## OFFICE OF THE MEDICAL SUPERINTENDENT RAO TULA RAM MEMORIAL HOSPITAL GOVT. OF NCT OF DELHI, JAFFARPUR, NEW DELHI-110073.

No.F.RTRMH/V/29/BMW-Mangt/9/12-13/pt.2

Dated:

To

**Sr. Environment Engineer (WMC-I)**Delhi Pollution Control Committee,
Department of Environment, 4<sup>th</sup> Floor,
ISBT Building, Kashmiri Gate, Delhi-110006.

Sub: Annual Report of Bio Medical Waste Generated for the period January 2017 to December 2017 in RTRM Hospital.

Sir/Madam,

Please find enclosed herewith the Annual Report of the Bio Medical Waste generated in RTRM Hospital for the period from January, 2017 to December, 2017.

Yours faithfully,

(Dr. Manish Salhotra) I/C BMW

No.F.RTRMH/V/29/BMW-Mangt/07/12-13/pt.2 6 154

Dated: 22/6/18

Copy to:-

1. The Incharge (IT), RTRMH, Jaffarpur, N.D.-110073.

(Dr. Manish Salhotra) I/C BMW

## 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

| ١.  |  |       |                                      |  |  |  |
|-----|--|-------|--------------------------------------|--|--|--|
| lo. | Particulars  |       |                                      |  |  |  |
|     | Particular of the Occupier   |       |                                      |  |  |  |
|     | i) Name of the authorized person (occupier or operator of facility                       |       |                                      |  |  |  |
|     | facility facility  | ;     | Dr. Sangeeta Basu, MS RTRN           |  |  |  |
|     | ii) Name of HCF or CBMWTF  |       | Hospital                             |  |  |  |
|     | iii) Address for Correspondence  | ;     | Rao Tula Ram Memorial Hospital       |  |  |  |
|     | iv) address of Facility  | ;     | Jaffarpur, New Delhi-110073          |  |  |  |
|     | v) Tel. No., Fax. No   |       | Jaffarpur, New Delhi-110073          |  |  |  |
|     | (vi) E-mail ID   |       | 011-25318555                         |  |  |  |
|     | (vii) URL of Website   |       | msrtrmh@gmail.com                    |  |  |  |
|     | (viii) GPS coordinates of HCF or CBMWTF  |       |                                      |  |  |  |
|     | (ix) Ownership of HCF or CBMWTF  |       |                                      |  |  |  |
|     | (x). Status of Authorities   |       | Delhi Government                     |  |  |  |
|     | (x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules |       | Authorisation No.                    |  |  |  |
|     |  |       | Valid Up to - 09.03.2018             |  |  |  |
| 2   | (xi). Status of Consents under Water Act and Air Act Type of Health Care Facility        |       | Valid Up to - 23.02.2021             |  |  |  |
|     | (i) Bedded Hospital  |       | 25.02.2021                           |  |  |  |
|     | (ii) Non-bedded bospital (clinic   |       | 100 Bedded                           |  |  |  |
|     | (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  |       |                                      |  |  |  |
| 3   | Details of CBMWTF  |       | Under GNCTD                          |  |  |  |
|     | i) Number healthcare facilities covered by CBMWTF  |       | SMS Water Grace BMW Pvt. LTD.        |  |  |  |
|     | (ii) No of beds covered by CBMWTF  |       |                                      |  |  |  |
|     | (iii) Installed treatment and disposal capacity of CBMWTF:                               |       | Va/do:                               |  |  |  |
|     | CBMWTF   |       | Kg/day                               |  |  |  |
| 4   | Quantity of waste generated or disposed in Kg per annum                                  |       | Vollow Cata                          |  |  |  |
|     | (on monthly average basis)   |       | Yellow Category – 10,732 Kg          |  |  |  |
|     |  |       | Red Category - 7393 Kg White 750Kg   |  |  |  |
|     |  |       | 730Kg                                |  |  |  |
|     | · · · · · · · · · · · · · · · · · · ·  |       | 6                                    |  |  |  |
| 5   | Details of the Co  |       | 10,000,18                            |  |  |  |
|     | Details of the Storage, treatment, transportation, processing                            | ng ar | g and Disposal Facility              |  |  |  |
|     | (i) Details of the on-site storage facility  |       | Size: 5.90m X 2.85m X 3.075m         |  |  |  |
|     |  |       | Capacity: 159 M <sup>3</sup>         |  |  |  |
|     |  |       | Provision of on-site storage : (cold |  |  |  |
|     |  |       | storage or any other provision)      |  |  |  |

| 1 | Disposal facility  | Type of  | No  |   |  |  |  |  |
|---|--|--|---|---|--|--|--|--|
|   |  | treatment  | No. of unit   | Capacity                                | Quantity<br>treated or<br>disposed in<br>kg per<br>annum |  |  |  |
|   |  | Incinerators<br>Plasma<br>Pyrolysis  | 1   | Not in use                              | annum  |  |  |  |
|   |  | Autoclaves   | 2   | 850ltrs and one small autoclave for lab | 935.5Kg  |  |  |  |
|   |  | Microwave  |   | waste                                   |  |  |  |  |
|   |  | Hydroclave   |   |   |  |  |  |  |
|   |  | Shredder   | 1   |   |  |  |  |  |
|   |  | Needle tip<br>cutter or -<br>destroyer   | 45  | In use<br>currently                     |  |  |  |  |
|   |  | Sharps   |   |   |  |  |  |  |
|   |  | encapsulation<br>or - concrete   | 6   | Sharp<br>blaster                        |  |  |  |  |
|   |  | pit  |   | equipment                               |  |  |  |  |
|   |  | Deep burial pits:  |   |   |  |  |  |  |
|   |  | Chemical - disinfection:   |   | Sodium<br>hypoclorite<br>solution       |  |  |  |  |
|   |  | Any other treatment equipment  |   |   |  |  |  |  |
|   | (iii) Quantity of recyclable wastes sold to authorized recyclers after   | Red Category (like plastic, glass etc.)  |   |   |  |  |  |  |
|   | iv) No of vehicles used for collection and transportation of biomedical waste  | Nil  External transport vehicles from SMS water Grace Internal transport – covered red trolley & Yellow Trolle |   |   |  |  |  |  |
|   | (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum         | ETP Sludge   | Quantity Where generated disposed Incineration Ash ETP Sludge |   |  |  |  |  |
|   | (vi) Name of the Common Bio- :<br>Medical Waste Treatment Facility<br>Operator through which wastes are<br>disposed of       | SMS Water Gr   | 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. |  | Minutes of meeting enclosed.                                  |   |  |  |  |  |

| -  | D-A-II   |   |
|----|--|---|
| 7  | (i) Number of trainings conducted on BMW (ii) Number of trainings conducted on BMW Management (iii) 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? | 50 617 (training & Re-training) 271 Induction training 30 Yes |
|    | (vi) any other information)  |   |
| 8  | Details of the accident occurred during the year   |   |
|    | (i) Number of Accidents occurred   | Needle stick injury   |
|    | (ii) Number of the persons affected  | 10  |
|    | (iii) Remedial Action taken (Please attach details if any)   | Counselling, testing & PPE                                    |
| 9  | (iv) Any Fatality occurred, details.   | Nil   |
| 3  | Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?  | NA.   |
|    | 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?  | 8,475 Ltr<br>STP Installed                                    |
| 11 | Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?  | YES   |
| 12 | Any other relevant information   | (Air Pollution Control Devices attached with the Incinerator) |

| Certified        | that | the                           | above                                       | report                              | is     | for | el  |        |      |
|------------------|------|-------------------------------|---|-------------------------------------|--------|-----|-----|--------|------|
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| **************** |      | and the same and the same and | 01.0  | 1.2017 - 31.1                       | 2.2017 |     |     |        |      |

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Name and Signature of the Head of the Institution

Date: Place:

Dr. SANGEETA BASC Medical Superintendent R.T.R.M. Hospital Govt. of NCT of Delhi Mangur, New Delhi-73