

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,

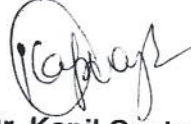
Sub: Submission of Annual Bio-Medical Waste Report (Form-IV)
Dr. B.L. Kapur Memorial Hospital

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.

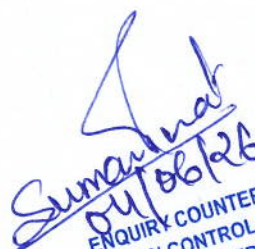
Thanking you,

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


Dr. Kapil Goyla
Medical Superintendent
Encls:

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

- | | |
|------------|---|
| 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 |


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

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 Government or private or semi Govt. or any other) society		
(ix) Ownership of the Health Care Facility	:	(State Government 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 Bedded 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 covered by CBMWTF	:	6338		
(ii) No. of beds covered by CBMWTF	:	36207		
(iii) Installed Treatment and disposable capacity 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 Equipments	No. of Units	Capacity kg/ day
		Incinerators	N/A	
		Plasma	N/A	
		Pyrolysis	N/A	
		Autoclaves	2	5.65 kg/day
		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	
		Chemical disinfection:	N/A	
				2071.3 kg/ per annum

	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 BLE)		
		Quantity generated	where Disposed
(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of waste in Kg per annum	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 continuous online emission monitoring systems installed	Not Applicable		
Liquid waste 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 sterilization 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 Goyal Medical Superintendent		

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 (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
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
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
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
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
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
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
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
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
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
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
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	233.88
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
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
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										361 KG/ DAY							
		246KG/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	Assessment 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 T.T. given, Viral marker sent ART started
9	Steps taken to prevent the recurrence of such an accident	Training given
10	Does your 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 : *Dr. Atish Sinha*
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	Assessment 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 your facility has an Emergency Control policy ? If yes, give details	N/A

Signature : *Durga Nand Prasad*
Name : Durga Nand Prasad - 15467

Designation : Manager

Date :

Place : *New Delhi*

Signature : *Dr. Atish Sinha*
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	Assessment 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 your facility have an Emergency Control policy? If yes, give details	N/A

Signature : *Durga Nand Prasad*
Name : Durga Nand Prasad

Designation : Manager

Date :

Place : *New Delhi*

Signature : *Dr. Atish Sinha*
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	Assessment 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 your 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

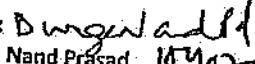
Signature :
Name : Dr. Atish Sinha

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	Assessment 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 your facility have 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 :

Place : New Pehli

Signature : 
Name : Dr. Atish Sinha

Designation : 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	Assessment 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 your facility have 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 : *Dr. Atish Sinha*
Name : Dr. Atish Sinha
Designation : 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	Assessment 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 your facility have 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 *KNP*

Designation : Sr. Manager

Date : .

Place : New Delhi

Dr. Atish Sinha
Signature : *Dr. Atish Sinha*
Name : Dr. Atish Sinha
Designation : Medical Superintendent
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

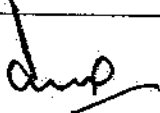
1	Date and time of accident	Date :- 14/4/2025 Time :- 7:45 Am
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	While cleaning the Needle box
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assessment of the effects of 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 your facility have 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: 5/5/2025

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

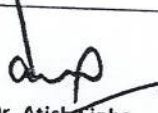
1	Date and time of accident	Date :- 7/4/2025 Time :- 4:40 Pm
2	Type of Accident	Other
3	Sequence of events leading to accident	While cleaning the red dustbin
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	N/A
6	Assessment of the effects of the accidents on 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 your facility have 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 : 5/5/2025

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

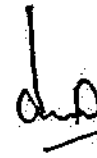
1	Date and time of accident	Date :- 15/6/2025 , Time :- 10:20 Am
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	While cleaning the medicine trolley pick by Needle
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assessment 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 your facility have 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 : 2/8/2025

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	Assessment 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 your facility have an Emergency Control policy? If yes, give details	N/A

Signature : *Durga Nand Prasad*
Name : Durga Nand Prasad

Designation : Sr. Manager

Date : 04-08-25

Place : New Delhi

Signature : *Dr. Atish Sinha*
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(l) 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	Assessment 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 your 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 : 03-09-25

Place : New Delhi

Signature : *Mr. Jitender Sharma*
Name : Mr. Jitender Sharma

Designation : Medical Superintendent/Head- Hospital
Operations

FORM I
[(See rules 4(o), 5(1) 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	Assessment 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 your facility have 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

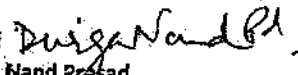
Place : New Delhi

Signature : *[Signature]*
Name : Mr. Jitender Sharma

Designation : Medical Superintendent/Head- Hospital
Operations

FORM I
[(See rules 4(a), 5(i) and 15(2))]
ACCIDENT REPORTING

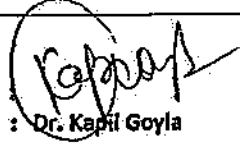
1	Date and time of accident	Date :- 8/9/2025 Time :- 9:18 Am
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	While cleaning in OPD-9
4	Has the Authority been informed immediately	Yes
5	The type of waste involved in accident	Needle
6	Assessment of the effects of the accidents 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 your 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 :

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	Assessment 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 your 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 : *Kapil Goyla*
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	Assessment 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 your 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 : *Dr. Kapil Goyla*
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

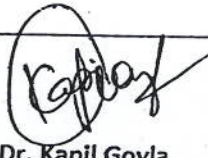
1	Date and time of accident	Date :- N/A Time :- N/A
2	Type of Accident	Needle Stick injury
3	Sequence of events leading to accident	N/A
4	Has the Authority been informed immediately	N/A
5	The type of waste involved in accident	N/A
6	Assessment of the effects of the accidents on human and health and the 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(f) 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	Assessment 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 your facility have 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.d.*
Name : Durga Nand Prasad

Designation : Sr. Manager

Date : 02-12-25

Place : New Delhi

Signature : *[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	Assessment 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 your facility have 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 : *Kapil Goyla*
Name : Dr. Kapil Goyla

Designation : Medical Superintendent

FORM I ((See rules 4(a), 5(f) 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	Assessment 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 your facility have 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 : *Kapil Goyla*
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	Assessment 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 your facility have 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 : *(Signature)*
Name : Dr. Kapil Goyal

Designation : Medical Superintendent

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.

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	So. MGR	HU	Durga Nand
2	13441	Dr. Deepak Taneja	DGM	MA	Deepak
3	W032197	Jitendra Kumar Sharma	DGM-ops	ops	Jitendra
4	60427	Dr. Tripathi	Head-OR	OR	Tripathi
5	BLK381	Dr. Gurbochan Singh	Head-OR	OR	Gurbochan
6	390	MANOJ KUMAR	Staff Nurse	SHU	Manoj
7	188	Singh	Nurse	Surging	Singh
8	M032106	Ramprakash Kumar	DGM	Eng	Ramprakash
9	BLK14129	Harinder Singh	DGM	Med. Adm.	Harinder
10	BLK18529	DEEPAK GOYLA	MS	Med Adm.	Deepak
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Total no. of participants (10)
Remarks (if any)

Trainer's Signature

Dr. B. L. Kapur Memorial Hospital, Pusa Road, New Delhi -110005
Tel: +91 11 3040 3040, Ambulance Helpline: +91 11 3065 3030

BLK/HRD/95/02/2021

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 today's 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 95% storage was 99% and Transportation was 98%. (4) JAN-25 Compliance to Segregation was 98% storage was 99% and Transportation was 98%. (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/spills is minimized.	HK Department	Ongoing process	Under monitoring
7	NSI Prevention	There is substantial decline in the NSI incidents in the last quarter (Jan-Mar-25). 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	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
8	Compliances	All monthly & quarterly bio-medical waste compliance of the existing quarters were closed on time.	HK Department	31st March, 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 there being no further points, the meeting was declared closed.

Attendance Sheet

Topic BMW COMMITTEE MEETING

Date 29-06-25

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	Durga Nand
2	16490	Shifali Hand	Sr. JCN	ICPT	Shifali 16490
3	15423	Dr. Atik Sika	MS	Med Admin	Dr. Atik
4	10434	Pavinder Singh	DCM	Med Admin	Pavinder
5	13441	Dr. Deepak Taneja	ACM	Quality	Dr. Deepak
6	32608	Anumol Joseph	N.S	Nursing	Anumol
7	12218	Joseph P.T	ITG	Pharmacy	Joseph
8	103298	Itendra Kumar Sharma	Head	OPS	Itendra
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

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 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/ Obsevation	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.

Attendance Sheet

Topic **BMW MANAGEMENT COMMITTEE**

Date **28/10/25**

Department

Subject **Meeting - HALF YEARLY**

Duration

Trainer

20 min

S.No.	BLK-Max ID	Name	Designation	Department	Signature
1	15467	Durga Nand Prasad	Sr. MAR	HU	Durga Nand
2	32108	Anand Joseph	N.S.	Nursing	Anand
3	13441	Dr. Deepak	DGM	Quality	Deepak
4	12228	Joseph M. J.	DGM	BLK	Joseph
5	BLK3811	Dr. Gobind Singh	Head ER	Emergency	Gobind
6	BLK18529	Dr. Kapil Goyal	MS.	Med. Admin	Kapil
7	MO32197	Jitender Kumar Sharma	Head	Ops	Jitender
8	10434	Ravinder Singh	DGM	Med. Adm.	Ravinder
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Total no. of participants

Remarks (if any)

Trainer's Signature