



भारत सरकार  
 विज्ञान और प्रौद्योगिकी मंत्रालय  
 विज्ञान और प्रौद्योगिकी विभाग  
**GOVERNMENT OF INDIA**  
**MINISTRY OF SCIENCE & TECHNOLOGY**  
 Department of Science & Technology

Study Conducted by:



**NATIONAL FOUNDATION OF  
 INDIAN ENGINEERS**

**Study To Assess Occupational Hazards For Woman In Indian  
 Plastic Products Manufacturing Industry/ Readymade Garments Industry/  
 Electronic Assembly Industry and Preparation of Manuals there to**

*Supported & Catalyzed by:*

**RASHTRIYA VIGYAN EVAM PRODYOGIKI SANCHAR PARISHAD (RVPS), Government of India**

**Please read the instructions before filling the questionnaire**

1. Please attach extra sheets wherever required.
2. No inter organization/ inter employee comparisons will be carried out and information will be kept secret and will not be disclosed to any one. Analysis will be carried on the overall basis sector/industry wise.
3. If any particular item is not applicable in your case, please leave it blank.

**QUESTIONNAIRE FOR HOSPITALS**

1.	Name of the Responding Doctor:			
2.	Designation of the Respondent:			
3.	Name of the Hospital:			
4.	Communication address of the Hospital			
	City		State	
	Pin Code		Phone	
	Mobile		Fax	
	E-mail		Website	
5.	What types of diseases are most common among the industrial female workers?			
	<input type="checkbox"/> Respiratory	<input type="checkbox"/> Gastro Intestinal	<input type="checkbox"/> Cardio Vascular	
	<input type="checkbox"/> Blood Infections	<input type="checkbox"/> Skin Infections	<input type="checkbox"/> Burns	
	<input type="checkbox"/> Eye Infection	<input type="checkbox"/> Any Other _____		
6.	Which of the following provisions are essentially required in an industrial organization for avoiding the occupational hazards? (Please ✓ tick mark)			
	<input type="checkbox"/> Availability of Functional First Aid Box	<input type="checkbox"/> Helmets		
	<input type="checkbox"/> Availability of Functional Exhaust Fans	<input type="checkbox"/> Proper & Regular cleaning of the shop floor		
	<input type="checkbox"/> Proper electrical system with earthing	<input type="checkbox"/> Proper railing of the stairs		
	<input type="checkbox"/> Protective clothing	<input type="checkbox"/> Adequate moving space around the working machines		
	<input type="checkbox"/> Gas Protective Masks	<input type="checkbox"/> Adequate moving space in other areas		
	<input type="checkbox"/> Protective Machine Guards	<input type="checkbox"/> Adequate clean water drinking facility		
	<input type="checkbox"/> Safety Goggles	<input type="checkbox"/> Adequate vehicle safety for movement		
	<input type="checkbox"/> Safety Hand Gloves	<input type="checkbox"/> Safety devices from movement of machines like conveyer belts and hydraulic lifting machine		
	<input type="checkbox"/> Protective Shoes/ Gumboots			
7.	What additional health & safety measures you would suggest for industrial female workers?			

8.	Any other information you would like to give relating to occupational hazards & safety improvement in your industry.	
Place: _____		<b>(Signature of the Respondent)</b>
Date: _____		

Thanks for sparing your valuable time and filling in the questionnaire. Your data will definitely help for us to prepare the report in time.

Please send the filled in Questionnaire at the following address:



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