

30 May 2021

Delhi Pollution Control Committee,
4th floor, ISBT Main Building,
Kashmere gate
Delhi -110006

Subject : Annual Report

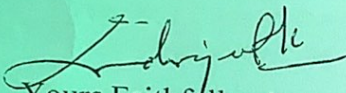
14/06/2021
(ENQUIRY COUNTER)
DELHI POLLUTION CONTROL COMMITTEE
DEPARTMENT OF ENVIRONMENT
GOVT. OF NCT OF DELHI
4TH FLOOR, ISBT BUILDING,
KASHMERE GATE, DELHI-110006

Dear sir,

We are enclosing herewith Annual Report in form IV & Form I pertaining and disposal of bio medical waste at our hospital, Max Super Specialty hospital (A unit of Max Healthcare Institute Ltd.,) FC-50, C&D Block, Shalimar Bagh, Delhi-110088 for the period from 01.01.2020 to 31.12.2020.

We are also enclosing herewith original yearly collection report for the year 2020 issued by biotic waste solutions Pvt. Ltd.

Thanks



Yours Faithfully, Indrajeet Kumar
General Manager - Operations
Max Super Specialty Hospital, Shalimar Bagh
For Max Super Specialty Hospital
(A unit of Max Healthcare Institute limited)

Encl. : as above

1. HIC MOM
2. Approval for 280 beds
3. Monthly BMW records
4. Biotic waste collection records
5. Authorization under Bio Medical Waste Management
6. Staff Training records

Max Super Specialty Hospital, Shalimar Bagh
FC - 50, C & D Block, Shalimar Bagh,
New Delhi - 110 088
For medical service queries or appointments,
call: +91-11-6642 2222, 7194 1000
www.maxhealthcare.in

Max Healthcare Institute Limited
Regd. Office: 401, 4th Floor, Man Excellenza, S. V. Road,
Vile Parle (West), Mumbai, Maharashtra - 400 056
T: +91-22 2610 0461/62
E: secretarial@maxhealthcare.com
(CIN: U72200MH2001PLC322854)



MC-2262

H. 2013/1177
May 8, 11, May 22,
Since Nov 9, 2017

Form – IV
(See rule
13)
ANNUAL REPORT

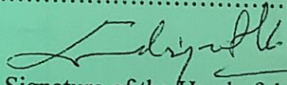
[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

S. No.	Particulars		
1	Particulars of the Occupier	:	
	(i) Name of the authorized person (occupier or operator of facility)	:	Indrajeet Kumar
	(ii) Name of HCF or CBMWTF	:	Max Healthcare Institute Ltd
	(iii) Address for Correspondence	:	FC-50, C&D Block, Shalimar Bagh
	(iv) Address of Facility	:	FC-50, C&D Block, Shalimar Bagh
	(v) Tel. No, Fax. No	:	49782222
	(vi) E-mail ID	:	ramachandran@maxhealthcare.com
	(vii) URL of Website	:	www.maxhealthcare.com
	(viii) GPS coordinates of HCF or CBMWTF	:	28.727711 & 77.152715
	(ix) Ownership of HCF or CBMWTF	:	Private Hospital
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	Authorization No.: DPCC/BMW/AUTH/NEWNO/2017/03301 Valid upto: 04/06/2022
	(xi). Status of Consents under Water Act and Air Act	:	DPCC/BMW/2019/24 Valid upto: 26/05/2024
2	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds: 280
	(ii) Non-bedded hospital Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	
	(iii) License number and its date of expiry	:	DGHS/NH/965 valid up to 31.03.2020 (renewal applied copy attached)
3	Details of CBMWTF	:	N/A
	(i) Number of health care facilities covered by CBMWTF	:	N/A
	(ii) No. of Beds covered by CBMWTF	:	
	(iii) Installed treatment and disposal capacity of CBMWTF;	:	_____ Kg /day N/A
	(iv) Quantity of bio medical waste treated or disposed by CBMWTF	:	_____ Kg /day N/A
4	Quantity of waste generated or disposed in Kg per Annum (on monthly average basis)	:	<i>Yellow Category: 49402.27 kg</i> <i>Red Category: 45530.61 kg</i> <i>White: 3574.557 kg</i> <i>Blue Category: 10717 kg</i> <i>General Solid Waste: Dry waste-- 99209.34 kg</i> <i>Kitchen waste-- 68741.40 kg</i>
5	Details of the Storage, Treatment, Transportation, Processing and Disposal Facility		
	(i) Details of the on-site storage	:	Size: 22 X 12 SQ FT

facility		Provision of on-site storage : (Cold storage or any other provision)			
		Type of treatment equipment	No of Units	Capacity Kg/day	Quantity Treated or disposed in kg per annum
(ii) Disposalfacilities		Incinerators			
		Plasma Pyrolysis			
		Autoclaves	1	129 LTR	
		Microwave			
		Hydroclave			
		Shredder			
		Needle tip cutter or destroyer			
		Sharps			
		Encapsulation or concrete pit			
		Deep burial pits			
		Chemical disinfection:			
		Any other treatment equipment:	1	12.5 KLD	
		(iii) Quantity of recyclablewastes sold to authorized recyclers after treatment in Kg per annum	:	Red Category (like plastic, glass, etc.) N/A	
(iv) No. of Vehicles usedfor collection and transportation of biomedical waste	:	DL1LS6674			
(v) Details of incineration ash and ETP sludge generated and disposed during the treatmentof wastes in Kg per annum			Quantity Generated	Where disposed	
		Incineration	N/A	N/A	
		Ash	N/A	N/A	
		ETP Sludge	13.07 KG	BIOTIC WASTE MANAGEMENT SOLLUTION LTD .	
(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposedof		BIOTIC WASTE MANAGEMENT SOLLUTION LTD .			
(vii) List of member HCF nothanded over bio-medical waste.		N/A			

	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during thereporting period	YES, minutes of meeting is attached.
7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management	24
	(ii) Number of personnel trained	105
	(iii) Number of personnel trained at the time of induction	NIL
	(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)	NIL
	(iv) Any Fatality occurred, details	NIL
9	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	Not applicable
	Details of Continuous online mission monitoring systems installed	Not applicable
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	YES All parameters are with in norms.
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you havenotmet the standards in a year?	YES
12	Any other relevant information	NA

Certified that the above report is for the period from 1st January-2020 to 31st December-2020


 Name and Signature of the Head of the Institution
 Indrajeet Kumar
 General Manager - Operations
 Max Super Speciality Hospital, Shalimar Bagh

Date:

Place:

Minutes of meeting

Forum: Infection Control Committee Meeting

Chairperson: Dr. K K Trehan

Attendees : Dr. K K Trehan, Dr. Archana, Mr. Inderjeet, Dr. Shakti Jain, Dr. Rohit Jaiswal, Dr. Poonam Sidhana, Dr. Anupriya, Ms. Annamma Thomas, Mr. Rajnish, Mr. Vijay, Mr. Arya, Dr. S.N. Basu, Dr. Shivani, Manjeet Kaur

Apologies: Dr. Anupriya

Date: 11.11.20

Location: Seminar Room 1

Minutes Of Meeting	Responsibility	Date	Action
1) Discuss about the live audit of HAI tracking.	Dr. Shakti Jain /ICN	Done	Closed
2) For SSL tracking OPD culture to be track adequately	ICN/Sis Jyoti	Done	Closed
3) Medication tray & kidney tray to be available in all units & must be used by the all nursing staff	NS/ANS/Incharges of units	Done	Closed
4) BMW to be segregate at the point of generation & also segregate according to policy	ICN, Nursing Educator	Done	Closed
5) Discussion done on Male Catheterization ideally done by the doctor's (Actually it's done by the male nurse staff, tacking to be done by the ICN).	Doctor's	Immediate effects	Going on
6) For HAI tracking RCA to be done on the same time (Already done on same day).	ICN	Done	Closed
7) Discussion done on Hand hygiene compliance (Audit already conducted by the ICN).	ICN	Done	Closed
8) Patient Safety Survey needs to be done.		Immediate effects	Going on



Healthcare	ICN/Nursing Educator	Immediate effects	Going on
9) Training needs to be given all healthcare worker about BMW management policy.			
10) OT audit regarding availability of BMW bins needs to be conducted by the ICN.	ICN	Immediate effects	Going on

K. K. Trehan

Dr. K K Trehan

Chairperson ICC

Minutes of meeting

Forum: Infection Control Committee Meeting

Chairperson: Dr. K K Trehan

Attendees : Dr. K K Trehan, Dr. Archana, Mr. Inderjeet, Dr. Shakti Jain, Dr. Rohit Jaiswal, Dr. Poonam Sidhana, Dr. Anupriya, Ms. Annamma Thomas, Mr. Rajnish, Mr. Vijay, Mr. Arya, Ms. Jincy, Ms. Manjeet, Mr. Nancy, Mr. Sandeep Dogra, Dr. Vineet Arora, Dr. Ajay Gupta, Dr. Rohit Jaiswal, Dr. Anupriya,

Apologies: Dr. Archana Singh

Date: 09.09.20

Location: Seminar Room 1

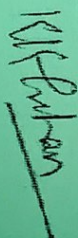
Minutes Of Meeting	Responsibility	Date	Action
1) Review of Previous Minutes of Meeting	Ms. Manjeet	Discussed	All previous Points Closed
2) Learning & Implementation of Donning & Doffing to be monitored at personal level.	Ms. Kathleen	10.09.2020 onwards	Ongoing
3) Discussion on Infection Control Quality Indicators	Ms. Annamma	Discussed	Discussed
4) Repeated Audits for Covid Areas	Ms. Manjeet	10.09.2020 onwards	Ongoing

Dr. K. K. Trehan
Chairperson Infection Control Committee

(Signature)

5) Doctors moving around from MICU-1 to other ICU's without precautionary measures. ICU Doctors coming to kitchen themselves for getting food.	Dr. Archana	On Immediate effect	Closed
6) General waste bins to be reduced as finance team is saying consumption is of these bins are more in SHBG as compared to other hubs. As per discussion by team members : Cannot be compromised.	Mr. Vijay/ Ms. Manjeet	Discussed	Discussion Closed in meeting
7) Requirement of Dirty Utility room in Ground Floor.	Mr. Vijay	Immediate effects	Work in Process
8) As per ICN Audit , broken & damaged bins to be replaced.	Mr. Vijay	10 .09.2020 onwards	Work in Process
9) Covid waste generated to be cleared twice a day.	Mr. Vijay	10 .09.2020 onwards	Initiated
10) Herbal plus soap availability for Foley's care	Mr. Vijay	09/09/20	Closed
9) Discuss about the live audit of HAI tracking	Dr. Shakti Jain /Ms. Nancy	Immediate effects	Ongoing
10) For SSI tracking OPD culture to be track properly	Sis Jyoti	Immediate effects	Process Initiated
11) Medication tray & kidney tray to be available in all units & must be used by the all nursing staff	Ms. Annamma	In progress	Going on

Dr. K. K. Trehan
Chairperson Infection Control Committee



Minutes of meeting

Forum: Infection Control Committee Meeting

Chairperson: Dr. K K Trehan

Attendees : Dr. K K Trehan, Dr. Archana, Mr. Inderjeet, Dr. Shakti Jain, Dr. Rohit Jaiswal, Dr. Poonam Sidhana, Dr. Anupriya, Ms. Annamma Thomas, Mr. Vijay, Mr. Arya, Ms. Jincy, Ms. Manjeet, Mr. Nancy, Mr. Sandeep Dogra, Dr. Vineet Arora, Dr. Ajay Gupta, Dr. Rohit Jaiswal, Apologies: Mr. Rajneesh

Date: 10.03.20

Location: Seminar Room 1

Minutes Of Meeting	Responsibility	Date	Action
Review of Previous Minute of Meeting	Ms. Manjeet	Discussed	All Points Closed
Discussion on Infection Control Quality Indicators	Ms. Annamma	Discussed	Discussed
Surgical prophylaxis Antibiotic Policy Revise	Dr. Shakti	16 March 2020	In Process
Basic or advanced Laundry module	Ms. Manjeet and MR. Vijay	16 March 2020	In Process
Hub Cutter needs to be available for used needles.	Local sub store	As per DPCC Guidelines-Not required	Discussion Closed in Meeting
IV Cannula caps not to be stored in container with chlorhexidine	Nurse supervisors	17 March Onwards	In Process
Mercury spill kit to be prepared	Housekeeping Manager, ICN's	16 March 2020	In Process
DPCC Audit points discussed	Concerned Stakeholders	16 March 2020	In Process

Dr. K.K. Trehan
Chairperson



Minutes of meeting

Forum: Infection Control Committee Meeting

Chairperson: Dr. K K Trehan

Attendees : Dr. K K Trehan, Dr. Archana, Mr. Inderjeet, Dr. Shakti Jain, Dr. Rohit Jaiswal, Dr. Poonam Sidhana, Dr. Anupriya, Ms. Annamma Thomas, Mr. Rajnish, Mr. Vijay, Mr. Arya, Ms. Jincy, Ms. Manjeet, Mr. Nancy, Mr. Sandeep Dogra, Dr. Vineet Arora, Dr. Ajay Gupta, Dr. Rohit Jaiswal,

Apologies: Dr. Anupriya

Date: 18.06.20

Location: Seminar Room 1

Minutes	Responsibility	Date	Action
Review of Previous Minute of Meeting	Ms. Manjeet	Discussed	All Points Closed
Discussion on Infection Control Quality Indicators	Ms. Annamma	Discussed	Discussed
BUNDLE COMPLIANCE :- 1) Enhance knowledge and improve skills of OT nurses for Foley's catheterization procedure. 2) Staff Nurses should be present during the Foley's catheterization procedure to maintain the sterility.	Ms. Kathleen/ Ms. Manjeet	18 June Onwards	Work in Process

Dr. K.K.Trehan
Chairperson

(Signature)

REGARDING NSI :-

- 1) Special training of the OT staff regarding the proper and safe handling of needles and re-capping of the needles should be stopped.
- 2) Staff should be educated effectively regarding the prevention of NSI so as to decrease the number of incidents.

Food utensils to removed from floor within one hour of food distribution or to be kept in pantry.

Meeting for Antibiotic Stewardship is to be Scheduled in September

To check credentialing of nurses for suturing in cath Lab & take required actions.

Random culture has been taken from different articles in the department in the month of May and no growth noticed in culture.

Ms. Kathleen/ Ms. Manjeet	25 June 2020	Work in Process
Mr. Rajeev Malhotra	Immediate	Process Initiated by F & B Head
Dr. Shakti	5 July 2020	In Process
Ms. Annamma	5 July 2020	In Process
Dr. Shakti	Discussed	Discussed

Dr. K.K. Trehan
Chairperson



MSSH/SHB/MRD/

August 17, 2020

Medical Superintendent (Nursing Homes)
Directorate of Health Services
Government of NCT of Delhi
Swasthaya Sewa Nideshalaya Bhawan
F-17, Karkardooma,
Delhi - 110032.

Sub. : Application for renewal of Nursing Home Registration No. 965 for the year 2020-2023 - Max Super Speciality Hospital (a unit of Max Healthcare Pvt Ltd), FC-50 C & D Block Shalimar Bagh, Delhi - 110088.

Dear Sir,

With reference to your letter F.24/965/NW/NH/DGHS/HQ/2020-23/5879 dated 29.06.2020 wherein you have observed deficiencies in documents put forth by the Hospital along with the application dated May 20, 2020 & directed the Hospital to submit a compliance report for processing our renewal of Nursing Home Registration No. 965 for the year 2020-2023 for 280 Beds, we are submitting the compliance report with all necessary supportive as per the list provided by you along with the letter.

We would request you to renew the above nursing home registration certificate issued to our Hospital, for the period 2020-2023.

Thanking you

Yours faithfully
For Max Super Speciality Hospital
(a unit of Max healthcare Pvt Ltd.)

Dr Archana Bajaj
Medical Superintendent
Max Hospital Shalimar Bagh
Max Super Speciality Hospital
FC-50, C&D Block, Shalimar Bagh
New Delhi-110 088

Encl. : as above

Max Super Speciality Hospital, Shalimar Bagh
FC - 50, C & D Block, Shalimar Bagh, New Delhi - 110 088
For patient related queries or appointment, call: +91-11-6642 2222, 7194 1000

Max Healthcare Institute Limited

(CIN: U72200MH2001PLC322854)

Regd. Office: 167, Floor 1, Plot-167A, Ready Money Mansion, Dr. Annie Besant Road, Worli, Mumbai-400 018.
Phone: +91-22-6660 4447/48/49, E-mail: secretarial@maxhealthcare.com
www.maxhealthcare.in



Month	Bio Medical waste										General Waste					
	Surgical waste (Infectious waste, sharps, needles)	Yellow- Incineration (Anatomical Waste & Soiled Waste)		Blue Autoclave (Glass- Bottles)		Yellow Cytotoxic- Incineration (Cytotoxic)		White- Sharp		Total Bags	Total Weight (in KG's)	Dry Waste		Kitchen/ Food Waste		
		No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight in KG's			No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	
Jan-20	914	5185.13	842	4434.45	509	970.59	50	288.86	947	520.17	3262	11399.2	2867	9191.28	2662	8675.60
Feb-20	816	5177.95	777	3431.00	350	946.27	31	341.91	1159	286.83	3107	10183.66	2739	8702.83	2615	8102.00
Mar-20	901	4701.06	841	3692.94	467	951.18	36	322.55	1331	314.06	3576	9981.79	2918	9194.85	2679	8624.83
Apr-20	517	2307.840	465	1995.290	231	392.670	31	125.871	453	151.910	1697	4973.581	2344	7051.70	1740	5577.10
May-20	558	3311.598	653	3983.238	303	559.551	42	357.174	513	221.516	2069	8433.077	2321	5650.36	1246	3907.90
Jun-20	451	2435.21	549	2817.60	259	521.03	45	215.13	751	216.64	2055	6205.62	2524	8153.79	1135	4119.10
Jul-20	532	2469.506	593	2869.081	285	607.906	52	250.091	857	225.961	2319	6422.545	2720	8730.35	1712	5768.00
Aug-20	528	2061.79	590	2714.42	312	670.96	56	245.85	882	268.29	2368	5961.30	2749	8523.16	1325	5622.42
AUG COVID-19	104	628.36	199	1293.96	31	168.14			51	31.20	385	2121.65				
Sep-20	678	3006.22	619	2626.97	412	732.10	42	189.30	883	262.10	2634	6816.68	3119	8026.771	983	5114.09
SEPT COVID-19	203	1172.75	415	2100.22	87	341.01			92	67.17	797	3681.16				
Oct-20	770	3368.27	681	2872.57	378	663.08	39	179.14	595	236.07	2413	7319.13	2625	8663.94	975	4640.40
OCT COVID-19	166	1214.87	374	2068.24	120	513.60			182	103.97	842	3900.68				
Nov-20	614	2837.58	544	2547.95	278	715.16	36	149.64	423	206.43	1895	6456.75	2949	8745.36	891	4328.63
Nov/cov/d-19	181	1427.47	387	2295.74	126	687.41			176	133.74	870	4544.37				
Dec-20	616	3102.84	601	2949.559	368	783.408	34	115.03	490	230.622	2109	7181.461	3087	8574.95	844	4261.33
Dec/cov/d-19	165	1122.17	351	1928.48	90	492.941			160	97.9	766	3641.487				
TOTAL	8664	45530.61	9481	46621.713	4606	10717.00	494	2780.56	9945	3574.567	33164	109224.13	32962	99209.34	18807	68741.4

ANNUAL REPORT 2020.

NAME:- Max Super Speciality Hospital (A Unit Of Max Healthcare Institute Limited)

Address:- FC -50, BLOCK,C &D, SHALIMAR BAGH, DELHI

ID No-1206

Month	Bio Medical waste											Total Weight (In KG's)
	Red-Autoclave (Infected Plastic Waste)		Yellow- Incineration (AnatomicalWaste & Soiled Waste)		Blue- Autoclave (Glass- Bottles)		Yellow Cytotoxic- Incineration (Cytotoxic Contaminated Items)		White- Sharp		Total Bags	
	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight in KG's		
20-Jan	914	5185.13	842	4434.45	509	970.59	50	288.86	947	520.17	3262	11399.2
20-Feb	816	5177.95	777	3431	350	946.27	31	341.91	1159	286.83	3107	10183.66
20-Mar	901	4701.06	841	3692.94	467	951.18	36	322.55	1331	314.06	3576	9981.79
20-Apr	517	2307.84	465	1995.29	231	392.67	31	125.871	453	151.91	1697	4973.581
20-May	558	3311.598	653	3983.238	303	559.551	42	357.174	513	221.516	2069	8433.077
20-Jun	451	2435.21	549	2817.6	259	521.03	45	215.13	751	216.64	2055	6205.62
20-Jul	532	2469.506	593	2869.081	285	607.906	52	250.091	857	225.961	2319	6422.545
20-Aug	528	2061.79	590	2714.42	312	670.96	56	245.85	882	268.29	2368	5961.3
AUG. COVID-19	104	628.36	199	1293.96	31	168.14			51	31.2	385	2121.65
20-Sep	678	3006.22	619	2626.97	412	732.1	42	189.3	883	262.1	2634	6816.68
SEPT. COVID-19	203	1172.75	415	2100.22	87	341.01			92	67.17	797	3681.16
20-Oct	720	3368.27	681	2872.57	378	663.08	39	179.14	595	236.07	2413	7319.13
OCT. COVID-19	166	1214.87	374	2068.24	120	513.6			182	103.97	842	3900.68
20-Nov	614	2837.58	544	2547.95	278	715.16	36	149.64	423	206.43	1895	6456.75
Nov.covid-19	181	1427.47	387	2295.74	126	687.41			176	133.74	870	4544.37
20-Dec	616	3102.84	601	2949.559	368	783.408	34	115.03	490	230.622	2109	7181.461
Dec.covid-19	165	1122.17	351	1928.48	90	492.941			160	97.9	766	3641.487
TOTAL=	8664	45530.61	9481	46621.71	4606	10717	494	2780.56	9945	3574.557	33164	109224.1



DELHI POLLUTION CONTROL COMMITTEE

(Government of N.C.T. of Delhi)

4th Floor, S.C.T. Building, Kashmere Gate, Delhi - 110006

Website : <http://www.dpcc.delhi.govt.nic.in>

AUTHORISATION UNDER BIO MEDICAL WASTE MANAGEMENT RULES, 2016

FORM III

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

BMW Authorisation No. DPCC/BMW/AUTH/NEWNo/2017/03301

File number of authorization DPCC/(11)(5)(377)/-007/BMW-11

Date: 13-10-2017

(Authorization for operating a facility for generation, collection, reception, treatment storage, transport and disposal of Bio-Medical Wastes)

1. File number of authorization DPCC/(11)(5)(377)/-007/BMW-11

2. Ms. MAX HEALTHCARE INSTITUTE LTD an occupier/operator of the facility located at FC-50 BLOCK C and D SHALIMAR BAGH New Delhi - 110088 is hereby granted an authorization for

Activity Bio-Medical Waste : Generation, segregation, Collection, Storage

3. M/s. MAX HEALTHCARE INSTITUTE LTD is hereby authorized for handling of biomedical waste as per the capacity given below;

(i) Number of beds of HCF: 250
(ii) Quantity of Biomedical waste handled, treated or disposed: 360 Kg/Day

Type of Waste Category	Quantity permitted for Handling
(i) Yellow	130 Kg/Day
(ii) Red	160 Kg/Day
(iii) White (Translucent)	30 Kg/Day
(iv) Blue	40 Kg/Day

4. This authorization shall be in force for a period of Five Years valid upto 04-06-2022

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

Signature Dr. BMS REDDY

Designation : Sr. Env. Engineer (CDC)
Delhi Pollution Control Committee

* Terms and conditions of authorization

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

2. The occupier shall comply with the standards prescribed in Schedule II of Bio-Medical Waste Management Rules, 2016, for the discharge of the Waste Water / Effluent generated.

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

4. The person authorized shall not rent, lend, sell, transfer or otherwise transport the bio-medical waste without obtaining prior permission of DPCC.

5. 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 prescribed authority.

6. It shall be ensured that the Bio Medical Waste is finally treated within a period of 48 hours. If for any reason it becomes unavoidable, intimation 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.

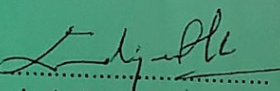
7. The occupier shall have a valid agreement with the operator of a facility authorized by DPCC for disposal of waste.

FORM -1

[(See Rule 4(o), 5(i) and 15(2))]

ACCIDENT REPORTING

1. Date and time of Accident : Nil
2. Type of Accident : Nil
3. Sequence of events leading to accident : Nil
4. Has the authority been informed immediately : Nil
5. The type of waste involved in accident : Nil
6. Assessment of the effects of the accidents on human health and the environment : Nil
7. Emergency measure Taken : Nil
8. Steps taken to alleviate the effects of accidents: Nil
9. Steps taken to prevent the recurrence of such an accident : Nil
10. Does your facility has an Emergency control policy? If yes give details: Yes

Signature 
Indrajeet Kumar
General Manager

Place: New Delhi

Mr. Indrajeet Kumar
General Manager - Operations
Designation
Max Super Speciality Hospital, Shalimar Bagh.....

Attendance Sheet

Session: B.M.W. Management

Trainer: Bhulachandran Date: 29/12/20

Time: 10:00

Venue: B-1

S. No	Emp. Code	Name	Designation	Department	Location	DOI	Cell No.	Supervisor	Signature
1	464	Yuvraj	H.K	H.K	S.H.B.V	16/1/20	93/555962	Bhulachandran	Indira
2	1155	Chaitan Jha				6/3/20	93/2001110		Chaitan
3	432	Pranav Son				6/4/20	72015-8 2425		Pranav
4	215	Vishal Kumar				11/8/20	7031196285		Vishal
5	201	Mehar Singh							Mehar
6	516	Deepak							Deepak
7	415	Shivam							Shivam
8									
9	536	Chaitan							Chaitan
10	524	Arjun							Arjun
11	648	Chaitan							Chaitan
12									
13									
14									
15									
16									
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18									
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Trainer Signature:

[Signature]