

PAIDIR/GNCC/N.D.2
Dy. No. 1500
23/3/24

Form - IV (See rule 13)
ANNUAL REPORT

PAIDIR/GNCC/N.D.2
Dy. No. 1500
23/3/24

[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)]

| Sl. No. | Particulars | |
|---------|---|---|
| 1. | Particulars of the Occupier | : |
| | (i) Name of the authorized person (occupier or operator of facility) | Dr. Kirti Singh |
| | (ii) Name of HCF or CBMWTF | Guru Nanak Eye Center |
| | (iii) Address for Correspondence | Maharaja Ranjet Singh Marg Delhi-02 |
| | (iv) Address of Facility | Maharaja Ranjet Singh Marg Delhi-02 |
| | (v) Tel. No, Fax. No | 01123235146 |
| | (vi) E-mail ID | gnecdir@gmail.com |
| | (vii) URL of Website | gnec.delhi.gov.in |
| | (viii) GPS coordinates of HCF or CBMWTF | |
| | (ix) Ownership of HCF or CBMWTF | (State Government) |
| | (x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules | Authorization No. : DPCC/(II)(5)(01)/2023 B.M.W./NST/AC valid up to 01/04/2027 |
| | (xi). Status of Consents under Water Act and Air Act | Valid up to: 7/2/2028 |
| 2. | Type of Health Care Facility | Hospital (HCF) |
| | (i) Bedded Hospital | No. of Beds: 212 |
| | (ii) Non-bedded hospital | N/A |
| | (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other) | |
| | (iii) License number and its date of expiry | N/A |
| 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: | N/A |
| | (iv) Quantity of biomedical waste treated or disposed by CBMWTF | N/A |
| 4. | Quantity of waste generated or disposed in Kg per annum (on monthly average basis) | Yellow Category: 2675.6 kg/year Red Category : 7042.6 kg/year White: 329.0 kg/year Blue Category : 695.0 kg/year General Solid waste: 770.0 kg/year |
| 5 | Details of the Storage, treatment, transportation, processing and Disposal Facility:- | |
| | No. on site treatment, all waste has been send to CBMWTF | |
| | (i) Details of the on-site storage facility | Size: - Adequate Capacity: Adequate Provision of on-site storage : Yes |

22/3/24 MRO
22/3/24

| disposal facilities | | <div> Type of treatment equipment No of units Cap acity Kg/day Quantity treated disposed in kg per annum </div> |
|--|---|--|
| | | <p>Incinerators :- N/A</p> <p>Plasma Pyrolysis :- N/A</p> <p>Autoclaves :- One 180 Ltr. 556.5 kg</p> <p>Microwave :- One 60 Ltr.</p> <p>Hydroclave:- N/A</p> <p>Shredder :- N/A</p> <p>Needle tip cutter or :- One in each department</p> <p>destroyer</p> <p>Sharps</p> <p>encapsulation or</p> <p>concrete pit :- N/A</p> <p>Deep burial pits: N/A</p> <p>Chemical disinfection: N/A</p> <p>Any other treatment equipment:</p> |
| (iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum. | : | N/A (all waste send to CBMWTF) for treatment and disposal |
| (iv) No of vehicles used for collection and transportation of biomedical waste | : | One vehicle used by CBMWTF S.M.S. water grace, BMW, Pvt. Ltd. |
| (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum | | ETP Sludge E.T.P. sludge around:- 68 kg/year as per record by P.W.D. electrical department |
| (vi) Name of the Common Bio- : Medical Waste Treatment Facility Operator through which wastes are disposed of | | M/S SMS water grace, Bio medical waste (P) Ltd. |
| (vii) List of member HCF not handedover 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 (copy of the minutes of meeting enclosed) |

| | | |
|----|---|--|
| 7 | Details trainings conducted on BMW | 5 training session (Avg.) per annual |
| | (i) Number of trainings conducted on BMW Management | 115 personnel trained (Avg.) per annual |
| | (ii) number of personnel trained | |
| | (iii) number of personnel trained at the time of induction | 31 |
| | (iv) number of personnel not undergone any training so far | All covered |
| | (v) whether standard manual for training is available? | Yes |
| 8 | (vi) any other information | Training conducted on regular basis |
| | Details of the accident occurred during the year | Nil |
| | (i) Number of Accidents occurred | Nil |
| | (ii) Number of the persons affected | N/A |
| | (iii) Remedial Action taken (Please attach details if any) | N/A |
| 9. | (iv) Any Fatality occurred, details. | N/A |
| | Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards? | Facility does not have incinerator. All waste sent to CBMWTF |
| | Details of Continuous online emission monitoring systems installed | MRD bases 500 Kw E.T.P. |
| 10 | Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year? | There are one functional E.T.P. installed with 500 KLD. One autoclave machine in path lab for treatment of lab waste |
| 11 | Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year? | Yes, meeting the log - 4 standard Nil |
| 12 | Any other relevant information | N/A |

Certified that the above report is for the period from
1st January 2023 to 31st December 2023

Ramesh K
New Officer
18/3/24

[Signature]
19/03/24
Dr. B. K. SHARMA
Assistant Professor
Guru Nanak Eye Centre
Maulana Azad Medical College
Govt. of NCT of Delhi
New Delhi-110002

Name and Signature of the Head of the Institution

Dr. KIRTI SINGH
MD, DNB, FRCS, FRIMER, DHA
Director Professor & Director
Guru Nanak Eye Centre
Govt. of NCT of Delhi
Maharaja Ranjit Singh Marg
New Delhi- 110002

Date: 19/03/24
Place: New Delhi


**GURU NANAK EYE CENTRE
GOVT. OF N.C.T. OF DELHI
MAHARAJA RANJIT SINGH MARG: NEW DELHI -110002**

**Bio medical waste management committee
Minutes of meeting**

A bio medical waste management meeting was held on 19/9/23 at 2:30 pm at ward no 4 conference hall G.N.E.C. following points were discussed in the meeting.

1. Minutes of last bio medical waste management committee ~~was~~ discussed.
2. All demands from bio waste ~~should~~ ^{would} be addressed to MOI/C bio medical and then send to general store for needful action
3. S.O.P (standard operating protocol) will be prepared in a form of small booklet and circulate it to all departments for better management and guideline for staff.
4. The estimate for the microwave machine which was installed for pretreatment of bio waste would be taken and a plan for it to be made .
5. The list of waste handlers will be prepare and sent to path lab for bio chemistry test according to schedule approved by MOI/C lab.
6. Supply of bio medical waste equipment/items will be clearly monitored.

Meeting ends with vote of thanks.


Dr. Bhumiika

(MOI/C B.M.W)


Dr. Shruti Battacharya,

(S/R)


Mr. Ramesh Kumar

(Nsg.officer)


Dr. Annu **JOON**

(Link Officer B.M.W)


Ms. Kalpana bhati

(SR.Nsg officer)


Ms. Priti Agerwal

(PA to Director)