

श्री अग्रसेन इन्टरनेशनल हॉस्पीटल

श्री अग्रसेन नॉर्थ-एक्स वेलफेयर सोसायटी (पंजी.)

पी.एस.पी., सैक्टर-22, रोहिणी, दिल्ली-110086

Shree Aggarsain International Hospita Managed by: Shree Aggarsain North-Ex Welfare Society (Regd.)

P.S.P., Sector-22, Rohini, Delhi-110086

Phone: 011-66636600-99 (100 Line), 011-45911911 | E-mail: info@saih.in | Website: www.saih.in

SAIH/MS/BMW/MARCH/2020/2

Dated: 11/03/2020

To

Senior environment Engineer WMC-I, DPCC Dept. of Environment, 4th & 5th Floor, ISBT Building Kashmiri Gate Delhi-110006

Govt. of NCT Of Delhi 4th Floor, ISBT Building Cashmere Gate, Delhi-110006

Subject: - Submission of Form-IV, Annual Report of Bio-Medical Waste Management for the

Dear Sir /Madam

Please be informed that "Shree Aggarsain International Hospital" is a super speciality hospital managed by "Shree Aggarsain North Ex Welfare Society (Regd.)" and is situated at P.S.P., Sector-22, Rohini, Delhi-110086. The hospital at present has obtained registration of 50 Beds from Directorate of Health Services, Govt. of NCT, Delhi. OPD Services & IPD Services of our hospital were started w.e.f. 23rd August 2018 & 8th September 2018 respectively.

In this regard please find enclosed the Form-IV, Annual Report of Bio Medical waste Management for the year 2019.

Yours Sincerely

For Shree Aggarsain International Hospital

Dr. Deep Kamal

Medical Superintendent

MBBS, MD (CHA)

Medical Superintendent Enclosures: Asiabovenal Hospital

Form - IV (See rule 13) ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

SI.	Particulars	1]
No.					
1.	Particulars of the Occupier	1:			
	(i) Name of the authorised person (occupier or : operator of facility)		Dar. Deept	camal.	
	operator of facility)		Maddago	camal Superintendeu	+
			Predicac	Superinternet	
	(ii) Name of HCF or CBMWTF	1:	SHREE AG	GARSAIN INT	ERNATIONAL
	(iii) Address for Correspondence	1:		-22 . DELHI-114	
	(iv) Address of Facility			22 . DELHI-11008	0
	(v)Tel. No, Fax. No	1		, oli- 45911911	
	(vi) E-mail ID		ms@salh		
	(vii) URL of Website		www. saih		
	(viii) GPS coordinates of HCF or CBMWTF		44440. SCATT	(1)	
	(ix) Ownership of HCF or CBMWTF	:	(State Gover Semi Govt. or a	nment or Private or	
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	Anna	Authorisation DPCC/BMW/	AUTH/MEW No.:	/2019 04646
	(xi). Status of Consents under Water Act and Air		Valid up to: =0	valid up to	sout to about
	Act		CAmpai	108/2023, Win	den No operaci
2.	Type of Health Care Facility	:	CHINEXUSTE	DP0	C/WMC/2019/480
	(i) Bedded Hospital	:	No. of Beds: 5	valid up to 08/08/2023. Con No. 2) 05-0 DPC Bedded (Anne)	War No. 3)
1	(ii) Non-bedded hospital			Deaded Chine	choir in
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	1200 1100	Not App		
	(iii) License number and its date of expiry		DGHS/NH/1	489 VALID UPTR	0 31/03/2021
3.	Details of CBMWTF	:	NOT APPLICE	489 VALID UPTO	nnexume No.3)
	(i) Number healthcare facilities covered by CBMWTF	:			
	(ii) No of beds covered by CBMWTF	:			
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	Kg/day		
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	K.g/day		
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category Red Category : White: 17-8 Blue Category :	626.88 Kg/m	Atmos
				iste: 6121-12 Kg	
5	Details of the Storage, treatment, transportation, proces	sing a	and Disposal Facili	ty	
	(i) Details of the on-site storage : Size	:	530 591.	eet	
	facility	y : 1'	37.56 0	ubic meter	
	Provision	on of		: (cold storage or vertilated an	2 illuminated
			site stos	rage avail	akle

disposal facilities	Type of treatment No Cap Quantity
	equipment of acity treatedor
	units Kg/ disposed
	day in kg
	per
	Incinerators N/A annum
	Plasma Pyrolygia N/A
	Autoclaves - 22 200 Kg/1 +7.506
	Plasma Pyrolysis N/A Autoclaves -> 02 200 Kg/day Microwave N/A **Yann
	Hydroclave H/A
	Hydroclave N/A Shredder N/A Needle tip cutter or 15 15 kg/day 214.02 kg destroyer
	Needle tip cutter or 15 15 Kg/day 214.02 K
	destroyer
	Sharps —
	encapsulation or NA
	concrete pit
	Deep burial pits: N/A
	Chemical - N/A
	disinfection:
	Any other treatment
	equipment:
(iii) Quantity of recyclable wastes :	
sold to authorized recyclers after	Not applicable
treatment in kg per annum.	The same
(iv) No of vehicles used for collection :	10-10-10-10-10-10-10-10-10-10-10-10-10-1
and transportation of biomedical waste	NOT APPLICABLE
	Quantity Where generated
(v) Details of incineration ash and	disposed Incineration Ash -> NOT APPLICABLETP Sludge 9:034 Kg for the 400 2019
ETP sludge generated and disposed	
during the treatment of wastes in Kg	· Hospital is negistered for 50 Beds.
per annum	· Bed occupancy for the year 2019
	51.5%, i.e. approximately 26 Beds on
(vi) Name of the Common Bio-:	BIOTIC WASTE SOLUTIONS
Medical Waste Treatment Facility	46, 47, SSI. INDUSTRIAL AREA
Operator through which wastes are	G.T. KARNAL ROAD, DELHI- 110033
disposed of	Gitt. Principle Marie Debits Marie Mar
(vii) List of member HCF not handed over bio-medical waste.	NOT APPLICABLE
Do you have bio-medical waste	YES
	MINUTES OF MEETING ATTACHED
Management committee? If yes, attach	
minutes of the meetings held	(1) [12:16] [2:16] [2:16] [2:16] [2:16] [2:16] [2:16] [2:16] [2:16] [2:16] [2:16] [2:16] [2:16] [2:16] [2:16]
minutes of the meetings held during the reporting period.	[Annexuore No. 4]

7	Details trainings conducted on BMW (i) Number of trainings conducted on BMW Management (ii) number of personnel trained (iii) number of personnel trained at	36 1065
	the time of induction (iv) number of personnel not undergone any training so far (v) whether standard manual for	86 NIL
	training is available? (vi) any other information)	YES
8	Details of the accident occurred during the year	NOT APPLICABLE
	(i) Number of Accidents occurred	NIL
	(ii) Number of the persons affected (iii) Remedial Action taken (Please	NIL
	attach details if any)	NOT APPLICABLE
9.	(iv) Any Fatality occurred, details. Are you meeting the standards of air	NOT APPLICABLE
	many times in last year could not met the standards?	NOT APPLICABLE
10	Details of Continuous online emission monitoring systems installed	NOT APPLICABLE
	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	TREATMENT METHODS IN PLACE: ETP & STP NO. OF TIMES NOT MET THE STANDARDS: NIL
11	distillection method or	YES. YES.
	sterilization meeting the log 4	
	standards? How many times you have not met the standards in a year?	NO. OF TIMES NOT MET
12	Any other relevant info	STANDARDS : HIL
	:	(Air Pollution Control Devices attached with the Incinerator) NOT APPLICABLE

Certified that the above report is for the period from Old JANUARY 2019	1 2.84
2019	to 31st DECEMBER' 2019

Name and Signature of the Head of the Institution

MEBS, MD (CHA)

Medical Superintendent

hrea Appresia members Hospital

Date: 11th March 2020 Place: DECHI.

ANNEXURE No. 1



DELHI POLLUTION CONTROL COMMITTEE (Government of N.C.T. of Delhi)

4th Floor, I.S.B.T. Building, Keshmere Gate, Delhi - 110006 Website: http://www.dpcc.delhiggut.nic.in

For bodded Hospitals

AUTHORISATION UNDER BIO MEDICAL WASTE MANAGEMENT RULES, 2016

FORM III

(Authorisation for operating a facility for Collection, Reception, Treatment, Storage, Transport and Disposal of Bio-Medical Wastes.)

BMW Authorisation No. DPCC/BMW/AUTH/NEWNo/2019/04646

File number of authorisation: DPCC/(11)(5)(376)/-006/BMW-11 2.

- M/s SHRI AGRASEN NORTH EX WELFARE SOCIETY an occupier of the facility is hereby granted an authorization for Generation, segregation, Collection, Storage of biomedical waste located at PLOT NO PSP SEC-22 ROHINI New Delhi - 110085 and for transport, treatment and disposal of bio-medical waste through common Bio-Medical Waste Treatment Facility (CBMWTF) 3. Number of beds of HCF: 455
- Quantity of Biomedical waste: 171 Kg/Day 4.

This atuthorization shall be valid upto 08-08-2023 5, 6.

This authorisation is subject to the conditions stated below and to such other conditions as may be specified in the Rules for the time

* Terms and conditions of authorisation

1. The occupier shall comply with the provisions of Bio-Medical Waste Management Rules, 2016 as amended to date.

2. The authorization or its renewal shall be produced for inspection at the request of any officer authorized by DPCC.

3. The occupier shall ensure that bio-medical waste is not mixed with other wastes and is segregated into containers / bags at the point of

4. The occupier shall have a valid agreement with the operator of a facility authorized by DPCC for collection, transport, treatment & disposal of

5. The Occupier shall hand over the bio-medical waste daily to the authorized operator of a facility duly segregated, labeled, tagged and kept in proper containers for the collection, transportation, treatment & disposal as per Rules.

5. The occupier shall inform the prescribed authority immediately in case the operator of facility does not collect the bio medical waste with in

The occupier shall maintain records of the Bio-Medical Waste generated and disposed of banded over on daily basis. The record shall be DPCC.

8. In case of any major accident involving Bio-Medical Waste, the occupier shall report the accident in Form-I, prescribed under the Rules, to

In case the occupier is having a DG Set, he shall comply with the noise standards laid down vide Gazette Notification of Ministry of Environment and Forest (MOEF), Government of India Dated 17.05.2002 and 12.07.2004, as amended to date, for the Diesel Generator Set(s). Stack beight with the DG Set shall be as per the following formula, H is equal to h plus (0.2 X square root of KVA) where H is Total Height of stack in meter, h is Height of the building in meters where the Generator Set is installed and KVA is Total Generator capacity of the set in

10. The occupier shall also ensure proper collection and disposal of bio-medical waste containing mercury through the vendor authorize for the purpose. The occupier shall phase out mercury based equipment e.g. thermometers and B.P. Measuring Equipment.

11. The HCF shall pre-treat the laboratory waste, microbiological waste, blood samples and blood bags through disinfection or sterilization on-site in the manner as prescribed by the World Health Organization (WHO) or National AIDs Control Organization (NACO) guidelines and

12 The HCF shall ensure segregation of liquid chemical waste at source and ensure pre-treatment or neutralization prior to mixing with other effluent generated from the facility

13 The HCF shall ensure treatment and disposal of liquid waste in accordance with the standards prescribed in Bio-Medical Waste Management

14. The HCF is required to display the authorization at a prominent place in its premises so that the general public can view and satisfy

15. The HCF shall phase out use of chlorinated plastic bags & gloves etc. by 27th March, 2019 as per Notification dated 16th March, 2018

16 The HCF shall establish a Bar-Code System for bags or containers containing bio-modical waste to be sent out of the premises for the further treatment & disposal in accordance with the guidelines issued by CPCB by 27th March, 2019.

17. The HCF shall ensure segregation of liquid chemical waste at source and ensure pre-treatment or neutralization prior to mixing with other

18. The HCF shall immunise all its health cure workers and others, involved in handling of bio-medical waste for protection against diseases including Hepatitis-B & Tetanus that are likely to be transmitted by handling of bio-medical waste, in the manner as prescribed in the National Immunization Policy or the guidelines of the Ministry of Health & Family Welfare issued from time to time.

19. The HCF shall ensure occupational safety of all its health care workers & others involved in handling of bio-medical waste by providing

20. The HCF shall conduct health check-up at the time of induction & at least once in a year for all its health care workers & others involved in

or of KAMAL MBBS, MD (CHA)

Medical Superintendent

CAPCC Certificate No.: R-036283 משכב משכב משכב משכב the Water (Prevention & Control of Pollution) Act, 1974 under Red Category. This consent is subject to terms and conditions specified overleaf. This Consent to Operate is hereby granted under section 21 of the Air (Prevention & Control of Pollution) Act, 1981 and under section 25/26 of pH = 6.5-9, Total Suspended Solids (TSS) <= 100, Oil and Grease <= 10, Bio-chemical oxygen demand [3days at 27<sup>c/sup>c] <= 30, COD <= 250, Bio - assay test Expliny Date: 08-08-2023 (percent survival of fish after 96 hours in 100 percent effluent) = 90-100 סאס סאס סאס 4th & 5th Floor, ISBT Building, Kashmere Gate, Delhi - 110006. Delhi Pollution Control Committee Digitally studest bondless factory Albridge Avortice procession. This document is legal for DPCC Purpose, issued by SEE, DPCC Website: http://dpcc.delhigovt.nic.in ## All emission parameters are in (mg/Nm³) except where mentioned otherwise This document has been verified by Arnit Chaudhary, EE Prescribed standards CONSENT ORDER SHRI AGRASEN NORTH EX WELFARE SOCIETY PLOT NO PSP SEC-22 ROHINI, Delhi-110085 # All effluent parameters are in mg/l except pH value. 1 100 demand [3days at 27^oCJ=29, COD=84, Bio - assay test (percent survival of pH=7.3, Total Suspended Solids (TSS)=40, Oil and Grease=1.6, Bio-chemical oxygen : DPCC/WIMC/2019/48089 Wis DPCC has done the analysis vide report dated as 07-08-2018 follows: : HOSPITAL (455 BEDS) : 19-04-2019 fish after 96 hours in 100 percent effluent)=90 Consent Order No : Name of the Unit Product/Activity Date of Issue Address 0000 OUCC 5 DPCC DOGC

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ANNEXURE NO. 2

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ESPERANCE OF SOME OF S Dated 14.08.1018 DIRECTORA'FE GENERAL OF HEALTH SERVICES is being run by Shree Aggansain North Ex Welfare Soviety (Rejd.) has been registered under Delhi Nursing Homes Registration Act, 1953 and is authorized to carry out the permitted nursing home activites at F-17, KARKARDOOMA, SHAHDARA, DELHI-110032 (Under Section 5 of Delhi Nursing Homes Registration Act, 1953) For the Period. 2018 - 27 GOVERNMENT OF NCT OF DELHI Registration Certificate It is certified that Shree Aggansal a International Hospital P.S. P. Sector-22, Rohin, De M. - 110086 This registration certificate is valid upto 31" March, 2021 Reg. No. DGHS/NH/...\489 the above said premises.

hit Rul

Director General Health Services

ANNEXURE NO. 4

Shree Aggarsain International Hospital Minutes of meeting

Committee: Bio- Medical waste management committee.

Meeting No:

Purpose: Biomedical Waste committee provides a forum for multidisciplinary input and cooperation, and information sharing to recommend and monitor all Biomedical Waste Management related activities in the hospital.

Date of Meeting: 20th September 2019 at 12: 30 pm

Location: Microbiology Laboratory

Attendees & Distribution: Dr Deep Kamal (Chairperson/Medical Superintendent)-

Dr. Swastika Agarwal (Secretary/Consultant Microbiology) Mrs. Poonam Sharma (Asst. Secretary/Quality Manager) Troubay.

Dr. Rakesh Sharma (In-charge Anaesthesia) Mrs. Bindu Lukose (Director Nursing)

Mrs. Pragya Upadhyay (Assistant Manager, Quality)

The meeting was introduced by	Itan (Infection Contra Recommended	Target Date	Action Taken by
Dr. Swastika Agarwal. Action taken report of previous tasks and the present status of Bio Medical Waste Management was discussed. Mrs Poonam Sharma told the names of champions who will be doing shadow audit for Bio Medical Waste Management. Identified staff are Sister Lency from 6th Floor, Sister Sholay from DT. Sister Shiney from 5th Floor and Mrs Pragya from Quality Cell. These dentified champions will be provided hecklist for audit. They will be abmitting audit report to Committee ecretary.	Committee Secretary	With Immediate Effect	Committee Secretary/Infection Control Nurse

Dr Swastika Agarwal Consultant Microbiology (Committee Secretary)

MBBS, MD (CHA) Medical Superintendent three Agoursain International Hospital

Dr. Deep Kamal Medical Superintendent (Committee Chairperson)