

*o/c*

JGH/ADMN/MS/DPCC-BMW/2019/ 084

Dated: February 1, 2019

To,

The Member Secretary  
Delhi Pollution Control Committee  
5<sup>th</sup> Floor, ISBT Building  
Kashmere Gate  
Delhi - 110006

*o/c*  
*02/12/19*

(ENQUIRY COUNTER)  
DELHI POLLUTION CONTROL COMMITTEE  
DEPARTMENT OF ENVIRONMENT  
GOVT. OF NCT OF DELHI  
5<sup>TH</sup> FLOOR, ISBT BUILDING,  
KASHMERE GATE, DELHI-110006

Sub: **Submission of Form IV-Annual Report (Hard copy) under BMW Rules for the year 2018**

Dear Sir,

Please find enclosed herewith hard copy of Form IV-Annual Report under BMW Rule for the period from 01/01/2018 to 31/12/2018.

The Form IV- Annual Report has already been submitted online on 31/01/2019.

Yours Sincerely

*Nishith*  
**Dr. Nishith Mittal**  
Medical Superintendent  
**DR. NISHITH MITTAL**  
MEDICAL SUPERINTENDENT  
JAIPUR GOLDEN HOSPITAL  
Sector-3, Rohini, Delhi-110085

Encl:

- Form IV (Annual Report)
- Copy of Online report
- Quantity of Bio medical waste generated in 2018
- Minutes of Bio Medical waste management Committee meetings held in 2018
- Copy of Agreement with Biotic Waste Solutions



**Form - IV**  
**(See rule 13)**  
**ANNUAL REPORT**

[To be submitted to the prescribed authority on or before 30<sup>th</sup> 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 authorised person (occupier or operator of facility)	:	Dr. NISHITH MITTAL
	(ii) Name of HCF or CBMWTF	:	JAIPUR GOLDEN HOSPITAL
	(iii) Address for Correspondence	:	2, INSTITUTIONAL AREA, SEC-3,
	(iv) Address of Facility	:	ROHINI, DELHI - 110085
	(v) Tel. No, Fax. No	:	27907000
	(vi) E-mail ID	:	ms@jghdelhi.net
	(vii) URL of Website	:	www.jghdelhi.net
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other) Trust.
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: D.P.C. (11)(5). (0538) / NH - 003 / BMW - 06 / 7772 .....valid up to .01.06.2022
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 13-01-2021
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds:..... 242
	(ii) Non-bedded hospital	:	
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	
	(iii) License number and its date of expiry	:	D&HS / NH / 133 31-03-2020
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:	:	_____ Kg per day

	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg/day																																																
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category : 20406.15 Red Category : 34549.1 White: 1478.47 Blue Category : 12107.4 General Solid waste:																																																
5	Details of the Storage, treatment, transportation, processing and Disposal Facility																																																		
	(i) Details of the on-site storage facility	:	Size : 150 sq ft Capacity : 300 cu ft. Provision of on-site storage : (cold storage or any other provision) <i>Dedicated Bio Medical waste</i>																																																
	(ii) Details of the treatment or disposal facilities	:	<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/day</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td>- 0</td> <td></td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td>- 0</td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td>- 01</td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td>- 0</td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td>- 0</td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td>- 0</td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td>- 0</td> <td></td> <td></td> </tr> <tr> <td>Sharps encapsulation or concrete pit</td> <td>- 0</td> <td></td> <td></td> </tr> <tr> <td>Deep burial pits:</td> <td>- 0</td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td>- 0</td> <td></td> <td></td> </tr> <tr> <td>Any other treatment equipment:</td> <td>- 0</td> <td></td> <td></td> </tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum	Incinerators	- 0			Plasma Pyrolysis	- 0			Autoclaves	- 01			Microwave	- 0			Hydroclave	- 0			Shredder	- 0			Needle tip cutter or destroyer	- 0			Sharps encapsulation or concrete pit	- 0			Deep burial pits:	- 0			Chemical disinfection:	- 0			Any other treatment equipment:	- 0		
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	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.)																																																
	(iv) No of vehicles used for collection and transportation of biomedical waste	:																																																	
	(v) Details of incineration ash and ETP sludge generated and disposed		<table border="1"> <thead> <tr> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	Quantity generated	Where disposed																																														
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*waste collection room.*

	during the treatment of wastes in Kg per annum		Incineration Ash ETP Sludge
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of		BIOTIC WASTE SOLUTIONS PVT LTD.
	(vii) List of member HCF not handed over bio-medical waste.		
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		Yes
7	Details trainings conducted on BMW		
	(i) Number of trainings conducted on BMW Management.		140
	(ii) number of personnel trained		653
	(iii) number of personnel trained at the time of induction		280
	(iv) number of personnel not undergone any training so far		0
	(v) whether standard manual for training is available?		Yes
	(vi) any other information)		
8	Details of the accident occurred during the year		0
	(i) Number of Accidents occurred		0
	(ii) Number of the persons affected		0
	(iii) Remedial Action taken (Please attach details if any)		NA
	(iv) Any Fatality occurred, details.		No.
9.	Are you meeting the standards of air Pollution from the incinerator? 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 in place. How many times you have not met the standards in a year?		
11	Is the disinfection method or sterilization meeting the log 4		

	standards? How many times you have not met the standards in a year?		
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from

.....  
 ..... 01-01-2018 to 31-12-2018 .....  
 .....  
 .....

*Nishith*

Name and Signature of the Head of the Institution

Date: Feb 1, 2019  
 Place Delhi

**DR. NISHITH MITTAL**  
 MEDICAL SUPERINTENDENT  
 JAIPUR GOLDEN HOSPITAL  
 Sector-3, Rohini, Delhi-110085