



April 3, 2025

BLK/SDO&P/2025/APR/03

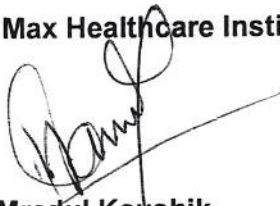
Dr. R. Aggarwal
Addl. Director (BMW Mgmt.)
Directorate of Health Services
Swasthya Sewa Nideshalaya Bhawan
F-17, Karkardooma,
Delhi-110032.

Dear Sir,

Sub: Submission of Quarterly report for Bio-Medical Waste Management (BMW)

Please find enclosed the quarterly report of Bio-Medical Waste maintained by the Healthcare establishment namely Max Lab, 2/8, First, Second & Third Floor, East Patel Nagar, New Delhi-8 (Run By Dr. B.L. Kapur Memorial Hospital, a unit of Lahore Society) Dr. B.L. Kapur Memorial Hospital, Pusa Road, New Delhi-110 005, New Delhi, for the month of January 2025 to March 2025.

For Max Healthcare Institute Limited



Dr. Mradul Kaushik
Sr. Director Operations & Planning

Dr. Mradul Kaushik
Sr. Director Operations & Planning
Dr. B.L. Kapur Memorial Hospital
Pusa Road, New Delhi-110005

Encls: As above

Dr. M. Kaushik
10/4/25

Quarterly Information required for BMW Management

Signature of Medical Superintendent

Minutes of Infection Control meeting 29/01/2025

S.No.	Attended by		
1	Dr. Rk Singhal	Chairperson	Attended
2	Dr. Purabi Barman	Secretary	Attended
3	Dr. Rajesh Pande	Member	Attended
4	Dr. Ramji Mehrotra	Member	Not Attended
5	Dr. Jasjit Bhasin/ Dr Rachna	Member	Not Attended
6	Dr. Sajjan Purohit	Member	Not Attended
7	Dr. Sunil Prakash	Member	Not Attended
8	Dr. U. Velecha	Member	Attended
9	Dr. Tarun	Invited member	Attended
10	Dr. Shimpi	Invited member	Attended
11	Dr. Sanjeev	Member	Attended
12	Dr. Gurbachan Singh	Member	Attended
13	Dr. Atish Sinha	Member	Attended
14	Dr. Deepak	Member	Attended
15	Sis Rosamma/ Sis Anumol	Member	Attended
16	Mr. Ramesh / Mr. Siby	Member	Attended
17	Mr. Durga Prasad	Member	Not Attended
18	MS. Nutan -ICN	Member	Attended
19	Ms. Akshita - ICN	Member	Attended
20	Ms. Himanshi	Member	Attended
21	Ms. Shifali	Member	Attended
22	Mr. Azad	Member	Attended
23	Mr. Vivek Tripathi	Invited Member	Attended
24	Mr. Jitender	Invited Member	Attended
25	Sister Monika	Member	Attended

Agenda of the Meeting :						
1	HAI and other HIC Indicators- Dec-2024					
2	Review of previous MOM					
3	Annual summary 2024 & Infection control Plan 2025					
4	Set up Internal benchmark 2025					
MOM of previous meeting		Discussion	Decision	Responsibility	Timeline	Status
1	Reuse policy	Dr. Purabi discussed that Barcode system for Reuse Items be introduced in the organisation.	The HICC members approved of the same. Dr. Atish to look into the feasibility of introducing the Barcode system for Reuse Items. Mr. Mani, CSSD Incharge, too shall work on it.	Dr. Atish/ Mr. Mani/ ICT/ Mr. Azad	End of Jan 2025	Mr. Azad informed the members that the work is in process and additional computers and scanners have been put on the budget. This process will take another few months, tentatively around June - July. Open.
Discussion of Present meeting						
		Discussion	Decision	Responsibility	Timeline	Status
1	HAI	Healthcare associated Infection data of December 2024 was presented. The HAI rates for VAE is 1.1 per 1000 ventilator days, CLABSI: 1.8 per 1000 central line days, CAUTI is 0.96 per 1000 Foley's catheter days, SSI rate is 0.37%.	NA	ICT	NA	Under monitoring
2	Needle stick injury	NSI data of December 2024 was presented. Incidence of NSI were 0.97 per 1000 patient days.	NSI rate has increased in the month of December. Training and awareness of staff to be done on proper handling of sharps.	ICT	NA	Under monitoring
3	Biomedical waste disposal	The audit report of BMW disposal for December was presented. Compliance to Segregation was 99%, storage was 99% and Transportation was 98%.	NA	ICT	NA	Under monitoring
4	Hand hygiene	Hand hygiene data for the month of December 2024 was presented.	Hand hygiene compliance is within the Internal benchmark. However, focus was on continued training.	ICT	NA	Under monitoring
5	Annual summary 2024 and Infection Control Plan 2025	Dr. Purabi presented the Annual summary of 2024. The yearly average for CLABSI is 1.6 per 1000 central line days. For CAUTI it is 1 per 1000 Foley's catheter days. 0.82 per 1000 ventilator days for VAE and 0.6% SSI. Hand hygiene overall compliance rate is 85.7%. Blood and body fluid exposure is 0.72 per 1000 IPD days. The Hospital Infection rate is 0.39%.	Though all these device associated rates are within the Internal benchmark, however CLABSI rates have not decreased in comparison to last year. Therefore, the focus this year will be on reduction on CLABSI, including MDRO transmission. Another focus area will be reduction of Blood and body fluid exposure.	ICT	NA	NA
6	Set up Internal Benchmark 2025	Based on the Risk assessment and summary of 2024, the Internal Benchmark was discussed.	The Internal Benchmark set by the HICC members are: VAP- 3 per 1000 ventilator days, CLABSI: 2 per 1000 central line days, CAUTI: 1.5 per 1000 Foley's days, SSI: 1.5%, Hand hygiene compliance rate: >= 85%, Blood and body fluid exposure: <= 1 per 1000 IPD days. And the Hospital Infection rate as <= 1.5 per 100 patient admission days. Moreover 100% compliance for Pre exposure prophylaxis.	ICT	NA	NA

Minutes of Infection Control meeting 18/02/2025

S.No.	Attended by	Chairperson	Attended
1	Dr. Rk Singhal	Secretary	Attended
2	Dr. Purabi Barman	Member	Attended
3	Dr. Rajesh Pande	Member	Not Attended
4	Dr. Ramji Mehrotra	Member	Not Attended
5	Dr. Jasjit Bhasin/ Dr Rachna	Member	Not Attended
6	Dr. Sajjan Purohit	Member	Not Attended
7	Dr. Sunil Prakash	Member	Attended
8	Dr. U. Valecha	Member	Attended
9	Dr. Sanjeev	Member	Not Attended
10	Dr. Gurbachan Singh	Member	Not Attended
11	Dr. Atish Sinha	Member	Not Attended
12	Dr. Deepak	Member	Not Attended
13	Sis Rosamma/ Sis Anumol	Member	Attended
14	Mr. Ramesh / Mr. Siby	Member	Not Attended
15	Mr. Durga Prasad	Member	Attended
16	MS. Nutan -ICN	Member	Attended
17	Ms. Aksita - ICN	Member	Attended
18	Ms. Himanshi	Member	Attended
19	Ms. Shifali	Member	Attended
20	Sister Monika	Invited Member	Attended
21	Mr. Vivek Tripathi	Invited Member	Attended
22	Mr. Vinu		

Agenda of the Meeting :

1. HAI and other HIC Indicators- Jan 2025
2. Review of previous MOM

	Discussion	Decision	Responsibility	Timeline	Status
MOM of previous meeting					
1. Reuse policy	Dr. Purabi discussed that Barcode system for Reuse items be introduced in the organisation.	The HICC members approved of the same. DR. Atish to look into the feasibility of introducing the Barcode system for Reuse items. Mr. Mani, CSSD incharge, too shall work on it.	Dr. Atish/ Mr. Mani/ ICT/ Mr. Azad	End of June 2025	Open.

Discussion of Present meeting

	Discussion	Decision	Responsibility	Timeline	Status
1. HAI	Healthcare associated infection data of Jan 2025 was presented. The HAI rates for VAE is 0 per 1000 ventilator days, CLABSI 1.8 per 1000 central line days, CAUTI is 0.025 per 1000 foley catheter days, SSI rate is 0.15%.	NA	ICT	NA	Under monitoring
2. Needle stick Injury	NSI data of Jan 2025 was presented. Incidence of NSI were 0.57 per 1000 patient days.	Training and awareness of staff to be done on proper handling of sharps.	ICT	NA	Under monitoring
3. Biomedical waste disposal	The audit report of BMW disposal for Jan 2025 was presented. Compliance to Segregation was 98%, storage was 99% and Transportation was 98%.	NA	ICT	NA	Under monitoring
4. Hand hygiene	Hand hygiene data for the month of Jan 2025 was presented.	The HICC members emphasised the focus on continued training.	ICT	NA	Under monitoring

Minutes of Infection Control meeting 20/03/2025

S.No.	Attended by		
1	Dr. Rk Singhal	Chairperson	Attended
2	Dr. Purabi Barman	Secretary	Attended
3	Dr. Rajesh Pande	Member	Attended
4	Dr. Ramji Mehrotra	Member	Not Attended
5	Dr. Jasjit Bhasin/ Dr Rachna	Member	Attended
6	Dr. Sajjan Purohit	Member	Not Attended
7	Dr. Sunil Prakash	Member	Not Attended
8	Dr. U. Valecha	Member	Not Attended
9	Dr. Sanjeev	Member	Attended
10	Dr. Gurbachan Singh	Member	Attended
11	Dr. Atish Sinha	Member	Attended
12	Dr. Deepak	Member	Attended
13	Sis Rosamma/ Sis Anumol	Member	Attended
14	Mr. Ramesh / Mr. Siby	Member	Attended
15	Mr. Durga Prasad	Member	Attended
16	MS. Nutan -ICN	Member	Attended
17	Ms. Aksita - ICN	Member	Attended
18	Ms. Himanshi	Member	Attended
19	Ms. Shifali	Member	Attended
20	Sister Monika	Member	Attended
21	Mr. Vivek Trikha	Invited Member	Not Attended

Agenda of the Meeting :						
1	HAI and other HIC indicators- Jan 2025					
2	Review of previous MOM					
3	Discussion of NABH findings					
MOM of previous meeting		Discussion	Decision	Responsibility	Timeline	Status
1	Reuse policy	Dr. Purabi discussed that Barcode system for Reuse Items be introduced in the organisation.	The HICC members approved of the same. DR Atish to look into the feasibility of introducing the Barcode system for Reuse Items. Mr. Mani, CSSD incharge, too shall work on it.	Dr. Atish/ Mr. Mani/ ICT/ Mr. Azad	End of June 2025	Open.
Discussion of Present meeting						
		Discussion	Decision	Responsibility	Timeline	Status
1	HAI	Healthcare associated infection data of Feb 2025 was presented. The HAI rates for VAE is 0 per 1000 ventilator days, CLABSI 2.9 per 1000 central line days, CAUTI is 0.3 per 1000 foley catheter days, SSI rate is 0.07%.	The CLABSI rate was high in the month of Feb 2025. It has beyond the set internal benchmark. There were 2 cases in MICU, one each in NSICU, OICU and 5th floor. There was some breach in Care bundles. Staff are counselled and retrained on the Care bundles.	ICT	NA	Under monitoring
2	Needle stick injury	NSI data of Feb 2025 was presented. Incidence of NSI were 0.68 per 1000 patient days.	Training and awareness of staff to be done on proper handling of sharps.	ICT	NA	Under monitoring
3	Biomedical waste disposal	The audit report of BMW disposal for Feb 2025 was presented. Compliance to Segregation was 97%, storage was 98% and Transportation was 98%.	NA	ICT	NA	Under monitoring
4	Hand hygiene	Hand hygiene data for the month of Feb 2025 was presented.	The HICC members emphasised the focus on continued training.	ICT	NA	Under monitoring
5	NABH findings	Dr. Purabi discussed the NCs observed during the recent NABH audit.	The corrective action and closure was discussed.	HICC	NA	Closed