

ICARE Eye Hospital & Post Graduate Institute ICARE Research Centre (Units of ishwar Charitable Trust)



Regional officer UPPCB

Date: 24-8-2020

Subject: Annual Report 2019-20

Please find attached our Form IV Annual report of BMW generated by ICARE Eye Hospital and Postgraduate Institute, Sector 26 (Certificate number: CMEE1900799, Registration number: 15585).

Total waste generated at ICARE is as follows (in kg per annum):

Location	Yellow Category	Red Category	Blue Category	PPC Category	General Waste
ICARE Sector 26	1933 kg	4735 kg	535 kg		
711-12-1-1-1-1		1755 Rg	333 Kg	340 kg	28032 kg

Thanking you

Sincerely,

Dr. Saurabh Choudhry

C.E.O.

ICARE Eye Hospital and Postgraduate Institute (Units of Ishwar Charitable Trust)

ICARE Dr. Saurabh Choudhry
CEO
ICARE Eye Hospital
(Unit of Ishwar Charitable Trust)

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Dr. Saurabh Choudhr C.E.O.

ICARE Eye Hospital and Postgraduate Institute (Units of Ishwar Charitable Trust)

Dr. Saurabh Choudhry
CEO
ICARE Eye Hospital
(Unit of Ishwar Charitable Trust)





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)]

SI. no.	Particulars	Ť				
1.	Particulars of the Occupier	:				
	(i) Name of the authorized person (occupier of operator of facility)		Dr. Saurabh Choudhry (C.E.O.)			
	(ii) Name of HCF or CBMWTF	:	ICARE Eye Hospital and Postgraduate Institute (Units of Ishwar Charitable Trust)			
	(iii) Address for Correspondence	1	E3A, Sector 26, Noida-201301, UP			
	(iv) Address of Facility		E3A, Sector 26, Noida-201301, UP			
	(v)Tel. No, Fax. No	1	0120-2477600/ 02			
	(vi) E-mail ID	;	admin@icarehospital.org			
	(vii) URL of Website		www.icarehospital.org			
	(viii) GPS coordinates of HCF or CBMWTF		DMS: Latitude: 28°34'48" N DMS: Longitude: 77°20'08" E			
	(ix) Ownership of HCF or CBMWTF	্ব	Private (Trust)			
	(x). Status of Authorization under the Bio- Medical Waste (Management and Handling)	S	Authorization No.: 4170055 Valid up to: 05-02-2022			
	(xi). Status of Consents under Water and Air Acts	15	Valid up to: 31-12-2021			
2.	Type of Health Care Facility	:				
	(i) Bedded Hospital	į.	No. of Beds: 04			
	(ii) Non-bedded hospital: (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	23	NA			
	(iii) License number and its date of expiry		License no.: CMEE1900799 Valid up to: 31-12-2020			
3.	Details of CBMWTF	3				
	(i) Number healthcare facilities covered by CBMWTF	*	NA			
	(ii) No of beds covered by CBMWTF	0	NA			
	(iii) Installed treatment and disposal capacity of CBMWTF:	***	NA			
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	3	NA			
			Yellow Category: 1933 kg/year (Average = 161 kg/month)			
	MAN THEOR UP AT THE ATTENDED THE		Red Category: 4735 kg/year (Average = 395 kg/month)			
i.	Quantity of waste generated or disposed in Kg	*	White: 340 kg/year (Average = 28 kg/month)			
	per annum (on monthly average basis)		Blue Category: 535 kg/year (Average = 45 kg/month)			
			General Solid waste: 28032 kg/year (Average = 2336 kg/month)			

•	Details of the Storage, treatment, tra	anst	orta	tion, processing	and Disposal I	acility						
5	MONEY CONTROL TO SERVICE CONTROL			Size : (96 x 84 x 82) inch								
)	 (i) Details of the on-site storage facility 	i	C	Capacity:: 2167 kg/day or 383 cubic feet								
	**************************************		P	rovision of on	-site storage: (cold store	ige or any	other provision				
	(ii) Disposal facilities		Т	ype of Treatmer	nt equipment	No. of units	Capacity (Kg/day)	Quantity treate or disposed in kg per annum				
			In	cinerators		1		3.				
			P	lasma Pyrolysis								
			A	utoclaves								
			M	licrowave			NA NA					
			Н	ydroclave		1						
			SI	nredder			1					
			N	eedle tip cutter	or destroyer		1					
	3 =		SI	narps								
			Eı	ncapsulation or	concrete pit							
			D	eep burial pits				1				
			Cl	hemical disinfec	tion							
			A	ny other treatme	ent equipment							
	(iii) Quantity of recyclable wastes sold to authorize recyclers after treatment in kg per annum.		R	ed Category (lik	te plastic, glass	etc.) : NA	V.					
	(iv) No of vehicles used for collection and transportation of biomedical waste		N/	A								
	(v) Details of incineration ash and			11	Quantity ge	nerated	Where	disposed				
	ETP sludge generated and disposed		1	ncineration								
	during the treatment of wastes in Kg per annum			Ash			NA					
	A Produced to	150	I	ETP Sludge								
	(vi) Name of the CBMWTF Operator through which wastes are disposed of	or of.	1	Medicare Envir	onment manager	nent Pvt L	td.					
	(vii) List of member HCF not hand over bio-medical waste.			NA								
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetin held during the reporting period.	ıgs			HIC committee te meetings atta		NEXURE	1)				
	Details trainings conducted on BMW											
7	(i) Number of trainings conducted BMW Management.	on		33	31			X				
7	(ii) number of personnel trained			247								
	(iii) number of personnel trained at the time of induction	t		49								

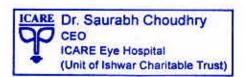
	(iv) number of personnel not undergone any training so far	iii	
	(v) whether standard manual for training is available?		Yes, In HR manual
	(vi) any other information		
	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		Nil
8.	(ii) Number of the persons affected		Nil
	(iii) Remedial Action taken (Please attach details if any)		NA NA
	(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 meet the standards?		NA
	Details of Continuous online emission monitoring systems installed		NA
10.	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		Yes, STP plant
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		NA
12	Any other relevant information	•	NA

Certified that the above report is for the period from: 01 Jan 2019 to 31 Dec 2019

Date:

Place:

Name and Signature of the Hoad of the Institution



ANNEXURE 1

	Con	nmittee Meeting _MoM	
Date	03 January 2019		VIE: 4:40 to 5:10 pm
Topic	Endophthalmitis case , NSI, B	MW/OT/HIC/CSSD records, Trainings	
Present	Dr Divya Jyoti, Mr Richard, M Dr.Madhulika Manda,Dr.Cha	ls Joshna John, Dr Charu Tandon,Mr R Lal,Dr Saurabh , Mr M ru Tandon, Ms.Yogeshwari Bansal,Dr.Swati Nagar	litul Patel,
TOPIC	Culture reports, Needle stick	injury, Endophthalmitis, BMW audit, HIC records	
S. no.	Agenda	Discussion Points	Responsibility
1	HIC nurse	Ms Joshna John introduced as member of HIC Committee inplace of Mr Richard Bobin, as HIC Nurse	
2	OT + water culture reports	Samples to be sent, reports of the same to be discussed with HIC members in case of any growth so that further actions can be taken. New HIC nurse informed about the same in the meeting	Mr Richard, Mr R Lal
3	Needle stick injury	2 NSI reported in this month. No positive test for any Source patient. All Exposed person Immunised. All exposed wore PPE.	
4.	Endophthalmitis	One case reported and discussed with HIC committee .Documentation checked and found OK. Coorective action taken as per protocols, follow-up to be done.	
5	BMW audits	BMW audit pending to be done asap, any variance to be reported to quality department and training needs informed to Training manager. Mr Richard to assit Ms Joshna in HIC rounds and other HIC related documentation.	Mr Richard, Ms Joshna
6	OT and HIC records	OT and HIC round and Hand Hygiene audit reports checked by committee members and found OK.	

	Com	mittee Meeting _MoM						
Date		19 TIME: 4:00-4:30pm						
Present	Present Mr.Mitul Patel, Dr Prashant Jain, Ms Joshna John, Dr.Swati Nagar, Dr.Saurabh Choudh Mr.R.Lal, Ms.Yogeshwari Bansal, Dr Divya Jyoti, Dr Reena Choudhry, Ms Nishita							
TOPIC								
S. no.	Agenda	production to						
1	OT + water culture reports	Total samples: 29 (OT)+3 (Water) reports of all show NO GROWTH						
3	Needle stick injury	One NSI reported today only, exposed person was injured by a disposable syringe in OPD, Self injury happened. Samples taken fom source patient were negative, exposed person was immunised checked via Vaccination records. 2 NSI reported in Jan after previous HIC meeting. All source test negative. Exposed person immunised. Staff was counseled to be more carefull while BMW handling. Training needs informed to Training manager.						
4	Endophthalmitis	Case reported yesterday with DOV. Corrective action taken. On follow up today vision is better. Fruther follow-up required. As a PA: Post-op instructions to be given more carefully by nursing staff, stressing mainly on hygiene. Reception staff to be more vigilant on Sundays especially in case of post-op patients, as the patient came on sunday also but wasn't seen by any Doctor on duty due communication gap between staff and the patients.	Dr Swati Nagar					
5	BMW audits	Pending, to be done within 1st week so that it can be discussed in HIC meeting, New HIC nurse informed about the same in the meeting.	HIC nurse					
6	OT and HIC records	records checked found ok. Training needs as per any variance in HIC rounds informed to Training manager.	HIC nurse					

		ttee Meeting _MoM :: 15 May 2019						
Date	15 May 2019	TIME: 3:30 TO 4:30PM						
Topic	Endophthalmitis case							
Present	resent Dr. Saurabh Choudhry, Dr. Uma Sridhar, Dr. Neha Goel, Dr. Divya Jyoti, Ms. Joshna John, Ms. Jasmeet Kaur, Guest: Dr. Metu Rajput							
S.No.	Agenda	Discussion Points	Responsibility					
1 New protocol for VT		In this case VT didn't inform anyone that patient's complaint of decreased vision. It was decided to make a protocol that patients to be brought to ICARE who complains about DoV and concerned must inform	Mr Mukesh					
3	Investigation of complicated cases	For all complicated cases, patient should undergo USG. Documentation of the same to be attached with hard file of the patient.	Ms Thresiamma					
4	Endoph information to HIC	It is to be re-emphasized that Endoph cases must be immediately informed to HIC committee members via SMS or on Whatsapp group. Nursing staff as well as surgeon should inform HIC members within 24 hours.	Dr Divya Jyoti Ms Thresiamma Ms Sunita Joshi					
5	Documentation of clinical findings	Clinical findings should be written everyday by the PG/ Ward consultant	All PGs/ Ward consultants.					
6	New protocol for 5.2 lens	Protocol to be prepared	Dr Saurabh choudhry					
7	Endoph policy	It was decided to re-emphasize the Endoph policy to all HCW	Ms Savitri Bhattacharya					
8	Review of Endop case	It must be reviwed by operating surgeon atleast twice a day.	All consultants.					
9	Duplicate file of Endoph case	Endoph case file should be copied and sent to Mr. Mitul Patel	HIC NURSE					
10	BMW Status	BMW audit of April 2019 was discussed by HIC nurse with committee members. Segregation found Ok. Trainings conducted were 4 IN Feb and HIC trainings were 3 in April. Trainings to be continously conducted especially for the New joinees.	Ms Savitri Bhattacharya, HIC Nurse					

	HIC Com	mittee Meeting _MoM :: 21 OCT 2019							
Date	21 PCT 2019	TIME: 4:00 - 5:10 PM							
Topic	Documentation: BMW audits, CSSD, Autoclave etc., Endophthalmitis case reported in month of October till								
Present	Dr. Charu Tandon, Dr. E Jasmeet Kaur	Divya Jyoti, Ms. Thresiamma, Ms. Sunita Joshi, Ms. Joshna John, Ms	. Swati Nagar, Ms.						
S.No.	Agenda	Discussion Points	Responsibility						
1	Endoph cases to be secluded	Proposal: As there is no separate room for keeping Endoph cases in Community ward, it was proposed to have a designated area for them and diffrentiate it with the help of either curtains or green screens. Endoph patients to be instructed and strictly watched for, not to be socialising with rest of the patients.	Ms. Sushila Joshi Dr. Divya Jyoti Sis. Thresiamma						
2	Repair of OT 7 door	Door closure required for the OT 7 door, as it remains open if not closed properly.	Ms. Sunita Joshi						
3	Personnel flow in Ch. OT	Re-emphasize: Decrease the personnel (patient, staff and others) flow in Ch OT. Some measures have already been taken and results are visible but still the flow needs to be lessen more.	Dr Charu Tandon, Ms Sunita Joshi						
4	BMW Audits	Audits discussed for the months of June to Oct 2019. It is re- emphasize that the BMW area to be locked and cleaned immediately after waste is collected by CBWTF. Responsibility of Mr. Praveen.	HIC nurse						

Medicare Environmental Management Pvt. Ltd. For the Month of Annay Year 2013 C-21, Phase-1, UPSIDC Industrial Area, Masuri Gulawathi Road, Ghaziabad, U.P. - 201015 Tel: +91 - 120 - 6862920

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C-21, Phase-1, UPSIDC Industrial Area, Masuri Gulawathi Road,

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Name of the Hospital/Nursing Homes / Clinics :

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C-21, Phase-1, UPSIDC Industrial Area, Masuri Gulawathi Road,

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Name of the Hospital/Nursing Homes / Clinics : 3115 05214 516

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sietie	3	4.250	G	261814	tliL	NIL	sussession and the	1:45	K41830
415/19	2	3-740	8	23,700		.8008	n L	Ч	RHOST
GISNE		3.230	7	26.84	0 1	.6508		3.360	Rosesy
6/5/13	2	3.110		25.80	CONTRACTOR OF THE PARTY OF THE	2.400		3-835	Kyesh
7/5/19	R	6.610	8	28.5	do ex	4-		.585	fortesh
181519		3.100	5	18:35	Dat 9	:580		25/0	Codelon
9/9/12		50	19206	ay	-	-			05F
1000	1	2.420	25	19-80	h 1	3-1000	e jul		KDOSY
11310	2	3400	М	NSa	N			:585	23 Juli
22/1/19	3	Q	2	12		4	\mathcal{N}'		Don't
3/5/19	3	7.Kg	5	14	2	1.200	2	3,500	9
24/5/19		30	3	16	-			_0	no s
7/5/19	3	2	7	22	1				Andry
28/5/19	3	3	୍	-14.50		5	<u>~</u>		Down
9/5/19	2_	3	3	7	B	3		-	fund
3015/19	2	2	4	13	1				AR
8115119	2	3	9	B	$\neg t$	1		7	1 Aux
	6	12.92		600.5	18/	(7.28)		40.773	<i>J</i>
		194		398)		\prec	,	1	

DATE			NO. (OF BAG			BLUE CARD BO	ARD BOX	to the second
DATE	YELLOW	ĶG.	RED	KG.	PPC	KG.	BLUE	KG.	SIGNATURE
Ollocks	2	2	9	15	7 4	_		1	63
02/6/0/19	S	C	-			-			QEO
3/6/419	3	5	4	13	2	4		-	2017/3/8
161000	Ч	3	3	13				E	Goldi
5/6/99	2	2	್ರಿ	9		_	2	5	1010 218
6/6/19	700	2	3	8	-			~	A CONTRACTOR OF THE PARTY OF TH
7/06/19	2	2	3	8			-	-	- Avery
5/19	2	2	3	8		_		1	ASSE
615 612	2	2	13	7					Golds
100/19	3	6	3	io	S	-8	2	_5	nes
12/06/19	2	2	2	9	Nj'l	_	2	- T	Anne.
3/6/019	2	2	2	5				_P	Gooddi
416/19	1 A 2 Co 1	1.900	2	7.500	∦ (x	2		14	Doyest
5/6/49	<u>a</u> -								13/1/15
6/6/018	S	6							OF
1416/98	2	4	8	21	1	1	*		RINGIO
18/6	45.1	d	3	5	N	L.	MI	Mr.	Logical
17	1	-3	3	11	14	1	1/1	1 00	HOUR
Jap 6-19			-			2000 1670			
20-6-19	_1_	3	4	16,200		1		31100	Royean
1		3	4	1.9	X		1	1	Rosely
1 1/8/6	3	.3.	-	Ires	W		-11_{1}	de	LAGIN
31611	-	SU	nce	PK	~-	e-uucu			COFF
24/A13	M	4	5	12		1	M	~—	Kyres
25/6/19		3	5	14		2		_1	raisen
26/6/11	2	2	3	12_	_1_		3	3	-American
27/6/19	2	3	3	11	1	1	2	Ч	May
28/610	1	L	3	17		1		1.	Kyseikh
2916	1	2510	4	2	N	~	1 1	2	with
	JE SAL	(6.3)		601.8		62)		(28)	

Medicare Environmental Management Pvt. Ltd. For the Month of Annual Year Annual Year Annual C-21, Phase-1, UPSIDC Industrial Area, Masuri Gulawathi Road,

Ghaziabad, U.P. - 201015 Tel: +91 - 120 - 6862920

DATE			NO.	OF BAG			BLUE CARD BO		
0.110	YELLOW	KG.	RED	KG.	PPC	KG.	BLUE	KG.	SIGNATURE
. 1 17/19		3	Ч	13	1	1	Ne		Bell
2/2/19	2	4	4	16	-	-	2	3	1
3/7/18	J 1	X	4	15	N		•	2	1 255021
14/19		2	3	20	N	<		1	K2492 B
3(710		3	-5	16		2	1	1	Rygold
61710		3	15	18			- 1	2	Rysel
414113	-	SK	nola	X.		1		-	DEF
81418		2	4	12	2	2		1.	RAJORA
3/7/19	2	15	4 '	16	NLI	-		国星源	Bysel
10/7/13		13	. 4	K.	2	1		2	Doyols
11/4/19	A	2	4	10	NU	الث			Doyeste
13/2/10	4	6	3	&,	a I	2		4	190
13/2/19	B	6	.2	7		2		1	Mark
CHAD	- A 1100 A	SU	not	W.		- 1	·	-	DEF
15/7/19	×	5	13	8	1		NU		1000 X
16/7	X	6	И	92	1	2	1	1	LOVERY
* (7)7	3	7	15	13	NU	-		2	Rosell
-18/7	2	5	50	17	NA		1 1	2	Restor
19/7	2	N	4	15		1			Dares M
20/4/19	3	8	15	18	New		Nen	-	Lyesh
8117/19	0	<u> </u>	nola	12	-	-	>	0.1	OFF
2 7 7 19	X	5	y	12	3 ,	3	pan	-	ROMERI
317119	10	8	3	(D	M	_	1 -	2	Dexesto
(9)710	2	6	5	15		(1	Ross
21//19	1	4	3	8	2	2	NU	•-	Koyda
617/19	1	3	4	13	124	-		1	arrow
\$1719	X	6	N.	10		1	MN		Say al
8719	1000	24	ne	wy			~	milpul	MER
97/19] ,	2	3	8	MA	455	140		fares)
0/7/19	2	4	4	10	1 0	2	M		Ryert
4713		3	4	8	ч	7	2	8	ROTER

Medicare Environmental Management Pvt. Ltd. For the Month of Alexander Year Co.1.9 C-21, Phase-1, UPSIDC Industrial Area, Masuri Gulawathi Road,

Ghaziabad, U.P. - 201015 Tel: +91 - 120 - 6862920

DATE	h-Sha		NO.	OF BAG	100 M		BLUE CARD BO	ARD BOX	7 N S T M S
	YELLOW	KG,	RED	KG.	PPC	KG.	BLUE	KG.	SIGNATURE
1/8/19	1	20	14	8	14		of the second	1.	Recal
81R/17	· /	N.	(3	5		1-	N.	(_	1940
3/3/19	્ર	.5	5	12	1	1	1	2	Lysel
1010	seeming.	54	noll	49			. ک		OFF
9/8/10	1	8	2	7	N	-	M		Down
	2	4	3	5	1	1	N		Rovel
718119	3	6	ч	8	14	_	1	2	Outo 21
818119		2	3	11	Nu	,	Nu	-	lovery
18/19	4.	2	4	14	1 38		= 1 1	1 5	Royceh
0/8/19		3	u	18	1	2		1	Royal
1118/12	2-	-8	uno	wif				1 23	OFF
12/18/17		3	3	12	1	1	1	1	Koyoxh
13/8/19	de	4	3	10	3	2		20	Rexer
14/8/19		G,	Ч.	13	3	3	Nen	-	Heresh
19/8/19	No	shi	RW		•	-	- t- t-	1	BEF
16/8/19		B	(3	6	NA		IVR	_	Unex
7/8/19	2	4	3	8.	IVI		11	2	Lyesh
\$8/8/0		8	una	40		-		-	OFF.
2/8/0	L	5	4	10	NU	-	Nh		Lyest
0/8/1)	2	4	5	12	Ner			2	Lover
118/19	2	3	4	70	7			2	Lazzah
22/8/19	2	4	5	13	17	3		1	Loyals
3/8/0	1	3	5	12	14	_	- 1	1	Loyer
(4181)	2	4	4	8	N		NN	[Royald
2518/19	-	S	KB	del	1				OFF
4810	R	5	4	10	in		1/1	-	MON
7/8/19		3	3	8	Nu	-	1		1510 M
818/19	a l	4	4	K	1 0	2		,	Roll
918/19	1	K	5	14	NH	~	= 1	1	Korola
30/8/19	2	4	3	8	IVA	. امر	1 /		Loren
21818	2	5	4	10			1	1	HORRI

tarns or an	riospiai	ituioni			1	Z(7)	The S	The second secon	
DATE			NO. O	F BAG	r		BLUE CARD BO	DARD BOX	SIGNATURE
DAIL	YELLOW	KG.	RED	KG.	PPC	KG.	BLUE	KG.	OIOIN TOILE
1/9/19		5	uni	elve	eg	-			8/7
219/19	1	53	4.	R	1	1.		1	HON
81910	d	5	5	10	14	J-		2	Kyesy
9219	3	6	5	13	NU	\ <u>-</u>	()	1	Koseon
519/19	2	U	U.	12	1_	2	124		foxest
A19119	2	6	10	18	NA	-	- 1	2	see s
79119	1	13	5	10	/ple	-	12		Lores
610/9		-7	5	ب	n d	1			Mary July 1
9/4/13	3	5	4	8	-		2	5	NARD
16/9/19	B	6	.5	R	1	2	T. Aleman	1	Ryell
1119/17	D	4	4	10	1	1		2	KILON
127/19	B	5	. U	8	L	2	1		10×084
13/9/19	2	74	5	70	N	1		1	10108
1419119	3	6	6	12	2	2	1		LALEST
14/9/19	-	-5	420	ax		_		-	OFF
16/9/19	2	5	5	14		1.	2	2	Meso
17/9/19	X	ч	U	12		2.	2	3	CONOX
18/31D	17	3	5	18	1	1			43268
1919/19	2	4	3	8.		1	1	1	10xex
20/9/19	1	2	4	10	TU		2	2	Karen
211910	2	Ч	3	12	NL	-			Koyesh
2999119		190	200	cu	_				0)=
28/9/19	2	5	4	10		cel Co	2	8	10208
241919		3	15	12		2	7	1	KONOLA
25/9/9	3	6	7	2		180		1107 12	Myer
26/9/19	3	5	d	8		1	1	A THE	1920
270/10	2	4	5	10	R	2	d	3	Kayuri
28/9/19	2	6	u	12	3	3		10.00	BYOST
2919119		81	19nc	Lee	1	J. 1965	-	-	OFF
30/9/19		13	T'U	8	s dusti	2		1	1008h
25(1)		(III)		(223)		26)		(36)	-70000

Ghaziabad, U.P. - 201015 Tel : +91 - 120 - 6862920

DATE			NO. C	F BAG		12.8	BLUE CARD BO	ARD BOX	
	YELLOW	KG.	RED	KG.	PPC	KG.	BLUE	KG.	SIGNATURE
1/10/19	1	3	И	8		2	1	1	Parals
2/10/10	2	5	5	10	2	2		2	Lorest
3/10/2	1.	1	1.	1		100			xHm
4/10	×	4	4	8	NU	-	Harris Section	A succession	RAZER
6/10		X	3	6	1	1	NI		KOLOW
\$110	0	134	2000	ass		-			OFF
8/10	X	4	13	B	Ne	100	1	2	KXX
9/18	9	4	Day	*					-BFF
1/3	1	3	4	10		1	144	\rightarrow	LOUS
10/10	_{	3	3	7	1	2	2	3,	KIZOSI
210	1	2	5	10	ric	(-	2	2	KgXOS
40.0	9	5	9	8	12	Stene		1.	KSXS
15/10	1	0	<u>ح</u> ا ا	10	10	0 T	1 2	(KIKOR
16/10	1	9	- 4	8	حی ا	6	2	4	LOVORT
13/10	2	4	7	12	2		2	1	मन्द्रप्रसिष्ट
B110	2	5	3	7	7	2	7	3	1012/215
14/10	3	2	2	2000	21		_	3	NH
20/10	8	-		2	#13-3-		Assistant in	3000	NINE
21/10		2.82	4.	a.Ke	. <	MILKER			221210
22/10	3	-	. 1	2	+ 1				ואיזוונו
23/10	2	3	4	7	1	7		2	1915/210
24/10	1	3	3	5		, .	C		12/2/10
25)10	2_	4	3	2	1	1		-)	813/215)
26/10		3	3	5	1/2		2	P	Pozest
24/10.	- HO	to De	CW -	-	-	-			AFE
8/10	1	2	d	6	NI			1	Daywal
4/11	170	11 1	00		Y	ine y fa		100	
0/6	ン	4		2	3	5		2	166
140	2	3	1	1		1			Non
		(g) [' (109)	7	25)	1	32)	

	17			F BAG	:		BLUE CARD B	OARD BOX	
DATE	YELLOW	KG.	RED	KG.	PPC	KG.	BLUE	KG.	SIGNATURE
11/19	d	4	3	8		1	1	2	Lesters
11/19	1	B	Ч	10	N	1	1	1	Losels
3/11/19	1100	SU	noc	KYZ.					OFF
4/1/18	De	5	5	12	3	3		J	Long
5/11/19	1	4,	Ц	10	112	W	g	3	Roxel
6/11/18		6	.5	14	11	1-	2	2	KOXOX.
7/11/0	-	8	N	16	in	-	2	13	KIROS
8/11/10	d	5	15	18	1	Xº	The List	1	KANOR
9(11		B	6.	30	1/2	\ -	d	2	44488
10/11	-/	SK	nde	ex.	146	-		A. ***	OFF
11/11	2	5	u	16	2	2	2	3	ROSE
12/11	2	3	_S_	14	1	\mathcal{L}	1-1-	0	LOZES
13/11	d	4	Ч	120	Y	4	2	2	ROXEN
14/11/19		3	4	15	d	2	2	14	KIKESI
18/11	1	R	15	18		1	d	3.	LOSERI
61119	1	y	ч	14	ille		L	2	Lesel
7:11			191	en	des		1	-	oft.
8/11	2.	5	,5	155	NI	<u></u>	R.	12	RANCEM
9/11	d	6	7	21	13	3	X	14	been
20/11	3	8	8	24		1	1	2	Rayeat
1111	2	Š	6	28	2	X		2	Downsch
211119	J	4	5	22	N	-	N.	B	KINDON
311119	L	6	151	25.	Ne	i	R	2	KINDO
4/1/19	Sill	189	A	20 34	4-	d	4	است	P.F.F
STILL	2	5	7	28		2	2	3	WALEN
6/1/11)	2	7	-5-1	24	WL	-	2	2	Well 1
7/1/11	2	5	u	25	3	13		3	Royel
BIIID	2	y	1	22	NL			A CONTRACTOR	Reyers
9/11/19	3	6	6	18	2	2	2	4	Royel
20/11/14	Audit Co	u	7	04	NL		1.	2	Rujel
VIII	2.7.7. A	1	-		10	(32)		(5)	10/

Medicare Environmental Management Pvt. Ltd. For the Month of C-21, Phase-1, UPSIDC Industrial Area, Masuri Gulawathi Road,

	-		NO. O	FRAG		-	BLUE CARD BC	APD POV	NAZ CAJITA
DATE	YELLOW	KG.	(RED)	KG.	(PPC)	KG.	BLUE	KG.	SIGNATURE
		131.50	6			746			0
2/2/0	1	Y	5	25	* I	2	2	3	Loges
3/18/19	1	5	6	18	2		NL	~	60%0
9/18/10		3	5	22	6,	6		2	frees
7/1/19	X	6	9	32	2	2	2	U	Kyex
1/2/19	2	5	6	24	M	15	100	1	ROYEST
F112019	X	6	6	200		1	3	13	194es
7/2	0	0	4	- n	1	العالة	-		3.CM
JIXII	X	8	7	30	1,	0-14	3	5	Myes
9/2/19	X	5	6	24,	NU	7	1	2	12 ex
UNID	13	8	+	20	3	13	20	9	K92EX
UKIO	2	0	6	30	Nu	9	a	4	KZOKI
3/12/19	<u> </u>	5	T	29	9	2	0	1	1
5/18/19	2	6	6	1	X	X	~	3	MONEY >
102/109	9	2	1270	100	11.77		10.00	l k	UP-F
112119	3	7	7	2	M	0		20	Lay as I
2112114	13	8	5	00	NI	_	1	1	Dovos
112119	p 1	V	7	28	ICU		3	3	Dyes
118/19	2	6	6	94	29	17	1000	1	2000
112119		u	8	26	IVI	_	2	2	Paren
112/19		34	nca	OK				-	0/26
3/12/19	X	8	15	25	4	4	2	3	Touch
41/2/1)	13	10	5	21		Tai		f	LANGE
912119	1	5	y	18	12/4		2	Ч	KEYOSE
12/19	· R	4	1	5	1	1	1	2	452084
418/19	2	6	5	21	NU	-	1	1	forest
8/4/9	2	4	l	15		d'	X	X	KOXOGA
9/18/19		8	Un	cce	2		\sim	-	OF /=
UNI		5	5	X	IXU	. •	2	2	654680
1/120	2	6	4	18	. INer	٠.	2	(5F)	Hores



Department of Medical Health & Family Welfare

Government of Uttar Pradesh

RENEWAL OF MEDICAL ESTABLISHMENT CERTIFICATE

OFFICE OF THE CHIEF MEDICAL OFFICER, Gautam Buddha Nagar

Certificate No: CMEE1900799

Issuance Date: 16/05/2019

This is to certify that the medical establishment having Name ICARE EYE HOSPITAL & PG INSTITUTE, Type HOSPITAL, Address E-3/A, SECTOR 26, NOIDA, GAUTAM BUDDHA NAGAR, UTTAR PRADESH - 201301 is operated by TRUST(ISHWAR CHARITABLE TRUST) for providing medical facilities VITREORETINA AND UVEA; GLAUCOMA; CORNEA; PEDIATRIC OPHTHALMOLOGY; OCULOPLASTY AND OCULAR ONCOLOGY; N.The medical establishment is registered with us for the period 16/05/2019 To 30/04/2020. The Medical establishment will be operated by the in-charge of the medical establishment according to the terms/details mentioned below as given in the application form.

Owner/Partner Details:-

S.No.	Name	Father Name	Mobile No.	Age	Address
	SAURABH CHOUDHRY	OR SUSHIL CHOUDHRY	9811300286		E-3/A, SECTOR 26, NOIDA, GAUTAM BUDDHA NAGAR, UTTAR PRADESH - 201301

2. Person Incharge Details:-

2.1 Name: DR SAURABH CHOUDHRY

2.3 Qualification: MD DO DNB OPHTHALMOLOGY

2.2 Mobile No.: 9811300286

2.4 Registration No.: 15585

2.5 Address: E-3/A, SECTOR 26, NOIDA, GAUTAM BUDDHA NAGAR, UTTAR PRADESH - 201301

3. Doctor Details:-

S.No.	Name	Qualification	Institution	Registration Type/No.	Job Type
	DR SAURABH CHOUDHRY	MD DO DNB OPHTHALMOLOGY	MCI	MCI / 15585	FULL TIME
2	DR REENA CHOUDHRY	MD DOMS FRCS	MCI	MCI / 15596	FULL TIME

4. Paramedical staff Details:-

F	Name	Qualification	Institution	Registration Type/No.	Job Type
S.No.	YOGESHWARI BANSAL	MSC OPTOMETRY	VINAYAK MISSIONS UNIVERSITY	SMC / 035599	FULL TIME
-	TAPOUWAL PAL	B OPTOMETRY	WB UNIVERSITY	SMC / 786450	FULL TIME



ambudh Nagar

Note: At the time of future inspection, if it is found that the in-charge of establishment as mentioned in the application form does not operate the institution or violate the rules or if any other type of irregularity found in the working, then the registration of the institution can be cancelled without notice.

म्डानिदेशतः, विकित्सा एवं स्वास्थ्य सेवार्थे, CONO. STEPHEN

ममस्य मुख्य मिकित्सा अधिकारी,

पत्र स0-11म/केष-83%

विषय-प्रदेश में कोडिड-19 की महामारी के कारण निजी चिकित्सा इकाईपों, निर्मिग्छोन्स आदि स्विन्देशन/नवीनीकरण की अवधि ब्हार्य जाने के संबंध में। लखनक दिनांक: 14 मई. 2020

उपदुक्त किएक कृपया महानिदेशालय के पत्र संख्या-11फ/कैप-8177, दिनक 16.0 विष्टेशन/न्**वीनीकरण** में कठिनाई के दृष्टिगत पूर्व में कराया गया रजिस्ट्रेशन दिन्शक 30.0 2020 जिसके द्वारा प्रदेश में जनपद स्तर पर निजी विभिन्ता इकाईयों, निर्मादोम्स अर्थि 2020 उक्त मान्य किये जाने आदेश निर्मत किये गर्थ थे।

ियों जाने की अविधि को 06 माह अर्थात दिनांक 31.12.2020 तक बढ़ाये जाने का निर्णाण तिथा निर्मित्रोमिस आहे के लिए पूर्व में कराये गये शिम्हेशन/मवीनीकरण की हिमांक 30,08,2020 होत उन्त संदर्भित क्षत्र के द्यम में आज दिनांक 14.05.2020 को शासन स्तर पर प्रमुख सिन िगिकितमा, स्वास्थ्य एवं ५०क०, उत्प्रित शासम की अध्यक्षता में दिनांक 14.05,2020 को आहूत बैठ में कोविड-19 की महामारी के दृष्टियत निजी सिकित्स इकाई में सस्यक विवासीयशान्त प्रदेश

कृषया तब्नुसार कार्याती सुनिष्टियत करने का कहा करे।

अतिमिति-शिनािश्वक को सुकनार्थ एवं अवश्यक कार्यवाही हेतु प्रेषिक तद्विनांक गुज सहित, चिकित्सा, स्वास्थ्य एवं पठवत, राठाठ शासन।

उठपठ, लाखनक विशेष सथित, सम्प्रित निर्मित्स अनुभाग-1, 5 एवं 6 निर्देशक(संसारी शेष) भित्मिता एवं स्वाक्थ्य सेवार्षे, स्ताल्य्य भवन्। लाङ्मत अपन्तित् अपर निवस्त विकित्स म्वास्य एवं परिवार कल्यात अस्तित्र द्रमानेक काई विकास माने होता एसो शिएतन, स्वाफ काइ अस्ति ह्रमाई, अस्ति समि, आईव्यमवार निर्मा होता होते THE TOTAL SONO IN ानि भणवासीय



UTTAR PRADESH POLLUTION CONTROL BOARD

TC-12V, Vibhuti Khand, Gomti Nagar, Lucknow-226010 Phone: 2400852, 2400851, Fax:0651-2400850 http://www.uppcb.com/

FORM III (See Rule 10) AUTHORISATION

(AUTHORISATION FOR OPERATING A FACILITY FOR COLLECTION, RECEPTION, TREATMENT, STORAGE, TRANSPORT AND DISPOSAL OF BIOMEDICAL WASTES)

- 1. File no. of authorisation and date of issue: No:- 4170055 and Date:-06/02/2019
- M/s ICARE eye hospital and Post Graduate Institute, Saurabh Choudhry an occupier or operator of the facility located at E-3A, SECTOR 26, NOIDA, GAUTAM BUDH NAGAR, UP is hereby granted an authorisation for:

Generation, segregation

Collection

Transportation

Reception
Recycling
Packaging
Treatment or Processing or
Conversion

Any other form of handling

Collection

Use
Offering for sale
Transfer
Disposal or destruction

- M/s ICARE eye hospital and Post Graduate Institute is hereby authorized for handling of biomedical waste as per the capacity given below:
 - (i) Number of beds of HCF: 70
 - (ii) Number of health care facilities covered by CBMWTF: NA
 - (iii) Installed treatment and disposal capacity: NA
 - (iv) Area or distance covered by CBMWTF: NA
 - (v) Quantity of Biomedical waste handled, treated or disposed: NA
- This authorisation shall be in force for a period of 3 Years from the date of issue.
- This authorisation is subject to the conditions stated below and to such other conditions as may be specified in the rules for the time being in force under the Environment (Protection) Act, 1986

Date: 06/02/2019

Place: E-3A, SECTOR 26, NOIDA, GAUTAM

BUDH NAGAR, UP

Regional Officer U.P. Pollution Control Board, Noida

ANIL Digitalysigned by AMI.
KUMAR SINGH
SINGH 149945
+05307

Terms and Conditions of Authorisation

- 1. The authorisation shall comply with the provisions of the Environment (Protection) Act, 1986 and the rules made there under.
- The authorisation or its renewal shall be produced for inspection at the request of an officer authorised by the prescribed authority.
- The person authorized shall not rent, lend, sell, transfer or otherwise transport the biomedical wastes without obtaining prior permission of the prescribed authority.
- Any unauthorised change in personnel, equipment or working conditions as mentioned in the application by the person authorised shall constitute a breach of his authorisation.
- It is the duty of the authorised person to take prior permission of the prescribed authority to close down the facility and such other terms and conditions may be stipulated by the prescribed authority.

ANIL Digitally signed by ANIL KUMAR SINGH Coate: 2019.02.05
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Specific Conditions:

- The authorization shall comply with the provisions of the Environment (Protection) Act, 1986 and the
 rules made there under.
- The authorization or its renewal shall be produced for inspection at the request of an officer authorized by the prescribed authority.
- The person authorized shall not rent, lend, sell, transfer or otherwise transport the biomedical wastes without obtaining prior permission of the prescribed authority.
- 4. Any unauthorized change in personnel, equipment or working conditions as mentioned in the application by the person authorized shall constitute a breach of his authorization.
- It is the duty of the authorized person to take prior permission of the prescribed authority to close down the facility and such other terms and conditions may be stipulated by the prescribed authority.
- The Bio- Medical waste shall be segregated into containers or bags at the point of generation in accordance with schedule I prior to its storage, transportation, treatment.
- 7. The containers or bags referred to in sub-rule (2) shall be labeled as specified in schedule IV.
- The occupier shall ensure that bio- medical waste generated in hospital is handled without any adverse effect to human health and the environment.
- 9. Bio-medical waste shall be mixed with other waste.
- 10. If a container is transported from the premises where bio-medical waste is generated to any waste treatment facility container shall, apart from the label prescribed in schedule IV, also carry information in schedule IV.
- 11. Bio-medical waste shall not be mixed with other waste.
- 12. No untreated bio-medical waste shall be kept beyond a period of 48 Hrs. If it becomes necessary to store beyond 48 Hrs. The authorized person must take permission from the prescribed authority to ensure that it does not adversely affect human health and the environment.15.
- 13. The occupier shall submit an annual report to the prescribed authority in form IV by 30th June every year, to include information about the categories and quantities of Bio-medical waste handled during the preceding year.
- 14. This authorization shall be valid subject to the validity of agreement with the Common Bio Medical Waste Treatment Facility (M/S Medicare Environmental Management Pvt. Ltd.). Renewed agreement should be submitted before the expiry of existing agreement.
- 15. The occupier shall maintain a record to the generation, collection, reception, storage, transportation, treatment, disposal and or any form of Bio-medical waste in accordance with these rules and verification by the prescribed authority at anytime.
- 16. The occupier shall ensure the Mercury Spillage Management within the Hospital/Nursing Home etc due to breakages of thermometers, pressure & other measuring equipment as the spilled mercury does not become part of bio-medical or other solid wastes generated from the health care facilities.
- 17. The occupier shall ensure that waste water generated from the hospital shall be treated as per norms and should obtain consent to operate, under provision of Water (Prevention & Control of Pollution) Act,1974 Under section 25/26 and Air (Prevention & Control of Pollution) Act,1981 under section 21/22.
- 18. It is within powers and function of the U.P. Pollution Control Board to modify/revoke the terms and conditions of the authorization issued under the Bio-medical waste Management Rules, 2016.

ANIL Digitally rigore:
by AHL KUMAR
SNOH
David 2019/02/08
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Dated:06/02/2019

Memo No.: 4170055

Copy To:

Chief Environmental Officer, U.P. Pollution Control Board, Lucknow.

ANIL Digitally signed by ANIL RUMAR SINGH SINGH

Regional Officer U.P. Pollution Control Board, Noida