



महाराजा अग्रसेन अस्पताल
Maharaja Agrasen Hospital

West Punjabi Bagh, New Delhi-110026

EP/F-174



Ref. No. MAH/ADMN/181-A/2025

Date: 24.06.2025

Sr. Scientific Officer
Delhi Pollution Control Committee
Deptt. of Environment, Govt. of NCT of Delhi,
4th & 5th Floor, ISBT Kashmere Gate,
Delhi-110006

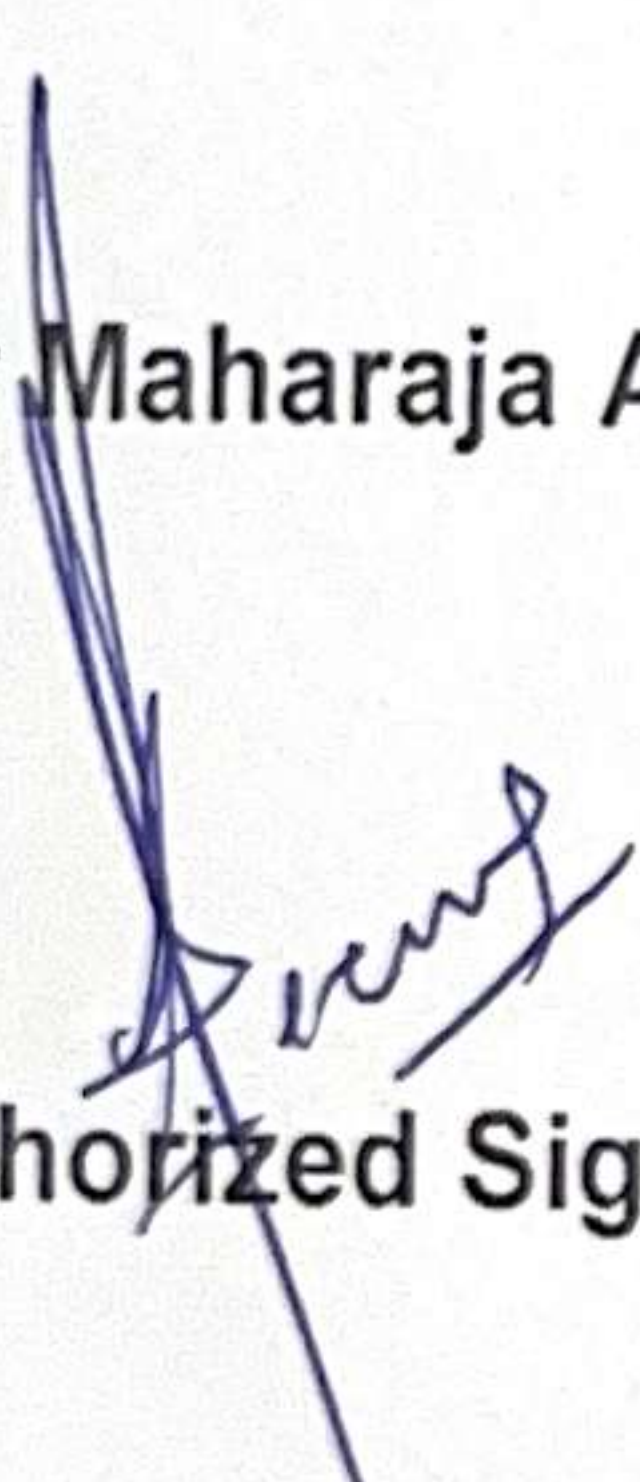
Sub.: Submission of Annual Bio Medical Waste Report (Form IV).

Sir,

Please find enclosed herewith duly filled Annual Report (Form IV) for the year of 1st January 2024 to 31st December 2024 for Bio Medical Waste generated at Maharaja Agrasen Hospital, West Punjabi Bagh, New Delhi-110026.

Thanking You,

For Maharaja Agrasen Hospital


Authorized Signatory

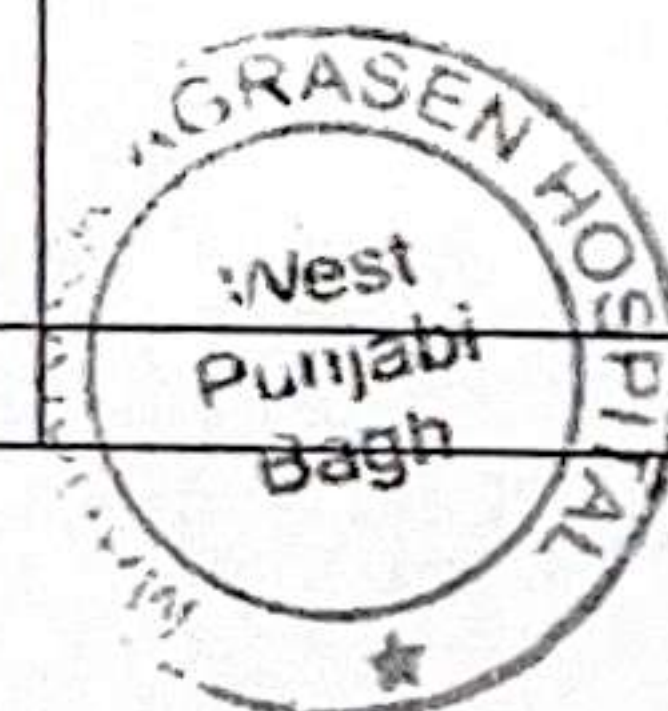
Encl.: Form IV
Minutes of Meeting- 07 pages



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 operator of facility)	:	Dr. Suparna			
	(ii) Name of the HCF or CBMWTF	:	Maharaja Agrasen Hospital			
	(iii) Address for Correspondence	:	Road No. 35, West Punjabi Bagh, New Delhi-110026			
	(iv) Address of Facility	:	Road No. 35, West Punjabi Bagh, New Delhi-110026			
	(v) tel. No, Fax. No.	:	011-40777777			
	(vi) E-mail ID	:	info@mahdelhi.org			
	(vii) Url of Website	:	www.mahdelhi.org			
	(viii) GPS Corrdinates of HCF or CBMWTF	:	28.6 N, 77.1 E			
	(ix) Ownership of the health Care Facility	:	Maharaja Agrasen Hospital Charitable Trust			
	(x) Status of Authorization under the Bio Medical Waste (Management and handling) Rules	:	DPCC/(11)(5)(01)/2024/BMW/NST/AUTH/94940786Q Valid Upto 11.06.2029			
	(xi) Status of Consents Under Water Act and Air Act	:	Granted (Certificate No.- G-45299)			
2	Type of Health Care Facility	:				
	(i) Bedded Hospital	:	No. of Beds : 300			
	(ii) Non-Bedded Hsopital(Clinic/Blood bank or Laboratory or Veternary Hospital or any other)	:	NA			
	(iii) License Number and its Date of Expiry	:	DHS/ NH/ 139 Dated: 08.05.2023 Valid Upto 31.03.2026			
3	Details of CBMWTF	:	SMS Water Grace BMW Pvt. Ltd.			
	(i) Number Healthcare facilites covered by CBMWTF	:	6391			
	(ii) No. of beds covered by CBMWTF	:	35232			
	(iii) Installed treatment and disposal capacity of CBMWTF	:	28800 kg/Day			
	(iv) Quantity of biomedical Waste treated or disposed by CBMWTF	:	16506 kg			
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow : 38,457.3 kg, Red: 77,501.8 kg, White : 1522.87 kg, Blue : 17,381.13 kg Annually (monthly report attached)			
		:				
		:				
		:				
5	Details of Storage, treatment, transportation, processing and Disposal Facility					
	(i) Details of the onsite storage facility	:	Size: 25 x 22 Ft.			
		:	Provision of on-site storage: Yes (Cold storage or any other provision): NA			
	(ii) Disposal Facilites	:	Type of treatment Equipment	No. of Units	Capacity kg/ day	Quantity Treated or disposed in kg per Annum
		:	Incinerators	NA		



Plasma Pyrolysis	NA		
Autoclaves	1		10295.017 kg per annum
Microwave	NA		
Hydroclave	NA		
Shredder	NA		
Needle tip cutter or Destroyer	NA		
Sharp encapsulation or Concrete Pit	NA		
Deep burial pits	NA		
Chemical dsinfection:	NA		
Any other treatment equipment:	NA		

(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in Kg per annum	:	Red category (like plastics, glass, etc): Not Applicable (Disposed to SMS Water Grace BMW Pvt Ltd)		
(iv) No. of vehicles used for collection and transportation of Biomedical Waste	:	01 nos		
(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of waste in Kg per annum	:		Quantity generated	Where Disposed
	:	Incineration ash	NA	
	:	STP Sludge	NA	
(vi) Name of the Common Bio-medical Waste Treatment Facility Operator through which waste are disposed of	:	SMS Water Grace BMW Pvt. Ltd., DJB, STP Nilothi, New Delhi-110041		
(vii) List of member HCF not handed over bio medical waste	:	NA		
6 Do you have bio-medical waste Management committee ? If yes, attach minutes of the meetings held during the reporting period.	:	Yes, attached.		
7 Details training conducted on BMW	:			
(i) Number of trainings conducted on Bio-Medical Waste management	:	44		
(ii) Number of personnel trained	:	553		
(iii) Number of Personnel trained at the time of induction	:	1199		
(iv) Number of personnel not undergone any training so far	:	Nil		
(v) Wheher standard manual for training is available?	:	Yes		
(vi) Any other information	:	NA		
8 Details of accidents occurred during the year	:			
(i) Number of accident occurred	:	9		
(ii) Number of the person affected	:	Nil		
(iii) Remedial action taken (Pls. attach details if any)	:	Injection TT after injury, Vaccination with Injection Hepatitis B and ART as per standard protocol		
(iv) Any Fatility occured details	:	NA		
9 Are you meeting the standards of air pollution from the incinerator? How many times in last Year could not meet the standards ?	:	NA		



	Details of continuous online emission monitoring systems installed	:	NA
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	:	NIL (Met the Standards)
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	:	NIL (Met the Standards)
12	Any other relevant information	:	NA

Certified that the above report is the period from 01 January 2024 to 31 December 2024

Date: <i>New Delhi</i>	Name and Signature of the Head of the Institution Dr. Suparna- Additional Medical Superintendent
Place: <i>New Delhi</i>	



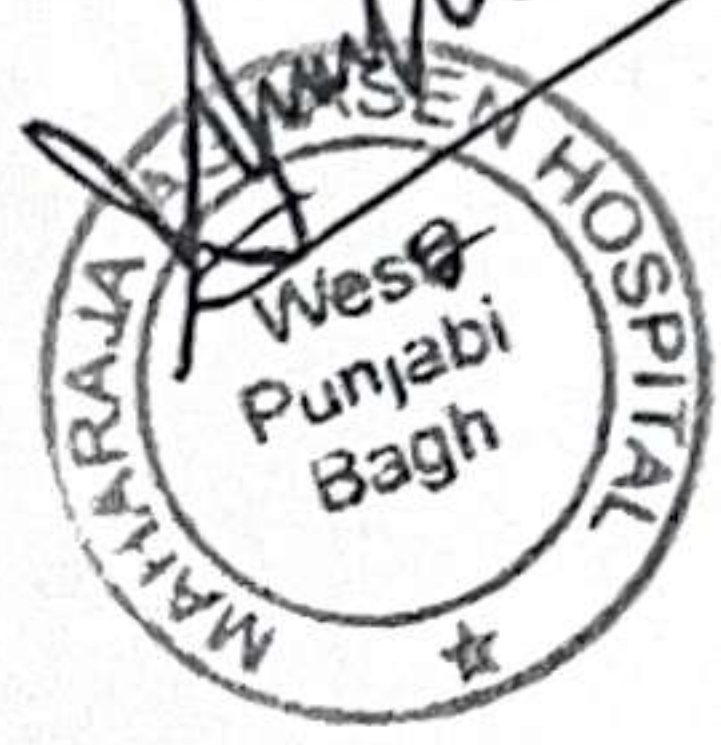
Maharaja Agrasen Hospital, Punjabi Bagh

Biomedical Waste Annual Report

Period of Data: 1 January 2024 to 31 December 2024

S No	DATE	YELLOW + CYTO		RED		BLUE		WHITE		TOTAL	
		Bags	Weight	Bags	Weight	Bags	Weight	Bags	Weight	Bags	Weight
1	Jan-24	1135	3033.39	1570	6384.14	339	1422.48	419	128.81	3463	10968.82
2	Feb-24	1102	3206.56	1524	6113.1	334	1320.52	397	127.03	3357	10767.21
3	Mar-24	1184	3182.34	1648	6031.51	333	1330.94	401	119.09	3566	10663.88
4	Apr-24	1038	2406.7	1470	5231.54	326	1163.94	363	103.26	3197	8905.44
5	May-24	1026	2308.97	1547	5157.12	339	1122.88	369	131.57	3281	8720.54
6	Jun-24	1014	2690.56	1507	5935.53	321	1415.03	349	104.23	3191	10145.32
7	Jul-24	1107	3425.81	1533	6650.02	311	1424.06	423	118.15	3374	11618.04
8	Aug-24	1171	3619.59	1604	6912.88	338	1651.08	419	121.99	3532	12305.54
9	Sep-24	1443	4471.56	1919	8733.15	406	1938.392	537	153.864	4305	15296.97
10	Oct-24	1127	3283.91	1559	6850.86	320	1566.81	454	131.73	3460	11833.31
11	Nov-24	1066	3102.2	1525	6446.9	310	1323.51	420	120.22	3321	10992.83
12	Dec-24	1185	3725.708	1673	7075	358	1701.49	492	162.926	3708	12665.12
REPORT		13598	38457.3	19079	77501.8	4035	17381.13	5043	1522.87	41755	134883

[Handwritten Signature]





Maharaja Agrasen Hospital
Punjabi Bagh, New Delhi-26

Minutes of Meeting - Bio Medical Waste Management and support services Subcommittee

Date of Meeting : 22.01.2024

Time : 3 pm to 4 pm

Location : Microbiology lab (Basement)

The following points were discussed and decided that:

S.N.	Agenda	Discussion	Responsibility	Target date
1	Previous minutes	Previous minutes were discussed and actions taken were highlighted.		
2	Effectiveness of BMWM and support services subcommittee	It was informed that a report will be prepared on the effectiveness of the BMWM and support services sub-committee for the year 2023 and it will be submitted to Hospital Infection Control Committee.	Dr Swati Sagarika Mittal	3 days
3	Audit of CSSD and Laundry	It was informed that audit of CSSD and Laundry was done.	CSSD In Charge	3 days
		It was informed that racks were needed from infection control perspective for keeping clean linen in the packing area which is currently being kept in plastic tubs on the floor. The same has to be procured by CSSD after due approval from management.		
		It was discussed that unidirectional flow of linen must be maintained in Laundry. Personnel handling dirty linen must wear appropriate personal protective equipment.	Laundry In Charge	Continuous process
4	Biomedical waste storage area	It was discussed that the hand washing sink in the biomedical waste storage area was found rusted and must be replaced.	Sanitary inspector Ms Reema Phogat/ Mr Sachin/Sr A.O	2 days

Dr. Swati Sagarika Mittal
Associate Consultant Microbiologist/
BMWM officer

Dr. Suparna Jha
Additional MS/ Co-Chairperson

Dr. S S Srivastava
Additional MS/ Chairperson BMWM subcommittee



Maharaja Agrasen Hospital
Punjabi Bagh, New Delhi-26

Minutes of Meeting - Bio Medical Waste Management and support services Subcommittee

Date of Meeting : 15.02.2024

Time : 11 am to 11:30 am

Location : MD Office

The meeting was presided over by the Medical Director.

The following points were discussed and decided that:

S.N.	Agenda	Discussion	Responsibility	Target date
1	Previous minutes	Previous minutes were discussed and actions taken were highlighted.		
2	Audit on biomedical waste segregation	It was discussed that audits on biomedical waste segregation will be done at all locations of the hospital. On-site trainings will be given to healthcare workers with pre-test and post-test on biomedical waste segregation at all locations.	Infection control nurse	3 weeks
3	Disposal of biomedical waste from Central store	It was informed by store-in-charge that all short-expiry medicines are being returned to the vendor and no expired medicines are retained in central store. For awareness of the store staff, it was decided that all staff of the central store will be trained on the disposal of biomedical waste as per Biomedical waste guidelines, 2016.	Infection control nurse	1 week

Swati Sagarika Mittal
15/2/24

Dr. Swati Sagarika Mittal
Consultant Microbiologist/ BMWM officer

Dr. S S Srivastava
16/02/2024

Dr. S S Srivastava
Additional MS/ Chairperson BMWM subcommittee



Maharaja Agrasen Hospital
Punjab Bagh, New Delhi-26

Minutes of Meeting - Bio Medical Waste Management and support services Subcommittee

Date of Meeting : 12.04.2024
Time : 2 pm to 2:30 pm
Location : Conference hall, Sixth floor

The following points were discussed and decided that:

S.N.	Agenda	Discussion	Responsibility	Target date
1	Previous minutes	Previous minutes were discussed and actions taken were highlighted.		
2	Quality indicators 2023	The Quality Indicators of Biomedical waste management, CSSD and Laundry for the year 2023 were discussed and highlighted.	-	-
3	SMS site visit	It was informed that the six-monthly visit to SMS water grace pvt ltd is due in April 2024. It was discussed that a team from the hospital will visit the site and submit a report.	Sr AO Ms Reema Sanitary Inspector ICN	3 weeks
3	Submission of BMW Annual Report 2023 to DPCC	It was discussed that the details for the BMW annual report required from BMW sub-committee have been mailed to Sr A O office and the complete report has to be submitted to DPCC and uploaded on the hospital website.	Sr AO Office Ms Reema	2 months

Swati Mittal
12/4/2024

Dr. Swati Sagarika Mittal
Consultant Microbiologist/
BMWM officer



Maharaja Agrasen Hospital
Punjabi Bagh, New Delhi-26

Minutes of Meeting - Bio Medical Waste Management and support services Subcommittee

Date of Meeting : 23.09.2024

Time : 12:30pm to 1 pm

Location : Conference hall, Sixth floor

The meeting was presided over by the Medical Director.

The following points were discussed and decided that:

S.N.	Agenda	Discussion	Responsibility	Target date
1	Previous minutes	Previous minutes were discussed and actions taken were highlighted.		
2	Consent to operate (DPCC) CTO & CTE	It was discussed that the hospital shall apply for the <u>CTE</u> consent to operate from DPCC for the new oncology building. Also the consent to operate for the existing building shall be evaluated & tracked for <u>renewal</u> .	Ms Reema Phogat	As per requirement
3	CBWTF site visit frequency	It was discussed that the guidelines for visiting the CBWTF will be re-visited and the frequency will be set accordingly.	Biomedical waste sub-committee	1 week
4	Reinforcement of Biomedical waste audits	It was reinforced that the fortnightly biomedical waste audits being done by nursing in-charges and housekeeping supervisors be done effectively so that the non-compliances are highlighted and actions taken.	Nursing In-charges Housekeeping supervisors	Continuous process
		An audit of any random location will be done on 26.09.2024 to assess the effectiveness of the routine audits.	Infection Control Nurses	26.09.2024
		Training on biomedical waste management will be scheduled for the resident doctors.	Infection Control Team	2 weeks
5	Regular use of linen cart covers for transport of clean linen	It was highlighted that covers are required for the carts transporting clean linen. It was decided that the quantity will be assessed and the cart covers procured after approval from appropriate authorities.	Laundry In-charge Ms Reema Phogat	1 week
6	Transport of sterile items in closed trolleys	It was informed that though closed trolleys are available in CSSD, due to shortage of CSSD housekeeping staffs, sterile items are currently being transported in open carts of respective locations. It was discussed that the requirement of housekeeping staff in CSSD for transport of sterile items will be analysed and implemented accordingly.	CSSD In-charge Infection Control Team	1 week
7	Audits of Reprocessing areas	It was discussed that the reprocessing of the reusable items on infection control aspects will be audited by the Infection Control Team as per the defined schedule.	Infection Control Team	Continuous process

Ⓟ A high emphasis should be given to dialysis reprocessing area, Dental OPD, radiology, Minor OT, emergency etc.



Maharaja Agrasen Hospital
Punjabi Bagh, New Delhi-26

8	E-waste and hazardous waste	Apart from biomedical waste, it was discussed that Ms Reema will look after the management and MoUs related to e-waste and hazardous waste.	Ms Reema Phogat	Continuous process
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9. Endoscopy Safety Audit | Endoscopy safety needs to be ensured & look for possibility to audit these processes through third party professionals/organisation to ensure high level of patient safety. — Dr. Swati / Mr. Mahendra

Swati Mittal
23/9/24

Dr. Swati Sagarika Mittal
Consultant Microbiologist/ BMW officer

Dr. Suparna Jha
Additional MS/ Co-Chairperson BMW subcommittee

Dr. S S Srivastava
Additional MS/ Chairperson BMW subcommittee



Maharaja Agrasen Hospital
Punjabi Bagh, New Delhi-26

Minutes of Meeting - Bio Medical Waste Management and support services Subcommittee

Date of Meeting : 21.11.2024

Time : 2 pm to 2:30 pm

Location : Microbiology lab, Basement

The following points were discussed and decided that:

S.N.	Agenda	Discussion	Responsibility	Target date
1	Previous minutes	Previous minutes were discussed and actions taken were highlighted.		
2	Housekeeping practices	It was discussed that the housekeeping supervisors will monitor the performances of the housekeeping staff properly. They will ensure that the required compliances for biomedical waste management and housekeeping practices are being met and records maintained.	Housekeeping supervisor	Continuous process
3	Updating BMWM Manual	The Biomedical waste management manual will be revised as necessary and circulated to all concerned.	Dr Swati Sagarika Mittal Quality Dept	1 month
4	Immunization status of housekeeping staff	It was discussed that as per BMW rules 2016 and hospital policy the immunization record (Hepatitis B and tetanus) of all newly recruited housekeeping staff (handling biomedical waste) will be updated.	Housekeeping supervisors Ms Reema Phogat	2 weeks

Dr. Swati Sagarika Mittal
Consultant Microbiologist/ BMWM officer

Dr. S S Srivastava
Additional MS/ Chairperson BMWM subcommittee



Maharaja Agrasen Hospital
Punjabi Bagh, New Delhi-26

Minutes of Meeting - Bio Medical Waste Management and support services Subcommittee

Date of Meeting : 24.12.2024
Time : 11.30 am to 12.30 pm
Location : Conference floor, Sixth floor

The following points were discussed and decided that:

S.N.	Agenda	Discussion	Responsibility	Target date
1	Previous minutes	Previous minutes were discussed and actions taken were highlighted.		
2	Blue puncture proof containers	It was discussed that as per BMW Rules 2016, amended 2018, the blue puncture proof containers shall be implemented for blue category waste with due approval from hospital administration and management.	BMWM sub-committee members Administrators Purchase Dept	1 month
3	Updating BMW segregation Poster	It was suggested that pictures be included in the BMW segregation poster. The updated poster shall be distributed hospital-wide.	Dr Swati Sagarika Mittal ICN Quality Dept	1 month
4	Common biomedical waste storage issues	It was discussed that signage of "Restricted Access" be placed at the entrance of common storage area. It was reinforced that the common biomedical waste storage area be kept under lock and key all the time except for when biomedical waste is being weighed.	Sanitary Inspector Housekeeping Supervisors Mr Sachin Dayal	1 week Continuous process
4	Updating members of Biomedical waste sub-committee	It was discussed that the list of members of the Biomedical waste sub-committee shall be updated.	Quality department	3 days

Swati Mittal
24/12/24

Dr. Swati Sagarika Mittal
Consultant Microbiologist/ BMWM officer

Dr. Suparna Jha
Additional MS/ Chairperson BMWM subcommittee