

MSSH/SHB/909

April 06, 2019

Delhi Pollution Control Committee
4th Floor, ISBT Main Building
Kashmere Gate
Delhi - 110006.

Ans
20/4/19
(ENQUIRY COUNTER)
DELHI POLLUTION CONTROL COMMITTEE
DEPARTMENT OF ENVIRONMENT
GOVT. OF NCT OF DELHI
4TH FLOOR, ISBT BUILDING,
KASHMERE GATE, DELHI-110006

Subject : Annual Report

Dear Sirs,

We are enclosing herewith Annual Report in Form-IV & Form-I pertaining to generation and disposal of bio-medical waste at our hospital, Max Super Speciality Hospital (a unit of Max Healthcare Institute Ltd.), FC-50, Block C&D, Shalimar Bagh, Delhi-110088 for the period from 01.01.2018 to 31.12.2018.

We are also enclosing herewith original Yearly Collection Report for the year 2018 issued by biotic waste solutions Pvt. Ltd.

Thanking you

[Signature]
Indrajeet Kumar
General Manager - Operations
For Max Super Speciality Hospital, Shalimar Bagh
(a unit of Max Healthcare Institute Limited)

Encl. : as above

1. HIC MOM
2. Hospital registration certificate (Under section 5 of Nursing home registration Act, 1953)
3. Approval for 280 beds
4. Monthly BMW records
5. Biotic waste collection records
6. Authorization under bio-medical waste management
7. Monthwise training records

Max Healthcare Institute Limited

(CIN: U72200DL2001PLC111313)

Regd. Office: Max House, 1, Dr. Jha Marg, Okhla, New Delhi-110020

Phone: 91-11-41612123, Fax: 91-11-41612155, E-mail: secretarial@maxhealthcare.com

www.maxhealthcare.in



Form - IV
(See rule 13)
ANNUAL REPORT

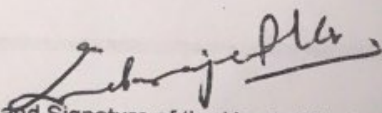
[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

S No.	Particulars																																																	
1.	Particulars of the Occupier																																																	
	(i) Name of the authorised person (occupier or operator of facility)	Indrajeet Kumar																																																
	(ii) Name of HCF or CBMWTF	Max Healthcare Institute Ltd.																																																
	(iii) Address for Correspondence	Fc-50 Block c&d, Shalimarbagh																																																
	(iv) Address of Facility	Fc-50 Block c&d, Shalimarbagh																																																
	(v) Tel. No, Fax. No	49782222																																																
	(vi) E-mail ID	ramachandran@maxhealthcare.com																																																
	(vii) URL of Website	www.maxhealthcare.in																																																
	(viii) GPS coordinates of HCF or CBMWTF	yes																																																
	(ix) Ownership of HCF or CBMWTF	Private Hospital																																																
	(x) Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	Authorisation No. DPCC/BMW/AUTH/NEW NO/2017/03301 Valid up to 04-06-2022																																																
	(xi) Status of Consents under Water Act and Air Act	Valid up to 08-06-2019																																																
2.	Type of Health Care Facility																																																	
	(i) Bedded Hospital	Health care																																																
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	No. of Beds : 280																																																
	(iii) License number and its date of expiry	DGHS/NH/965 Date -31/03/2020																																																
3.	Details of CBMWTF																																																	
	(i) Number healthcare facilities covered by CBMWTF	N/A																																																
	(ii) No of beds covered by CBMWTF	N/A																																																
	(iii) Installed treatment and disposal capacity of CBMWTF	_____ Kg per day N/A																																																
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	_____ Kg/day N/A																																																
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	Yellow Category : 33613.63 Red Category : 36551.05 White: 8191.02 Blue Category : 11460.02 General Solid waste: 101181.306																																																
5.	Details of the Storage, treatment, transportation, processing and Disposal Facility																																																	
	(i) Details of the on-site storage facility	Size : 745 Sq ft. Capacity : 10960ltr Provision of on-site storage : (cold storage or any other provision) Normal Air conditioner room temperature.																																																
	(ii) Details of the treatment or disposal facilities	<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/day</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td>1</td> <td>129 ltr.</td> <td></td> </tr> <tr> <td>Microwave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Sharps encapsulation or concrete pit</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Deep burial pits:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Any other treatment equipment</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum	Incinerators				Plasma Pyrolysis				Autoclaves	1	129 ltr.		Microwave				Hydroclave				Shredder				Needle tip cutter or destroyer				Sharps encapsulation or concrete pit				Deep burial pits:				Chemical disinfection				Any other treatment equipment			
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(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	Red Category (like plastic, glass etc.)												
(iv) No of vehicles used for collection and transportation of biomedical waste	N/A												
(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum	<table border="1"> <thead> <tr> <th></th> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td>Incineration</td> <td>N/A</td> <td>N/A</td> </tr> <tr> <td>Ash</td> <td>N/A</td> <td>N/A</td> </tr> <tr> <td>ETP Sludge</td> <td>586.36kg</td> <td>SLUDGE OF ETP PRODUCED THROUGH STP</td> </tr> </tbody> </table>		Quantity generated	Where disposed	Incineration	N/A	N/A	Ash	N/A	N/A	ETP Sludge	586.36kg	SLUDGE OF ETP PRODUCED THROUGH STP
	Quantity generated	Where disposed											
Incineration	N/A	N/A											
Ash	N/A	N/A											
ETP Sludge	586.36kg	SLUDGE OF ETP PRODUCED THROUGH STP											
(vi) Name of the Common BioMedical Waste Treatment Facility Operator through which wastes are disposed of	M/S BHARAT OIL & WASTE MANAGEMENT LTD.												
(vii) List of member HCF not handed over bio-medical waste	N/A												
6. Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	YES												
7. Details trainings conducted on BMW													
(i) Number of trainings conducted on BMW Management.	43												
(ii) Number of personnel trained	244												
(iii) Number of personnel trained at the time of induction	NIL												
(iv) Number of personnel not undergone any training so far	N/A												
(v) Whether standard manual for training is available?	YES												
(vi) Any other information	NO												
8. Details of the accident occurred during the year													
(i) Number of Accidents occurred	NIL												
(ii) Number of the persons affected	NIL												
(iii) Remedial Action taken (Please attach details if any)	N/A												
(iv) Any Fatality occurred, details:	N/A												
9. Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	YES												
10. Details of Continuous online emission monitoring systems installed	N/A												
11. Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	YES												
12. Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	MEET THE STANDARD NIL												
13. Any other relevant information.	(Air Pollution Control Devices attached with the Incinerator)												

Certified that the above report is for the period from 01.01.2018 to 31.12.2018.

Date:
Place:


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

FORM - 1
[(See rule 4(o), 5(i) and 15 (2))]

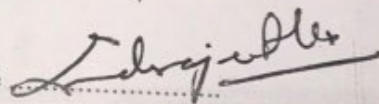
ACCIDENT REPORTING

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

Date :- 09/04/2019

Place:-New Delhi

Signature



Indrajeet Kumar

General Manager - Operations

Designation:- ~~General Manager - Operations~~ General Manager - Operations
Max Super Speciality Hospital, Shalimar Bagh

Minutes of meeting

Forum: Infection Control Committee

Chairperson: Dr. K K Trehan

Participants: Dr. Amardeep Kohli, Dr. Archana Bajaj, Dr. Shakti Jain, Dr. Poonam Sidana, Dr. Rakesh Dua, Dr. Amit Prakash, Dr. Sushmita, Ms. Sunita Uppal, Mr. Naveen Pal, Ms. Amrita Singh, Ms Nishu Arora, Ms. Himani

Date: 9/2/18

Location: Meeting room, 4th Floor

MON	Responsibility	Date	Status
Application of DVT pump should be started in OT, ICU's & ward for post operative patient without any delay.	Ms Sunita & ICN's	28 th Feb 2018	DVT pump is being used for OT and ICU pts regularly. No VTE case reported. Point closed
Dr S.N.Basu to educate her junior doctors in the team about the safe handling of sharps during the surgery, especially during the LSCS.	Ms Himani & Dr S.N.Basu & ICN team	28 th Feb 2018	RCA CAPA for NSI was done for the cases during retraction. Doctors sensitized about using of retractors and not doing with bare hands. Point closed. No NSI pertaining to the same reason.
It is mandatory to send the cultures of patients getting admitted with any outside lines, particularly in tracking of any HAI	Dr Shakti Jain & ICN's	5 th March 2018	Emergency staff informing about the pt coming with lines to ICN and cultures are being sent (cont)

Eco shield replaced by Sceptre Guard 360 for disinfection of instruments, also replaced suction pump.	Mr. Wadhwa		emergency regularly
Agenda			
SHARP SAFETY:- Strengthen sharps handling in intra operative stage in OT while transferring sharps (use kidney tray).	Responsibility Ms. Sunita & ICN team.	Timeline 25 th Feb 2018	Action Training to be taken for the OT staff
HAI:- 1) Strengthen Root Cause Analysis process for HAI.	Dr. Shakti, Ms Sunita, Emergency Supervisor & ICN's Ms. Sunita, ICN's	Immediate effect 5/3/18	Active surveillance for HAI to be further strengthened
BUNDLE COMPLIANCE:- 1) Enhance knowledge and improve skills of OT nurses for Foley's catheterization procedure. 2) Prepare home care instructions for clients goes home with Foley's catheter. 3) To maintain sterility while doing suctioning mandate 2 persons for the procedure.			
CLEANING & DISINFECTION:- 1) Groom and dedicate 4 GDA's for intense cleaning and disinfection of all critical care area.	Mr. Vijay	Immediate effect	

HAND HYGIENE:-

- 1) Improve hand hygiene compliance in wards.
- 2) Availability of alcohol based hand rub at bed side in wards.

PHYSIOTHERAPISTS/ DIETICIANS

- 1) Arrange grooming session for Physiotherapists and dieticians.

	ICN's	1 st March 2018	
	ICT, Ms. Geeta, Dr. Rohit		
		5 th March 2018	

Dr. K K Trehan
Chairperson ICC

KK Trehan

Dr. Ardhana Bajaj
Medical Superintendent

[Signature]

Minutes of meeting

Forum: Infection Control Committee Meeting

Chairperson: Dr. K.K. Trehan

Attendees: Dr. K.K. Trehan, Dr. Anandeep Kohli, Ms. K.G. Jacobs, Ms. Anurama Thomas, Dr. Shakti Jain, Mr. Rabininder Wadhwa, Mr. Bhagwat Arya, Mr. Sandeep Vaid, Ms. Kalkasha, Mr. Rajnesh Singhal, Dr. I.M. Chugh, Dr. Pawan Khurana, Dr. Puneet Sharma, Ms. Anurita Singh, Ms. Dorjee Yangzom

Date: 01/07/2018

Minutes of Meeting		Location: Meeting Room, 4 th Floor		
	Responsibility	Date	Action & Status	
HAIR SAFETY Strengthen sharps handling in intra operative stage in OT while transferring sharps (use kidney tray).	Ms. Sunita & ICN team.	25 th Feb 2018	Training of OT staff was taken. No injury reported. Point closed.	
HAL- 1) Strengthen Root Cause Analysis process for HAL.	Dr. Shakti, Ms. Sunita, Emergency Supervisor & ICN's	Immediate effect	Regular rounds of ICN for pps on catheters and lines to see early signs of HAL. Point closed	
BUNDLE COMPLIANCE:- 1) Enhance knowledge and improve skills of OT nurses for Foley's catheterization procedure. 2) Prepare home care instructions for clients goes home with Foley's catheter. 3) To maintain sterility while doing suctioning mandate 2 persons for the procedure.	Ms. Sunita, ICN's	5/3/18	1) Training of the staff was done 2) Closed 3) Closed - Incase of any open suctioning	
CLEANING & DISINFECTION:- 1) Groom and dedicate 4 GDA's for intense cleaning and disinfection of all critical care area.	Mr. Vijay	Immediate effect	Closed	

HAND HYGIENE:-

- 1) Improve hand hygiene compliance in wards.
- 2) Availability of alcohol based hand rub at bed side in wards.

PHYSIOTHERAPISTS/DIETICIANS

- 1) Arrange grooming session for Physiotherapists and dieticians.

Agenda

SHARP SAFETY :-

on retracting the body part during the surgery, use of retractors should be strengthened to prevent any sharp injury.

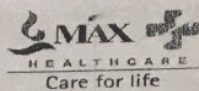
BUNDLE COMPLIANCE :-

- 1) Focus on Foleys care and maintenance (Foleys care in every shift with soap and water)
- 2) Staff Nurses should be present during the Foley's catheterization procedure to maintain the sterility.
- 3) Strengthen mouth care process in every shift with chlorhexidine mouth wash of ventilated patients

REGARDING NSI :-

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

	ICN's	1 st March 2018	Ongoing
	ICT, Ms. Geeta, Dr. Rohit	5 th March 2018	Closed
Responsibility	Timeline		
All OT Staff & ICN Team	Immediate Effect		Further training of the gynae team. One more case of NSI reported due to retraction
Kathleen, ICN	30 th July 2018		
Kathleen, ICN	30 th July 2018		



Dr. K K Trehan
Chairperson ICC

K K Trehan

Bajaj
Dr. Archana Bajaj
Medical Superintendent

DIRECTORATE GENERAL OF HEALTH SERVICES
GOVERNMENT OF NCT OF DELHI

F-17, KARKARDOOMA, SHAHDARA, DELHI-110032

Reg. No. DGHS/NH/ 2013

Dated : 05.06.2013

Registration Certificate

(Under Section 6 of Delhi Nursing Homes Registration Act, 1953)

For the Period 2013-2014

It is certified that MAX SUPER SPECIALITY HOSPITAL

F-50, Block C & D, SHARDA-BAGH, D-110086 with 250 beds

is being run by MAX HEALTH CARE INSTITUTIONS PVT. LTD. has been registered under

Delhi Nursing Homes Registration Act, 1953 and is authorized to carry out the permitted nursing home activities at

the above said premises.

This registration certificate is valid upto 31 March 2014

This renewal is issued on the basis of submission of self-declaration by the keeper in accordance with the notification vide No. DGHS-27/6/2016-NH2CELL-DIRGE(DGHS)/16963-65 dated 11/05/2016

Director General Health Services
Govt. of NCT of Delhi

* This provisional registration certificate is being issued as per the directions dated 02/06/2009 of Hon'ble Supreme Court of India in SLP No. 13898/2009 (In reference with Interim order dated 24/04/2009 of Hon'ble High Court, Delhi in W.P. No. 4233/1993)

DIRECTORATE GENERAL OF HEALTH SERVICES
GOVT. OF NCT OF DELHI
(NURSING HOME CELL)
F-17, KARKARDOOMA, DELHI

Dated: 9/6/17

F.24/965/NH/DHS/HQ/NW/2017-20/ 209819

To,
Max Super Specialty Hospital,
Shalimar Bagh New Delhi -110086.

Sub: ISSUE OF PROVISIONAL/REGULAR RENEWAL OF REGISTRATION CERTIFICATE FOR THE YEAR 2017-2020
IN R/O ABOVE MENTIONED PRIVATE HOSPITAL/NURSING HOME, ON THE BASIS OF UNDERTAKING SUBMITTED
BY THE KEEPER.
Sir,

I am directed to inform you that with reference to your application regarding renewal of registration of above mentioned Hospital/ nursing home for 250 beds for the period 2017-2020.

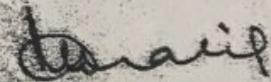
I am further directed to inform you that on the basis of your self-declaration that there is no change in number of beds, infrastructure and facilities to the above said private Hospital/ Nursing Home for the period 2017-2020, the above said Private Hospital/Nursing Home has been issued a certificate of renewal of registration as per the provision under rule 6(a) of DNHR Amended Rules 2011.

You are requested to adhere to the following:-

1. Your application will be further scrutinized to see whether various compliances and other documents required as per revised check list are enclosed and valid, otherwise a letter intimating the deficiencies will be communicated to the keeper of the Hospital for immediate compliance or otherwise action as deemed fit would be initiated against above said hospital.
2. If contradictory, misleading or wrong information given in the application/undertaking, strict action will be taken against the erring hospital as per DNHR Act and rules.
3. As per Section 5(3) of Delhi Nursing home registration ACT 1953, the registration/ renewal certificate issued in respect of your hospital shall be kept affixed in a conspicuous place in the hospital.
4. As per rules 10 of DNHR any change in medical nursing or mid-wife staff with the dates on which such changes were taken place shall be communicated to the Supervising Authority immediately and in case of not later than 03 days of such changes so that by the end of that month information should be received in this office.
5. Any change in scope of services and infrastructure facility should be communicated immediately to the supervising authority.
6. Keeper is advised to renew the statutory compliances required to run the hospital/ nursing home within time from the respective department and submit a copy of the same to Directorate to update the record.

(THIS PROVISIONAL REGISTRATION CERTIFICATE IS BEING ISSUED IN ACCORDANCE WITH INTERIM ORDER DATED 02.06.2009 IN SLP NO. 13898/2009 BY HON'BLE SUPREME COURT OF INDIA)

Yours faithfully,

Encl: as above


(DR. MONALISA BORAH)
MEDICAL SUPDT. (NH CELL)

REGISTERED POST

DIRECTOR OF HEALTH SERVICES GOVT. OF NCT OF DELHI
SEWA NIDESHALAYA BHAWAN
KARKARDOOMA, DELHI-110032

F No.24/NW/SH/DGHS/HQ/965/2017/20/ 247287

Dated- 12/5/16

To

Medical Superintendent / Director / CEO,
Max Super Specialty Hospital,
FC-30, C-2 D Block, Shalimar Bagh,
New Delhi-110088.

Subj: Regarding increase in bed strength of Max Super Specialty Hospital,
FC-30, C-2 D Block, Shalimar Bagh, New Delhi-110088, from existing
250 beds to 280 beds.

Sir,

With reference to your request on subject cited above, it is informed
that your request for increasing the bed strength of your hospitals from
existing 250 beds to 280 beds has been approved by the Supervising
Authority under Section 2(x) of DNHR Act, 1953.

This letter increasing the new bed strength of the hospital i.e. 280 Beds,
may be read with the earlier issued renewal certificate and the same is valid
upto 31st March 2020.


Dr. R. N. DAS
Medical Superintendent, Nursing Home Cell

Bio-Medical Waste

Month	Bio Medical waste										General Waste						
	Red Autoclave (Infected Plastic Waste)		Yellow- Incineration (Anatomical Waste & Soiled)		Blue Autoclave (Glass- Bottles)		Yellow Cytotoxic- Incineration (Cytotoxic Contaminated)		White- Sharp		Total Bags	Total Weight (in KG's)	Dry Waste		Kitchen/ Food Waste		
	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)			No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	
Jan-18	730	3307.84	633	3033.05	351	1270.59	47	259.9			3417	8681.87	2236	10054.231		1271	7877.721
Feb-18	644	2914.64	598	2619.4	382	1109.44	44	253.34			3315	7723.57	1739	9480.82		1236	6262.59
Mar-18	734	3165.71	681	2909.56	381	1234.01	40	221.4			3655	8451.05	2392	8403.097		1337	6978.691
Apr-18	616	2808.74	583	2603.84	265	1135.01	44	250.43			3426	7787.57	2201	7989.01		1316	6965.764
May-18	770	3487.74	663	2688.48	335	1261.65	39	250.63			3218	8454.45	2456	9149.25		1389	7728.61
Jun-18	643	2764.02	585	2480.89	253	897.3	45	247.31			3178	7156.98	2359	8650.22		1434	7533.17
Jul-18	668	2803.18	628	2524.36	248	1040.66	43	274.31			3387	7524.77	2321	8926.836		1363	7905.521
Aug-18	744	3150.39	703	2710.86	254	1010.89	40	279.53			3685	8066.84	2508	8882.74		1435	8339.929
Sep-18	712	2977.25	729	2624.69	268	913.18	35	269.72			3457	7566.66	2435	8521.879		1136	5302.32
Oct-18	709	3056.51	723	2801.13	281	880.56	38	298.58			2638	7975.28	2629	8869.578		1225	6002.733
Nov-18	703	2964.35	659	2686.87	280	896.46	38	253.65			3002	7511.03	2395	8368		1237	5656.75
Dec-18	933	2966.34	879	2725.42	380	774.85	67	266.05			3172	7513.45	2429	8508.065		1410	5862.28
YTD	9025	36551.5	8778	33613.63	3526	11460.02	658	3222.78			37816	93038.95	28451	101181.306		16614	76533.626



ANNUAL REPORT 2018.

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

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

REGN. NO.:-1206

Month	Bio Medical waste											
	Red Autoclave (Infected Plastic Waste)		Yellow- Incineration (AnatomicalWaste & Soiled Waste)		Blue Autoclave (Glass- Bottles)		Yellow Cytotoxic- Incineration (Cytotoxic Contaminated Items)		White- Sharp		Total Bags	Total Weight (In KG's)
	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight (in KG's)	No. of Bags	Weight in KG's		
Jan-18	730	3307.84	633	3033.05	351	1270.59	47	259.9	1656	810.49	3417	8681.87
Feb-18	644	2914.64	598	2619.4	382	1109.44	44	253.34	1647	826.75	3315	7723.57
Mar-18	734	3165.71	681	2909.56	381	1234.01	40	221.4	1819	920.37	3655	8451.05
Apr-18	616	2905.74	583	2603.84	265	1135.01	44	250.43	1918	892.55	3426	7787.57
May-18	770	3487.74	663	2688.48	335	1261.65	39	250.63	1411	765.95	3218	8454.45
Jun-18	643	2764.02	585	2480.89	253	897.3	45	247.31	1652	767.46	3178	7156.98
Jul-18	668	2803.18	628	2524.36	248	1040.66	43	274.31	1800	882.26	3387	7524.77
Aug-18	744	3150.39	703	2710.86	254	1010.89	40	279.53	1944	915.17	3685	8066.84
Sep-18	712	2977.25	729	2624.69	268	913.18	35	269.72	1713	781.82	3457	7566.66
Oct-18	709	3056.51	723	2801.13	281	880.56	38	298.58	887	888.5	2638	7925.28
Nov-18	703	2964.35	659	2686.87	280	898.46	38	253.65	1322	707.7	3002	7511.03
Dec-18	933	2966.34	879	2725.42	380	774.85	67	266.05	913	580.79	3172	7313.45
YTD	9025	36551.5	8778	33613.63	3628	11460.02	658	3222.78	15727	8191.02	37816	93038.95



Authorized by
Delhi Pollution Control Committee

Green Clean Process

Biotic follows all compliances under the Biomedical waste handling rules 2016. As experts in medical waste management, Biotic helps you stay in full compliance regarding the disposal of your regulated waste.



DELHI POLLUTION CONTROL COMMITTEE

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

4th Floor, I.S.I. Building, Kashmiri Gate, Delhi - 110006

Website : <http://www.dpcc.delhigovt.nic.in>

AUTHORISATION UNDER BIO MEDICAL WASTE MANAGEMENT RULES, 2016

FORM III

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

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

File number of authorization DPCC/(11)(5)(377)/-007/BMW-11 16645

Date. 13-10-2017

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

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

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

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

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

(i) Number of beds of HCF:

250

(ii) Quantity of Biomedical waste handled, treated or disposed:

360 Kg/Day

Type of Waste Category

Quantity permitted for Handling

(i) Yellow

130 Kg/Day

(ii) Red

160 Kg/Day

(iii) White (Translucent)

30 Kg/Day

(iv) Blue

40 Kg/Day

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

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

Signature Dr. BMS REDDY
Designation : Sr. Env. Engineer (CDC)
Delhi Pollution Control Committee

* Terms and conditions of authorization

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

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

3. The authorization or its renewal shall be produced for inspection at the request of any officer authorized by DPCC. The person authorized shall not rent, lend, sell, transfer or otherwise transport the bio-medical waste without obtaining prior permission of DPCC.

4. It is the duty of the authorized person to take prior permission of the prescribed authority i.e. Delhi Pollution Control Committee to close down the facility and such other terms and conditions may be stipulated by the prescribed authority.

5. It shall be ensured that the Bio Medical Waste is finally treated within a period of 48 hours. If for any reason it becomes unavoidable, intimation should be given in writing to DPCC and measures are to be ensured so that the waste does not adversely affect human health and the environment.

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