BIO MEDICAL WASTE (MANAGEMENT & HANDLING) RULES, 1998
WASTE MANAGEMENT CELL

File No. : DPCC/(11)(5)(0108)/E-002/BMW-06
Annual Return No. DPCC/BMW/ANNUALREPORT/2018/1281
Enquiry Counter I.D. No.

FORM IV

ANNUAL REPORT
(To be submitted to the prescribed authority)

* Required Field
Date: 15-06-2018

To,
The Delhi Pollution Control Committee,
ISBT, 4th Floor, Delhi-110006
(Name of the state Govt./UT Administration)
Address.

1. Particulars of the Occupier
   i. Name of the authorised person (occupier or operator of facility)
      First Name * MEDICAL
      Middle Name
      Last Name *
      ii. Name of HCF or CBMWTF * Lal Bahadur Shastri Hospital
      iii. Address for correspondence *
          District * EAST
          City *
          Pin Code * 110091
      iv. Address of Facility Khichripur,
          District * EAST
          City *
          Pin Code * 110091
      v. Telephone No. 22774145
         Fax No.
         Telex No.
      vi. Email Id * mslbs@gmail.com
         Mobile No * 9582500304
         Pan No (of Income Tax Dept) of the HCU * AAAGL0071R
      vii. URL Of Website delhi.gov.in/wps/wcm/connect/doit_lbservice/LBSH/Home/
2. **Type of Health care Facility**:

(i) Bedded Hospital
No Of Beds 100

(ii) Non-bedded hospital
(Clinic or Blood Bank or Clinical
Labouratory or Research
Institute or Veterinary Hospital or
any other)

(iii) License Number

(iv) License Expiry Date

3. **Details of CBMWTF**

(i) Number healthcare facilities covered by CBMWTF

(ii) No of beds covered by CBMWTF

(iii) Installed treatment and disposal capacity of CBMWTF:

(iv) Quantity of biomedical waste treated or disposed by CBMWTF

<table>
<thead>
<tr>
<th>Category Name</th>
<th>Quantity (Kg/annum)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yellow</td>
<td>15055.88 Kg/annum</td>
</tr>
<tr>
<td>Red</td>
<td>14275.99 Kg/annum</td>
</tr>
<tr>
<td>White (Translucent)</td>
<td>444.474 Kg/annum</td>
</tr>
<tr>
<td>Blue</td>
<td>2113.804 Kg/annum</td>
</tr>
<tr>
<td>General Solid waste</td>
<td>198000 Kg/annum</td>
</tr>
</tbody>
</table>

4. **Quantity of waste generated or disposed in Kg per annum (on monthly average basis)**

<table>
<thead>
<tr>
<th>Category Name</th>
<th>Quantity (Kg/annum)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yellow</td>
<td>15055.88 Kg/annum</td>
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<tr>
<td>Blue</td>
<td>2113.804 Kg/annum</td>
</tr>
<tr>
<td>General Solid waste</td>
<td>198000 Kg/annum</td>
</tr>
</tbody>
</table>

5. **Details of the Storage, treatment, transportation, processing and Disposal Facility**

(i) Details of the on-site storage facility

- Size: 40*20
- Capacity: 1000 Kg/annum
Disposal Facilities

- Incinerators
- Plasma Pyrolysis
- Autoclaves
- Microwave
- Hydroclave
- Shredder
- Needle tip cutter or destroyer
- Sharps encapsulation or concrete pit
- Deep burial pits
- Chemical disinfection
- Any other treatment equipment

iii Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.

iv No of vehicles used for collection and transportation of biomedical waste

v Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum

vi Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of

vi List of member HCF not handed over biomedical waste.

6. Do you have bio-medical waste management? Yes/No
   If yes, attach minutes of the meetings held during the reporting period
   Minutes of the Meetings held during the reporting period

7. Details training conducted on BMW
   i Number of trainings conducted on BMW
Number of personnel trained
Number of personnel trained at the time of induction
Number of personnel not undergone any training so far
Whether standard manual for training is available?
Any other information

8. Details of the accident occurred during the year

i. Number of Accidents occurred
ii. Number of the persons affected
iii. Remedial Action taken (Please attach details if any)
iv. Any Fatality occurred

Fatality Details if any

9. Are you meeting the standards of air Pollution from the incinerator? No
How many times in last year could not met the standards?
Details of Continuous online emission monitoring systems installed

10. Liquid waste generated and treatment methods Yes
in place. How many times you have not met the standards in a year? 0

11. Is the disinfection method of sterilization meeting the log 4 standards? How many times you have not met the standards in a year?

12. Any other relevant information

8. Certified that the above report is for the period from 01-01-2017 To 31-12-2017

Date 15-06-2018
Place Delhi

Name of Head Of Institution Dr. Amita Saxena
Designation of Head Of Institution Medical Superintendent
SIR,


Kindly submit a copy of Annual Report for the year ending 2017.

The Hon’ble Secretary,

S.D. 14/1/18

Date

No. 609610/MWJ/Ret/2016/3235

Rajiv Gandhi Medical College & Hospital
Lal Bahadur Shastri Hospital
Government of NCT of Delhi
**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)]

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Particulars</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Particulars of the Occupier</td>
<td></td>
</tr>
<tr>
<td>(i)</td>
<td>Name of the authorised person (occupier or operator of facility)</td>
<td>Dr. AMITA SAXENA</td>
</tr>
<tr>
<td>(ii)</td>
<td>Name of HCF or CBMWTF</td>
<td>LAL BAHADUR SHASTRI HOSPITAL</td>
</tr>
<tr>
<td>(iii)</td>
<td>Address for Correspondence</td>
<td>KHICHI PUR</td>
</tr>
<tr>
<td>(iv)</td>
<td>Address of Facility</td>
<td>DELHI-91</td>
</tr>
<tr>
<td>(v)</td>
<td>Tel. No, Fax. No</td>
<td>22474145</td>
</tr>
<tr>
<td>(vi)</td>
<td>E-mail ID</td>
<td><a href="mailto:mshlbsh.deli@gov.in">mshlbsh.deli@gov.in</a></td>
</tr>
<tr>
<td>(vii)</td>
<td>URL of Website</td>
<td></td>
</tr>
<tr>
<td>(viii)</td>
<td>GPS coordinates of HCF or CBMWTF</td>
<td></td>
</tr>
<tr>
<td>(ix)</td>
<td>Ownership of HCF or CBMWTF</td>
<td>State Government or Private or Semi Govt. or any other</td>
</tr>
<tr>
<td>(x)</td>
<td>Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules</td>
<td>Authorisation No.: DPCC/1.BMWJ/AUTH/NEW/NO/2017 02.7.21/5309, valid up to 2.4.41/13</td>
</tr>
<tr>
<td>(xi)</td>
<td>Status of Consents under Water Act and Air Act</td>
<td>DPCC/WMC/2017/39346, Valid up to 4/7/18</td>
</tr>
<tr>
<td>2.</td>
<td>Type of Health Care Facility</td>
<td></td>
</tr>
<tr>
<td>(i)</td>
<td>Bedded Hospital</td>
<td></td>
</tr>
<tr>
<td>(ii)</td>
<td>Non-bedded hospital</td>
<td></td>
</tr>
<tr>
<td>(iii)</td>
<td>(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)</td>
<td></td>
</tr>
<tr>
<td>(iv)</td>
<td>License number and its date of expiry</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Details of CBMWTF</td>
<td></td>
</tr>
<tr>
<td>(i)</td>
<td>Number healthcare facilities covered by CBMWTF</td>
<td></td>
</tr>
<tr>
<td>(ii)</td>
<td>No of beds covered by CBMWTF</td>
<td></td>
</tr>
<tr>
<td>(iii)</td>
<td>Installed treatment and disposal capacity of CBMWTF</td>
<td>Kg per day</td>
</tr>
<tr>
<td>Details of the Storage, treatment, transportation, processing, and disposal facility</td>
<td>Size: 40 x 20 feet</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>Capacity: 50 Bag (Abb)</td>
<td>Provision of on-site storage: (cold storage or any other provision)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(i) Details of the on-site storage facility</th>
<th>Type of treatment equipment</th>
<th>No. of units</th>
<th>Quantity of treated waste in kg/day in kg per annum</th>
</tr>
</thead>
<tbody>
<tr>
<td>(ii) Details of the treatment or disposal facilities</td>
<td>Incinerators</td>
<td>×</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Plasma Pyrolysis</td>
<td>×</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Autoclaves</td>
<td>850 l</td>
<td>85 - 100 kg/cycle (used for treatment purposes)</td>
</tr>
<tr>
<td></td>
<td>Microwave</td>
<td>×</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hydroclave</td>
<td>×</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Shredder</td>
<td>NOT WORKING</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Needle tip cutter or destroyer</td>
<td>30 (APP)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sharps encapsulation or concrete pit</td>
<td>×</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Deep burial pits</td>
<td>×</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Chemical disinfection</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Any other treatment equipment</td>
<td>ETP</td>
<td>SHARP BLASTER - NOT WORKING</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.</th>
<th>Red Category (like plastic, glass etc.)</th>
<th>0 l (four)</th>
<th>Handover to authorised CBMWT</th>
</tr>
</thead>
<tbody>
<tr>
<td>(iv) No of vehicles used for collection and transportation of biomedical waste</td>
<td>RED &amp; YELLOW BMW TROLLEY as per DPC norms</td>
<td>from Nursing Station to centralised storage, treatment</td>
<td></td>
</tr>
<tr>
<td>(v) Details of incineration ash and ETP sludge generated and disposed</td>
<td>NO Incineration ash, sludge</td>
<td>Quantity generated</td>
<td>Where disposed</td>
</tr>
</tbody>
</table>

5 kg / floation tank
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>during the treatment of wastes in Kg per annum</td>
<td>Incineration</td>
</tr>
<tr>
<td></td>
<td>Ash</td>
</tr>
<tr>
<td></td>
<td>ETP Sludge</td>
</tr>
<tr>
<td></td>
<td>SMS Watergate Pvt Ltd</td>
</tr>
<tr>
<td>(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of</td>
<td></td>
</tr>
<tr>
<td>(vii) List of member HCF not handed over bio-medical waste.</td>
<td>x</td>
</tr>
<tr>
<td>6 Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period</td>
<td>YES</td>
</tr>
<tr>
<td></td>
<td>29-7-17</td>
</tr>
<tr>
<td>7 Details trainings conducted on BMW</td>
<td></td>
</tr>
<tr>
<td>(i) Number of trainings conducted on BMW Management.</td>
<td>30</td>
</tr>
<tr>
<td>(ii) number of personnel trained</td>
<td>226</td>
</tr>
<tr>
<td>(iii) number of personnel trained at the time of induction</td>
<td>226</td>
</tr>
<tr>
<td>(iv) number of personnel not undergone any training so far</td>
<td>x</td>
</tr>
<tr>
<td>(v) whether standard manual for training is available?</td>
<td>YES, Guide line as per BMI Rule 16</td>
</tr>
<tr>
<td>(vi) any other information</td>
<td></td>
</tr>
<tr>
<td>8 Details of the accident occurred during the year</td>
<td>NO</td>
</tr>
<tr>
<td>(i) Number of Accidents occurred</td>
<td></td>
</tr>
<tr>
<td>(ii) Number of the persons affected</td>
<td></td>
</tr>
<tr>
<td>(iii) Remedial Action taken (Please attach details if any)</td>
<td></td>
</tr>
<tr>
<td>(iv) Any Fatality occurred, details.</td>
<td></td>
</tr>
<tr>
<td>9. Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?</td>
<td>NOT (Out Sourced)</td>
</tr>
<tr>
<td>Details of Continuous online emission monitoring systems installed</td>
<td>x</td>
</tr>
<tr>
<td>10 Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?</td>
<td>YES, ETP</td>
</tr>
<tr>
<td></td>
<td>NIL (AE. Electrical)</td>
</tr>
<tr>
<td>11 Is the disinfection method or sterilization meeting the log 4</td>
<td>YES</td>
</tr>
<tr>
<td></td>
<td>standards? How many times you have not met the standards in a year?</td>
</tr>
<tr>
<td>---</td>
<td>---------------------------------------------------------------------</td>
</tr>
<tr>
<td>12</td>
<td>Any other relevant information</td>
</tr>
<tr>
<td></td>
<td>(Air Pollution Control Devices attached with the Incinerator)</td>
</tr>
<tr>
<td></td>
<td>NIL</td>
</tr>
</tbody>
</table>

Certified that the above report is for the period from 15th Jan 2017 to 31st Dec 2017.

Date: 14/06/18  
Place: DELHI  
A. P. R. Debnath  
(M.A. Bawm)

Name and Signature of the Head of the Institution
<table>
<thead>
<tr>
<th></th>
<th>Yellow Bags</th>
<th>Yellow Bags Weight</th>
<th>Red Bags</th>
<th>Red Bags Weight</th>
<th>White Weight</th>
<th>Blue Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan-17</td>
<td>839</td>
<td>1.090 kg</td>
<td>800</td>
<td>9.32 kg</td>
<td>3.761 kg</td>
<td>63.335 kg</td>
</tr>
<tr>
<td>Feb-17</td>
<td>186</td>
<td>1.030 kg</td>
<td>750</td>
<td>2.67 kg</td>
<td>3.62 kg</td>
<td>63.195 kg</td>
</tr>
<tr>
<td>March-17</td>
<td>845</td>
<td>1.083 kg</td>
<td>819</td>
<td>9.39 kg</td>
<td>5.921 kg</td>
<td>61.43 kg</td>
</tr>
<tr>
<td>April-17</td>
<td>734</td>
<td>9.33 kg</td>
<td>413</td>
<td>8.03 kg</td>
<td>5.33 kg</td>
<td>58.03 kg</td>
</tr>
<tr>
<td>May-17</td>
<td>863</td>
<td>1.113 kg</td>
<td>835</td>
<td>3.59 kg</td>
<td>3.75 kg</td>
<td>86.77 kg</td>
</tr>
<tr>
<td>June-17</td>
<td>845</td>
<td>1.170 kg</td>
<td>825</td>
<td>10.75 kg</td>
<td>3.64 kg</td>
<td>80.28 kg</td>
</tr>
<tr>
<td>July-17</td>
<td>813</td>
<td>1.189 kg</td>
<td>841</td>
<td>10.91 kg</td>
<td>3.52 kg</td>
<td>251.75 kg</td>
</tr>
<tr>
<td>Aug-17</td>
<td>882</td>
<td>1.133 kg</td>
<td>849</td>
<td>10.39 kg</td>
<td>3.29 kg</td>
<td>233.30 kg</td>
</tr>
<tr>
<td>Sep-17</td>
<td>860</td>
<td>1.272 kg</td>
<td>859</td>
<td>11.76 kg</td>
<td>3.43 kg</td>
<td>243.89 kg</td>
</tr>
<tr>
<td>Oct-17</td>
<td>188</td>
<td>1.360 kg</td>
<td>2.11</td>
<td>1.385 kg</td>
<td>3.11 kg</td>
<td>294.65 kg</td>
</tr>
<tr>
<td>Nov-17</td>
<td>280</td>
<td>1.543 kg</td>
<td>2.99</td>
<td>1.922 kg</td>
<td>6.23 kg</td>
<td>322.42 kg</td>
</tr>
<tr>
<td>Dec-17</td>
<td>326</td>
<td>1.622 kg</td>
<td>3.23</td>
<td>1.732 kg</td>
<td>27.21 kg</td>
<td>232.14 kg</td>
</tr>
<tr>
<td>Total</td>
<td>8323</td>
<td>15.055 kg</td>
<td>8127</td>
<td>14.275 kg</td>
<td>44.474 kg</td>
<td>2113.804 kg</td>
</tr>
</tbody>
</table>

Scanned by CamScanner
Doctors = 85
Nursing Officer = 61
Nursing Auxiliary = 26
OT Tech = 5
Wood Sweepers = 51
\[ \frac{226}{226} \]

Approved.
2. Mortuary
3. BMW
4. OPD
5. Outer
6. Outer
7. PNC-NICU
8. H & D II
9. M CAS
10. Dental+Pharmacy
11. CAS
12. H & D IV
13. H & D I
14. E.O.T
15. L. Room
16. OPD
17. M.O.T
18. H & D III
19. B.Bank
20. ICU
21. M.S.O
22. Sup - Ram Chandra

NID
WIS
22 + 8
<table>
<thead>
<tr>
<th>No.</th>
<th>Name</th>
<th>Age</th>
<th>Married</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>Richard</td>
<td>50</td>
<td>No</td>
</tr>
<tr>
<td>23</td>
<td>Vicky</td>
<td>40</td>
<td>No</td>
</tr>
<tr>
<td>24</td>
<td>Dalip</td>
<td>30</td>
<td>No</td>
</tr>
<tr>
<td>25</td>
<td>Neeraj</td>
<td>27</td>
<td>No</td>
</tr>
<tr>
<td>26</td>
<td>Sanjay</td>
<td>19</td>
<td>No</td>
</tr>
<tr>
<td>27</td>
<td>Emily</td>
<td>25</td>
<td>No</td>
</tr>
<tr>
<td>28</td>
<td>Jan</td>
<td>15</td>
<td>No</td>
</tr>
<tr>
<td>29</td>
<td>Deepak</td>
<td>12</td>
<td>Yes</td>
</tr>
<tr>
<td>30</td>
<td>Robin</td>
<td>10</td>
<td>No</td>
</tr>
<tr>
<td>31</td>
<td>Ram</td>
<td>8</td>
<td>No</td>
</tr>
<tr>
<td>32</td>
<td>Srikanth</td>
<td>7</td>
<td>No</td>
</tr>
<tr>
<td>33</td>
<td>Virendra</td>
<td>6</td>
<td>No</td>
</tr>
<tr>
<td>34</td>
<td>Vikash</td>
<td>5</td>
<td>Yes</td>
</tr>
</tbody>
</table>

5 of 10.
1. Name: signature
2. Chaman
3. Poonam
4. Maninder
5. Mankirat
6. Dinesh
7. Mohammed
8. Rakesh
9. Madan
10. Hansraj
11. Elgin
12. Ramdas
13. Bhimsingh
14. Sampan
15. Asma Bismi
16. Gulab
17. Abdul Rashid
18. Dhiran Krishna
19. Kamat
20. Sudha
21. Chander
22. Rajwanti

K.M.W. Class on 16/12/10 X/O & Sweeper
1. B M W
2. Out 9295
3. Out 14172
4. B Bank
5. CSSD
6. OPD
7. EOT
8. MCAS
9. N ICU-RNC
10. Wld II
11. Wld III
12. Dental Phar
13. 14
15. M O T
16. Mortuary
17. L Room
18. M S O
19. OPD
20. CAS
21. Wld I
22. Sup - Ramchandran

9/11/2017

NID

22/80
Page 1

Date: 8/2/90

Name: [Signature]

Amor: [Signature]
OPD
Staff Nurses
1. Smt. Chuganan
2. Ss. Poonam
3. S/N Sangeeta
4. S/N Elizabeth
5. S/N Nisha
6. S/N Geeta
7. S/N Radhika
8. S/N Nanddeep
9. S/N Neera & Reema
10. S/Ns/ Sister
11. Smt. Reetu
12. Smt. Geet
13. Smt. Monisha
14. Smt. Sayant
15. Smt. Alice

10/12/2013
Handwritten
Sunit kumar  |
Narinder  |

Aruna Pinniess  |
Manita Pandeley  |

Jiney Malhotra  |

Amit Kumar  |

Tryoti Sharma  |
Rejena lewak  |

Bipin Vjay  |

Nes Officer  |

9
<table>
<thead>
<tr>
<th>Name of Patient</th>
<th>Age</th>
<th>Sex</th>
<th>C.R.No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **BnW class on** 12/12/2017
- **Topic:** Colour Coding

**Sister Incharge:** Geeta Ram

**Staff Nurse:**
1. Shanti
2. Rampal
3. Amrit
4. Manjy Ati

**OT. Tech:**
1. Sohan Sharma

- **OT. 1.**
- **N/Sist -1**
- **Staff Nurse - 4.**
5/17

Dr. Raman Kumar  
SR Medicine

Anita  
5/17

Dr. Gaurav Singh  
SR Medicine

Nemali  
5/17

N/0  
5/17

12/5/17

Dr. Tyoti Biswas  
JR Obst Gynae

Dr. Olasy  
8B Med

Dr. Sundaram  
JR Med

292  
19/5/17

Dr. Manmohan Bhagat  
JR Causality

Dr. Sanavullah Ansari  
JR Causality

Dr. Kirti Pandey  
JR Causality

Dr. Tyoti Biswas  
JR Obst Gynae

Dr. Anil Kumar Gangoo  
JR Surgery

Anil
272. Dr. Neelkamal Senapati  
274. Dr. Maita Dasgupta  
275. Dr. Prerna Gupta  
276. Dr. Vinita Roy  
277. Dr. Kavita  
278. Dr. Devansh Sharma  
279. Dr. Faizona Mohamad  
280. Dr. Shriya Kochhar  
281. Dr. Rakshpal Pandey  

21/3/17

28/3/17

31/3/17

December 2016
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<th>No.</th>
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<tr>
<td>312</td>
<td>Sayeed Ahmad</td>
<td>Doctor</td>
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<td>313</td>
<td>Leela Kesar</td>
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<td>314</td>
<td>Dr. Shamshad</td>
<td>N/S</td>
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<td>315</td>
<td>Dr. Neesa Singh</td>
<td>SH-OBG</td>
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<td>316</td>
<td>Molly Das</td>
<td>N/S Cabaval</td>
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<td>317</td>
<td>Susman Mohan</td>
<td>Medical</td>
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<td>318</td>
<td>Dr. Namdev Mohan</td>
<td>SH-Casualty</td>
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<td>319</td>
<td>Dr. Sunil</td>
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<td>321</td>
<td>Rakesh Kumar</td>
<td>EM</td>
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<td>322</td>
<td>Poonam Tyagi</td>
<td>JR - Pod.</td>
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<td>323</td>
<td>Narendra Nath</td>
<td>JR - buffalo</td>
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<td>324</td>
<td>Mamoon Kosvi</td>
<td>JR - Paediatrics</td>
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<td>325</td>
<td>Dr. Vishal Mohan Kuckan</td>
<td>JA Medicine</td>
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<td>326</td>
<td>Smt Jini Joseph</td>
<td>NSG officer</td>
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<td>327</td>
<td>Dr. Priyanka Dutta</td>
<td>JR - OBG</td>
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<td>328</td>
<td>Dr. Mohan Mohan</td>
<td>ORB.</td>
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<tr>
<td>329</td>
<td>Dr. Sukesh Kumar</td>
<td>JR - Reedy</td>
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8. No | Name | Dept | Sr.No
--- | --- | --- | ---
380 | Dr. Devkant Katiyar | A.F.E. (JR) | Dept.
381 | Dr. Akanksha Bhagat | Obs. & Gynae | (S.R.)
382 | Dr. Anmol Tiwari | Obs. & Gynae (SR) | Amrh.
383 | Dr. Neha Tibrewal | Obs. & Gynae (SR) | Pha.
384 | Dr. Lax Kumawat Sahy | Surgery (JR) | Bahu

3/11/17

385 | Dr. Nidhi Patel | (Pediatrics) | Shriuli
386 | Dr. Mansi Bhargava | Medicine | Shriuli
387 | Dr. Arul Ash Shilohra | Ortho SR

18/11/17

388 | Dr. Khan Bilal Ahmed | Meel.
389 |
2/9/17

Name  Dept  Srg
Dr. Harsha  Dental JR HN

Dr. Ankush Tyagi  Medicine SR

Dr. Virendra Kumar  Anesthesia SR

15/9/2017

Dr. Gaurav Garg  SR Pathology

Dr. Rup Kumar  SR Anesthesia

21/9/17

Dr. Irfan Rahmani  JR Medicine

Dr. Anupam Gupta  JR Paediatrics

22/9/17

Dr. Deepender Singh  JR Paediatrics

Dr. Neelam Gupta  SR Gynaec

371  372  373  374  375  376  377  378  379  380  381
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<td>Obstetrics</td>
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<td>365</td>
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<td>Dr. Shyam Sethi</td>
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<td>Dr. Amrit Shankar</td>
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<td>Dr. R.K. Reddy</td>
<td>Gynecology</td>
<td>Jr</td>
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<td>Dr. Pati</td>
<td>Gynecology</td>
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390) Dr. Jishnu Pillai Jr. Denial

22/12/17

391) Dr. Jyoti Singh Jr. Paeds

392) Dr. Sahaj Shastri Jr. OB & Gynae

393) Dr. Anil Kumar Verma Jr. Paeds

394) Dr. Khemti Gurram Sr. Paeds

395) Eloni

(316) Eloni Kaying 12/12/17

397) Chingkak Sang

398) Dr. Tanzeem

399) Dr. Irfan Ahmad

DR. 62 + 2 + 21

51N - 3 + 9 + 20
339 Dr. Sudesh Kumar
340 DR. AKHELEN SEHGAL
341 DR. PRABHJEEET BHAGAT
342 DR. VIRENDER VERMA
343 DR. SUDHIR CHAUDHARY
344 DR. MOHSIN ALI

21/7/17

335 CHRONICAL EMOT STAFF NURSE
336 DR. CHAITRA MG
337 DR. K. CHANDRAN

20/7/17

338 DR. NITESH PATEL
339 Rakesh Baiwre
340 CHUAN LIAN VUNG
341 DR. HABIB SINGH
298 Dr. Kamal Sharma (Surgery) Salary
299 Mr. David (Surgery) Salary
300 Dr. Sonal Grohe (Surgery) Salary
301 Ms. Shefali Sharma (Surgery) Salary
302 Dr. Nikhil Kumar (Surgery) Salary

26/5/17

302 Dr. Ratnesh Kumar Yadav (Medicine) Salary
304 Mr. Param Johri
305 Agnes Rajpoot
306 Mary Vankhile (Nurse) Salary
307 Manjula Rampal (Nurse) Salary

308 - Alphonsa Sebastian (Merci) Salary

310 Mr. C. Paul

Group Leader: 

Steward: 

Manager: 

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313 Mosley Das  
314 S. Mehta  
315 P. Kapoor  
316 M. Gangurde  
317 M. Mahajan  
318 E. C. N. G.  
319 R. P. Rakesh  
320 Anand Kumar  
321 Rekha Tomar  
322 A. P. No. 50  

5/6/17

323 Dr. Shilpa  
324 Dr. L. K. Chakravarty  
225 Dr. Appilka  

9/6/17

326 Dr. Pallavi Kastogi  

16/6/17

327 Dr. Kushagra Varma  
328 Dr. Manika Singh
CONSENT ORDER

Date of Issue: 14-02-2017
Consent Order No.: DPC/WMC/2017/39346

Name of the Unit: Lal Bahadur Shastri Hospital

Address: KHICHRIPUR, DELHI-110091

Date of Expiry: 04-07-2018

Product/Activity: Government Hospital

This consent is subject to terms and conditions specified below:

1981 and under Section 25/26 of the Water (Prevention and Control of Pollution) Act, 1974 under Orange Category

CERTIFICATE NO.: 0-027540

Order No: 17-02-18

Delhi Pollution Control Committee

Website: http://dpcc.delhigovt.in

4th & 5th Floor, ISBT Building, Kashmiri Gate, Delhi - 110006.
AUTHORISATION UNDER BIO MEDICAL WASTE MANAGEMENT RULES, 2016

FORM III

AUTHORIZATION No. DPCC/BMW/AUTH/NEWN/2017/02721 \\
File number of authorization DPCC/(11)(5)(0108)/E-002/BMW-06 \\
19-02-2017 \\
Date: 09-02-2017

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

1. File number of authorization DPCC/(11)(5)(0108)/E-002/BMW-06

2. Ms. LAL BAHADUR SHASTRI HOSPITAL an occupier/operator of the facility located at Khichripur, New Delhi - 110091 is hereby granted an authorization for


1. M/S LAL BAHADUR SHASTRI HOSPITAL is hereby authorized for handling of biomedical waste as per the capacity given below;

<table>
<thead>
<tr>
<th>No. of beds of HCF</th>
<th>Quantity of Bio-medical waste handled, treated or disposed</th>
</tr>
</thead>
<tbody>
<tr>
<td>100</td>
<td>66.67 Kg/Day</td>
</tr>
</tbody>
</table>

This authorization shall be in force for a period of Three Years valid up to 24-04-2019

This authorization is subject to the conditions stated below* and to such other conditions as may be specified in rules for the time being in force under the Environment (Protection) Act, 1986.

* Terms and conditions of authorization

The occupier shall comply with the provisions of the Environment (Protection) Act, 1986 and the rules made thereunder.

The occupier shall comply with the standards prescribed in Schedule II of Bio-Medical Waste Management Rules, 16, for the discharge of the Waste Water / Effluent generated.

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

No person authorized shall rent, lend, sell, transfer or otherwise transport the biomedical waste without obtaining prior permission of DPCC.

It is the duty of the authorized person to take prior permission of the prescribed authority i.e., Delhi Pollution Control Committee to close down the facility and such other terms and conditions may be stipulated by the said authority.

It shall be ensured that the Bio Medical Waste is finally treated within a period of 48 hours, if for any reason it remains unavalable, information should be given in writing to DPCC and measures are to be ensured so that the waste does not adversely affect human health and the environment.

No person shall have a valid agreement with the operator of a facility authorized by DPCC for disposal of the biomedical waste in case the occupier does not treat the waste himself.

The occupier shall submit the copy of fresh valid agreement to this office within 15 days of expiry of previous agreement in case of any change.

The occupier shall ensure that the biomedical waste is not mixed with other wastes and is segregated into containers at the point of generation in accordance with Schedule-I (part I). The Bio-Medical Waste shall be handed over at the transporter/operator of a CSMWTF duly segregated, labeled, tagged and kept in proper containers for the transportation as per rules.

The occupier shall maintain records of the Bio-Medical Waste generated and disposed of handled to disposal basis.

The record shall be made available for inspection & verification to any other authorized by DPCC.

The occupier shall submit the Annual Report in Form-IV by 30th June every year, including information about the amount and quantities of biomedical waste generated from 1st January to 31st December of the proceeding year to the DPCC.

Signature

Designation: SEE, WM& B.M.S. Reddy

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A MEETING UNDER THE CHAIRMANSHIP of Medical Superintendent, LBS Hospital was held in conference room of LBS Hospital, Govt of NCT of Delhi, Khichripur Delhi, on 20.07.2017 at 02.00 PM regarding administration, implementation & Monitoring of Bio-Medical Waste Management. The following officers attended the meeting:

1. Dr. Amita Saxena, MS
2. Dr. Harish Mansukhani, DMS
3. Dr. B. K. Tiwari, MS (A&E)
4. Dr. P. K. Dalmia, Nodal Officer MOI/C BMW
5. Dr. Alok Agrawal, HOD (Paeds)
6. Dr. Naveen Kumar, Incharge SNCU
7. Dr. Yogesh Khushwaha, HOD Medicine
8. Dr. Banarsi, CCMO
9. Dr. Anupma Singh, Incharge Eye
10. Dr. M. N. Singh, (radiology)
11. Dr. Sabrina Barua, Incharge infection control committee, incharge microbiology
12. Dr. Nakhate, Incharge pathology, blood bank
13. Dr. Sanjeev, Incharge Anaesthesia/ PC
14. Dr. S. Gambhir, HOD Ortho.
15. ANS Sunta
16. Mrs. A. P. Negi, Nursing Sister Incharge BMW
17. Mr. Mohd Sameem, AE Electrical PWD
18. Mr. Pushpender, IE Civil PWD
19. Mr. S. K. Jain, Store Keeper (Surgical/ general)
20. Mr. Dhinesh Kumar, Store Keeper (Drug/Lab)
21. Mr. Shahid Tanweer, Purchase Assistant

The meeting was started with the introduction of new Bio-medical waste management Rules, March 2016. It has been announced that in LBS Hospital 12892 Kg autolavable waste (Yellow category), 10535 Kg autolavable waste (Red category), 192 Kg (autolavable white category), 422 Kg (autolavable blue category) wastes are generated during Jan 2016 to Dec 2016 as per Annual Report 2016. At the same time it was discussed that how to minimise the Bio-medical waste in LBSH by proper segregation.
collection, transportation, pre-treatment and training to all officials/staff of this hospital by the help of timely conducting trainings/orientation/ inductions. In year 2016, 181 personal trained for Bio-medical waste management. It has been also announced by MOH/C BMW that our hospital has got authorisation (upto may 2019), consent to operate (upto Oct 2018) By DPCC.

A team of NGT had visited in the month of Feb, 2017 and submitted their report to Hon’ble NGT and as per report following deficiencies observed by them are:

1. Improper solid waste management.
2. Poor segregation.
3. Records not shown.
4. ETP not working properly.
5. Shredder not working properly.
6. Poor sanitation, etc.

Hospital has given his reply to the Hon’ble court and still waiting for next hearing that is on 28th July 2017.

Again a team of Members constituted by DM East Delhi as per new guidelines of Bio-medical waste rules 2016 has visited on 9th May 2017 to our hospital and given satisfactory report.

A meeting again held under the chairmanship of MS LBSN on 1st July, 2017 at 11:30 AM regarding adopting new policy/ guidelines for autoclave/shredder install in LBS Hospital and it has been decided by the committee members that we are following new guidelines of Bio-medical waste rules 2016 that stopping final treatment (shredding). Only pre-treatment of certain category of Bio-medical waste is done in LBSH.

It has been decided in the meeting that Assistant Engineer (Civil) PWD and Assistant Engineer (Electrical) are directed to submit their monthly reports regarding ETP Plant and rainwater harvesting system and solar water heating system.

(Action: AE (Electrical), AE (Civil) PWD)

AE electrical are also directed to maintain a log book of ETP and submit his report on monthly basis. He is also directed to take action regarding cleanliness of rooms of ETP and its surrounding areas. MS LBSH also directed to AE (Electrical) to give clarification regarding ETP/STP after consultation with their executive Engineer that as per pollution control board norms a hundred bedded hospital should have ETP (not STP).

(Action: AE (Electrical))

Jt Civil PWD was also directed to ensure that ETP must be connected to all places of the hospital including Lab, Blood bank, microbiology centre as well as Bio-medical waste treatment plant centre where all trolley were washed and also furnish a diagrammatic chart indicating all connections. JT Civil PWD was also directed to furnish the details of
construction of separate rooms with trolley washing area nearby Bio-medical waste autoclave room as soon as possible.

(Action:- AE (Civil) PWD)

It has been pointed out that as per new norms of Bio-medical waste bar coding system must be installed in Health care facility centre till 31 March 2017. The Medical Superintendent has directed the PO to look into this matter and install the above system as early as possible.

(Action:- Purchase Officer)

As per norms of Bio-medical waste rules 2016 health check-up and immunisation are mandatory for all health care employees. MS LBSH are directed to HOD (Medicine) to make a protocol so that all hospital employees may avail the above said facilities.

(Action:- HOD Medicine)

DMS has directed to all stores keepers/officials and purchase officers that material related to Bio-medical waste management must be present in hospital at anytime and MOI/C BMW has directed to give a fresh demand regarding all items related with Bio-medical waste as per New RC of Delhi Govt. to purchase officer.

(Action:- Purchase Officer, MOI/C BMW, Mr. Shahiq Tanveer, Mr. SK Jain, Store Keeper (Surgical/ general) Mr. Dinesh, Store Keeper (Drug/Lab))

All clinical in-charge of this hospital have been directed by MS LBSH to ensure that staff working under them must follow Bio-medical waste rules 2016 and help them for its facilitation.

(Action:- All clinical in-charges)

As per norms of Bio-medical waste Rules 2016 induction training is must at entry level and annually in lbs hospital to all its employees. MOI/C BMW and MOI/C microbiology has been designated for Doctors, and ANS Kanta Ahuja, ANS Sunita, Nursing sister AP Negi with help of other staff have been designated for staff nurses, paramedical/Nursing Orderlies/SAFAI KARAMCHARI employees to make a protocol for above mentioned training.

(Action:- MOI/C (BMW), MOI/C (microbiology), ANS Kanta Ahuja, ANS Sunita, NS AP Negi.)

MS also directed ANS Sunita for deputing a staff Nurse (Mr. Navdeep) for a visit to common Bio-medical waste treatment facility centre premises (M/S SMS water graced PVI Ltd.) once in a month (Fourth Saturday) and the concerned official will submit his report to MOI/C BMW.

(Action:- MOI/C BMW, ANS Sunita/ANS Kanta Ahuja, Mr. Navdeep, S/N.)

Meeting ended with vote of thanks.

(Dr. P.K. Dalmia)
MOI/C BMW