

BEFORE THE NATIONAL GREEN TRIBUNAL, PRINCIPAL BENCH AT NEW DELHI

Original Application No. 188/2020

Ishant Khanna

Applicant(s)

Versus

Dr. Ashok Uppal, Uppal Neuro Hospital, Amritsar

Respondent(s)

Report in compliance of order dated 03.09.2020 of the Hon'ble Tribunal.

Respectfully Showeth;

- 1) That the Hon'ble National Green Tribunal has taken cognizance of an application written by Sh. Ishant Khanna with regard to the violations committed by M/s Uppal Neuro Hospital, 4 – Rani Ka Bagh, Amritsar and the said application was treated as Original Application No. 188 of 2020.
- 2) That the Hon'ble Tribunal was pleased to constitute a joint committee vide order dated 3.9.2020 comprising of Central Pollution Control Board (CPCB), the State PCB, the District Magistrate and a representative of Director Health Services, Punjab with a direction to visit the site and furnish a report on factual aspects relating to compliance status of environmental norms and recommendations for steps to be taken by Uppal Neuro Hospital, Amritsar.
- 3) That in compliance to the orders dated 3.9.2020 of this Hon'ble Tribunal, a Joint Committee comprising of the following members was constituted:
 - i. Dr. Narender Sharma, Additional Director, Central Pollution Control Board (Nominated by CPCB)
 - ii. Dr. Navdeep Singh, Civil Surgeon, Amritsar (Nominated by Director, Health Services)
 - iii. Dr. Shivraj Singh Bal, PCS, SDM, Amritsar-II (Nominated by District Magistrate, Amritsar)

iv. Er. Sukhdev Singh, Assistant Environmental Engineer,
Punjab Pollution Control Board, Regional Office,
Amritsar (Nodal Officer, Nominated by PPCB).

4) That in further compliance to the order dated 3.9.2020 of this Hon'ble Tribunal, the Joint Committee has devised a format for inspection and verification of the compliances of Uppal Neuro Hospital, Amritsar. The Joint Committee visited Uppal Neuro Hospital, Amritsar on 2.11.2020 and further held a meeting on 20.11.2020 to finalize the report. A copy of the report of the Joint Committee is enclosed herewith as **Annexure-A** for kind perusal of this Hon'ble Tribunal.

5) That the summary of the verification and observations of the Joint Committee report is reproduced herein below for kind perusal of this Hon'ble Tribunal:

- i) M/s Uppal Neuro Hospital has obtained all the permissions / consents from the State Pollution Control Board and other concerned agencies.
- ii) M/s Uppal Neuro Hospital has implemented various guidelines prescribed under Bio-Medical Waste Management Rules, 2016, as amended from time to time. The HCF has signed agreement with M/s Amritsar Envirocare Systems (p) Ltd with validity upto 31/03/2025 and the waste generated is being sent to the disposal facility.
- iii) Colour coded bins have been provided at different sections of the Hospital, for segregation of waste at generation point.
- iv) The staff was observed to be having adequate and appropriate PPE during visit of Joint Committee.
- v) Training of the staff on biomedical waste management is being conducted and the records are being maintained.
- vi) Health reports of the staff are being generated and maintained.
- vii) Minutes of the meeting of the BMW management Committee are being recorded and non-conformities are being addressed & closed.

- viii) Acoustic enclosures have been provided in DG Set.
 - ix) STP has been installed by the health care facility and is operational. Samples were also drawn to verify the compliance of the prescribed norms. As per results of the analysis received from the PPCB Laboratory, STP was found to be complying with the prescribed norms.
 - x) Annual Report w.r.t Biomedical waste is being submitted by HCF, to State Pollution Control Board.
 - xi) Fire Safety certificate/NOC has been obtained by the HCF from the department of Fire Services, Punjab.
- 6) That the following points were observed by the Joint Committee, wherein steps are required to be taken for improvement and compliance of all the provisions of Bio-Medical Waste Management Rules, 2016, by Uppal Neuro Hospital, Amritsar. It is recommended by the Joint Committee that the Punjab Pollution Control Board may get these points implemented from Uppal Neuro Hospital in a time bound manner:
- a) As per Biomedical Waste Management Rules, 2016, agreement with CBWTF must also specify the responsibilities of CBWTFs and payment conditions including options such as supply of non-chlorinated bags, supply of bar-coded labels, etc. Although the supply of the supply of non-chlorinated bags, bar-coded labels, etc. is being made by the CBWTF, it is recommended this condition in the agreement as specified in the Biomedical Waste Rules, 2016 is included in the agreement.
 - b) The annual report w.r.t. Biomedical Waste management is being submitted by M/s Uppal Neuro Hospital to State Pollution Control Board. However, it was found to be lacking on the following points :i) the details required to be submitted alongwith the annual report were not found to be enclosed, ii) The annual report submitted to the State Pollution Control Board is not published on the website of the HCF, as mandated in the Biomedical Waste Rules 2016. As informed by the representative of the Hospital and the details shared with the Joint Committee, the page

proposed to display the information w.r.t. Biomedical Waste is under construction.

- c) M/s Uppal Neuro Hospital has made provision of pre-treatment facility for Yellow (h) category waste as mandated in the Biomedical Waste Management Rules, 2016. However, there is no separate record maintained by the Hospital, to verify if the waste under this category has been treated within 48 hours. It is therefore recommended that separate record of the pre-treatment to yellow (h) category waste is maintained to ensure and also as an evidence that yellow (h) category waste is disposed off as per requirements under Bio-Medical Waste Management Rules, 2016
- d) HCFs need to maintain, compile and provide details of trainings provided for BMW handling to State Pollution Control Board (SPCB)/Pollution Control Committee (PCC). These details have to be submitted along with the annual report to the prescribed authority i.e. SPCB//PCC, on or before 30th June of every year. Based on the records maintained by M/s Uppal Neuro Hospital, the training is being imparted to the staff and reports are also being generated. However, the hospital is not submitting the records to State Pollution Control Board. It is therefore recommended that training records are submitted to State PCB, as mandated in the Bio-Medical Waste Management Rules, 2016.
- e) As per Biomedical Waste Management Rules, 2016, the containers being used for collection of sharps and glassware, must meet the requirements as listed by World Health Organization (WHO) in "PQS Performance Specifications: Safety Box for disposal of waste sharps" (Source: Document number: WHO/PQS/E10/SB01.1). It is recommended that HCF sources the containers as per WHO performance specification meeting the while placing the order for containers, to ensure safety of the workers handling such wastes.

7) That in further compliance to the order dated 3.9.2020 of this Hon'ble Tribunal, the compliance status of Health Care Facilities (HCFs) in District Amritsar is given below:

- a) There are total 862 Health Care Facilities (HCFs) in the area of District Amritsar.
- b) Out of the total 862 HCFs, 367 HCFs are bedded hospitals and remaining 495 HCFs are non-bedded Health Care Facilities.
- c) 853 HCFs have obtained authorization under the Bio-Medical Waste Management Rules, 2016 at least once in lifetime and remaining 9 HCFs have not obtained the authorization from the State Pollution Control Board under said rules.
- d) Action against these 09 HCFs is under process.
- e) Out of 367 bedded hospitals, 55 bedded hospitals have installed ETPs.
- f) The remaining 312 bedded hospitals are required to install ETP by 31.12.2020 in the light of Punjab Pollution Control Board Office order no. 452 dated 07.08.2020 (Copy of order dated 7.8.2020 is enclosed herewith as **Annexure-B**).
- g) During inspections made to HCFs, (from November 2019 to October 2020) major violations were observed in 4 HCFs. Environmental Compensation of Rs.8,57,500 /- and Rs.3,28,500 /- has been imposed on 2 HCFs while action against remaining 2 HCFs is under process.

8) That the compliance report is hereby submitted in compliance of order dated 3.9.2020 of this Hon'ble Tribunal.

It is, therefore, prayed that the Original application no. 188 of 2020 may kindly be disposed of with appropriate orders.

Date: 24.11.2020

Place: AMRITSAR

Submitted by

(Harpal Singh)
Environmental Engineer
Punjab Pollution Control Board
Regional Office, Amritsar

Report of the Joint Committee in compliance of the orders of Hon'ble NGT dated 03/09/2020, in the matter of O.A. No. 188 of 2020; Ishant Khanna Versus Dr. Ashok Uppal, Uppal Neuro Hospital, Amritsar.

1. Background:

The matter is related to alleged non-compliance of various norms by M/s Uppal Neuro Hospital, Amritsar, including violation of environmental norms. The allegations made by the applicant in this matter involve compliance of siting criteria of the hospital with reference to the residential area, including safeguards to be adopted in the interest of environment in running of hospitals in residential area and safety norms in the building, compliance of Bio-Medical Waste Management Rules, 2016 with regard to disposal of biomedical waste particularly whether waste is being sent to the Common Bio-Medical Waste Facility and whether the hospital has requisite authorization under the Rules. Compliance of Solid Waste Management

It was observed and directed by the Hon'ble NGT in the order dated 03/09/2020, as follows:-

"Since the above issue is significant from the point of environment and public health, we direct that a joint Committee comprising Central Pollution Control Board (CPCB), the State PCB, the District Magistrate and a representative of Director Health Services, Punjab may visit the site and give a report on factual aspects relating to compliance status of environmental norms and recommendations for steps to be taken within two months from today by e-mail at judicial-ngt@gov.in preferably in the form of searchable PDF/ OCR Support PDF and not in the form of Image PDF. The State PCB will be the nodal agency for compliance and may also furnish the status of inventorization of hospitals at Amritsar and compliance status in general, if already compiled.

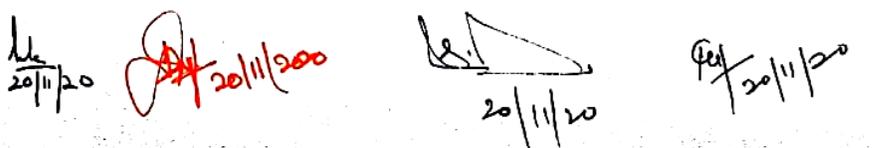
2. Compliance Report:

2.1. Constitution of the Joint Committee and Site Visit:

In compliance of the orders of Hon'ble NGT, a joint committee comprising of the following members was constituted:

1. Dr. Narender Sharma, Additional Director, CPCB (Nominated by CPCB)
2. Dr. Navdeep Singh, Civil Surgeon, Amritsar (Nominated by Director, Health Services)
3. Dr. Shivraj Singh Bal, PCS, SDM, Amritsar-II (Nominated by District Magistrate, Amritsar)
4. Er. Sukhdev Singh, AEE, PPCB, RO, Amritsar (Nodal Officer, nominated by PPCB)

The joint Committee was directed by Hon'ble NGT to visit the site and give a report on factual aspects relating to compliance status of environmental norms and recommendations for steps to be taken. Accordingly, in compliance of the directions, the Joint Committee visited the site i.e M/s Uppal Neuro Hospital, Amritsar on dated 02/11/2020, to verify the compliance of various environmental norms applicable to Healthcare Facilities. The second meeting of the joint committee was held on 20/11/2020 in the office Environmental Engineer, Punjab Pollution Control Board, Regional Office, Amritsar to discuss the findings and finalize the report for filing before Hon'ble National Green Tribunal.



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2.2. Report of the Joint Committee:

M/s Uppal Neuro Hospital, Amritsar, is required to possess and comply with the provisions of the following permissions/consents, to operate a healthcare facility:

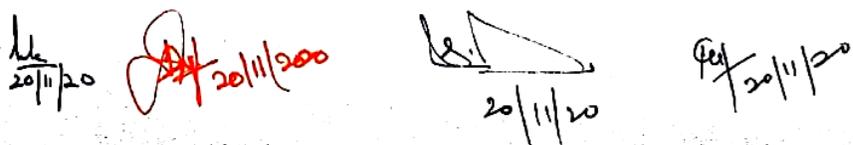
- i) Consent to Operate under Water (Prevention & Control of Pollution) Act, 1974.
- ii) Consent to Operate under Air (Prevention & Control of Pollution) Act, 1981.
- iii) Authorization under Bio-Medical Waste Management Rules, 2016
- iv) Authorization from Atomic Energy Regulatory Board
- v) Fire safety certificate/NOC from Punjab Fire Services.

Apart from the above, a healthcare facility is also required to comply with various provisions applicable depending on the Capacity of the healthcare facility w.r.t. Management of other wastes under Batteries (Management & Handling) Rules, 2001, E Waste (Management) Rules, 2016, Plastic Waste Management Rules, 2016 and PQS performance Specifications: Safety Box for disposal of waste sharps.

A format for inspection and verification of the compliance was developed by the Joint Committee. In order to verify if the M/s Uppal Neuro Hospital is following and implemented various guidelines of Bio-Medical Waste Management Rules, 2016 or not, the Joint Committee visited different sections of the Hospital. The Inspection-cum-compliance verification report w.r.t. various environmental norms by M/s Uppal Neuro Hospital, Amritsar, as prepared by the Joint Committee is submitted in **Table 1**, as follows:

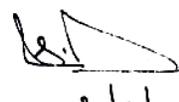
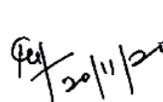
Table 1: "Inspection-cum-Compliance Verification Report" of the Joint Committee w.r.t. various environmental norms by M/s Uppal Neuro Hospital, Amritsar in the matter of O.A. No. 188/2020; Ishant Khanna Vs. Dr. Ashok Uppal, Uppal Neuro Hospital, Amritsar

Date of the Visit: November 2, 2020			
General Information			
S. No	Particulars		
1.	Name and address of the Health Care Facility (HCF) alongwith Date of Establishment	M/s Uppal Neuro Hospital, 4-Rani Ka Bagh, Amritsar 20/9/2004	
2.	Name and Contact details of the designated Occupier of HCF	Dr. Ashok Uppal, Medical Director, Uppal Neuro Hospital, 4-Rani Ka Bagh, Amritsar	
3.	Name and Contact details of the designated Biomedical Waste Supervisor: (HCFs having 30 beds or more shall have Quality Team/ Infection Control Committee/ Bio Medical Waste Management Committee and HCFs having less than 30 beds should designate Bio Medical Waste Supervisor.)	Dr. Rajiv Tiwari, MD, Microbiology, Uppal Neuro Hospital, 4-Rani Ka Bagh, Amritsar M/s Uppal Neuro Hospital is 125 bedded hospital.	
Compliance Verification			
S.No	Particulars	Compliance Status	Evidence/Recommendations
1.	Validity of Consent to operate under Water Act, 1974.	Complying; The HCF is having valid Consent to Operate No. CTOW/Varied/ASR/2020/1297 8424 with validity upto 30/06/2025.	Annexure-1



2.	Validity of the consent to operate under Air Act, 1981.	Complying; The HCF is having valid Consent to Operate No. CTOA/Varied/ASR/2020/12978 105 with validity upto 30/06/2025.	Annexure-2
3.	Authorization under Bio-Medical Waste Management Rules, 2016 (Validity of authorization in case of bedded health care facilities will be synchronized with the validity of the consents.) HCF if intends dispose BMW through deep burial pits, they shall obtain authorization from the respective prescribed authority i.e. SPCB/PCC office for establishment of deep burial pits and records of such pits needs to maintained.	Complying; The HCF is having valid authorization No. BMW/Fresh/ASR/2020/12978 20-with validity upto 30/06/2025	Annexure-3
4.	Copy of the agreement with CBWTF. It has to be ensured by the HCF, that the CBWTF operator collects the waste within a specified time, and the untreated biomedical waste especially untreated human anatomical, animal anatomical, soiled waste and biotechnology waste is treated and disposed within a period 48 hours. Agreement must also specify the responsibilities of CBWTFs and payment conditions including options such as supply of non-chlorinated bags, supply of bar-coded labels, etc.	Complying: The HCF has signed agreement with M/s Amritsar Envirocare Systems (P) Ltd. with validity upto 31/03/2025.	Annexure-4 Although the supply of the supply of non-chlorinated bags, bar-coded labels, etc. is being made by the CBWTF, it is recommended this condition in the agreement as specified in the Biomedical Waste Rules, 2016 is included in the agreement.
5.	Submission of annual Report (Form-IV) to SPCB. As per the Bio Medical Waste Management Rules, 2016, the healthcare facility is required to submit the Annual Report to the SPCB/PCC on or before 30th June every year, for the period from January to December of the preceding calendar year.	Complying w.r.t. submission of Annual report to State Pollution Control Board. Physical verification of the records of M/s Uppal Neuro Hospital by the Joint Committee revealed that : • Colour coded bins have been provided at different sections of the Hospital, for segregation of waste at generation point.	Annexure-5 Photographs attached in Annexure- 17



	<p>The annual report should be filled in the prescribed format as per the Form IV prescribed under BMW Management Rules, 2016. The annual report contains details of following:</p> <ul style="list-style-type: none"> •Particulars of Occupier/ HCF •Quantity of waste generated in kg/annum •Details of storage, treatment, transportation, processing and disposal facility •Details of training conducted on Bio Medical Waste Management •Details of accident Occurred •Details Emission and Effluent testing <p>Annual Report submitted to the State Pollution Control Board or Pollution Control Committee must also be enclosed with following details:</p> <ul style="list-style-type: none"> •Training imparted to the Health Care Workers involved in handling of bio-medical waste •Minutes of Meeting of BMW Management Committee •Details of Accident Occurred during one year, along with the remedial steps taken •Records of testing of Emission of DG Sets / boilers •Records of Effluent generated and its characteristics •Records of pre-treatment of specified waste categories •Records of health status of the Health Care Workers involved in handling of biomedical waste (Health Report) •Records of immunisation 	<ul style="list-style-type: none"> • Training of the staff on biomedical waste management is being conducted and the records are being maintained. • Minutes of the meeting of the BMW management Committee are being recorded and non-conformities are being addressed & closed. • Acoustic enclosures have been provided in DG Set. • Health reports of the staff are being generated and maintained. • STP has been installed by the health care facility and is operational. Samples were also drawn to verify the compliance of the prescribed norms. The HCF is also getting the effluent tested from external laboratory and the according to the last report of analysis, the STP is meeting the prescribed norms. • Fire Safety certificate/NOC has been obtained by the HCF from The department of Fire Services, Punjab. <p>However, i) the details required to be submitted alongwith the annual report were not found to be enclosed, ii) The annual report submitted to the State Pollution Control Board is not published on the website of the HCF, as mandated in the Bio-Medical Waste Management Rules, 2016</p>	<p>Annexure-6</p> <p>Annexure-7</p> <p>Photographs attached in Annexure- 17</p> <p>Annexure-8</p> <p>Photographs attached in Annexure- 17</p> <p>Annexure-9</p> <p>Annexure-10</p> <p>It is recommended that details as specified in the Biomedical Waste Rules, 2016, are submitted to State Pollution Control Board, as an evidence of the compliance of various provisions of the Rules.</p> <p>It is also recommended that a link is provided on the website of the Hospital for publishing the annual report, for the reference of various stakeholders, as mandated in the Biomedical Waste Rules, 2016, amended from time to time.</p>
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	<p>of Health Care Workers involved in handling of biomedical waste</p> <p>Each healthcare facility must also ensure that the annual report submitted to the concerned SPCB/PCC is also published in its own website</p>		
6.	<p>All bedded healthcare facilities as prescribed under BMWM Rules, 2016 shall develop a separate page/web link in its website for displaying the information pertaining to their hospital by 15/03/2020.</p> <p>1.Contact Address and details of the Healthcare Facility :</p> <p>2. No. of beds :</p> <p>3. Details of :</p> <p>a) Authorisation under BMWM Rules, 2016:</p> <p>b) Consent under Water (Prevention and Control of Pollution) Act, 1974 and Air(Prevention and Control of Pollution) Act, 1981 :</p> <p>4. Quantity of bio-medical waste generation (in kg/day):</p> <p>5. Mode of disposal of bio-medical waste (through CBWTF or through captive treatment facility):</p> <p>6. Name and address of the CBWTF through which waste is disposed off (as applicable) :</p> <p>7. In case, HCF is having captive treatment facility,</p> <p>a) bio-medical waste treated (in kg/day)</p> <p>b) Details of treatment equipment</p> <p>c) Total nos. and capacity of each treatment equipment (in kg/day)</p> <p>d) Operating parameters of the treatment equipment as per BMWM Rules, 2016</p> <p>8. Monthly records of bio-medical waste generation (category wise):</p> <p>9. No. of trainings</p>	<p>Not Complying; Link not provided. As informed by the representative of the Hospital and the details shared with the Joint Committee, the page proposed to display the information w.r.t. Biomedical Waste is under construction.</p>	<p>Annexure-11</p> <p>It is recommended that the link for displaying the information regarding biomedical waste is provided, as mandated under Biomedical Waste Management Rules, 2016, as amended from time to time.</p>

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	<p>conducted on Bio-medical Waste Management in the current year</p> <p>10. Stats of immunization of Health Care Workers involved in handling of BMW.</p> <p>Bedded HCFs to ensure uploading annual records of the biomedical waste generated on its website by 15 March, 2020.</p> <p>Each healthcare facility must also ensure that the annual report submitted to the concerned SPCB/PCC is also published in its own website.</p>		
7.	BMW register/Daily report of BMW generation and disposal	Complying; Verified by the Joint Committee.	Annexure-12
8.	Provision of pre-treatment facility for Yellow (h) category waste	Complying : Verified by the Joint Committee	<p>Annexure- 13</p> <p>Photograph attached in Annexure- 17</p> <p>It is recommended that separate record of the pre-treatment to yellow (h) category waste is maintained to ensure and also as an evidence that yellow (h) category waste is disposed off within 48 hours, as mandated under Bio-Medical Waste Management Rules, 2016</p>
9.	Provision of Central Storage Area	Complying; Verified by the Joint Committee during inspection.	Photograph attached in Annexure- 17
10.	<p>Reporting:</p> <p>Besides annual reporting and accident reporting each healthcare facility needs to report to the respective SPCB/PCC in event of following:</p> <ul style="list-style-type: none"> • If the waste collection agency or CBWTF does not collect the waste within 48 hours of generation, it is the responsibility of the HCF to immediately inform the respective State Pollution Control Board/Pollution Control Committee about any such 	Complying: Annual report is submitted to the State Pollution Control Board.	Annexure-5

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	<p>lapse.</p> <ul style="list-style-type: none"> It is also mandatory to report to the respective State Pollution Control Board/Pollution Control Committee, the reason of storing the waste in the facility for a period beyond 48 hours and also the remedial actions taken by the HCFs to ensure that the waste does not adversely affect human health and the environment. 		
11.	<p>Occupational safety: As per Bio Medical Waste Management Rules, 2016 occupational safety of the staff has to be ensured in following methods:</p> <p>Providing adequate and appropriate Personal Protective Equipment (PPE) to the staff handling Bio Medical Waste.</p> <p>Conducting health check-up of all the employees at the time of induction and also at least once in a year.</p> <p>Ensuring that all the staff of the health care facility involved in handling of BMW is immunized at least against the Hepatitis B and Tetanus.</p>	<p>Complying: The staff was observed to be having adequate and appropriate PPE during visit of Joint Committee.</p> <p>Health check up records of the staff were also verified by the Joint Committee and the copy of the records for few staff were also obtained, for reference and inclusion in the report.</p>	<p>Photographs attached in Annexure-17</p> <p>Annexure-8</p>
12.	<p>As per Bio Medical Waste Management Rules, 2016, every HCF must ensure that a comprehensive health check-up of each employee and other staff involved in BMW handling is carried out at the time of induction and also as a mandatory procedure to be followed for each year for every employee.</p> <p>Comprehensive Health Check-up includes following but not limited to:</p> <ul style="list-style-type: none"> Present Complaints (If any), with duration 	<p>Complying: Records verified by the Joint Committee during inspection. Records of few employees form the personal files were also obtained by the Joint Committee for reference and inclusion in the report.</p>	Annexure-14

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	<p>Vaccination History (especially with respect to Hepatitis B and Tetanus Toxoid)</p> <ul style="list-style-type: none"> • Past Medical History • Past Surgical History • General Physical Examination • Dental Examination • Systemic Examination including Cardiovascular System • Respiratory System • Central Nervous System, Gastrointestinal System • Uro Genital System • Gynae and Obstet. (in case of females) • Musco-skeleton System • EYE and ENT. • Lab Investigations including: Hb, TLC, DLC, RBS, Blood Urea, S. Creatinine, Urine, Stool etc. • Radiological Investigations: Chest X ray, USG (If needed), CT or MRI (if needed) • Inference with Diagnosis <p>Health Check-up records of all the employees are needed to be maintained in the personal record of each employee for proving compliance.</p>		
13.	<p>Training Records: HCFs need to maintain, compile and provide details of trainings provided for BMW handling to State Pollution Control Board (SPCB)/Pollution Control Committee (PCC). These details have to be submitted along with the annual report to the prescribed authority i.e. SPCB//PCC, on or before 30th June of every year. The training details include:</p> <ul style="list-style-type: none"> • Total Number of trainings conducted along with the date of imparting the 	<p>Complying; Training records verified by the Joint Committee. Copies also obtained for reference and inclusion in the report.</p> <p>However, as mandated in the Biomedical waste rules, the HCF has not submitted the training records to State Pollution Control Board alongwith Annual Report.</p>	<p>Annexure-6</p> <p>It is recommended that training records are submitted to State PCB, as mandated in the Bio-Medical Waste Management Rules, 2016</p>

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	<p>training</p> <ul style="list-style-type: none"> •Total number of participant of each training •Attendance Record •Total Number of staff trained on BMW Handling •Total number of staff trained on BMW handling at the time of Induction •Total number of staff, not undergone any sought of training on BMW Handling. 		
Management of General Waste			
1.	Health care facilities must ensure that the general solid waste generated from the facility is segregated and collected in a separate bins filled in with non-chlorinated bags and shall not be mixed up with the BMW generated in the facility.	Complying: The HCF was found to be having spate bins for collection of general waste during visit of the Joint Committee	Photograph attached in Annexure-17
Management of other Wastes			
1.	Management of Used Batteries: As per the provisions under Batteries (Management & Handling) Rules, 2001, used lead acid batteries generated from health care facilities (HCFs) should be sold/auctioned/sent only to the authorised dealers, designated collection centres or authorised recyclers or any authorised agency. In no case the used batteries be handed over to an unauthorised person. Hospital having purchased more than 100 batteries should maintain records of number of batteries purchased, and number of used batteries sent to registered recyclers/authorised dealers/designated collection centres/any other agency as per Form VIII of Batteries Rules, 2001 and the returns shall be filed half yearly i.e. by 30th June and 31st December of every	The HCF is using around 35 Nos. batteries and hence the filing of the return under Batteries Rules, 2001, in not applicable.	

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	year to the concerned State Pollution Control board.		
2.	<p>Management of Radioactive Wastes: Health Care Facilities generating radionuclides waste from treatment of Cancer patients and end-of-life equipment containing radio radionuclides shall obtain authorization from AERB for its disposal. As per the policy of AERB, radionuclides wastes are required to be re-exported back to the manufacturer. It was recommended that such generators shall ensure arrangement with manufacturer at the time of purchase of such equipment. Waste disposal facilities of AERB are regulated by Waste Disposal Agency (Division) of Atomic Energy regulatory Board (AERB).</p>	<p>Complying: The HCF has obtained requisite permissions/licences from the Atomic Energy regulatory Body.</p>	Annexure-15
3.	<p>Management of E-Wastes: E-Waste generated from hospital equipment not listed in Schedule-I should also be sold/ transferred to only the authorized E-Waste Recyclers/Dismantlers.</p>	No E waste generated from Hospital Equipment so far, as informed by the representative of the Hospital.	
4.	<p>Plastic bags: HCFs must ensure that use of chlorinated plastic bags for waste collection must be phased out. Plastic bags used for collection of biomedical waste should be as per the BIS standards or Plastic Waste Management Rules, 2016</p>	Complying	
5.	<p>Containers: For containers being used for collection of sharps and glassware, the containers must meet the requirements as listed by World Health Organization (WHO) in "PQS Performance Specifications: Safety Box for disposal of waste sharps" (Source: Document number: WHO/PQS/E10/SB01.1).</p>	No information is available with the HCF regarding performance specification of the containers being used for collection of sharps and glassware.	It is recommended that HCF sources the containers as per WHO performance specification meeting the while placing the order for containers.

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Summary of the observation/verification made by the Joint Committee

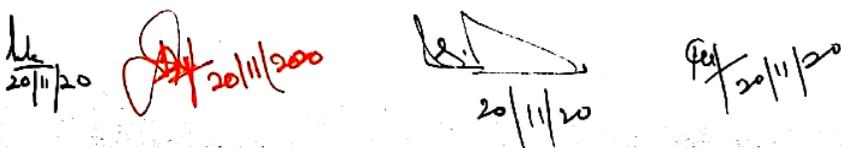
- i. M/s Uppal Neuro Hospital has obtained all the permissions/Consents from the State Pollution Control Board and other concerned agencies.
- ii. M/s Uppal Neuro Hospital has implemented various guidelines prescribed under Bio-Medical Waste Management Rules, 2016, as amended from time to time. The HCF has signed agreement with M/s Amritsar Envirocare Systems (p) Ltd with validity upto 31/03/2025 and the waste generated is being sent to the disposal facility.
- iii. Colour coded bins have been provided at different sections of the Hospital, for segregation of waste at generation point.
- iv. The staff was observed to be having adequate and appropriate PPE during visit of Joint Committee.
- v. Training of the staff on biomedical waste management is being conducted and the records are being maintained.
- vi. Health reports of the staff are being generated and maintained.
- vii. Minutes of the meeting of the BMW management Committee are being recorded and non-conformities are being addressed & closed.
- viii. Acoustic enclosures have been provided in DG Set.
- ix. STP has been installed by the health care facility and is operational. Samples were also drawn to verify the compliance of the prescribed norms. As per results of the analysis received from the PPCB Laboratory, STP was found to be complying with the prescribed norms (**Annexure-16**).
- x. Annual Report w.r.t Biomedical waste is being submitted by HCF, to State Pollution Control Board.
- xi. Fire Safety certificate/NOC has been obtained by the HCF from the department of Fire Services, Punjab.

The photographs taken by Joint Committee during inspection as evidence of implementation of various provisions of Bio-Medical Waste Management Rules, 2016 are attached in **Annexure-17**

Recommendations of the Joint Committee w.r.t. steps to be taken:

The following points/non-compliances were also observed by the Joint Committee, wherein steps are required to be taken for improvement and compliance of all the provisions of Bio-Medical Waste Management Rules, 2016 It is recommended Punjab Pollution Control Board may get these points implemented from M/s Uppal Neuro Hospital in a time bound manner.

- a) As per Biomedical Waste Management Rules, 2016, agreement with CBWTF must also specify the responsibilities of CBWTFs and payment conditions including options such as supply of non-chlorinated bags, supply of bar-coded labels, etc. Although the supply of the supply of non-chlorinated bags, bar-coded labels, etc. is being made by the CBWTF,



 The bottom of the page contains several handwritten signatures and dates. On the left, there is a signature in red ink with the date '20/11/20' written below it. In the center, there is a signature in black ink with the date '20/11/20' written below it. On the right, there is another signature in black ink with the date '20/11/20' written below it.

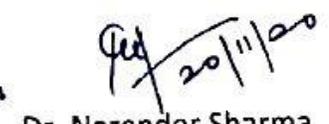
it is recommended this condition in the agreement as specified in the Biomedical Waste Rules, 2016 is included in the agreement.

- b) The annual report w.r.t. Biomedical Waste management is being submitted by M/s Uppal Neuro Hospital to State Pollution Control Board. However, it was found to lacking on the following points : i) the details required to be submitted alongwith the annual report were not found to be enclosed, ii) The annual report submitted to the State Pollution Control Board is not published on the website of the HCF, as mandated in the Biomedical Waste Rules 2016. As informed by the representative of the Hospital and the details shared with the Joint Committee, the page proposed to display the information w.r.t. Biomedical Waste is under construction.
- c) M/s Uppal Neuro Hospital has made provision of pre-treatment facility for Yellow (h) category waste as mandated in the Biomedical Waste Management Rules, 2016. However, there is no separate record maintained by the Hospital, to verify if the waste under this category has been treated within 48 hours. It is therefore recommended that separate record of the pre-treatment to yellow (h) category waste is maintained to ensure and also as an evidence that yellow (h) category waste is disposed off as per requirements under Bio-Medical Waste Management Rules, 2016
- d) HCFs need to maintain, compile and provide details of trainings provided for BMW handling to State Pollution Control Board (SPCB)/Pollution Control Committee (PCC). These details have to be submitted along with the annual report to the prescribed authority i.e. SPCB//PCC, on or before 30th June of every year. Based on the records maintained by M/s Uppal Neuro Hospital, the training is being imparted to the staff and reports are also being generated. However, the hospital is not submitting the records to State Pollution Control Board. It is therefore recommended that training records are submitted to State PCB, as mandated in the Bio-Medical Waste Management Rules, 2016.
- e) As per Biomedical Waste Management Rules, 2016, the containers being used for collection of sharps and glassware, must meet the requirements as listed by World Health Organization (WHO) in "PQS Performance Specifications: Safety Box for disposal of waste sharps" (Source: Document number: WHO/PQS/E10/SB01.1). It is recommended that HCF sources the containers as per WHO performance specification meeting the while placing the order for containers, to ensure safety of the workers handling such wastes.


Er. Sukhdev Singh,
PPCB


Dr. Navdeep Singh,
Civil Surgeon


Dr. Shivraj Singh Bal,
PCS, SDM


Dr. Narender Sharma,
CPCB

Date: 20.11.2020



PUNJAB POLLUTION CONTROL BOARD
ZONAL OFFICE, 164, FOCAL POINT, MEHTA ROAD, AMRITSAR.
 Website:- www.ppcb.gov.in

Office Dispatch No :	Registered/Speed Post	Date:
Industry Registration ID: H16ASR3983238		Application No : 12978424

To,
Dyalsaroop
Uppal Neuro Hospital
Amritsar, Amritsar-143001

Subject: Grant Varied 'Consent to Operate' an outlet u/s 25/26 of Water (Prevention & Control of Pollution) Act, 1974 for discharge of effluent.

With reference to your application for obtaining Varied $\frac{1}{2}$ Consent to Operate $\frac{1}{2}$ an outlet for discharge of the effluent u/s 25/26 of Water (Prevention & Control of Pollution) Act, 1974, you are, hereby, authorized to operate an industrial unit for discharge of the effluent(s) arising out of your premises subject to the Terms and Conditions as mentioned in this Certificate

1. Particulars of Consent to Operate under Water Act, 1974 granted to the industry

Consent to Operate Certificate No.	CTOW/Varied/ASR/2020/12978424
Date of issue :	23/07/2020
Date of expiry :	30/06/2025
Certificate Type :	Varied
Previous CTO No. & Validity :	CTOW/Fresh/ASR/2017/5614877 From:16/06/2017 To:30/06/2021

2. Particulars of the Industry

Name & Designation of the Applicant	Ashok Uppal, (Proprieter)
Address of Industrial premises	Uppal Neuro Hospital, 4-rani Ka Bagh, Amritsar li, Amritsar-143001
Capital Investment of the Industry	125.0 lakhs
Category of Industry	Hospital
Type of Industry	Private
Scale of the Industry	Small
Office District	Amritsar
Consent Fee Details	
Raw Materials (Name with quantity per day)	Hospital @ 125 Beds @ 125 Metric Tonnes/Day
Products (Name with quantity per day)	Hospital @ 125 Beds @ 125 Metric Tonnes/Day
By-Products, if any, (Name with quantity per day)	AS PER DETAIL SUBMITTED
Details of the machinery and processes	AS PER DETAIL SUBMITTED
Details of the Effluent Treatment Plant	Domestic Effluent @ 65.0 KLD
Mode of Disposal	Into Sewer after treating through STP



23/07/2020

(Shiv Kumar)
Environmental Engineer

For & on behalf

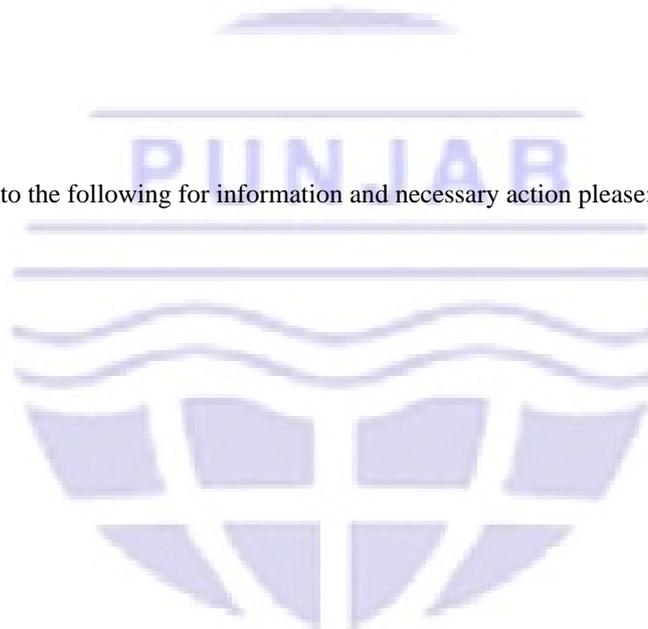
of

(Punjab Pollution Control Board)

Endst. No.:

Dated:

A copy of the above is forwarded to the following for information and necessary action please:
THE EE, RO, ASR.



23/07/2020

(Shiv Kumar)
Environmental Engineer

For & on behalf

of

(Punjab Pollution Control Board)

TERMS AND CONDITIONS

A. GENERAL CONDITIONS

1. This consent is not valid for getting power load from the Punjab State Power Corporation Limited or for getting loan from the financial institutions.
2. The industry shall apply for renewal/further extension in validity of consent atleast two months before expiry of the consent.
3. The industry shall ensure that the effluent discharging through the authorized outlet shall confirm to the prescribed standards as applicable from time to time.
4. The industry shall plant minimum of three suitable varieties of trees at the density of not less than 1000 trees per hectare all along the boundary of the industrial premises.
5. The achievement of the adequacy and efficiency of the effluent treatment plant/pollution control devices/recirculation system installed shall be the entire responsibility of the industry.
6. The industry shall ensure that the Hazardous Wastes generated from the premises are handled as per the provisions of the Hazardous Wastes(Management, Handling and Trans boundary Movement) Rules, 2008 as amended time to time , without any adverse effect on the environment, in any manner
7. The responsibility to monitor the effluent discharged from the authorized outlet and to maintain a record of the same rests with the industry. The Board shall only test check the accuracy of these reports for which the industry shall deposit the samples collection and testing fee with the Board as and when required.
8. The industry shall submit balance sheet of every financial year to the concerned Regional Office by 30th June of every year.
9. The industry shall submit a yearly certificate to the effect that no addition/up-gradation/ modification/modernization has been carried out during the previous year otherwise the industry shall apply for the varied consent.
10. During the period beginning from the date of issuance and the date of expiration of this consent, the applicant shall not discharge floating solids or visible foam.
11. Any amendments/revisions made by the Board in the tolerance limits for discharges shall be applicable to the industry from the date of such amendments/revisions.
12. The industry shall not change or alter the manufacturing process(es) so as to change the quality and/or quantity of the effluents generated without the written permission of the Board.
13. Any upset conditions in the plant/plants of the factory, which is likely to result in increased effluent and/or result in violation of the standards lay down by the Board shall be reported to the Environmental Engineer, Punjab Pollution Control Board of concerned Regional Office immediately failing which any stoppage and upset conditions that come to the notice of the Board/its officers, will be deemed to be intentional violation of the conditions of consent.
14. The industry shall provide terminal manhole(s) at the end of each collection system and a manhole upstream of final outlet (s) out of the premises of the industry for measurement of flow and for taking samples.
15. The industry shall for the purpose of measuring and recording the quantity of water consumed and effluent discharged, affix meters of such standards and at such places as approved by the Environmental Engineer, Punjab Pollution Control Board of the concerned Regional Office.
16. The industry shall maintain record regarding the operation of effluent treatment plant i.e. record of quantity of chemicals and energy utilized for treatment and sludge generated from treatment so as to satisfy the Board regarding regular and proper operation of pollution control equipment.
17. The industry shall provide online monitoring equipment^{1/2}s for the parameters as decided by concerned Regional Office with the effluent treatment plant/air pollution control devices installed, if applicable.
18. The pollution control devices shall be interlocked with the manufacturing process of the industry.
19. The authorized outlet and mode of disposal shall not be changed without the prior written permission of the Board.
20. The industry shall comply with the conditions imposed by the SEIAA / MOEF in the environmental clearance granted to it as required under EIA notification dated 14/9/06, if applicable.
21. The industry shall obtain and submit Insurance cover as required under the Public Liability Insurance Act, 1991.
22. The industry shall not use any unauthorized out-let(s) for discharging effluents from its premises. All unauthorized outlets, if any, shall be connected to the authorized outlet within one month from the date of issue of this consent.

23. The industry shall make necessary arrangements for the monitoring of effluent being discharged by the industry and shall monitor its effluents:-
 - (i) Once in Year for Small Scale Industries.
 - (ii) Four in a Year for Large/Medium Scale Industries.
 - (iii) The industry will submit monthly reading/ data of the separate energy meter installed for running of effluent treatment plant/re-circulation system to the concerned Regional Office of the Board by the 5th of the following month.
24. The industry shall provide electromagnetic flow meters at the source of water supply, at inlet/outlet of effluent treatment plant within one month and shall maintain the record of the daily reading and submit the same to the concerned Regional Office by the 5th of the following month.
25. The Board reserves the right to revoke this consent at any time in case the industry is found violating any of the conditions of this consent and/or the provisions of Water (Prevention & Control of Pollution) Act, 1974 as amended from time to time.
26. The issuance of this consent does not convey any property right in either real or personal property, or any exclusive privileges, nor does it authorize any injury to private property or any invasion of personal rights, nor any infringement of Central, State or Local Laws or Regulations.
27. The consent does not authorize or approve the construction of any physical structures or facilities for undertaking of any work in any natural watercourse.
28. Nothing in this consent shall be deemed to neither preclude the institution of any legal action nor relieve the applicant from any responsibilities, liabilities or penalties to which the applicant is or may be subjected under this or any other Act.
29. The industry shall make necessary and adequate arrangements to hold back the effluent in case of failure of septic tank.
30. The diversion or bye pass of any discharge from facilities utilized by the applicant to maintain compliance with the terms and conditions of this consent is prohibited except.
 - (i) Where unavoidable to prevent loss of life or some property damage or
 - (ii) Where excessive storm drainage or run off would damage facilities necessary for compliance with terms and conditions of this consent. The applicant shall immediately notify the consent issuing authority in writing of each such diversion or bye-pass.
31. The industry shall ensure that no water pollution problem is created in the area due to discharge of effluents from its industrial premises.
32. The industry shall comply with the code of practice as notified by the Government/ Board for the type of industries where the siting guidelines/ code of practice have been notified.
33. Solids, sludge, filter backwash or other pollutant removed from or resulting from treatment or control of waste waters shall be disposed off in such a manner to prevent any pollutants from such materials from entering into natural water.
34. The industry shall re-circulate the entire cooling water and shall also re-circulate/reuse to the maximum extent the treated effluent in processes
35. The industry shall make necessary and adequate arrangements to hold back the effluent in case of failure of re-circulation system/ effluent treatment plant.
36. The industry shall make proper disposal of the effluent so as to ensure that no stagnation occurs inside and outside the industrial premises during rainy season and no demand period.
37. Where excessive storm water drainage or run off, would damage facilities necessary for compliance with terms and conditions of this consent, the applicant shall immediately notify the consent issuing authority in writing of each such diversion or bye-pass.
38. The industry shall submit a detailed plan showing therein the distribution system for conveying waste-water for application on land for irrigation along with the crop pattern for the year.
39. The industry shall ensure that the effluent discharged by it is toxicity free.
40. The industry shall not irrigate the vegetable crops with the treated effluents which are used/ consumed as raw.
41. Drains causing oil & grease contamination shall will be segregated. Oil & grease trap shall be provided to recover oil & grease from the effluent.

42. The industry shall establish sufficient number of piezometer wells in consultation with the concerned Regional Office, of the Board to monitor the impact on the Ground Water Quantity due to the industrial operations, and the monitoring shall be submitted to the Environmental Engineer of the concerned Regional Office by the 5th of every month.
43. The industry shall ensure that its production capacity & quantity of trade effluent do not exceed the quantity mentioned in the consent and shall not carry out any expansion without the prior permission/NOC of the Board.



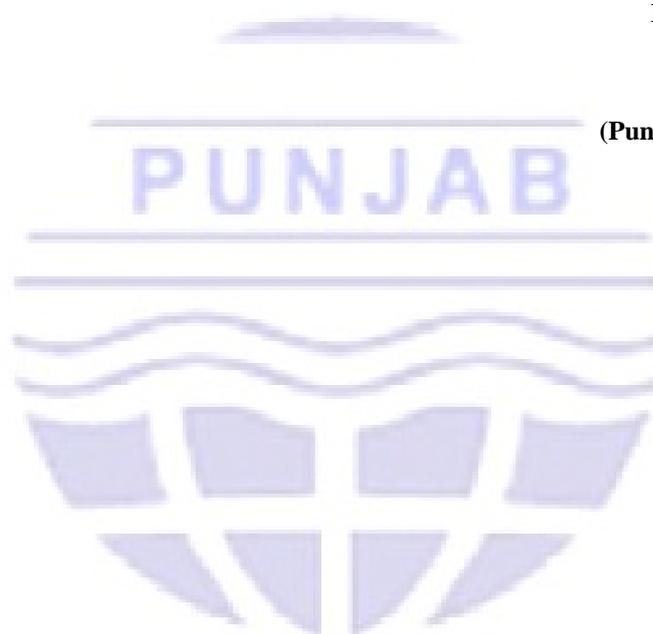
23/07/2020

(Shiv Kumar)
Environmental Engineer

For & on behalf

of

(Punjab Pollution Control Board)





PUNJAB POLLUTION CONTROL BOARD
ZONAL OFFICE, 164, FOCAL POINT, MEHTA ROAD, AMRITSAR.

Website:- www.ppcb.gov.in

Office Dispatch No :	Registered/Speed Post	Date:
Industry Registration ID: H16ASR3983238		Application No : 12978105

To,
Ashok Uppal
Uppal Neuro Hospital
Amritsar,Amritsar-143001

Subject: Grant Varied 'Consent to Operate' u/s 21 of Air (Prevention & Control of Pollution) Act, 1981 for discharge of emissions arising out of premises.

With reference to your application for obtaining Varied 'Consent to Operate' u/s 21 of Air (Prevention & Control of Pollution) Act, 1981, you are hereby, authorized to operate an industrial unit for discharge of the emission(s) arising out of your premises subject to the Terms and Conditions as mentioned in this Certificate.

1. Particulars of Consent to Operate under Air Act, 1981 granted to the industry

Consent to Operate Certificate No.	CTOA/Varied/ASR/2020/12978105
Date of issue :	23/07/2020
Date of expiry :	30/06/2025
Certificate Type :	Varied
Previous CTO No. & Validity :	CTOA/Fresh/ASR/2017/5614804 From:16/06/2017 To:30/06/2021

2. Particulars of the Industry

Name & Designation of the Applicant	Ashok Uppal, (Proprieter)
Address of Industrial premises	Uppal Neuro Hospital, 4-rani Ka Bagh, Amritsar li,Amritsar-143001
Capital Investment of the Industry	125.0 lakhs
Category of Industry	Hospital
Type of Industry	Private
Scale of the Industry	Small
Office District	Amritsar
Consent Fee Details	
Raw Materials (Name with Quantity per day)	Hospital @ 125 Beds @125Metric Tonnes/Day
Products (Name with Quantity per day)	Hospital @ 125 Beds @125Metric Tonnes/Day
By-products, if any, (Name with Quantity per day)	AS PER DETAIL SUBMITTED
Details of the machinery and process	AS PER DETAIL SUBMITTED

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Uppal Neuro Hospital,4-rani Ka Bagh,Amritsar li,Amritsar,143001

Quantity of fuel required (in TPD) and capacity of boilers/ Furnace/Thermo heater etc.	AS PER DETAIL SUBMITTED
Type of Air Pollution Control Devices to be installed	AS PER DETAIL SUBMITTED
Stack height provided with each boiler/thermo heater/Furnace etc.	AS PER DETAIL SUBMITTED
Sources of emissions and type of pollutants	AS PER DETAIL SUBMITTED
Standards to be achieved under Air(Prevention & Control of Pollution) Act, 1981	AS PRESCRIBED BY THE BOARD



23/07/2020

(Shiv Kumar)
Environmental Engineer

For & on behalf

of

(Punjab Pollution Control Board)

Endst. No.:

Dated:

A copy of the above is forwarded to the following for information and necessary action please:
THE EE, RO, ASR.



23/07/2020

(Shiv Kumar)
Environmental Engineer

For & on behalf

of

(Punjab Pollution Control Board)

TERMS AND CONDITIONS

A. GENERAL CONDITIONS

1. This consent is not valid for getting power load from the Punjab State Power Corporation Ltd. or for getting loan from the financial institutions.
2. The industry shall apply for renewal /extension of consent at least two months before expiry of the consent.
3. The industry shall not violate any of the norms prescribed under the Air (Prevention & Control of Pollution) Act, 1981, failing which, the consent shall be cancelled / revoked.
4. The achievement of adequacy and efficiency of the air pollution control devices installed shall be the entire responsibility of the industry
5. The authorized fuel being used shall not be changed without the prior written permission of the Board.
6. The industry shall not discharge any fugitive emissions. All gases shall be emitted through a stack of suitable height, as per the norms fixed by the Board from time to time.
7. The industry shall provide port-holes, platforms and/or other necessary facilities as may be required for collecting samples of emissions from any chimney, flue or duct or any other outlets.

Specifications of the port-holes shall be as under:-

- i) The sampling ports shall be provided atleast 8 times chimney diameter downstream and 2 times upstream from the flow disturbance. For a rectangular cross section the equivalent diameter (D_e) shall be calculated from the following equation to determine upstream, downstream distance:-
$$D_e = 2 LW / (L+W)$$

Where L= length in mts. W= Width in mts.
 - ii) The sampling port shall be 7 to 10 cm in diameter
8. The industry shall put display Board indicating environmental data in the prescribed format at the main entrance gate.
 9. The industry shall discharge all gases through a stack of minimum height as specified in the following standards laid down by the Board.

(i) Stack height for boiler plants

S.NO.	Boiler with Steam Generating Capacity	Stack heights
1.	Less than 2 ton/hr.	9 meters or 2.5 times the height of neighboring building which ever is more
2.	More than 2 ton/hr. to 5 ton/hr.	12 meters
3.	More than 5 ton/hr. to 10 ton/hr	15 meters
4.	More than 10 ton/hr. to 15 ton/hr	18 meters
5.	More than 15 ton/hr. to 20 ton/hr	21 meters
6.	More than 20 ton/hr. to 25 ton/hr.	24 meters
7.	More than 25 ton/hr. to 30 ton/hr.	27 meters
8.	More than 30 ton/hr.	30 meters or using the formula $H = 14 Q_g^{0.3}$ $H = 74 (Q_p)^{0.24}$ Where Q_g = Quantity of SO ₂ in Kg/hr. Q_p = Quantity of particulate matter in Ton/day.

Note : Minimum Stack height in all cases shall be 9.0 mtr. or as calculated from relevant formula whichever is more.

(ii) For industrial furnaces and kilns, the criteria for selection of stack height would be based on fuel used for the corresponding steam generation.

(iii) Stack height for diesel generating sets:

Capacity of diesel generating set	Height of the Stack	
0-50 KVA	Height of the building	+ 1.5 mt
50-100 KVA	-do-	+ 2.0 mt.
100-150 KVA	-do-	+ 2.5 mt.
150-200 KVA	-do-	+ 3.0 mt.
200-250 KVA	-do-	+ 3.5 mt.
250-300 KVA	-do-	+ 3.5 mt.

For higher KVA rating stack height H (in meter) shall be worked out according to the formula:

$$H = h + 0.2 (KVA)^{0.5}$$

where h = height of the building in meters where the generator set is installed.

10. The pollution control devices shall be interlocked with the manufacturing process of the industry to ensure its regular operation.
11. The existing pollution control equipment shall be altered or replaced in accordance with the directions of the Board, and no pollution control equipment or chimney shall be altered or as the case may be erected or re-erected except with the prior approval of the Board.
12. The industry will provide canopy and adequate stack with the D.G sets so as to comply with the provision of notification No GSR-371 E dated 17-5-2002(amended from time to time) issued by MOEF under Environment (Protection) Act, 1986.
13. The Govt. of Punjab, Department of Science, Technology & Environment vide its notification no.4/46/92-3ST/2839 dt. 29/12/1993 has put prohibition on the use of rice husk as fuel after 1.4.1995 except the following:-
In the form of briquettes and use of rice husk in fluidized bed combustion. So the industry shall make the necessary arrangement to comply with the above notification.
14. The industry shall submit balance sheet of every financial year to the concerned Regional Office by 30th June of every year
15. That the industry shall submit a yearly certificate to the effect that no addition / up-gradation/ modification/ modernization has been carried out during the previous year otherwise the industry shall apply for the varied consent.
16.
 - a) The industry shall ensure that at any time the emission do not exceed the prescribed emissions standards laid down by the Board from time to time for such type of industry /emissions.
 - b) The industry shall ensure that the emissions from each stack shall conform to the following emission standards laid down by the Board in respect of the Industrial Boilers.

Steam Generating capacity A.	Required particulate matter B.	
<i>Area upto 5 Km from Other than 'A' class Other than the periphery of I and Class-II town</i>		
<i>Less than 2 ton/hr.</i>	800 mg/NM3	1200 mg/NM3
<i>2 ton to 10 ton/hr.</i>	500 mg/NM3	1000 mg/NM3
<i>Above 10 ton to 15 ton/hr</i>	350 mg/NM3	500 mg/NM3
<i>Above 15 ton/hr</i>	150 mg/NM3	150 mg/NM3

All emissions normalized to 12% carbon dioxide.

17. The industry shall ensure that the Hazardous Wastes generated from the premises are handled as per the provisions of the Hazardous Waste (Management, Handling and Transboundary Movement) Rules, 2008, without any adverse effect on the environment, in any manner.
18. The air pollution control equipments shall be kept at all time in good running condition and;

- (i) All failures of control equipments.
 - (ii) The emissions of any air pollutant into the atmosphere in excess of the standards lay down by the Board occurring or being apprehended to occur due to accident or other unforeseen act or event. 'Shall be intimated through fax to the concerned Regional Office as well as to the Director of Factories, Punjab, Chandigarh as required under rule 10 of the Punjab State Board for the Prevention and Control of Air Pollution Rules, 1983'.
19. The industry shall plant minimum of three suitable varieties of trees at the density of not less than 1000 trees per hectare all along the boundary of the industrial premises.
 20. The industry shall submit a site emergency plan approved by the Chief Inspector of Factories, Punjab as applicable.
 21. The industry shall comply with the conditions imposed by the SEIAA/MOEF in the Environmental Clearance granted to it as required under EIA notification dated 14/9/06, if applicable.
 22. The industry shall make necessary arrangements for the monitoring of stack emissions and shall get its emissions analyzed from lab approved / authorized by the Board:-
 - (i) Once in Year for Small Scale Industries.
 - (ii) Twice/thrice/four time in a Year for Large/Medium Scale Industries.
 23. The industry shall maintain the following record to the satisfaction of the Board :-
 - (i) Log books for running of air pollution control devices or pumps/motors used for it.
 - (ii) Register showing the result of various tests conducted by the industry for monitoring of stack emissions and ambient air.
 - (iii) Register showing the stock of absorbents and other chemicals to be used for scrubbers.
 24. The industry will install the separate energy meter for running pollution control devices and shall maintain record with respect to operation of air pollution control device so as to satisfy the Board regarding the regular operation of air pollution control device and monthly reading / record may be sent to the Board by the fifth of the following month.
 25. The industry shall provide online monitoring system as applicable, for in stack emission and shall maintain the record of the same for inspection of the Board Officers.
 26. The Board reserves the right to revoke the consent granted to the industry at any time, in case the industry is found violating the provisions of Air (Prevention & Control of Pollution) Act, 1981 as amended from time to time.
 27. The industry shall comply with any other conditions laid down or directions issued in due course by the Board under the provisions of the Air (Prevention & Control of Pollution) Act, 1981.
 28. Nothing in this consent shall be deemed to neither preclude the institution of any legal action nor relieve the applicant from any responsibilities, liabilities or penalties to which the applicant is or may be subjected to under this or any other Act.
 29. Any amendments/revisions made by the Board/CPCB/MOEF in the emission/stack height standards shall be applicable to the industry from the date of such amendments/revisions.
 30. The industry shall dispose off its solid waste generated by the burning of fuel in an Environmentally Sound Manner within the premises/outside as approved by the Board, to avoid public nuisance and air pollution problem in the area.
 31. The industry shall ensure that no air pollution problem or public nuisance is created in the area due to the discharge of emissions from the industry.
 32. The industry shall provide adequate arrangement for fighting the accidental leakage/discharge of any air pollutant/gas/ liquids from the vessels, mechanical equipment's etc, which are likely to cause environmental pollution.
 33. The industry shall not change or alter the manufacturing process(es) and fuel so as to change the quality/quantity of emissions generated without the prior permission of the Board.
 34. The industry shall earmark a land within their premises for disposal of boiler ash in an environmentally sound manner, and / or the industry shall make necessary arrangements for proper disposal of fuel ash in a scientific manner and shall maintain proper record for the same, if applicable.
 35. The industry shall obtain and submit Insurance cover under the Public Liability Insurance Act, 1991.
 36. The industry shall provide proper and adequate air pollution control arrangements for control emission from its fuel handling area, if applicable.

37. The industry shall comply with the code of practice as notified by the Government/Board for the type of industries where the siting guidelines / Code of Practice have been notified.
38. The industry shall not cause any nuisance/traffic hazard in vicinity of the area
39. The industry shall ensure that the noise & air emission from D.G. sets do not exceed the standards prescribed for D.G. sets by the Ministry of Environment & Forests, New Delhi.
40. The industry shall ensure that there will not be significant visible dust emissions beyond the property line
41. The industry shall provide adequate and appropriate air pollution control devices to contain emissions from handling, transportation and processing of raw material & product of the industry.
42. The Industry shall ensure that its production capacity does not exceed the capacity mentioned in the consent and shall not carry out any expansion without the prior permission / NOC of the Board.



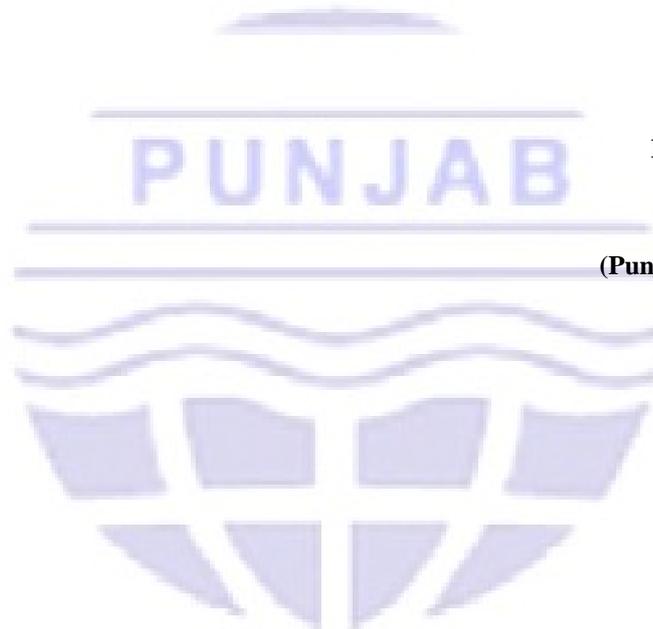
23/07/2020

(Shiv Kumar)
Environmental Engineer

For & on behalf

of

(Punjab Pollution Control Board)





PUNJAB POLLUTION CONTROL BOARD
ZONAL OFFICE, 164, FOCAL POINT, MEHTA ROAD, AMRITSAR
 www.ppcb.gov.in

Office Dispatch No : _____ Registered/Speed Post _____ Date: _____
 Registration ID: H16ASR3983238 _____ Application No : 12978020

To,
DYALSAROOP,
UPPAL NEURO HOSPITAL
Amritsar ii, Amritsar, 143001

Subject: **Authorization under Bio-Medical Waste Management Rules, 2016 framed under Environment (Protection) Act, 1986 for [Generation, Collection, Storage] of Bio-Medical Waste.**

With reference to your application for obtaining Authorization under Bio-Medical Waste Management Rules, 2016 framed under Environment (Protection) Act, 1986, you are, hereby authorized for handling/ managing Bio-Medical Waste under Bio-Medical Waste Management Rules, 2016 as per the details specified in this authorization.

1. Particulars of Applicant (Occupier/Operator)

Name of Applicant (Occupier/Operator)	DYALSAROOP
Designation :	MANAGAR
Correspondent Address :	DYALSAROOP, UPPAL NEURO HOSPITAL Amritsar ii, Amritsar, 143001
Mobile Number :	8872906555
Landline Number :	0183-2226696
Fax Number :	-
Email-ID :	neuroamritsar@yahoo.com

2. Particulars of HCF/CBWTF

Name of HCF/CBWTF	Uppal neuro hospital
Address of HCF/CBWTF premises	Uppal neuro hospital 4-rani ka bagh
Mobile Number :	8872906555
Facility Type and Subtype	HCF (Private Hospital(Bedded))
Ownership	Individual
number of Beds (for HCF)	125.0
No. of HCF covered(for CBWTFs)	-
No. of Beds covered	-
No of Beds	125
Area and Distance Covered by CBWTF	-
Mode of Transportation of BMW	Common Facility Vehicle

3. Particulars of Authorization

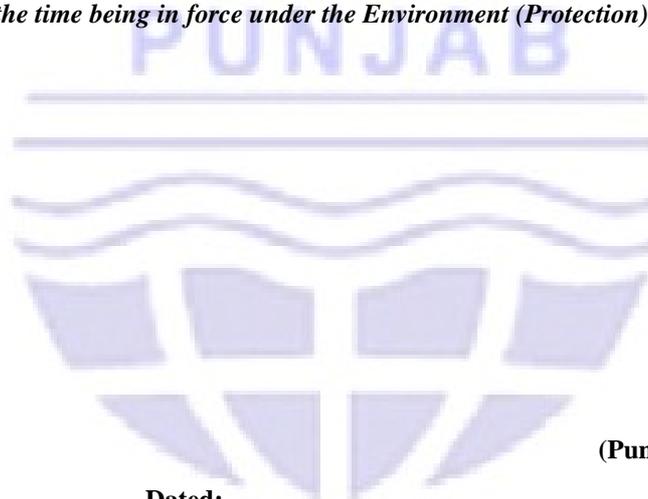
Authorization No.	BMW/Fresh/ASR/2020/12978020
Date of Issue	05/08/2020
Date of Expiry	30/06/2025
Authorization Type	Fresh
Activities authorized	[Generation, Collection, Storage]

4. Particulars of Bio-Medical Waste

Waste category	Quantity permitted for handling	Unit
Yellow	47.6	kg/day
Red	35.29	kg/day
White(Translucent)	1.24	kg/day
Blue	4.51	kg/day

5. The HCE/CBWF shall discharge its effluent after treatment as prescribed under the Rules.

6. The Authorization is subject to the Terms and Conditions as specified in this Authorization and also to such conditions as may be specified in the rules for the time being in force under the Environment (Protection) Act, 1986.



12/08/2020

(Shiv Kumar)
Environmental Engineer

For & on behalf
of

(Punjab Pollution Control Board)

Endst. No.:

Dated:

A copy of the above is forwarded to the following for information and necessary action please:

THE EE, RO, ASR.

12/08/2020

(Shiv Kumar)
Environmental Engineer

For & on behalf
of

(Punjab Pollution Control Board)

TERMS AND CONDITIONS

A. GENERAL CONDITIONS

1. This authorization is issued for _____ number of beds. For any increase in number of beds, the applicant shall obtain prior permission of the Board.
2. The Medical Institution / Health Care Facility shall apply for the renewal of authorization at least 2 months before the expiry of this authorization.
3. The Medical Institution / Health Care Facility shall comply with the provisions of the Environment (Protection) Act, 1986 as amended from time to time and the rules made there under.
4. The authorization and all relevant records shall be produced for inspection on the request of an officer of prescribed authority.
5. The HCF shall take all necessary steps to ensure that bio-medical waste is handled without any adverse effect to human health and the environment and in accordance with these rules;
6. The HCF shall make a provision within the premises for a safe, ventilated and secured location for storage of segregated biomedical waste in colored bags or containers in the manner as specified in Schedule I, to ensure that there shall be no secondary handling, pilferage of recyclables or inadvertent scattering or spillage by animals and the bio-medical waste from such place or premises shall be directly transported in the manner as prescribed in these rules to the common bio-medical waste treatment facility or for the appropriate treatment and disposal, as the case may be, in the manner as prescribed in Schedule I.
7. The HCF shall pre-treat the laboratory waste, microbiological waste, blood samples and blood bags through autoclaving/microwaving and then sent to the common bio-medical waste treatment facility for final disposal. The HCF shall maintain a logbook of operation of Autoclave.
8. The HCF shall phase out use of chlorinated plastic bags, gloves and blood bags as mentioned in the Rules;
9. In case the HCF purchase color coded bag from open market, it shall get the testing certificate from CIPET Lab, Amritsar regarding absence of chlorinated material in it. However, if it is procured from CBWTF operator, the HCF shall obtain the test certificate from CBWTF operator.
10. The HCF shall dispose of general waste other than bio-medical waste in green bin.
11. The HCF shall not dispose bio-medical waste with municipal solid waste;
12. The HCF shall provide training to all its health care workers and others, involved in handling of bio medical waste at the time of induction and thereafter at least once every year and the details of training programmes conducted, number of personnel trained and number of personnel not undergone any training shall be provided in the Annual Report;
13. The HCF shall immunise all its health care workers and others, involved in handling of bio-medical waste for protection against diseases including Hepatitis B and Tetanus that are likely to be transmitted by handling of bio-medical waste, in the manner as prescribed in the National Immunisation Policy or the guidelines of the Ministry of Health and Family Welfare issued from time to time;
14. The HCF shall ensure occupational safety of all its health care workers and others involved in handling of biomedical waste by providing appropriate and adequate personal protective equipments;
15. The HCF shall conduct health check up at the time of induction and at least once in a year for all its health care workers and others involved in handling of bio- medical waste and maintain the records for the same;
16. The HCF shall ensure segregation of liquid chemical waste at source and ensure pre-treatment or neutralisation prior to mixing with other effluent generated from health care facilities;
17. The HCF shall ensure treatment and disposal of liquid waste in accordance with the Water (Prevention and Control of Pollution) Act, 1974 (6 of 1974).
18. The HCF shall obtain consents under the provisions of Water (Prevention & Control of Pollution) Act, 1974 and Air (Prevention & Control of Pollution) Act, 1981.
19. The HCF shall maintain and update on day to day basis the bio-medical waste management register and display the monthly record on its website according to the bio-medical waste generated in terms of category and colour coding as specified in Schedule I. All the record shall be subject to inspection and verification by the Prescribed Authority /authorized person at any time. The record shall be maintained for a period of 5 years.
20. The HCF shall report major accidents including accidents caused by fire hazards, blasts during handling of biomedical waste and the remedial action taken and the records relevant thereto, (including nil report) in Form I to the prescribed authority within 24 hours and also along with the annual report;.

21. The HCF shall submit Annual Report in Form-IV as per Rule 13 by 30th June every year to the Board. The HCF shall make available the annual report on its web-site and all the health care facilities shall make own website within two years w.e.f 28.03.2016.
22. The HCF shall ensure that Untreated human anatomical waste, animal anatomical waste, soiled waste and, biotechnology waste shall not be stored beyond a period of forty eight hours: Provided that in case for any reason it becomes necessary to store such waste beyond such a period, the occupier shall take appropriate measures to ensure that the waste does not adversely affect human health and the environment and inform the prescribed authority along with the reasons for doing so.
23. The HCF shall inform the prescribed authority immediately in case the operator of a facility does not collect the bio-medical waste within the intended time or as per the agreed time;
24. The HCF shall establish a system to review and monitor the activities related to bio-medical waste management, either through an existing committee or by forming a new committee and the Committee shall meet once in every six months and the record of the minutes of the meetings of this committee shall be submitted along with the annual report to the prescribed authority and the healthcare establishments having less than thirty beds shall designate a qualified person to review and monitor the activities relating to bio-medical waste management within that establishment and submit the annual report;
25. The occupier of the HCF shall maintain proper housekeeping in the premises where the bio-medical wastes are handled.
26. The HCF is required to set up system/equipments for requisite segregation, collection, storage and pre-treatment of bio-medical waste in conformance to the provisions of Bio-Medical Waste (Management) Rules, 2016.
27. The Containers/ Bags used for segregation and disposal of waste shall be labeled in accordance with schedule- IV (Part-A).
28. The HCF shall segregate the bio-medical waste collected in the container bags at the point of generation in accordance with Schedule-I prior to storage, transportation, treatment and disposal.
29. The HCF shall hand-over segregated waste as per Schedule-I to common bio-medical waste treatment facility for treatment, processing and final disposal.
30. The HCF shall paste Bar-Code Stickers on respective color coded bags, puncture proof containers and cardboard box before disposal to CBWTF.
31. The HCF shall ensure treatment and disposal of waste in accordance with Schedule I and in compliance with the standards provided in Schedule-II.
32. The HCF shall phase-out use of mercury based instruments. The handling and disposal of all mercury waste and lead waste shall be in accordance with the respective rules and regulations.
33. The occupier of the HCF will be liable for action under section 5 and section 15 of the Environment (Protection) Act, 1986, in case of any violation.
34. The HCF shall comply with the standards and specifications as per Bio-Medical Waste Management Rules, 2016.
35. The HCF shall give its bio-medical waste only to the authorized area common bio-medical waste treatment facility who has valid authorization of the prescribed authority.
36. The HCF will have to make its own arrangement afresh in case the authorization of the common facility to whom it has entered a MOU is revoked, by the Prescribed Authority.
37. The occupier of the HCF shall not change or alter either the quality or the quantity or the rate of discharge of liquid/emission or temperature or the route of discharge without prior written permission from the Board.
38. The occupier of the HCF, its heirs, legal representatives etc., shall have no claim whatsoever to the continuation or renewal of this authorization after the expiry of the authorization.
39. The authorized person shall intimate Board prior to closing down the facility.
40. The HCF shall not rent, sell, transfer or otherwise transport the bio-medical waste without prior permission from the Board.
41. Any unauthorized change in personnel/equipment or working conditions as mentioned in the application by the person authorized shall constitute a breach of this authorization.
42. The Board reserves the right to review, impose additional condition or conditions, revoke, change or alter the terms and conditions of the authorization without any prior notice.



12/08/2020

(Shiv Kumar)
Environmental Engineer

For & on behalf
of

(Punjab Pollution Control Board)



56089

Amritsar Envirocare Systems (P) Ltd
 Village Iban Kalan Chahal Road,
 Amritsar

AGREEMENT

The agreement entered into the 1st day of May of the year 2020 Exp. Date 31/03/2025

BETWEEN

M/s. Amritsar Envirocare Systems (P) Ltd., (Formerly Amritsar Healthcare Systems) Village Iban Kalan, Chahal Road, Amritsar (hereinafter called As AECS (P) Ltd. represented by Dr. Inderpal Singh Pasricha, Contact No. 0183-5065311. Email id- aecs2004@rediffmail.com

AND

Name of Hospital & Address- UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.

(hereinafter referred to as the GENERATOR) represented by Dr. Dyal Sood
 (Manager)

Tel./Mob No. 9814465555 E-Mail neuroamritsar@yahoo.com

Whereas AECS (P) Ltd. has setup a common facility at Chahal Road, Village Iban Kallan, Amritsar and has setup a unit of this facility for collection, transportation, treatment and disposal of Bio-Medical Wastes (hereinafter called as BMW) generated by Health care Establishments (HCEs - Hospitals, Nursing Homes, Blood Banks, OPD Clinics, Pathological Laboratories, Diagnostic Centres, Medicine Manufacture centre, Medical Stores, Beauty Saloons etc.)

Whereas AECS (P) Ltd. offers to provide service to the GENERATOR on a user pay principle for collection, Transportation, Treatment and Disposal of BMW at the Rate of Rs. 7.49 Per day per bed (including transportation charges) per bed per day with a security advance equivalent to the payment for 60 days bag charges extra.

Whereas AECS (P) Ltd. undertakes the liability of collection, transportation, treatment and disposal of BMW, the GENERATOR shall undertake to adhere to this contract of service by AECS (P) Ltd. for a minimum period of five years from the agreement date.

Where the GENERATOR is a Hospital and agrees to avail the services being provided by AECS (P) Ltd. with the terms & conditions as listed on succeeding paras:-

RESPONSIBILITIES OF AECSPL

1. AECS (P) Ltd. shall meet all the rules and regulations stipulate by the PPCB and the GENERATOR shall not be liable for any improper handling and management.
2. AECS (P) Ltd. alone is liable for any violation of the Environment (Protection) Act 1986 and the relevant rules made there under, collection of BMW from the Generator unit as per the agreement terms & conditions.
3. AECS (P) Ltd. shall collect BMW from the Generator premises.
4. In case AECS (P) Ltd. vehicle fails to collect the BMW within 24 hours of the designated time (24 hours) due to any reason. The GENERATOR shall inform the AECS (P) Ltd. office at Amritsar, who will ensure to strictly collect the BMW within the next 24 hours. AECS (P) Ltd. shall be solely responsible for the consequences, if any, in this regard. AECS (P) Ltd. office shall maintain a register for such complaints and allot the complaint number to the GENERATOR.
5. Other complaints, if any, shall also be made to AECS (P) Ltd., Amritsar office by the GENERATOR, AECS (P) Ltd. promises to attend to all such complaints, within the shortest possible time.

For Uppal Neuro Hospital

Dyal Sood

Auth. Signature

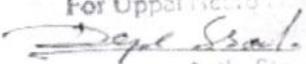
Amritsar Envirocare Systems (P) Ltd.

[Signature]
 Director

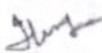
6. AECS (P) Ltd. shall collect the segregated bio-medical waste from the identified common waste collection site in the premises of GENERATOR.
7. AECS (P) Ltd. shall provide assistance to finalize the pick-up location to the GENERATOR.
8. AECS (P) Ltd. shall transport the segregated waste in closed container vehicle to its treatment plant.
9. If the GENERATOR desires, the initial training about segregation of BMW in colour coded plastic bags and method of collection of BMW, shall be provided by AECS (P) Ltd. at no extra cost.
10. AECS (P) Ltd. shall schedule the timings the collecting the waste in consultation with the GENERATOR.
11. AECS (P) Ltd. will not be liable for Environment (Protection) Act 1986 or any similar regulations/norms set up by PPCB, Government Bodies, in the event the GENERATOR violates any of the terms and conditions.
12. AECS (P) Ltd. shall be responsible for appropriate treatment and shredding of disinfected waste at the centralized facility as per Schedule-1 of the BMW (M&II) Rules 2016.
13. AECS (P) Ltd. shall also undertake testing of treated waste to ensure safety to the environment.
14. AECS (P) Ltd. shall be responsible for the disposal of treatment waste into secured landfills or in recycling plants as applicable.

RESPONSIBILITIES OF THE GENERATOR

1. The GENERATOR shall segregate the waste at the point of generation in accordance with the BMW (M&H) Rules 2016 and in compliance with the standards prescribed there under.
2. The GENERATOR shall collect the segregate BMW in plastic bags as stipulated by Pollution Control Board (PCB) Norms.
3. The bags shall be procured by the GENERATOR at its own cost either through AECS (P) Ltd. or through PPCB approved vendor.
4. The bags used for collecting solid materials, placenta, amputated body parts etc., (required to be incinerated) shall be non-chlorinated plastic bags.
5. All the bags shall be sealed tightly by the GENERATOR and AECS (P) Ltd. will collect the sealed bags only at a secured designated point in the premises of the GENERATOR.
6. The GENERATOR shall disinfect the sharps and mutilate them and hand them over in Puncture Proof Containers to AECS (P) Ltd.
7. The GENERATOR shall take all steps to ensure that the waste is handled without adverse effects to human health and environment.
8. The GENERATOR shall furnish annual report regarding generation, collection, storage, transportation and disposal of Bio-Medical wastes in the prescribed format to Punjab Pollution Control Board.
9. The GENERATOR shall be solely responsible for the number of beds being to AECS (P) Ltd. which must be same for which the authorization is proposed to be got from Punjab Pollution Control Board. The GENERATOR shall inform AECS (P) Ltd. and about any such change in the number of beds. The total no. of beds are (125) at present.

For Uppal Neuro Hospital

 Auth. Signatory

Amritsar Envirocare Systems (P) Ltd.


 Director

TERMS OF MEMBERSHIP & PAYMENT

1. The GENERATOR shall pay a Membership Registration Fee of Rs.2500/- for five year & renewal of agreement fee is Rs.500/- for one year, which are non-refundable.
2. The security advance of 60 days is refundable/adjustable upon completion of this agreement against BMW collections.
3. The GENERATOR shall pay the monthly charges of cost of disposal by 10th of every month without fail. Payments that are not made by the 10th of every month shall be charged a late fees @ Rs.50/- a day upto 22nd of the month.
4. AECS (P) Ltd. shall stop collecting BMW from GENERATOR if payments are not received by 22nd of the month.
5. Renewal of service shall be subject to a charge of Rs.500/- in addition to the amount due including the fine.
6. All payments shall be made in favour of AECS (P) Ltd. in the form of DD or A/c. payee cheques. All bounced cheques shall be charged at Rs.100/- extra in addition to the actual bank charges.
7. The GENERATOR is liable to forfeit his advance deposit, in the event of him violating the terms and conditions of this agreement.
8. **The Service Charges increased by 7% every year without any prior intimation.**
9. AECS (P) Ltd. has right to change the service charges time to time according to diesel prices and after Punjab Pollution Control Board, Patiala & DHS orders for revision of rates.
10. These rates are subject to mutually reviewable during this agreement period.
11. All disputes are subject to Amritsar Jurisdiction only.
12. **New HCF's must obtain authorization under Bio Medical Waste Rules, 2016 from Punjab Pollution Control Board within 3 months from the date of signing agreement. If fails this agreement stands cancelled and we stop our Bio Medical Waste collection services immediately by giving notice and intimation to Punjab Pollution Control Board.**

Witnesses: 1. NEERAJ KUMAR



For Upnal Neuro Hospital

Deep Singh
Auth. Signatory

2. Rajbir Singh

Amritsar Envirocare Systems (P) Ltd.

Deep Singh
Director

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	: DR. ASHOK LEPPAL
	(i) Name of the authorised person (occupier or operator of facility)	: Dyal Sareot
	(ii) Name of HCF or CBMWTF	UPPAL NEURO HOSPITAL
	(iii) Address for Correspondence	: 4-RANI KA BAGH, Amritsar
	(iv) Address of Facility	
	(v) Tel. No, Fax. No	: 0183-2226696
	(vi) E-mail ID	: neuro.computer@yaho.com
	(vii) URL of Website	http://leppal Neuro Hospital.com
	(viii) GPS coordinates of HCF or CBMWTF	CBMWTF
	(ix) Ownership of HCF or CBMWTF	: (State Government or Private or Semi Govt. or any other) IMA
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	: Authorisation No.: 7082220.....valid up to 30/06/2021
(xi). Status of Consents under Water Act and Air Act	: Valid up to: 30/06/2021	
2.	Type of Health Care Facility	:
	(i) Bedded Hospital	: No. of Beds: 125
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	: N/A
	(iii) License number and its date of expiry	: N/A
3.	Details of CBMWTF	:

	(i) Number healthcare facilities covered by CBMWTF :	Amrtesor Environmental Systems Ltd.			
	(ii) Number healthcare facilities 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) :	Yellow Category : 256.26 Red Category : 191.37 White: 82.43 Blue Category : 87.92 General Solid waste: _____			
Details of the Storage, treatment, transportation, processing and Disposal Facility					
5.	(i) Details of the on-site storage facility :	Size :			
		Capacity :			
		Provision of on-site storage : (cold storage or any other provision)			
	(ii) disposal facilities	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:			

	(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 during the treatment of wastes in Kg per annum		<table border="1"> <thead> <tr> <th></th> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td>Incineration Ash</td> <td></td> <td></td> </tr> <tr> <td>ETP Sludge</td> <td></td> <td></td> </tr> </tbody> </table>		Quantity generated	Where disposed	Incineration Ash			ETP Sludge		
	Quantity generated	Where disposed										
Incineration Ash												
ETP Sludge												
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	Amrtesar Enviro Care Systems (P) 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.									
	Details trainings conducted on BMW		6.									
	(i) Number of trainings conducted on BMW Management.		101									
	(ii) number of personnel trained											
7.	(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?											
	(vi) any other information)											
	Details of the accident occurred during the year		Nil									
8.	(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?											
	Details of Continuous online emission monitoring systems installed											

Signature



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



ON JOB TRAINING VIVA SHEET

TOPIC	Needle stick injury and handling of Bmv
DEPARTMENT	H.I.C.
DATE / TIME	5/11/19 01:30 PM - 02:30 PM
PRESENTER NAME	Jasmanjit

NAME OF STAFF	EMP. CODE	DESIGNATION	MARKS OBTAINED	TOTAL MARKS	REMARKS
Mamta		H.F.	8	10	
Bhakti	3	H.I.C.	7	10	
Rajbir		H.F.	9	10	

Jasmanjit
SIGNATURE OF PRESENTER:-



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



VERBAL PERFORMANCE ASSESMENT CHECKLIST

Learner name	Mamta	Designation of learner:-	H.K
Assessor name	Jasmanpreet JCO	Designation of Assessor:-	JCO

5/12/19

Verbal questions	Satisfactory response	
	Yes	No
1. Define Biomedical Waste?	✓	
2. Explain Biomedical Waste Management?	✓	
3. Where is main storage area of BMW?	✓	
4. Categories for segregation of BMW?	✓	
5. When BMW bins empty?	✓	
6. Immediate management of needle stick injury?		✓
7. During transportation of BMW which precaution is used	✓	
8. Cap and mask discard in which colour bin?	✓	
9. Gloves discard in which colour bin?	✓	
10. Steps of hand washing?		✓

Feedback to Learner:- good

The Learner response was:-

Satisfactory

Not Satisfactory

Assessor Signature:- Jasmanpreet



UPPAL NEURO HOSPITAL
4-RANI KA BAGH, AMRITSAR.



VERBAL PERFORMANCE ASSESMENT CHECKLIST

Learner name	Bholi	Designation of learner:- H.K
Assessor name	Jasmanjit	Designation of Assessor:- ICS

5/12/19

Verbal questions	Satisfactory response	
	Yes	No
1. Define Biomedical Waste?	✓	
2. Explain Biomedical Waste Management?	✓	
3. Where is main storage area of BMW?	✓	
4. Categories for segregation of BMW?	✓	
5. When BMW bins empty?		✓
6. Immediate management of needle stick injury?	✓	
7. During transportation of BMW which precaution is used	✓	
8. Cap and mask discard in which colour bin?		✓
9. Gloves discard in which colour bin?	✓	
10. Steps of hand washing?		✓

Feedback to Learner:- *OK*

The Learner response was:-

Satisfactory

Not Satisfactory

Assessor Signature:- *Jasmanjit*



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



VERBAL PERFORMANCE ASSESMENT CHECKLIST

Learner name	Rajbeer Singh	Designation of learner:- H.R
Assessor name	Jasmanjit	Designation of Assessor:- ICW

5/14/19

Verbal questions	Satisfactory response	
	Yes	No
1. Define Biomedical Waste?	/	
2. Explain Biomedical Waste Management?	/	
3. Where is main storage area of BMW?	/	
4. Categories for segregation of BMW?	/	
5. When BMW bins empty?	/	
6. Immediate management of needle stick injury?		/
7. During transportation of BMW which precaution is used	/	
8. Cap and mask discard in which colour bin?	/	
9. Gloves discard in which colour bin?	/	
10. Steps of hand washing?	/	

Feedback to Learner:- Good.

The Learner response was:-

Satisfactory

Not Satisfactory

Assessor Signature:- Jasmanjit



UPPAL NEURO HOSPITAL,
4 RANI KA BAGH, AMRITSAR
PRE-EVALUATORY TEST

(STAFF NURSES ONLY)

DATE: - 4/12/19

NAME OF STAFF/ EMP. CODE :- <i>Campant & au 39</i>	TOTAL MARKS :- 10
DESIGNATION <i>NSG incharge</i>	MARKS OBTAINED: <i>(7)</i>

Q1. Define needle stick injury and its causes? (2)

→ needle stick injury wounds occur during
accidentally prick the skin.
Cause → unhandling procedure
→ Reusing of needles.
→ procedure done without PPE

Q2. Which form fill in case of needle stick injury occur? (1)

→ EPINET FORM *(1)*

Q3. Enlist name of problems and infection's occur after exposure to needle stick injury

? (1) Hepatitis - B, C, Diphtheria, HIV, Syphilis.

(1)

Q4. After exposure to needle stick injury, information given to which person? (1)

nursing supervisor / infection control
nurse. *(1)*

Q5. Full form of EVD ? (1)

EVD → Extra Ventricular drainage (1/2)

Q6. Define EVD ? (2)

EVD → Extra ventricular drainage when patient has suffering from Hydrocephalus. EVD done for reduce pressure of brain.

Q7. Nursing management of EVD handling ? (3)

- EVD hand to sterile method.
- Use proper PPE
- Hand washing before & after touching the drain.
- Proper dressing to sterile method
- EVD replace near head side
- Don't touch EVD without gloves.
- Daily EVD checked by doctors/nurse



UPPAL NEURO HOSPITAL,
4 RANI KA BAGH, AMRITSAR

POST EVALUATORY TEST

(STAFF NURSES ONLY)

DATE: - 4/12/19

NAME OF STAFF/ EMP. CODE :- Gurjinder Kaur 39	TOTAL MARKS :- 10
DESIGNATION Nsg. Incharge	MARKS OBTAINED: - 7/10

Q1. Define needle stick injury and its causes? (2)

Needle stick injuries would occur when accidentally puncture the skin.

Cause → Procedure done without sterile method

→ without PPE

→ when deal & HIV positive patient without any precaution.

Q2. Which form fill in case of needle stick injury occur? (1)

EPINET FORM → Exposure, Preventing Infection network.

Q3. Enlist name of problems and infection's occur after exposure to needle stick injury

? (1)

- HEPATITIS - B
- HepA - C
- HIV
- Syphilis
- Diphtheria
- Malaria

Q4. After exposure to needle stick injury, information given to which person? (1)

Inform to Nursing Supervisor / Infection Control nurse.

Q5. Full form of EVD? (1)

EVD \Rightarrow EXTRA VENTRICULAR DRAINAGE
EXTRACRANIAL

(1)

Q6. Define EVD? (2)

EVD \Rightarrow EVD procedure done when patient suffering from hydrocephalus. EVD done for reduce CSF pressure from brain

(2)

Q7. Nursing management of EVD handling? (2)

\rightarrow EVD handle δ sterile method

\rightarrow Hand washing before δ after touching the patient.

\rightarrow Checked level of EVD

\rightarrow checked pressure of CSF $1/2$

\rightarrow dressing done by OT staff δ aseptic technique

\rightarrow if any issue related to EVD inform to OT staff / neurosurgeon team

\rightarrow Close the EVD when patient mobilise from bed

\rightarrow EVD checked by Doctors daily from

\rightarrow Checked vital sign. \rightarrow GCS



UPPAL NEURO HOSPITAL,

4 RANI KA BAGH, AMRITSAR

PRE EVALUATORY TEST

(STAFF NURSES ONLY)

DATE: - 4/12/19

NAME OF STAFF/ EMP. CODE :- Gurpreet Kaur (11)	TOTAL MARKS :- 10
DESIGNATION Staff nurse	MARKS OBTAINED: (3) (10)

Q1. Define needle stick injury and its causes? (2)

Ans: The needle stick injury causes wounds, occurring during accidentally.

Causes:- Unhensibility, recap needle procedure done without PPE

Q2. Which form fill in case of needle stick injury occur? (1)

Ans: EANET form of needle stick injury

Q3. Enlist name of problems and infection's occur after exposure to needle stick injury ? (1)

Ans: Hep B, Hep C, HIV, Diphtheria, Malaria

Q4. After exposure to needle stick injury, information given to which person ?(1)

Ans: Infection nurse, Infection officer, Nursing Superior

Q5. Full form of EVD ? (1)

Ans EVD, extra vaccination drainage

Q6. Define EVD ? (2)

Ans EVD extra vaccination drainage with patient
has suffering follows

Q7. Nursing management of EVD handling ? (3)

- EVD hand & sterile
- proper dressing
- Hand washing before and after handling
- Do not touch EVD without EVD



UPPAL NEURO HOSPITAL,
4 BANLA BAGH AMRITSAR

POST EVALUATORY TEST

[STAFF NURSES ONLY]

DATE: - 4-12-19

NAME OF STAFF/EMP. CODE :- <i>Gurpreet Kaur</i>	TOTAL MARKS :- 10
DESIGNATION <i>staff nurse</i>	MARKS OBTAINED:- <i>10</i>

Q1. Define needle stick injury and its causes? (2)

Ans: Needle stick injury wound occurs when accidentally punctured by sharp

Causes: procedure during without stick method

- without PPE
- when deal & sharp position

Q2. Which form fill in case of needle stick injury occur? (1)

Ans: fill in case of needle stick injury
EPINET & exposure prevention information
net work.

Q3. Enlist name of problems and infection's occur after exposure to needle stick injury? (1)

- Ans:
- HIV
 - Hep B
 - Hep C
 - Diphtheria
 - Tetanus
 - Botulism
 - Syphilis
 - Gonorrhoea

Q4. After exposure to needle stick injury, information given to which person? (1)

Ans: Infection to Nursing supervisor, infection
Control nurse, infection office

Q5. Full form of EVD ? (1)

• EVD = ^{External} Ventricular Drainage (1)

Q6. Define EVD ? (2)

Ans: EVD procedure done within patient suffering from Hydrocephalus EVD done for reduce CSF (1)

Q7. Nursing management of EVD handling? (3)

Ans: Hand washing before and after EVD handling

• checked level of EVD

• checked vital signs

• EVD handle with sterile method

• EVD checked by doctor's daily

• Patient Conscious level (1)

• check Blood pressure

• Heart rate check



UPPAL NEURO HOSPITAL,
4 RANI KA BAGH, AMRITSAR.

PRE-EVALUATORY TEST

(STAFF NURSES ONLY)

DATE: - 24/12/19

NAME OF STAFF/ EMP. CODE :- Col Harpreet Kaur	TOTAL MARKS :- 10
DESIGNATION Staff Nurse	MARKS OBTAINED: 11/20

Q1. Define needle stick injury and its causes? (2)

Needle stick injury is define as -injuring wound
occur during accidentally needle prick the skin

Causes - unhanding procedur.

- Reusing the needle

- Procedur done without Personal Protective equipment

Q2. Which form fill in case of needle stick injury occur? (1)

→ EPINET form.

Q3. Enlist name of problems and infection's occur after exposure to needle stick injury

? (1) Hepatitis B, Hepatitis e, HIV, Diphtheria,
Syphilis, Herpes Zoster

Q4. After exposure to needle stick injury, information given to which person? (1)

- Nursing supervisor

- Infection control nurse

Q5. Full form of EVD ? (1)

EVD is Extra Ventricular drainage

1/2

Q6. Define EVD ? (2)

EVD is define as when patient has suffering from Hydrocephalus.

EVD done to for reduce pressure of brain

1/2

Q7. Nursing management of EVD handling ? (3)

- Wash hand in sterile method
- use proper PPE
- Hand hygiene before + after touching
- Proper dressing in sterile method
- EVD replace near head side
- Don't touch EVD without gloves
- Maintain neat + clean environment

1



UPPAL NEURO HOSPITAL,
4 RANI KA BAGH, AMRITSAR

POST EVALUATORY TEST

(STAFF NURSES ONLY)

DATE: - 4/12/19

NAME OF STAFF/ EMP. CODE :- 606 Harpreet Kaur	TOTAL MARKS :- 10
DESIGNATION Staff nurse	MARKS OBTAINED: 8 1/2

Q1. Define needle stick injury and its causes? (2)

- Needle stick injury is define as to puncture the skin (wound) accidentally to sharp needle the skin
- Cause's Procedure done without sterile technique
- Use don't use PPE

Q2. Which form fill in case of needle stick injury occur? (1)

- EPIWET form [Exposure prevention information network]

Q3. Enlist name of problems and infection's occur after exposure to needle stick injury

- (1) HIV, Diphtheria
- Hepatitis B, C, malaria
 - D.
 - Syphilis

Q4. After exposure to needle stick injury, information given to which person? (1)

- Nursing supervisor
- Infection Control nurse

Q5. Full form of EVD ? (1)

EVD is Extra Ventricular drainage

(1/2)

Q6. Define EVD ? (2)

• EVD is define as when patient has suffering from Hydrocephalus.

EVD done to for reduce pressure of brain

(1/2)

Q7. Nursing management of EVD handling ? (3)

- Wash hand & Sterile method
- use proper PPE
- Hand ~~is~~ washing before + after touching
- Proper dressing & Sterile method
- EVD replace near head side
- Don't touch EVD without gloves
- Maintain neat + clean environment

(1)



UPPAL NEURO HOSPITAL,
4 RANI KA BAGH, AMBULSAR

PRE-EVALUATORY TEST
(STAFF NURSES ONLY)

DATE: - 4/1/19

NAME OF STAFF/EMP. CODE :- Renu Saha 668	TOTAL MARKS :- 10
DESIGNATION Sr. N. M.	MARKS OBTAINED:- (3 1/2) / 10

Q1. Define needle stick injury and its causes? (2)

Ans) Needle stick is a defined the wound occurs during accidental needle.

Q2. Which form fill in case of needle stick injury occur? (1)

→ AP on client. form is fill. (1)

Q3. Enlist name of problems and infection's occur after exposure to needle stick injury? (1)

→ HIV, Hepatitis B, AIDS, etc (1)

Q4. After exposure to needle stick injury, information given to which person? (1)

→ After exposure of needle stick injury information given to Dr. I.C.V. (1)

Q5. Full form of EVD ? (1)

→ Extra ventricular drainages

1/2

Q6. Define EVD ? (2)

Ans EVD → Extra ventricular drainage of fluid as CSF. as the patient has suffering from Hydrocephalus.

Q7. Nursing management of EVD handling ? (3)

Ans Management of EVD.

3 Firstly keep tubing in Tap water, for exposure to air.

→ 10 before procedure Aseptic technique.

→ Proper Hand.



UPPAL NEURO HOSPITAL,
4 RANI KA BAGH, AMRITSAR
POST EVALUATORY TEST

(STAFF NURSES ONLY)

DATE: - 4/12/19

NAME OF STAFF/ EMP. CODE :-	Leena Goh 688	TOTAL MARKS :- 10
DESIGNATION	GN.M.	MARKS OBTAINED: 6 1/2

Q1. Define needle stick injury and its causes? (2)

→ Needle stick injury as the needle stick as wounds occur by needs accidentally. Collet stick injury.

Q2. Which form fill in case of needle stick injury occur? (1)

→ exposure prevention information network form is filled

Q3. Enlist name of problems and infection's occur after exposure to needle stick injury ? (1)

- hepatitis B, → Ebola fever
- hepatitis C → Tuberculosis
- HIV, Malaria → Herpes
- Aftersun

Q4. After exposure to needle stick injury, information given to which person ? (1)

→ After exposure to needle stick injury information to Incharge nurse & staff in ION Network form filled

→ Always do physically.

→ Carry to needles, . .

→ Do not touch,

→ Do not touch.

Q5. Full form of EVD ? (1)

→ External Ventricular Drainage System. (1/2)

Q6. Define EVD ? (2)

⇒ EVD → EVD is defined as the collect the extra fluid to drain like hydrocephalus. (1)

Q7. Nursing management of EVD handling ? (3)

⇒ Proper wear the gloves

→ Proper Handwashing.

⇒ According to advice hygiene maintain.

→ prevent to infection (1)

→ To ensure the all are ready.

→ use the Ster. temperature.

→ Do not carry, do not touch or break

→ cleaning to infection

→ Always physically.

⇒ Carrying to needles.

→ To prevent infection

→ To ^{stop} other ^{type} ^{of} ^{the} ^{problem} is Hand washing.



UPPAL NEURO HOSPITAL,
4 RANI KA BAGH, AMRITSAR

PRE EVALUATORY TEST

[STAFF NURSES ONLY]

DATE: 4/12/19

NAME OF STAFF/ EMP. CODE :- Rajwinder Kaur 575	TOTAL MARKS :- 10
DESIGNATION Staff nurse	MARKS OBTAINED: 5

Q1. Define needle stick injury and its causes? (2)

needle stick injury is defined that
needle accidentally punctures ~~the~~ skin
which cause various disease

Cause

Reaping the needle
during inproperly handling of dispose

Q2. Which form fill in case of needle stick injury occur? (1)

Incident form

Q3. Enlist name of problems and infection's occur after exposure to needle stick injury ? (1)

- ÷ Blood infection
- ÷ Human immuno deficient ~~virus~~ ~~and~~ ~~herpes~~ ~~virus~~

Q4. After exposure to needle stick injury, information given to which person? (1)

Infection control nurse.

Q5. Full form of EVD ? (1)

extra ventricular drainage

Q6. Define EVD ? (2)

EVD is surgical procedure in which extra CSF in brain ~~is~~ ^{is} drained

Q7. Nursing management of EVD handling ? (3)

- ÷ - check the vital ~~is~~ ^{is} regularly
- ÷ Maintain the ~~upside~~ ^{upside} 30 degree position of patient
- ÷ check regulator drainage pressure of pt
- Maintain the ~~intracranial~~ ^{intracranial} pressure



UPPAL NEURO HOSPITAL,
4 RANI KA BAGH, AMRITSAR
POST EVALUATORY TEST

(STAFF NURSES ONLY)

DATE: 4/12

NAME OF STAFF/ EMP. CODE :- Rajwinder 5757	TOTAL MARKS :- 10
DESIGNATION Staff nurse	MARKS OBTAINED:- 0/10

Q1. Define needle stick injury and its causes? (2)

Needle stick injury is defined as a sharp wound that would cause by needle that accidentally puncture the skin.

cause: 1) Recapping the needle
2) unsafe work practice 3) Disposable system failure

Q2. Which form fill in case of needle stick injury occur? (1)

EPINET - exposure prevention network information

Q3. Enlist name of problems and infection's occur after exposure to needle stick injury? (1)

HIV
Herpes
Hepatitis B
Hepatitis C
Tuberculosis
Malaria

Q4. After exposure to needle stick injury, information given to which person? (1)

ward in charge
After that hospital infection control staff

Q5. Full form of EVD ? (1)

Extra ventricular drainage

(1/2)

Q6. Define EVD ? (2)

EVD is define that it is surgical procedy to remove extra CSF in brain through drain which ~~inform~~ perform in hydrocephal. patient

Q7. Nursing management of EVD handling ? (3)

- Firstly check the vital B.P, temperature
- daily dressing with sterilize technique
- ~~keep~~ maintain the drain position
- if patient take position to clasp the drain
- check the GCS of patient in regularly
- Inform the drain in senior doctor
- wear the gloves after and before touching the post



UPPAL NEURO HOSPITAL,
4 RANI KA BAGH, AMRITSAR
PRE EVALUATORY TEST

(STAFF NURSES ONLY)

DATE: 4/12/19

NAME OF STAFF/ EMP. CODE :- Saurinder Kaur 676	TOTAL MARKS :- 10
DESIGNATION Staff Nurse	MARKS OBTAINED: 4

Q1. Define needle stick injury and its causes? (2)

Ans -> Needle stick injury is defined as the injury wound occur during accidentally needle prick the skin.

Causes -> Needle stick injury

- unhealthly procedure
- Open needle
- Equipment proper no place according to proper process.

Q2. Which form fill in case of needle stick injury occur? (1)

Ans -> EPINET FORM fill for needle stick injury.

Q3. Enlist name of problems and infection's occur after exposure to needle stick injury? (1)

Ans -> Name of Problems

- Hepatitis B
- HIV
- Syphilis Diphtheria Syphilis
- Herpes zoster

Q4. After exposure to needle stick injury, information given to which person? (1)

Ans -> Inform the IEN Man & Infection Control Nurse

Q5. Full form of EVD ? (1).

Ans EVD: - Extra ventricular drainage (1/2)

Q6. Define EVD ? (2)

Ans → EVD → Extra Ventricular drainage

Define EVD is defined as the patient has suffering from Hydrocephalus.

Q7. Nursing management of EVD handling ? (3)

Ans → Nursing Management of EVD

⇒ Firstly turning the tape water. for exposure the area.

⇒ Proper hand wash & Aseptic technique.

⇒ Use PPE. And used sterile method.

⇒ then Immunization like Zivudine 280y.

JK



UPPAL NEURO HOSPITAL,

4 RANJ KA BAGH, AMRITSAR

POST EVALUATORY TEST

[STAFF NURSES ONLY]

DATE: 4/12/19

NAME OF STAFF/EMP. CODE :- <u>Vandana S</u>	TOTAL MARKS :- 10
DESIGNATION <u>Staff Nurse ICU</u>	MARKS OBTAINED: <u>5/10</u>

Q1. Define needle stick injury and its causes? (2)

Q Needle stick injury is defined as wound caused by needles that accidentally puncture the skin.

Causes :- Contact the mucous membranes.

Q2. Which form fill in case of needle stick injury occur? (1)

A Exposure Prevention Information Network

Q3. Enlist name of problems and infections occur after exposure to needle stick injury

- Hepatitis B.
- Hepatitis C
- HIV
- Tuberculosis
- Ebola fever.

Q4. After exposure to needle stick injury, information given to which person? (1)

A Inform the Incharge Nn
then Inform the ICN.

Q5. Full form of EVD ? (1).

Ans → EVD: - Extra Ventricular drainage (1/2)

Q6. Define EVD ? (2)

Ans → EVD → Extra Ventricular drainage

Define EVD is defined as the patient has suffering from Hydrocephalus.

Q7. Nursing management of EVD handling ? (3)

Ans → Nursing Management of EVD

⇒ Firstly turning the tap water for exposure the area.

⇒ Proper hand wash & Aseptic technique.

⇒ Use PPE. And used sterile method.

⇒ then Immunization like Zivudine 280y.



UPPAL NEURO HOSPITAL,
4 RANI KA BAGH, AMRITSAR

PRE-EVALUATORY TEST

(STAFF NURSES ONLY)

DATE: - 4/12/19

NAME OF STAFF/ EMP. CODE :- Pavneet Kaur 565	TOTAL MARKS :- 10
DESIGNATION Staff nurse	MARKS OBTAINED:- 3 1/2

Q1. Define needle stick injury and its causes? (2)

• Needle stick injury is define as in which ~~needle~~ ^{needle} accidentally puncture in skin when ~~the~~ person recapped the needle and discard it.

1 1/2

Q2. Which form fill in case of needle stick injury occur? (1)

• Incident form

Q3. Enlist name of problems and infection's occur after exposure to needle stick injury ? (1)

- Blood Infection
- HIV - Human Immuno deficiency virus.

1 1/2

Q4. After exposure to needle stick injury, information given to which person ? (1)

• IEN - Infection control nurse.

1 1/2

Q5. Full form of EVD ? (1)

Extraventricular drain

1/2

Q6. Define EVD ? (2)

Extraventricular drain is define it is a device used in neurosurgery to treat hydrocephalus and intracranial pressure.

1/2

Q7. Nursing management of EVD handling ? (3)

- Monitor the patient condition.
- Monitor the intracranial pressure.



UPPAL NEURO HOSPITAL,

FRANKA BAGH, AMRITSAR

POST-EVALUATORY TEST

[STAFF NURSES ONLY]

DATE: - 4/12/19

NAME OF STAFF/ EMP. CODE :- <u>Pavani Kan</u>	TOTAL MARKS :- 10
DESIGNATION <u>Staff nurse.</u>	MARKS OBTAINED:- <u>8/10</u>

Q1. Define needle stick injury and its causes? (2)

Needle stick injury is defined in which the wound is made by a needle accidentally puncturing the skin. These injuries occur when a person is recapping the needles.

- Cause -

- Recapping needles, unsafe disposal.

Q2. Which form fill in case of needle stick injury occur? (1)

EPI NET - Exposure prevention information network.

Q3. Enlist name of problems and infections occur after exposure to needle stick injury? (1)

- HIV - Human Immune deficiency virus.
- HEP - B
- HEP - C
- Tuberculosis.

Q4. After exposure to needle stick injury, information given to which person? (1)

- firstly informed the supervisor.
- Then ICN - Infection control nurse.

Q5. Full form of EVD ? (1)

• Extraventricular drain (1/2)

Q6. Define EVD ? (2)

• Extraventricular drain is defined as a device used in neurosurgery to treat hydrocephalus and maintain intracranial pressure of cerebrospinal fluid in drain when obstructed.

Q7. Nursing management of EVD handling ? (3)

- Monitor the condition of patient.
- Use aseptic techniques.
- Check the side of drain according to doctor.
- Check measuring how much fluid.
- Check the GCS when stop the drain.
- Check infection sign after cleaning per 4 hly.
- Check the gravity according to doctor prescription.
- Monitor the vitals per hly.



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



ON JOB TRAINING VIVA SHEET

TOPIC	Biomedical waste management
DEPARTMENT	Jasmanpreet K. [Seminar Room]
DATE/TIME	10/3/2020
PRESENTER NAME	Jasmanpreet K.

NAME OF STAFF	EMP. CODE	DESIGNATION	MARKS OBTAINED	TOTAL MARKS	REMARKS
Singh	124	Housekeeper	7	10	
Gurmandeep	682	Helper	7	10	
Arshdeep	713	Helper	5	10	
Daljit Singh	714	Helper	6.5	10	
Manjiv	321	Helper	7	10	
Grobby	16	Helper	6	10	
Daljit K	409	Helper	6	10	

SIGNATURE OF PRESENTER:-



VERBAL PERFORMANCE ASSESMENT CHECKLIST

Learner name	Bijit Singh	Designation of learner:- Helper
Assessor name	Jasmanpreet	Designation of Assessor:- ICW

10/3/2020

Verbal questions	Satisfactory response	
	Yes	No
1. Define Biomedical Waste?	/	
2. Explain Biomedical Waste Management?	/	
3. Where is main storage area of BMW?	/	
4. Categories for segregation of BMW?	/	
5. When BMW bins empty?		/
6. Immediate management of needle stick injury?		/
7. During transportation of BMW which precaution is used	/	
8. Cap and mask discard in which colour bin?	/	/
9. Gloves discard in which colour bin?	/	
Steps of hand washing?		/

Feedback to Learner:- Average

The Learner response was:-

Satisfactory

Not Satisfactory

Assessor Signature: Jasmanpreet



VERBAL PERFORMANCE ASSESMENT CHECKLIST

Learner name	<i>Goddy</i>	Designation of learner:- <i>Helper</i>
Assessor name	<i>Jasmanjit</i>	Designation of Assessor:- <i>ICU</i>

10/3/2020

Verbal questions	Satisfactory response	
	Yes	No
1. Define Biomedical Waste?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Explain Biomedical Waste Management?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Where is main storage area of BMW?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Categories for segregation of BMW?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. When BMW bins empty?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Immediate management of needle stick injury?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. During transportation of BMW which precaution is used	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. Cap and mask discard in which colour bin?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Gloves discard in which colour bin?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Steps of hand washing?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Feedback to Learner:- *Average*

The Learner response was:-

Satisfactory

Not Satisfactory

Assessor Signature:- *Jasmanjit*



UPPAL NEURO HOSPITAL
4-RANI KA BAGH, AMRITSAR.



VERBAL PERFORMANCE ASSESMENT CHECKLIST

Learner name	Manju Sot	Designation of learner:- Helper
Assessor name	Jasmanp	Designation of Assessor:- ICo

16-3-2020

Verbal questions	Satisfactory response	
	Yes	No
1. Define Biomedical Waste?	/	
2. Explain Biomedical Waste Management?	/	
3. Where is main storage area of BMW?		/
4. Categories for segregation of BMW?	/	
5. When BMW bins empty?		/
6. Immediate management of needle stick injury?		/
7. During transportation of BMW which precaution is used	/	
8. Cap and mask discard in which colour bin?	/	
9. Gloves discard in which colour bin?	/	
Steps of hand washing?	/	

Feedback to Learner:- Average

The Learner response was:-

Satisfactory

Not Satisfactory

Assessor Signature:- Jasmanp



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



VERBAL PERFORMANCE ASSESMENT CHECKLIST

10-3-2022

Learner name	Bachanpal	Designation of learner:-	Helps
Assessor name	Jasmanpal	Designation of Assessor:-	ICU

Verbal questions	Satisfactory response	
	Yes	No
1. Define Biomedical Waste?	✓	
2. Explain Biomedical Waste Management?	✓	
3. Where is main storage area of BMW?		✓
4. Categories for segregation of BMW?	✓	
5. When BMW bins empty?		✓
6. Immediate management of needle stick injury?		✓
7. During transportation of BMW which precaution is used		✓
8. Cap and mask discard in which colour bin?		✓
9. Gloves discard in which colour bin?	✓	
Steps of hand washing?	✓	

Feedback to Learner:- Average 1. Give training on BMW & needle stick injury

The Learner response was:-

Satisfactory

Not Satisfactory

Assessor Signature:- Jasmanpal



UPPAL NEURO HOSPITAL
4-RANI KA BAGH, AMRITSAR.



VERBAL PERFORMANCE ASSESMENT CHECKLIST

10-3-2020

Learner name	<i>Geemait Singh</i>	Designation of learner:- <i>Helper</i>
Assessor name	<i>Jasmanjit</i>	Designation of Assessor:- <i>ICU</i>

Verbal questions	Satisfactory response	
	Yes	No
1. Define Biomedical Waste?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Explain Biomedical Waste Management?	<input type="checkbox"/>	<input type="checkbox"/>
3. Where is main storage area of BMW?	<input type="checkbox"/>	<input type="checkbox"/>
4. Categories for segregation of BMW?	<input type="checkbox"/>	<input type="checkbox"/>
5. When BMW bins empty?	<input type="checkbox"/>	<input type="checkbox"/>
6. Immediate management of needle stick injury?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. During transportation of BMW which precaution is used	<input type="checkbox"/>	<input type="checkbox"/>
8. Cap and mask discard in which colour bin?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Gloves discard in which colour bin?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Steps of hand washing?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Feedback to Learner:- *ok*

The Learner response was:-

Satisfactory

Not Satisfactory

Assessor Signature: *Jasmanjit*



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR,



VERBAL PERFORMANCE ASSESMENT CHECKLIST

Learner name	<i>Simranjit Singh</i>	10-3-2020 Designation of learner:- Helper.
Assessor name	<i>Jas manjeet</i>	Designation of Assessor:- I.T.O.

Verbal questions	Satisfactory response	
	Yes	No
1. Define Biomedical Waste?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Explain Biomedical Waste Management?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Where is main storage area of BMW?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Categories for segregation of BMW?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. When BMW bins empty?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Immediate management of needle stick injury?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. During transportation of BMW which precaution is used	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. Cap and mask discard in which colour bin?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Gloves discard in which colour bin?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Steps of hand washing?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Feedback to Learner:- *OP*

The Learner response was:-

Satisfactory

Not Satisfactory

Assessor Signature:-

Jas manjeet



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



VERBAL PERFORMANCE ASSESMENT CHECKLIST

10-03-2020

Learner name	Daljit Singh	Designation of learner:- Helper
Assessor name	Jasmarpal	Designation of Assessor:- ICW

Verbal questions	Satisfactory response	
	Yes	No
1. Define Biomedical Waste?	✓	
2. Explain Biomedical Waste Management?	✓	
3. Where is main storage area of BMW?	✓	
4. Categories for segregation of BMW?	✓	
5. When BMW bins empty?		05 - C road by road (answer)
6. Immediate management of needle stick injury?		—
7. During transportation of BMW which precaution is used		—
8. Cap and mask discard in which colour bin?	—	
9. Gloves discard in which colour bin?		—
Steps of hand washing?	✓	

Feedback to Learner:- Average

The Learner response was:-

Satisfactory

Not Satisfactory

Assessor Signature:-

Jasmarpal



Date: 05-10-2020

CIRCULAR

Dear BMW Management Committee Members,

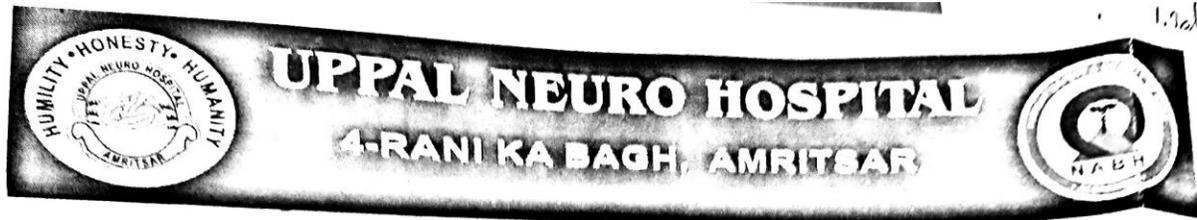
This is to inform you all that the meeting for the Committee is scheduled on 10th October 2020. Meeting will be chaired by Dr. Rajiv Tiwari. All of you are requested please attend the same.

Members

BMW Management Committee	Dr. Rajiv Tiwari	Chairperson
BMW Management Committee	Dr. Ashok Uppal	Member
BMW Management Committee	Mr. Nirmal Kumar Pant	Member
BMW Management Committee	Ms. Ashu Bala	Secretary
BMW Management Committee	Ms. Jasmanpreet Kaur	Member
BMW Management Committee	Ms. Kulwinder Kaur	Member
BMW Management Committee	Ms. Manpreet Kaur	Member
BMW Management Committee	Mr. Dyal Saroop	Member
BMW Management Committee	Ms. Shipra Chopra	Member
BMW Management Committee	Mr. Ankush Kapoor	Guest Member

Agenda and other details are as below,

Venue	Conference Room
Date & Time	10 th October 2020 / 01:00pm



The agenda for the meeting is as follows:

1. ETP Machine was not working properly in Lab.
2. Cutting of Needles was not properly done as per Guidelines.
3. Any other point with the permission of the chair.

Thanking You,

Ashu Bala

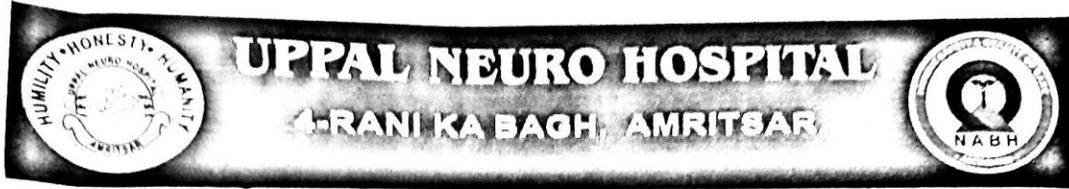
Housekeeping Supervisor



Attendance Sheet for Committee Meeting
BMW Management Committee

Meeting	BMW Management Committee
Chairperson	Dr. Rajiv Tiwari
Date and Time	10 th October 2020/01:00pm
Venue	Conference Room

S. No	Emp.ID	Name	Designation in Committee	Signature
1.		Dr. Rajiv Tiwari	Chairperson	
2.		Dr. Ashok Uppal	Member	
3.		Mr. Nirmal Kumar Pant	Member	
4.		Ms. Ashu Bala	Secretary	
5.		Mr. Dyal Saroop	Member	
6.		Ms. Jasmanpreet Kaur	Member	
7.		Ms. Manpreet Kaur	Member	
8.		Ms. Kulwinder Kaur	Member	
9.		Ms. Shipra Chopra	Member	
10.		Mr. Ankush Kapoor	Guest Member	

**Details of the Meeting**

Date	Time	Location	Recorded by
10-10-2020	01:00PM	Conference Room	Ms. Jasmanpreet Kaur

Meeting called by	Ms. Jasmanpreet Kaur
Attended by	Dr. Ashok Uppal, Dr. Rajiv Tiwari, Mr. Nirmal Pant, Ms. Jasmanpreet, Ms. Manpreet Kaur, Ms. Kulwinder Kaur, Mr. Dyal Saroop, Ms. Shipra Chopra, Mr. Ashu Bala, Mr. Ankush Kapoor.
Compulsory Members	Yes
Absents	No

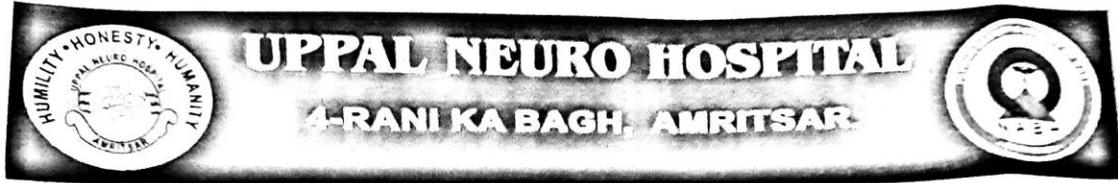
Points of last meeting:-

S.no	Points of last meeting	Remarks
1.	Overflowing of Bio Medical Waste Transport Trolley.	Closed
2.	General Waste Transport Trolley's cover was not intact.	Closed

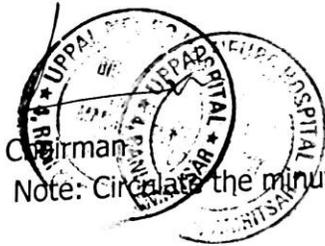
Open Points of Last 2 Meetings:

No.

Current Agenda:	<ol style="list-style-type: none"> ETP Machine not working properly in Lab. Cutting of Needles was not properly done as per guidelines. Any other point with the permission of the chair.
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MINUTES OF MEETINGCurrent Points:-

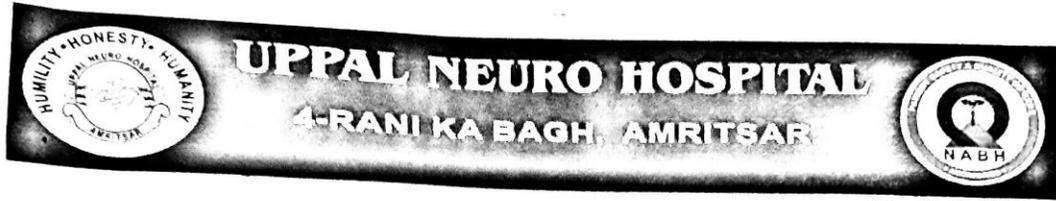
Sr. No.	Discussed Points	Action to be Taken & Target Date	Responsibility
1.	ETP Machine not working properly in Lab.	<p>During Rounds, Lab Staff was complaining that ETP Machine was not working properly. There was the back flow of water from machine.</p> <p>Action to be taken: BME informed immediately and advised to call vendors for repairing.</p> <p>Target Date: Immediate.</p>	<p>ICO ICN Hospital Administrator BME Lab Staff</p>
2.	Cutting of Needles was not properly done as per guidelines.	<p>During Daily Rounds, It was observed that Staff don't cut needles properly into the Smallest Parts in few areas.</p> <p>Action To be taken: Trainings are given to the Staff regarding cutting the needles into Minimum Three Parts. On Job Trainings are also provided to the staff for practical knowledge.</p> <p>Target Date: Continuous.</p>	<p>ICO ICN Hospital Administrator Nursing Superintendent</p>



- Chairman
- Note: Circulate the minutes of meeting to attendees and concerned Depts.

For

 Secretary



Date: 11-07-2020

CIRCULAR

Dear BMW Management Committee Members,

This is to inform you all that the meeting for the Committee is scheduled on 14th July 2020. Meeting will be chaired by Dr. Rajiv Tiwari. All of you are requested please attend the same.

Members

BMW Management Committee	Dr. Rajiv Tiwari	Chairperson
BMW Management Committee	Dr. Ashok Uppal	Member
BMW Management Committee	Mr. Nirmal Kumar Pant	Member
BMW Management Committee	Mr. Maninder Singh	Secretary
BMW Management Committee	Ms. Jasmanpreet Kaur	Member
BMW Management Committee	Ms. Kulwinder Kaur	Member
BMW Management Committee	Mr. Dyal Saroop	Member
BMW Management Committee	Ms. Shipra Chopra	Member

Agenda and other details are as below,

Venue	Conference Room
Date & Time	14 th July 2020 / 12:30pm

The agenda for the meeting is as follows:

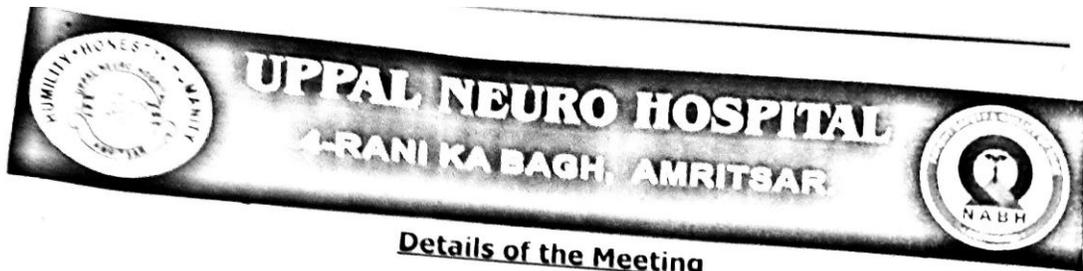
1. Overflowing of Bio Medical Waste Transport Trolley.
2. General Waste Transport Trolley's cover was not intact.
3. Any other point with the permission of the chair.

Thanking You,

Maninder Singh

Maninder Singh

Housekeeping Supervisor.

**Details of the Meeting**

Date	Time	Location	Recorded by
14-07-2020	12:30PM	Conference Room	Ms. Jasmanpreet Kaur

Meeting called by	Ms. Jasmanpreet Kaur
Attended by	Dr. Ashok Uppal, Dr. Rajiv Tiwari, Mr. Nirmal Pant, Ms. Jasmanpreet, Ms. Kulwinder Kaur, Mr. Dyal Saroop, Ms. Shipra Chopra, Mr. Maninder Singh.
Compulsory Members	Yes
Absents	No

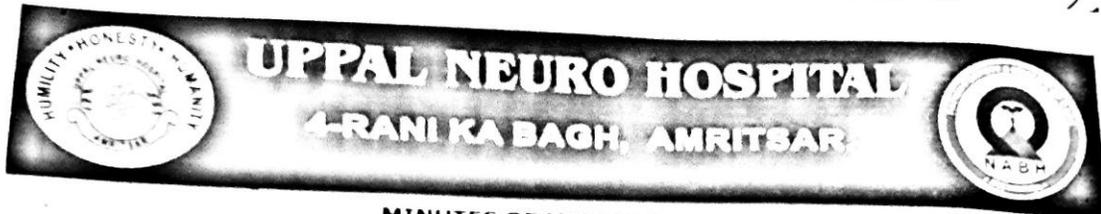
Points of last meeting:-

S.no	Points of last meeting	Remarks
1.	Bio Medical Waste Mixing found in B-Block.	Closed
2.	Occasionally Green Bag was 2/3 rd full.	Closed

Open Points of Last 2 Meetings:

No.

Current Agenda:	<ol style="list-style-type: none"> 1. Overflowing of Bio Medical Waste Transport Trolley. 2. General Waste Transport Trolley's cover was not intact. 3. Any other point with the permission of the chair.
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**MINUTES OF MEETING****Current Points:-**

S.No.	Discussed Points	Action to be Taken & Target Date	Responsibility
1.	Overflowing of Bio Medical Waste Transport Trolley.	<p>During rounds, It's been observed that Bio Medical Waste Transport Trolley is overflowing (Filled More than 2/3rd Part).</p> <p>Action to be taken: Training has been Conducted for the Nursing Staff Members and for Housekeeping Staff as well regarding Bio Medical Waste Management Guidelines.</p> <p>Target Date: Immediate.</p>	<p>ICO ICN Hospital Administrator Nursing Superintendent Housekeeping Supervisor</p>
2.	General Waste Transport Trolley's cover was not intact.	<p>It has been observed in daily rounds that General Waste Transport Trolley's cover was not intact. It is because of the Poor Condition of the Trolleys.</p> <p>Action To be taken: Housekeeping Supervisor is been advised to immediately order for new trolleys and also need to Guide the staff to cover the Lid of Bio Medical Waste Transport Trolley.</p> <p>Target Date: Immediate.</p>	<p>ICO ICN Hospital Administrator Nursing Superintendent Housekeeping Supervisor</p>



Note: Circulate the minutes of meeting to attendees and concerned Depts.

Maninder Singh
Secretary



Date: 09-04-2020

CIRCULAR

Dear BMW Management Committee Members,

This is to inform you all that the meeting for the Committee is scheduled on 13th April 2020. Meeting will be chaired by Dr. Rajiv Tiwari. All of you are requested please attend the same.

Members

BMW Management Committee	Dr. Rajiv Tiwari	Chairperson
BMW Management Committee	Dr. Ashok Uppal	Member
BMW Management Committee	Mr. Nirmal Kumar Pant	Member
BMW Management Committee	Mr. Maninder Singh	Secretary
BMW Management Committee	Ms. Jasmanpreet Kaur	Member
BMW Management Committee	Ms. Kulwinder Kaur	Member
BMW Management Committee	Mr. Dyal Saroop	Member
BMW Management Committee	Ms. Shipra Chopra	Member

Agenda and other details are as below,

Venue	Conference Room
Date & Time	13 th April 2020 / 12:00pm

The agenda for the meeting is as follows:

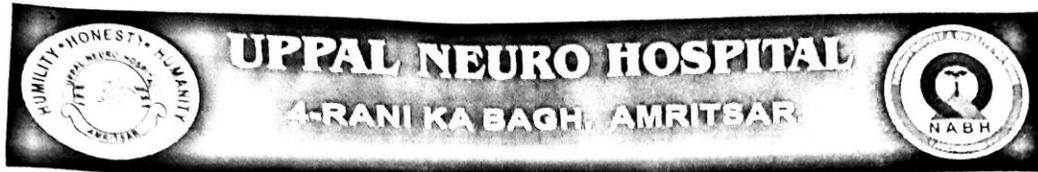
1. Bio Medical Waste Mixing found in B- Block.
2. Occasionally Green Bag was 2/3rd full.
3. Any other point with the permission of the chair.

Thanking You,

Maninder Singh

Maninder Singh

Housekeeping Supervisor.

**Details of the Meeting**

Date	Time	Location	Recorded by
13-04-2020	12:00PM	Conference Room	Ms. Jasmanpreet Kaur

Meeting called by	Ms. Jasmanpreet Kaur
Attended by	Dr. Ashok Uppal, Dr. Rajiv Tiwari, Mr. Nirmal Pant, Ms. Jasmanpreet, Ms. Kulwinder Kaur, Mr. Dyal Saroop, Ms. Shipra Chopra, Mr. Maninder Singh.
Compulsory Members	Yes
Absents	No

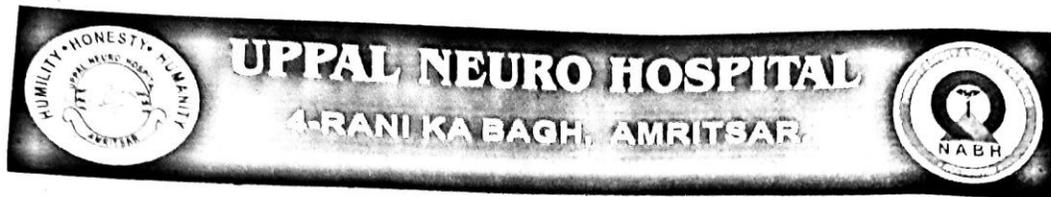
Points of last meeting:-

S.no	Points of last meeting	Remarks
1.	Recapping of needles.	Closed
2.	Bio Medical Waste bins are not cleaned properly.	Closed
3.	Persons not wearing proper PPE's while transferring BMW at final disposal point.	Closed

Open Points of Last 2 Meetings:

No.

Current Agenda:	<ol style="list-style-type: none"> Bio Medical Waste Mixing found in B-Block. Occasionally Green Bag was 2/3rd full. Any other point with the permission of the chair.
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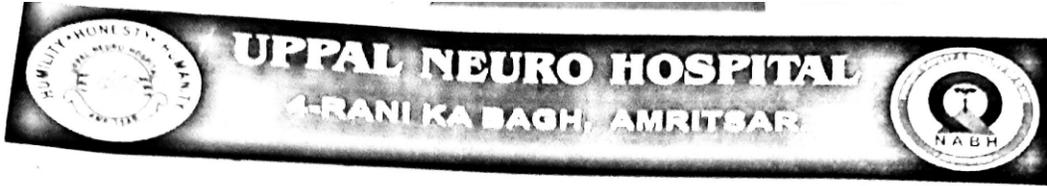
**MINUTES OF MEETING****Current Points:-**

Sr. No.	Discussed Points	Action to be Taken & Target Date	Responsibility
1.	Bio Medical Waste Mixing found in B-Block.	<p>During rounds, It's been observed that General waste is being mixed with the other Bio Medical Waste Bags like Papers, Cold Drink Bottles etc. were found in Red bag and Cardboard Box with Blue Tapping. In most of the cases, It's been done by Patient Attendants due to Lack of Knowledge.</p> <p>Action to be taken: Regular Training Sessions has been arranged for the Nursing Staff Members and for Housekeeping Staff as well. Verbal Guidelines and Pamphlets has been displayed in local Language for the understandability of Patient attendants for safe disposal of Bio Medical Waste.</p> <p>Target Date: Immediate.</p>	ICO ICN Hospital Administrator Nursing Superintendent Housekeeping Supervisor
2.	Occasionally Green Bag was 2/3 rd full.	<p>It has been observed in daily rounds that sometimes Green Bag were more than 2/3rd full.</p> <p>Action To be taken: Trainings need to be provided to the Housekeeping Staff regarding Bio Medical Waste Norms and educate them that all Bio Medical Waste Bins need to get empty before filling of 2/3rd section.</p> <p>Target Date: Immediate.</p>	ICO ICN Hospital Administrator Nursing Superintendent Housekeeping Supervisor



- Noted. Circulate the minutes of meeting to attendees and concerned Depts.

For
 Maninder Singh
 Secretary



Date: 17-01-2020

CIRCULAR

Dear BMW Management Committee Members,

This is to inform you all that the meeting for the Committee is scheduled on 20th January 2020. Meeting will be chaired by Dr. Rajiv Tiwari. All of you are requested please attend the same.

Members

BMW Management Committee	Dr. Rajiv Tiwari	Chairperson
BMW Management Committee	Dr. Ashok Uppal	Member
BMW Management Committee	Mr. Nirmal Kumar Pant	Member
BMW Management Committee	Mr. Maninder Singh	Secretary
BMW Management Committee	Ms. Jasmanpreet Kaur	Member
BMW Management Committee	Ms. Kulwinder Kaur	Member
BMW Management Committee	Mr. Dyal Saroop	Member
BMW Management Committee	Ms. Shipra Chopra	Member

Agenda and other details are as below,

Venue	Conference Room
Date & Time	20 th January 2020 / 01:00pm

The agenda for the meeting is as follows:

1. Recapping of needles.
2. Bio Medical Waste bins are not cleaned properly.
3. Persons not wearing proper PPE's while transferring BMW at final disposal point.
4. Any other point with the permission of the chair.

Thanking You,

Maninder Singh
Maninder Singh

Developing Supervisor

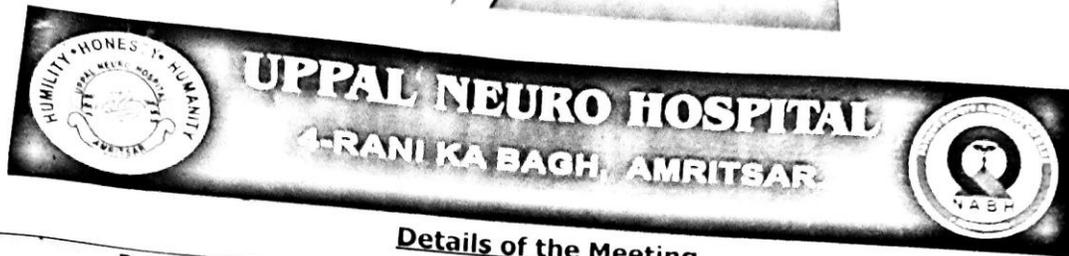


Attendance Sheet for Committee Meeting
BMW Management Committee

Meeting	BMW Management Committee
Chairperson	Dr. Rajiv Tiwari
Date and Time	20 th January 2020/01:00pm
Venue	Conference Room

S. No	Emp.ID	Name	Designation in Committee	Signature
1.		Dr. Rajiv Tiwari	Chairperson	
2.		Dr. Ashok Uppal	Member	
3.		Mr. Nirmal Kumar Pant	Member	
4.		Mr. Maninder Singh	Secretary	
5.		Mr. Dyal Saroop	Member	
6.		Ms. Jasmanpreet Kaur	Member	
7.		Ms. Kulwinder Kaur	Member	
8.		Ms. Shipra Chopra	Member	

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UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR



Details of the Meeting

Date	Time	Location	Recorded by
20-01-2020	01:00PM	Conference Room	Ms Jasmanpreet

Meeting called by	M. Jasmanpreet Kaur
Attended by	Dr. Ashok Uppal, Dr. Rajiv Tiwari, Mr. Nirmal Pant, Ms. Jasmanpreet, Ms. Kulwinder Kaur, Mr. Dyal Saroop, Ms. Shipra Chopra, Mr. Maninder Singh.
Compulsory Members	Yes
Absents	No

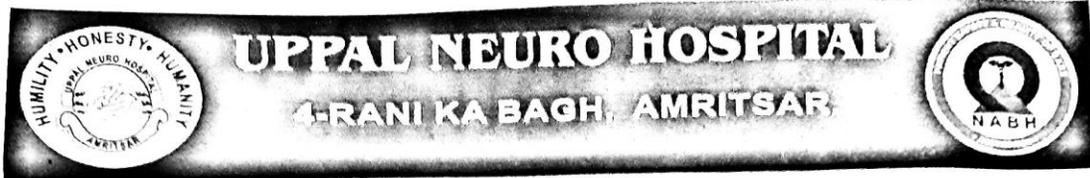
Points of last meeting:-

S.no	Points of last meeting	Remarks
1.	Improper Segregation of Biomedical Waste.	Closed
2.	Improper Disposal of Sharps.	Closed
3.	Over filling of the Bio Medical Waste Carriers during Transportation.	Closed

Open Points of Last 2 Meetings:

Closed

Current Agenda:	<ol style="list-style-type: none"> 1. Recapping of needles. 2. Bio Medical Waste bins are not cleaned properly. 3. Persons not wearing proper PPE's while transferring BMW at final disposal point. 4. Any other point with the permission of the chair.
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**MINUTES OF MEETING****Current Points:-**

S. No.	Discussed Points	Action to be Taken & Target Date	Responsibility
1.	Recapping of needles.	During the round it is found that newly joined staff does recapping of needles in some areas after taking samples rather than discarding them with needle cutter. Action to be taken: Trainings are being provided to the staff for the same and on job trainings are also to be provided. Target Date: Immediate.	ICN ICO Nursing Incharges
2.	Bio Medical Waste bins are not cleaned properly	During rounds it has come to the notice that bio medical waste bins are not cleaned properly in some areas. Although on job training has been provided for daily cleaning of the bins. Action to be taken: Housekeeping Supervisor has been instructed to do rounds and properly check bins also, strict warning been given to the staff for the same. Target Date: Immediate.	ICN ICO Housekeeping Supervisor
3.	Persons not wearing proper PPE's while transferring BMW at final disposal point.	It been observed that staff does not wear PPE's properly while transferring the Bio medical waste from floors to the final disposal area. Actions to be taken: Training given to staff. Housekeeping Supervisor advised to keep a strict vision of the same. Target Date: Immediate.	ICN ICO Housekeeping Supervisor

Chairman

- Notes: Circulate the minutes of meeting to attendees and concerned Depts.

Secretary

Secretary



Date: 09-10-2019

CIRCULAR

Dear BMW Management Committee Members,

This is to inform you all that the meeting for the Committee is scheduled on 11th October 2019. Meeting will be chaired by Dr. Rajiv Tiwari. All of you are requested please attend the same.

Members

BMW Management Committee	Dr. Rajiv Tiwari	Chairperson
BMW Management Committee	Dr. Ashok Uppal	Member
BMW Management Committee	Mr. Nirmal Kumar Pant	Member
BMW Management Committee	Ms. Gurwant Kaur	Secretary
BMW Management Committee	Ms. Jasmanpreet Kaur	Member
BMW Management Committee	Ms. Kulwinder Kaur	Member
BMW Management Committee	Mr. Dyal Saroop	Member
BMW Management Committee	Ms. Shipra Chopra	Member

Agenda and other details are as below,

Venue	Conference Room
Date & Time	11 th October 2019 / 12:00pm

The agenda for the meeting is as follows:

1. Improper Segregation of Biomedical Waste.
2. Improper Disposal of Sharps.
3. Over filling of the Bio Medical Waste Carriers during Transportation.
4. Any other point with the permission of the chair.

Thanking You,


Gurwant Kaur

Housekeeping Supervisor.



Attendance Sheet for Committee Meeting
BMW Management Committee

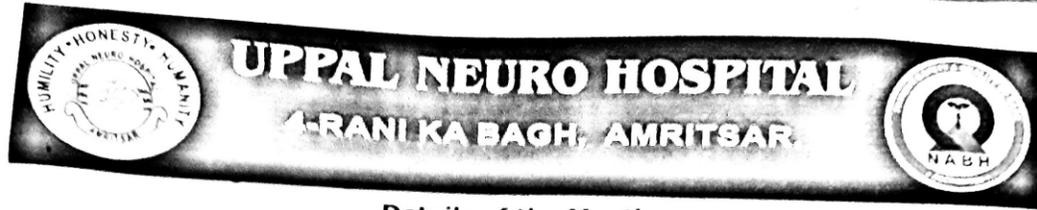
Meeting	
Chairperson	Dr. Rajiv Tiwari
Date and Time	11 th October 2019/12:00pm
Venue	Conference Room

S. No	Emp.ID	Name	Designation in Committee	Signature
1.		Dr. Rajiv Tiwari	Chairperson	<i>[Signature]</i>
2.		Dr. Ashok Uppal	Member	<i>[Signature]</i>
3.		Mr. Nirmal Kumar Pant	Member	<i>[Signature]</i>
4.		Ms. Gurwant Kaur	Secretary	<i>[Signature]</i>
5.		Mr. Dyal Saroop	Member	<i>[Signature]</i>
6.		Ms. Jasmanpreet Kaur	Member	<i>Jasmanpreet</i>
7.		Ms. Shipra Chopra	Member	<i>Shipra Chopra</i>
8.		Ms. Kulwinder Kaur	Member	<i>[Signature]</i>

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**Details of the Meeting**

Date	Time	Location	Recorded by
11-10-2019	12:00PM	Conference Room	Ms. Jasmanpreet Kaur

Meeting called by	Ms. Jasmanpreet Kaur
Attended by	Dr. Ashok Uppal, Dr. Rajiv Tiwari, Mr. Nirmal Pant, Ms. Jasmanpreet, Ms. Kulwinder Kaur, Mr. Dyal Saroop, Ms. Shipra Chopra, Ms. Gurwant Kaur.
Compulsory Members	Yes
Absents	No

Points of last meeting:-

S.no	Points of last meeting	Remarks
1.	Refilled Syringes found on bed side tables.	Closed
2.	Bio Medical Waste Management Segregation Observed.	Closed

Open Points of Last 2 Meetings:

Closed

Current Agenda:	<ol style="list-style-type: none"> 1. Improper Segregation of Biomedical Waste. 2. Improper Disposal of Sharps. 3. Over filling of the Bio Medical Waste Carriers during Transportation. 4. Any other point with the permission of the chair.
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MINUTES OF MEETING

Current Points:-

S.No.	Discussed Points	Action to be Taken & Target Date	Responsibility
1.	Improper Segregation of Biomedical Waste.	It has been observed during the rounds that staff is still mixing the waste bags during the disposal to final disposal point. Action to be taken: Training is being conducted on regular basis and on job training are also being given. Target Date: On-going process.	ICN Nursing Incharges Housekeeping Supervisors Laboratory Incharge NS
2.	Improper Disposal of Sharps.	During the round, it's been observed that staff not immediately discards sharp waste after its generation. Action to be taken: Strict Warning has been given to staff. Target Date: Immediate.	ICN Nursing Incharges Laboratory Incharge NS
3.	Over filling of the Bio Medical Waste Carriers during Transportation.	Evening supervisor intimated that in few cases it has been notice that staff responsible for the bio medical waste disposal at the final disposal point is not following the proper norms for disposal. Carriers are over filled (>2/3 limit). Action to be taken: Training to be imparted to housekeeping staff, regarding the norms of disposal of BMW and strict warning given for no over filling of carriers. Target date: Immediate.	ICN Nursing Incharges Laboratory Incharge Housekeeping Supervisor NS

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Secretary

Noted. The minutes of meeting to attendees and concerned Depts.

UPPAL NEURO HOSPITAL

4, RANI KA BAGH, AMRITSAR.

BMW REGISTERED

DATE	ITEMS	QUANTITY Blue, Black, Red, Purple Blood Bags	AUTOCCLAVE TIME -1996	AUTOCCLAVE TIME -1996	STATUS	SUPERVISOR
28/05/20	Vials	112	1:15 Am	2:30 Am	P	Alu
29/05/20	Vials	138	4:05 Am	4:19 Am	P	Alu
30/05/20	Vials	128	2:10 Am	2:30 Am	P	Alu
31/05/20	Vials	81	5:05 Am	5:28 Am	P	Alu
JUNE 2020						
1/06/20	Vials	132	1:00 Am	1:16 Am	P	Alu
	Empty Blood Bags	1	1:00 Am	1:16 Am	P	Alu
2/06/20	Vials	116	7:10 Am	2:30 Am	P	Alu
3/06/20	Vials	96	6:15 Am	6:30 Am	P	Alu
4/06/20	Vials	80	1:15 Am	1:30 Am	P	Alu
	Empty Blood Bags	2	1:15 Am	1:30 Am	P	Alu
5/06/20	Vials	92	2:05 Am	2:20 Am	P	Alu
	Empty Blood Bags	2	2:05 Am	2:20 Am	P	Alu
6/06/20	Vials	112	12:00 Am	12:15 Am	P	Alu
	Empty Blood Bags	1	12:00 Am	12:15 Am	P	Alu
7/06/20	Vials	36	4:15 Am	5:00 Am	P	Alu
	Empty Blood Bags	1	4:15 Am	5:00 Am	P	Alu
8/06/20	Vials	114	5:10 Am	5:30 Am	P	Alu
	Empty Blood Bags	1	5:10 Am	5:30 Am	P	Alu
9/06/20	Vials	88	4:05 Am	4:20 Am	P	Alu
10/06/20	Vials	116	6:10 Am	6:25 Am	P	Alu
11/06/20	Vials	116	7:00 Am	7:16 Am	P	Alu
	Empty Blood Bags	1	7:00 Am	7:16 Am	P	Alu
12/06/20	Vials	92	1:00 Am	1:15 Am	P	Alu
	Empty Blood Bags	1	1:00 Am	1:15 Am	P	Alu
13/06/20	Vials	64	2:10 Am	2:25 Am	P	Alu
	Empty Blood Bags	1	2:10 Am	2:25 Am	P	Alu
14/06/20	Vials	35	4:10 Am	4:25 Am	P	Alu
	Empty Blood Bags	1	4:10 Am	4:25 Am	P	Alu
15/06/20	Vials	112	5:30 Am	5:45 Am	P	Alu
16/06/20	Vials	84	1:05 Am	1:20 Am	P	Alu



E-mail: neuroamritsar@yahoo.com

Website: www.uppalneurohospital.com

MANISHA SHARMA
B.B.S, M.D Pathology

CLINICAL LABORATORY SECTION

Sample Collecting Time 11:30 AM

Reporting Time 12:30 PM

PATIENT'S NAME: MOHINDER SINGH S/O S. JARNAIL SINGH

AGE/SEX: 37/M

Date: 01/04/2019

<u>INVESTIGATIONS</u>	<u>RESULT</u>	<u>UNITS</u>	<u>N. RANGE</u>
HAEMATOLOGY			
Hemoglobin	11.5	gm%	(12-16)
H.C.	6300	/cmm	(4500-11000)
H.C.	---		
Eutrophils	70	%	(50-75)
Lymphocytes	26	%	(20-45)
Monocytes	02	%	(0-4)
Eosinophils	02	%	(0-6)
Basophils	00	%	(0-1)
Blood Group A.B.O.	"A"		
	Positive		
U.R.	12	m.m. 1st Hour	(0-15)
BIOCHEMISTRY			
Glucose/R	99.6	Mg%	(upto 190)
Cholesterol	150.5	Mg%	(150-260)
URINE REPORT			
Urobilinogen	Nil		Bile Salts
Bilirubin	Nil		Bile Pigments

For UNH CLINICAL LAB

Contact : 98140-59696, 0183-2226696, 2229696 Drug Store: 2222408

e-mail: neuroamritsar@yahoo.com, Website: www.uppalneurohospital.com

Not for Medico Legal Purpose

STROKE HELPLINE: 9653-969696



UPPAL NEURO HOSPITAL

& MULTI SPECIALITY CENTRE

4-RANI KA BAGH, AMRITSAR.



E-mail: neuroamritsar@yahoo.com

Website: www.uppalneurohospital.com

R. MANISHA SHARMA
I.B.B.S, M.D Pathology

CLINICAL LABORATORY SECTION

Sample Collecting Time 01:00 PM

Reporting Time 02:00 PM

PATIENT'S NAME: MOHINDER SINGH S/O S. JARNAIL SINGH

AGE/SEX: 38/M

Date: 03/04/2020

INVESTIGATIONS

RESULT

UNITS

N. RANGE

HAEMATOLOGY

Haemoglobin	12.4	gm%	(12-16)
L.C.	5,500	/cmm	(4500-11000)
L.C.	----		
Neutrophils	56	%	(50-75)
Lymphocytes	40	%	(20-45)
Monocytes	02	%	(0-4)
Eosinophils	02	%	(0-6)
Basophils	00	%	(0-1)
Blood Group A.B.O.	"A"		
+	Positive		
S.R.	12	m.m. 1st Hour	(0-15)

BIOCHEMISTRY

Glucose/R	108.5	Mg%	(upto 190)
Cholesterol	175.7	Mg%	(150-260)

URINE REPORT

Albumin	Nil	Bile Salts
Sugar	Nil	Bile Pigments

For UNH CLINICAL LAB

Contact : 98140-59696, 0183-2226696, 2229696 Drug Store: 2222408
e-mail: neuroamritsar@yahoo.com, Website: www.uppalneurohospital.com
Not for Medico Legal Purpose

STROKE HELPLINE: 9653-969696

1/1

1/1



Annexure-9

7.8 F-01



TEST REPORT

PARTY CODE : U/PB/14961
 CUSTOMER NAME UPPAL NEURO HOSPITAL
 & ADDRESS
 Rani Ka Bagh, Amritsar, Punjab

REPORT NO. : SE0530000220
 REF. NO. : NS
 REF. DATE : NS
 DT.RECD : 30/05/2020



SAMPLE NAME : EFFLUENT WATER (STP-OUTLET)

RESULTS OF ANALYSIS

Reference : EP Act Standard

DESCRIPTION : One Effluent water sample from Outlet of STP was collected by us on 29/05/2020.

SAMPLING DATE : 29/05/2020

SAMPLE QTY. : 10 LTR.

S.No.	Parameters	Units	Results	Limit (Max.)	Protocols
1.	pH	NA	7.38	5.5 to 9.0	IS:3025 (P-11)
2.	Total Suspended Solids	mg/L	19	100	IS:3025 (P-17)
3.	Total Dissolved Solids	mg/L	746	NA	IS:3025 (P-16)
4.	Chemical Oxygen Demand	mg/L	52	250	IS:3025 (P-58)
5.	Biochemical Oxygen Demand (for 3 days at 27 Deg C)	mg/L	9	30	IS:3025 (P-44)
6.	Oil & Grease	mg/L	<3	10	IS:3025 (P-39)
7.	Bio-Assay	NA	90% survival of fishes after 96 hrs. in 100% effluent water	Min. 90% survival of fishes after 96 hrs. in 100% effluent water	IS:6582

Date of performance : 30/05/2020 to 06/06/2020

NA : Not Applicable

SELF ASSESSMENT PURPOSE ONLY

SAMPLE COLLECTED BY US

DATE : 06/06/2020

AUTHORISED SIGNATORY

REMARKS 1. Results listed refer only to the tested sample & applicable parameters. Endorsement of products is neither inferred nor implied. Page : 1 of 1
 2. Liability of laboratory is limited to the invoiced amount only. Any dispute arising out of this report shall be subject to Delhi jurisdiction only.
 3. This Report is not to be reproduced wholly or in part and cannot be used as an evidence in the Court of law and should not be used in any advertising media without special permission in writing.
 4. Sample shall be disposed off after issue of Test Report unless specified.
 5. A complaint register is available with the laboratory. admin

EMPTY
CYLINDER



REDMI NOTE 5 PRO
MI DUAL CAMERA

2020/11/4 19:00

MBBR-2

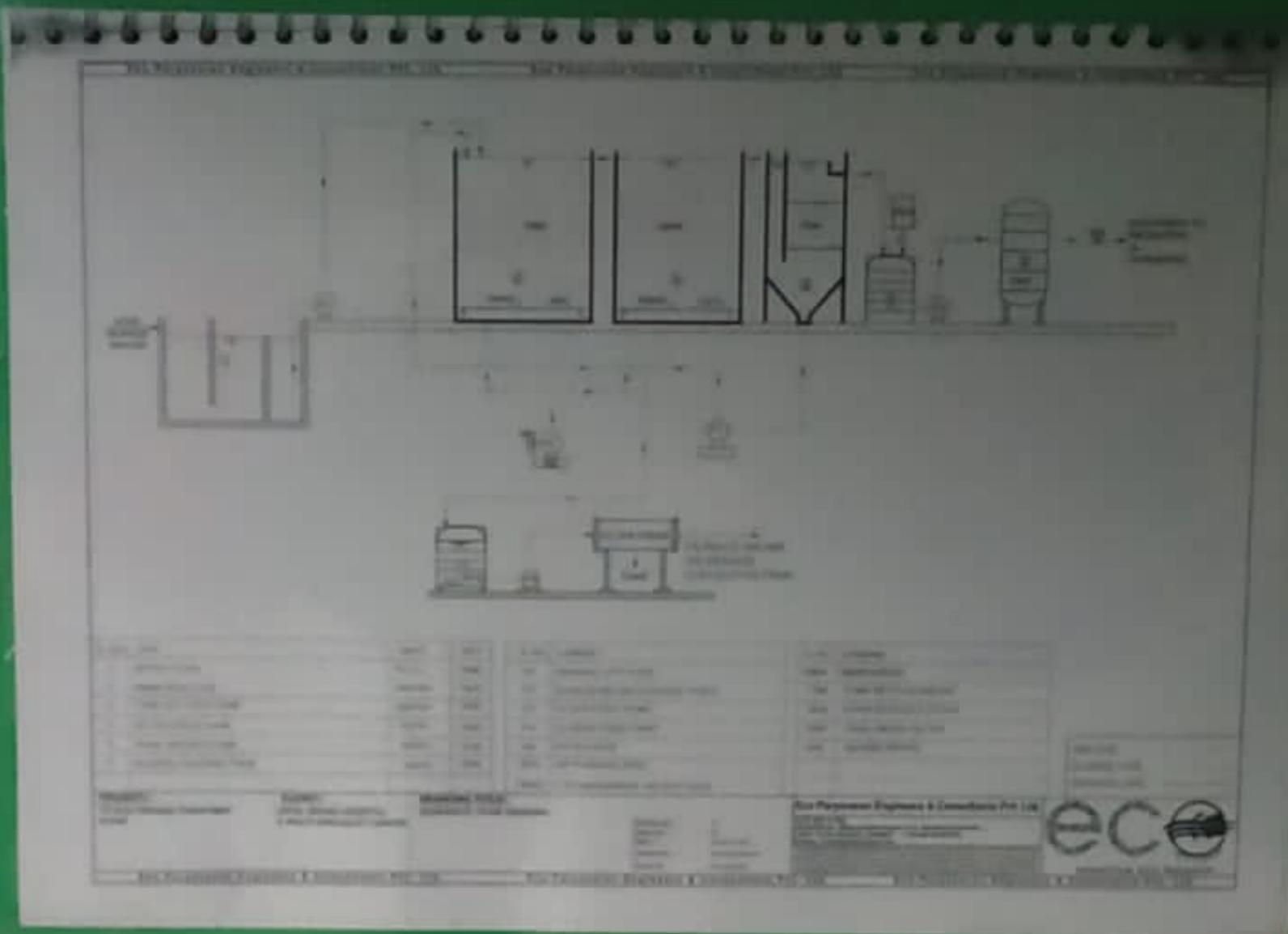
STP FLOW CHART



REDMI NOTE 5 PRO
MI DUAL CAMERA

2020/11/4 18:59

R-2



STP FLOW CHART



REDMI NOTE 5 PRO
MI DUAL CAMERA

2020/11/4 18:59



Punjab Fire Services
(Amritsar MC)



FIRE SAFETY CERTIFICATE
ਫਾਇਰ ਸੇਫਟੀ ਪ੍ਰਮਾਣ ਪੱਤਰ

NOC No 107-21108-Fire/14666

NOC Type: Renew

Dated 27-Apr-2020

Certified that the Uppal Neuro Hospital at 4, Rani Ka Bagh, Amritsar comprised of 2 basements and 4 (Upper floor) owned/occupied by Dr Ashok Uppal have complied with the fire prevention and fire safety requirements of National Building Code and verified by the officer concerned of fire service on 23-Apr-2020 in the presence of Dr Ashok Uppal (Name of the owner or his representative) and that the building / premises is fit for occupancy group Group-C subdivision C-1 (As per NBC) for period of one year from issue date. Subject to the following conditions.

Issued on 27-Apr-2020 at Amritsar MC

ਤਸਦੀਕ ਕੀਤਾ ਜਾਂਦਾ ਹੈ ਕਿ Uppal Neuro Hospital ਜੋ ਕਿ 4, Rani Ka Bagh, Amritsar ਸਮੇਤ 2 ਬੇਸਮੈਂਟ ਅਤੇ 4 (ਉੱਪਰਲੀ ਮੰਜ਼ਿਲ) ਮਲਕੀਅਤ/ਕਾਬਜ਼ਦਾਰ Dr Ashok Uppal ਨੂੰ ਅੱਗ ਬੁਝਾਉਣ ਦੇ ਪ੍ਰਭਾਵੀ ਅਤੇ ਬਚਾਅ ਦੇ ਰਾਸ਼ਟਰੀ ਬਿਲਡਿੰਗ ਕੋਡ ਅਨੁਸਾਰ ਜਿਸ ਨੂੰ ਸਬੰਧਤ ਅੱਗ ਬੁਝਾਉ ਅਧਿਕਾਰੀ ਵੱਲੋਂ ਪ੍ਰਮਾਣਿਤ ਕੀਤਾ ਗਿਆ 23-Apr-2020 ਮੌਜੂਦਗੀ ਵਿੱਚ Dr Ashok Uppal (ਮਾਲਕ ਦਾ ਨਾਮ ਜਾਂ ਉਸ ਦਾ ਪ੍ਰਤੀਨਿਧੀ) ਅਤੇ ਇਮਾਰਤ / ਬਿਲਡਿੰਗ ਆਬਾਦੀ ਲਈ ਯੋਗ ਹੈ। Occupancy Group Group-C subdivision C-1 (ਐਨ. ਬੀ. ਸੀ. ਦੇ ਅਨੁਸਾਰ) ਦੇ ਪ੍ਰਭਾਵੀ ਸਮੇਂ ਤੋਂ ਇੱਕ ਸਾਲ ਤੱਕ ਜਿਸ ਲਈ ਨਿਮਨ ਅਨੁਸਾਰ ਹਦਾਇਤਾਂ ਹਨ।

ਜਾਰੀ ਕਰਨ ਦੀ ਮਿਤੀ 27-Apr-2020 ਕਿੱਥੇ Amritsar MC.

1. Fire Safety arrangements shall be kept in working condition at all the times.
ਹਰ ਸਮੇਂ ਅੱਗ ਤੋਂ ਬਚਾਅ ਦੇ ਯੰਤਰਾਂ ਨੂੰ ਚਾਲੂ / ਚੰਗੀ ਹਾਲਤ ਵਿੱਚ ਰੱਖਿਆ ਜਾਵੇ।
2. No, alteration/ addition/ change in use of occupancy is allowed.
ਕਿਸੇ ਵੀ ਤਰ੍ਹਾਂ ਦੇ ਬਦਲਾਅ/ ਵਾਧੇ/ ਕਾਬਜ਼ਕਾਰ ਵਿੱਚ ਬਦਲਾਵ ਦੀ ਮਨਾਹੀ ਹੈ।
3. Occupants/ owner should have trained staff to operate the operation of fire safety system provided there in.

ਉਪਲੱਬਧ ਅੱਗ ਬੁਝਾਉਣ ਦੇ ਯੰਤਰਾਂ ਦੀ ਵਰਤੋਂ ਤੋਂ ਰਹਿਣ ਵਾਲੇ ਲੋਕਾਂ / ਮਾਲਕਾਂ ਨੂੰ ਜਾਣੂੰ ਕਰਵਾਇਆ ਜਾਣਾ ਯਕੀਨੀ ਬਣਾਇਆ ਜਾਵੇ।

4. Fire Officer can check the arrangements of fire safety at any time, this certificate will be withdrawn without any notice if any deficiency is found.

ਫਾਇਰ ਓਫਿਸਰ ਕਿਸੇ ਵੀ ਵਕਤ ਇਨ੍ਹਾਂ ਸਾਰੇ ਪ੍ਰਬੰਧਾਂ ਨੂੰ ਚੈੱਕ ਕਰ ਸਕਦਾ ਹੈ, ਜੇ ਕਰ ਕੋਈ ਕਮੀ ਪਾਈ ਗਈ ਤਾਂ ਬਿਨਾਂ ਕਿਸੇ ਨੋਟਿਸ ਦੇ ਇਹ ਸਰਟੀਫਿਕੇਟ ਰੱਦ ਸਮਝਿਆ ਜਾਵੇਗਾ।

5. Occupants/ owner should apply for renewal of fire safety certificate one month prior to expiry of this certificate.

04.27.2020 11:47 AM

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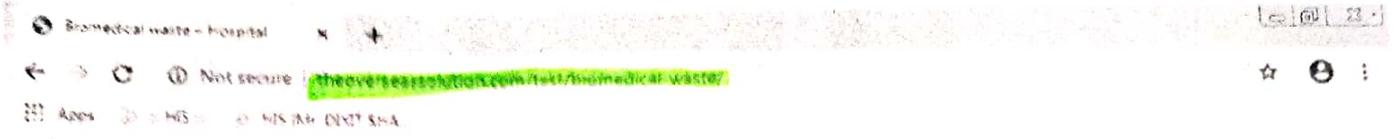
ਮਾਲਕ ਜਾਰੀ ਕੀਤੇ ਗਏ ਫਾਇਰ ਸੇਫਟੀ ਸਰਟੀਫਿਕੇਟ ਦੀ ਮਿਤੀ ਖਤਮ ਹੋਣ ਤੋਂ ਇੱਕ ਮਹੀਨਾ ਪਹਿਲਾਂ ਡਿਜੀਟਲ ਕਰਵਾਉਣ ਲਈ ਪਾਬੰਦ ਹੋਵੇਗਾ।

* Above Details cannot be used as ownership proof.

ਉਪਰੋਕਤ ਦਰਸਾਈ ਗਈ ਜਾਣਕਾਰੀ ਨੂੰ ਮਾਲਕਾਨਾ ਦੇ ਸਬੂਤ ਵਜੋਂ ਨਹੀਂ ਵਰਤਿਆ ਜਾਵੇਗਾ।

* This is digitally created certificate, no signatue are needed

ਇਹ ਡਿਜੀਟਲੀ (ਕੰਪਿਊਟਰਾਈਜ਼ਡ) ਤਿਆਰ ਕੀਤਾ ਗਿਆ ਸਰਟੀਫਿਕੇਟ ਹੈ, ਜਿਸ ਵਿੱਚ ਦਸਤਖਤ ਦੀ ਕੋਈ ਲੋੜ ਨਹੀਂ ਹੈ।



THIS PAGE IS UNDER CONSTRUCTION FOR SOME DAYS.
THANKYOU FOR YOUR COOPERATION.

The footer of the website is dark-themed and contains four main sections: 'About Uppal Neuro Hospital', 'Contact', 'News', and 'Search'.
About Uppal Neuro Hospital: UPPAL NEURO HOSPITAL in Amritsar Punjab, established on 14th Dec. 2000. This is most remarkable step in the medical history of Amritsar. We actively take initiative in bringing advance healthcare.
Contact: Address: UPPAL NEURO HOSPITAL, 4 Rani Ka Bagh, Amritsar -143001 Punjab. Call: 0183-2229696, 2226696 (Hosp). Email:
News: 1st AIMACON-2018, FREE CHECK-UP CAMP FOR KIDS WITH AUTISM, FREE NEURO CHECK-UP CAMP, World Health Day.
Search: A search input field with a magnifying glass icon on the right. A circular arrow icon is located at the bottom right of the footer area.



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.

DETAIL'S OF BIO-MEDICAL WASTE OF MARCH 2020:-

CATEGORY IN kg/DAY

DATE	RED	YELLOW	Puncture proof jar	Card Board (with Blue Mark)
01-03-2020	7.930	16.090	0.000	0.000
02-03-2020	6.050	10.140	0.000	0.000
03-03-2020	5.160	5.430	0.000	0.000
04-03-2020	9.670	27.610	0.000	37.200
05-03-2020	0.000	0.000	0.000	0.000
06-03-2020	11.070	13.140	0.000	15.570
07-03-2020	5.980	11.050	0.000	7.740
08-03-2020	6.630	19.670	0.000	0.000
09-03-2020	9.820	8.650	0.000	0.000
10-03-2020	0.000	0.000	0.000	0.000
11-03-2020	29.150	20.430	0.000	0.000
12-03-2020	9.390	16.370	0.000	0.000
13-03-2020	6.390	12.840	0.000	0.000
14-03-2020	11.960	42.730	0.000	0.000
15-03-2020	4.660	15.770	0.000	11.310
16-03-2020	49.060	8.190	1.100	0.000
17-03-2020	7.150	9.420	0.000	0.000
18-03-2020	7.510	7.300	0.000	0.000
19-03-2020	7.390	69.700	0.000	0.000
20-03-2020	15.110	9.350	0.000	0.000
21-03-2020	15.780	12.860	0.000	0.000
22-03-2020	0.000	0.000	0.000	0.000
23-03-2020	7.630	13.450	0.000	9.360
24-03-2020	6.170	7.200	0.000	8.520
25-03-2020	9.460	9.260	0.000	0.000
26-03-2020	5.380	7.800	0.000	0.000
27-03-2020	15.600	13.300	0.000	3.340
28-03-2020	10.800	20.210	0.000	9.300
29-03-2020	3.780	5.380	0.000	0.000
30-03-2020	0.000	0.000	0.000	0.000
31-03-2020	10.430	5.640	0.000	0.000
TOTAL	295.110	418.980	1.100	102.340


 Hospital Administrator
 Uppal Neuro Hospital
 4-Rani Ka Bagh,
 Amritsar.



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



DETAIL'S OF BIO-MEDICAL WASTE OF April 2020

CATEGORY IN kg/DAY

DATE	RED	YELLOW	Puncture proof jar	Card Board (with Blue Mark)
01-04-2020	8.420	7.530	0.000	0.000
02-04-2020	9.190	3.830	0.000	0.000
03-04-2020	8.000	14.480	2.200	0.000
04-04-2020	3.780	5.380	0.000	0.000
05-04-2020	11.790	7.860	0.000	0.000
06-04-2020	4.080	4.810	0.000	0.000
07-04-2020	8.800	6.920	0.000	0.000
08-04-2020	22.490	7.890	0.000	0.000
09-04-2020	5.180	11.870	0.000	0.000
10-04-2020	7.070	4.300	0.000	0.000
11-04-2020	0.000	0.000	0.000	0.000
12-04-2020	3.780	5.380	0.000	0.000
13-04-2020	2.630	3.950	0.000	0.000
14-04-2020	6.870	4.500	0.000	0.000
15-04-2020	6.870	4.500	0.000	0.000
16-04-2020	10.320	7.240	0.000	0.000
17-04-2020	6.700	3.710	0.000	0.000
18-04-2020	5.740	4.310	0.000	0.000
19-04-2020	8.580	11.700	0.000	0.000
20-04-2020	0	0	0.000	0.000
21-04-2020	5.840	7.980	0.000	0.000
22-04-2020	4.500	3.700	0.000	0.000
23-04-2020	2.500	10.400	0.000	0.000
24-04-2020	6.700	10.700	0.000	0.000
25-04-2020	5.100	4.000	0.000	0.000
26-04-2020	0.000	0.000	0.000	0.000
27-04-2020	5.900	8.800	0.000	10.800
28-04-2020	5.700	6.800	0.000	0.000
29-04-2020	5.600	6.900	0.000	0.000
30-04-2020	4.500	7.580	0.000	0.000
TOTAL	186.630	187.020	2.200	10.800


Hospital Administrator
Uppal Neuro Hospital
4-Rani Ka Bagh,
Amritsar.



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



DETAIL'S OF BIO-MEDICAL WASTE OF MAY 2020

CATEGORY IN kg/DAY

DATE	RED	YELLOW	Puncture proof jar	Card Board (with Blue Mark)
01-05-2020	5.700	6.300	0.000	0.000
02-05-2020	0.000	0.000	0.000	0.000
03-05-2020	8.100	14.800	0.000	0.000
04-05-2020	13.100	23.500	0.000	0.000
05-05-2020	13.300	8.300	0.000	0.000
06-05-2020	10.010	5.010	0.000	0.000
07-05-2020	8.010	5.040	0.850	12.400
08-05-2020	0.000	0.000	0.000	0.000
09-05-2020	9.050	8.010	0.000	0.000
10-05-2020	0.000	0.000	0.000	0.000
11-05-2020	13.010	7.010	0.000	0.000
12-05-2020	5.100	10.800	0.000	0.000
13-05-2020	9.010	5.000	0.000	0.000
14-05-2020	9.010	4.010	0.000	9.050
15-05-2020	6.010	3.050	0.000	0.000
16-05-2020	8.060	7.060	0.000	0.000
17-05-2020	13.010	6.500	0.000	0.000
18-05-2020	9.010	8.050	0.000	0.000
19-05-2020	7.050	4.050	0.000	0.000
20-05-2020	7.050	5.040	0.000	0.000
21-05-2020	6.010	8.900	0.000	0.000
22-05-2020	5.010	10.800	0.450	0.000
23-05-2020	12.800	8.180	0.000	0.000
24-05-2020	10.180	7.540	0.000	0.000
25-05-2020	9.010	7.050	0.000	0.000
26-05-2020	4.200	8.800	0.000	0.000
27-05-2020	7.100	3.120	0.000	12.000
28-05-2020	11.010	6.010	0.000	0.000
29-05-2020	10.980	7.500	0.000	0.000
30-05-2020	5.980	5.320	0.000	0.000
31-05-2020	0.000	0.000	0.000	0.000
TOTAL	235.870	204.750	1.300	33.450


Hospital Administrator
Uppal Neuro Hospital
4-Rani Ka Bagh,
Amritsar.



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



DETAIL OF BIO-MEDICAL WASTE OF June 2020

CATEGORY IN kg/DAY

DATE	RED	YELLOW	Puncture proof jar	Card Board (with Blue Mark)
01-06-2020	4.800	10.800	0.000	0.000
02-06-2020	12.330	10.830	0.000	4.800
03-06-2020	4.800	10.800	0.000	0.000
04-06-2020	9.700	6.700	0.000	12.800
05-06-2020	8.800	12.180	0.000	0.000
06-06-2020	0.000	0.000	0.000	0.000
07-06-2020	10.800	20.100	0.000	0.000
08-06-2020	9.700	6.700	0.000	12.800
09-06-2020	11.100	6.890	0.000	0.000
10-06-2020	5.100	9.100	0.000	0.000
11-06-2020	16.200	18.500	0.000	0.000
12-06-2020	10.800	3.180	0.000	5.800
13-06-2020	3.800	9.400	0.000	0.000
14-06-2020	7.600	6.100	0.000	0.000
15-06-2020	9.060	8.130	0.000	0.000
16-06-2020	7.240	2.990	0.000	0.000
17-06-2020	12.790	13.700	0.000	0.000
18-06-2020	8.240	8.340	0.000	0.000
19-06-2020	8.040	8.660	0.000	0.000
20-06-2020	12.790	13.700	0.000	0.000
21-06-2020	8.040	8.660	0.000	0.000
22-06-2020	0.000	0.000	0.000	0.000
23-06-2020	4.570	7.190	0.000	0.000
24-06-2020	7.500	9.110	0.000	0.000
25-06-2020	9.190	3.580	0.000	8.390
26-06-2020	8.750	9.110	0.000	0.000
27-06-2020	2.220	5.670	0.000	0.000
28-06-2020	8.480	6.480	0.000	11.380
29-06-2020	8.950	17.220	3.720	0.000
30-06-2020	6.570	9.120	0.000	0.000
TOTAL	237.960	262.940	3.720	55.970


Hospital Administrator
Uppal Neuro Hospital
4-Rani Ka Bagh,
Amritsar.



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



DETAIL'S OF BIO-MEDICAL WASTE OF JULY 2020

CATEGORY IN kg/DAY

DATE	RED	YELLOW	Puncture proof jar	Card Board (with Blue Mark)
01-07-2020	6.060	14.280	0.000	0.000
02-07-2020	3.260	5.930	0.000	0.000
03-07-2020	7.810	12.310	0.000	0.000
04-07-2020	5.650	4.760	0.000	0.000
05-07-2020	5.650	4.760	0.000	0.000
06-07-2020	7.000	14.000	0.000	0.000
07-07-2020	3.520	7.420	0.000	0.000
08-07-2020	21.550	12.770	0.000	4.830
09-07-2020	10.600	10.290	0.000	12.260
10-07-2020	8.840	11.270	0.000	4.320
11-07-2020	9.970	5.140	3.000	0.000
12-07-2020	5.860	13.700	0.000	0.000
13-07-2020	9.060	3.710	0.000	0.000
14-07-2020	9.050	3.710	0.000	0.000
15-07-2020	24.280	14.300	0.000	12.820
16-07-2020	9.520	8.960	0.000	0.000
17-07-2020	7.530	18.110	0.000	0.000
18-07-2020	19.010	3.500	0.000	0.000
19-07-2020	10.010	13.980	0.000	2.620
20-07-2020	8.700	8.750	0.000	17.090
21-07-2020	8.750	8.700	0.000	17.900
22-07-2020	8.440	5.980	0.000	0.000
23-07-2020	10.010	13.980	0.000	2.620
24-07-2020	14.550	22.680	0.000	0.000
25-07-2020	22.880	9.960	0.000	0.000
26-07-2020	6.840	7.600	0.000	0.000
27-07-2020	5.350	11.160	0.000	0.000
28-07-2020	12.500	3.420	0.000	0.000
29-07-2020	16.180	15.160	0.000	0.000
30-07-2020	16.900	15.160	0.000	0.000
31-07-2020	0.000	0.000	0.000	0.000
TOTAL	315.330	305.450	3.000	74.460


Hospital Administrator
Uppal Neuro Hospital
4-Rani Ka Bagh,
Amritsar.



UPPAL NEURO HOSPITAL

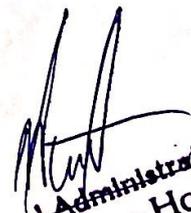
4-RANI KA BAGH, AMRITSAR.



DETAIL'S OF BIO-MEDICAL WASTE OF AUGUST 2020

CATEGORY IN kg/DAY

DATE	RED	YELLOW	Puncture proof jar	Card Board (with Blue Mark)
01-08-2020	16.320	12.600	0.000	7.010
02-08-2020	0.000	0.000	0.000	0.000
03-08-2020	12.570	10.800	0.000	0.000
04-08-2020	14.500	17.580	0.000	0.000
05-08-2020	11.180	10.860	0.000	0.000
06-08-2020	7.180	13.100	0.000	0.000
07-08-2020	14.510	25.360	0.000	0.000
08-08-2020	12.760	32.980	0.000	0.000
09-08-2020	0.000	0.000	0.000	0.000
10-08-2020	9.050	5.860	0.000	8.020
11-08-2020	4.800	11.120	0.000	0.000
12-08-2020	4.260	8.840	0.000	0.000
13-08-2020	4.800	8.120	0.000	0.000
14-08-2020	5.180	10.200	0.000	0.000
15-08-2020	15.860	8.222	2.090	0.000
16-08-2020	11.200	9.800	0.000	0.000
17-08-2020	4.420	8.700	1.540	8.170
18-08-2020	14.520	14.190	0.000	0.000
19-08-2020	5.010	8.950	0.000	0.000
20-08-2020	9.860	3.360	0.000	0.000
21-08-2020	4.570	10.150	1.370	19.310
22-08-2020	3.840	7.040	0.000	0.000
23-08-2020	17.120	22.280	0.000	0.000
24-08-2020	11.130	12.570	0.000	5.800
25-08-2020	14.230	27.210	0.000	0.000
26-08-2020	5.320	6.780	0.000	0.000
27-08-2020	7.170	18.590	0.000	12.010
28-08-2020	17.980	12.010	0.000	0.000
29-08-2020	7.800	13.200	0.000	0.000
30-08-2020	3.000	7.050	0.000	0.000
31-08-2020	8.110	13.900	0.000	10.110
TOTAL	278.250	371.422	5.000	70.430


Hospital Administrator
Uppal Neuro Hospital
4-Rani Ka Bagh,
Amritsar.



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



DETAIL'S OF BIO-MEDICAL WASTE OF SEPTEMBER 2020

CATEGORY IN kg/DAY

DATE	RED	YELLOW	Puncture proof jar	Card Board (with Blue Mark)
01-09-2020	14.870	9.100	0.000	0.000
02-09-2020	8.700	17.110	0.000	15.800
03-09-2020	6.700	14.880	0.000	0.000
04-09-2020	5.100	8.980	0.000	0.000
05-09-2020	9.000	7.140	0.000	14.870
06-09-2020	9.200	15.980	0.000	0.000
07-09-2020	7.800	13.120	0.000	0.000
08-09-2020	8.650	12.980	0.000	9.700
09-09-2020	5.120	7.550	0.000	0.000
10-09-2020	6.180	14.800	0.000	0.000
11-09-2020	8.700	33.800	0.000	0.000
12-09-2020	13.500	8.970	0.000	0.000
13-09-2020	6.880	12.800	0.000	0.000
14-09-2020	4.122	7.800	0.000	0.000
15-09-2020	0.000	0.000	0.000	0.000
16-09-2020	12.880	40.800	0.000	0.000
17-09-2020	10.700	12.870	0.000	8.010
18-09-2020	8.410	14.780	0.000	0.000
19-09-2020	6.800	8.900	0.000	0.000
20-09-2020	6.800	8.900	0.000	0.000
21-09-2020	16.100	11.100	0.000	18.700
22-09-2020	7.400	11.500	0.000	0.000
23-09-2020	8.700	12.700	0.000	0.000
24-09-2020	7.800	7.870	0.000	0.000
25-09-2020	0.000	0.000	0.000	0.000
26-09-2020	9.800	14.400	0.000	0.000
27-09-2020	13.120	23.990	1.590	0.000
28-09-2020	8.700	10.980	0.000	5.100
29-09-2020	9.500	12.900	0.000	0.000
30-09-2020	9.010	12.500	0.000	0.000
TOTAL	250.242	389.200	1.590	72.180


Hospital Administrator
Uppal Neuro Hospital
4-Rani Ka Bagh,
Amritsar.



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



DETAIL'S OF BIO-MEDICAL WASTE OF OCTOBER 2020

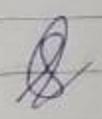
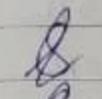
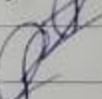
CATEGORY IN kg/DAY

DATE	RED	YELLOW	Puncture proof jar	Card Board (with Blue Mark)
01-10-2020	8.300	6.390	0.000	0.000
02-10-2020	0	0	0.000	0.000
03-10-2020	9.820	19.600	0.000	0.000
04-10-2020	22.630	7.970	0.000	18.700
05-10-2020	6.807	18.220	1.150	0.000
06-10-2020	8.080	18.200	1.150	0.000
07-10-2020	5.130	11.880	0.000	0.000
08-10-2020	6.730	9.700	0.000	0.000
09-10-2020	8.190	5.920	0.000	0.000
10-10-2020	13.600	27.050	0.000	13.470
11-10-2020	0.000	0.000	0.000	0.000
12-10-2020	10.200	14.930	5.110	0.000
13-10-2020	9.040	19.630	0.000	0.000
14-10-2020	8.820	9.530	0.000	0.000
15-10-2020	8.160	7.480	0.000	0.000
16-10-2020	11.820	6.740	0.000	0.000
17-10-2020	12.820	6.470	0.000	0.000
18-10-2020	0.000	0.000	0.000	0.000
19-10-2020	10.300	14.590	0.000	0.000
20-10-2020	10.740	10.720	2.990	0.000
21-10-2020	6.090	10.820	0.000	0.000
22-10-2020	0.000	0.000	0.000	0.000
23-10-2020	11.470	6.410	0.000	0.000
24-10-2020	8.330	9.740	0.000	9.490
25-10-2020	7.800	10.770	0.000	0.000
26-10-2020	10.350	10.590	0.000	0.000
27-10-2020	11.470	6.410	0.000	0.000
28-10-2020	10.930	9.710	0.000	0.000
29-10-2020	11.740	12.810	1.050	11.210
30-10-2020	18.870	10.440	0.000	4.250
31-10-2020	5.000	7.710	0.000	0.000
TOTAL	273.237	310.430	11.450	57.120


Hospital Administrator
Uppal Neuro Hospital
4-Rani Ka Bagh,
Amritsar

DR Date	Item's	Quantity of vials and Blood bags	Autoclave Cycle start time	Autoclave cycle end time	Signo of staff	Supervisor Sign
29 1/10/2020	Vials	110	5:50 Am	6:05 Am	Pharma	[Signature]
28 2/10/2020	Vials	90	4:35 Am	4:50 Am	Inspected	[Signature]
3 3/10/2020	Vials	82	5:20 Am	5:35 Am	Inspected	[Signature]
4 4/10/2020	Empty Blood bags	02	] 5:45 Am	6:00 Am	Inspected	[Signature]
	Vials	92				
5 5/10/2020	Empty blood bags	02	] 5:30 Am	5:45 Am	Inspected	[Signature]
	Vials	77				
6 6/10/2020	Vials	36	4:40 Am	4:25 Am	Inspected	[Signature]
7 7/10/2020	Vials	67	5:30 Am	5:50 Am	Inspected	[Signature]
8 8/10/2020	Vials	78	5:00 Am	5:20 Am	Inspected	[Signature]
9 9/10/2020	Empty blood bags	01	] 5:30 Am	5:50 Am	Inspected	[Signature]
	Vials	73				
10 10/10/2020	Vials	105	6:30 Am	6:45 Am	Inspected	[Signature]
11 11/10/2020	Vials Empty blood bags	79 01	] 4:50 Am	9:10 Am	Inspected	[Signature]
	Empty blood bags	01				
12 12/10/2020	Empty blood bags	02	] 5:40 Am	5:55 Am	Inspected	[Signature]
	Vials	107				
13 13/10/2020	Empty blood bags	4	] 5:40 Am	6:00 Am	Inspected	[Signature]
	Vials	50				
15 15/10/2020	Empty blood bags	01	] 5:30 Am	5:45 Am	Inspected	[Signature]

Date	Item's	Quantity of vials and blood bag's	Autoclave cycle Start time	Autoclave cycle End time
	Vials	65	5:30 Am	5:45 Am
16/10/2020	Empty blood bags	01	] 5:45 Am	6:30 Am
	Vials	50		
17/10/2020	Vials	89	8:20 Am	8:35 Am
18/10/2020	Empty blood bags	03	] 6:30 Am	6:45 Am
	Vials	79		
19/10/2020	Vials	87	6:00 Am	6:15 Am
21/10/2020	Vials	97	5:00 Am	5:15 Am
24/10/2020	Vials	100	4:30 Am	4:45 Am
22/10/2020	Vials	110	5:00 Am	5:20 Am
23/10/2020	Vials	57	6:00 Am	6:15 Am
24/10/2020	Vials	70	5:00 Am	5:20 Am
26/10/2020	Vials	67	5:30 Am	5:45 Am
28/10/2020	Vials	68	6:30 Am	6:45 Am
27/10/2020	Vials	75	5:10 Am	5:25 Am
28/10/2020	Vials	85	4:40 Am	5:00 Am
29/10/2020	Vials	96	6:15 Am	6:35 Am
30/10/2020	Vials	82	7:00 Am	7:15 Am
31/10/2020	Vials	95	5:30 Am	5:50 Am
	Empty blood bags	06	5:30 Am	5:50 Am

Sign of Staff	Supervisor Sign
Shameer	
John	
Shirakki	
Suspect	
Suspect	
Suspect	
Suspect	
Suspect	
Suspect	
Suspect	
Suspect	

DATE	ITEMS	QUANTITY		Autoclave START TIME	Autoclave END TIME
		Red	Blue		
28-5-22	EMPTY	2		5-0-AM	5-15M
28-5-22	Blank	76		5-0-AM	5-35M
28-5-22	Vials	57		5-0-AM	5-15M
30-5-22	Vials	109		6-30-AM	6-45AM

SIGN SUPERVISOR

V	R
V	R
V	R
V	R

 **भारत सरकार**
Government of India

 Ashu Dala
Date of Birth/DOB: 24/06/1974
Female/ FEMALE

8502 1995 4451
VID: 9190 8386 9796 6029

मेरा आधार, मेरी पहचान

 **भारतीय विशिष्ट पहचान प्राधिकरण**
Unique Identification Authority of India

Address:
C/O Ravinder Pal, Hno 461/1, Gali No-7,
Vikas Nagar Khandwala, Chheharta,
Amritsar -I, Amritsar,
Punjab - 143105

8502 1995 4451
VID: 9190 8386 9796 6029

Ashu



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



MEDICAL EXAMINATION

Employee Name:- <i>Mrs. Asho Bala</i>	Designation:- <i>House-keeping Supervisor</i>
Date of joining:- <i>01-09-2020</i>	Department:- <i>Admin</i>
Date of Birth/Age:- <i>45/F</i>	Medical: <input checked="" type="checkbox"/> <i>Joining/yearly</i>

S. No	DIAGNOSTIC INVESTIGATION	FINDING	DATE
1.	Hemoglobin(HB)	<i>411.4 gm^u</i>	<i>01-09-2020</i>
2.	TLC DLC	<i>61600 65, 30, 02, 03, 00</i>	<i>01-09-2020</i>
3.	ESR	<i>15</i>	<i>01-09-2020</i>
4.	Blood Group	<i>4 B + ve u</i>	<i>01-09-2020</i>
5.	Urine Routine	<i>NAD</i>	<i>01-09-2020</i>
6.	X-ray Chest (PA view)	<i>Reports Attached</i>	<i>01-09-2020</i>
7.	Cholesterol (Above 60 yrs. Of age)	<i>—</i>	<i>—</i>
8.	Glucose (Above 60 yrs. Of age)	<i>—</i>	<i>—</i>
9.	ECG (Above 60 yrs. Of age)	<i>—</i>	<i>—</i>

General physician: Observation & Remarks:

Fit to join work.

Date: *01-09-2020*





UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



UHID	: UNH/20/005054	Consultant	: Dr. Ashok Uppal
Patient Name	: Mrs. ASHU BALA 45.2 YRS / Female	Reg. Date	: 01-Sep-2020 04:55 PM
Relative Name	: W/O RAVINDER PAL	Sample Collection	:
Contact No.	: 9876296977	Report Date/Time	: 01-Sep-2020 08:05 PM
Panel	: CASH	Approved Date/Time	: 03-Sep-2020 04:03 PM
Address	: HOUSE NO-1686, V.P.O JANDALA GURU	IPD No.	:

Powered By: Ndosse Infosystems Pvt.

BIOCHEMISTRY

Test Name	Status	Result	Reference Range	Unit
CBC SHORT BIO				
Haemoglobin (Hb)	L	11.4*	12.0-16.0	g/dL
TLC (Total Leucocyte Count)		6,600	4000-11000	/cumm
DLC				
Neutrophil		65	50-75	%
Lymphocyte		30	19-46	%
Monocytes		02	0-5	%
Eosinophils		03	0-7	%
Basophils		00	0-1	%
Red Blood Cells		4.7	4.4-5.7	million/cmm
Packed Cell Volume	L	33*	36-46	%
MCV		89	80-100	fL
MCH		34	26-34	pg
MCHC		37	31-37	g/dL
Platelet Count		2.34	1.50-4.00	Lakh/cumm
Erythrocyte Sedimentation Rate (ESR)		15	0-20	mm/h
Biochemistry				
Blood Glucose Random		91.6	80.0-145	mg/dL
Blood Urea		25.6	10-45	mg/dL
Creatinine		0.95	0.6-1.3	mg/dL
Bilirubin Total		0.87	0.2-1.2	mg/dL
SGPT (ALT), Serum		36.1	10-45	U/L
Urine Routine Examination				
Urine Albumin		Nil		g/dL

Contact: 98140-59696, 0183-2226696, 2229696 Drug Store: 2222408
 e-mail: neuroamritsar@yahoo.com, Website: www.uppalneurohospital.com
 Not For Medical/Legal Purpose

STROKE HELPLINE: 9653-969696



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



LHID	: UNH20/005054		Consultant	: Dr. Ashok Uppal
Patient Name	: Mrs. ASHU BALA 45.2 YRS / Female		Reg. Date	: 01-Sep-2020 04:55 PM
Relative Name	: W/O RAVINDER PAL		Sample Collection	:
Contact No.	: 9878290977		Report Date/Time	: 01-Sep-2020 08:05 PM
Panel	: CASH		Approved Date/Time	: 03-Sep-2020 04:03 PM
Address	: HOUSE NO-1585, V.P.O JANDALA GURU		PO No.	:

Urine Glucose	NB	
Microscopic Examination	NB	
Pus Cell	NB	
Epithelial Cells	2-3	2-3
RBC	3-4	0-4
Crystals	NB	
Candida Albicans	NB	

BLOOD GROUP (ABO & RH FACTOR)

ABO	* B *
Rh Typing	Positive

*** End of Report ***

Dr. Manisha Sharma
M.B.B.S., M.D. Pathology

Contact: 98140-59496, 9183-2226096, 2229086 Drug Store: 2222468
e-mail: neuroamr@yatox.com, Website: www.uppalneurohospital.com
NOT FOR MEDICAL PURPOSE

Page 1 of 3

STROKE HELPLINE: 9653-969696

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UPPAL IMAGING CENTRE

A Unit of Uppal Neuro Hospital
4, RANI KA BAGH, AMRITSAR.



NAME: ASHU BALA
Emp. Code:

AGE/SEX: 48YR /F
Date: 01/09/2020

X-RAY CHEST (P A VIEW)

FINDINGS:

Soft tissue shadows and bony cage are normal

Heart size is normal

No lung lesion is seen

Both the domes and diaphragms are normal configuration.

Both CP angles are clear.

Please correlate clinically.

Puneet Garg

Dr Puneet Garg
Consultant Radiologist
MBBS, MD, PDCC, FRCR Radiodiagnosis

Disclaimer: Impression is a professional opinion and not a diagnosis. The science of radiological diagnosis is based on the interpretation of various shadows and is neither complete nor accurate. All modern machines/procedures have their limitations. Further pathological and radiological investigations with clinical correlations are required to enable the clinician to reach the final diagnosis. In case of any clinical/other discrepancy, please contact. Hard copy is attached for review. Not for medico-legal purposes. Patient identity cannot be verified.

stroke Helpline : 9653-969696

Not for Medico Legal Purposes

Scanned with CamScanner

Scanned with CamScanner



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



VACCINATION FORM

Employee Name:- Ashu S/W/D/O: SR. Ravinder Kaur Emp. ID: 778

D.O.J. Designation:- Supervisor Department:- Housekeeping

Hepatitis B Vaccination Schedule	Date of Vaccination	Vaccination Given By		Emp. Signature
		Name & Designation	Signature	
1 st Dose	<u>22-9-2020</u>	<u>LCM dasmanpreet</u>	<u>[Signature]</u>	<u>Ashu</u>
2 nd Dose (1 month after 1 st Dose)	<u>27-10-2020</u>	<u>Ashu LCM dasmanpreet</u>	<u>[Signature]</u>	<u>Ashu</u>
3 rd Dose (6 month after 1 st Dose)				
Booster Dose (after 5 years)				
Injection Tetanus Toxoid	<u>29-9-2020</u>	<u>LCM dasmanpreet</u>	<u>[Signature]</u>	<u>Ashu</u>

Jasmanpreet
Approved by/Signature by:

Roll No. B/210

JHARKHAND PRADESH BOARD OF SCHOOL EDUCATION

MATRICULATION EXAMINATION

NOVEMBER, 1990

This is to certify that
Son/Daughter of Shri Sudershan Lal
 born on **24.6.74** Twenty Fourth June
 One thousand nine hundred and **Seventy Four**

has passed the MATRICULATION EXAMINATION of this Board
 from as **Private Candidate**
 District **Kangra**
 and placed in **Third Division**

DETAIL OF MARKS

Sl. No	Subjects	Marks obtained	Max. Marks
1	English	46	100
2	Mathematics	38	100
3	Hindi	68	100
4	Social Science (His Civ. Geo)	47	100
5	Science (Phys. Chem. Life Sci)	47	100
6	Urdu	26	100
7	Sanskrit (Elective)	64	100
TOTAL		310	700

* Denotes Distinction - 75% marks or above
 F indicates failure in the subject & marks not included in the Grand Total

NON-EXAMINATION SUBJECTS INTERNAL (FOR SCHOOL CANDIDATES ONLY)

- 1. Socially useful productive work and Community Service
- 2. Physical and Health Education
- 3. Education for Human Values and Supervised Studies

Note: For graduation of Non-Examination Subjects, please see overleaf



[Signature]

JHARKHAND PRADESH BOARD OF SCHOOL EDUCATION

SENIOR SECONDARY (PLUS TWO) EXAMINATION MARCH-1992

This is to certify that
Son/Daughter of Shri

ASHU PASSI
SUDERSHAN LAL PASSI

has passed the PLUS TWO EXAMINATION of this Board

from **M.C.M. D.A.V. COLLEGE, KANGRA**

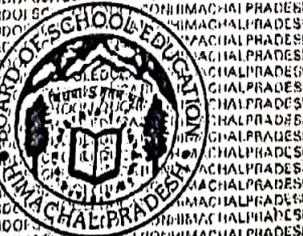
District **KANGRA**

and placed in **THIRD** Division

DETAIL OF MARKS

Sr. No.	Subject	Marks obtained	Max. Marks
1	English	41	100
2	HISTORY	41	100
3	POLITICAL SCIENCE	44	100
4	HINDI	35	100
5	(Additional)	11	100
6	(Additional)	11	100
Total		161	400

Denotes Distinction: 75% marks or above
 2. The Marks of Additional Subjects have not been included in the aggregate
 3. Where the candidate has failed in the Elective Subject, the marks of Additional Subjects have been accounted towards aggregate & division



Ashu Passi
 ASSISTANT SECRETARY

BY **RAMSHANKAR**
 31/3/97

RANJIT HOSPITAL

(A SUPER SPECIALITY CENTRE)

DATE :- 01-09-2020

Ref. No: RHASR/HR/AUG.29.126

TO WHOM IT MAY CONCERN

This is to certify that Mrs. Ashu Bala W/o Mr. Ravinder Pal R/o Gali No. 7, Vikas Nagar, Khandwala Chheharta, Amritsar has worked in this hospital as a Maintenance Incharge, House Keeping, Store Incharge & Bio Medical from 01/12/2012 to 31/09/2020. Her conduct and professional output was found to be good. She is hard working and dedicated worker. She was in good terms with her fellow staff members and her seniors.

We wish her success for her future endeavours.

Ranjit Hospital
G. T. Road, Putlghar, Amritsar
Dr. Manpreet Singh
MD
Ranjit Hospital, Amritsar

NOT FOR MEDICO LEGAL PURPOSE

Phone : 9814-550-550, 70874-32776

Email : ranjithospital57@yahoo.in, drmanpreet2004@yahoo.com

G.T. Road, Putlghar, Amritsar

आयकर विभाग
INCOME TAX DEPARTMENT

भारत सरकार
GOVT. OF INDIA

ASHU BALA
SUDERSHAN LAL
24/06/1974

Permanent Account Number
BXAPB7752E

Ashu
Signature



Ashu

Nomination Name : DIKSHA
 Branch Timings : 09.30 AM TO 05.30 PM (Working Days)
 Deposit Insurance and Credit Guarantee Corporation (DICGC) insurance cover is applicable to all banks' deposits, such as saving, current, fixed, recurring etc. up to maximum amount of Rs 1 Lakh including principal & interest held in the account.
 Mobile Banking (24x7) Bank on the go with Axis Mobile App, to download, visit Google Play Store or Apple App Store of SMS NIBANK to 5676782
 Phone Banking (24x7) : 18604195555/18605005555
 SMS Banking (24x7) : 18604195555/18605005555
 For more details please refer www.dicgc.org.in


Internet Banking (24x7): Monitor, transact and control your bank account online with our internet banking service. Log on to www.axisbank.com to get started.


Phone Banking (24x7): Access your account through our IVR, place service requests, provide feedback or lodge complaints. Talk to Phone Banking Associates at 1860 419 5555 or 1860 500 5555


ATM (24x7): Withdraw cash, check balance, update mobile number, request chequebook and more. To locate ATM, SMS "ATM (PIN CODE)" to 5676782

Please ensure safe custody of Passbook to protect confidentiality of the Information contained herein.
 For more secure and personalised information register for e-statements by sending SMS - GREEN <e-mail ID> to 5676782.

AXIS BANK LTD

Account Type : Savings Account
Account Number : 914010045844808
Customer Id : 854721561
Customer Name : ASHU RANI
Joint Holder 1 :
Joint Holder 2 :
A/c Open Date : 17-01-2015
Address : 45, CHABAL ROAD, SHAHEED UDHAM SINGH COLONY AMRITSAR UDHAM COLONY AMRITSAR - 143001.

Branch Code : 1814
Branch Name : PUTLIGHAR AMR PB
Branch Address : GR FLR, PLOT NO.3, OPP RANJIT HOSEI G.T. ROAD, PUTLIGHAR, AMRITSAR - 143001.

Mob No : +00()919876296977
Res Tel No :
Nomination : Registered

Tel No (Branch) : 0183-5031730/1/2/33
Swift Code : AXISINBB179
NICR Code : 143211009
IFSC Code : UTIB0001814

ASHU



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



SERVICE RULES

1. Employee Rights:

- Employee has the right against discrimination and harassment.
- Employee has the right to take a lunch break during the day as per the hospital policy.
- Employee has the right to avail the medical benefits as per the policy laid down by the Hospital.
- Employee has the right to register a complaint or file a grievance as per the laid down grievance procedure of the Hospital.
- Employee has the right to get the salary as per the laid down rule for the number of days worked for the previous month.
- Employee has the right to choose not to continue working with the hospital by serving two month notice period as applicable to him/ her.
- Employee has the right to a safe workplace.
- Employee has the right to ask for his/ her role clarity.
- Employee has the right to seek guidance from seniors.
- Employee has the right to be treated with respect and dignity.

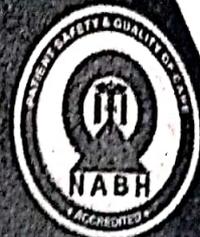
2. Employee Responsibilities:

- Employee has the responsibility to arrive at work in time.
- Employee has the responsibility to dress suitably for the job (uniform in case applicable for the job).
- Employee has the responsibility to obey safety rules.
- Employee has the responsibility not to discriminate or harass others at the workplace.
- Employee has the responsibility not to act in any way that puts the employee or others at risk of injury at the workplace.
- Employee has the responsibility to notify supervisor /HOD prior to absence. In the event of emergencies, when prior notification is not possible, employees are obligated to notify their supervisor/HOD of their absence at the earliest possible time.
- Employee has the responsibility to be familiar with the work standards associated with his /her job performance. Standards for work performance may be obtained from the supervisor
- Employee has the responsibility to Inform HR department for change in name, address, telephone number, marital status or number of dependents.
- Employee has the responsibility to wear ID card during the duty hours and while being in the premises.
- Employee has the responsibility to immediately report injuries or accidents.
- Employee has the responsibility to complete ongoing education/training appropriate to their role or as stipulated by the department concerned.
- Employee has the responsibility to carry out reasonable requests and instructions of the supervisor.
- Employee has the responsibility for maintaining confidentiality at workplace.



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



3. Security Deduction and Refund policy

- After the joining of an employee his/her one month salary will be kept as security. This security will be deducted in maximum two installments. The security will be refunded at the time of leaving the job (If 2 month notice period is served by the employee, otherwise security will be forfeited) after submitting the identity card, hospital assets (laptop, mobile etc.) and clearing no dues with every department.

4. Paid Leave Policy:

Paid leave will be granted in two cases only for marriage and maternity. Duration of paid leave is 30 days in Maternity and 7 days in case of Marriage. The cases employee is entitled for paid leave who has completed 2 years of his/her service without any gap.

Marriage leave will be granted for 1 marriage only.

Maternity leave will be granted for maximum 2 children.

5. General Leave policy:

General Leaves: An employee is entitled to 4 Day Offs a month already mentioned in duty rosters & duly approved by HOD.

Casual Leaves: An employee after 6 months of service in the hospital shall be entitled to 6 casual leaves annually. Such leaves cannot be extended to next year & no encashment will be provided against such leaves.

An Employee should inform his/her immediate superior/in-charge in advance.

Casual leaves needs to be intimated and approved at least 1 day prior.

In case of medical leave, original medical certificate should be provided along with leave application.

Gazetted Leaves: An employee is entitled to 4 Gazetted leaves.

Lohri, Diwali, Shri Guru Nanak Dev Ji Jayanti & Christmas.

Leaves will be allotted from 1st APRIL TO 31st MARCH (financial year)

Contact : 98140-59896, 0183-2226696, 2229696 Drug Store: 2222408
e-mail: neuroamritsar@yahoo.com, Website: www.uppalneurohospital.com
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UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



6. CREDENTIAL POLICY:

At the time of joining, employee has to submit all the following documents to the HR Dept:

- Academic certificates.
- Relieving Letter/Experience certificates.
- Last salary slip from the previous employer.
- 5 passport size photographs.
- Passport copy/license copy/voter ID copy/Adhar card
- PAN No.
- PF/ESI status, if any
- Police verification Proof/self affidavit (NOTARY ATTESTED)
- Personal Bank Account details

MEDICAL BENEFITS

PARAMETERS	EMPLOYEE (SELF)	FIRST BLOOD RELATIVE	ANYOTHER RELATIVE
OPD CONSULTATION	COMPLIMENTARY	COMPLIMENTARY	20%
OPD & IPD INVESTIGATION (LAB & RADIOLOGY)	50%	25%	15%
PHARMACY	20%	10%	5%
IPD ADMISSION	COMPLIMENTARY	30%	10%
IPD PROCEDURE & SURGERY	SURGERY CHARGES ONLY	20%	10%

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Asb



UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



7. EXIT POLICY

- Resignations to be submitted in HR Dept by last week of every month.
- Resignations to be signed by the unit heads will be entertained by HR.
- HR to show the resignations to MD for the final acceptance.
- HR informs the concerned staff regarding the approval.
- Two month notice period to be served by the leaving staff in order to get experience and security (Which will end on last day of every month)
- During the notice period only 4 day off and 1 Casual leave will be provided.
- 24hour resigns will not be entertained and no experience or security to be released in such cases.
- On the last day of the service, exit feedback & NO DUES form to be filled by employee.
- Employee has to submit the ID card and Name plate to HR on last day of employment.
- Personal meeting of the leaving candidate with MD.
- Farewell for the leaving staff in the presence of MD, NS, Concerned Department incharge and HR.
- Dues to be cleared by 10th of next month.
- In some cases dues are cleared on the last day of candidate (in case of candidate going abroad or terminated by hospital)

Note: Experience will be counted from the day on which employee has submitted his/her complete documents.

I HAVE READ AND UNDERSTOOD ALL THE TERM AND CONDITIONS MENTIONED IN THE SERVICE RULE

SALARY: 18,000/-

Name: - Aashima

Signature: - [Signature]

Designation: - Housekeeping Supervisor

Emp. Code: - UNH-778

HR signature: - [Signature]

Date: - 01-01-2020

UPPAL NEURO HOSPITAL

4-RANI KA BAGH, AMRITSAR.



Ref: UNH/HR/SEPT.20/144

Date: 01/09/2020

Subject: Letter of Appointment

Dear Ms. Ashu Bala W/o Ravinder Pal,

With reference to your interview, we are pleased to appoint you on the post of Supervisor in our hospital 'UPPAL NEURO HOSPITAL, ASR'

Your appointment will be based on the following terms:

1. You will be on probation period for (03) month/s from date of joining, which period may be further extended for 3-6 months by the management, without assigning any cause/reason, however maximum period of probation would be 1 year. Your notice period will be for 1 month while on probation. That the service is being offered for the period from 01/09/2020 to 30/11/2020. On the expiry of this period, your service will be continued by giving confirmation letter to further period on mutual agreement.
2. Your CTC will be as per enclosed Annexure 'A'. That management reserves the right to bifurcate the salary merging or bifurcating with any other allowance/s. The remuneration payable to you would be matter of confidential between management and yourself, and you shall not disclose any detail thereof to any inside or outside the organization testimonials.
3. Your One month salary will be deducted as a security after that Provident fund and ESI or TDS will be deducted from your CTC in accordance to the respective acts.
4. The hospital can terminate the employee on probation without any prior notice in case their performance is not found satisfactory or any other reason
5. Security will be refund at the time of resignation (if employee worked more than or equal to 1 year only)
6. That your appointment will be further subject to the verification of your credentials, testimonials and other particulars mentioned by you in the application, at the time of your appointment. In case it comes to the notice of the management that the particular given by you were wrong, your appointment will be canceled, and you will be liable to be discharge with immediate effect.
7. Duty timing will be: - Rotational Duty (Morning, Evening)
8. Your offs will be:- 4

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e-mail: neuroamritsar@yahoo.com, Website: www.uppalneurohospital.com
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STROKE HELPLINE: 9653-969696



4-RANI KA BAGH, AMRITSAR.



9. Attendance: shall be recorded through biometric punching machine only. You are required to record your attendance in biometric punching machine (while checking-in and checking-out)
10. Punctuality: For 3 late arrivals: nil deduction
4th late arrival: half day deduction
4th to 5th late arrivals: one day deduction
11. That during that period you will be found to abide by the rules and regulation in vogue and those application from time to time.
12. That you are not supposed to disclose the secret of work to any person/ Organization, which you come to know during the course of your work. In case of any infringement of these rules, you will be dismissed from your service without any assignment of reason.
13. That on charge of misconduct, the management has the right to suspend/ terminate you.
14. That due to the lack of patients, Electricity or any other reason, which are beyond the control of the management, you can be placed in lay off condition and you will have no right against this Lay off Period.
15. That you will be reporting to the duty at your own expenses.
16. In case of having got the job in Govt. /Foreign or Marriage outstation, you can overrule the signed agreement, provided these are supported with solid proofs.
17. That in case of need, you can be shifted to any other section/ duty or any branch of hospital/ institute local or outside, to which you would not have any objection.
18. Two month notice period to be served by the leaving staff in order to get experience and security. 24hour resigns will not be entertained and no experience or security/one month salary to be released in such cases.
19. It is compulsory to attend monthly meeting on 10th of month. In absence from the monthly meeting, employee has to give explanation in writing.
20. Abandonment of employment: A staff remaining absent without prior written permission for more than 5 days at a stretch shall be liable to be treated as having abandoned services from the date he/ she remained absent. No notice will be required to be given in such cases from management side.

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1. You will intimate in writing to the management any change of address, phone no. etc within a week from change of the same.
22. Departing employee is required to settle all outstanding account and loans before his departure and to sign all necessary papers and vouchers connected therewith. You will hand over the charge, the property and material etc. of the hospital in your possession at the time of cessation of your employment with the hospital.
23. You will be liable to pay damage(s) to the hospital for the loss caused by you directly or indirectly, in addition to other legal remedies, which may be required for violating any of the provision of this appointment letter/agreement etc. damage amount payment will be mutually decided after an internal investigation done by the management and discussion with you
24. **Service rules:**

The hospital has a number of other rules, policies and procedures that are set out in the Employee handbook. You are required to comply with rules, policies and procedures in force time to time

Declaration

I have read/ understood all the above terms and conditions and agree to abide by them. If I Suddenly leaves the hospital, then I shall not be liable for my balance salary & Security as well as experience certificate.

I have been explaining all hazards while working in the hospital and I agree with the same.

Uppal Neuro Hospital	Employee
Signature / Stamp _____ <i>Jyotika</i>	Signature _____ <i>Ashu</i>
HR Manager	Name: <u>Ms. Ashu Bala</u>

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विकिरण सुरक्षा विभाग



GOVERNMENT OF INDIA
ATOMIC ENERGY REGULATORY BOARD
RADIOLOGICAL SAFETY DIVISION

Case file no.: PB-33939-INST

Date of Issue: 16/03/2020

Document No.: 20-RSO-493256

Valid till: 16/03/2023

Approval of Radiological Safety Officer

1. The OWNER, UPPAL NEURO HOSPITAL, Amritsar is hereby informed that the Competent Authority, Chairman, Atomic Energy Regulatory Board (AERB), in exercise of powers conferred under Rule 19 of the Atomic Energy (Radiation Protection) Rules, 2004, has approved the nomination of MANDEEP SINGH as Radiological Safety Officer (RSO) in the UPPAL NEURO HOSPITAL, Amritsar for the facilities as mentioned in annexure-I to this document on the basis of information provided in the application.
2. The RSO shall submit the periodic reports to AERB, in the prescribed format on safety status of the radiation installation.
3. The RSO shall promptly report any radiation safety related unusual occurrence to AERB.
4. The RSO shall perform his duties and responsibilities as stipulated in Atomic Energy (Radiation Protection) Rules, 2004 and other related regulatory documents (refer annexure-2).
5. This approval stands cancelled in the event of MANDEEP SINGH relinquishing the charge as RSO in UPPAL NEURO HOSPITAL, Amritsar.

Issuing Authority,

Dr. P. K. Dash Sharma
Head, RSD

(This is an electronically generated letter and hence signature is not required)

OWNER
UPPAL NEURO HOSPITAL
RANI KABAGH, AMRITSAR, Amritsar - 143001 (Punjab)

Copy: MANDEEP SINGH
UPPAL NEURO HOSPITAL
RANI KABAGH, AMRITSAR, Amritsar - 143001 (Punjab)



परमाणु ऊर्जा विभागक परिषद्, नियामक भवन, अणुसक्तिनगर, मुंबई - 400094 (महाराष्ट्र)
Atomic Energy Regulatory Board, Niyamak Bhavan, Anushaktinagar, Mumbai 400094 (Maharashtra)

वेबसाइट/Website: www.aerb.gov.in

दूरभाष/Tel. 91-22-2599 0656

फैक्स/Fax. 91-22-2599 0650

Case file no.: PB-33939-INST
Document No.: 20-RSO-493256

Date of Issue: 16/03/2023
Valid till: 16/03/2023

Annexure-1

Sl. No.	Practice	Role(s) of Institute
1	Diagnostic Radiology	Medical diagnostic x-ray facility

Annexure-2

Duties and Responsibilities of the Radiological Safety Officer

- (1) The Radiological Safety Officer shall be responsible for advising and assisting the employer and licensee on safety aspects aimed at ensuring that the provisions of these rules are complied with.
- (2) The Radiological Safety Officer shall:-
 - (a) carry out routine measurements and analysis on radiation and radioactivity levels in the controlled area, supervised area of the radiation installation and maintain records of the results thereof;
 - (b) investigate any situation that could lead to potential exposures;
 - (c) advise the employer regarding -
 - i. the necessary steps aimed at ensuring that the regulatory constraints and the terms and conditions of the licence are adhered to;
 - ii. the safe storage and movement of radioactive material within the radiation installation;
 - iii. Initiation of suitable remedial measures in respect of any situation that could lead to potential exposures; and
 - iv. routine measurements and analysis on radiation and radioactivity levels in the off-site environment of the radiation installation and maintenance of the results thereof;
 - (d) ensure that -
 - i. reports on all hazardous situations along with details of any immediate remedial actions taken are made available to the employer and licensee for reporting to the competent authority and a copy endorsed to the competent authority;
 - ii. quality assurance tests of structures, systems, components and sources, as applicable are conducted; and
 - iii. monitoring instruments are calibrated periodically.
 - (e) assist the employer in -
 - i. instructing the workers on hazards of radiation and on suitable safety measures and work practices aimed at optimizing exposures to radiation sources; and
 - ii. the safe disposal of radioactive wastes; and
 - iii. developing suitable emergency response plans to deal with accidents and maintaining emergency preparedness;
 - (f) advise the licensee on -
 - i. the modifications in working condition of a pregnant worker; and
 - ii. the safety and security of radioactive sources;
 - (g) furnish to the licensee and the competent authority the periodic reports on safety status of the radiation installation; and
 - (h) inform the competent authority when he leaves the employment.
- (3) The Radiological Safety Officer shall have personal monitoring badge prior to handling of radiation source(s) at the facility.



Case File Number: PB-33939-RF-XL-005

Issue Date: 23/10/2018

Document Number: 18-LOP-326025

Expiry Date: 23/10/2023

LICENSE FOR OPERATION OF MEDICAL DIAGNOSTIC X-RAY EQUIPMENT

In exercise of powers conferred under Section 16 and 17 as applicable of Atomic Energy Act, 1962 read in conjunction with Rule (3) of the Atomic Energy (Radiation Protection) Rules (AE(RP)R), 2004, the Atomic Energy Regulatory Board (AERB) hereby issues Licence in favour of Dr. ASHOK UPPAL to operate the following diagnostic radiology equipment located at RANI KABAGH, AMRITSAR AMRITSAR, PUNJAB-143001 for Medical Diagnosis purposes.

Type of Equipment	Manufacturer	Model	Equipment Id
Computed Tomography	Siemens Shanghai Medical Equipment Ltd, China	SOMATOM go.Now	G-XL-95721

The OWNER, UPPAL NEURO HOSPITAL, AMRITSAR and Dr. ASHOK UPPAL are hereby identified as the Employer and licensee respectively, for the purpose of assigning the responsibilities specified in the Atomic Energy (Radiation Protection) Rules, 2004, in respect of radiation protection of workers, public and environment because of operation of the above equipment.

The Employer and Licensee are responsible for,

- I. Ensuring compliance with the relevant provisions of the
 - i. Atomic Energy Act, 1962
 - ii. Atomic Energy (Radiation Protection) Rules, 2004;
 - iii. AERB Safety Code (AERB/SC/Med-2), 2001, Amendment 2012, and the revisions thereof
 - iv. All applicable Safety Codes, Guides issued by AERB for the above practice and regulatory documents issued by AERB from time to time.
 - v. Directives issued by Competent Authority from time to time.
- II. Ensuring compliance with terms and conditions stated overleaf.

Note:

This Licence is issued ONLY from the RADIATION SAFETY VIEW POINT. All other clearances shall be obtained from concerned state/central/local authorities as applicable.


(Competent Authority)

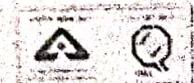
DR. ASHOK UPPAL
UPPAL NEURO HOSPITAL,
RANI KABAGH AMRITSAR ,
AMRITSAR-143001
PUNJAB



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Atomic Energy Regulatory Board, Niyamak Bhavan, Anushaktinagar, Mumbai 400094 (Maharashtra)

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An ISO 9001:2008
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Case File Number: PB-33939-RF-XR-001

Issue Date: 15/07/2021

Document Number: 16-LOP-119364

Expiry Date: 15/07/2021

REGISTRATION FOR OPERATION OF MEDICAL DIAGNOSTIC X-RAY EQUIPMENT

In exercise of powers conferred under Section 16 and 17 as applicable of Atomic Energy Act, 1962 read in conjunction with Rule (3) of the Atomic Energy (Radiation Protection) Rules (AE(RP)R), 2004, the Atomic Energy Regulatory Board (AERB) hereby issues Registration in favour of DR. ASHOK UPPAL to operate the following diagnostic radiology equipment located at RANI KABAGH, AMRITSAR AMRITSAR, PUNJAB-143001 for Medical Diagnosis purposes.

Type of Equipment	Manufacturer	Model	Equipment Id
Radiography (Mobile)	M/s. Wipro GE Healthcare Private Limited, India	Brivo XR 115	G-XR-48655

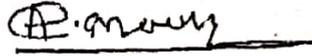
The OWNER, UPPAL NEURO HOSPITAL, AMRITSAR and DR. ASHOK UPPAL are hereby identified as the Employer and licensee respectively, for the purpose of assigning the responsibilities specified in the Atomic Energy (Radiation Protection) Rules, 2004, in respect of radiation protection of workers, public and environment because of operation of the above equipment.

The Employer and Licensee are responsible for,

- I. Ensuring compliance with the relevant provisions of the
 - i. Atomic Energy Act, 1962
 - ii. Atomic Energy (Radiation Protection) Rules, 2004;
 - iii. AERB Safety Code (AERB/SC/Med-2), 2001, Amendment 2012, and the revisions thereof
 - iv. All applicable Safety Codes, Guides issued by AERB for the above practice and regulatory documents issued by AERB from time to time.
 - v. Directives issued by Competent Authority from time to time.
- II. Ensuring compliance with terms and conditions stated overleaf.

Note:

This Registration is issued ONLY from the RADIATION SAFETY VIEW POINT. All other clearances shall be obtained from concerned state/central/local authorities as applicable.


Dr. Avinash U. Sonawane
Head, RSD

DR. ASHOK UPPAL, OWNER
UPPAL NEURO HOSPITAL
RANI KABAGH, AMRITSAR
AMRITSAR, PUNJAB-143001

CC: OWNER, UPPAL NEURO HOSPITAL, AMRITSAR

Note: This document is also available at www.aerb.gov.in/elora



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Atomic Energy Regulatory Board, Niyamak Bhavan, Anushaktinagar, Mumbai 400094 (Maharashtra)

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GOVERNMENT OF INDIA
ATOMIC ENERGY REGULATORY BOARD
RADIOLOGICAL SAFETY DIVISION

Case File Number: PB-33939-RF-XR-002

Issuance Date: 15/07/2016

Document Number: 16-LOEE-119366

Expiry Date: 15/07/2021

REGISTRATION FOR OPERATION OF MEDICAL DIAGNOSTIC X-RAY EQUIPMENT

In exercise of powers conferred under Section 16 and 17 as applicable of Atomic Energy Act, 1962 read in conjunction with Rule (3) of the Atomic Energy (Radiation Protection) Rules (AE(RP)R), 2004, the Atomic Energy Regulatory Board (AERB) hereby issues Registration in favour of Dr. ASHOK UPPAL to operate the following medical diagnostic x-ray equipment located at UPPAL NEURO HOSPITAL, RANI KABAGH, AMRITSAR AMRITSAR, PUNJAB-143001 for medical diagnostic purpose.

Type of Equipment	Manufacturer	Model	Equipment ID
C-Arm	M/s. Siemens Limited	Multimobil-5E	G-XR-53778

The OWNER, UPPAL NEURO HOSPITAL, AMRITSAR and DR. ASHOK UPPAL are hereby identified as the Employer and licensee respectively, for the purpose of assigning the responsibilities specified in the Atomic Energy (Radiation Protection) Rules, 2004, in respect of radiation protection of workers, public and environment because of operation of the above equipment. ASHOK UPPAL is the designated Radiological Safety Officer (RSO).

The Employer and Licensee are responsible for,

- I. Ensuring compliance with the relevant provisions of the
 - i. Atomic Energy Act, 1962
 - ii. Atomic Energy (Radiation Protection) Rules, 2004;
 - iii. AERB Safety Code (AERB/SC/Med-2), 2001, Amendment 2012, and the revisions thereof
 - iv. All applicable Safety Codes, Guides issued by AERB for the above practice and regulatory documents issued by AERB from time to time.
 - v. Directives issued by Competent Authority from time to time.
- II. Ensuring compliance with terms and conditions stated overleaf.

Note:

This Registration is issued ONLY from the RADIATION SAFETY VIEW POINT. All other clearances shall be obtained from concerned state/central/local authorities as applicable.

Dr. Avinash U. Sonawane
Head, RSD

DR. ASHOK UPPAL
UPPAL NEURO HOSPITAL
RANI KABAGH, AMRITSAR
AMRITSAR, PUNJAB-143001

Copy to: OWNER, UPPAL NEURO HOSPITAL, AMRITSAR

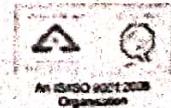
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दूरभाष/Fax: 91-22-2599 0650



Case File Number: PB-33939-RF-XR-008

Issue Date: 11/06/2020

Document Number: 20-LOP-505971

Expiry Date: 11/06/2025

REGISTRATION FOR OPERATION OF MEDICAL DIAGNOSTIC X-RAY EQUIPMENT

In exercise of powers conferred under Section 16 and 17 as applicable of Atomic Energy Act, 1962 read in conjunction with Rule (3) of the Atomic Energy (Radiation Protection) Rules (AE(RP)R), 2004, the Atomic Energy Regulatory Board (AERB) hereby issues Registration in favour of DR. ASHOK UPPAL to operate the following diagnostic radiology equipment located at RANI KABAGH, AMRITSAR AMRITSAR, PUNJAB-143001 for Medical Diagnosis purposes.

Type of Equipment	Manufacturer	Model	Equipment Id
C-Arm	M/s. Skanray Technologies Private Limited, India	SKAN C	G-XR-103080

The OWNER, UPPAL NEURO HOSPITAL, AMRITSAR and DR. ASHOK UPPAL are hereby identified as the Employer and licensee respectively, for the purpose of assigning the responsibilities specified in the Atomic Energy (Radiation Protection) Rules, 2004, in respect of radiation protection of workers, public and environment because of operation of the above equipment.

The Employer and Licensee are responsible for,

- I. Ensuring compliance with the relevant provisions of the
 - i. Atomic Energy Act, 1962
 - ii. Atomic Energy (Radiation Protection) Rules, 2004;
 - iii. AERB Safety Code (AERB/SC/Med-2), 2001, Amendment 2012, and the revisions thereof
 - iv. All applicable Safety Codes, Guides issued by AERB for the above practice and regulatory documents issued by AERB from time to time.
 - v. Directives issued by Competent Authority from time to time.
- II. Ensuring compliance with terms and conditions stated overleaf.

Note:

This Registration is issued ONLY from the RADIATION SAFETY VIEW POINT. All other clearances shall be obtained from concerned state/central/local authorities as applicable.


Dr. P. K. Dash Sharma
Head, RSD

DR. ASHOK UPPAL, OWNER
UPPAL NEURO HOSPITAL
RANI KABAGH, AMRITSAR
AMRITSAR, PUNJAB-143001

CC: OWNER, UPPAL NEURO HOSPITAL, AMRITSAR

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परमाणु ऊर्जा नियामक परिषद्, नियामक भवन, अणुशक्तिनगर, मुंबई 400094 (महाराष्ट्र)
Atomic Energy Regulatory Board, Niyamak Bhavan, Anushaktinagar, Mumbai 400094 (Maharashtra)

वेबसाइट/Website: www.aerb.gov.in

दूरभाष/Tel: 91-22-2599 0656

फैक्स/Fax: 91-22-2599 0650



Case File Number: PB-33939-RF-XR-007

Issuance Date: 15/11/2018

Document Number: 18-LOEE-331383

Expiry Date: 15/11/2023

REGISTRATION FOR OPERATION OF MEDICAL DIAGNOSTIC X-RAY EQUIPMENT

In exercise of powers conferred under Section 16 and 17 as applicable of Atomic Energy Act, 1962 read in conjunction with Rule (3) of the Atomic Energy (Radiation Protection) Rules (AE(RP)R), 2004, the Atomic Energy Regulatory Board (AERB) hereby issues **Registration** in favour of Dr. ASHOK UPPAL to operate the following medical diagnostic x-ray equipment located at UPPAL NEURO HOSPITAL, RANI KABAGH, AMRITSAR AMRITSAR, PUNJAB-143001 for medical diagnostic purpose.

Type of Equipment	Manufacturer	Model	Equipment ID
Radiography (Fixed)	M/s. Siemens Limited	multiphos 15	G-XR-97073

The **OWNER, UPPAL NEURO HOSPITAL, AMRITSAR** and **DR. ASHOK UPPAL** are hereby identified as the Employer and licensee respectively, for the purpose of assigning the responsibilities specified in the Atomic Energy (Radiation Protection) Rules, 2004, in respect of radiation protection of workers, public and environment because of operation of the above equipment.

The Employer and Licensee are responsible for,

- I. Ensuring compliance with the relevant provisions of the
 - i. Atomic Energy Act, 1962
 - ii. Atomic Energy (Radiation Protection) Rules, 2004;
 - iii. AERB Safety Code (AERB/SC/Med-2), 2001, Amendment 2012, and the revisions thereof
 - iv. All applicable Safety Codes, Guides issued by AERB for the above practice and regulatory documents issued by AERB from time to time.
 - v. Directives issued by Competent Authority from time to time.
- II. Ensuring compliance with terms and conditions stated overleaf.

Note:

This Registration is issued **ONLY** from the **RADIATION SAFETY VIEW POINT**. All other clearances shall be obtained from concerned state/central/local authorities as applicable.

Dr. P. K. Dash Sharma
Head, RSD

DR. ASHOK UPPAL
UPPAL NEURO HOSPITAL
RANI KABAGH, AMRITSAR
AMRITSAR, PUNJAB-143001

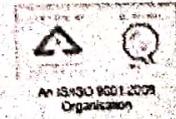
Note: This document is also available at www.aerb.gov.in/elora



परमाणु ऊर्जा नियामक परिषद, नियामक भवन, अनुशक्तिनगर, मुंबई 400094 (महाराष्ट्र)
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PUNJAB POLLUTION CONTROL BOARD, NABHA ROAD, PATIALA
FORM- X

REPORT BY THE STATE BOARD ANALYST (see Rule 24)

Report No. 670

Dated: 16.11.2020

I hereby certify that I Surinder Singh, State Board Analyst duly appointed under sub section (3) of section 53 of the water (Prevention and Control of Pollution) Act, 1974 (Central Act 6 of 1974) received on the 03th day of November, 2020 from Sh. Gurbakash Singh, FA, samples of M/s Uppal Neuro Hospital, 4, Rani Ka Bagh, Amritsar for analysis. The samples were in a condition fit for analysis reported below:-

I further certify that I have analysed the aforementioned samples from 03.11.2020 to 16.11.2020 and declare the results of the analysis reported below:-

The analysis has been made as per methods given in relevant parts of I.S: 3025, IS: 1622 Indian Standard Methods and test for industrial effluents. The details of the analysis are as follows:-

Point of sample collection: - As per data Sheet.

Sr. No.	Parameters	Outlet of STP
1	pH	7.4
2	Total Suspended Solids mg/l	20
3	Bio-chemical Oxygen Demand mg/l	12
4	Chemical Oxygen Demand mg/l	52
5	Oil & Grease mg/l	BDL
6	Bio-assay	100% survival of fish in 100% effluent after 96 hours

- Note : 1) All the results are in mg/l except pH, T.Coli & F.Coli
2) Entire sample was consumed in Testing.

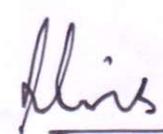
The condition of the seals, fastening and container on receipt was as follows:-

Seals & fastenings of the container were found intact.

Signed this 16th day of November, 2020

Address:-

Punjab Pollution Control Board
Vatavaran Bhawan, Nabha Road,
Patiala


(Signature) 16.11.20
State Board Analyst

To

The Environmental Engineer,
Punjab Pollution Control Board
Regional Office- Amritsar

Authorisation Letter No.-

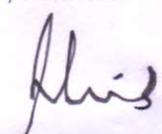
Dated -

Endst No. 24873-74

dt. 16/11/2020

A copy of the above is forwarded to the:

1. Sr. Environmental Engineer, Punjab Pollution Control Board, Zonal Office-, Amritsar.


(Signature) 16.11.20

Photographs taken during visit made to M/s Uppal Neuro Hospital, 4 – Rani Ka Bagh, Amritsar on 02.11.2020



Color Coded Bins



DG Set with accoustic enclosure



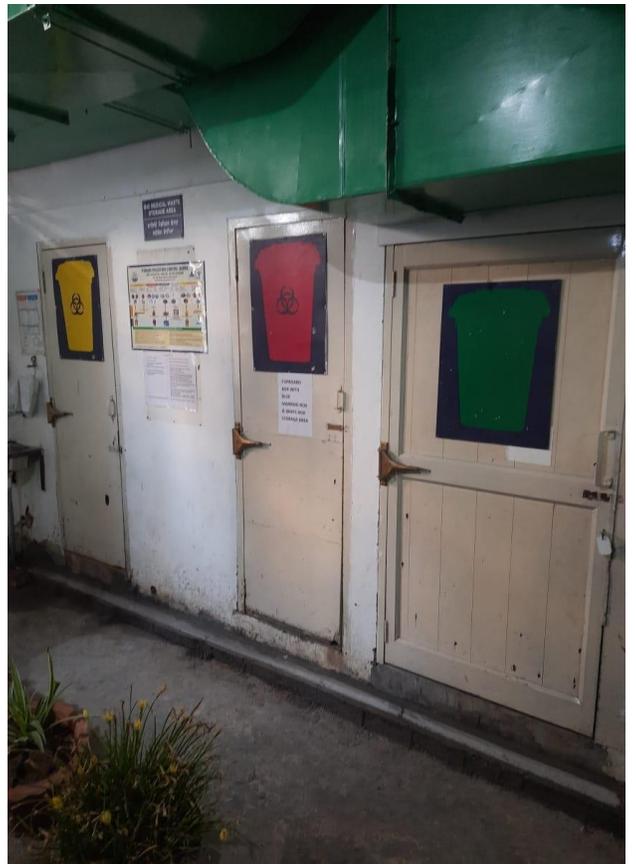
STP



Effluent Sample Collection



Pre-Treatment Facility for Yellow (h) Category Waste



Central Storage Area



Staff with adequate PPE



Separate bins for General Waste



ਪੰਜਾਬ ਪ੍ਰਦੂਸ਼ਣ ਰੋਕਥਾਮ ਬੋਰਡ
PUNJAB POLLUTION CONTROL BOARD

Annexure-B

No. EE(EPA)/2020/ 452

Dated: 7/8/2020

OFFICE ORDER

Subject: Regarding grant of authorization to the bedded Health Care Establishments (HCEs) and achieving of standards for the treated wastewater under the Bio-Medical Waste Management Rules, 2016.

As per Rule 10 of the Bio-Medical Waste Management Rules, 2016, it is mandatory of the part of the every occupier or operator handling Bio-medical waste to obtain authorization under the said rules.

And whereas, as per rule 10 of the Bio-Medical Waste Management Rules, 2016, the validity of authorization under the said rules for the bedded HCEs is to be synchronized with the validity of consents under the Water Act, 1974 / Air Act, 1981.

And whereas, as per rule 7 (I) of the Bio-Medical Waste Management Rules, 2016, it is also mandatory on the part of the occupier of the HCEs to treat the chemical liquid waste and to discharge the same conforming to the standards as mentioned in Schedule-II appended to the said rules.

And whereas, in Schedule-II appended to the Bio-Medical Waste Management Rules, 2016, it has been mentioned that all the bedded HCEs connected with sewer without terminal STP or not connected with public sewer are required to achieve the standards given as under:

pH	6.5-9
TSS	100 mg/l
Oil and grease	10 mg/l
BOD	30 mg/l
COD	250 mg/l
Bio assay	90% survival of Fish after 96 hours in 100% effluent

And whereas, for discharge of wastewater into public sewers with terminal facilities, the general standards as notified under the Environment Protection Act, 1986 shall be applicable. The general standards as given in Schedule-VI of the Environment Protection Rules, 1986, are given as under:

pH	5.5-9
TSS	600 mg/l
Oil and grease	20 mg/l
BOD	350 mg/l
Bio assay	90% survival of Fish after 96 hours in 100% effluent

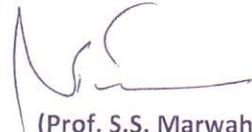
And whereas, in Schedule-I of the Bio-Medical Waste Management Rules, 2016 it has been mentioned that the chemical liquid waste shall be pretreated before mixing with other wastewater and the combined discharge shall conform to the prescribed standards as given in Schedule-II.

And whereas, the IMA has requested the Board vide the letter dated 112620 to allow time period upto 31.03.2021 to install ETP-cum-STP and to grant the authorization to the bedded HCEs upto 31.03.2021 due to prevailing situation of pandemic of COVID-19.

And whereas, the request submitted by the IMA has been considered and it has been decided that the authorization under the BMW Rules, 2016 and consents under the Water (Prevention & Control of Pollution) Act, 1974/ Air Act, 1981 may be granted to the bedded HCEs upto 31.03.2021, subject to the following conditions:

- The HCEs located in the towns/cities, where terminal STPs have been installed, shall get the sample of wastewater (combined domestic and chemical liquid waste) analyzed from the laboratory of the Board/State water laboratory for the parameters such as pH, TSS, Oil, Grease, BOD, COD and Bio assay and submit the same to the Board before 30.09.2020 and if the sample is found not conforming to the prescribed standards as mentioned in the Schedule-II of the BMW Rules, 2016, the HCEs shall be bound to install adequate and appropriate treatment system before 31.12.2020 to achieve the said standards.
- The HCEs located in the towns/cities, where terminal STP has not yet been installed, shall install the treatment system to achieve the prescribed standards as mentioned in the Schedule-II of the BMW Rules, 2016, by 31.12.2020. The HCEs shall submit an undertaking in this regard while applying for obtaining authorization under the BMW Rules, 2016 and/ or consents under the Water Act, 1974 and Air Act, 1981.

These orders shall come into force with immediate effect.

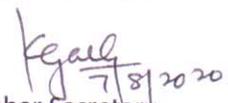

(Prof. S.S. Marwaha)
Chairman

Endst. No. EE(EPA)/2020 17393-431

Dated : 7/8/2020

A copy of the above is forwarded to the following for information and necessary action please:

1. The Chief Environmental Engineer, Punjab Pollution Control Board, Chief Office, Jalandhar/Ludhiana/Bathinda/Patiala/HQ.
2. The Senior Environmental Engineer, Punjab Pollution Control Board, Zonal Office, Patiala-1/2/ Ludhiana-1/2/ Jalandhar/ Amritsar/ Bathinda.
3. The Senior Environmental Engineer (HQ-1/2), Punjab Pollution Control Board, Head Office, Patiala.
4. The Special Secretary (General & Policy), Punjab Pollution Control Board, Mohali.
5. The Senior Scientific Officer, Punjab Pollution Control Board, Head Office, Patiala.
6. The Senior Law Officer, Punjab Pollution Control Board, Head Office, Patiala.
7. The Environmental Engineer, Punjab Pollution Control Board, Regional Office, Patiala/ Ludhiana-1/2/3/4/Jalandhar/ Amritsar/ Bathinda/ Faridkot/ Sangrur / Hoshiarpur/ Mohali/ Batala & Fatehgarh Sahib.
8. The Environmental Engineer (Const./Mega/EPA), Punjab Pollution Control Board, Head Office, Patiala.
9. The Environmental Engineer (Computer), Punjab Pollution Control Board, Head Office, Patiala for uploading the office order on the website of the Board for information of the concerned.
10. The Deputy Controller (F&A), Punjab Pollution Control Board, Head Office, Patiala.
11. The Administrative Officer, Punjab Pollution Control Board, Head Office, Patiala.
12. PS to Chairman & PA to Member Secretary, Punjab Pollution Control Board, Patiala.
13. Indian Medical Association, Punjab, IMA house, Bhai Randhir Singh Nagar, Ferozepur Road, Ludhiana.


7/8/2020
Member Secretary