

ACCIDENT REPORTING

1. Date and time of accident : 10/04/23 at 4.25 Pm
2. Type of Accident : Needle stick Injury
3. Sequence of events leading to accident : During medication administration
4. Has the Authority of been informed immediately: Yes
5. The type of waste involved in accident : Sharp Needle (Inj Insulin)
6. Assessment of the effects of the accidents on human health and the environment : Risk of spreading blood born Infection
7. Emergency measures taken : Inj TT 0.5mg given serology done.
8. Steps taken to alleviate the effects of accidents : Spot teaching given
9. Steps taken to prevent the recurrence of such an accident : Awareness and training given about Needle stick Injury
10. Does your facility has Emergency Control policy? If yes, give details : NA

Date : 16.05.23

Place : AMRI HOSPITALS HUNWADAPUR

Signature : Monika Dey

Designation : IC Nurse

FORM - I
[See rule 4(o), 5(i) and 15(2)]

ACCIDENT REPORTING

1. Date and time of accident : 24/03/23 at 5PM
2. Type of Accident : Needle Stick Injury
3. Sequence of events leading to accident : During suturing of the patient
4. Has the Authority of been informed immediately: Yes
5. The type of waste involved in accident : Risk of spreading blood born
Sharp Needle. infection
6. Assessment of the effects of the accidents on human health and the environment : Risk of spreading blood born
infection
7. Emergency measures taken : Inj TT 0.5mg given
Serology done
8. Steps taken to alleviate the effects of accidents : spot teaching given
9. Steps taken to prevent the recurrence of such an accident : Awareness and training given
about Needle stick.
Injury
10. Does your facility has Emergency Control policy?
If yes, give details : NA

Date : 18/04/23

Place : AMRI HOSPITALS MULUNDAPUR

Signature : Monika Dey

Designation : IC Nurse

