



29/06/2022  
(ENQUIRY COUNTER)  
DELHI POLLUTION CONTROL COMMITTEE  
DEPARTMENT OF ENVIRONMENT  
GOVT. OF NCT OF DELHI  
4TH FLOOR, ISBT BUILDING,  
KASHMERE GATE, DELHI-110006

Ref. No.

Date: 27<sup>th</sup> June.

Sr. Scientific Officer  
Delhi Pollution Control Committee  
Deptt, Of Environment, Govt. of NCT of Delhi  
4<sup>th</sup> & 5<sup>th</sup> Floor ISBT Kashmiri Gate,  
Delhi-110006

**Sub: - Submission of Annual Bio Medical Waste Report FY 21-22**

Sir/Madam

Please find the enclosed herewith duly filled annual for the Period of Sep. 2021 to Dec.2021 of Bio Medical Waste generated at CK Birla Hospital, Punjabi Bagh, and Disposed of through SMS Water Grace BMW Management Pvt. Ltd., Nilothi, Delhi.

Thanking You,

For CK Birla Hospital

Authorized Signatory



Encl. as above

CK Birla Healthcare Pvt Ltd

57/41, Punjabi Bagh (W), New Delhi 110026, India

+91 11 41592200 | +91 11 42092198 (Fax) | reachus@ckbhospital.com | www.ckbhospital.com

Registered Office: Birla Tower, 8<sup>th</sup> Floor, 25 Barakhamba Road, New Delhi- 110001, India | CIN No. U74140DL2014PTC272562

**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)]

Sl. No.	Particulars		
1	Particulars of the Occupier	:	
	(i) Name of the authorized person (occupier or : operator of facility)	:	Mr. Amit Sharma
	(ii) Name of HCF or CBMWTF	:	CK Birla Hospital
	(iii) Address for Correspondence	:	57/41 Rd Number 41, West Punjabi Bagh, Punjabi Bagh, New Delhi, Delhi 110026
	(iv) Address of Facility	:	57/41 Rd Number 41, West Punjabi Bagh, Punjabi Bagh, New Delhi, Delhi 110026
	(v) Tel. No, Fax. No	:	+911141592200
	(vi) E-mail ID	:	reachus@ckbhospital.com
	(vii) URL of Website	:	www.ckbhospital.com
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	(State Government or <u>Private</u> or Semi Govt. or any other) Private
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: DPCC/ (11) (5) (01)/2021/BMW/NST/AVTH/5943548 Valid upto: 19/04/2026
	(xi). Status of Consents under Water Act and Air Act	:	DPCC/CMC/2021/5829968 Valid upto: 19/04/2026
2	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds: 50
	(ii) Non-bedded hospital Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	N/A
	(iii) License number and its date of expiry	:	F-24/1578/WD/DGHS/NH/HQ/2021-24
3	Details of CBMWTF	:	F-24/1578/WD/DGHS/NH/HQ/2021-24
	(i) Number of health care facilities covered by CBMWTF	:	SMS WATER GRACE BMW Pvt. Ltd.
	(ii) No. of Beds covered by CBMWTF	:	50
	(iii) Installed treatment and disposal capacity of CBMWTF;	:	N/A Kg / day
	(iv) Quantity of bio medical waste treated or disposed by CBMWTF	:	N/A Kg / day
4	Quantity of waste generated or disposed in Kg per Annum (on monthly average basis)	:	<i>Yellow Category: 96.81 Kg</i> <i>Red Category: 99.55 Kg</i> <i>White: 6.83 Kg</i> <i>Blue Category: 38.15 Kg</i> <i>General Solid Waste: 814.76 Kg</i>
5	Details of the Storage, Treatment, Transportation, Processing and Disposal Facility		
	(i) Details of the on-site storage	:	Size: 125 sq.ft.

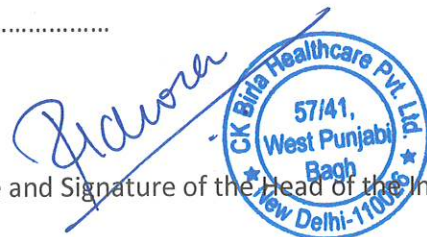
facility		Capacity: Provision of on-site storage : (Cold storage or any other provision)				
(ii)	Disposal facilities		Type of treatment equipment	No of Units	Capacity Kg/day	Quantity Treated or disposed in kg per annum
			Incinerators	N/A		
			Plasma Pyrolysis	N/A		
			Autoclaves	N/A		
			Microwave	N/A		
			Hydroclave	N/A		
			Shredder	N/A		
			Needle tip cutter or destroyer	N/A		
			Sharps	N/A		
			Encapsulation or concrete pit	N/A		
			Deep burial pits	N/A		
			Chemical disinfection:	N/A		
			Any other treatment equipment:	N/A		
			(iii)	Quantity of recyclable wastes sold to authorized recyclers after treatment in Kg per annum	:	Red Category (like plastic, glass, etc.) N/A Disposed to SMS WATER GRACE BMW Pvt. Ltd.
(iv)	No. of Vehicles used for collection and transportation of biomedical waste	:	01 nos. (Closed Body Vehicle for collection from CK Birla Hospital) <b>DL 1L7740</b>			
(v)	Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum			Quantity Generated	Where disposed	
			Incineration	N/A		
			Ash	N/A		
			ETP Sludge			
(vi)	Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of		SMS WATER GRACE BMW Pvt. Ltd. DJB,STP Neloithi, New Delhi 110041			
(vii)	List of member HCF not handed over bio-medical waste.		N/A			
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		Yes, Minutes Attached			

7	Details trainings conducted on BMW		
	(i) Number of trainings conducted on BMW Management		4
	(ii) Number of personnel trained		85
	(iii) Number of personnel trained at the time of induction		54
	(iv) Number of personnel not undergone any training so far		NIL
	(v) Whether standard manual for training is available?		YES
8	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		NIL
	(ii) Number of persons affected		NIL
	(iii) Remedial Action taken (Please attach details if any)		N/A
	(iv) Any Fatality occurred, details		N/A
9	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		N/A
	Details of Continuous online emission monitoring systems installed		N/A
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		N/A
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		N/A
12	Any other relevant information		(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from

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Name and Signature of the Head of the Institution



Date: 27<sup>th</sup> June.

Place:

ANNUAL BIO MEDICAL WASTE REPORT-2021										
		Red		Yellow		Blue		White		Cytotoxic
Months	No. of days	Bags	Weight	Bags	Weight	Bags	Weight	Bags	Weight	Weight
JANUARY										
FEBRUARY										
MARCH										
APRIL										
MAY										
JUNE										
JULY										
AUGUST										
SEPTEMBER	30	20	18.57	20	21.57	4	6.3	3	0.35	0
OCTOBER	31	85	138.26	84	136.92	30	61.67	19	8.94	0
NOVEMBER	30	110	154.91	98	153.3	24	44.585	33	11.33	0
DECEMBER	31	72	86.45	70	75.45	39	40.05	43	6.68	0
TOTAL	122	287	398.19	272	387.24	97	152.61	98	27.30	0
AVERAGE/MONTH		71.75	99.55	68	96.81	24.25	38.15	24.5	6.83	0
AVERAGE/DAYS			3.26		3.17		1.25		0.22	0.00





ANNUAL GENERAL WASTE REPORT-2021					
		Blue	Green	Others	Total
Months	No. of days	Weight	Weight	Weight	Weight
JANUARY	NA	NA	NA	NA	NA
FEBRUARY	NA	NA	NA	NA	NA
MARCH	NA	NA	NA	NA	NA
APRIL	NA	NA	NA	NA	NA
MAY	NA	NA	NA	NA	NA
JUNE	NA	NA	NA	NA	NA
JULY	NA	NA	NA	NA	NA
AUGUST	NA	NA	NA	NA	NA
SEPTEMBER	30	335.80	104.70	0	440.50
OCTOBER	31	646.20	218.40	0	864.60
NOVEMBER	30	854.30	248.60	0	1102.90
DECEMBER	31	622.40	228.65	0	851.05
TOTAL	122	2458.70	800.35	0.00	3259.05
AVERAGE/MONTH		614.68	200.0875	0.00	814.76
AVERAGE/DAYS		20.15	6.56	0.00	26.71



## INFECTION CONTROL COMMITTEE

**Date and Time: 10/12/2021**

**Venue: 2<sup>nd</sup> Floor Room No 213**

**Members Present: Dr Gurpreet Popli, Dr. Poonam Sidana, Dr. Nitin Garg, Dr. Rajiv Gupta, Dr. Ranoo Mann, Dr. Aatish, Ms.Indu Maggo, Ms. Deeksha Dhawan, Ms. Kirti Tyagi, Ms. Priya Banseria(ICN), Mr. Charanjit (HK), Mr. Harish.**

**Informed Absentees: Dr. Archana , Dr. Saggu**

S. No.	Name of Member	Designation / Department
1	Dr. Gurpreet Singh Popli	Director- Anesthesia & Critical Care
2	Dr. Nitin Garg	Intensivist
3	Dr. Poonam Sidana	NICU- Intensivist
4	Dr. Ranoo Mann Arora	Medical Superintendent (Chairman)
5	Dr. Aatish Malik	AMS
6	Ms. Indu Maggo	Nursing - Matron
7	Ms. Priya Banseria	Infection Control Nurse
8	Ms. Deeksha Dhawan	Lead – operations
9	Ms. Kirti Tyagi	Quality
10	Mr. Harish	Incharge - OT

### Minutes:

S. No.	Topic / Department	Discussion	Responsibility	EDC
1.	Covid preparedness	➤ Screening at entry for patients, attendants, and staffs to be done by Nursing staff.	NS	
2.	Mock drills related to COVID +ve patients	➤ Mock run to receive suspected or confirmed +ve patient. ➤ For suspected patients in labour, Room no. 210 will be dedicated and placed under negative pressure.	ICN &Quality  NS	
3.	Preparation of covid floor (second floor)	➤ Rooms for donning and doffing to be identified and	MS	