



AARUPADAI VEEDU MEDICAL COLLEGE & HOSPITAL

Vinayaka Mission's Puducherry Campus

VINAYAKA MISSION'S RESEARCH FOUNDATION - Deemed to be University

(Recognized by : MCI, New Delhi; Ministry of Health & Family Welfare, Govt of India; NAAC & NABH Accredited)

📍 Pondy-Cuddalore Main Road, Kirumampakkam, Puducherry - 607 403, India

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Ref. No./DEAN/PDY/COMM-25/2025

Date:05.09.2025

LAB COMMITTEE

The Lab Committee has been reconstituted with the following Members.

Committee Designation	Name	Academic Designation
Chairperson	Dr. R. Mani	Dean
Vice Chairperson	Dr. K. Dhamodaran	Medical Superintendent
Convener	Dr. K. Kavitha	Prof. & HOD, Microbiology
Members	Dr. Gurudatta Sadashiv Pawar	Prof.&HOD,FMT NABH Co-Ordinator
	Dr. Prem kumar	DMS-1
	Dr. Ashwyn Anand Nelson	RMO
	Dr. Jawahar.R	Prof.& HOD, Pathology
	Dr. M. Manju	Prof.& HOD, Biochemistry
	Dr. Vithiavathi.S	Prof.& HOD, General medicine
	Dr. Sampath Kumar Poral	Prof.& HOD, General Surgery
	Dr. Deepa .S	Prof.& HOD, Obstetrics and Gynaecology
	Dr. Atul Mukul Bage	Prof.& HOD, ENT
	Dr. Sathyamoorthy M	Prof.& HOD, Paediatrics
	Dr. Mishra.P	Prof.& HOD, Ophthalmology
	Dr.V.Hari Babu	Prof& HOD, Emergency Medicine
	Mr. Balasubramanian	Manager- MEP
	Mr. Vivek	Manager- Operations
	Mrs. Justin Mary	Nursing Superintendent
Quality Members	Mrs. Renuga	Quality Executive


DEAN

Dr. R. MANI, M.D.,
DEAN

Aarupadai Veedu Medical College & Hospital,
Kirumampakkam, Puducherry-607 403.

📍 Corporate office: New No.213, Old No.160, Poonamallee High Road (Behind Doshi Towers),
Near by kilpauk metro railway station, Kilpauk, Chennai - 600 010, Tamil Nadu, India

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ROLES OF LAB COMMITTEE

- Evaluating and identifying potential hazards associated with research and teaching activities in the laboratory environment.
- Establishing and facilitating training procedures and criteria.
- Making recommendations on risk management issues related to Laboratory Safety.
- Establishing training procedures and criteria to ensure that only qualified individuals are permitted to use hazardous materials.
- Conduct periodic audit and reviews on the laboratory safety program and recommend changes in policy as needed.
- Review the reports concerning chemical incidents and recommend direction and corrective action concerning these incidents.
- To conduct facility rounds on laboratory safety aspects on monthly basis.
- To identify potential hazards in laboratory and carry out risk assessment and analysis.

LABORATORY SAFETY COMMITTEE**TERMS OF REFERENCE****1.Objectives**

Develop and provide information resources to aid in preventing, identifying, and controlling potential exposures to chemical, biological, ergonomic, ionizing non-ionizing radiation, and physical hazards in **laboratories**.

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: 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 **three months once** and as when required.


DEAN

Dr. R. MANI, M.D.,
DEAN

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