BLK-MAX
Super Speciality Hospital

June 2, 2026

BLK/MS/2026/JUNE/16

To,
Delhi Pollution Control Committee
Dept. of Environment (Govt. of NCT of Delhi),
4th & 5th Floor, ISBT Building
Kashmere Gate
Delhi-110 006.

Dear Sir,

Sub: Submission of Annual Bio-Medical Waste Report (Form-IV)
Dr. B.L. Kapur Memorial Hospital

Please find enclosed the annual report (Form IV) for the period January 2025 to December 2025 of Bio-Medical Waste generated at Dr. B.L. Kapur Memorial Hospital, Pusa Road, New Delhi-110 005.

Kindly acknowledge.

Thanking you,

Yours sincerely,
For Dr. B.L. Kapur Memorial Hospital
(a Unit of Lahore Hospital Society)

Dr. Kapil Goyla
Medical Superintendent

Dr. Kapil Goyla
Medical Superintendent
Dr. B. L. Kapur Memorial Hospital
Pusa Road, New Delhi - 110005

04/06/26
ENQUIRY COUNTER
DELHI POLLUTION CONTROL COMMITTEE
DEPARTMENT OF ENVIRONMENT
GOVT OF NCT OF DELHI
3RD FLOOR DMRC BUILDING
IT PARK SHASTRI PARK DELHI-110053

Encls:

Annexure-1	Form IV for annual report of Bio Medical Waste
Annexure-2	Form 1 for Accident report
Annexure-3	Copy of waste generated or disposed in kg. per annum (on Monthly average basis)
Annexure-4	Copy of Minutes of meeting

Dr. B. L. Kapur Memorial Hospital
(A Unit of Lahore Hospital Society)
Pusa Road, New Delhi-110 005
24-Hour Helpline: +91-11-3040 3040
E: info@blkhospital.com
www.blkmaxhospital.com

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 2025 to December 2025 of the preceding year, by the Occupier of Health Care Facility (HCF) or Common Bio-Medical Waste Treatment Facility (CBWTF)

Particulars	:	
Particulars of the Occupier	:	
(I) Name of the authorised person (occupier or operator of facility)	:	Dr. Kapil Goyla
(ii) Name of the HCF or CBMWTF	:	Dr.B.L.Kapur Memorial Hospital
(iii) Address For Correspondence	:	Pusa Road,New Delhi-110005
(iv) Address of Facility		same as above
(v) Tel.No, Fax.No	:	PH:- 011-3065 3961, F- +91-011-2575 2885
(vi) E-Mail ID	:	Info@blkhospital.com
(vii) URL OF Website		http://www.blkhospital.com/about-us/Compliances
(viii) GPS Coordinates of HCF OR CBMWTF		(State Goverment or private or semi Govt. or any other) society
(ix)) Ownership of the Health Care Facility	:	(State Goverment or private or semi Govt. or any other) society
(x) Status of Authorization under the the Bio-Medical Waste (Management and Handling) Rules	:	Applied Form
(xi) Status Of Consents Under Water Act and Air Act	:	DPCC/(11)(5)(01)/2023/BMW/NST/AUTH/5443344T Application No: 9358383
Type of Health Care Facility	:	
(I) Bedded Hospital	:	Number of beds: 600 (Details and document submitted to DHS)
(ii) Non Beded Hospital(Clinic/Blood bank or laboratory or Veterinary Hospital or any Other)	:	Not Applicable
(iii) License Number and its Date of Expiry	:	Applied Form
Details of CBMWTF	:	
(i) Number healthcare facilities coveredby CBMWTF		6338
(ii) No. of beds covered by CBMWTF		36207
(iii) Installed Treatment and disposable capicity of CBMWTF		28.8 ton per day
(iv) Quantity of biomedical waste treated or disposed by CBMWTF		17.160 tons / day

Quantity of waste generated or disposed in Kg per annum (on Monthly average basis)		Category	BMW /Month	Covid waste/Month
		Yellow Category	4,534.26	0.00
		Red Category	8,000.62	0.00
		White Category	418.77	0.00
		Blue Category	1,874.09	0.00
		Yellow Cytotoxic Waste	233.00	0.00
	:	General Solid Waste	15,251.14	

Details of storage, treatment, transportation, processing and Disposal Facility

(I) Details of the on-site storage facility	:	Size: 40.05 Square metre Capacity: 116 Cubic metre			
	:	Provision of on-site storage : Dedicated Bio medical waste collection room (Cold Storage or any other **YES**			
(ii) Disposal facilities		Type of treatment Equipements	No. of Units	Capacity kg/ day	Quantity Treated or Disposed in Kg Per Annum
		Incinerators	N/A		
		Plasma	N/A		
		Pyrolysis	N/A		
		Autoclaves	2	5.65 kg/day	2071.3 kg/ per annum
		Microwave	N/A		
	:	Hydroclave	N/A		
		Shredder	N/A		
		Needle tip cutter or Destroyer	N/A		
		Sharp encapsulation or Concrete Pit	N/A		
		Deep burial pits:	N/A		
		Chemcial disinfection:	N/A		

		Any other treatment equipment	N/A		
(iii) Quantity of recyclable wastes sold to authorized recycler after treatment in Kg per annum	:	Red Category (like plastic,glass etc.) Not Applicable (Disposed to BMW)			
(iv) No. of vehicles used for collection and transportation of Biomedical waste	:	05(CLOSE BODY VEHICLE AUTHORIZED FOR COLLECTION FROM BLK)			
(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	N/A		
	:	Ash	N/A		
	:	STP Sludge	Approx.296.5 Kgs/Month	IN BMW as per the guidelines 2016.	
(vi) Name of the Common Bio-medical Waste Treatment Facility Operator through which waste are disposed of	:	M/s SMS Water Grace BMW Pvt. LTD NILOTHI,			D.J.B , S.T.P, NEWDELHI-110.041
(vii) List of member HCF not handed over bio medical waste	:	Not Applicable			
Do you have BMW Management committee? If yes attach minutes of the meeting held during the reporting period	:	YES included in HICC MOM.			
Details training conducted on BMW	:	SEGREGATION, DISPOSAL & TRANSPORTATION			
(i) Number of Trainings conducted on bio medical waste management	:	48			
(ii) Numbers of personnel trained	:	177			
(iii) Numbers of Personnel trained at the time of induction	:	ALL new joiners			
(iv) Numbers of personnel not undergone any training so far	:	NA			
(v) Whether standard manual for training is available?	:	YES			
(vi) Any other information	:	Not Applicable			
Details of accidents occurred during the year	:	Discarding sharps			
(i) Numbers of accident occurred	:				
(ii) Numbers of the person affected	:	None			
(iii) Remedial action taken(Pls. attached details if any)	:	Injection T.T after injury and Injection Hep.B & ART started as per the standard protocol.			
(iv) Any Fatality occurred details	:	Nothing Occurred			
Are you meeting the standards of air pollution from the incinerator? How Many times in last Year could not the standards?	:	Not Applicable			
Details of continous online emission monitering systems installed	:	Not Applicable			
Liquid wate generated and treatment methods in place. How many times you have not met the standards in a year?	:	YES (meeting the standards)			
Is the disinfection method or sterlization meeting the log 4 standards? How many times you have not the standards in a year?	:	YES (meeting the standards)			
Any other relevant information	:	(Air pollution control devices attached with the incinerator)			Not Applicable

Certified that the above report is the period from January 2025 to December 2025

12.06.2026
New Delhi

Name and Signature of the Head of the Institution
Dr. Kapil Goyla
Medical Superintendent

BLK-MAX
Super Specialty Hospital

MONTHLY BIO-MEDICAL WASTE REPORT -2025

Month	No of Days	Yellow Waste		Yellow Waste (Covid)		Blue Puncture Proof Container		Blue puncture proof (covid)		Red Waste		Red Waste (Covid)		White Puncture Proof Container		White Puncture Proof Container (Covid)		Yellow Cytotoxic Waste		Yellow Cytotoxic Waste (Covid)	
		No. of bag	Weight	No. of bag	Weight	No. of bag	Weight	No. of bag	Weight	No. of bag	Weight	No. of bag	Weight	No. of bag	Weight	No. of bag	Weight	No. of bag	Weight	No. of bag	Weight
January	31	1085	4731.88	0.00	0.00	365	2002.42	0.00	0.00	1086	8375.43	0.00	0.00	328	388.35	0.00	0.00	60	229.57	0.00	0.00
February	29	974	4271.56	0.00	0.00	347	1931.06	0.00	0.00	977	7648.52	0.00	0.00	317	386.66	0.00	0.00	61	234.33	0.00	0.00
March	31	1042	4568.56	0.00	0.00	379	2044.25	0.00	0.00	1044	8159.16	0.00	0.00	341	412.24	0.00	0.00	56	226.48	0.00	0.00
April	30	1034	4559.06	0.00	0.00	371	1996.43	0.00	0.00	1033	8256.91	0.00	0.00	348	413.48	0.00	0.00	74	264.98	0.00	0.00
May	31	1066	4684.52	0.00	0.00	346	1813.94	0.00	0.00	1087	8353.49	0.00	0.00	320	393.08	0.00	0.00	67	239.48	0.00	0.00
June	30	1025	4183.94	0.00	0.00	297	1468.93	0.00	0.00	1094	7505.70	0.00	0.00	268	342.33	0.00	0.00	35	143.48	0.00	0.00
July	31	1035	4598.89	0.00	0.00	366	1999.32	0.00	0.00	1053	8499.34	0.00	0.00	331	419.35	0.00	0.00	67	254.96	0.00	0.00
August	31	1026	4497.91	0.00	0.00	346	1804.97	0.00	0.00	1042	8136.02	0.00	0.00	327	433.73	0.00	0.00	61	225.58	0.00	0.00
September	30	1007	4547.23	0.00	0.00	350	1847.13	0.00	0.00	1012	8180.39	0.00	0.00	338	448.18	0.00	0.00	66	257.63	0.00	0.00
October	31	1013	4525.27	0.00	0.00	366	1914.71	0.00	0.00	1006	8093.34	0.00	0.00	353	466.43	0.00	0.00	63	242.44	0.00	0.00
November	30	1011	4521.72	0.00	0.00	353	1840.77	0.00	0.00	921	7294.31	0.00	0.00	327	483.94	0.00	0.00	63	238.88	0.00	0.00
December	31	1049	4720.61	0.00	0.00	347	1825.19	0.00	0.00	963	7504.87	0.00	0.00	331	437.51	0.00	0.00	64	238.13	0.00	0.00
TOTAL	366	12367	54411.15	0.00	0.00	4233	22489.12	0.00	0.00	12318	96007.48	0.00	0.00	3929	5025.28	0.00	0.00	737	2795.94	0.00	0.00
Average		1030.5833	4534.26			352.75	1874.09			1026.5	8000.62			327.417	418.77			61.42	232.995		
Average/Day			148.66				61.45				262.32				13.73				7.64		
Waste Limit as approved BY DPCC- QUANTITY OF BIO MEDICAL WASTE HANDLED, TREATED AND DISPOSED/ DAY= 927 KG/ DAY			249KG/ DAY				246KG/DAY				361 KG/ DAY				71KG/DAY						

Please note :-	Applied Form

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- 15/1/2025 Time :- 09.10Pm
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	Needle stick injury while managing sharp waste
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero- coversion, staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection T.T. given, Viral marker sent ART started
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature : Durga Nand Pr
Name Durga Nand Prasad

Designation : Manager

Date :

Place : New Delhi

Signature :
Name : Dr. Atish Sinha

Designation : Medical Superintendent

Dr. Atish Sinha
Medical Superintendent
Dr. B. L. Kapur Memorial Hospital
Pusa Road, New Delhi-110 005

FORM I

[(See rules 4(o), 5(l) and 15(2)]

ACCIDENT REPORTING

1	Date and time of accident	Date :- N/A Time :- N/A
2	Type of Accident	Needle Stick Injury
3	Sequence of events leading to accident	N/A
4	Has the Authority been informed immediately	N/A
5	The type of waste involved in accident	N/A
6	Assesssment of the effects of the accidents on human and health and the environment	N/A
7	Emergency measures taken	N/A
8	Steps taken to alleviate the effects accidents	N/A
9	Steps taken to prevent the recurrence of such an accident	N/A
10	Does you facility has an Emergency Control policy ? If yes, give details	N/A

Signature : Durga Nand Pd.
Name Durga Nand Prasad 15467

Designation : Manager

Date :

Place : New Delhi

Signature :
Name : Dr. Atish Sinha

Designation : Medical Superintendent

Dr. Atish Sinha
Medical Superintendent
Dr. B. L. Kapur Memorial Hospital
Pusa Road, New Delhi-110 005

FORM I

[(See rules 4(o), 5(l) and 15(2)]

ACCIDENT REPORTING

1	Date and time of accident	Date :- N/A Time :- N/A
2	Type of Accident	Needle Stick Injury
3	Sequence of events leading to accident	N/A
4	Has the Authority been informed immediately	N/A
5	The type of waste involved in accident	N/A
6	Assesssment of the effects of the accidents on human and health and the environment	N/A
7	Emergency measures taken	N/A
8	Steps taken to alleviate the effects accidents	N/A
9	Steps taken to prevent the recurrence of such an accident	N/A
10	Does you facility has an Emergency Control policy ? If yes, give details	N/A

Signature : Durga Nand Pd

Name Durga Nand Prasad

Designation : Manager

Date :

Place : New Delhi

Signature :

Name : Dr. Atish Sinha

Designation : Medical Superintendent

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- 25/5/2025 Time :- 8:00 pm
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	While cleaning the Garbage
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature : Durga Nand

Name Durga Nand Prasad

Designation : Manager

Date :

Place : New Delhi

Signature :

Name : Dr. Atish Sinha

Dr. Atish Sinha
Medical Superintendent
Dr. B. L. Kapur Memorial Hospital
Pusa Road, New Delhi-110 005

Designation : Medical Superintendent

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- 24/5/2025 Time :- 11:00 pm
2	Type of Accident	Needle Stick Injury
3	Sequence of events leading to accident	While removing linen from OT
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature : Durga Nand Prasad

Name Durga Nand Prasad

Designation : Manager

Date :

Place : New Delhi

Signature :

Name : Dr. Atish Sinha

Designation : Medical Superintendent

Dr. Atish Sinha
Medical Superintendent
Dr. B. L. Kapur Memorial Hospital
Pusa Road, New Delhi-110 005

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- 11/5/2025 Time :- 1:00 Am
2	Type of Accident	Mucacutaneous
3	Sequence of events leading to accident	Human Bite by Patient
4	Has the Authority been informed immediately	Yes
5	The type of ,waste involved in accident	N/A
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature : Durga Nand M
Name Durga Nand Prasad

Designation : Manager

Date :

Place : New Delhi

Signature :
Name : Dr. Atish Sinha

Designation : Medical Superintendent

Dr. Atish Sinha
Medical Superintendent
Dr. B. L. Kapur Memorial Hospital
Pusa Road, New Delhi-110 005

FORM I

[(See rules 4(e), 5(i) and 15(2)]

ACCIDENT REPORTING

1	Date and time of accident	Date :- 13/5/2025 Time :- 4:00 Am
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	While cleaning the Garbage
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature : Durga Nand Pd

Name Durga Nand Prasad 5462

Designation :Sr. Manager

Date :

Place : New Delhi

Signature :

Name : Dr. Atish Sinha

Dr. Atish Sinha
Medical Superintendent
Dr. B. L. Kapur Memorial Hospital
Pusa Road, New Delhi-110 005

Designation : Medical Superintendent

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- 14/4/2025 Time :- 7:45 Am
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	While cleaning the Needle box
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature :
Name Durga Nand Prasad

Designation : Manager

Date : 5/5/25

Place : New Delhi

Signature :
Name : Dr. Atish Sinha

Designation : Medical Superintendent

Dr. Atish Sinha
Medical Superintendent
Dr. B. L. Kapur Memorial Hospital
Pusa Road, New Delhi-110 005

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- 7/4/2025 Time :- 4:40 Pm
2	Type of Accident	Other
3	Sequence of events leading to accident	While cleaning the red dustbin
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	N/A
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details·	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature : for

Name Durga Nand Prasad

Designation : Manager

Date : 5/8/25

Place : New Delhi

Signature :

Name : Dr. Atish Sinha

Designation : Medical Superintendent

Dr. Atish Sinha
Medical Superintendent
Dr. B. L. Kapur Memorial Hospital
Pusa Road, New Delhi-110 005

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- 15/6/2025 , Time :- 10:20 Am
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	While cleaning the medicinje trolley pick by Needle
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature :
Name Durga Nand Prasad

Designation :Sr. Manager

Date : 2/7/2025

Place :

Signature :
Name : Dr. Atish Sinha

Designation : Medical Superintendent

Dr. Atish Sinha
Medical Superintendent
Dr. B. L. Kapur Memorial Hospital
Pusa Road, New Delhi-110 005

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- N/A Time :- N/A
2	Type of Accident	Needle Stick Injury
3	Sequence of events leading to accident	N/A
4	Has the Authority been informed immediately	N/A
5	The type of waste involved in accident	N/A
6	Assesssment of the effects of the accidents on human and health and the environment	N/A
7	Emergency measures taken	N/A
8	Steps taken to alleviate the effects accidents	N/A
9	Steps taken to prevent the recurrence of such an accident	N/A
10	Does you facility has an Emergency Control policy ? If yes, give details	N/A

Signature : Durga Nand Pd.
Name Durga Nand Prasad

Designation : Sr. Manager

Date : 04-08-25

Place : New Delhi

Signature :
Name : Dr. Atish Sinha

Designation : Medical Superintendent

Dr. Atish Sinha
Medical Superintendent
Dr. B. L. Kapur Memorial Hospital
Pusa Road, New Delhi-110 005

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- 28/8/2025 Time :- 5.30 PM
2	Type of Accident	Needle Stick Injury
3	Sequence of events leading to accident	While cleaning OT-13
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature : Durga Nand Pd
Name Durga Nand Prasad
Designation :Sr. Manager
Date : 03-09-25
Place : New Delhi

Signature :
Name : Mr. Jitender Sharma
Designation : Medical Superintendent/Head- Hospital Operaitons

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- 22/8/2025 Time :- 6.50 AM
2	Type of Accident	Needle Stick Injury
3	Sequence of events leading to accident	While cleaning
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assesssment of the effects of the accidents on human and healthrand the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature : Durga Nand Pd

Name Durga Nand Prasad

Designation :Sr. Manager

Date : 03-09-25

Place : New Delhi

Signature :

Name : Mr. Jitender Sharma

Designation : Medical Superintendent/Head- Hospital Operaitons

FORM I *[(See rules 4(a), 5(i) and 15(2)]* ACCIDENT REPORTING		
1	Date and time of accident	Date :- 8/9/2025 Time :- 9:18 Am
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	While cleaning in OPD-9
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature : Durga Nand P.
Name Durga Nand Prasad

Designation :Sr. Manager

Date :

Place : New Delhi

Signature :
Name : Dr. Kapil Goyla

Designation : Medical Superintendent

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- 26/9/2025 Time :- 6:00 Am
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	While cleaning in Emergency
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature : Durga Nand Prasad

Name Durga Nand Prasad

Designation :Sr. Manager

Date :

Place : New Delhi

Signature :

Name : Dr. Kapil Goyla

Designation : Medical Superintendent

Dr. Kapil Goyla
Medical Superintendent
Dr. B. L. Kapur Memorial Hospital
Pusa Road, New Delhi - 110005

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- 24/9/2025 Time :- 10:05 Am
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	While assisting the during the cannulation
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature : Durga Nand Pd
Name Durga Nand Prasad

Designation :Sr. Manager

Date :

Place : New Delhi

Signature :
Name : Dr. Kapil Goyla

Designation : Medical Superintendent

Dr. Kapil Goyla
Medical Superintendent
Dr. B. L. Kapur Memorial Hospital
Pusa Road, New Delhi - 110005

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- N/A Time :- N/A
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	N/A
4	Has the Authority been informed immediately	N/A
5	The type of waste involved in accident	N/A
6	Assesssment of the effects of the accidents on human and health and the environment	N/A
7	Emergency measures taken	N/A
8	Steps taken to alleviate the effects accidents	N/A
9	Steps taken to prevent the recurrence of such an accident	N/A
10	Does you facility has an Emergency Control policy ? If yes, give details	N/A

Signature :
Name Durga Nand Prasad

Designation : Sr. Manager

Date :

Place :

Signature :
Name : Dr. Kapil Goyla

Designation : Medical Superintendent

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- 10/11/2025 Time :- 1:40 pm
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	While cleaning Laundry
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature : Durga Nand Pd.
Name Durga Nand Prasad
Designation :Sr. Manager
Date: 02-12-25
Place: New Delhi

Signature :
Name : Dr. Kapil Goyla
Designation : Medical Superintendent

Dr. Kapil Goyla
Medical Superintendent
Dr. B. L. Kapur Memorial Hospital
Pusa Road, New Delhi - 110005

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- 27/12/2025 Time :- 1:40 am
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	While cleaning in Laundry
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature : Durga Nand Pd.
Name Durga Nand Prasad

Designation :Sr. Manager

Date :

Place : New Delhi

Signature :
Name : Dr. Kapil Goyla

Designation : Medical Superintendent

FORM I

[(See rules 4(a), 5(l) and 15(2)]

ACCIDENT REPORTING

1	Date and time of accident	Date :- 19/12/2025 Time :- 4:45 pm
2	Type of Accident	Needle Stick Injury
3	Sequence of events leading to accident	While Collecting Nursing Scrubs in Laundry
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature : Durga Nand

Name Durga Nand Prasad

Designation :Sr. Manager

Date :

Place : New Delhi.

Signature :

Name : Dr. Kapil Goyla

Designation : Medical Superintendent

FORM I

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

ACCIDENT REPORTING

1	Date and time of accident	Date :- 2/12/2025 Time :- 7:40 Am
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	While cleaning
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assesssment of the effects of the accidents on human and health and the environment	May result in sero-conversion,staff is on follow up as per hospital policy. No effect on environment.
7	Emergency measures taken	Yes
8	Steps taken to alleviate the effects accidents	Injection TT given and sample for Viral Markers taken and sent
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does you facility has an Emergency Control policy ? If yes, give details	As per the hospital Needle stick injury policy, Staff has to follow it.

Signature : Durga Nand Pd.
Name Durga Nand Prasad

Designation :Sr. Manager

Date :

Place : New Delhi

Signature :
Name : Dr. Kapil Goyla

Designation : Medical Superintendent

F

A meeting of the Bio-Medical Waste Management Committee was held on 30th March, 2026 at 4:15 pm under the chairmanship of the undersigned for the half year ending. The following members were present:

S.No.	Attended by	Representatives	Attendance
1	Dr. Kapil Goyla	Chairman	Attended
2	Mr. Jitender Sharma	Secretary	Attended
3	Dr. Tarun Thukral	Members	Not Attended
4	Ms. Rosamma Jose	Members	Not Attended
5	Dr. Rajan Madan	Members	Not Attended
6	Dr. Tripti Sharan	Members	Attended
7	Dr. Gurbachan Singh	Members	Attended
8	Ms. Lalita Rani	Members	Not Attended
9	Ms. Geeta Rawat	Members	Not Attended
10	Ms. Shifali Hans	Members	Not Attended
11	Mr. Joseph PT	Members	Not Attended
12	Mr. Ravindar Singh	Invited Member	Attended
13	Dr. Deepak Tanwar	Invited Member	Attended
14	Ms. Anumol Joseph	Invited Member	Attended
15	Mr. Ramesh Kumar	Invited Member	Attended
16	Mr. Durga Nand Prasad	Invited Member	Attended
17	Mr. Manoj Kumar	Invited Member	Attended

Agenda of the Meeting :

Bio-Medical Waste Management Review Committee Half yearly meeting

Sl. No	MOM of todays meeting	Discussion	Responsibility	Timeline	Status
1	Training of all staff and helpers	Training of all staff and helpers involved in handling Bio-Medical Waste has been carried out in a phased manner during the period under review. A record of details of personnel trained is being maintained.	HK & ICN	Ongoing process	Under monitoring
2	Training of new joiners	Training of new joiners to the Hospital was reviewed. Those whose training was due were identified and their names included in the training schedule.	HK Department	as and when	Under monitoring
3	Yearly health check up	Yearly health check up of all personnel handling Bio-Medical Waste was carried out and up to date records are maintained.	HK Department	Done	Closed

4	Audit	The audit(s) carried out to check the efficiency of Bio-Medical waste collection, transport, storage and disposal procedures in the Hospital were ratified and detailed procedure for the next audit was drawn up. The audit report of BMW disposal in was presented. (1) **OCT-25** Compliance to Segregation was 96% ,storage was 95.2% and Transportation was 97% (2) **NOV-25** Compliance to Segregation was 94%, storage was 94% and Transportation was 96% (3) **DEC-25** Compliance to Segregation was 96.2%, Storage was 97% and Transportation was 96.9% .(4) **JAN-26** Compliance to Segregation was 96%, Storage was 97% and Transportation was 95.9% (5) **FEB-26** Compliance to Segregation was 97.2%, Storage was 97.4% and Transportation was 96.9% . (6) **MAR- 26** Compliance to Segregation was 95% ,storage was 96% and Transportation was 97% .	HK & ICN	Ongoing process	NA
5	Suggest/ views remedial measures	Members were requested to bring out any practical difficulties encountered in the training and allocation of manpower and disposal procedures of bio-medical waste and to take/suggest remedial measures.	NA	NA	NA
6	Use of PPE	It was reiterated that all personnel involved in handling Bio-Medical Waste should be instructed to exercise due care (strict use of PPE) in the discharge of their duties so that the chances of occurrence of any accident/spill is minimized.	HK Department	Ongoing process	Under monitoring
7	NSI Prevention	There is substantial decline in the NSI incidents in the last quarter (Oct 25-Mar 26). Awareness & educational training sessions are continuously provided to zero the NSI cases.	HK & ICN	Ongoing process	Under monitoring
8	Updates/Process	It was discussed on updates on any changes in bio medical waste management regulations.	HK & ICN	NA	NA
9	Compliances	All monthly & quarterly bio medical waste compliance of the existing quarters were closed on time.	Hk Department	31st March, 2026	Closed
10	Hand washing Practices	The importance of frequent hand-washing and observance of universal precautions was highlighted & discussed.	HK & ICN	Ongoing process	Under monitoring

All functionaries were requested to perform duties with utmost care and for Bio-Medical waste disposal

There being no further points, the meeting was declared closed.

BLK-MAX
Super Speciality Hospital

Attendance Sheet

Topic BMW MANAGEMENT COMMITTEE
Date 30/03/2026
Department

Subject Meeting - HALF YEARLY
Duration 25 minutes (4:15 pm)
Trainer –

S.No.	BLK-Max ID	Name	Designation	Department	Signature
1	15467	Durga Nand Prasad	Sr. MCR	HK	DurgaNad
2	13441	Dr. Deepak Tanwar	DGM	MA	
3	M032197	Jitender Kumar Sharma	DGM-OPS	OPS	
4	BLK27	Dr Tripti		Obstetrics	
5	BL 2814	Dr. Gurbachan Singh	Head-ER	ED	
6	390	MANOJ KUMAR	Store Keeper	Store	
7	188	Sanjeev	Manager	Surgery	
8	M032108	Ramesh Kumar	DGM	Engg	
9	BLK10424	Ravinder Kaur	DGM	Med. Admn	
10	BLK18524	DR KAPIL GOYLA	MS	Med Admn	
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Total no. of participants (10)
Remarks (if any)

Trainer's Signature

A meeting of the Bio-Medical Waste Management Committee was held on 29th April, 2025 at 3:00 pm under the chairmanship of the undersigned for the half year ending. The following members were present:

S.No.	Attended by	Representatives	Attendance
1	Dr. Atish Sinha	Chairman	Attended
2	Mr. Jitender Sharma	Secretary	Attended
3	Dr. Tarun Thukral	Members	Not Attended
4	Ms. Rosamma Jose	Members	Not Attended
5	Dr. Rajan Madan	Members	Not Attended
6	Dr. Tripti Sharan	Members	Not Attended
7	Dr. Gurbachan Singh	Members	Not Attended
8	Ms. Lalita Rani	Members	Not Attended
9	Ms. Geeta Rawat	Members	Not Attended
10	Ms. Shifali Hans	Members	Attended
11	Mr. Joseph PT	Members	Attended
12	Mr. ravindar Singh	Invited Member	Attended
13	Dr. Deepak Tanwar	Invited Member	Attended
14	Ms. Anumol Joseph	Invited Member	Attended

Agenda of the Meeting :

Bio-Medical Waste Management Review Committee Half yearly meeting

Sl. No	MOM of todays meeting	Discussion	Responsibility	Timeline	Status
1	Training of all staff and helpers	Training of all staff and helpers involved in handling Bio-Medical Waste has been carried out in a phased manner during the period under review. A record of details of personnel trained is being maintained.	HK & ICN	Ongoing process	Under monitoring
2	Training of new joiners	Training of new joiners to the Hospital was reviewed. Those whose training was due were identified and their names included in the training schedule.	HK Department	as and when	Under monitoring
3	Yearly health check up	Yearly health check up of all personnel handling Bio-Medical Waste was carried out and up to date records are maintained.	HK Department	Done	Closed

4	Audit	The audit(s) carried out to check the efficiency of Bio-Medical waste collection, transport, storage and disposal procedures in the Hospital were ratified and detailed procedure for the next audit was drawn up. The audit report of BMW disposal in was presented. (1) Oct-24 Compliance to Segregation was 98.2% ,Disposal was 99% ,storage was 98% and Transportation was 99%. (2) NOV-24 Compliance to Segregation was 98.6% ,storage was 99% and Transportation was 99%. (3) Dec-24 Compliance to Segregation was 99% ,storage was 99% and Transportation was 98%. (4) JAN-25 Compliance to Segregation was 98% ,storage was 99% and Transportation was 98.9%. (5) FEB-25 Compliance to Segregation was 97% ,storage was 98% and Transportation was 98%. (6) MAR-25 Compliance to Segregation was 97% ,storage was 97.5% and Transportation was 97%	HK & ICN	Ongoing process	NA
5	Suggest views remedial measures	Members were requested to bring out any practical difficulties encountered in the training and allocation of manpower and disposal procedures of bio medical waste and to take/suggest remedial measures.	NA	NA	NA
6	Use of PPE	It was reiterated that all personnel involved in handling Bio-Medical Waste should be instructed to exercise due care (strict use of PPE) in the discharge of their duties so that the chances of occurrence of any accident/spill is minimized.	HK Department	Ongoing process	Under monitoring
7	NSI Prevention	There is substantial decline in the NSI incidents in the last quarter (Jan-Mar25). Awareness & educational training sessions are continuously provided to zero the NSI cases.	HK & ICN	Ongoing process	Under monitoring
8	Updates/Process	It was discussed on updates on any changes in bio medical waste management regulations.	HK & ICN	NA	NA
9	Compliances	The central garbage area autoclave machine encountered some unknown issue due to which the BI reading got positive report twice in the month of Feb-25 which were duly rectified immediately. All monthly & quarterly bio-medical waste compliance of the existing quarters were closed on time.	HK & Medical Admin	Done	Closed
10	Hand washing Practices	The importance of frequent hand washing and observance of universal precautions was highlighted & discussed.	HK Department	31st March, 2025	Closed
			HK & ICN	Ongoing process	Under monitoring

All functionaries were requested to perform duties with utmost care and for Bio-Medical waste.

There being no further points, the meeting was declared closed.

BLK-MAX
Super Specialty Hospital

Attendance Sheet

Topic BMW COMMITEE MEETING
Date 29-04-25
Department

Subject HALF YEARLY MEETING
Duration 20 minutes
Trainer

S.No.	BLK-Max ID	Name	Designation	Department	Signature
1	15467	Durga Nand Prasad	Sr. Manager	HK	DurgaNand
2	16490	Shefali Hans	Sr. ICN	ICP, T	16490
3	15423	Dr. Atish Sikka	MS	Med Admin	
4	10434	Parminder Singh	DGM	Med Admin.	
5	13441	Dr. Deepak Tanwar	AGM	Quality	
6	32108	Anumol Joseph	N.S	Nursing	
7	12218	Jurcpn. P T	AGM	Pharmacy	
8	M032192	Jitendra Kumar Sharma	Head	OPS	
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Total no. of participants
Remarks (if any)

Trainer's Signature

A meeting of the Bio-Medical Waste Management Committee was held on 28th October, 2025 at 3:30 pm under the chairmanship of the undersigned for the half year ending. The following members were present:

S.No.	Attended by	Representatives	Attendance
1	Dr. Kapil Goyla	Chairman	Attended
2	Mr. Jitender Sharma	Secretary	Attended
3	Dr. Tarun Thukral	Members	Not Attended
4	Ms. Rosamma Jose	Members	Leave
5	Dr. Rajan Madan	Members	Not Attended
6	Dr. Tripti Sharan	Members	Not Attended
7	Dr. Gurbachan Singh	Members	Attended
8	Ms. Lalita Rani	Members	Not Attended
9	Ms. Geeta Rawat	Members	Not Attended
10	Ms. Shifali Hans	Members	Not Attended
11	Mr. Joseph PT	Members	Attended
12	Mr. ravindar Singh	Invited Member	Attended
13	Dr. Deepak Tanwar	Invited Member	Attended
14	Ms. Anumol Joseph	Invited Member	Attended

Agenda of the Meeting :

Bio-Medical Waste Management Review Committee Half yearly meeting

Sl. No	MOM of todays meeting	Discussion	Responsibility	Timeline	Status
1	Training of all staff and helpers	Training of all staff and helpers involved in handling Bio-Medical Waste has been carried out in a phased manner during the period under review. A record of details of personnel trained is being maintained.	HK & ICN	Ongoing process	Under monitoring
2	Training of new joiners	Training of new joiners to the Hospital was reviewed. Those whose training was due were identified and their names included in the training schedule.	HK Department	as and when	Under monitoring
3	Yearly health check up	Yearly health check up of all personnel handling Bio-Medical Waste was carried out and up to date records are maintained.	HK Department	Done	Closed

4	Audit	The audit(s) carried out to check the efficiency of Bio-Medical waste collection, transport, storage and disposal procedures in the Hospital were ratified and detailed procedure for the next audit was drawn up. The audit report of BMW disposal in was presented. (1) **APR-25** Compliance to Segregation was 97% ,storage was 98% and Transportation was 97% (2) **MAY-25** Compliance to Segregation was 94% ,storage was 94% and Transportation was 96% (3) **JUNE-25** Compliance to Compliance to Segregation was 96% ,storage was 96% and Transportation was 96.7% .(4) **JULY-25** Compliance to Segregation was 96% ,storage was 96.9% and Transportation was 97% (5) **AUG-25** Compliance to Segregation was 97% ,storage was 97% and Transportation was 98% . (6) **SEP-25** Compliance to Segregation was 95% ,storage was 96% and Transportation was 97% .	HK & ICN	Ongoing process	NA
5	Suggest/ views remedial measures	Members were requested to bring out any practical difficulties encountered in the training and allocation of manpower and disposal procedures of bio-medical waste and to take/suggest remedial measures.	NA	NA	NA
A	Environmental Clearance: Non-Compliances/ Obsevations	The housekeeping of the Bio-medical waste collection Room is not satisfactory. Accordingly, PAs have been advised to improve the housekeeping of the Bio-medical waste room area.	Eng/HK	Closed & full report with supporting photographic evidence was submitted to the concerned Authority	**Action Taken:** We have **redesigned** the **trolley washing area** and completed **waterproofing along with floor tiling** to prevent water leakage, addressing the advised improvement in housekeeping
B	Environmental Clearance: Non-Compliances/ Suggestion	The housekeeping of the Organic Waste Converter is not satisfactory. Accordingly, PAs have been advised to improve the housekeeping of the Organic Waste Converter area.	Eng/HK	Closed & full report with supporting photographic evidence was submitted to the concerned Authority	**Action Taken:** We have **painted the Organic Waste Converter area** and ensured it is thoroughly cleaned, addressing the advised improvement.
6	Use of PPE	It was reiterated that all personnel involved in handling Bio-Medical Waste should be instructed to exercise due care (strict use of PPE) in the discharge of their duties so that the chances of occurrence of any accident/spill is minimized.	HK Department	Ongoing process	Under monitoring
7	NSI Prevention	There is substantial decline in the NSI incidents in the last quarter (July-Sep 25). Awareness & educational training sessions are continuously provided to zero the NSI cases.	HK & ICN	Ongoing process	Under monitoring
		It was discussed on updates on any changes in bio medical waste management regulations.	HK & ICN	NA	NA

	Updates/Process	The central garbage area autoclave machine encountered some unknown issue due to which the BI reading got positive report twice in the month of Feb-25 which were duly rectified immediately.	HK & Medical Admin	Done	Closed
9	Compliances	All monthly & quarterly bio medical waste compliance of the existing quarters were closed on time.	Hk Department	31st October, 2025	Closed
10	Hand washing Practices	The importance of frequent hand-washing and observance of universal precautions was highlighted & discussed.	HK & ICN	Ongoing process	Under monitoring

All functionaries were requested to perform duties with utmost care and for Bio-Medical waste disposal

There being no further points, the meeting was declared closed.

BLK-MAX
Super Speciality Hospital

Attendance Sheet

Topic BMW MANAGEMENT COMMITTEE
Date 28/10/25
Department

Subject Meeting - HALF YEARLY
Duration 20 minutes
Trainer

S.No.	BLK-Max ID	Name	Designation	Department	Signature
1	15467	Durga Nand Prasad	Sr MAR	HIC	Durga Nand
2	32108	Anunod Joseph	N.S	Nursing	
3	13441	Dr. Deepak	DGM	Quality	Deepak
4	122148	Joseph D'J	DGM	Bldg	
5	BLK3811	Dr Gurbachan Singh	Head GR	Emergency	
6	BLK18529	Dr Kapil Goyla	MS	Med Admin	
7	M032197	Jitender Kumar Sharma	Head	OPS	
8	10434	Ravinder Singh	DGM	Med. Adm.	
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Total no. of participants
Remarks (if any)

Trainer's Signature