



GOVERNMENT OF N.C.T OF DELHI
INDIRA GANDHI HOSPITAL
SECTOR-9, DWARKA, NEW DELHI-110077



C/14

File NO. F-14/17(3)/BMW/IGH/2023 IGH 4972-75

Date: 23/4/25

To
Chairperson,
DPCC Building 4th and 5th Floor
ISBT, GT Karnal road, Kashmere Gate
New Delhi - 110006

Subject :- Annual report BMW management of Indira Gandhi Hospital, Dwarka

Sir/Madam,
Please find enclosed herewith annual BMW report of Indira Gandhi Hospital, Dwarka for a period from 01-01-2024 to 31-12-24.

Yours faithfully


23/4/25

Dr. Rajkumari Meena
HOD Microbiology and Nodal officer BMW

Copy to:-

1. Additional director, BMW Management, Govt of NCT of Delhi, DHS, Swasthya Seva Nideshalya Bhavan, F-17, Karkardooma, Delhi -110032
2. Guard File
3. Office copy

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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)]

Sl. No.	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	Prof .. Dr B.L.Choudhary
	(ii) Name of HCF or CBMWTF	:	Indira Gandhi Hospital
	(iii) Address for Correspondence	:	Sector 9, Dwarka, 110077
	(iv) Address of Facility		NA
	(v) Tel. No, Fax. No	:	20895997
	(vi) E-mail ID	:	medicaldirectorigh@gmail.com
	(vii) URL of Website		NA
	(viii) GPS coordinates of HCF or CBMWTF		htt://maps.app.goo.gl/MKTebpwAb5fCPuxf9
	(ix) Ownership of HCF or CBMWTF	:	Government of Delhi
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: Applied For, Application number- 5880585.....valid up to
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 7-10-2025, Consent to establish granted.
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds: 1241
	(ii) Non-bedded hospital	:	NA
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)		
	(iii) License number and its date of expiry		NA
3.	Details of CBMWTF	:	NA
	(i) Number healthcare facilities covered by CBMWTF	:	NA
	(ii) No of beds covered by CBMWTF	:	NA
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	NA Kg per day

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	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	NA Kg/day				
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category :19273kg/annum				
			Red Category :28996kg/annum				
			White:811kg/annum				
			Blue Category :3384kg/annum				
			General Solid waste:48937kg/annum				
5	Details of the Storage, treatment, transportation, processing and Disposal Facility						
	(i) Details of the on-site storage facility	:	Size : Approx 30x20x10				
			Capacity : 700 kg				
			Provision of on-site storage : Stored in color coded bins and handed over to CBWTF next day				
	(ii) Details of the treatment or disposal facilities	:	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum	
			Incinerators Plasma Pyrolysis Autoclaves	2	180	11499kg/annum	
			Microwave Hydroclave Shredder Needle tip cutter or destroyer Sharps encapsulation or concrete pit Deep burial pits: Chemical disinfection: Any other treatment equipment:	30 1% hypochlorite used	30	55/month	
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.)-NA				
	(iv) No of vehicles used for collection and transportation of biomedical waste	:	Handed over to CBWTF				
	(v) Details of incineration ash and ETP sludge generated and disposed		Quantity Generated		Where Disposed		

	during the treatment of wastes in Kg per annum	Incineration Ash NA ETP Sludge NIL NIL
	(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of	SMS Water Grace BMW Pvt. Ltd. Nilothe village , New Delhi
	(vii) List of member HCF not handed over bio-medical waste.	-
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	Yes, attached
7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management.	24
	(ii) number of personnel trained	335
	(iii) number of personnel trained at the time of induction	275
	(iv) number of personnel not undergone any training so far	Nil
	(v) whether standard manual for training is available?	Yes
	(vi) any other information	-
8	Details of the accident occurred during the year	NSI-19
	(i) Number of Accidents occurred	19
	(ii) Number of the persons affected	19
	(iii) Remedial Action taken (Please attach details if any)	Training for proper handling of sharp waste.
	(iv) Any Fatality occurred, details.	Nil
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	NA
	Details of Continuous online emission monitoring systems installed	NA
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	ETP installed and functioning in the hospital
11	Is the disinfection method or sterilization meeting the log 4	Yes

	standards? How many times you have not met the standards in a year?		
12	Any other relevant information	:	NA

Certified that the above report is for the period from
01-01-2024 to 31-12-24

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Bl
23/4/25
Prof. Dr. B. L. CHAUDHARY
MD. IGH DWARKA

Name and Signature of the Head of the Institution

Date: 23-04-25
Place New Delhi



GOVERNMENT OF N.C.T OF DELHI
INDIRA GANDHI HOSPITAL
SECTOR-9, DWARKA, NEW DELHI-110077

राष्ट्रीय राजधानी क्षेत्र दिल्ली सरकार
इंदिरा गांधी अस्पताल
सेक्टर-०९ द्वारका, नई दिल्ली-११००७७



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Date: 26/03/25

Minutes of Meeting

A meeting was convened under the chairpersonship of Medical Director IGH with Infection control committee and BMW committee, AMS/HOO, AMS (admin.) and DMS(ME) on 17-03-2024 at 02:00 pm in the Boardroom 5 floor Admin block regarding infection control practices and BMW management in the hospital. The attendance sheets of members who were present in the meeting is enclosed.

The following points were discussed in the meeting and directions were issued as under:-

1. The nodal officer of infection control presented DAI rate and SSI rate data and the same was discussed with committee members.
2. The nodal officer HIC also informed that VAP rate was found to be increased in the ICU, it was decided not to change the duty of the nursing orderly and housekeeping staff frequently in critical care area such as the ICU. (Action – Nodal Officer Outsource)
3. The plasma filter in ICU and HEPA filter in OT need to be changed and It is was directed to PWD to work on the matter. (Action - PWD)
4. Currently we have a TSSU in which we have two autoclaves in the OT for the sterilization of instruments that are sufficient for the present workload, but for the future, there is a need for a CSSD as the number of patients is increasing day by day. (Action – HOD Anaesthesia)
5. It was discussed that PPE kit, hand wash, sterilizer were not available for a brief period therefore direction were given of purchase branch to procure these items on priority basis. (Action – Purchase Officer)
6. Further, also discussed that OT and ICU zoning needs to be done and HOD Anaesthesia agreed to work on it. (Action – HOD Anaesthesia, OT Incharge, ICU/PICU/NICU Incharge)

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7. The health records and immunization records of food handler/kitchen workers, housekeeping staff and nursing orderly are to be submitted to the HIC team. (Action – Nodal Officer Kitchen and Outsource)
8. Directions were issued to AMS (A) to speed up the matter regarding DPCC authorization for BMW management in the hospital. (Action – AMS admin.)
9. As informed by nodal officer BMW that the general waste storage area and BMW area are located side by side hence it was decided to relocate the general waste storage area. (Action - PWD)
10. The Gumboots and heavy-duty gloves provided by the agency of sanitation services are not available in appropriate sizes and also not provided to all housekeeping staff, hence directions were issued to look in the matter and take appropriate action. (Action – nodal officer outsource)
11. The HOD anaesthesia agreed that regular monthly air exchange certificates and positive pressure certificates of the OT, ICU, and NICU will be provided to the HIC team. (Action – HOD anaesthesia)

The meeting ended with vote of thanks to chair,


Dr. Rajkumari Meena
Nodal officer infection control and
BMW nodal officer IGH

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Copy to:

1. PA to Medical Director, IGH, Dwarka, New Delhi
2. AMS/HOO, IGH
3. AMS(Adm.)
4. DMS (ME)
5. All committee members
6. Guard File.


-Dr Rajkumari Meena
Nodal officer infection control and
BMW nodal officer
IGH, Dwarka