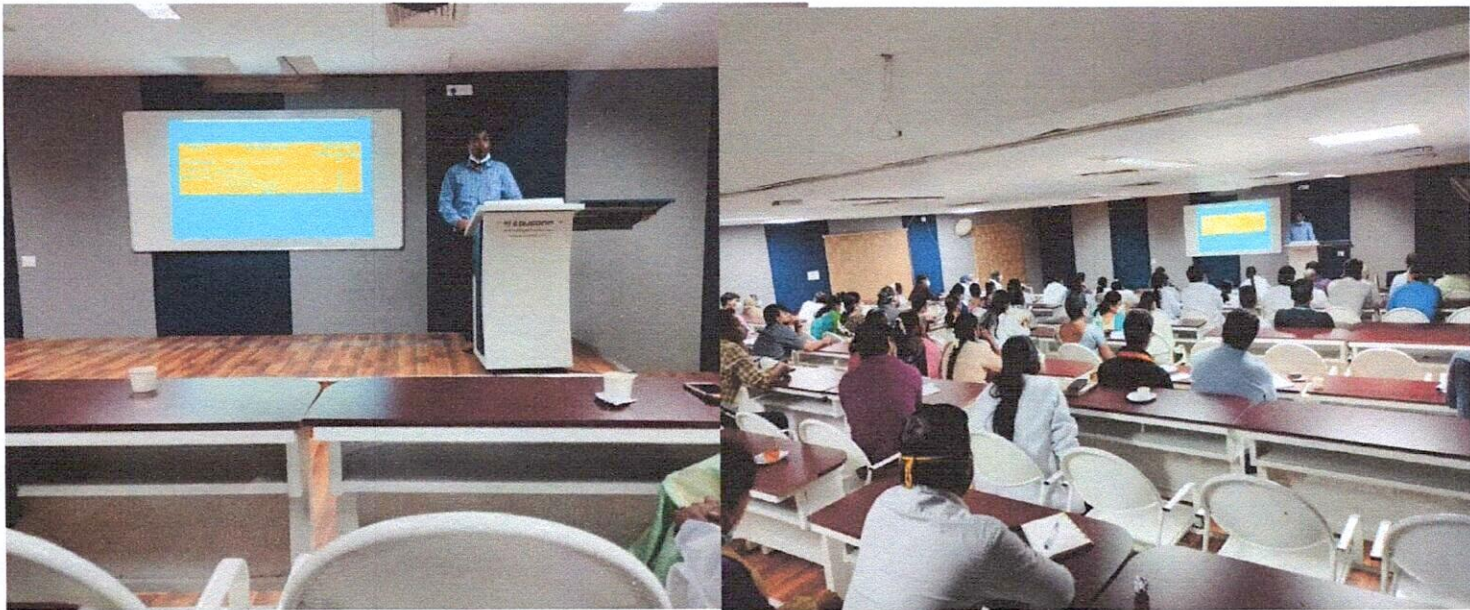
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PHOTOS



[Signature]

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CERTIFICATE



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This is to certify that Mr/Mrs/Ms/Dr. **D.H. GOPALAN**
has attended the Faculty Development Programme on
"NAAC SENSITIZATION PROGRAMME" held on 10th November, 2021
conducted by IQAC in collaboration with Medical Education Unit,
Tagore Medical College and Hospital as a Delegate.


Dr. Karunanidhi
Medical Superintendent


Dr. Kumudha Lingaraj
Dean



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PROGRAMME REPORT:

| | | | |
|---------------------------------------|--|-----------------|---|
| Name/Title of the program | NABH SENSITIZATION PROGRAMME | | |
| Date and Time | June 22 nd 2022 | | 1.00 PM To 3.00PM |
| Venue | MEU Room | | |
| Target audience/Stakeholder | Faculty | | |
| Number of Participants | 19 | | |
| Program/Event Organized by | Medical Education Unit | | |
| Resource Persons Name and Topic Taken | Name | Designation | Topic Taken |
| | Mr. John Samuel | PSQC Consultant | <ul style="list-style-type: none">NABH Sensitization ProgrammeDiscussion (Q & A session) |
| Objective of the Program | <ul style="list-style-type: none">To help participants familiarize with NABH accreditation standards | | |

Summe
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Detailed report of the program

Faculty Development Program Organized by Medical Education Unit On The Topic Of "NABH Sensitization Program" On 22 June 2022 From 1.00PM To 3.00 PM at MEU room. The event was inaugurated by respected Dean Dr.Kumadha Lingaraj. M.D., and felicitated by Medical Superintendent. Dr. Karunanidhi. MS.

This NABH Sensitization Program provided an orientation to the NABH accreditation process and its requirements and sensitized participants to the importance of patient safety, quality of care, and adherence to best practices in healthcare. It has created an awareness and understanding among the participants about the accreditation process, criteria, and quality standards.

Organizing Secretary

Head of the Institution

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RATHINAMANGALAM

INVITATION

MEDICAL EDUCATION UNIT

Cordially welcomes all the faculty

Faculty Development Program

“NABH SENSITIZATION PROGRAMME”

| | |
|------------------------------|-----------------|
| NABH Sensitization Programme | Mr. John Samuel |
| Discussion (Q & A session) | PSQC Consultant |

On Wednesday, June 22nd 2022 from 01.00 PM – 03.00PM at

4thFloor Auditorium - Hospital Block

Dr. KUMUDHA LINGARAJ, MD.

Dean, TMCH.

Will Preside

Dr. KARUNANIDHI. M.S.,

Medical Superintendent

Will felicitate

PATRON

Prof. Dr. M. Mala, Ph.D.

Managing Trustee - Chairperson, Tagore Education Trust, Chennai

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PROGRAM SCHEDULE

DATE :22/6/2022

Venue: MEU Room

| Time | Events | Speakers |
|--------------------|------------------------------|---|
| 1.00 PM –1.10 PM | Welcome Address | Dr. FAROOK, NABH COORDINATOR |
| 1.10 PM – 1.20 PM | Presidential Address | Dr.Kumudha Lingaraj M.D., Dean |
| 1.20PM – 1.30 PM | Felicitation | Dr. R.Karunanithi M.S Medical Superintendent |
| Scientific Session | | |
| 1.30PM – 2.30 PM | NABH Sensitization Programme | Mr. John Samuel PSQC Consultant |
| 2.30 PM – 3.00 PM | Discussion (Q & A session) | |

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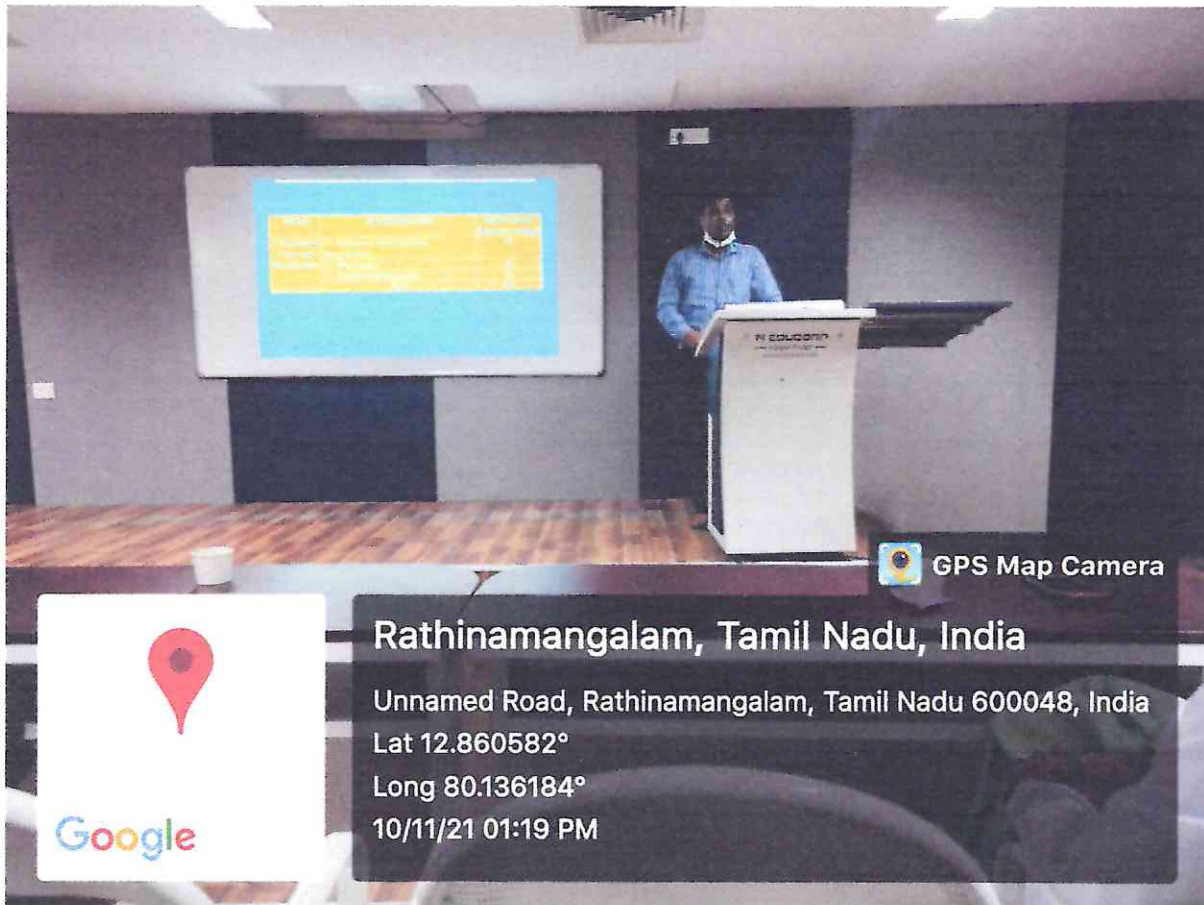
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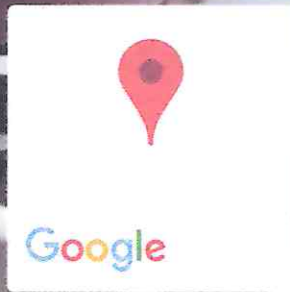
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Lat 12.860582°

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