



Kailash Deepak Hospital



Run & Owned by Deepak Gupta Memorial Foundation (Regd.),
5 - Vikas Marg, Karkardooma, East Delhi - 110092

Regd. Office: 88, Poorvi Marg, Vasant Vihar, New Delhi - 110057, Tel: 011- 35 35 35 35
E-mail : info@kailashdeepakhospital.com Website : www.kailashdeepakhospital.com

To,

Dated: 25/02/2026

Sr. Env. Engineer, WMC – I
Delhi Pollution Control Committee
Department of Environment,
Govt. of NCT of Delhi,
3rd Floor, Block – 1, DMRC Building,
IT Park, Shastri Park, Delhi – 110053

Subject: - Submission of “Annual Report” of Bio – Medical Waste of Kailash Deepak Hospital, 5 & 6, Institutional Area, Vikas Marg Extn. – II, Delhi - 110092

Sir,

Please find enclosed herewith Bio – Medical Waste “Annual Report” since January, 2025 to December, 2025, of Kailash Deepak Hospital, 5 & 6, Institutional Area, Vikas Marg Extn. – II, Delhi – 110092.

This is for your information and record.

Thanking You,

Yours truly

For Kailash Deepak Hospital
(Formerly Deepak Memorial Hospital)


Dr. Sudhir Kumar Verma
Medical Superintendent


25/02/26
ENQUIRY COUNTER
DELHI POLLUTION CONTROL COMMITTEE
DEPARTMENT OF ENVIRONMENT
GOVT OF NCT OF DELHI
3RD FLOOR DMRC BUILDING
IT PARK SHASTRI PARK DELHI-110053

Enclosed: -

1. Original Form - IV (Page no 2 to 5)
2. Copy of Biomedical Waste Management Committee Meeting - MOM (Page no 6 to 26)



Associated with **Kailash Group of Hospitals**

Form - IV
(See rule 13)
ANNUAL REPORT

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

Sl. No.	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	Dr. Sudhir Kumar Verma Medical Superintendent
	(ii) Name of HCF or CBMWTF	:	Kailash Deepak Hospital
	(iii) Address for Correspondence	:	S26, Institutional Area Vikas Marg Extn, Delhi-110042
	(iv) Address of Facility	:	" "
	(v) Tel. No, Fax. No	:	011-35252535, 9711700426
	(vi) E-mail ID	:	accounts@kailashdeepakhospital.com
	(vii) URL of Website	:	https://www.kailashdeepakhospital.com
	(viii) GPS coordinates of HCF or CBMWTF	:	Latitude = 28°28'43" N Long. = -77°18'03" E
	(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.: DFCC/C11/C5(01)/2022/BMW/ NST/AUTH/811255234valid up to 06/05/2027
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 06/05/2027
2.	Type of Health Care Facility	:	Multi
	(i) Bedded Hospital	:	No. of Beds:.....150
	(ii) Non-bedded hospital	:	
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	-
	(iii) License number and its date of expiry	:	DHS/NH/1655 21-03-2028
3.	Details of CBMWTF	:	
	(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	:	_____ Kg/day																																																
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	<table border="1"> <tr> <td>Yellow Category</td> <td>: 26498.756 kg</td> </tr> <tr> <td>Red Category</td> <td>: 35541.130 kg</td> </tr> <tr> <td>White:</td> <td>788.468 kg</td> </tr> <tr> <td>Blue Category:</td> <td>9472.688 kg</td> </tr> <tr> <td>General Solid waste:</td> <td></td> </tr> </table>	Yellow Category	: 26498.756 kg	Red Category	: 35541.130 kg	White:	788.468 kg	Blue Category:	9472.688 kg	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	:	<table border="1"> <tr> <td>Size</td> <td>: 18'0" x 17'0" = 306 Sqft.</td> </tr> <tr> <td>Capacity</td> <td>:</td> </tr> <tr> <td>Provision of on-site storage</td> <td>: (cold storage or any other provision)</td> </tr> </table>	Size	: 18'0" x 17'0" = 306 Sqft.	Capacity	:	Provision of on-site storage	: (cold storage or any other provision)																																										
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	(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></td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Sharps encapsulation or concrete pit</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Deep burial pits:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Any other treatment equipment:</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum	Incinerators				Plasma Pyrolysis				Autoclaves				Microwave				Hydroclave				Shredder				Needle tip cutter or destroyer				Sharps encapsulation or concrete pit				Deep burial pits:				Chemical disinfection:				Any other treatment equipment:			
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	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.)																																																
	(iv) No of vehicles used for collection and transportation of biomedical waste	:																																																	
	(v) Details of incineration ash and ETP sludge generated and disposed	:	<table border="1"> <tr> <td>Quantity generated</td> <td>Where disposed</td> </tr> </table>	Quantity generated	Where disposed																																														
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Cytotoxic waste
359.655



	during the treatment of wastes in Kg per annum	Incineration Ash ETP Sludge - 280-18 Kgr
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	M/S SMS WATER GRACE BMW PVT. LTD.
	(vii) List of member HCF not handed over bio-medical waste.	
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	Yes MOM attached
7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management.	56 training sessions
	(ii) number of personnel trained	
	(iii) number of personnel trained at the time of induction	
	(iv) number of personnel not undergone any training so far	
	(v) whether standard manual for training is available?	Yes, Biomedical Waste Management Policy available
	(vi) any other information	
8	Details of the accident occurred during the year	
	(i) Number of Accidents occurred	1 (minor, NSI)
	(ii) Number of the persons affected	1
	(iii) Remedial Action taken (Please attach details if any)	Managed as per Hospital Policy
	(iv) Any Fatality occurred, details.	
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	
	Details of Continuous online emission monitoring systems installed	
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Yes liquid waste is generated Treatment methods available
11	Is the disinfection method or sterilization meeting the log 4	

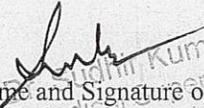


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	standards? How many times you have not met the standards in a year?		
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from

January 2025 to December 2025


Name and Signature of the Head of the Institution
Medical Superintendent
Kailash Deepak Hospital

Date: 25/02/2026
Place DELHI





BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

Venue: First floor Conference Room

KDH/BMW/MOM-06

Meeting held on: 26th June 2025, at 12:00 pm

Attendees

S. No.	Name	Designation
1	Dr. Ajeet Kumar Singh	Chief Medical Superintendent
2	Dr. Sangita Singh	Member (HOD- Lab.)
3	Dr. Daisy Sharma	Clinical Microbiologist & IPCO
4	Ms. Viswas Chaudhary	Member (DNS)
5	Mr. Arpit Kumar	IPCN
6	Mr. S. K. Shukla	Member (Maintenance)
7	Mr. Rajkumar	Member (Housekeeping)
8	Mr. Subin	HR
9	Ms. Jyoti	Quality Executive



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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

Venue: First floor Conference Room

Absentees- Mr. Saroj

KDH/BMW/MOM-06

Meeting held on: 26th June 2025, at 12:00 pm

A Brief Introduction of the Waste Management Committee was done by Dr. Daisy Sharma

S. No.	Activity/ Point Discussed	Actionable Item	Responsibility	Time Line
1.	Review of MOM of previous biomedical waste management meeting.	—		
2.	Brief description on life cycle of waste was discussed which included waste generation, segregation, discarding of waste as per latest Biomedical Waste rules.			
3.	Data of the waste collected per month was presented.			
4.	Vaccination of BMW handlers	It was decided to vaccinate all staff handling biomedical waste with 3 doses of hepatitis B vaccine and injection TT.	HR	1 month
5.	Health checkup of BMW handlers	Annual health checkup and health check up at the time of induction of Housekeeping and GDA	HR	1 month



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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

Venue: First floor Conference Room

KDH/BMW/MOM-06

Meeting held on: 26th June 2025, at 12:00 pm

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6.	Biomedical waste Audit.	BMW audit of the entire health care facility (done every 6 months) done in June 2025. Important findings were discussed	BMW management committee	Ongoing
7.	Annual Report of Biomedical waste	Annual report of Biomedical waste for the year 2024 has been submitted to DPCB and the same is available at our hospital website.	Infection Control Team	Ongoing
8.	Visit to Central Biomedical Waste Treatment Facility	Visit to SMS water grace BMW Pvt.Ltd Nilothi (CBWTF) done on 17/05/2025 and found satisfactory	Infection Control Team	Ongoing
9.	Unavailability of colour coded bags	It was observed that there was insufficient number of colour coded bags for biomedical waste disposal in the clinical areas/lab due to which waste was sometimes discarded directly in the bins leading to contamination of the bins. Adequate number of colour coded containers and desired colour coded bags (Non-chlorinated bags) provided with proper label as per BMW rules 2016 should be provided in all the wards in the designated location and away from the patient's areas to ensure segregation of waste at source	Housekeeping manager	With immediate effect
10.	General waste collection	General waste should not be collected in the same time or in the same trolley as BMW	Housekeeping manager	With immediate effect



BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-06

Meeting held on: 26th June 2025, at 12:00 pm

Venue: First floor Conference Room

	Drum/ trolley required for General waste collection	General waste is not being collected from different areas of the hospital as there is requirement of drums for collection.	Housekeeping manager and store	With immediate effect
11.	Sharp Container	Sharp container should be wall mounted near patient bedside	Maintenance	2 weeks
12.	Laundry issues (laundry is outsourced, only sluicing done in-house)	Dirty linen not to be kept on floor Clean linen kept in open, closed cupboards/Amirahs to be used	Laundry in charge	2 weeks
13.	Clean linen storage in wards	Clean linen not to be kept in the open. It should be in closed cupboards/almirahs No other item should be kept along with clean linen	Nursing Team	With immediate effect
14.	Biomedical waste segregation	Improper segregation of BMW and waste not disposed at the site of generation	Infection control team and Nursing Team	With immediate effect
15.	Improper disposal of biomedical waste	Any liquid to be drained off before disposing the plastic bottle in red bins	Nursing team	With immediate effect
16.	Disposal of glass waste/metallic body implants	Puncture proof, leak proof boxes or containers with blue coloured marking ideally should be used for glass disposal and metallic implants. If cardboard boxes with blue colored marking are used, the boxes should be	Housekeeping manager and store	1 month



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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

Venue: First floor Conference Room

KDH/BMW/MOM-06

Meeting held on: 26th June 2025, at 12:00 pm

		made of good quality cardboard to avoid any spill.		
18.	Biomedical waste collection	Biomedical waste collection: Not being done on time Supervisor not present during collection Collection timing as discussed as per Hospital policy	Housekeeping manager	With immediate effect
19.	Sorting of dirty linen done in OT complex, it creates foul odor and looks unsightly	Sorting of dirty linen to be done in dirty area of laundry	Housekeeping manager	With immediate effect
20.	BEST BIOMEDICAL WASTE HANDLING DEPARTMENT- MAY 2025	Emergency Department was awarded the Best Bio-Medical Waste Management Award for the month of Jan- May 2025 in recognition of its exemplary practices in biomedical waste segregation, disposal, and overall compliance.	Infection Control Team	Ongoing

Prepared By:

Mr. Arpit Kumar
Infection Control Nurse

Approved By:

Dr. Daisy Sharma
Microbiologist and Infection Control Officer



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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-06

Venue: First floor Conference Room

Meeting held on: 26th June 2025, at 12:00 pm

ACTION TAKEN REPORT OF BMW MEETING OF JANUARY 2025.

S. No.	Activity/ Point Discussed	Actionable Item	Responsibility	Time Line	Closure Status
1	Review of MOM of previous biomedical waste management meeting.	—			
2.	Brief description on life cycle of waste was discussed which included waste generation, segregation, discarding of waste as per latest Biomedical Waste rules.	—			



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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-06

Venue: First floor Conference Room

Meeting held on: 26th June 2025, at 12:00 pm

3.	Data of the waste collected per month was presented.					
4.	Vaccination of BMW handlers	HR	1 Month	Open		
5.	Health checkup of BMW handlers	HR	1 Month	Open		
6.	Disposal of vacutainers	NS, Infection Control Team Lab,	With immediate effect	Done and ongoing		
7.	Biomedical waste Audit.	BMW management committee	Ongoing	Ongoing		
8.	Dogs were found to be roaming around the Central Biomedical Waste Storage Area	Maintenance and Housekeeping team	2 weeks	Closed		



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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-06

Meeting held on: 26th June 2025, at 12:00 pm

Venue: First floor Conference Room

9.	Unloading of raw fruits and vegetables done near the Central Biomedical Waste Storage Area	No food items to be kept near the Central Biomedical Waste Storage Area. The Kitchen staff should be aware of the timings of the arrival of the raw fruits and vegetables and unloading of these items should be done in a dedicated trolley and carried to the kitchen without unloading on the floor near the Central Biomedical Waste Storage Area.	Housekeeping	With immediate effect	Ongoing
10	Transport of cytotoxic waste	It was decided that cytotoxic waste should be transported in a separate leak proof yellow container with Cytotoxic symbol to the Central Biomedical Waste Storage Area.	Maintenance, Housekeeping team	Ongoing	Done and ongoing
11.	PPE for Biomedical waste handlers	It was decided that Biomedical waste handlers should wear proper PPE (mask, cap, heavy duty gloves, disposable gowns, gum boots)	Housekeeping team	With immediate effect	Done and ongoing
12.	Water collection in front of mortuary	It was found that there was collection of water in front of the mortuary which can be a breeding place for mosquitoes. It was also found that there was storage of unused biomedical waste bins and containers inside the mortuary. These need to be kept in the dedicated store for housekeeping items.	Housekeeping	2 weeks	Done
13.	Collection of Biomedical waste	It was decided that Biomedical waste from different clinical areas should be collected in the morning from 6 am to 8 am.	Housekeeping	2 weeks	Open



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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-06

Meeting held on: 26th June 2025, at 12:00 pm

Venue: First floor Conference Room

14.	Bio medical waste segregation	Segregation and safe disposal of biomedical waste to be done at the point of generation by the person generating the waste. Training and re-training to be given on the same	Infection Control Team	With immediate effect	Done and ongoing
15.	Sharps Container	A puncture-proof container for sharps should be wall mounted near the patient bedside for safe disposal of sharps immediately after use.	NS, Maintenance, Infection Control Team	1 month	Open
16.	Housekeeping items kept near BMW bins near patient area	Housekeeping items (mop, wiper, etc.) should be kept separately away from patient areas and also, Biomedical waste should not be stored near patient areas.	NS, Housekeeping team	With immediate effect	Done and ongoing
17.	Sorting of dirty linen done in clean area of laundry	<u>Hospital policy:</u> Linen is sorted into dirty and soiled/infected in the ward itself and again in the laundry. Infected linen should be placed in an impervious yellow bag that should be emptied into a designated area of soiled linen in laundry.	In-charge, Housekeeping team	With immediate effect	Partially closed
18.	Award for best Biomedical waste management	It was decided that best Department for Bio-medical waste management should be awarded on 6 monthly basis to encourage correct practices in Biomedical waste handling.	CMS, Infection Control Team	6 Months	Closed
19.	48 hour clause for Biomedical waste	In the previous BMW Rules 1998, it was mentioned that "no untreated biomedical waste shall be kept stored beyond a period of 48 hours". But in the 2016 Rules, the clause was changed and only a few	Infection Control Team	With immediate effect	Ongoing

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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-06

Meeting held on: 26th June 2025, at 12:00 pm

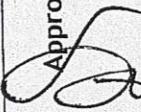
Venue: First floor Conference Room

20.	Infection Control Team	categories were put under this clause. BMW Rules 2016 says that “untreated human anatomical waste, animal anatomical waste, soiled waste and biotechnology wastes (Yellow Bags wastes) shall not be stored beyond a period of forty -eight hours”. Hence the sharps waste, and metal wastes can be discarded once the containers are ¾ filled. Thus, effectively the 48-hour clause is only for yellow bag waste. But efforts should be made to remove and treat waste as possible.	Infection control team	Ongoing
		Annual visit to CBWTF (SMS WATER GRACE) was done by BMW committee of KDH on 16/07/2024 and visit report for the same received.		Ongoing

Prepared by:


Mr. Arpit Kumar
Infection Control Nurse

Approved by:


Dr. Daisy Sharma
Microbiologist and Infection Control Officer



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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-07

Venue: First floor Conference Room

Meeting held on: 30th December 2025, at 01:30 pm



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Attendees

S. No.	Name	Designation
1	Dr. Ajeet Kumar Singh	Chief Medical Superintendent
2	Dr. Sangita Singh	Member (HOD- Lab.)
3	Dr. Daisy Sharma	Clinical Microbiologist & IPCO
4	Ms. Viswas Chaudhary	Member (DNS)
5	Ms. Anisha Sharma	IPCN
6	Mr. S. K. Shukla	Member (Maintenance)



BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-07

Venue: First floor Conference Room

Meeting held on: 30th December 2025, at 01:30 pm

7	Mr. Rajkumar	Member (Housekeeping)
8	Mr. Rohit	HR
9	Ms. Jyoti	Quality Executive

Absentees- Mr. Saroj

A Brief Introduction of the Waste Management Committee was done by Dr. Daisy Sharma

S. No.	Activity/ Point Discussed	Actionable Item	Responsibility	Time Line
1.	Review of MOM of previous biomedical waste management meeting.	—		
2.	Brief description on life cycle of waste was discussed which included waste generation, segregation, discarding of waste as per latest Biomedical Waste rules.			
3.	Data of the waste collected per month was presented.			



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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-07

Venue: First floor Conference Room

Meeting held on: 30th December 2025, at 01:30 pm

4.	Vaccination of BMW handlers	As new staff has been allocated for biomedical waste handling, they need to be vaccinated with 3 doses of Hepatitis B vaccine followed by antibody titre after 1-2 months of last dose. Also, inj TT to be given to all new BMW handlers. All new laundry and mortuary personnel also to be vaccinated.	HR	1 month
5.	Laundrying of pillows used by patients	If pillows of patients are stained with blood/body fluid, they are sent to laundry for condemnation after proper documentation. If PVC cover is used, the pillow can be re-used as only the cover needs to be washed. <i>For pillows and blankets, either pathogen-proof covers (encasings) or materials that can be reprocessed in a disinfection washing process should be used.</i>	Laundry manager, Central store	1 month
6.	Transport of biomedical waste in clinical areas	The big BMW bins need to be provided with wheels so that there is ease during collection of BMW from different areas. This will also help in prevention of spills in the area.	Maintenance	1 month



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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-07

Venue: First floor Conference Room

Meeting held on: 30th December 2025, at 01:30 pm

7.	Tying of biomedical waste bags:	Training to be imparted to biomedical waste handlers Goose-Neck Method (Recommended): Gather the top of the bag and twist it tightly for about 8 to 10 inches. Fold the twisted part over to create a "loop" (goose-neck shape). Seal the neck securely using a plastic tie, adhesive tape, or a dedicated tie-device to ensure it is leak-proof.	Housekeeping manager, IPC team	With immediate effect
8.	Improper segregation of BMW	Milk bottles not to be discarded in biomedical waste blue box. They are to be discarded in blue general waste bin. Training and re-training to be done	Nursing, Infection control team	With immediate effect
9.	Laundry issues (laundry is outsourced, only sluicing done in-house)	All hazardous chemicals kept outside. They need to be kept in locked cupboard for hazardous materials with proper MSDS	Laundry manager	With immediate effect
10.	Needles discarded with caps	It has been observed during rounds that needles are being discarded with their caps in the PPCs. Needles should never be recapped and training to be imparted to nursing staff regarding this.	Infection control team and Nursing Team	With immediate effect
11.	Training of HK and GDA staff	To check proper segregation of biomedical waste, a meeting was conducted to create awareness among Nursing in-charges and Housekeeping manager. They have been given the responsibility to check that proper	Infection control team	Ongoing



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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-07

Venue: First floor Conference Room

Meeting held on: 30th December 2025, at 01:30 pm

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12.	BMW rules amendment rules 2018	segregation has been done in their respective areas and any fault to be immediately rectified. Also, all nursing staff were also imparted training on proper BMW segregation	Blue PPC to be used in place of blue cardboard box to prevent accidental spillage and NSI as per BMW guidelines amendment 2018. Blue PPC has been introduced hospital wide and training imparted on the same.	Infection control team Ongoing
13.	Biomedical waste sticker	The BMW sticker has been updated. Cytotoxic waste category added and blue cardboard box substituted with blue PPC.		Infection control team Ongoing
14.	Placement of waste bins	Blue bin for general waste is to be kept at a distance from red and yellow BMW bins. Area in charge and HK supervisor need to keep check on this		HK manager and supervisors With immediate effect
15.	Waste bins in Paediatrics OPD	In Paediatrics OPD, BMW bins were kept near the patient's bed. This needs to be immediately removed as BMW should not be in patient vicinity.		HK manager, DNS With immediate effect
16.	Drain clogging due to improper disposal of waste	It has been observed that in MICU, the drain gets clogged as needles and other waste that has fallen on the ground is taken by the HK staff with the dust control to the		Housekeeping manager, Nursing in-charges, With immediate effect



BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-07

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	drains. Training to be given to nursing on proper disposal of waste and also to HK staff on proper cleaning/mopping methods.	Infection control team	
--	--	------------------------	--

Prepared and approved by:

Dr. Daisy Sharma
Microbiologist and Infection Prevention and Control Officer



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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-07

Venue: First floor Conference Room

Meeting held on: 30th December 2025, at 01:30 pm

ACTION TAKEN REPORT OF BMW MEETING OF JUNE 2025.

S. No.	Activity/ Point Discussed	Actionable Item	Responsibility	Time Line	Closure Status
1	Review of MOM of previous biomedical waste management meeting.	—			
2.	Brief description on life cycle of waste was discussed which included waste generation, segregation, discarding of waste as per latest Biomedical Waste rules.	—			
3.	Data of the waste collected per month was presented.				
4.	Vaccination of BMW handlers	It was decided to vaccinate all staff handling biomedical waste with 3 doses of hepatitis B vaccine and injection TT.	HR	1 month	Done and ongoing
5.	Health checkup of BMW handlers	It was decided that health check-up of all biomedical waste handlers needs to be done annually and at the time of induction.	HR	1 Month	Done
6.	Biomedical waste Audit.	BMW audit of the entire health care facility (done every 6 months) done in June 2025. Important findings were discussed	BMW management committee	Ongoing	ongoing

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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-07

Venue: First floor Conference Room

Meeting held on: 30th December 2025, at 01:30 pm

7.	Annual Report of Biomedical waste	Annual report of Biomedical waste for the year 2024 has been submitted to DPCB and the same is available at our hospital website.	Infection Control Team	Ongoing	Ongoing
8.	Visit to Central Biomedical Waste Treatment Facility	Visit to SMS water grace BMW Pvt.Ltd Nilothi (CBWTF) done on 17/05/2025 and found satisfactory	Infection Control Team	Ongoing	Ongoing
9.	Unavailability of colour coded bags	It was observed that there was insufficient number of colour coded bags for biomedical waste disposal in the clinical areas/lab due to which waste was sometimes discarded directly in the bins leading to contamination of the bins. Adequate number of colour coded containers and desired colour coded bags (Non-chlorinated bags) provided with proper label as per BMW rules 2016 should be provided in all the wards in the designated location and away from the patient's areas to ensure segregation of waste at source	Housekeeping manager	With immediate effect	Done and ongoing
10.	General waste collection	General waste should not be collected in the same time or in the same trolley as BMW	Housekeeping manager	With immediate effect	Done and ongoing.

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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

KDH/BMW/MOM-07

Venue: First floor Conference Room

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11.	Drum/ trolley required for General waste collection	General waste is not being collected from different areas of the hospital as there is requirement of drums for collection.	Housekeeping manager and store	With immediate effect	Open
12.	Sharp Container	Sharp container should be wall mounted near patient bedside	Maintenance	2 weeks	Done
13.	Laundry issues (laundry is outsourced, only sluicing done in-house)	Dirty linen not to be kept on floor Clean linen kept in open, closed cupboards/Amirahs to be used	Laundry charge in	2 weeks	Done
14.	Clean linen storage in wards	Clean linen not to be kept in the open. It should be in closed cupboards/almirahs No other item should be kept along with clean linen	Nursing Team	With immediate effect	Work in progress
15.	Biomedical waste segregation	Improper segregation of BMW and waste not disposed at the site or generation	Infection control team and Nursing Team	With immediate effect	Training imparted and Work in progress
16.	Improper disposal of biomedical waste	Any liquid to be drained off before disposing the plastic bottle in red bins	Nursing team	With immediate effect	Training imparted and Work in progress
17.	Disposal of glass waste/metallic body implants	Puncture proof, leak proof boxes or containers with blue coloured marking ideally should be used for glass disposal and metallic implants. If cardboard boxes with blue colored marking are used, the boxes should be	Housekeeping manager and store	Disposal of glass waste/metallic body implants	Done and ongoing

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BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING – MOM

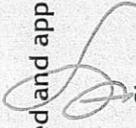
KDH/BMW/MOM-07

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		made of good quality cardboard to avoid any spill.			
18.	Biomedical waste collection	Biomedical waste collection: Not being done on time Supervisor not present during collection Collection timing as discussed as per Hospital policy	Housekeeping manager	With immediate effect	Done and ongoing
19.	Sorting of dirty linen done in OT complex, it creates foul odor and looks unsightly	Sorting of dirty linen to be done in dirty area of laundry	Housekeeping manager	With immediate effect	Done and ongoing
20.	BEST BIOMEDICAL WASTE HANDLING DEPARTMENT- MAY 2025	Emergency Department was awarded the Best Bio-Medical Waste Management Award for the month of Jan- May 2025 in recognition of its exemplary practices in biomedical waste segregation, disposal, and overall compliance.	Infection Control Team	Ongoing	Ongoing

Prepared and approved by:


Dr. Daisy Sharma
Microbiologist and Infection Prevention and Control Officer



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KAILASH DEEPAK HOSPITAL
5-6, INSTITUTIONAL AREA, VIKAS MARG EXTN., DELHI-110092



4E+07

Years: 2025

Month	Yellow w	Yellow Wt	Red Nos	Red Wt	White nos	White Wt	Blue Nos	Blue Wt	Other Nos	Others Wt	Total Nos	Total Wt
Jan-25	219	2614.27	297	3442.50	190	74.59	124	841.27	28	35.08	858	7007.71
Feb-25	160	1998.09	236	2597.68	140	56.88	94	650.51	14	24.54	644	5327.70
Mar-25	205	2120.57	290	2782.38	154	61.57	102	740.05	13	19.38	764	5723.95
Apr-25	211	2048.86	282	2693.53	156	60.46	105	735.43	21	25.50	775	5563.78
May-25	205	2084.53	278	2843.34	170	62.33	101	717.69	14	31.49	768	5739.38
Jun-25	167	1848.34	228	2562.10	129	65.24	92	656.49	14	27.80	630	5159.97
Jul-25	211	2165.19	292	3038.37	172	73.34	103	757.98	16	46.87	794	6081.75
Aug-25	222	2580.07	327	3780.40	238	92.59	133	1036.71	7	22.64	927	7512.41
Sep-25	254	2630.92	336	3443.04	167	65.03	119	946.75	11	13.44	887	7099.18
Oct-25	246	2165.74	318	2827.64	166	63.51	96	745.21	18	46.43	844	5848.53
Nov-25	300	2109.71	373	2805.69	168	58.74	102	765.05	23	39.87	966	5779.06
Dec-25	292	2132.47	337	2724.45	168	54.19	128	879.55	17	26.62	942	5817.28
Total	2692	26498.76	3594	35541.13	2018	788.47	1299	9472.69	196	359.66	9799	72660.70

