



Kailash Deepak Hospital



Run & Owned by Deepak Gupta Memorial Foundation (Regd.),
5 - Vikas Marg, Karkardooma, East Delhi - 110092

Regd. Office: 88, Poorvi Marg, Vasant Vihar, New Delhi - 110057, Tel: 011- 35 35 35 35
E-mail : info@kailashdeepakhospital.com Website : www.kailashdeepakhospital.com

To,

Dated: 23/01/2025

Sr. Env. Engineer, WMC – I
Delhi Pollution Control Committee
Department of Environment,
Govt. of NCT of Delhi,
4th & 5th Floor, ISBT Building,
Kashmere Gate, Delhi – 110006

Ashu
24/1/25
(ENQUIRY COUNTER)
DELHI POLLUTION CONTROL COMMITTEE
DEPARTMENT OF ENVIRONMENT
GOVT. OF NCT OF DELHI
4TH FLOOR, ISBT BUILDING,
KASHMERE GATE, DELHI-110006

Subject: - Submission of "Annual Report" of Bio – Medical Waste of Kailash Deepak Hospital, 5 & 6, Institutional Area, Vikas Marg Extn. – II, Delhi - 110092

Sir,

Please find enclosed herewith Bio – Medical Waste "Annual Report" of Kailash Deepak Hospital, 5 & 6, Institutional Area, Vikas Marg Extn. – II, Delhi - 110092

This is for your information and record.

Thanking You,
Yours truly

Ajeet
Dr. Ajeet Kumar Singh
Chief Medical Superintendent
Kailash Deepak Hospital, Delhi

Dr. Ajeet Kumar Singh
Chief Medical Superintendent
For Kailash Deepak Hospital



Associated with **Kailash Group of Hospitals**

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 authorised person (occupier or operator of facility)	:	Dr. Ajeet Kumar Singh Chief Medical Supdt.
	(ii) Name of HCF or CBMWTF	:	Kailash Deepak Hospital
	(iii) Address for Correspondence	:	5 and 6, Institutional Area, Vikas Marg, Patn., Delhi - 110092
	(iv) Address of Facility	:	" "
	(v) Tel. No, Fax. No	:	011-35353535, 9711700426
	(vi) E-mail ID	:	accounts@kailashdeepakhospital.com
	(vii) URL of Website	:	http://www.kailashdeepakhospital.com
	(viii) GPS coordinates of HCF or CBMWTF	:	Latitude - 28° 38' 43" N Longitude - 77° 18' 03" E
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other) ✓
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: DPCC/(11)(5)(01)/2022/BMW/ NST/AUTH/311255-234valid up to 06/05/2027
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 06/05/2027
2.	Type of Health Care Facility	:	Multi
	(i) Bedded Hospital	:	No. of Beds:..... 150
	(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	:	DHS/NH/1655, 31/03/2025
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 : 18615.80 kg Red Category : 22080.59 kg White: 419.68 kg Blue Category : 6204.29 kg General Solid waste:																																																		
5	Details of the Storage, treatment, transportation, processing and Disposal Facility																																																				
	(i) Details of the on-site storage facility	:	Size : Capacity : Provision of on-site storage : (cold storage or any other provision)																																																		
	(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></td><td></td><td></td></tr> <tr><td>Plasma Pyrolysis</td><td></td><td></td><td></td></tr> <tr><td>Autoclaves</td><td></td><td></td><td></td></tr> <tr><td>Microwave</td><td></td><td></td><td></td></tr> <tr><td>Hydroclave</td><td></td><td></td><td></td></tr> <tr><td>Shredder</td><td></td><td></td><td></td></tr> <tr><td>Needle tip cutter or destroyer</td><td></td><td></td><td></td></tr> <tr><td>Sharps encapsulation or concrete pit</td><td></td><td></td><td></td></tr> <tr><td>Deep burial pits:</td><td></td><td></td><td></td></tr> <tr><td>Chemical disinfection:</td><td></td><td></td><td></td></tr> <tr><td>Any other treatment equipment:</td><td></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				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:			
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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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	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	M/s SMS WATER GRACE BMW 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. MOM attached
7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management.	83
	(ii) number of personnel trained	—
	(iii) number of personnel trained at the time of induction	—
	(iv) number of personnel not undergone any training so far	—
	(v) whether standard manual for training is available?	Yes, Biomedical waste Management
	(vi) any other information	
8	Details of the accident occurred during the year	
	(i) Number of Accidents occurred	1 (minor, NSI)
	(ii) Number of the persons affected	1
	(iii) Remedial Action taken (Please attach details if any)	Managed as per Hospital Policy
	(iv) Any Fatality occurred, details.	
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	—

Policy.

	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

January 2024 to Dec 2024.

Dr. Ajeet Kumar Singh
Chief Medical Superintendent
Kansh Deepak Hospital, Delhi

Name and Signature of the Head of the Institution

Date: 23/01/2025
Place: Delhi



BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-04

Venue: First floor Conference Room

Meeting held on: 24th June 2024, at: 12:30 PM

Attendees

S. No.	Name	Designation
1	Dr. M. S. Tanwar	Chair - Person
2	Dr. Sangita Singh	Member
3	Dr. Daisy Sharma	I.C.O.
4	Dr. Deepika Narang	Member
5	Ms. Janis	Member
6	Mr. Arpit Kumar	I.C.N.
7	Mr. S. K. Shukla	Member
8	Mr. Anil	Member

A Brief Introduction of the Waste Management Committee was done by Dr. Daisy Sharma

S. No.	Activity/ Point Discussed	Actionable Item	Responsibility	Time Line
1.	Review of MOM of previous biomedical waste management meeting.	—		
2.	Brief description on life cycle of waste was discussed which included waste generation, segregation, discarding of waste as per latest Biomedical Waste rules.			



BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-04

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3.	Data of the waste collected per month was presented.			
4.	Annual Report of Bio-Medical Waste	Annual report of BMW submitted to CPCB as per Government guidelines. The same is also available in the hospital website		
5.	Vaccination of BMW handlers	It was decided to vaccinate all staff handling biomedical waste with 3 doses of hepatitis B vaccine and injection TT.	HR	1 month
6.	Biomedical waste management in Oncology:	Since Oncology centre is starting at KDH, the process flow for disposal of cytotoxic waste was discussed	Maintenance	2 weeks
7.	Biomedical waste Audit.	BMW audit of the entire health care facility (done every 6 months) done in June 2024. Gaps and RCA CAPA discussed	BMW management committee	Ongoing
a.	Water logging at the entrance of CBMW storage area	The central biomedical waste storage area should be clean and dry.	Maintenance and Housekeeping	2 weeks
b	Bio medical waste segregation	Segregation and safe disposal of biomedical waste to be done at the point of generation by the person generating the waste	Nursing and infection control team	Ongoing
c.	Bin Bags	Plastic bag should be well fitted inside the bins	Housekeeping	With immediate effect



BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-04

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d.	BMW- Bins	BMW bins should be routinely checked by the in charges and housekeeping staff and it is to be made sure that all waste bins are in proper working condition	Housekeeping and nursing in-charges	With immediate effect
e.	Bio Medical Waste area	No food item should be kept near biomedical waste.	Nursing and infection control team	With immediate effect

Prepared By:

Mr. Arpit Kumar
Infection Control Nurse

Approved By:

Dr. Daisy Sharma
Microbiologist and Infection Control Officer



BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-04

Venue: First floor Conference Room

Meeting held on: 24th June 2024, at: 12:30 PM

ACTION TAKEN REPORT OF BMW MEETING OF DECEMBER 2023

S. No.	Activity/ Point Discussed	Actionable Item	Responsibility	Time Line	Closure Status
1	Review of MOM of previous biomedical waste management meeting.	—			
2-	Brief description on life cycle of waste was discussed which included waste generation, segregation, discarding of waste as per latest Biomedical Waste rules.	—			



BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

Venue: First floor Conference Room

KDH/BMW/MOM-04

Meeting held on: 24th June 2024, at: 12:30 PM

	as per latest Biomedical Waste rules.				
3.	Data of the waste collected per month was presented.				
4.	Biomedical waste protocol in Blood Centre	All reactive blood bags for HHH shall be autoclaved in the Blood Centre itself and then sent to central biomedical waste storage area.	Blood center In-charge	Ongoing	Ongoing
5.	Vaccination of BMW handlers	It was decided to vaccinate all staff handling biomedical waste with 3 doses of hepatitis B vaccine and injection TT as there has been joining of new staff	HR	1 month	Partially done
6.	Proper transport of BMW to central storage area.	Biomedical waste should be transported from the various areas of the hospital to the central storage area through a dedicated lift which should be cleaned with 1% sodium hypochlorite after use.	Housekeeping	With immediate effect	Ongoing
7.	Disposal of IV bottles	While discarding IV bottles, the leftover fluid in bottles should be drained off in the sink with connection to ETP before discarding the bottle in red bin	DNS	With immediate effect	Ongoing
8.	Medication preparation	Medication preparation was being done near biomedical waste bins. Medicine ampoules are broken near the waste bins and medicine is being prepared. Medication preparation to be done in a separate area.	Nursing	With immediate effect	Ongoing



BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

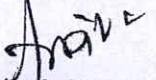
KDH/BMW/MOM-04

Venue: First floor Conference Room


Meeting held on: 24th June 2024, at: 12:30 PM

9.	Covid Waste	Covid waste Segregation and transport should be in double layered bins clearly labelled as COVID waste	Housekeeping	Housekeeping	Ongoing
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Prepared by:


Mr. Arpit Kumar
Infection Control Nurse

Approved by:


Dr. Daisy Sharma
Microbiologist and Infection Control Officer

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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-05

Venue: First floor Conference Room

Meeting held on: 17th January 2025, at 12:30 pm

Attendees

S. No.	Name	Designation
1	Dr. Ajeet Kumar Singh	Chief Medical Superintendent
2	Dr. Sangita Singh	Member (HOD- Lab.)
3	Dr. Daisy Sharma	Clinical Microbiologist & ICO.
4	Ms. Loveleen John	Member (Nursing Superintendent)
5	Mr. Arpit Kumar	I.C.N.
6	Mr. S. K. Shukla	Member (Maintenance)
7	Mr. Anil	Member (Housekeeping Supervisor)
8	Mr. Rohit	HR
9	Mr. Saroj	Store

Absentees- Ms. Bharti (Quality)



BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-05

Venue: First floor Conference Room

Meeting held on: 17th January 2025, at 12:30 pm

A Brief Introduction of the Waste Management Committee was done by Dr. Daisy Sharma

S. No.	Activity/ Point Discussed	Actionable Item	Responsibility	Time Line
1.	Review of MOM of previous biomedical waste management meeting.	—		
2.	Brief description on life cycle of waste was discussed which included waste generation, segregation, discarding of waste as per latest Biomedical Waste rules.			
3.	Data of the waste collected per month was presented.			
5.	Vaccination of BMW handlers	It was decided to vaccinate all staff handling biomedical waste with 3 doses of hepatitis B vaccine and injection TT.	HR	1 month
6.	Health checkup of BMW handlers	It was decided that health check-up of all biomedical waste handlers needs to be done annually and at the time of induction.	HR	1 month
7.	Disposal of vacutainers	It was decided that the vacutainers used for blood collection which are discarded in the wards/ICUs to be sent to the lab in red biomedical waste bag separately so that they can be pre-treated (autoclaved) before	NS, Lab, Infection Control Team	With immediate effect



BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-05

Venue: First floor Conference Room

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		sending to CBWTF for final disposal. Also, it needs to be mentioned on the outside of the red bag that the vacutainers are for discard. The vacutainers will be sent to the Central Biomedical waste storage area from the lab for autoclaving.		
8.	Biomedical waste Audit.	BMW audit of the entire health care facility (done every 6 months) done in December 2024. Important findings are discussed	BMW management committee	Ongoing
9.	Dogs were found to be roaming around the Central Biomedical Waste Storage Area	The dedicated area (Central Storage Area) for the safe storage of biomedical waste should be locked and inaccessible to animals and public.	Maintenance and Housekeeping team	2 weeks
10.	Unloading of raw fruits and vegetables done near the Central Biomedical Waste Storage Area	No food items to be kept near the Central Biomedical Waste Storage Area. The Kitchen staff should be aware of the timings of the arrival of the raw fruits and vegetables and unloading of these items should be done in a dedicated trolley and carried to the kitchen without unloading on the floor near the Central Biomedical Waste Storage Area.	Kitchen, Housekeeping team	2 weeks
11.	Transport of cytotoxic waste	It was decided that cytotoxic waste should be transported in a separate leak proof yellow container with Cytotoxic symbol to the Central Biomedical Waste Storage Area. Also, cytotoxic waste should be stored separately in storage area to avoid admixing with other Biomedical waste.	Maintenance, Housekeeping team	2 weeks



BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

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12.	PPE for Biomedical waste handlers	It was decided that Biomedical waste handlers should wear proper PPE (mask, cap, heavy duty gloves, disposable gowns, gum boots)	Housekeeping team	With immediate effect
13.	Water collection in front of mortuary.	It was found that there was collection of water in front of the mortuary which can be a breeding place for mosquitoes. It was also found that there was storage of unused biomedical waste bins and containers inside the mortuary. These need to be kept in the dedicated store for housekeeping items.	Housekeeping	2 weeks
14.	Collection of Biomedical waste	It was decided that Biomedical waste from different clinical areas should be collected in the morning from 6 am to 8 am.	Housekeeping	2 weeks
15.	Bio medical waste segregation	Segregation and safe disposal of biomedical waste to be done at the point of generation by the person generating the waste. Training and re-training to be given on the same.	Infection Control Team	With immediate effect
13.	Sharps Container	A puncture-proof container for sharps should be wall mounted near the patient bedside for safe disposal of sharps immediately after use.	NS, Maintenance, Infection Control Team	1 month



BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-05

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14.	Housekeeping items kept near BMW bins near patient area	Housekeeping items (mop, wiper, etc.) should be kept separately away from patient areas and also, Biomedical waste should not be stored near patient areas.	NS, Housekeeping team	With immediate effect
15.	Sorting of dirty linen done in clean area of laundry	<u>Hospital policy:</u> Linen is sorted into dirty and soiled/infected in the ward itself and again in the laundry. Infected linen should be placed in an impervious yellow bag that should be emptied into a designated area of soiled linen in laundry.	Laundry charge, In-charge, Housekeeping team	With immediate effect
16.	Award for best Biomedical waste management	It was decided that best Department for Bio-medical waste management should be awarded on 6 monthly basis to encourage correct practices in Biomedical waste handling.	CMS, Infection Control Team	6 months
17.	48 hour clause for Biomedical waste	In the previous BMW Rules 1998, it was mentioned that “no untreated biomedical waste shall be kept stored beyond a period of 48 hours”. But in the 2016 Rules, the clause was changed and only a few categories were put under this clause. BMW Rules 2016 says that “untreated human anatomical waste, animal anatomical waste, soiled waste and biotechnology wastes (Yellow Bags wastes) shall not be stored	Infection Control Team	With immediate effect



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		beyond a period of forty –eight hours”. Hence the sharps waste, and metal wastes can be discarded once the containers are $\frac{3}{4}$ filled. Thus, effectively the 48-hour clause is only for yellow bag waste. But efforts should be made to remove and treat waste as early as possible.		
18.	Annual visit to CBWTF (SMS WATER GRACE)	Annual visit to CBWTF (SMS WATER GRACE) was done by BMW committee of KDH on 16/07/2024 and visit report for the same received.	BMW committee	Ongoing

Prepared By:

Mr. Arpit Kumar
Infection Control Nurse

Approved By:

Dr. Daisy Sharma
Microbiologist and Infection Control Officer



BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-05

Venue: First floor Conference Room

Meeting held on: 17th January 2025, at 12:30 pm

ACTION TAKEN REPORT OF BMW MEETING OF JUNE 2024

S. No.	Activity/ Point Discussed	Actionable Item	Responsibility	Time Line	Closure
1.	Review of MOM of previous biomedical waste management meeting.	—			
2.	Brief description on life cycle of waste was discussed which included waste generation, segregation, discarding of waste as per latest Biomedical Waste rules.				
3.	Data of the waste collected per month was presented.				



BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-05

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4.	Annual Report of Bio-Medical Waste	Annual report of BMW submitted to CPCB as per Government guidelines. The same is also available in the hospital website			
5.	Vaccination of BMW handlers	It was decided to vaccinate all staff handling biomedical waste with 3 doses of hepatitis B vaccine and injection TT.	HR	1 month	Ongoing
6.	Biomedical waste management in Oncology:	Since Oncology centre is starting at KDH, the process flow for disposal of cytotoxic waste was discussed	Maintenance	2 weeks	Ongoing
7.	Biomedical waste Audit.	BMW audit of the entire health care facility (done every 6 months) done in June 2024. Gaps and RCA CAPA discussed	BMW management committee	Ongoing	Ongoing
a.	Water logging at the entrance of CBMW storage area	The central biomedical waste storage area should be clean and dry.	Maintenance and Housekeeping	2 weeks	Closed
b	Bio medical waste segregation	Segregation and safe disposal of biomedical waste to be done at the point of generation by the person generating the waste	Nursing and infection control team	Ongoing	Training Imparted
c.	Bin Bags	Plastic bag should be well fitted inside the bins	Housekeeping	With immediate effect	Closed ongoing 7
d.	BMW- Bins	BMW bins should be routinely checked by the in charges and housekeeping staff and it is to be made sure that all waste bins are in proper working condition	Housekeeping and nursing in-charges	With immediate effect	Ongoing



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e.	Bio Medical Waste area	No food item should be kept near biomedical waste.	Nursing and infection control team	With immediate effect	Closed and Ongoing
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Prepared By:

Mr. Arpit Kumar
Infection Control Nurse

Approved By:

Dr. Daisy Sharma
Microbiologist and Infection Control Officer