

**SANJAY GANDHI MEMORIAL HOSPITAL
GOVERNMENT OF NCT OF DELHI
S-BLOCK MANGOL PURI DELHI - 110083
(CARETAKING BRANCH)**

<http://health.delhigovt.nic.in>

mssgmh@rediffmail.com

No. F. 5/39/SGMH/CT Branch/BMW-Report/2018/9184 Dated: 16/2/26

To

1. The Member Secretary
Delhi Pollution Control Committee,
4th floor, ISBT Building,
Kashmere Gate,
Delhi-110006.
2. Dr. R. Aggarwal, Addl. Director (BMW Management),
Dte. Of Health Services, Swasthya Sewa Nideshalaya Bhawan
F-17, Karkardooma, Delhi-10032.
3. District Program Officer (BMW Mgt.)
North-West District.

Sub: - Annual Report of Bio-Medical Waste.

Sir,

Please find enclosed annual report on Bio-Medical Waste Management in respect of this hospital for period Jan-2025 to Dec-2025 in Form-IV.

This is for your kind information.

Enclosed: As mentioned above.

**(DR. Nymphia Kaul)
NODAL OFFICER (BMW)**

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)]

Sr. No.	Particulars	
1	Particulars of the Occupier :	
	(i) Name of the authorised person (occupier or operator of facility) :	Medical Superintendent
	(ii) Name of HCF or CBMWTF :	
	(iii) Address for Correspondence :	SGM Hospital , S Block, Mangolpuri, Delhi-110083
	(iv) Address of Facility	SGM Hospital , S Block, Mangolpuri, Delhi-110083
	(v) Tel. No, Fax. No :	011-20873051
	(vi) E-mail ID :	mssgmh@rediffmail.com
	(vii) URL of Website	https://sgmh.delhi.gov.in
	(viii) GPS coordinates of HCF or CBMWTF	
	(ix) Ownership of HCF or CBMWTF :	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules :	Authorisation No.: DPCC/(11)(5)(01)/2024/bmw /nst/auth/13044192N dated 23.10.2024 valid up to 06.04.2027 (Annexure A)
	(xi). Status of Consents under Water Act and Air Act :	Valid up to:10.07.2028
2	Type of Health Care Facility :	
	(i) Bedded Hospital :	No. of Beds: 300
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other) :	NA
	(iii) License number and its date of expiry	Government Hospital
3.	Details of CBMWTF :	Ms. Biotic Waste Solution Pvt. Ltd.
	(i) Number healthcare facilities covered by CBMWTF :	
	(ii) No of beds covered by CBMWTF :	
	(iii) Installed treatment and disposal capacity of CBMWTF	: _____ Kg per day
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	12.5 Kg/day
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	Yellow Category : Annexure B
		Red Category : Annexure B
		White: Annexure B
		Blue Category : Annexure B
		General Solid waste:

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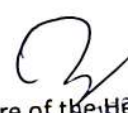
5	Details of the Storage, treatment, transportation, processing and Disposal Facility																																																	
	(i) Details of the on-site storage facility	Size : 120'x246'																																																
		Capacity : 3 rooms																																																
		Provision of on-site storage : : (cold storage or any other provision) NA																																																
	(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>01</td> <td>350 litres</td> <td>5000 kg</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	01	350 litres	5000 kg	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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Any other treatment equipment:																																																		
	(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 :	Red Trolley 02 Yellow Trolley 02																																																
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Quantity generated Where disposed Incineration Ash ETP Sludge STP sludge (Annexure C)																																																
	(vi) Name of the Common BioMedical Waste Treatment Facility Operator through which wastes are disposed of :	Ms. Biotic Waste Solution Pvt. Ltd.																																																
	(vii) List of member HCF not handed over bio-medical waste.	NA																																																
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	Yes Copy enclosed (Annexure D) Minutes of Meeting (Annexure E)																																																
7	Details trainings conducted on BMW (i) Number of trainings conducted on BMW Management. (ii) number of personnel trained	Copy enclosed (Annexure F)																																																

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	(iii) number of personnel trained at the time of induction	Copy enclosed (Annexure F)
	(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	
	(i) Number of Accidents occurred	Nil
	(ii) Number of the persons affected	Nil
	(iii) Remedial Action taken (Please attach details if any)	Nil
	(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	No
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Copy enclosed (Annexure G)
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
12	Any other relevant information	

Certified that the above report is for the period from January 2025 to December 2025.

M. K. Singh
16/2/26


 Name and Signature of the Head of the Institution
 Dr. Mirtunjay Kumar, Medical Superintendent
 Date: 16/2/26
 Place: Banjar
Govt. of N.C.T. of Delhi
Mangol Puri, Delhi-83



DELHI POLLUTION CONTROL COMMITTEE
(Government of N.C.T. of Delhi) 4th & 5th Floor, ISHF Building
Kashmere Gate, Delhi 110006
(Visit us at <https://www.dppccnctm.nic.in>)



(AUTHORIZATION UNDER BIO MEDICAL WASTE MANAGEMENT RULES, 2016)

File number of authorization : **DPPCC(1)(S)(01)/2024/BMW/NST/AUTH/13044192N**
Application No: 7647420
Date: 23/10/2024

M/s SANJAY GANDHI MEMORIAL HOSPITAL, an occupier of the facility located at S-Block, Mangolpuri 110083 is hereby granted this authorization for Generation, Segregation, Collection, Storage, Transportation of Bio-medical Waste at the premises and for Transportation, Treatment and Disposal of Bio-Medical Waste through Common Bio-Medical Waste Treatment Facility (CBMWTF) authorized by Delhi Pollution Control Committee.

- Number of beds of HCF: 300
- Quantity of Bio-medical waste handled: 163 (Kg/day)
- This authorization shall be in force for a period of Five Years and valid up to 06/04/2027.
- 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.
- Meghal Singh Rawat (Kashmere Gate, Delhi 110006)

Signature.....
Designation.....

Terms and Conditions:-

- The occupier shall comply with the provisions of Bio-Medical Waste Management Rules, 2016 as amended to date.
- The occupier shall comply with the standards prescribed in Schedule-II of Bio-Medical Waste Management Rules, 2016 as amended to date for discharge of the Waste Water/ Effluent generated or treated.
- The authorization or its renewal shall be produced for inspection at the request of any officer authorized by DPPCC.
- This 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.
- 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, incineration should be given in writing to DPPCC and measures are to be ensured so that the waste does not adversely affect human health and the environment.
- The occupier shall ensure that bio-medical waste is not mixed with other wastes and is segregated into containers / bags at the point of generation in accordance with Schedule-I (part I).

Annexure - A

The occupier shall have a valid agreement with the operator of a facility authorized by DPPCC for collection, transportation, treatment & disposal of the bio-medical waste.

The occupier shall hand over the bio-medical waste timely to the authorized operator of a facility duly segregated, labelled, tagged and kept in proper containers for the collection, transportation, treatment & disposal as per Rules.

The occupier shall inform the prescribed authority immediately in case the operator of facility does not collect the bio medical waste with in the intended time or as per the agreed time.

The occupier shall maintain records of the Bio-Medical Waste generated and disposed off handed over to the authorized operator of a facility (CBWTF). The record shall be made available, for inspection & verification, to any officer authorized by DPPCC. The records shall be maintained for the period of 5 years in accordance with these rules and guidelines issued by Central Government or the Central Pollution Control Board or the prescribed authority as the case may be.

The occupier shall also ensure proper collection and disposal of bio-medical waste containing mercury through the vendor authorized for the purpose. The occupier shall phase out mercury based equipment e.g. thermometers and B.P. Measuring Equipment.

In case of any major accident involving Bio-Medical Waste, the occupier shall report the accident in Form-I, prescribed under the Rules, to DPPCC.

The occupier shall pre-treat the laboratory waste, microbiological waste, blood samples and blood bags through disinfection or sterilization on-site in the manner as prescribed by the World Health Organization (WHO) or National AIDS Control Organization (NACO) guidelines and then sent to the common bio-medical waste treatment facility for final disposal.

The occupier is required to display the authorization at a prominent place in its premises for view of general public.

The occupier shall use only non-chlorinated plastic bags & gloves as per Notification dated 16th March, 2018 published by MOEF&CC.

The occupier shall establish a Bar-Code System for bags or containers containing bio-medical waste to be sent out of the premises for the further treatment & disposal in accordance with the guidelines issued by CPCB.

The occupier shall ensure segregation of liquid chemical waste at source and ensure pre-treatment or neutralization prior to mixing with other generated effluent from HCF, if any.

The occupier shall immunise all its health care workers and others, involved in handling of bio-medical waste for protection against diseases including Hepatitis-B & Tetanus that are likely to be transmitted by the handling of bio-medical waste, in the manner as prescribed in the National Immunization Policy or the guidelines of the Ministry of Health & Family Welfare issued from time to time.

The occupier shall ensure occupational safety of all its health care workers & others involved in handling of bio-medical waste by providing appropriate & adequate personal protective equipment.

The occupier shall conduct health check-up at the time of induction & at least once in a year for all its health care workers others involved in handling of bio-medical waste & shall maintain records for the same.

The occupier shall develop its own website by 15th March, 2020 and shall make available the annual report on its website.

The occupier shall provide training to all its health care workers and others, involved in handling of bio-medical waste at the time of induction & thereafter at regular intervals & the details of training programmes conducted, number of personnel trained & number of personnel not undergone any training shall be provided in the Annual Report.

The occupier shall submit the Annual Report in Form-IV by 30th June every year, including information about the categories and quantities of bio-medical waste generated from 1st January to 31st December of the preceding year.

The occupier shall submit the copy of fresh valid agreement with CBWTF to this office within 15 days

expiry of previous agreement or in case of any change.

In case the Occupier is having a Generator Set, he shall comply with the noise standards laid down vide Gazette Notification of Ministry of Environment, Forest & Climate Change (MoEF&CC), Government of India Dated 17.05.2002 and 12.07.2004, as amended to date, for the Diesel Generator Set(s) and shall also comply with the Emission Standards prescribed for Diesel Engines (Engine rating more than 0.8 MW) for MOEF, Dated 09.07.2002, as amended to date.

Stack Height for Generator Sets (Engine rating more than 0.8 MW) for maximum of following:

- Minimum 6 meter above the building where generator set is installed
- 30 meter
- $14Q^{0.3}$ (Q- Total SO₂ emission from the plant in kg/hr) and for other DG Set(s) (upto 0.8 MW) stack height shall be as per the following formula, $H = h + 0.2(KVA)^{0.5}$ (H- Total Height of stack in meter, h = Height of the building in meters where the Generator Set is installed, KVA is capacity of Generator set in KVA).

26. The Occupier needs to comply with the directions of CAQM (Commission for Air Quality Management in National Capital Region and Adjoining Areas) issued from time to time regarding Generator Sets, Graded Response Action Plan (GRAP) & other necessary directions if applicable.

27. The Occupier shall comply with the provisions of Hazardous and Other Wastes (Management & Transboundary Movement) Rules, 2016 as amended to date, Bio-medical Waste Management Rules, 2016 as amended to date, Plastic Waste Management Rules, 2016 as amended to date, Battery Waste Management Rules, 2022 as amended to date, Solid Waste Management Rules, 2016 as amended to date, Construction and Demolition Waste Management Rules, 2016 as amended to date, E-Waste (Management) Rules, 2022 as amended to date, the Manufacture, Storage and Import of Hazardous Chemicals Rules, 1989, as amended to date, wherever applicable. All such wastes generated from the unit will be managed and handled as per the provisions of the said Rules and will be disposed off only through the Recycler/Preprocessors/ Authorised Agencies for such wastes, authorised by MoEF/ Central Pollution Control Board/ State Pollution Control Board/ Committee/ DPCC as per details available on their websites.

28. The Occupier shall comply the other prescribed standards of Effluent/ Emissions as prescribed and as applicable under the provisions of the Environment (Protection) Act, 1986, as amended to date and the various Rules made there under including the Noise Pollution (Regulation and Control) Rules, 2000 as amended to date.

29. Submission of false information shall make the authorization liable for cancellation without any notice.

30. The Occupier shall use only Piped Natural Gas (PNG) as fuel in boilers, if any.

31. In case of violation of any of above said conditions, penal action will be initiated against the Occupier including withdrawal of authorization/consent etc.

32. In case of failure to comply with any of the above conditions and / or with any provision of the Act or of these Rules, authorization issued to the Occupier may be suspended or cancelled as per the provisions under sub-rule 10 (2) of Bio- Medical Waste Management Rules, 2016, as amended to date.

33. It will be the responsibility of the Occupier to obtain prior clearances/ approval and ensure compliances under all other relevant Acts/ Rules/ Regulations/ Guidelines/ Instructions/ Court Orders/ Tribunal Orders as applicable to this Health Care Facility (HCF).

34. Please note that the issuance of authorization shall not be construed in any manner whatsoever that you are legitimately operating your Health Care Establishment with respect to other statutory requirements viz- local land use, Master Plan of Delhi, etc.

35. The authorization is subject to the condition that you are operating as per the provision of Master Plan of Delhi, 2021.

The Occupier shall ensure treatment and disposal of the entire effluent/liquid waste generated from the unit in accordance with the provisions under the Water (Prevention and Control of Pollution) Act, 1974 and shall meet the standards prescribed by Delhi Pollution Control Committee. The Occupier shall also ensure the maximum re-use of the treated effluent for various purposes e.g. gardening, flushing, cooling, etc.

37. If the Occupier is having laundry facility and/or not connected to the public sewer, the Occupier is required to install requisite treatment system before its discharge to meet the standards as prescribed under BMWM Rules, 2016.

38. Sludge from Effluent Treatment Plant shall be given to common bio-medical waste treatment facility for incineration or to hazardous waste treatment, storage and disposal facility for disposal.

39. The occupier shall apply for renewal of authorization under the aforementioned Rules before one month of the expiry of this authorization.

40. The occupier shall apply for fresh Authorization in case of any change/ alteration in the activity/number of beds etc.

41. Environmental Compensation imposed (if any) shall be dealt separately.

42. This Authorization is granted with the condition that the HCF shall submit the Noise Monitoring Report (NMR) of Generator Sets within 60 days from the date of issue of this authorization.

43. The Authorization is being issued as per the decision taken by the BMW Committee No. 1 in its meeting held on 11.06.2024.

To,

SANJAY GANDHI MEMORIAL HOSPITAL
S-Block, Mangolpuri
110083



DELHI POLLUTION CONTROL COMMITTEE

(Government of N.C.T. of Delhi, 4th & 5th Floor, JSRT Building,
Kashmere Gate, Delhi 110006
(Visit us at <https://www.dpccnctm.nic.in>)



Ministry for
Environment

CONSENT ORDER

Certificate No.: G-44550

Name of the unit : SANJAY GANDHI MEMORIAL HOSPITAL
Address : S-Block, Mangolpuri, Health Care Facility, Delhi - 110083
Area : Non Industrial
Area Name : Health Care Facility
Consent Order No : DPCC/MC/2024/9779464
Date of issue : 23/10/2024
Product Name : [BMW]
Product Capacity : 145 Kg/Day
Fuel Type : Light Diesel Oil (C: 0 | Q: 834
Control Equipment : Other
ETP Details : D-Capacity: NO | Type: Oil & Grease Trap
Stack Details : 9779523 | AT: Boiler | H: 30
Activity Name : Health Care Establishments having bed strength above 50 beds and connected or not connected to Sewer and with boiler (300 Bedded HCF)
Category : [RED]
Generator Set(s) : 625

This Consent to Operate is hereby granted under section 21 of the Air (Prevention & Control of Pollution) Act, 1981 and under section 25/26 of the Water (Prevention & Control of Pollution) Act, 1974 under RED Category. This consent is subjected to terms and conditions specified overleaf. This is being issued with reference to your application id 9779464 valid from 11/07/2023 to 10/07/2028.

Meghraj Singh Rawat
Senior Environmental Engineer

Digitally signed by
Meghraj Singh Rawat
Date: 2024.10.23
16:31:33 +05'30'

Terms and Conditions

1. The Consentee shall meet the effluent standards i.e. pH = 6.5 - 9.0, Suspended Solids = 100 mg/l, Oil and Grease = 10 mg/l, Bio-chemical Oxygen Demand (BOD) = 30 mg/l, Chemical Oxygen Demand (COD) = 250 mg/l, Bio-assay Test (Percentage survival of fish after 96 hours in 100% effluent) = 90-100 %.
2. The Consent is activity specific and based on the information provided in the consent application along with the subsequent documents/ information submitted to Delhi Pollution Control Committee (DPCC). The Consentee shall apply for fresh consent in case of any change in the activity/ manufacturing process.
3. The Consentee shall display the Name of the unit along with its Address, name of the Proprietor / Directors/ Partners etc., Contact Phone No(s) and its Activities/ Processes/ Products on a Display Board to be placed / fixed at the main gate of the unit.
4. The Consented/ unit shall have/ take separate Electricity/ Power connection in its name and shall have/ install separate meter in this regard.
5. The Consentee shall provide and maintain a separate drainage system for collection of trade and sewage effluents. Terminal manholes shall be provided at the end of the collection system and shall be connected to the conveyance system/ sewerage system of the area leading to the Common Effluent Treatment Plant of the Industrial Area/ Sewage Treatment Plant of the catchment area.
6. The Consentee shall obtain permission from Delhi Jal Board for ground water extraction, if any, as per the various orders/ Notification of Govt. of Delhi. The Consentee shall not extract the groundwater without obtaining prior permission in this regard from DDB/ CGWA. The Consentee shall ensure that there is no bore well in the premises and if exist, the same shall be closed/ sealed with immediate effect till permission received from DDB/ CGWA.
7. The Consentee shall ensure proper channelization/ control system for fugitive emissions generated from the various activities/ processes of the unit and maintain good housekeeping practices so as to maintain a clean & safe environment in and around the premises of the unit.
The Consentee shall comply with the noise standards laid down vide Gazette Notification of Ministry of Environment and Forest (MoEF), Government of India Dated 17.05.2002 & 12.07.2004, as amended to date, for the Diesel Generator Set(s) and shall also comply with the Emission Standards prescribed for Diesel Engines [(Engine rating more than 0.8 MW) for Power Plant, Generator Set applications and other requirements], if any, as per the Gazette Notification of MoEF, Dated 09.07.2002, as amended to date. Stack Height for sets (Engine rating more than 0.8 MW) commissioned after 01.07.2003 shall be maximum of following:
a) Minimum 6 metre above the building where generator set is installed
b) 30 metre
c) $1.4Q^{0.3}$ (Q- Total SO₂ emission from the plant in kg/hr) and for other DG Set(s) (upto 0.8 MW) stack height shall be as per the following formula, $H = h + 0.2(KVA)^{0.5}$ (H- Total Height of stack in metre, h = Height of the building in metres where the Generator Set is installed, KVA - Total Generator capacity of the set in KVA).
9. The Consentee needs to comply with the directions of CAQM (Commission for Air Quality Management in National Capital Region and Adjoining Areas) issued from time to time regarding Generator Sets, Graded Response Action Plan (GRAP) & other necessary directions if applicable.

The Consentee shall comply with the provisions of Hazardous and Other Wastes (Management & Transboundary Movement) Rules, 2016 as amended to date, Bio-medical Waste Management Rules, 2016 as amended to date, Plastic Waste Management Rules, 2016 as amended to date, Battery Waste Management Rules, 2022 as amended to date, Solid Waste Management Rules, 2016 as amended to date, Construction and Demolition Waste Management Rules, 2016 as amended to date, E-Waste (Management) Rules, 2022 as amended to date, the Manufacture, Storage and Import of Hazardous Chemicals Rules, 1989, as amended to date, wherever applicable. All such wastes generated from the unit will be managed and handled as per the provisions of the said Rules and will be disposed off only through the Recycler/ Preprocessors/ Authorised Agencies for such wastes, authorised by MoEF/ Central Pollution Control Board/ State Pollution Control Board/ Committee/ DPCC as per details available on their websites.

11. The Consentee shall comply with the other prescribed standards of Effluent/ Emissions as prescribed and as applicable under the provisions of the Environment (Protection) Act, 1986, as amended to date and the various Rules made there under including the Noise Pollution (Regulation and Control) Rules, 2000 as amended to date.
12. The Consentee shall promote the use of LED and recovery of mercury from CFL Lamps and should create a system of replacing old bulbs for new to enable recovery of mercury after the bulbs are fused.
13. Sludge from Effluent Treatment Plant shall be given to common bio-medical waste treatment facility for incineration or to hazardous waste treatment, storage and disposal facility for disposal.
14. The zero wastewater discharge condition to be achieved with installation of onsite Sewage Treatment Plant. Trade effluent shall conform to the norms and standards prescribed by Delhi Pollution Control Committee. The STP should be certified by an independent expert and a report in this regard should be submitted to Delhi Pollution Control Committee before the project is commissioned for operation. Necessary measures should be made to mitigate the odour problem from STP.
15. Quantity of Sewage/ trade effluent discharge from the unit shall not exceed Nil litre/day (100 % wastewater recycling and zero wastewater discharge).
16. The treated wastewater of STP shall be recycled and reused for horticulture/ landscaping/ cooling/ flushing purposes to reduce the demand of fresh water as committed.
17. The Project Proponent shall provide electromagnetic flow meter at the inlet and outlet of the water supply, inlet and outlet of the STP and any pipeline to be used for re-using the treated wastewater back into the system for cooling, flushing and for horticulture purpose/ green etc. and shall maintain a record of readings of each such meter on daily basis.
18. The quantity of fresh water usage and water recycling shall be measured and recorded to monitor the water balance as projected by the Project Proponent. The record shall be submitted to the Delhi Pollution Control Committee on six monthly basis.
19. The Consentee shall properly maintain the Acoustic Enclosure/ Acoustic Treated room for DG Set(s) in good condition and maintain the adequate stack height for DG Set(s) to meet the prescribed standards/ norms as mentioned above. The Consentee shall not operate the DG Set(s) till compliance of the prescribed norms/standards for DG Sets.
20. The Consentee shall comply with the applicable provisions/ Directions given vide Gazette Notification of Department of Environment, Govt. of NCT of Delhi, dated 23.10.2012 including the directions that no person shall manufacture, import, store, sell or transport any kind of plastic carry bags (including that of Polypropylene, Non-woven fabric type carry bags) in the whole of National Capital Territory of Delhi if applicable.

The Consentee shall provide widespread Green Cover and the use of Fly Ash as per Fly Ash notification dated 14.09.1999 shall be mandatory. 383

22. Project Proponent will ensure use of Ozone Depletion Substances (ODS) free appliances so that no toxic gases in air conditioning/ refrigeration/ fire extinguishers are created.

23. It will be the responsibility of the Project Proponent to obtain prior clearances/ approval and ensure compliances under all other relevant Acts/ Rules/ Regulations/ Guidelines/ Instructions/ Court Orders/ Tribunal Orders as applicable to this Health Care Facility (HCF).

24. The Consentee shall not carry out any activity falling under the Prohibited/ Negative list of Industries (Annexure III of MPD-2021) which are prohibited in National Capital Territory of Delhi, as per Master Plan of Delhi.

25. The Consentee shall ensure the safeguards as envisaged in Environmental Clearance issued to Sanjay Gandhi Memorial Hospital and shall submit a half yearly compliance report in respect of terms and conditions of Environmental Clearance to Regional Office of MoEF&CC and simultaneously to DPCC on the prescribed date.

26. The Consentee shall switch over its fuel to PNG fuel (wherever the PNG fuel pipeline supplied by IGL) with immediate effect and submit the compliance report within 30 days of issuance of this consent order.

27. The Consentee shall submit an application for extension of the Consent to Establish/ Consent to Operate under Water and Air Acts & Authorization under BMW Rules, 2016 one month in advance of the expiry date of this Consent Order/ date of start of operation of the HCF.

28. This consent is being granted focusing only on the Water Act 1974/ Air Act 1981. The project will be regulated by the concerned local Civic Authorities under the provisions of the relevant provisions of the extant MPD-2021, Building Control Regulations and Safety Regulations. The investment made in the project, if any, based on Consent so granted, in anticipation of the clearance from other statutory authorities shall be entirely at the cost and risk of the project proponent. DPCC shall not be responsible in this regard in any manner.

29. In the event of any information furnished by the Consentee found to be false OR in case of failure to comply with any of the above mentioned consent conditions, consent granted through this Consent Order shall be deemed to be revoked without any notice and necessary action as per law shall be taken, which may include closure of the unit and prosecution for wrong declaration.

30. Notwithstanding anything contained in this Consent Order, Delhi Pollution Control Committee, reserves its right to review any/ or all the conditions imposed herein above and to make such variations as deemed fit for the purpose of enforcement of the Air (Prevention and Control of Pollution) Act, 1981, as amended to date and the Water (Prevention and Control of Pollution) Act, 1974, as amended to date.

31. The Consent granted to the Consentee is to ensure control of pollution from the premises of the unit in accordance with various Pollution Control Laws and in no way confers the right to the Consentee / unit to exist in violation of other laws and statutory provisions including the Master Plan of Delhi.

32. This Consent is granted with the condition that the HCF shall submit Wastewater Effluent Analysis Report of STP/ ETP, Noise Monitoring Report (NMR) of Generator Sets within 60 days from the date of issue of this consent.

33. The Consent to Operate is being issued as per the decision taken by the BMW Committee No. 1 in its meeting held on 11.06.2024.

Annexure B

Sr. No.	Period	Yellow Waste In kg	Red Waste In kg	White Waste In kg	Blue Waste In kg
1.	Jan-25	2157.250	2283.905	062.374	370.755
2.	Feb-25	1643.774	1827.154	062.870	306.763
3.	Mar-25	1989.229	2222.781	082.184	310.690
4.	Apr-25	2598.280	2709.491	076.858	434.819
5.	May-25	3147.329	3002.379	090.123	587.297
6.	Jun-25	3171.860	2887.33	080.186	460.264
7.	Jul-25	3885.303	3277.579	082.280	640.196
8.	Aug-25	4624.218	3793.322	074.174	613.388
9.	Sep-25	4808.582	4102.882	077.812	633.952
10.	Oct-25	4228.932	3530.823	064.641	566.758
11.	Nov-25	3990.959	3291.440	074.000	604.596
12.	Dec-25	4356.194	3433.679	067.907	522.610
13.	Total	40601.91	36362.765	895.409	6052.088
14.	Average Per Month (13/12)	3383.493	3030.23	74.61742	504.3407

Nhul
16/2

Annexure - C

118

Sig.
STP OPERATOR

DATE	SLUDGE WT.	Sing.	Sig.
04/10/24	4.00	(M)	Basu
19/10/24	3.800	(M)	Basu
01/11/24	4.300	(M)	Basu
15/11/24	3.900	(M)	Basu
01/12/24	4.400	(M)	Basu
17/12/24	4.100	(M)	Basu
05/1/25	3.800	(M)	Basu
20/1/25	4.100	(M)	Basu
04/2/25	3.900	(M)	Basu
19/2/25	4.100	(M)	Basu
06/3/25	4.00	(M)	Basu
23/3/25	4.200	(M)	Basu
07/4/25	3.100	(M)	Basu
22/4/25	4.100	(M)	Basu
07/5/25	3.800	(M)	Basu
07/6/25	4.300	(M)	Basu
27/6/25	4.200	(M)	Basu
13/7/25	3.100	(M)	Basu
31/7/25	4.400	(M)	Basu
13/8/25	4.600	(M)	Basu
31/8/25	3.800	(M)	Basu
17/9/25	3.300	(M)	Basu
04/10/25	4.100	(M)	Basu
21/10/25	3.800	(M)	Basu
08/11/25	3.900	(M)	Basu
21/11/25	4.100	(M)	Basu
6/12/2025	4.00	(M)	Basu
21/12/2025	4.200	(M)	Basu
5/1/2026	3.800	(M)	Basu

Nishu

Annexure - D



GOVT. OF NCT OF DELHI
OFFICE OF THE MEDICAL SUPERINTENDENT
SANJAY GANDHI MEMORIAL HOSPITAL

MANGOL PURI, DELHI-110083

Email : mssgmh@rediffmail.com, PH: 011-27900131

F.32(5)/ 2018-19/SGMH/Quality Cell/ Committee Constitution 15365-66 Date: 18/12/25

In supersession of all previous orders the following committees are reconstituted for all purposes.

Bio Medical Waste Committee

S. No	Name of the Officers	Designation	Role
1	Dr. Mirtunjay Kumar	Medical Superintendent	Chairperson
2	Dr Nymphia Kaul	HOD Anesthesia	Member Secretary & BMW Nodal OFFICER
3	Dr. Ashoo Gupta	Spl. OBGY	LINK 1 Member Secretary & Nodal Officer
4	DMS (A)	DMS (A)	Member
5	DMS(B)	DMS(B)	Member
6	Quality Nodal Officer	Quality Nodal Officer	LINK 2 Member Secretary & Nodal Officer
7	HOD Pathology & Blood Bank	HOD Pathology & Blood Bank	Member
8	HOD ENT	HOD ENT	Member
9	HOD Obst & Gynae	HOD Obst & Gynae	Member
10	HOD Radiology	HOD Radiology	Member
11	HOD Eye	HOD Eye	Member
12	HOD Peads	HOD Peads	Member
13	HOD Ortho	HOD Ortho	Member
14	HOD ENT	HOD ENT	Member
15	HOD Anesthesia	HOD Anesthesia	Member
16	HOD Surgery	HOD Surgery	Member
17	HOD Medicine	HOD Medicine	Member
18	HOD Skin	HOD Skin	Member
19	HOD Dental	HOD Dental	Member
20	MOI/c Laundry	MOI/c Laundry	Member
20	MOI/c Nursing Orderly	MOI/c Nursing Orderly	Member



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21	MOI/c Sanitation	MOI/c Sanitation	Member
22	MOI/c Kitchen	MOI/c kitchen	Member
23	MOI/c/ solid waste Management	MOI/c/ solid waste Management	Member
24	ANS	ANS	Member
25	Mr. Sarv Singh	Nursing officer I/C BMW	Member
26	Auto Clave Operator	Auto clave operator	Member
27	Supervisor Nursing Orderly	Nursing Orderly along with one senior nursing orderly	Member
28	Supervisor Housekeeping	Housekeeping worker along with one senior Housekeeping worker	Member

Responsibility: To ensure compliance to latest and relevant legislation.

- To conduct audits and prepare comprehensive report of current waste generations, segregation, handling, storage and disposal practices.
- To implement ongoing waste management training program this caters to all staff.
- To liaise with corporation authority and private waste contractors with regard to transport & disposal of waste external to the hospital

Frequency of meeting: Biannually/as and when required.

This is issued with the prior approval of competent authority.


Dr. Sumita Saha Kanwar
Deputy Medical Superintendent

F.32(5)/2018-19/SGMH/Quality Cell/ Committee Constitution

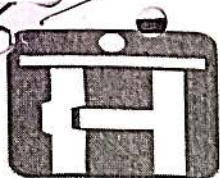
15365-66

18/12/25

Copy:

1. P. S. to MS
2. All Committee members.
3. Guard file
- 4.


Dr. Sumita Saha Kanwar
Deputy Medical Superintendent



Annexure-E
SANJAY GANDHI MEMORIAL HOSPITAL
GOVERNMENT OF NCT OF DELHI
S-BLOCK MANGOL PURI DELHI - 110088

F.No.32 (3)/2018-19/SGMH/QAC/Minutes of Meeting/ 14284-14292

Dated: 22/11/25

MINUTES OF MEETING

The Quality core committee meeting was held at Sanjay Gandhi Memorial Hospital, Mangolpuri, Delhi under the Chairmanship of **Dr. MIRTUNJAY KUMAR**, Medical Superintendent, SGM Hospital, organized by Quality cell on 30.10.25 at 12:00 PM in the conference room at 4th floor, administrative building of hospital as per the agenda given below.

Meeting proceedings

Quality nodal officer Dr. Divpreet opened the meeting by welcoming every one and informed the committee about upcoming external kayakalp assessment on 3rd and 4th Nov and upcoming NQAS assessment. She expressed her concern that all departments have not submitted their files showing the latest quality circle meetings, objectives and tools used to improve quality standards and gap closure for the last six months. All HOD and area incharges were requested to do the same as soon as possible. The sequences of documents to be submitted are as follows and are expected on quarterly basis.

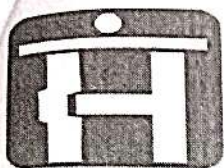
1. Updated SOPs
2. Updated Quality circle.
3. Monthly minutes of meetings.
4. Gaps with time bound action plan of each quarter.
5. Objectives along with the quality tools used of each quarter.
6. Risk assessment framework of each quarter.
7. Annual competency assessment.
8. Records of training.
9. Monthly KPI's
10. Monthly PSS.
11. Updated disaster management team of the department.

She brought to notice that this is the third quarter and internal assessment of this quarter will be conducted by inter-departmental teams to ensure unbiased assessments.

- **Kayakalp:** Kayakalp nodal officer Dr. Bina informed the committee that external assessment is scheduled on 3rd & 4th November 2025. Some of the gaps were observed during peer kayakalp assessment which are as follows:
 - RKS - As RKS committee meeting was long due with the hospital and newly formed RKS committee order was received recently it was decided that a mail may be sent to the chairperson to give date and time to hold a meeting. **(ACTION TAKEN: Admin branch)**
 - Painting- It was also re-iterated by kayakalp nodal officer that Exterior of the boundary walls are painted innovatively, displaying messages of cleanliness, hygiene & Go Green concept etc. as per kayakalp checklist. **(ACTION TAKEN: M.O. I/C PWD)**
 - STP- kayakalp nodal officer also informed the committee that STP is not working. Worthy Medical Superintendent enquired about the same with CT branch and CT branch informed the committee that the process for new STP is under process. **(ACTION TAKEN: M.O. I/c C.T. branch)**
- **Policy Review:** Concerned HODs/Officials along with quality cell must urgently update ALL institutional policies (Hospital Wide) within one month.

Policies	Responsibility to update/create
Infection Control policy	Hospital infection control officer
Antibiotic policy	DTC
BMW policy	BMW Nodal officer
Sanitation policy	M.O.I/C support services

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SANJAY GANDHI MEMORIAL HOSPITAL
GOVERNMENT OF NCT OF DELHI
S-BLOCK MANGOL PURI DELHI – 110088

Departmental Policies	Concerned HODs
Medical certificate issue policy	Chairperson medical board
Update narcotics drugs policy	Chairperson DTC committee
7R policy	Chairperson DTC committee
LASA policy	Chairperson DTC committee
Updated antibiotic policy	Chairperson DTC committee
Pain management policy	HOD Anaesthesia
Updated visitor policy	DMS(A)/Quality Nodal Officer

- **Referral policy:** During the meeting gaps of admin checklist were also discussed and also the linkage of orphanage/old age home need to be updated, the same to be circulated hospital wide. Also, referral policy to be updated by referral Nodal Officer (Dr.Bina) and list for referral out of hospitals to higher centres to be provided. It was also informed to the committee that intra department referral audit is done by some departments, but as per NQAS checklist Hospital referral audit committee need to be constituted where the audit of referral in and referral out will be done. (ACTION TAKEN: Referral Nodal Officer)
- **Gaps of MusQan**
- As per SaQushal checklist it is mandatory to provide safety to vulnerable patient e.g. Children, newborns etc. therefore bed railing in paediatric ward is needed. Worthy MS instructed the department to send fresh demand for procurement of bed with railing and baby cot (for NICU) (ACTION TAKEN: HOD Paeds and SNO of the department)
 - Procurement of ventilator: It was informed to the committee by HOD paediatrics that multiple reminders were sent for the demand given by the department for procurement of neonatal ventilator but still procurement is pending. Worthy Medical Superintendent instructed Paediatric department to send a fresh demand for at least 05(five) ventilators. (ACTION TAKEN: HOD Paeds and SNO of the department)
- **Fund utilisation:** Quality Nodal Officer re-iterated that the incentive money received for all quality programmes may be utilised for quality related work as per fund utilisation guidelines received. Worthy MS took into consideration about utilisation of incentive received for Quality programmes. LaQshya Nodal Officer informed the committee that the demand was given to purchase music system for soothing environment to mothers, 06(six) LDR beds for HDU etc. It was also asked from MusQan Nodal Officer to utilise MusQan to create play area in paediatric OPD. (ACTION TAKEN: LaQshya, NQAS & MusQan Nodal officer & NQAS fund utilisation Committee)
- **Clinical governance framework:** QNO also informed the committee that as per updated NQAS checklist received from DSHM some mandatory documents/records are as follows:
- Facility has clinical Governance Board at place.
 - Facility has defined framework for clinical Governance.
 - Check Clinical Governance Board/Apex Committee has representation from all the clinical departments.
 - Department Heads/ Incharges/Representatives are identified or appointed.
 - Members of Apex Committee are aware about their roles & responsibilities.(ACTION TAKEN:DMS(A) & Quality Cell)
- **Repair and Maintenance:** QNO (Quality Nodal Officer) informed the chairperson that repair and maintenance work for fixtures and furniture has been stopped as the tender was over. Worthy Medical superintendent instructed M.O./c R&M & C.T. branch to expedite the process of renewal of tender. (ACTION TAKEN:M.O./c R&M & C.T. branch)
- **Condemnation:** QNO(Quality Nodal Officer) brought into notice that lots of condemned items are still lying in junk store. Process of condemnation to be expedited so that the junk stores can be emptied. Chairperson of the committee gave instructions to expedite the process for the same. (ACTION TAKEN:M.O./c Condemnation)



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➤ **Laundry**

Several complaints were received from various departments that bed sheets are not properly washed and also that laundry department send damp bed sheets to the departments, also some bed sheets are found torn. Worthy medical superintendent instructed care taking branch and also M.O.I/c outsourced services to take necessary action to solve the issue as early as possible. (ACTION TAKEN: M.O.I/c outsourced services & C.T. branch)

➤ **Training**

Chairperson training cell Dr. Nympha Kaul raised the issue of inadequate attendance during hospital wide trainings. It was also discussed that for renewal of DNC certification certain hours of Trainings are required for nursing professionals, Worthy Medical Superintendent asked the training cell committee to hold a meeting and draft protocol for certificate to be issued after attaining the classes. It was also discussed that the training coordinator must schedule and conduct IYCF training for paediatric staff. (ACTION TAKEN: Training committee)

➤ **BMW:**

During rounds by ICN following points are observed and corrective and preventive actions to be done by departments for the same.

- Sharp containers (white box) are used as buckets in patient toilets instead of using for its purpose.
 - Hub cutter should be used regularly to mutilate syringes.
 - Non compliance of use of BMW stickers on the bags, by almost all the departments.
 - Bins to be placed just below the BMW signage and general waste signage as per protocol.
 - Regular cleaning of bins to be done as per the schedule.
 - Department to ensure that the bins of BMW waste should have functional foot operated lids and bio-hazard symbol on the bin which should be visible.
 - The colour of the liners should be same as the colour of the bin i.e. red liners with red bin & yellow liner with yellow bin. Also departments to ensure that BMW liners should not be used for any other purpose except for Bio Medical Waste management.
 - Departments to ensure that pilferage of BMW containers/liners are strictly prohibited.
- (ACTION TAKEN: All M.O.I/c & S.N.O)

➤ **Hospital Infection Control:**

- Some resident doctors and nursing officers are often found roaming around the hospital premises in scrubs threatening infection control practices. All the HODs to take necessary action regarding the same.
 - Multi dose vial policy to be followed religiously.
 - After several reminders to the staff during rounds by ICNs Intravenous catheter insertion date is not mentioned on the I.V. cannula. Departmental in charges to ensure the same
 - Schedule of refrigerator cleaning ILR/domestic/pharmaceutical to be mentioned on the temperature charts of refrigerator
 - There has to be strict Adherence to autoclave protocol as some departments are not following the protocol strictly.
 - Monthly induction training is being imparted by Quality cell and team to enhance and refresh the knowledge of new joined staff and hospital staff on topics like Bio Medical Waste Management, Hospital Infection Control, Rational prescription, reduce, reuse and recycle etc.
- (ACTION TAKEN: All M.O.I/c & S.N.O)

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Several gaps regarding PWD (civil and electrical) were identified and discussed with JE of PWD civil and JE of PWD electrical which are as follows:

➤ **PWD (Electric)**

- Intercom: Maintenance of intercom connection from trauma centre to MCH block, admin block, OPD block and old building. (ACTION TAKEN: M.O./C PWD)
- Energy audit: Mail regarding energy audit to be sent for conducting energy audit. As per PWD officials energy audit is valid for 5 years. He was instructed to provide the same in written document to show that as records to assessors of kayakalp assessment and NQAS assessment. (ACTION TAKEN: M.O./C PWD)
- Chimney: Installation of chimney in the kitchen for ventilation. (ACTION TAKEN: M.O./C PWD)

➤ **PWD (Civil)**

- Elbow tap: Elbow tap to be installed in trauma centre for hand hygiene compliance. (ACTION TAKEN: M.O./C PWD)
- Testing report: Water testing from kitchen is required as per eat right checklist. Water sample must be taken from kitchen for the same. Report is to be shared with quality cell. (ACTION TAKEN: M.O./C PWD)
- Fencing: All green area need to be secured by installation of fencing inside the hospital premises. (ACTION TAKEN: M.O./C PWD)
- Wire mesh: - Wire mesh work to be done in various areas of hospital like kitchen, IPD etc. to protect vector borne diseases. (ACTION TAKEN: M.O./C PWD)
- As per upcoming Kayakalp assessment at least two rain water harvesting tanks should be maintained to show to the assessors for assessment. (ACTION TAKEN: M.O./C PWD)

Meeting ended with vote of thanks by Quality Nodal Officer.

This issues with prior approval of competent authority.


Dr. Divpreet Kaur Sahani
Quality Nodal Officer

F.No.32 (3)/2018-19/SGMH/QAC/Minutes of Meeting/ 14284-14292

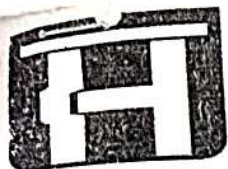
Copy to:

1. PS to MS, SGMH
2. DMS (A,B,IT & A&E)
3. All HODs
4. All MOICs
5. Purchase officer
6. S.O. Admin
7. PWD (E) & PWD (C)
8. All store in charges
9. DNS Office
10. Guard File


Dr. Divpreet Kaur Sahani
Quality Nodal Officer

22/11/25

SANJAY GANDHI MEMORIAL HOSPITAL
GOVERNMENT OF NCT OF DELHI
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Annexure - E - 2051C

F.No.32 (3)/2018-19/SGMH/QAC/Minutes of Meeting/ 13606 - 13612 Dated: 31/10/25

Minutes of Meeting

The Core Quality Committee, Hospital Infection Control Committee (HIC) and Bio Medical Waste Management (BMW) Committee, meeting was held at Sanjay Gandhi Memorial Hospital, Mangolpuri, Delhi under the Chairmanship of worthy Medical Superintendent SGM Hospital, Dr. Mrityunjay Kumar at 12:00 PM in the conference hall at 4th floor, administrative building on 20th Sept. 2025 as per the agenda given below. The list of participants present in the meeting is attached as Annexure-A

Agenda:

- Kayakalp upcoming internal assessment (25-26 Sept 2025).
- Infection control and BMW.
- Quality fund.
- Any other matter with permission of chairperson.
- PWD civil, electrical and horticulture.

Meeting Proceedings

The meeting started with welcome of the chairperson by Quality Nodal officer Dr. Divpreet. A brief description of upcoming kayakalp internal assessment was given. And the need to update the committees was also mentioned due to transfer of officers/officials.

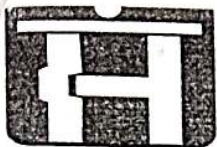
Point discuss in previous quality meeting held on 18 June 2025, the following points was discussed and action taken still pending.

Agendas discussed was as follows:

QUALITY :

1. **Fund:** A copy of details of balance of quality fund under the respective fund head is already sent to nodal officer LaQshya, MusQan, NQAS, Kayakalp so that funds can be utilised as per respective requirements of their departments. A demand from the respective nodal officers to be sent through proper channel to purchase department (nodal officer LaQshya, MusQan, NQAS)
2. **NQAS internal assessment:** The three monthly objectives, monthly minutes and revision of departmental standard operating procedures to be completed and placed in quality files. The files from all areas to be submitted to quality cell by the last week of July 2025. (Action taken: MOI/c/HOD of 19 NQAS checklist areas).
3. **KPI noncompliance:** It is observed that few departments are not compliant with providing KPI to quality cell like, MRD, accounts branch, Disability board, admin branch etc. whereas application have been sent to the departments for the same. It was retrieved to branch

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in charges to provide the KPI on monthly basis to quality cell. (Action taken: incharges:- MRD, accounts branch, disability board, admin branch, pharmacy and drug and therapeutic committee).

4. **Non-compliance of attending trainings:** A training calendar is being prepared and shared with all on hospital quality group of whatsapp. Moreover, it has been observed that few departments are never present whenever trainings are held for quality related purposes. It was directed that atleast one representation each from nursing/paramedical and doctor cadre to be present in all trainings. (Action taken: Department heads/incharges)

5. **Mock drills:** it is mandatory to conduct mock drill periodically for all the codes in the hospital like code red, code pink, code blue, and code violet. And a copy of the drill report may be sent to quality cell. Furthermore during last code pink mock drill the lacunae observed were :

- a) Non availability of walkie talkie or intercoms at the security guard cabins posted at main gates no.1, gate no.3 and gate no.4.
- b) Non availability and non functional cctv cameras in many areas.
- c) Non functional P.A system.

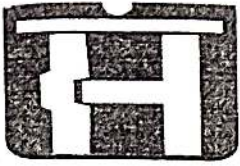
CAPA of drill to be done as per observation/lacunae (Action taken: MO/IC of code red, pink, blue and violet).

6. **Pest control:** all the departments to maintain pest control schedule in their respective areas datwise. Also signature to be taken from assigned person in the register wherever whenever pest control activity is done in their department. (Action taken: Departmental heads/ incharges)

MusQan:

1. **KPI:** after repeated request from paediatric OPD to MRD to provide data of paediatric population attending OPDs (eye, ENT, ortho, skin, surgery etc.) there is still this insufficiency present. In addition with this data from services like physiotherapy, audiometry, speech therapy, refraction screening should also be provided to the paediatric OPD department to calculate KPIs as per MusQan checklist (Action taken : MOI/C MRD, physiotherapy, audiometry)

2. **Vaccine storage:** it is found that new department dog bite clinic in paediatric opd does not have pharmaceutical refrigerator to store anti-rabies vaccine ,so they are keeping them in domestic refrigerator. No such practice is acceptable as per HIC and Immunisation protocol. (Action taken : All HOD/Incharges)



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203/C

In current meeting the following points were discussed:

QUALITY:

1. **QR code for PSS:** An e-mail is received from DSHM to display QR codes for patients satisfaction survey(PSS) in the respective IPD and OPD. The result of which is directly submitted to state. The manual method of taking PSS also to be continued (**Action taken MO/IC of mentioned areas**).
2. **Immunisation records and health checkups:** as per various checklists like kayakalp, NQAS etc. there is requirement of keeping records all the hospital staff of their medical check ups and mandatory requirement of immunisation of housekeeping staff and nursing orderlies. The supervisors of house keeping and nursing orderly to initiate the process of health check up and immunisation of their workers (**Action taken:MO/IC sanitation and nursing orderly**).
3. **Files incomplete:** As per Quality programmes the patient record file has to be maintained properly. It is notified by the MRD department that files are received without any serial numbers, date and time of each round, sign and signature of the doctors are also not available in case sheets in some files. All the department heads to ensure the compliance of sending complete files to MRD.(**Action taken: department heads/incharges**).
4. **Outdated posters:** all departments to remove any outdated posters/signages from their departments on routine basis.(**Action taken : Departmental heads/incharges**).
5. **Kayakalp assessment (25- 26 sep):** Regarding upcoming Kayakalp round all the areas to be prepared for assessment. .(**Action taken : Departmental heads/incharges**).

BMW:

1. It has been observed that few department are using the containers of biomedical waste management for other purposes like storages of needles, injections and even in washrooms. It was again retrieved to all to comply with BMW Rules 2016 and amended rules. The four categories of containers to be used as per rules and pilferage is not to be done (**Action taken: All HOD/Incharges**)
2. All sharps containers should have hub cutter and hub cutters to be used regularly before discarding needles. The functionality of hub cutters to be ensured.(**Action taken: All HOD/Incharges**)
3. It was informed to the forum that new BMW stickers are available in general store. These



2021C

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e of the department along with the signature and date to be written legibly on the sticker.
ion taken: All HOD/Incharges)

Biomedical waste bins (red and yellow with biohazard symbol) and solid waste bins (blue and green) to be kept separately and underneath their respective signage. The bins to be washed regularly, should have lid and foot operated. (Action taken: All HOD/Incharges).

Hospital Infection Control:

- a) Some resident doctors and nursing officers are often found roaming around the hospital premises in scrubs threatening infection control practices. All the HODs to take necessary action regarding the same. (Action taken: All HOD/Incharges).
- b) Multi dose vial policy to be followed religiously. (Action taken: All HOD/Incharges).
- c) Cannula insertion date to be mentioned on the cannula. (Action taken: All HOD/Incharges).
- d) Schedule of refrigerator cleaning be it ILR, deep freezer or domestic to be mentioned on the temperature charts of refrigerator. (Action taken: All HOD/Incharges).
- e) There has to be strict Adherence to autoclave protocol as some departments have found not following the protocol strictly. (Action taken: All HOD/Incharges).
- f) Antibiotic policy to be updated by all departments (Action taken: All HOD/Incharges).

PWD (CIVIL):

- All the water tanks has to be numbered and cleaning date and next due date is to be mention on the storage tank. (Action taken: PWD civil/ MOI/C PWD).
- Painting of outer area and boundary wall (Action taken: PWD civil/ MOI/C PWD).
- Functioning of tap and flush (Action taken : MOI/C Sanitation, repective area incharges)
- Dual flush system to be installed in all wash room. (Action taken: PWD civil/ respective area incharges).
- Report of annual maintenance from civil department. (Action taken: PWD civil/ MOI/C PWD).
- Installation of water cooler outside the boundary wall. (Action taken: PWD civil/ MOI/C PWD).
- Overgrown grass and shrubs over tiled areas to be removed on regular basis. (Action taken: PWD civil/ MOI/C PWD).

PWD (Electrical):

- Energy audit of hospital on yearly basis. (Action taken: PWD Electrical/ MOI/C PWD).
- DG set, AC, Greaser and water heater provided from electrical department should be 4 star rated or above. (Action taken: PWD Electrical/ MOI/C PWD).



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201/C

200/1

- RO services and water testing to be done on regular basis. . (Action taken: PWD Electrical/ MOI/C PWD).
- DG set noise emission records to be maintained. . (Action taken: PWD Electrical/ MOI/C PWD).
- Annual maintenance report from electrical department (Action taken: PWD Electrical/ MOI/C PWD).
- Regularly cleaning of wall and floor fans of all areas to be done on regular basis. (Action taken: PWD Electrical/ MOI/C PWD respective area incharges).

PWD (Horticulture):

- Landscaping of garden area to be developed. (Action taken: PWD Horticulture/ MOI/C PWD).
- Overgrown grass and shrubs to be removed on regular basis by horticulture and PWD (civil) in there concerned areas. . (Action taken: PWD Horticulture/ MOI/C PWD).
- Herbal garden to be filled developed with more varieties of herbal plants with name plate and its use in bilingual language . (Action taken: PWD Horticulture/ MOI/C PWD).
- Regular cleaning and removal of dry leaves to be done on regular basis from all green areas of hospital. (Action taken: PWD Horticulture/ MOI/C PWD).

The meeting ended with vote of thanks by quality nodal officer.

This is issued with the prior approval of competent authority.


Dr. Divpreet Kaur Sahani
Quality nodal officer

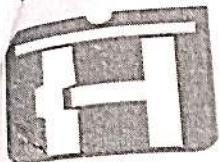
F.No.32 (3)/2018-19/SGMH/QAC/Minutes of Meeting/ 13606 - 13 6/2

31/10/25

Copy to:

1. PS to MS
2. DMS (A,B,IT,A&E)
3. All HODs (to circulate in respective departments)
4. All M.O./c
5. DNS Office
6. All store incharges
7. PWD (Civil, Electrical & Horticulture)
8. Guard File.


Dr. Divpreet Kaur Sahani
Quality nodal officer



SGMH
SANJAY GANDHI MEMORIAL HOSPITAL
GOVERNMENT OF NCT OF DELHI
S-BLOCK MANGOL PURI DELHI - 110083

Annexure - E

192/C

No.32 (3)/2018-19/SGMH/QAC/Minutes of Meeting/ 8353-8359

Dated: 26/6/25

Minutes of Meeting

The Core Quality Committee, Hospital Infection Control Committee (HIC) and Bio Medical Waste Management (BMW) Committee, meeting was held at Sanjay Gandhi Memorial Hospital, Mangolpuri, Delhi under the Chairmanship of worthy Medical Superintendent SGM Hospital, Dr. Mrityunjay Kumar at 12 noon in the conference hall at 4th floor, administrative building on 18th June 2025 as per the agenda given below. The list of participants present in the meeting is attached as Annexure-A

Agenda:

- Gap analysis of the internal assessment done in fourth quarter (Jan-march 2025) of all departments.
- Time bound action plan
- Infection control and BMW
- Quality fund
- Any other matter with permission of chairperson.

Meeting Proceedings

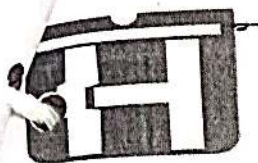
The meeting started with welcome of the chairperson by quality nodal officer Dr. Trishla. A brief description of existing committees was given. And the need to update the committees was also mentioned due to transfer of officers/officials.

Agendas discussed are as follows:

• QUALITY :

1. **Fund:** A copy of details of balance of quality fund under the respective fund head is already sent to nodal officer LaQshya, MusQan, NQAS and Kayakalp so that funds can be utilised as per respective requirements of their departments. A demand from the respective nodal officers to be sent through proper channel to purchase department. (Action taken: nodal officers, LaQshya, MusQan, NQAS and Kayakalp)
2. **NQAS internal assessment:** The score sheet of all the 19 NQAS checklist for the quarter jan-march 2025 to be signed by concerned M.O/C or HOD and to keep it in quality file. The three monthly objectives, monthly minutes of meeting and revision of departmental Standard Operating Procedures to be completed and placed in quality files. The files from all the areas to be submitted to quality cell by the last week of July 2025. (Action taken: M.O/C/HOD of 19 NQAS checklist areas)
3. **KPI noncompliance:** It is observed that few departments are not compliant with providing KPI to quality cell on monthly basis like, MRD, accounts branch, Disability board, admin branch, pharmacy and drug and therapeutic committee whereas application have been sent to the departments for the same. It was reiterated to branch incharges to provide the KPI on monthly

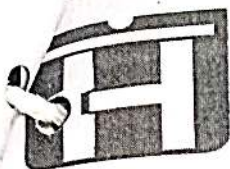
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**SANJAY GANDHI MEMORIAL HOSPITAL
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S-BLOCK MANGOL PURI DELHI - 110083**

basis to quality cell. (Action taken: incharges- MRD, accounts branch, Disability board, admin branch, pharmacy and drug and therapeutic committee)

4. **Non-compliance of attending trainings:** A training calendar is being prepared and shared with all on hospital quality group of whatsapp. Moreover, it has been observed that few departments are never present whenever trainings are held for quality related purposes. It was directed that atleast one representation each from nursing/ paraclinical and doctor cadre to be present in all trainings. (Action taken: Departmental heads/ incharges)
5. **Mock drills:** it is mandatory to conduct mock drill periodically for all the codes in the hospital like code red, code pink, code blue, and code violet. The report of the drill to be kept in their respective files and a copy of the drill report may be sent to quality cell. Furthermore during last code pink mock drill the lacunae observed were :
 - a) non availability of walkie talkie or intercoms at the security guard cabins posted at main gates no.1, gate no.3 and gate no.4.
 - b) non availability and non functional cctv cameras in many areas.
 - c) Non functional P.A system.CAPA of the drill to be done as per observation/ lacunae (Action taken: MO/IC of code red, pink, blue and violet)
6. **Dress code policy:** It is found that sanitation workers are not being provided uniform by the vendor company so most of the sanitation workers are either wearing their own clothes or uniform from old company. As per the dress code policy of the hospital, all cadres should have a proper uniform as per their contract. The vendor of the tender to be contacted to solve the matter. (Action taken: MO/IC CT branch)
7. **QR code for PSS:** An e-mail is received from DSHM to display QR codes for patients satisfaction survey(PSS) in the following areas of the hospital viz all OPD, all IPD, Labor room, Maternity ward, SNCU and Paeds ward. The QR codes to be displayed and patients, attendants and staff to be encouraged by incharges to scan these codes for PSS. The result of which is directly submitted to state. The manual method of taking PSS also to be continued. (Action taken: HOD/Incharges of mentioned areas)
8. **Immunisation records and health checkups:** As per various checklists like kayakalp, NQAS etc. there is requirement of keeping health check up records all the hospital staff on yearly basis and mandatory requirement of immunisation of housekeeping staff and nursing orderlies. The supervisors of house keeping and nursing orderly to initiate the process of health check up and immunisation of their workers. (Action taken: MO/IC sanitation and nursing orderly)
9. **Files incomplete:** As per Quality programmes the patient record file has to be maintained properly. It is notified by the MRD department that files are received without any serial numbers, date and time of each round, sign and signature of the doctors are also not available in case sheets in some files. All the department heads to ensure the compliance of sending complete files to MRD. (Action taken: Departmental heads/ incharges)



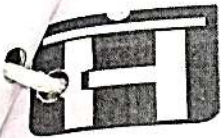
10. **Pest control:** all the departments to maintain pest control schedule in their respective areas datewise. Also signature to be taken from assigned person in the register whenever pest control activity is done in their department. (Action taken: Departmental heads/ incharges)
11. **Outdated Posters:** All departments to remove any outdated posters/ signages from their departments on routine basis. (Action taken: Departmental heads/ incharges)
12. **Condemned Items:** It was seen that condemned items were lying on the roof of administrative building. MOI/C CONDEMNATION to make necessary arrangements to get them removed so that cleaning of roof can be done.
13. **Website update:** The SGMH website needs to be updated in view of transfer of officials and upcoming new projects. (Action taken: MOI/C)

- **MusQan:**

1. **KPI:** after repeated request from paediatric OPD to MRD to provide data of paediatric population attending OPDs (eye, ENT, ortho, skin, surgery etc.) there is still insufficiency present. In addition this data from services like physiotherapy, audiometry, speech therapy, refraction screening should also be provided to the paediatric OPD department to calculate KPIs as per MusQan checklist. (Action taken: MOI/C MRD, Physiotherapy, audiometry)
2. **Vaccine storage:** It is observed during rounds that new dog bite clinic in paediatric opd does not have pharmaceutical refrigerator to store anti-rabies vaccine. So they are keeping the vaccines in domestic refrigerator. No such practice is acceptable as per HIC and Immunisation protocol. Also such kind of practice is not acceptable in any department. Domestic refrigerators to be used only for keeping food items and beverages. (Action taken: All HOD/Incharges)
3. **Non-functional CCTV cameras:** during mock drill of code pink it was observed that paediatric opd and paediatric casualty areas, cctv cameras are non functional leading to risk to child safety. CCTV cameras to be made functional for staff safety. (Action taken: MOI/C PWD, CT Branch)

- **BioMedical Waste Management:**

1. It has been observed that few departments are using the containers of biomedical waste management for other purposes like storage of needles, injections and even in washrooms. It was again reiterated to all to comply with BMWM Rules 2016 and amended rules. The four categories of containers to be used as per rules and pilferage is not to be done. (Action taken: All HOD/ Incharges)



2. All sharp containers should have hub cutters and hub cutters to be used regularly before discarding needles. The functionality of hub cutters to be ensured. (Action taken: All HOD/Incharges)
3. All departments to ensure that suction jars are cleaned after every use as per protocol and kept dry. The staff assigned by the department for this purpose to be trained by the incharges on routine basis.
4. All departments to ensure use of three bucket system for sanitation, use of appropriate PPE for cleaning purpose and training of house keeping staff on regular basis.
5. It was informed to the forum that new BMW stickers are available in general store. These stickers to be pasted on all BMW containers before sending them to common BMW area. The name of the department along with the signature and date to be written legibly on the sticker. (Action taken: All HOD/Incharges)
6. Biomedical waste bins (red and yellow with biohazard symbol) and solid waste bins (blue and green) to be kept separately and underneath their respective signages. The bins to be washed regularly, should have lid and foot operated. (Action taken: All HOD/Incharges)

• **Hospital Infection Control:**

1. Some resident doctors and nursing officers are often found roaming around the hospital premises in scrubs threatening infection control practices. All the HODs/Incharges to take necessary action/training regarding the same for the safety of patients and staff.
2. Multi dose vial policy to be followed religiously.
3. Date and time to be mentioned on each cannula and catheter.
4. Schedule of refrigerator cleaning be it ILR or domestic to be mentioned on the temperature charts of refrigerator
5. There has to be strict Adherence to autoclave protocol as some departments have found not following the protocol strictly.
(Action taken: All HOD/ Incharges)

PWD (CIVIL) (Action taken: MOI/C CT BRANCH/ PWD)

1. All the water tanks should have lid, has to be numbered and cleaning date and next due date is to be mentioned on the storage tank.
2. Video recording of tank cleaning and drain cleaning to be provided to the CT branch and quality cell
3. The outer boundary wall of hospital needs painting displaying innovative messages.
4. Lay out plan to be provided for each department and to be displayed

120/c

**SANJAY GANDHI MEMORIAL HOSPITAL
GOVERNMENT OF NCT OF DELHI
S-BLOCK MANGOL PURI DELHI - 110083**

PWD (ELECTRICAL) (Action taken: MOI/C CT BRANCH/ PWD)

1. Repair of leaking RO water plant
2. Installation of solar panels in hospital premise
3. Regular maintenance of electric wiring and fittings
4. Functionality of STP to be ensured
5. All the doors of AHU to be kept closed
6. Regular maintenance of all installed fire extinguishers

The meeting ended with vote of thanks by quality nodal officer.
This issues with prior approval of competent authority

Trishla
Dr Trishla

Quality nodal officer

F.No.32 (3)/2018-19/SGMH/QAC/Minutes of Meeting/ 8353 - 8359

Dated: 26/6/2025

Copy to:

1. PS to MS, SGMH
2. DMS(A,B,IT,A&E)
3. All HODs(to circulate in respective departments)
4. All MOI/Cs
5. DNS office
6. All store incharges
7. PWD (Electric and civil)
8. Guard file

GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

Venue: - 4th floor
conference hall
Speaker - Mr. Saw Singh
Dr. Ramesh (med.)

ATTENDANCE SHEET

(Sub: Rational Prescription Writing & BMW & Induction training)

Date: 12/12/25 Time: 2 PM

S. No.	Name of the Member/Officer	Designation	Department/ & Hospital	Phone No.	Email ID	Signature.
1.	Ashish Maheshwari	JR	Medicine	7073815050	ashish.990607@gmail.com	Ashish
2.	RAHUL MEENA	SP	Medicine	8390671000	ranigbhai003@gmail.com	Rahul
3.	Sachin	JR	OB/G	8684852545	sachinraj88@gmail.com	Sachin
4.	Blakkar Gupta	Student	Pharmacy	7982574648	blakkar7982574648@gmail.com	Blakkar
5.	Sonu Prayapati	"	Pharmacy	9899129956	ssomyprajapati95@gmail.com	Sonu
6.	Shifa	"	Pharmacy	8383389509	shifa0935@gmail.com	Shifa
7.	Dr. Samridhi Tanwar	SR	Anaesthesia	9821199563	samridhi.tanwar26@gmail.com	Samridhi
8.	Dr. Rahul	SR	Anaesthesia	7065711600	Rahulishack213@gmail.com	Rahul
9.	Dr. Mayank	JR	ORTHO	8527601134	mayank.rana901@gmail.com	Mayank
10.	Dr. Sapana Bhowal	JR	A&E (Casualty)	9350074358	sapana.bhowal7@gmail.com	Sapana
11.	Dr. Nishant Rajpoot	JR	A&E (Casualty)	9213477697	nishantrajpoot86@gmail.com	Nishant
12.	Dr. NITISH SINGH YADAV	SR	A&E (Casualty)	7827713533	nishant8singh0144@gmail.com	Nitish
13.	Dr. Anshu Singh	SR	Pathology	9999856233	anshu.nandiy@gmail.com	Anshu
14.	Dr. Ritika Sahu	JR	Obs/Gyne	9717109487	ritika.sahu24@gmail.com	Ritika
15.	Dr. NIKHIL	JR	Medicine	8920699550	nikhil.2019@gmail.com	Nikhil
16.	DR VISHVATEET SINGH CHAUDHARY	JR	Medicine	8209538612	VISHVATEET@gmail.com	Vishvateet

Annexure - F

GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

ATTENDANCE SHEET

(Sub: Bio-Medical Waste Management & Induction Classes

Date: 11/11/25

Time: 2 pm

S. No.	Name of the Member/Officer	Designation	Department/& Hospital	Phone No.	Email ID	Signature
1	RADIF KHAN	JR	MEDICINE / SGMH	9643861392	RADIFKHAN7@gmail.com	
2	Dr. NOOLI SIKHA PRAKASH REDDY	SR	ANAESTHESIA / SGMH	7674011539	survareddy3690@gmail.com	
3	Dr. VAISHNAV YADAV	JR	ORTHOPEDICS / SGMH	9821379061	yadavvaishnav92@gmail.com	
4	Dr. NEETHUSREE PRAKASH P.K	SR	ANAESTHESIA	9663468849	neethupk96@gmail.com	
5	Dr. BALKISHAN GUPTA	SR	GENERAL SURGERY	8700556537	balkishan1993@gmail.com	
6	Dr. SONY SWARN	SR	OBSTETRICS - Gynaecology	7495057491	sony.sivach 0489@gmail.com	
7	Dr. Jyotsna Jini	JR	Obstetrics - Gynaecology	8119995544	jundijini@puneri.com	
8	Dr. PREMA VERMA	SR	ENT	8356091346	PREMAVERMA261@gmail.com	
9	Dr. POOJA	JR	GENERAL SURGERY	8178700713	poja.965058@gmail.com	
10	Dr. ANEKSHA BHATTI	JR	Obstetrics & Gynaecology	9599152830	aneksha.bhatti18@gmail.com	
11	Dr. Kiran	SR	Medicine	8178444365	kiran.kiranbhat@gmail.com	
12	Dr. Simran Dahi	SR	GENERAL MEDICINE	8501871592	kamla.kiran007@gmail.com	
13	Dr. RAHUL	JR	CASUALTY	7838776410	dashvinoor721@gmail.com	
13.					rahulvijay900@gmail.com	

GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

ATTENDANCE SHEET

(Sub: Induction training on Bmw and Rational
Prescription)

Date: 09/10/2025 Time: 2pm

S. No.	Name of the Member/Officer	Designation	Department/ & Hospital	Phone No.	Email ID	Signature
1)	Dr. Deepika Yadav	SR	Ophthalmology	9999219145	deepika3120@gmail.com	
2)	Kajal Yadav	Nursing officer	Casualty	9311317383	Kajal664yadav@gmail.com	
3)	Dr. Amichand Bayya	SR	Casualty	9783844527	dr.amichandbayya@gmail.com	
4)	Vivek	Pharmacist	Pharmacy	7878407386	Vivek71430@gmail.com	
5)	Dr. Atul Jindal	SR	Anaesthesia	9729799706	atuljindal2096@gmail.com	
6)	Dr. Thekhamo Kiken	SR	Anaesthesiology	7065419829	chamokeng@gmail.com	
7)	Sunny	Pharmacist	Pharmacy	81728616775	Sunny73sharma@gmail.com	
8)	Sahil Rawat	Pharmacist	Pharmacy OPD	910970329	Sahilrawat737@gmail.com	
9)	Rohin Sharma	Pharmacist	Pharmacy	9359716110	Rohinbhatkurt@gmail.com	
10)	Divya Verma	Nursing officer	Gynaec ward 4	8750812342	divyaverma1712@gmail.com	
11)	DR. GAUR SHANKAR	S-R	Blood Bank (Laboratory)	7827151701	dr.gshankar40@gmail.com	
12)	No Name	No	Gynaec ward 4	7289979600	banedubey2629@gmail.com	
13)	No Name	No	Paeds Casualty	9316819912	manvi9723@gmail.com	
14)	Dr. Divyati	SR	Gyne	7303466866	paandishiti07@gmail.com	
15)	Dr. Megha	SR	Gynaec	9013369211	Megha.vishu.suthambbs@gmail.com	
16)	Dr. Divyati	SR	Gyne	7499469837	nidhiatg11nvs1@gmail.com	

venue:- Conference hall,
4th floor,
Speaker:- Dr. Kamana Sharma

GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

ATTENDANCE SHEET

(Sub: Induction Training BMO & Rational Date: 09/09/2021 Time: 2:30pm)
Prescription, 3R

Venue:- 4th floor
conference hall
Speaker - Pooja Sharma

S. No.	Name of the Member/Officer	Designation	Department/& Hospital	Phone No.	Email ID	Signature
1.	Dr. AYMAN KHAN	JR	OBGYN	9257634122	ayman.khan05@gmail.com	(Signature)
2.	Jyoti Redhu	Nsg officer	gynae casualty	8607183427	jyotireddhu952@gmail.com	Jyoti
3.	Dr. Vorun	JR	Casualty	8368261128	vorunbbs2025@gmail.com	Vorun
4.	Dr. Priyanshi Jain	JR	Casualty	7530881211	priyanshi.jain8@gmail.com	(Signature)
5.	Dr. Sonu Chaddah	SR	Pediatrics	8851205055	sonuchaddah@gmail.com	Sonu
6.	Dr. Jatin	JR	Pediatrics	9518099300	jatinbanal2409@gmail.com	Jatin
7.	Dr. Karmal Agarwal	JR	Dermatology	9119345601	aggarwal.karmal1206@gmail.com	Karmal
8.	Dr. Rithik Goyal	JR	Medicine	9017230170	Rithikgoyal1512@gmail.com	Rithik
9.	Dr. Divya	JR	Medicine	9289251061	divyagmann6498@gmail.com	Divya
10.	Dr. Rahul Saini	JR	Medicine	9205229717	rahulsaini1199211@gmail.com	Rahul
11.	Rahul Kumar Meena	SR	Medicine	8505867448	dr.rahulkumar2000@gmail.com	Rahul
12.	Dr. Sachin. Tasleem	JR	Casualty	9667933404	Smd907266@gmail.com	Sr
13.	Dr. Piyush Kumar	JR	Casualty	8503011531	piyushkumar9493@gmail.com	Piyush
14.	Dr. Nimit Agarwal	JR	Casualty	7678653855	nimitaggarwal199@gmail.com	Nimit
15.	Manisha	Nsg officer	Labour Room	8376932991	manisha.singh12117@gmail.com	Manisha
"	Rishanka	Nsg officer	Labour Room	8295764232	Rishankasaini992@gmail.com	Rishanka

(P.T.O.)

GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

Speaker - 12 members
100% Show
4th floor conference hall

ATTENDANCE SHEET

Date: 09/09/25 Time: 2pm

(Sub: Induction Training, BMW, 5's, Rational Prescription; 3R

S. No.	Name of the Member/Officer	Designation	Department/& Hospital	Phone No.	Email ID	Signature
17	Anjali	Msg off.	Labour Room	8373973282	Anjalidaban9351@gmail.com	Anjali
18	Chitra	Msg off	Labour Room	2800734489	chitrasaini767@gmail.com	Chitra
19	Rinky	Msg off.	ICU	9315425550	scipinkey1415@gmail.com	Rinky
20	Vaishya Yadav	Msg. Off.	ICU	8920358759	vaishyayadav0211@gmail.com	Vaishya
21	Pranam	SR	OBGYN	9760394434	pranamsiddique@gmail.com	Pranam
22	Raj Kumar Meena	JR	Medicine	8700810510	raj84470@gmail.com	Raj
23	Sakshi Verma	JR	OBGYN	897851515	sak.veermade@gmail.com	Sakshi
24	AKShaya Balabandari	JR	Medicine	9315973328	akshaya4mangru@gmail.com	AKShaya
25	Pooja Aggarwal	SR	Orthopaedics	9815399636	puja5600265@gmail.com	Pooja
26	AKASH - KHARI	SR	Orthopaedics	8800115191	DOCTORAKASHKHARI@GMAIL.COM	AKASH
27	DANISH KHAN	JR	Orthopaedics	6395760268	khodavis.h01786@gmail.com	Danish
28	ANJALI GODARA	SR	OBGYN	73411010307	anjalgodara5860@gmail.com	Anjali
29	Dr. Harish Anand	JR	Casualty	7642927991	harishanand1508@gmail.com	Dr. Harish
30	Pooja Kumar	JR	Chart and TB	9654138825	poojakumar2220@gmail.com	Pooja
31	Gram Zabeen	JR	Medicine	8527525881	gramzabeen766@gmail.com	Gram
	Saniaana	JR	Ophthalmology	9625797078	saniana200@gmail.com	Saniaana

GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

ATTENDANCE SHEET

(Sub:) Induction Training, BMD, S's, Rehabilitation Date: 09/09/24 Time: 2 Ph

Prescription

S. No.	Name of the Member/Officer	Designation	Department/ & Hospital	Phone No.	Email ID	Signature
33	Dr. HUNNY	JR	eye (optn)	9999654354	98hunnycup@gmail.com	
34	Dr. Ekta Drall	JR	Medicine	9319824664	dr.ektadrall12@gmail.com	
35	Dr. Prashant Kumar Singh	SR	Surgery	83680595%	anysa.prashantkumar@gmail.com	
36	Dr. Abhishek Kumar Singh	JR	Surgery	8538915521	abhishekmedi@gmail.com	
37	Dr. Yash Raj	JR	Orthopaedics	8800556698	yashrajraj09005@gmail.com	
38	Dr. Riddhi Karan	JR	ENT	7568744701	riddhikaran1995@gmail.com	
39	Dr. Shabbaj Khan	JR	CASUALTY	9183711233	Shabbaj9183@gmail.com	
40	Dr. Pooja	JR	Pediatric	9868747354	pm15447@gmail.com	
41	Dr. Wundul	CNO (NKB)	Med	876638012		
42	Dr. Sonal Singh	JR	Dental	7986184288	Sonalsonal18@gmail.com	
43	Dr. Mond. Rayid Zahoor	JR	Dental	8130984305	doctor1.royid@gmail.com	
44	Dr. Rishabh Jakhani	JR	Dental	7289954001	dr.rishabhjakhani@gmail.com	
45	Dr. Zeeeshan Ali	JR	Dental	72177794176	zeeshan.562@gmail.com	
46	Dr. Syed Mohd Danish	JR	Casualty	8595839990	dr.danish2518@gmail.com	
47	Dr. Rishabh Jakhani	JR	Casualty	8447764234	sharmarishabhike9@gmail.com	
48	Dr. Syed Mohd Danish	JR	Medicine	7339897005	mohtov19041@gmail.com	
49	Dr. Syed Mohd Danish	JR	Anaesthesia			

Speaker - Mr. Kumar

Venue - 4th floor

Conference hall.

Speaker - Mrs. Kamana Sharma

GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

ATTENDANCE SHEET

06/08/2025 Time: 12pm

(Sub: Induction Training on Biomedical Waste Date: 06/08/2025
management and Rational Prescription)

S. No.	Name of the Member/Officer	Designation	Department/ & Hospital	Phone No.	Email ID	Signature.
1	Dr. RAHUL SHARMA	JR	PAEDS	999946542	shormarahul@gmail.com	[Signature]
2	Dr. PULKIT MEHTA	SR	PAEDS	9999372563	pulkitmehta@gmail.com	[Signature]
3	Dr. SHIVANGI LODHA	SR	PAEDS	9819517512	shivangilodha29@gmail.com	[Signature]
4	Dr. Yogesh Kumar	SR	Physiotherapy	9462200469	Yogeshkumar59@gmail.com	[Signature]
5	Dr. Anurag Puri	SR	Medicine	97023207647	anuragpuri1731@gmail.com	[Signature]
6	Dr. Ankur Kasu	SR	Anaesthesia	9654491525	ankurkasu9@gmail.com	[Signature]
7	Dr. Alwina	SR	Anaesthesia	75001612307	Katubae2@gmail.com	[Signature]
8	Dr. Anil U	SR	Anaesthesia	9745224961	anilvapnata@gmail.com	[Signature]
9	Dr. Pooja Vashist	Neg. Off	Gynaecology	991105850	Poojanka.vashist98@gmail.com	[Signature]
10	Dr. Aranya Rath	SR	Pathology	8240084748	1996 ananyarathi@gmail.com	[Signature]
11	Dr. Shweta Kumari	JR	Casualty	91354707961	SK241297@gmail.com	[Signature]
12	Dr. Ravindra Ray	SR	Orthopaedics	8271113885	rasindraray21@gmail.com	[Signature]
13	Dr. AKASH YADAV	SR	Orthopaedics	6379649821	drakashyadav1996@gmail.com	[Signature]
14	Dr. PRACHI DABAS	JR	Medicine	9718470476	prachidabas1404@gmail.com	[Signature]
15	Dr. SAKSHI BAJAJ	JR	Obstetrics	8076335808	Sakshibajaj92@gmail.com	[Signature]
16	Dr. Nishant	JR	Obstetrics	7056340408	Nishantchandany7056@gmail.com	[Signature]

GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

ATTENDANCE SHEET

(Sub: Introduction Training on Bio medical Waste management and Rational)

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Speaker - Mr. Kumar

GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

Speaker - Dr. Anil
Venue - Conference hall
4th Floor

ATTENDANCE SHEET

(Sub: Induction training on Biomedical waste Management) Date: 08/07/2025 Time: 2pm)
and Rational Prescription.

S. No.	Name of the Member/Officer	Designation	Department/& Hospital	Phone No.	Email ID	Signature
01	Kirti Chaudhary	SR	OBGYN	704908959	KirtiChaudhary2014	Kirti
02	Dr. Shweta Dwarach	SR	OBGYN	7465867629	drshwetadwarach@gmail.com	Shweta
03	Dr. Shweta Ghai	SR	OBGYN	9773935609	shweta.ghai.199@gmail.com	Shweta
04	Dr. Shweta Kaushal	SR	Anaesthesia	8800726964	shweta.kaushal398@gmail.com	Shweta
05	Dr. Lakshay Kumar	JR	ANAESTHESIA	9871868622	S.D. Lakshay.2019@gmail.com	Lakshay
6	Dr. Sanya Rana	JR	OBGYN	9810674450	sanya-rana77@gmail.com	Sanya
7	Dr. Anshu Dwarach	SR	OBGYN	9811683641	anshu.dwarach@gmail.com	Anshu
8	Dr. Chirub Gupta	SR	OBGYN	9582848482	chirubgupta@gmail.com	Chirub
9	Dr. Vivek Kumar	JR	Surgery	8800719161	doctorxy.vivek@gmail.com	Vivek
10	Dr. Shubham Yadav	JR	Ortho	9773810852	shubhamydv@hotmail.com	Shubham
11	Dr. HARSIT MACHOTRA	JR	Casualty	8076328370	malhotraharsit140992@gmail.com	Harsit
12	Dr. Mehak Gadhvi	SR	Pediatrics	8860080281	dr-mehak-gadhvi@gmail.com	Mehak
13	Dr. Shivani Gupta	SR	Pediatrics	8174904263	shivani13@gmail.com	Shivani
14	Dr. Saifuddin Mainuddin Gyabuddin	SR Resident	Pediatrics	7984400293	saifmainuddin14@gmail.com	Saif
15	Dr. SARFARAZ AHAMAD ANSARI	DNB Resident	Pediatrics	9795309696	ahamad.sarfaraaz9595@gmail.com	Sarfaraaz

ATTENDANCE SHEET

Management and rational prescription

speaker: - Mrs. Jennings
venue: - 4th floor, conference
hall.

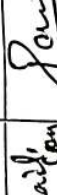
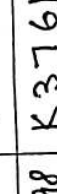
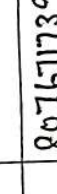
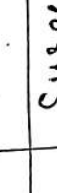
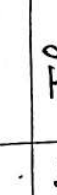
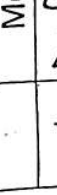
GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

ATTENDANCE SHEET

ATTENDANCE SHEET

(Sub: Induction training on Bio medical waste management ^{new} Date: 11/06/2023 Time: 2pm)

and Rational Description

S. No.	Name of the Member/Officer	Designation	Department/ & Hospital	Phone No.	Email ID	Signature
1.	Dr. Parvati Mishra	JR	Surgery	8076117398	K37613978@gmail.com	
2.	Dr. GAURAV SINGH	JR	MEDICINE	8447674806	Gauravsingh21198@gmail.com	
3.	Dr. Nishtha Sharma	Specialist	ENT	8105299329	nishthasharma11@gmail.com	
4.	Shubhangi Sonam	Speech Therapist	ENT	9472294019	shubhig430@gmail.com	
5.	Dr. Khushboo Rani	SR	OBS & GYNAE	9894005024	khushirani1528@gmail.com	
6.	Dr. JYOTSNA DEVI	SR	OBS & GYNAE	6387116554	jd6387116554@gmail.com	
7.	Dr. Radha Sunal	OR	OBS & GYNAE	8077455213	radhasunal4@gmail.com	
8.	Dr. ANUPRIYA	SR	OBG	8708366737	15anupriya@gmail.com	
9.	Dr. NAZIA-AIJUM	S.R.	OBS & GYNAE	7905388875	denazia15@gmail.com	
10.	Dr. VISHAL LAKHOTIA	SR	SURGERY	7020361370	vishal.lakhotiya@gmail.com	
11.	Dr. SUABHI VERMA	SR	OBS & GYNAE	9536683619	dr.suabhi95@gmail.com	

GOVERNMENT OF NCT OF DELHI,

11/11/2007

ATTENDANCE SHEET

(Sub: Biomedical waste Management, NSI, Date: 06/5/2025 Time: 2pm)
Spill management, PPE, Hand washing, Rational Prescription.

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GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

venue: conference hall,
Speaker - Ms Pooja Dr. Shubshah

ATTENDANCE SHEET

Induction Training on
Perioperative waste management, HLC,
National medical waste management

(Sub: Perioperative waste management, HLC, Date: 8/4/2025 Time: 2pm)

S. No.	Name of the Member/Officer	Designation	Department/ & Hospital	Phone No.	Email ID	Signature
01	Dr. Madhuri	SR	General Surgery	7011528863	mgautam1503@gmail.com	Madhuri
2	Dr. Usha Puri	SR	Pediatrics	9766280508	chetna.puriwal2@gmail.com	Usha
3	Dr. Iqbal Mehrotra	JR	General Surgery	7976649088	mehrotraibqbal553@gmail.com	Iqbal
4	Dr. Aman Nagi	JR	Casualty	9352424284	Syehamamagi79@gmail.com	Aman
5	Dr. Saurav Kaushik	SR	General Surgery	7988025993	kavkaushik13@gmail.com	Saurav
6	Dr. Harsh	JR	Emergency	8076328370	Mahababbarsh140992@gmail.com	Harsh
7	Dr. Priyanshu Singh	JR	Pediatrics	79766730093	prityanshu.singh@gmail.com	Priyanshu
8	Samyadeep Bhowmik	Intern	O.C	9208501724	samyadeep57@gmail.com	Samyadeep
9	Adarsh K. Singh	Intern	Quality	7484058114	adarsh006singh@gmail.com	Adarsh
10	Gaurav Singh	Intern	O.C	8398892423	SANTOSHANWAN559@gmail.com	Gaurav
11	Kamran, Chandan	Intern	Emergency cell	8738059305	kamranagrawal2002@gmail.com	Kamran
12	Dr. Prachi Yadav	SR	OBGYN	81714-77097	prachiy4@gmail.com	Prachi
13	Dr. Megha Varshney	SR	OBGYN	9557026221	varshneymegha04@gmail.com	Megha
14	Dr. Pukhraj Bamanjy	JR	OBGYN	7383888897	Bamanjy.Pukhraj58@gmail.com	Pukhraj
15	Dr. Nisha Dubson	JR	OBGYN	8923759734	NISHA.DUBSON007@gmail.com	Nisha
16	Dr. R. R. LAKSHMI SRUTHI	SR	OBGYN	7993809444	sruthi.vandana@gmail.com	Sruthi

DR. JAYPRAKASH GUPTA
JAYJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

venue: - conference hall
speaker - Mrs Kamana Shadme & Dr. Submanj
Time: 2pm

ATTENDANCE SHEET

(Sub: Industries Training in R
Rational Prescription)

Date: 08/04/2025 Time: 2pm

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GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

ATTENDANCE SHEET

(Sub: Bmw management, NSE, Skill management, Rational prescription. HIC)

Date: 12/03/2025

Time: 2 pm

Speaker: Dr. Toishla
Dr. Subham
Venue: Conference hall
4th floor

S. No.	Name of the Member/Officer	Designation	Department/ & Hospital	Phone No.	Email ID	Signature
1.	Dr. Happy Pancholi	JR.	Ortho	9799700916	Pancholihappy1529@gmail.com	[Signature]
2.	Dr. Hitesh Krishna Pathick	JR	Casualty	8547110615	pathickkhalani@gmail.com	[Signature]
3.	Dr. Sameer Khan	JR	Pedia	7791917702	Sameer 252628@gmail.com	[Signature]
4.	Dr. Amit Lal	JR	Pedia	9509821126	amitpatel1996@gmail.com	[Signature]
5.	Dr. Mohit Laxkar	J.R.	Paediatrics	9352501037	mohitlaxkar10@gmail.com	[Signature]
6.	Dr. Ravindra Choudhary	J.R	Pediatrics	9521793580	raavichhau706@gmail.com	[Signature]
7.	Dr. Sweta Singh	J.R	Obs & Gyn	8561949330	stupidousshweta@gmail.com	[Signature]
8.	Dr. Yashdeep Yadav	SR	medicine	89305886070	yashdeepyadavmbbs@gmail.com	[Signature]
9.	Dr. CHIRANJEEV JENA	SR	MEDICINE	7894081071	chiranjeevna@gmail.com	[Signature]
10.	Dr. ANVER SHAFEEQ P K	DNB	MEDICINE	9745881538	anvershafeeqpk005@gmail.com	[Signature]
11.	Dr. DUSHYANT YADAV	J.R.	MEDICINE	9354542027	dushyant yadav 2806@gmail.com	[Signature]
12.	Dr. MADHU	JR	Casualty	8368284109	madhuwair2@gmail.com	[Signature]
13.	Dr. ADITYA VASHISTH	JR	Casualty	8920956208	dr.adityavashisth92@gmail.com	[Signature]
14.	Dr. Shankar Lal mecha	S.R	Ortho	9694483046	Shankarlal mecha 652@gmail.com	[Signature]
15.	Dr. Ashwani Kumar	SR.	ORTHOPAEDICS	9773642368	ashwani kumar 8@gmail.com	[Signature]
16.	Dr. Rohit Yadav	JR	Casualty	8930138843	rohit yadav 8930@gmail.com	[Signature]

ATTENDANCE SHEET

(Sub: BMW management, Spill management, NST, Rational prescriptions, HIC)
Date: 12/03/2025 Time: 2pm

S. No.	Name of official	Department	Phone No.	Email ID	Signature
17.	Dr. Deepali	SR (Medicine)	9773730087	dehiganddeepali86@gmail.com	Deepali
18.	Dr. Diksha	SR - Dermatology	7307987787	drhks2970@gmail.com	Diksha
19.	Dr. Srivani	SR - Arthritis	7983711787	Dr. Srivani 1204@gmail.com	Srivani
20.	Dr. Dinesh Kumar	SR - Arthritis	9991967564	Dineshjakhar9789@gmail.com	Dinesh Kumar
21.	Dr. Shivani Tiwari	SR (OBG)	7878257409	TiwariShivani76@gmail.com	Shivani
22.	Dr. Poulami Das	DNB (OBG)	8697107478	daspoulami460@gmail.com	Poulami
23.	Dr. Parul Kumari Rai	JR (Pediatrics)	7428337254	raiparul684@gmail.com	Parul
24.	Dr. Anushi Mittal	BR (Dermatology)	8708825480	flighttopinnacle@gmail.com	Anushi
25.	Dr. Nikita Dhankhar	SR (ENT)	8700926526	nikitadhankhar1996@gmail.com	Nikita

Speakers: Mr. Kanana
Dr. Subram.
Venue: R. No 10

GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

ATTENDANCE SHEET

(Sub: BMW Induction training) Date: 04/02/2024 Time: 2.00 PM

S. No.	Name of the Member/Officer	Designation	Department/ & Hospital	Phone No.	Email ID	Signature
1.	Yadav Manish	JR	Pediatric	9825723975	Manishyadav369@gmail.com	Manish Yadav
2.	Vaishali	JR	General	798269577	Vishubhatnagar1611@gmail.com	Vaishali
3.	SAHIL	JR	Pediatric	881699888	DHARADWASAHIL1008@gmail.com	Sahil
4.	Kanjaniya Pratik	JR	Pediatric	972368981	Pratikkanjanaiya8871@gmail.com	Pratik
5.	Talish Khan	JR	Pediatric	9126005326	TKK18814@gmail.com	Talish Khan
6.	Dr. Rajat	JR	Casualty	9896889272	RajatChahal8998@gmail.com	Dr. Rajat
7.	Dr. Twisha Sharma	JK	Casualty	7302108552	drtwishasharma001@gmail.com	Dr. Twisha Sharma
8.	Dr. Chirag Jain	DNB-1 st yr	GENERAL SURGERY	8889898349	Chiragjain241@gmail.com	Dr. Chirag Jain
9.	Dr. Abhinav Kr Verma	SR	Pediatrics	9854295225	qsh3052011@gmail.com	Dr. Abhinav Kr Verma
10.	Dr. Mayanik Chaudhary	SENIOR RESIDENT	DEPT. OF GENERAL SURGERY	9896886932	DEVIYANK108@gmail.com	Dr. Mayanik Chaudhary
11.	Dr. Faheem Ul Haq	DNB-1 st yr	Anesthesiology	6005961081	FAHEEM786LOVE@gmail.com	Dr. Faheem Ul Haq
12.	Dr. Utkarsh Chaudhan	JR	Endocrinology	9717155214	utkarshchaudhan893@gmail.com	Dr. Utkarsh Chaudhan
13.	Dr. Dhiraaj Kumar	SR MEDICINE	Medicine	7702300969	dksinghroy@gmail.com	Dr. Dhiraaj Kumar
14.	Dr. Kumar Gaurav	SR ORTHO	ORTHOPAEDICS	9599511985	gaurav.malik@gmail.com	Dr. Kumar Gaurav
15.	Dr. A. Surinder	JR Casualty	Casualty	7303035822	ssurinder022@gmail.com	Dr. A. Surinder
16.	Dr. Rajnesh Tiwari	JR	Pediatrics	9706842087	rajnesh.tiwari28@gmail.com	Dr. Rajnesh Tiwari

continued

ATTENDANCE SHEET

(Sub: _____ Date: 4/20/25 Time: 2:00 PM)

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GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

ATTENDANCE SHEET

(Sub: BMW, Hand hygiene, Alert Codes Date: 18/10/25 Time: 21:11)
& NSI

S. No.	Name of the Member/Officer	Designation	Department/ & Hospital	Phone No.	Email ID	Signature.
1	Pramod Kumar	Guard	PC	991870088		Pramod
2	Shikha	GIS	Garage	9213209367		Shikha
3	Sanjay	NOC	ROM Branch	881871687		Sanjay
4	Rakesh Kumar	GIS		638671899		Rakesh
5	Sumit	GIS		9818558887		Sumit
6	Havish Kumar	Guard	Main Casualty	9716652400		Havish Kumar
7	Ujjwal	GIS	3rd Flr	7827640882		Ujjwal
8	KANHA KUMAR	GIS	1st Flr	8882214688		KANHA KUMAR
9	Chaman Lal	GIS	POB	7529 91897		Chaman Lal
10	Ranjit	GIS	Room No=40	9716871407		Ranjit
11	Sunil	GIS	Room No=64	783611731		Sunil
12	Anand Kumar					
13	Shyam Lal			9319491987		
14	Shikha					
	Manish	H.K		8750396430		Manish
	Prashant	H.K				Prashant

GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

ATTENDANCE SHEET

Time: 21-11-20

(Sub: BMW, Hand hygiene, Alert Codes, Date: 18/10/20, Time: 21-11-20)

S. No.	Name of the Member/Officer	Designation	Department/ & Hospital	Phone No.	Email ID	Signature.
1	Pranav Kumar	GOVRA	PC	991870088		Pranav Kumar
2	Agarwal	GOVRA	GOVRA	9213209367		Agarwal
3	Arora	NIC	RAM Ranch	881071687		Arora
4	Rakesh Kumar	GOVRA		6386718692		Rakesh Kumar
5	Sumit	GOVRA		9810558887		Sumit
6	Harish Kumar	GOVRA	Main Casualty	9716652400		Harish Kumar
7	Agarwal	GOVRA	3rd JIC	7827640082		Agarwal
8	KANHA KUMAR	GOVRA	1st JIC	8882014582		KANHA KUMAR
9	Chaman Lal	GOVRA	POPS	7529 91297		Chaman Lal
10	Ramjit	GOVRA	Rom No=40	9716671407		Ramjit
11	Symbul	GOVRA	Rom No=64	782011231		Symbul
12	Arun Kumar	GOVRA				Arun Kumar
13	Sharma	GOVRA		9319491487		Sharma
14	Sharma	GOVRA		8750396430		Sharma
15	Sharma	GOVRA				Sharma

GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

Speakers: Dr. Anil (324)
Dr. Bina

Total attendance - 44

ATTENDANCE SHEET

(Sub: CPR NSI BMW Hand hygiene Date: 16/10/25 Time:)

S. No.	Name of the Member/Officer	Designation	Department/ & Hospital	Phone No.	Email ID	Signature
1	Gaurav Singh	Student	Brahm Shakti School of Nursing	810953981		Gaurav Singh
2	Dimple	Student	Brahm Shakti School of Nursing			Dimple
3	Dimple	Student	Brahm Shakti School of Nursing			Dimple
4	Pratibha	Student	Brahm Shakti School of Nursing			Pratibha
5	Kajal	Student	Brahm Shakti School of Nursing			Kajal
6	Farwa	Student	Brahm Shakti School of Nursing			Farwa
7	Hemanshi	Student	Brahm Shakti School of Nursing			Hemanshi
8	Amita	Student	Brahm Shakti School of Nursing			Amita
9	Kushi	Student	Brahm Shakti School of Nursing			Kushi
10	Priya	Student	Brahm Shakti School			Priya
11	Shagun Sharma	Student	Brahm Shakti School			Shagun
12	Sakshi	Student	Brahm Shakti School			Sakshi
13	Tanish	Student	Brahm Shakti School			Tanish
14	Ashra	Student	Brahm Shakti School			Ashra
15	Neha Prajapati	Student	Brahm Shakti School			Neha Prajapati
16	Anurita	Student	Brahm Shakti School			Anurita

GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

Spekter - Dr. Anil
Dr. Bina

ATTENDANCE SHEET

(Sub: CPR NSI BMW)

Date: 14/10/25 Time: 1

S. No.	Name of the Member/Officer	Designation	Department/ & Hospital	Phone No.	Email ID	Signature.
1.	Manu Devi	NSO	NICU	9910277977		Hv
2.	Shilpa Sharma	Nsg. Off.	G.O.P.D R.No-64	8130210060		
3.	CH. MERCY ANIL	"	POPS R.No. 10.5	8744036379		
4.	MANTU RANI	SNDO	Surgery ward-2	8717307821		SLC
5.	S.K. Mittal	Nsg. Off.	G.O.P.D R.No-64	9868594359		
6.	MEENU	"	POPS R.No. 10.5	9818960803		
7.	Poojan Vashisth	Nsg. Off.	G.O.C. R.No.-14	991105850		
8.	Samul Sauri	JR	med (ward-4)	9205229717		
9.	Akshaya	JR	med (ward-3)	9315973328		
10.	Divya Ruan	JR	med (70)	989951061		
11.	ABHAY PRATAP SINGH	Radiographer	Radiology	9482819933		Abringh
12.	Divya Verma	Nsg. Officer	Gynaec Ward 4	8750812342		Divya
13.	Himani	Nsg. Officer	Gynaec Ward 4	9821045989		Himani
14.	Pammi	Nsg. Officer	Gynaec ward-04	9289949600		
15.	Dr. RutiK	JR	medicine OPD	9071230170		RTH
16.	Dr. Deepanshu	JR (med)	Medicine (75)	9717165079		Deepanshu

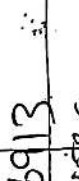
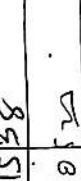
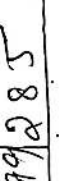
GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

ATTENDANCE SHEET

(Sub: _____)

Date: _____

Time: _____

S. No.	Name of the Member/Officer	Designation	Department/ & Hospital	Phone No.	Email ID	Signature.
17	Raj Kumar	JR 18/08/2018	Chest & TB	8700810510	1	
18	Dr. Pabshika		Medicine	8447769234		
19	Dr. Madhu	JA	Anaesthesia	7339897005		
20	Dr. Iram	JR	Medicine	852752584		
21	Dr. Pooja	JR	Medicine	8178700713		
22	Dr. Ankit Kumar	SR	Medicine	7080422252		
23	Dr. Anurag	SR	Opthol	9140203443		
24	Dr. Deepika	SR	Opthol	9999219195		
25	Nursing Officer Kavita	Nursing officer	NSC	8059397004		
26	Dr. Soulamini Das	DNB	OT & GY	8697107478		
27	Dr. Harisha Jain	Pathologist	Pathology			
28	Dr. Ranil	DNB	Med	9953326913		
29	Dr. Anvesha	DNB	Med	9745881538		
30	Dr. Anusha	CMRNS	Med	8266180520		
31	Dr. Anu	CMO	Gen			
38	Dr. Shreuti	Spl	Obst & Gynaec	9958199285		

supra

ATTENDANCE SHEET

Time: 10.30h

(Sub: 12/12 BMW 5/3, Hand Hygiene. Date: 15-9-22)

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GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

venue - 6th floor
conference
Speaker - Prof. Dr.
Kamha

ATTENDANCE SHEET

(Sub: Hand hygiene, BMW, NSI, S's Date: 10/9/2025 Time: 0:30 pm)
Codes, Soft Skills

S. No.	Name of the Member/Officer	Designation	Department/ & Hospital	Phone No.	Email ID	Signature
1	Saxena devi	N/O	ward - 1	8376814304		Saxena
2	SUAESH KUMAR	N/O	Casualty	9310850042		SUAESH KUMAR
3	laleti	N/O	ward-3	9315152949		laleti
4	laleti			7289895767		laleti
5	Archi Yadav	N/O		828807816		Archi Yadav
6	Komal	N/O	Registration	8826110592		Komal
7	Shashi	N/O	Registration	9586040392		Shashi
8	Soniya	N/O	ward-2	7011490526		Soniya
9	Jyoti kumari	N/O	Registration	6394678842		Jyoti kumari
10	Nurkul	N/O	Emergency - wot.	959535798		Nurkul
11	Shivam	N/O	Registration (Casualty)	9891915611		Shivam
12	Garv	N/O	OT-II	9354937454		Garv
13	Deepak	N/O	XRAY DEPT	7011621891		Deepak
14	Pranjul Pradhan	N/O	Gynae OPD	8120545224		Pranjul Pradhan
15	Neetu	N/O	ward-1	8447324511		Neetu

venue - 6th floor conference hall
speaker - Prof. Kahn

GOVERNMENT OF NCT OF DELHI,
SANJAY GANDHI MEMORIAL HOSPITAL,
S-BLOCK, MANGOLPURI, DELHI - 110083

ATTENDANCE SHEET

(Sub: Hard higher, RM
Codes, Soft Skill

Date: 10/9/25
 Time: 10:00 AM

[illegible]

ATTENDANCE SHEET

ATTENDANCE SHEET

(Sub: BMW, 5's, NSI, all codes)
Soft Skill, Race Pans

[illegible]

ATTENDANCE SHEET

Time: 1.30 Pm)

(Sub: BMH, NSI, S's, and hygiene)

Date: 4/7/25

S. No.	Name of the Member/Officer	Designation	Department/Hospital	Phone No.	Email ID	Signature
	Anita Arya	NSG off	ICU	7042449269	-	By
	Anita Malik	NSG-officer	GOLD	8373531940	-	Anita
	Ramlesh	NSG-off	NICU	9212248813	-	Ram
	Santa Chikkar	NSG-officer	ICU	9812482057	-	Sant
	NAIEM		Pharmacy	782728665	-	NAIEM
	Kubishwar mudgal		Pharmacy	8178625614	-	Kubish
	Neelesh		Pharmacy	9958798089	-	Neelesh
	NARESH		Pharmacy	729101889	-	N.
	Pooja Gupta		Pharmacy	9718947000	-	Pooja
	DR PURVA	ENTSR	ENT	734031051	-	Purva
	DR NISTHA	ENT Specialist	ENT	8105239329	-	Nistha
	Spitika Varun	NSG off	Matr D.T	9717282570	-	Spitika
	Pamul Guvjan	NSG-off	Paeds med IV	8696639168	-	Pamul
	Shivam	NSG-off	Paeds surgery	9891393740	-	Shiv
	DR HARENDER VERMA	M.D	medic	9891246842	-	Harender
	Shalinder h	gyn	Obstet Gyna	9871312111	-	Shalinder

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Plot No. C-101, Industrial Area, Phase -VII, Sector-73, Mohali, Punjab- 160059

Mob. 9464000081, 9417220081, 9417210081, (O) 94630 00081, 0172 4630081

GSTIN : 03BPEPS9693P1ZV, PAN No. BPEPS9693P



Annexure - 6

TC-5879



TEST REPORT

SANJAY GANDHI MEMORIAL HOSPITAL
S-Block, Mangolpuri, Delhi- 110083

Customer Ref. Number	Not Mentioned	Report No	ETL/23012026/2305
Sample Code given by Customer	Not Mentioned	Report Date	23.01.2026
Type of Sample	Waste Water	UI R No	Not Applicable
Sampling Condition	Satisfactory	Sample Reg No	ETL/E/19012026/2305
Quantity	2.00 LTR	Date of Sampling	Not Applicable
Sampling Location	STP Outlet	Date of Sample Receipt	19.01.2026
Sample Collected By	By Party	Date of Test Performance	19.01.2026- 23.01.2026
Sampling Procedure	Not Applicable	Packing Mode	Plastic Bottle & Glass Bottle

Sample Description: Slightly turbid liquid with some suspended particles
Group: Pollution & Environment

General Chemical Parameters		Results	STANDARDS (As per DPCC Rules)	Test method
S.No.	Parameters			
1	pH @ 25°C	7.68	6.5-9.0	IS 3025 (P-11) 2022; APHA 24th Edition 4500-H B 2023
2	Total Suspended Solids / MLSS (mg/l)	88	Max 100	IS 3025 (P-17) 2022; APHA 24th Edition 2540 D 2023
4	Biochemical Oxygen Demand (mg/l)	26	Max 30	IS 3025 (P-44) 2023
5	Chemical oxygen demand (mg/l)	96	Max 250	IS 3025 (P-58) 2023; APHA 24th Edition 5220 B 2023
6	Oil and Grease (mg/l)	2.5	Max 10	IS 3025 (P-39) 2021; APHA 24th Edition: 5520 B 2023

END OF REPORT



Checked by:- Tanisha
(Reviewer)
Environ Tech Laboratories

Jeet Singh Saini
(Authorized Signatory)
Technical Manager-I
Environ Tech Laboratories

Page 1 of 1

DL: Denotes Detection Limit
BDL: Denotes Below Detection Limit
The test report refers only to tested sample and applicable parameters
This report can neither be used as evidence in the court of law nor can it be used in part or full in any media without prior permission
The sample will be destroyed after fifteen days from the date of issue of test report unless otherwise specified

Email : environtechlab72@yahoo.com | Website : www.environtechlab.com
NOT VALID FOR LEGAL PURPOSE

Environ Tech Laboratories

CPCB Recognized under EPA, 1986; ISO 9001:2015; OHSAS ISO 45001:2018

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GSTIN : 03BPEPS9693P1ZV, PAN No. BPEPS9693P



TC-5879



Annexure -6

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Aja

TEST REPORT

SANJAY GANDHI MEMORIAL HOSPITAL
S- Block, Mangolpuri, Delhi- 110083

Customer Ref. Number	Not Mentioned	Report No	ETL/23012026/2310
Sample Code given by Customer	Not Mentioned	Report Date	23.01.2026
Type of Sample	Effluent Toxicity	ULR No.	Not Applicable
Sampling Condition	Satisfactory	Sample Reg No.	ETL/2/19012026/2310
Quantity	5.00 LTR	Date of Sampling	Not Applicable
Sampling Location	STP Outlet	Date of Sample Receipt	19.01.2026
Sample Collected By	By Party	Date of Test Performance	19.01.2026- 23.01.2026
Sampling Procedure	Not Applicable	Packing Mode	Plastic Can

Sample Description: Slightly turbid liquid with some suspended particles

Discipline : Chemical

Group: Pollution & Environment

S.No.	Parameters	Results	STANDARDS (As per DPCC Rules)	Test Methods
1	Bio Assay Test	90% survival	90 - 100	IS 6582 (P-2) 2001

END OF REPORT



Checked by:- Tanisha
(Reviewer)

Environ Tech Laboratories

Ajeet Singh Saini
(Authorized Signatory)
Technical Manager-I
Environ Tech Laboratories

note:

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