

6) Registration Number (e.g. Bombay Nursing Home reg. no., MSDC, MBTC)

7) Registration Expiry Date

Maharashtra Pollution Control Board

महाराष्ट्र प्रदूषण नियंत्रण मंडळ

Bio Medical W	Form - IV (See rule 13) Vaste Annual Return for the Calen	nder Year - 2023
Application Type: HCF	Calender Year 2023	Submit To SRO-Nagpur I
Member of CBMWTF: Yes		
Type of Health Care Facility Bedded		
1) Particulars		
i) First Name VARUN	ii) Middle Name CHANDRAPRAKASH	iii) Last Name BHARGAVA
iv) Designation MANAGING DIRECTOR	v) Aadhaar No 2654	vi) PAN No 54C
vii) Address as per Aadhaar Card FLAT NO 502 ENRICO HEIGHTS SOMALWADA WARDHA ROAD REDISSION BLU VIVEKANAND NAGAR NAGPUR 440015	viii) Tel. No. 9370186120	ix) Fax No. 07122420158
x) e-mail carenagpur@carehospitals.com	xi) URL of website www.carehospitals.com	
2) Details of Health Care Facility		
i) Name of the HCF GANGA CARE HOSPITAL LTD (UNIT OF CARE HOSPITALS NAGPUR)	ii) Email carenagpur@carehospitals.com	iii) Name of the contact person Satish Tata
iv) Contact No. 9370186120		
3) Address of the Health Care Facility		
i) Building Name/Building No./Survey Number GANGA CARE HOSPITAL LTD (UNIT OF CARE HOSPITALS NAGPUR) /SURVEY NO 120	ii) Street / Village 3 FARMLAND PANCHSHEEL SQUARE RAMDASPETH	iii) City / Taluka NAGPUR
iv) District Nagpur	v) Pin-Code Number 440012	vi) Near by Landmark
vii) Latitude coordinate 21.1386033	viii) Longitude coordinate 79.0787225	ix) Ownership Private
4) Details of valid Combined Consent and	BMW Authorization (CCA)	
i) CCA / Authorization No. Format1.0/CC/UAN No.0000154762/CO/2305000519	ii) Valid Upto Dec 31 2026 12:00:00:AM	
5) Total No of Beds (As per valid Authoriza	ation)	105

676

Mar 31 2026 12:00:00:AM

8) Faculty of Medicine			
9) Details of membership of commo	on bio-medical waste trea	tment facility (CBMWTF)	
Name of CBMWTF	M/s. M/s. Superb H	ygiene Disposals, Nagpur	
Membership Number	SHD/23/24/001664		
Number of beds	105		
Validity of Membership	31-12-2024		
10) Details of BMW i) Authorized Bio Medical Waste Qu	antity Kg/month (as per v	valid CCA)	
Yellow 1500.00000	Red 1750.00000	Blue 500.00000	White 300.00000
ii) Bio Medical Waste Generated (K	g/Month)		
Yellow 1159.00000	Red 780.00000	Blue 22.00000	White 28.00000
iii) Quantity of Biomedical waste gi	ven to CBMWTDF (kg/Moi	nth)	
Yellow 1159.0000	Red 780.0000	Blue 22.0000	White 28.0000
10.(a) General Solid Waste (kg/Mor	nth) 1470.0000		
11) Details trainings conducted on i) Number of trainings conducted o 55			
ii) Number of personnel trained 716			
iii) Number of personnel trained at 16	the time of induction		
iv) number of personnel not under	gone any training so far		
v) whether standard manual for tra Yes	nining is available?		
vi) any other information NIL			
12) Details of the accident occurred i) Number of Accidents occurred 2	d during the year		
ii) Number of the persons affected			
iii) Remedial Action taken (Please a Yes	attach details if any)		
iv) Any Fatality occurred, If yes det No	tails.		
13) Details of Liquid waste generat	ed and treatment method	ds (STP and ETP)	
i) STP	Yes	Capacity 75	(CMD)
ii) ETP	No	Capacity	(CMD)
14) Is the disinfection method or st standards in a year?	terilization meeting the lo	og 4 standards? How many ti	mes you have not met the

15) Whether HCE intended to Sale / Handover liquid BMW for R&D purpose Yes					
Name of the Party YES RAJ BIOTECHNOLOGY LTD	Address of the Party IB Sitaram Building Ground Floor Opposite Police Commissioners office Crawford Market 29 DRr D D N Road Mumbai 440001	Avg Qty handed over(Ltr/Month) 0.5000			
Place NAGPUR	Designation MANAGING DIRECTOR	Date 13-06-2024			

FORM – I [(See rule 4(o), 5(i) and

15 (2)]ACCIDENT

REPORTING

- 1. Date and time of accident: 2nd FEB 2023, / 30th MAY 2023.
- 2. Type of Accident : Needle Stick Injury
- 3. Sequence of events leading to accident: Improper segregation of Biowaste and in-adherence to the Bio-waste policy, while doing procedure.
- 4. Has the Authority been informed immediately: Yes
- 5. The type of waste involved in accident: White Category
- 6. Assessment of the effects of the accidents on human health and the environment: The affected employee assessed by Doctor and Needle Stick Injury protocol was followed.
- 7. Emergency measures taken: Viral markers were done as per the Doctor advice.
- 8. Steps taken to alleviate the effects of accidents: Vaccination completed.
- 9. Steps taken to prevent the recurrence of such an accident: Training done and monitoring strengthen.
- 10. Does you facility has an Emergency Control policy? If yes give details: Yes, we have needle Stick injury policy, spill management policy.

11. Date: 13/6/2024

Signature

Place: Nagpur

Designation: ICN



CARE HOSPITAL, NAGPUR



NEEDLE STICK / SHARP INJURY REPORT

1.	Name of the HCW: Vishny Type
2.	Name of the HCW: Vishny Type. Section of the HCW: Home keeping
3.	Employment No. :
4.	Date of Needle Stick / Sharp Injury : 30/05/ Yox 3 6 mm
5.	Date of Reporting to Casualty : 30/01/8-13
6.	Site & Depth of Injury: Right In ger finger to Cupesficies
7.	Site & Depth of Injury: Right In few finger to Cupe ficies Nature of Injury: Needle Prick / Sharp Cut / Laceration / Splash of Fluid / Splattered Glass Came out,
	Splash of Fluid / Splattered Glass Cancout,
8.	Action taken in Casualty:
	Employee Wanted handle
	Employee Warned handle
9.	HBV Vaccination Given (Date): Yes / No 12
	34
10.	Brand:
11.	Route of Administration: Intradermal / Intramuscular
12.	HBIG: YES / NO
13.	Anti HBsAg Titre:
14.	HBsAg (Baseline): Positive / Negative Achircle
15.	Information about the source of contamination (if available)
16.	Whether the patient has systems of HIV infection or no symptoms
17.	Serum sent for (report to be entered in follow up visit)
	1.Anti HIV 2. HBsAg 3. Anti HCV 4. CD 4 - CD 8 Counts
	(banenine)
	HCW Ward Incharge ICN FCOO
	wishril Want

FOLLOW UP INVESTIGATIONS OF THE H.C.W.

Sr. No.	Time of Exposure	Date	Result HIV Antibody	HBsAg	Anti-HBsAg	Anti-HCV
1 .	Baseline HIV Test (At the time of Exposure)					
2	I Follow up (6 weeks of Exposure)	3	* * * * * * * * * * * * * * * * * * * *	27.0 69		
3	II Follow up (6 weeks of Exposure)	* F. S.		a a		
4	After 1 year of Exposure	*				

POST EXPOSURE PROPHYLAXIS TREATMENT: TREATMENT STARTED:	YES / NO	
BASIC REGIMEN :		
BASIC REGUIVELY.		
EXPANDED REGIMEN :	3	
1 anertion		
Staff-Resignation 22/8/23.		







31 AYOBAYS/Malok. Accountable (AAA

DEPARTMENT OF LABORATORY MEDICINE

VISHNUDAS TUPTE.

30/05/2023 7:20PM 30/05/2023 7:49PM

Receiving Date Prescribed By

Sample Date

Dr EMERGENCY PHYSICIAN

Referred By

Ward / Bed No

OPD

Age/Gender

UHID/IP No

110327160

Report Date **Report Status** 31/05/2023 9:08AM Final

Specimen

Lab No

Serum : 11072711

INFECTIOUS DISEASE SEROLOGY

Investigation	Result	Unit	Bio. Ref. Interval	Method
HBSAG (SPOT) Note	Non Read It is a scre		indly confirm by Elisa .	

HCV (SPOT).

Note

Non Reactive

It is a screening test kindly confirm by Elisa.

HIV (SPOT) Note

Non Reactive

It is a screening test kindly confirm by Elisa.

1***End Of Report***

BHAGYASHREE ABHAY AGASE MD, Pathology

Printed By: 22396

Printed at 31/05/2023 09:07 Page: 1 Of 1

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Verified By: 22396

* Clinically Correlate, Kindly discuss if necessary.

* This report relates only to the item received.

GANGA CARE HOSPITAL LIMITED CIN: U85110MH2005PLC150811

CARE HOSPITALS / REGISTERED OFFICE 3 Farmland, Panchsheel Square, Wardha Road, Nagpur, Maharashtra- 440012. T: (0712)-6165656 | F:(0712)-2420158 E :carenagpur@carehospitals.com| W: carehospitals.com

CORPORATE OFFICE

H.No. 8-2-120/86/10,1st Floor, Kohinoor Building, Road, No.2, Banjara hills, Hyderabad-500 034, Telangana T: (040)-61806565



CARE HOSPITAL, NAGPUR



NEEDLE STICK / SHARP INJURY REPORT

1.	Name of the HCW: Amobile Neefa Nandyskar
2.	Section of the HCW: ICY (1st floor, Care hospital)
3.	Employment No.: 3/208
4.	Date of Needle Stick / Sharp Injury: 02/04/7073
5.	ate of Reporting to Casualty: $\omega/0 \sim / \sim 3$
6.	Site & Depth of Injury: left middle finger tip, deep.
7.	Nature of Injury : Needle Prick / Sharp Cut / Laceration / . Mr. Neeta Nanduska
	Splash of Fluid / Splattered Glass IS AN & South
8.	Action taken in Casualty: Her secont reports of 4/1/2 help, here Heap 910-
	1. Ordered vivology of Source patient
	Lource pt - mr. Amrita ogale, 62/F
	An. VHINHEN HISLAG.
9.	HBV Vaccination Given (Date): Yes / No 12
	34.
10.	Brand:
11.	Route of Administration: Intradermal / Intramuscular
12.	HBIG: YES / NO
13.	Anti HBsAg Titre :
14.	HBsAg (Baseline): Positive / Negative
15.	Information about the source of contamination (if available) ICU (1st flow) Source patient: Mr Amorta oggie, 63/F
16.	Whether the patient has systems of HIV infection or no symptoms No Mix a Knowb C/o Mer MRm Ca break RA Serum sent for (report to be entered in follow up visit) ACD 4 CD 8 Country Anne Holay
17.	Serum sent for (report to be entered in follow up visit)
	1.Anti HIV 2. HBsAg 3. Anti HCV 4. CD 4 - CD 8 Counts

HCW

Ward Incharge

(P) Narduskas

Acel

ICN

HCOO

FOLLOW UP INVESTIGATIONS OF THE H.C.W.

Sr. No.	Time of Exposure	Date	Result HIV Antibody	HBsAg	Anti-HBsAg	Anti-HCV
1 .	Baseline HIV Test (At the time of Exposure)	4/1/23	-ve	-ve	-ve	-ve
2	I Follow up (6 weeks of Exposure)		e se			
3	II Follow up (6 weeks of Exposure)		4:a	, ,		
4	After 1 year of Exposure	_				14

4	Exposure			A .
POS	T EXPOSURE PROPHY	LAXIS TREATME	Mource / Stir M then decide. ENT:	Wings - Status
TREA	ATMENT STARTED :		YES / NO	
BASI	IC REGIMEN :			
EXPA	ANDED REGIMEN :		*	







DEPARTMENT OF LABORATORY SERVICES

Patient Name

Miss NITA R NANDURKAR CHARDE

Age/Gender

33 Years/Female

Sample Date **Receiving Date**

04/01/2023 10:11AM

UHID/IP No

110239265

Referred By

04/01/2023 10:56AM : Dr ALKA BHARGAVA

Report Date

04/01/2023 11:43AM

Lab No

Report Status

Final

11049426

Specimen

Serum

Ward / Bed No

Investigation

: OPD

INFECTIOUS DISEASE SEROLOGY

Unit

Result

Bio. Ref. Interval

Method

RAPID PLASMA REAGIN (RPR) INTERPRETATION

NEGATIVE

FLOCCULATION

DRL)

The RPR test measures IgM and IgG antibodies to lipoidal material released from damaged host cells as well as to lipoprotein-like material, and possibly cardiolipin released from the treponemes. The antilipoidal antibodies are antibodies that are produced not only as a consequence of syphilis and other treponemal diseases, but also in response to nontreponemal diseases of an acute and chronic nature in which tissue damage occurs. Without some other evidence for the diagnosis of syphilis, a reactive nontreponemal test does not confirm T. pallidum infection.

A reactive RPR card test may suggest past or present infection with a pathogenic treponeme; however, it may also be a false-positive reaction

The RPR card test may be reactive in persons from areas where yaws, pinta or nonvenereal syphilis is endemic. Generally, residual titers from these infections will

Biological false-positive (BFP) reactions occur occasionally with cardiolipin antigens, mainly in specimens from persons who abuse drugs; who have diseases such as lupus erythematosus, mononucleosis, malaria, leprosy, or viral pneumonia; or who have recently been vaccinated.

HBSAG (SPOT)

Note

Non Reactive

It is a screening test kindly confirm by Elisa .

H. (SPOT).

Non Reactive

It is a screening test kindly confirm by Elisa .

HIV (SPOT) Note

Non Reactive

It is a screening test kindly confirm by Elisa .

BHAGYASHREE ABHAY AGASE MD, Pathology

Verified By: 22396

* Clinically Correlate, Kindly discuss if necessary.

* This report relates only to the item received.

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Printed at 04/01/2023 11:43 Page: 3 Of 4

GANGA CARE HOSPITAL LIMITED CINE US5110M 2005P C 150811 CARE HOSPITALS / REGISTERED OFFICE

3 Farmland, Panchsheel Square, Wardha Road, Nagpur, Maharashtra- 440012, T: (0712)-6165656 | F:(0712)-2420158 E:carenagpur@carehospitals.com| W: carehospitals.com

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24HRS.EMERGENCY CONTACT: 94236 23456 AMBULANCE AVAILABLE

Dr. Rx-0741318 Q.4000

Ganga CARE Hospital Ltd. Nagpur May-2023

Minutes of BMW Meeting held on 23/05/2023

Agenda:

- 1. Welcome address
- 2. Meeting to be held once in Six month.
- 3. Urgent meeting may be called whenever required.
- 4. Special invitees may be called as per the agenda.
- 5. Important matters needing urgent action may be conveyed to the chairperson.
- 6. Involve nurses and technicians in training program about BMW.
- 7. Vote of thanks

S. No.	Name	Designation	Sign
01	DR. VARUN BHARGAVA	CHAIRPERSON	B
02.	DR. AKHIL JAIN	HCOO	AlalA
03.	DR. KAMAL BHUTADA	DIRECTOR – CRITICAL CARE UNIT	
04.	MS. ASHA KARADE	HICN	Alex
05.	MR. SATISH TATA	SR. MANAGER – ADMINISTRATION	Alleling
06.	DR. ASHISH KINDARLE	ASSISTANT QUALITY MANAGER	Plate
07.	MS. DOROTHY SADANSHIV	ASSITANT NURSING SUPERITENDENT	Moty.
08.	SIS. VARSHA PAURANIK	OPD INCHARGE	Murles
09.	MR. DHARMENDRA PASHINE	HOUSEKEEPING SUPERVISOR	8

The following points were discussed:

- 1. The half yearly meeting of the year 2022-23 was held in Conference hall in supervision of Chairperson from 3.00 pm to 4.00 pm.
- 2. The infection control nurse welcomed the members, Reviewed the minutes of the last meeting.
- 3. The infection control nurse presented the statistics of incidence of NSI, BMW generation that occurred in our hospital during the year 2022-23.
- 4. Training of all staff and helpers involved in handling Bio-Medical Waste has been carried out in a phase manner during the last six months.
- 5. Yearly health checkups of all personnel handling Bio-medical waste is being carried out and up to date records maintained.
- 6. All personnel involved in handling Bio-Medical waste are being continuously instructed to exercise due care in the discharge of their duties so that the chances of occurrence of any accident / spill is

minimized. SOP of spill management was reiterated for everyone's benefit.

- 7. All functionaries were requested to remain vigilant in the performance of their duties and ensure that updated guidelines of Bio-Medical Waste disposal are strictly followed at all times.
- 8. There being no further points, the meeting was declared closed and it was decided that next meeting would be held on Dec-23.

Bhorgova Dr. Varun Bhargava

MD

Copy to: **HCOO**

Ganga CARE Hospital Ltd. Nagpur Dec-2023

Minutes of BMW Meeting held on 20/12/2023

Agenda:

- 1. Welcome address
- 2. Meeting to be held once in Six month.
- 3. Urgent meeting may be called whenever required.
- 4. Special invitees may be called as per the agenda.
- 5. Important matters needing urgent action may be conveyed to the chairperson.
- 6. Involve nurses and technicians in training program about BMW.
- 7. Vote of thanks

S. No.	Name	Designation	Sign
01	DR. VARUN BHARGAVA	CHAIRPERSON	10
02,	DR. AKHIL JAIN	НСОО	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
03.	DR. KAMAL BHUTADA	DIRECTOR – CRITICAL CARE	They
04.	MS. ASHA KARADE	HICN	I day
05.	MR. DEEPAK BANERJEE	AGM – OPERATIONS	Que.
06.	MR. SATISH TATA	AGM- HR & ADMIN	(100 s
07.	MR. ATULKUMAR BHUSHAN	QUALITY MANAGER	Such
08.	DR. ASHISH KINDARLE	DY. MANAGER – MEDICAL SERVICES	The line
09.	MS. DOROTHY SADANSHIV	ASSITANT NURSING SUPERITENDENT	1 Sylan

The following points were discussed:

- 1. The second half yearly meeting of the year 2023 was held in Conference hall in supervision of Chairperson from 3.00 pm to 4.00 pm.
- 2. The infection control nurse welcomed the members, Reviewed the minutes of the last meeting.
- 3. The infection control nurse presented the statistics of incidence of NSI, BMW generation that occurred in our hospital during the year 2023.
- 4. The committee ensured the fulfillment of compliance as per the consent order issued by the MPCB.
- 5. The committee perused and ensured the records of biomedical waste disposal through CBWTF.
- 6. Training of all staff and helpers involved in handling Bio-Medical Waste has been carried out in a phase manner during the last six months.
- 7. Yearly health checkups of all personnel handling Bio-medical waste is being carried out and up to date records maintained.

- 8. The committee noted that bio-medical waste is handled without any adverse affect to human health and environment.
- 9. The committee noted that there is no minor/major accident and it is satisfied with the process as there is no deviation.
- 10. All personnel involved in handling Bio-Medical waste are being continuously instructed to exercise due care in the discharge of their duties so that the chances of occurrence of any accident / spill is minimized. SOP of spill management was reiterated for everyone's benefit.
- 11. All functionaries were requested to remain vigilant in the performance of their duties and ensure that updated guidelines of Bio-Medical Waste disposal are strictly followed at all times.
- 12. There being no further points, the meeting was declared closed and it was decided that next meeting would be held on May-24.

VShowgowa Dr. Varun Bhargava MD

Copy to: **HCOO**