

SAIDEEP HOSPITAL	Doc No.	SHRPL/CTR/OT/01
Committee's TOR	Rev No.	01
	Rev Date	01/01/2024



OT Committee Terms of Reference

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Recommended By	Signature	Approved By	Signature
Dr.Hrishikesh kalgaonkar	1111	Dr.S.S.Deepak	Cost
Chief Medical Administrator	7	Chairman & Managing Director	



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1	SHRPL/CTR/O T/1	Committee TOR	1	1	01-Jan- 23	NA	1	02-Jan- 24	NA	NO
Original Date		Effective Date Next date			ate of	e of revision Issue NO				
	01-03-2019	9	02-01-2024		01-01-2025		1			
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N	1rs.Shraddha sury	yavanshi		Dr.H.	Kalgaonka	ar		Dr.	S.S.Deep	ak
Quality Co-ordinator			Ch	C <mark>hief M</mark> edical Admini <mark>start</mark> or			С	Chairman & Managing Director		
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THE THEOREM ENDER DECIDED FOR THE



SAIDEEP HOSPITAL	Doc No.	SHRPL/CTR/OT/01
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OT Committee

1. Objective:

- > Ensure Maximum standard of safety
- > Optimum utilization of OT and staff time
- > Optimize working condition
- ➤ Provide a smoothing environment

2. Scope:

Applicable to all departments of the hospital.

3. Constitution of Committee

The convener shall have the authority to invite any non-member to attend the meeting if it is deemed fit in relation to any matter being/ or to be deliberated by the committee.

4. Quorum:

Chief Managing Director	Chairman	Dr. S. S. Deepak	
Chief Administrator	Member	Dr. H. Kalgaonkar	
Quality Co-ordinator	Member	Ms. Shraddha Suryavanshi	
Medical Superintendent	Member	Dr. Sunil Darandale	
TOTAL TOTAL		Dr.Vikas Labade	
General Manager	Member	Mr. Vilas Kalbhor	
MRD In-charge	Member	Dr.Monali Gore	
Nursing Superintendent	Member	Mr. Santosh Sangale	
		Ms.Supriya Kamble	
Cardiologist	Member	Dr. Kiran Deepak	
PSO	Member	Ms.Shivani Kamble	
OT HOD	Convener	Dr.Sangita Kulkarni	
Orthopaedic 📑 📙	Member	Dr.V.N.Deshpane	
Gynaecologists	Member	Dr.Vaishali Kiran	
		Dr.Kasturi Kurhade	
Neurosurgeon	Member	Dr.Bhushan Kharche	
Neurologist	Member	Dr.Rahul Dhoot	
ICO	Member	Dr.Narendra Patil	
OT In charge	Member	Mr.John Waghmare	
		Mr.Vipul Magar	
BME In charge	Member	Ms.Sharda Nimbalkar	
CVTS HOD	Member	Dr.Deepak Munot	
CVTS OT Staff	Member	Mr.Kiran Mahagade	
	Chief Administrator Quality Co-ordinator Medical Superintendent General Manager MRD In-charge Nursing Superintendent Cardiologist PSO OT HOD Orthopaedic Gynaecologists Neurosurgeon Neurologist ICO OT In charge BME In charge CVTS HOD	Chief Administrator Quality Co-ordinator Member Medical Superintendent Member Cardiologist Member PSO Member OT HOD Convener Orthopaedic Member Gynaecologists Member Neurosurgeon Neurosurgeon Neurologist Member ICO Member OT In charge Member Member	

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Chief Medical Administrator	7	Chairman & Managing Director	

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SAIDEEP HEALTHCARE & RESEARCH PVT. LTD.	Committee's TOR	Rev No. Rev Date	01 01/01/2024

The minimum quorum for passing any resolution in the committee should be more than **50%** of the members present with chairperson mandatory.

5. Frequency of meeting:

Members of the committee meets **once in three month** and as and when required.

6. Roles & Responsibilities:

OT committee should be responsible for:

- Recommends and approves policy and procedures that are specific to the pre operative area OT And post Operative
- Governs allocations of resources between department and where appropriate surgeons
- Addresses efficiency and costs associated with OT operations.
- Provides institutional oversight and direction for staff and faculty education related to operative and invasive procedures and care of the surgical patients.
- Ensure an effective process for patients and family education related to surgical care and informed consent.
- Monitors adherence to policies and procedures.

7. Common minimum agenda:

- Review previous meeting agenda
- Discussion on Quality Indicators related to MRD.
- Any other related issues

8. Terms of office for appointment:

The committee will be appointed for the period of one year. The management of the hospital will have the right to reappoint all or any of the said members and appoint new members to fill any vacancy. Minutes of the meeting would be recorded by the convener and circulated to all representatives including Director & Quality Dept.

- 9. Records to be maintained and period of retention
 - Minutes of the meeting and the related document
 - Analysis of RCA, CAPA
 - The record shall be maintained for minimum three years

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Chief Medical Administrator	My .	Chairman & Managing Director	