INTEGRATED MANAGEMENT SYSTEM MANUAL

V.O.CHIDAMBARANAR PORT TRUST



PROCESS	MEDICAL DEPARTMENT
SECTION	MANUAL FOR CASUALTY SERVICES

ISSUE NO	: 00
DATE	: 05.07.17
APPROVED BY (WITH SIGN)	Sd/- (05.07.2017) Dy.Chief Medical officer

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LIST OF RECIPIENTS

SI.NO	NAME OF THE RECIPIENTS	CONTROLLED COPY NO
1	Nurse (Casualty Service)	1

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REVISION SHEET

1. ISSUE STATUS:

SI.NO	ISSUE NO	DATE	REASON FOR REVISION
1	1	05.07.2017	Upgradation & Integration of QMS(9001:2015),EMS(14001:2015),OHSAS(18001:2007)

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SCOPE

The Casualty services attend to any emergency cases is like,

- Accidents
- Injuries,
- Heart Attacks.
- Snake Bite,
- Drowning,
- Electric shock etc.

The facilities that are available at the Casualty Services are as follows:

- ICCU Section
- General Section
- MOT
- Ambulance Service.

There are 2 Ambulances at Port Hospital with drivers round the clock duty. For any Emergency Cases, when Ambulance is called for, Service is provided immediately to pick up cases from the point of Call to Casualty.

Ambulance Services are also utilised by in-patients for transporting to Referral Hospitals and other Centres.

IMS POLICY OF THE PORT

We are committed to provide seaport facilities and related support services for seaborne transport facilities by –

- Ensuring quality service to EXIM Trade, by adhering all legal requirements.
- Protecting the environment including prevention of pollution.
- Ensuring safety by preventing injury and ill health.
- Continually improving the overall effectiveness of IMS through

Employee motivation and empowerment with social responsibility towards the progress of the Nation.

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IMS OBJECTIVE OF THE DEPARTMENT

QMS

Core Objective of this department is to provide comprehensive medical care to the full satisfaction of the Port employees and their family members, the retired employees and their spouses, the CISF and others registered with this department.

EMS

To ensure reduction of paper and to conserve energy

OHSAS

To ensure prevention of ill health and injury.

IMS OBJECTIVE OF THE SECTION

QMS

To provide immediate and prompt service.

EMS

To ensure reduction of paper and to conserve energy.

OHSAS

To ensure prevention of ill health and injury.

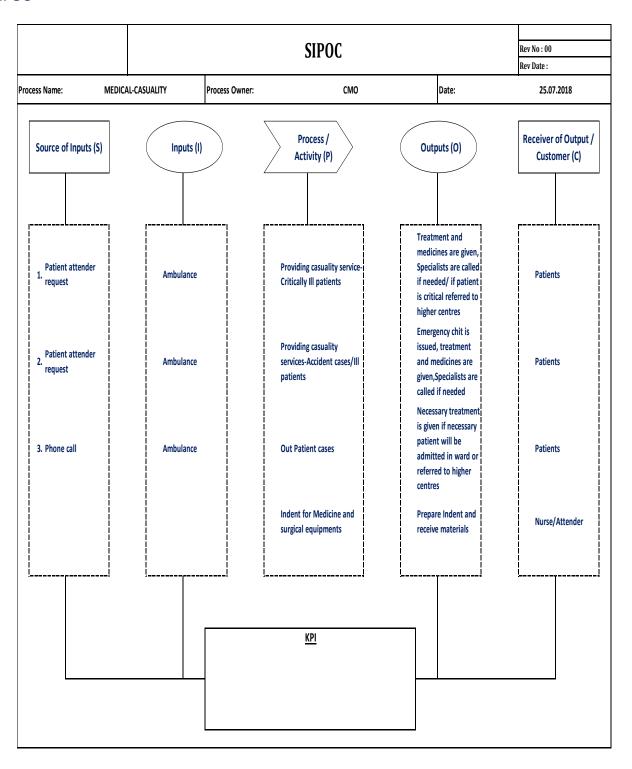
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ABBREVIATIONS		
VOCPT	V.O.Chidambaranar Port Trust	
CISF	Central Industrial Security Force	
СМО	Chief Medical Officer	
ICCU	Intensive Casualty Care Unit	
Sr.Dy.	Senior Deputy Chief Medical Officer	
Dy. CMO	Deputy Chief Medical Officer	
SMO	Senior Medical Officer	
МО	Medical Officer	
CAS	Casualty Service	
DDA	Dangerous Drug Administration	
MOT / OT	Minor Operation Theatre	

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SIPOC



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Interested Parties		
4.2 Understanding the requirements of the Interested parties		
Interested Parties	Requirements	
Patients	Treatment, Ambulance service	
Nurse	Prepare indent and receive surgical instruments	
	and medicines	

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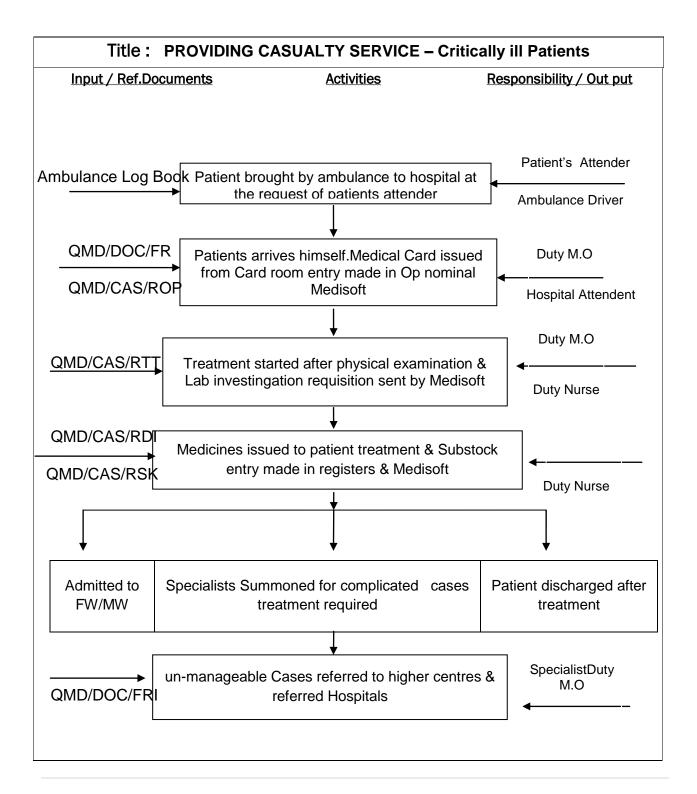
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Casuality Section

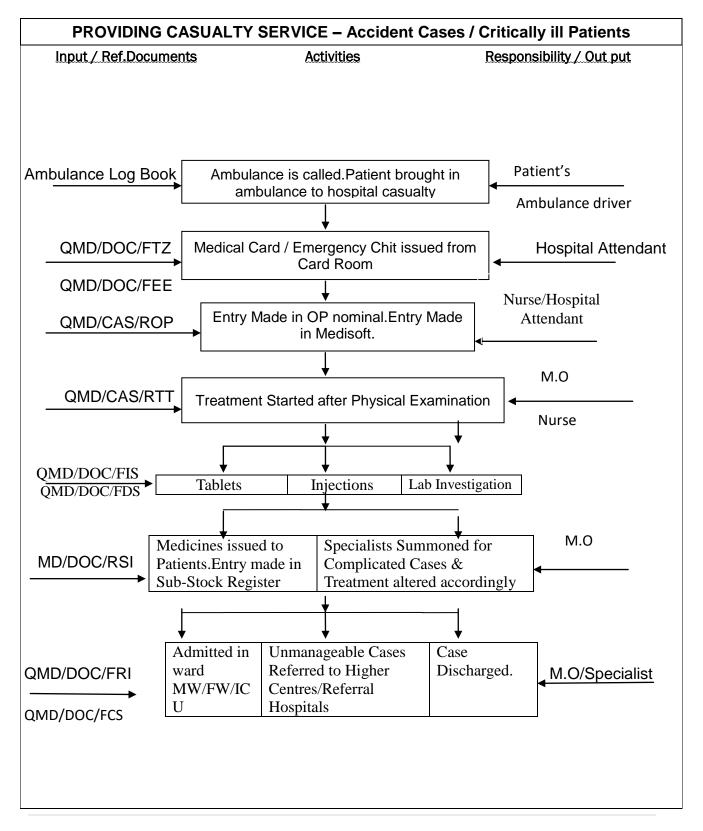
BENCH MARK

Emergency Cases shall be given immediate medical care. The bench mark shall be calculated and reviewed every month.

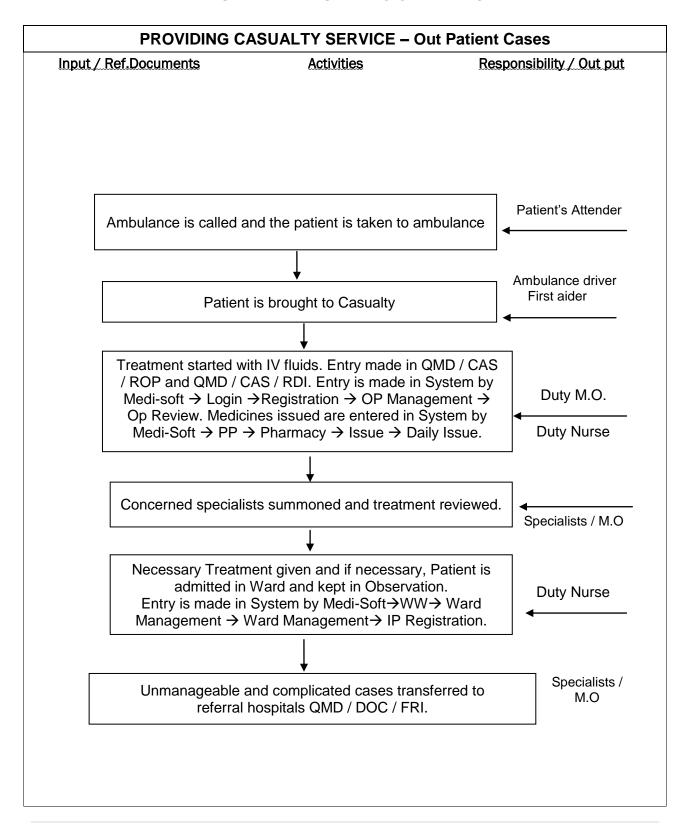
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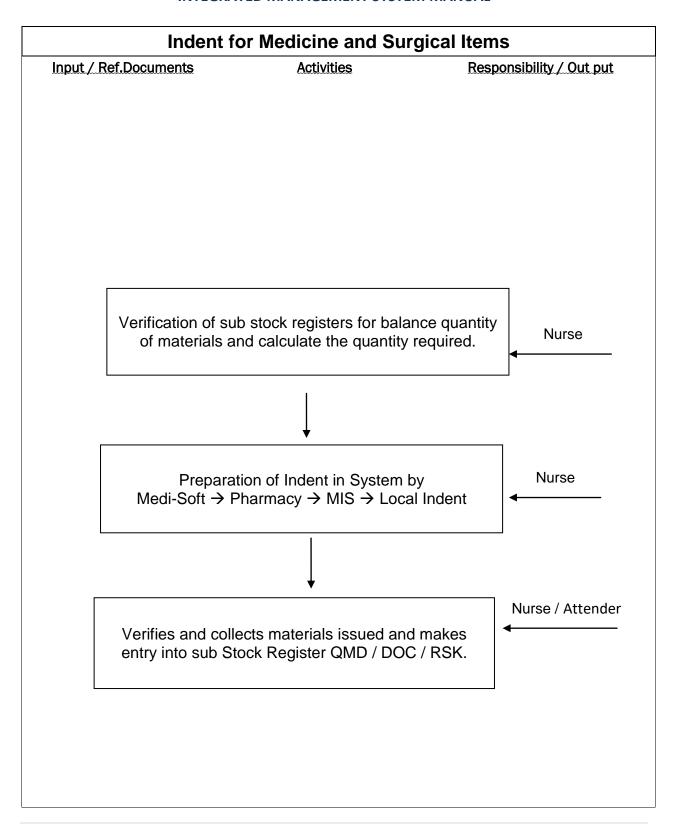
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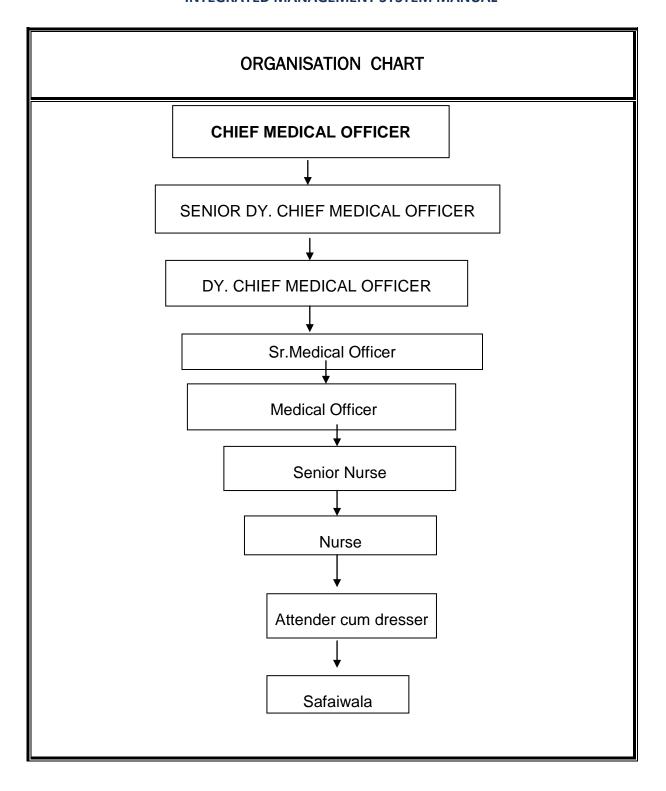
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RISK ASSESSMENT AND RISK TREATMENT

RISK	CONTROL METHOD/PROCESS	
Ambulance Shortage	 Ambulance should be increased 	
Communication through phone	Communication facilities should be improved and updated	

KEY PERFORMANCE INDICATOR:

To provide immediate and prompt service.

ACTION TO ADDRESS RISK AND OPPORTUNITIES

We determined the risks and opportunities related to its environmental aspects (see 10.2), compliance obligations (see 10.4) and other issues and requirements,

compliance obligations (see 10.4) and other issues and requirements,			
SI NO	ASPECT	IMPACT	CONTROL METHOD
1	Waste Sharps,	Land	SEA/10CP/3
	Needle, Syringes,	pollution	
	Scalpels, Blades, Glass.	health hazard	
2	Soiled waste items	Land	SEA/2OCP1
	contaminated with blood	pollution	
	and body fluids including	health hazard	
3	cotton dressings Disposal of collected	Water	SEA/4OCP/1
3	vomits, urine, stool, blood	pollution	3EA/400F/1
	samples, body fluids	health hazard	
4	Generation of Dressing	Land	SEA/1&20CP3
	material soaked with	pollution	
	blood & body fluids,	health hazard	
	suture needles		
	scalpels, blades,		
	leftover suture material,		
	removed POP castings		
	J		

Reference Standard Requirement

ISO 14001:2015, Clause: 6.1.1

Hazard Identification, Risk Assessment and Controls

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SI NO	HAZARD	RISK	CONTROL METHOD
1	Generation of disposable syringes, needles plastic tubes	Accidental needle prick	SOP/6
2	Contaminated cotton with blood and pus	Spread Infection	SOP/6
3	Dry waste like syringes, packing covers, papers, non-contaminated cotton swab(dry and soaked)	No Health hazard	SOP/6

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MASTER LIST OF DOCUMENTS

1. REGISTERS

S.No.	REGISTERS	CODE	RETENTION PERIOD
1)	Sub Stock Register	QMD/CAS/RSK	10 Years
2)	Daily Issue Register	QMD / CAS / RDI	3 Years
3)	O.P. Nominal Register	QMD / CAS / ROP	3 Years
4)	Treatment Register	QMD/CAS/RTT	3 Years
5)	Minor OT Register	QMD / CAS / ROT	3 Years
6)	Complaint Register	QMR / DOC / RCR	3 Years

2. FORMATS

S.No.	FORMATS	CODE
1	Manuals of Pulse Oxymeter Defibrillator	QMD / CAS / FME

3. DOCUMENTS OF EXTERNAL ORIGIN

S.No.	DOCUMENTS	CODE	RETENTION PERIOD
1)	In patient Case Sheet	QMD / DOC / FCS	3 years
2)	Form for Referral to higher centres	QMD / DOC / FRI	3 years

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LIST OF MEDICAL EQUIPMENT			
SI.No.	Name of the equipment	Location	Identity Code
1	Cardiac defibrillator	CAS / ICCU 1	MDE-01
2	Multipara Monitor - I	CAS / ICCU 1	MDE-02
	Multipara Monitor – II	CAS / ICCU 2	MDE-03
	Multipara Monitor - III	CAS	MDE - 04
3	B.P. Apparatus	CAS	MDE-13

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