

ANNEXURE – V
CLINICAL MATERIAL IN HOSPITAL
2025-26

Maharashtra University of Health Sciences, Nashik
Inspection Committee Report for Academic Year 2025 - 2026

Clinical Material in Hospital

Faculty Nursing
 Name of College/Institute K.T. Patil College of Nursing, Dharashiv

HOSPITAL DETAILS

Sr. No.	Particulars to be verified	Adequate / Inadequate
1	The Institute / College shall execute a MoU with any institute for affiliation of hospital in addition to minimum 100 bedded own / parent Hospital (Affiliated hospital must be 50 bedded or more.)	Adequate
a.	Whether Hospital is registered under any act under Local Authority such as Corporation, Municipality, Gram Panchayat etc.:	Adequate
b.	Student Bed Ratio for UG & PG to be verified: (As per MSR)	1:3
c.	Average Bed Occupancy in % : (Minimum 75%)	91 %
d.	Clinical facilities for PG to be verified : (As per MSR)	
	(i) Whether OPD is functioning to be verified (ii) Total No of OPD (on the day of inspection) (iii) Average Number of patients attending OPD (current year) (iv) Average Number of Delivery (Current year) (v) Average Number of abnormal Delivery (Current year)	Yes.
	- As per Central Council Norms/ University Norms, above Infrastructure must be available at College. - If Infrastructure is available, then mark "Adequate" & do not attach any documents. - In case of "Inadequate", it must be mark as "Inadequate" with evidence.	




Dr. Gajanand R. Wale
 Ph.D.(N), MSW, LLB
 Principal
 K.T. Patil College of Nursing
 Dharashiv-413501 (M.S.)

ASPM'S
K T PATIL COLLEGE OF NURSING, DHARASHIV

INDEX

S. No	Particulars	Specialty	Bed Occupancy
01	Niramay Hospital & Critical care Centre	Maternity	50
02	District General Hospital	Multispecialty	336
03	District Women's Hospital	Maternity	60
04	Suvidha Hospital & ICU Centre	General & ICU	50
05	RPH & UPH	General	-



डिप्टी
रिजिस्ट्रार, उस्मानाबाद

सामान्य रुग्णालय, उस्मानाबाद येथे विविध कक्षांत खाटांची उपलब्धता

- १) वैद्यकीय रुग्ण कक्ष
- २) शस्त्रक्रिया रुग्ण कक्ष
- ३) नेत्र रुग्ण कक्ष
- ४) बालरुग्ण कक्ष
- ५) प्रसूती कक्ष
- ६) कनन, नाक, घसा कक्ष
- ७) अस्यवियंग रुग्ण कक्ष
- ८) क्षयरुग्ण कक्ष
- ९) आय.सी.यू. कक्ष

एकूण खाटां	२३६
	४६
	६०
	२०
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	०४
	१५
	२०
	०६



Dr. Gajanan R. Wale

Dr. Gajanan R. Wale
Principal
K.T. Patil College of Nursing
Osmanabad-413501 (M.S.)

"TRUE-COPY"

NOTARY ११६१०९

GOVERNMENT OF MH
Adv. SAHAJI S. BAGAL
OSMANABAD M. 9421350572

4 AUG 2009



RESOLUTION OF GOVERNING BODY PARENT HOSPITAL

COPY OF THE RESOLUTION PASSED IN THE GOVERNING BODY MEETING OF THE
NIRAMAY HOSPITAL HELD ON 01-11-2023 2023 AT 11:00 AM
A.M/P.M AT THE ADMINISTRATIVE OFFICE OF THE HOSPITAL.

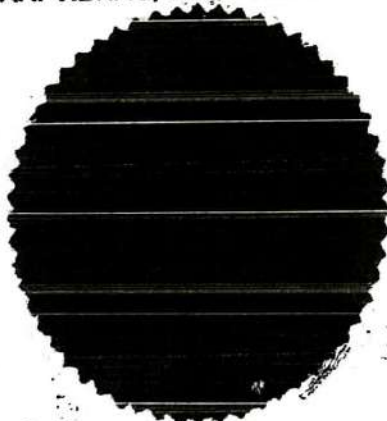
Resolved that Dr. Harshad Raghavendra Dambal, a member of the society/trust Adarsh
Shikshan Prasarak Mandal, Dharashiv (Osmanabad) and Niramay Hospital, situated At Tambri
Vibhag, Osmanabad, Taluka - District - Osmanabad will be a Parent Hospital of K. T Patil
College of Nursing, Osmanabad, Maharashtra, 413501.

It is also resolved that member of the trust/society would not allow the hospital to be treated as a
"parent/affiliated hospital" to any other nursing institution.

For Niramay Hospital

1).....

2) **NIRAMAY HOSPITAL**
NEAR BHOSALE HIGH SCHOOL
TAMBARI VIBHAG, OSMANABAD



महेश न. चवण
I am a Notary, appointed by
Govt. of India, Reg. No. 2011/1, C.O. 800/2015
This is my Name & Signature for mark
and the contents of this my affidavit as per
GOVT. OF INDIA
Adv. Mahesh N. Chavan
Dist. Osmanabad/M.S.

4 NOV 2023

Dr. R. A. Dambal
MBBS.

Dr. Harshal R. Dambal
MBBS, D.O.R.L.

Dr. Sushrut R. Dambal
MBBS, MD.

Dr. Vishal Vadgaonkar
MBBS, DNB.

Dr. Vaishali H. Dambal
MBBS, D.G.O. MD (D.N.B.)

Dr. Arti S. Dambal
MBBS, D.C.H.





महाराष्ट्र शासन

सार्वजनिक आरोग्य विभाग
जिल्हा शल्य चिकित्सक, जिल्हा रुग्णालय, उस्मानाबाद

Annexure -III

FORM C

Certificate of Registration under Section 5 of the
Bombay Nursing Home Registration Act.

Amendment 2006

(Under Rule 5)

No:-01

This is to certify that **Dr.Harshal Raghvendra Dambal** has been registered
under the Bombay Nursing Homes Registration Act Amendment 2006 in respect **Niramay**
Hospital situated at **Tambari Vibhag, Osmanabad Tal :- Osmanabad Dist:- Osmanabad**
and has been authorized to carry on the said Nursing Home.

Registration No.:- 01

Date of issue of Certificate : 24/3/2022

ICU Bed	Cots:- 06
NCU Bed	Cots:- 05
Maternity Bed	Cots:- 19
Other Bed	Cots:- 20
Total Bed	Cost:- 50

This Certificate shall be valid up to 31march 2025



Civil Surgeon
General Hospital, Osmanabad



National Accreditation Board for Hospitals & Healthcare Providers

(Constituent Board of Quality Council of India)

CERTIFICATION

Niramay Hospital & Critical Care Centre

Near Bhosale High School, Tambari Vibhag
Osmanabad - 413501, Maharashtra

has been assessed and found to comply with NABH
Entry Level - Small Healthcare Organisation
(SHCO) requirements. This certificate is valid for the Scope as
specified in the annexure subject to continued compliance with
the Entry Level requirements.

Valid from : May 21, 2020

Valid thru : May 20, 2022



Certificate No.
PESHCO-2020-3252

Dr. Atul Mohan Kochhar
Chief Executive Officer

National Accreditation Board for Hospitals & Healthcare Providers, 5th Floor, ITPI Building, 4A, Ring Road, IP Estate, New Delhi 110 002 India
Phone +91-11-42800600, Fax +91-11-2332 3415 • Email helpdesk@nabh.co • Website www.nabh.co



SI No. 001123



NABH as an organisation is ISQua Accredited



MAHARASHATRA POLLUTION CONTROL BOARD

Phone : 0240-2473461/63

Fax : 0240-2473462

Email : roaurangabad@mpcb.gov.in

Visit At : <http://mpcb.gov.in>



Regional Office,
Paryavaran Bhawan, A-4/1, MIDC Area Chikalthana,
Near Seth Nandlal Dhoot Hospital, Jalna Road,
Aurangabad-431210.

LETTER OF BIO-MEDICAL WASTE AUTHORISATION

[Authorization for Generation of Bio-Medical Wastes under Rule 7(4)]

- I. File number of authorisation and date of issue
RO-AURANGABAD/NDD/BMW-AUTH/2007000324 Date: 23/7/2022
- II. M/s. Niramay Hospital, is hereby granted an authorization for generation of biomedical waste on the premises situated at Tambari Vibhag, Dist. Osmanabad,
- III. This authorization shall valid for a period up to 30.04.2023. An application shall be made by the occupier/operator for renewal 3 Months before expiry of earlier authorisation.
- IV. This authorisation is issued subject to compliance of 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.
- V. No of Beds: 50

Terms and Conditions of authorization

1. The "authorized Person" Dr H.R. Dambhal shall comply with the provisions of the Environment (Protection) Act, 1986, and the Rules made there under.
2. The authorization shall be produced for inspection at the request of an officer authorized by the prescribed authority i.e. Member Secretary, MPCB.
3. Any unauthorized change in equipment or working conditions as mentioned in the application by the person authorized shall constitute a breach of this authorization.
4. The authorization is granted for generation of Bio-Medical Waste (BMW) in waste Categories and quantities listed here in below:

Category	Type of Waste	Type of Bag or Container to be used	Quantity Kg/Month	Treatment and Disposal options
	2	3	4	5
Yellow	(a) Human Anatomical Waste: Human tissues, organs, body parts and fetus below the viability period (as per the Medical Termination of Pregnancy Act 1971, amended from time to time).	Yellow coloured non-chlorinated plastic bags	10.0	CBMWTSDF Bedd

MPCB-BMW AUTH

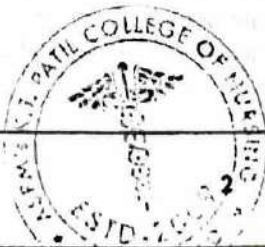


23/7/2022



(b) Animal Anatomical Waste : Experimental animal carcasses, body parts, organs, tissues, including the waste generated from animals used in experiments or testing in veterinary hospitals or colleges or animal houses.	Yellow coloured non-chlorinated plastic bags	30.0	CBMWTSDF Beed
(c) Soiled Waste: Items contaminated with blood, body fluids like dressings, plaster casts, cotton swabs and bags containing residual or discarded blood and blood components.	Yellow coloured non-chlorinated plastic bags		
(d) Expired or Discarded Medicines: Pharmaceutical wastelike antibiotics, cytotoxic drugs including all items contaminated with cytotoxic drugs along with glass or plastic ampoules, vials etc.	Yellow coloured non-chlorinated plastic bags or containers		
(e) Chemical Waste: Chemicals used in production of biological and used or discarded disinfectants.	Yellow coloured containers or non-chlorinated plastic bags		
(f) Chemical Liquid Waste: Liquid waste generated due to use of chemicals in production of biological and used or discarded disinfectants, Silver X-ray film developing liquid, discarded Formalin, infected secretions, aspirated body fluids, liquid from laboratories and floor washings, cleaning, house-keeping and disinfecting activities etc.	Separate collection system leading to effluent treatment system	-	After resource recovery, the chemical liquid waste shall be pre-treated before mixing with other wastewater. The combined discharge shall conform to the discharge norms given in Schedule-II
(g) Discarded linen, mattresses, beddings contaminated with blood or body fluid.	Non-chlorinated yellow plastic bags suitable packing material or	-	-

MPCB-BMW AUTH

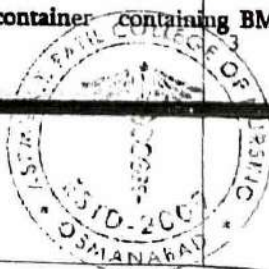


	(h) Microbiology, Biotechnology and other clinical laboratory waste: Blood bags, Laboratory cultures, stocks or specimens of microorganisms, live or attenuated vaccines, human and animal cell cultures used in research, industrial laboratories, production of biological, residual toxins, dishes and devices used for cultures.	Autoclave safe plastic bags or containers	—	CBMWTSDf Beed
Red	Contaminated Waste (Recyclable) (a) Wastes generated from disposable items such as tubing, bottles, intravenous tubes and sets, catheters, urine bags, syringes (without needles and fixed needle syringes) and vacutainers with their needles cut) and gloves.	Red coloured non-chlorinated plastic bags or containers	20.0	CBMWTSDf Beed
White (Translucent)	Waste sharps including Metals: Needles, syringes with fixed needles, needles from needle tip cutter or burner, scalpels, blades, or any other contaminated sharp object that may cause puncture and cuts. This includes both used, discarded and contaminated metal sharps	Puncture proof, leak proof, tamper proof containers	30.0	CBMWTSDf Beed
Blue	(a) Glassware: Broken or discarded and contaminated glass including medicine vials and ampoules except those contaminated with cytotoxic wastes.	Cardboard boxes with blue colored marking		—
	(b) Metallic Body Implants	Cardboard boxes with blue colored marking		—
No onsite treatment of BMW is permitted. The above mentioned Bio Medical Waste shall be sent to Common BMW Treatment and Disposal facility authorized by MPCB for Osmanabad.— M/s. Champavati Waste Management, Laxman Nagar, Barshi Road, Beed, Tq. & Dist. Beed.				

5. The liquid / solid waste generated from the treatment activity (from laboratory and washing, cleaning, housekeeping and disinfecting activities) shall be treated suitably by providing effluent treatment facility to conform the standards prescribed in Schedule V of said Rules and the Environment (Protection) Act, 1986.

6. i) BMW shall not be mixed with other wastes or reused or solid in any form.
(ii) BMW shall be segregated into containers / bags at the point of generation in accordance with Schedule-II prior to storage, treatment and disposal. The containers shall be labeled according to Schedule III.
(iii) If a container containing BMW is to be transported from the

MPCB-BMW_AUTH



Handwritten signature and date 20/12/2020

premises where BMW is generated to any waste treatment facility outside the premises, the container shall, apart from the Label prescribed in Schedule III, also carry information prescribed in Schedule IV and shall be transported by authorized Transporter only.

- (iv) Notwithstanding anything contained in the Motor Vehicles Act, 1988 or Rules there under, BMW shall be transported only in such vehicle as may be authorized for the purpose by the competent authority as specified by the Government.
 - (v) No untreated BMW shall be kept stored beyond a period of 48 hours.
 - (vi) Necessary protective gear for the waste handlers shall be provided by the hospital authority.
 - (vii) You shall ensure proper collection of mercury spillage arising mainly due to breakage of the monometer, pressure gauges (sphygmomanometers) other equipments used in health care facilities as well as its storage in accordance with the Hazardous waste (Management & Handling) Rules (presently these Rules has to be read as 'Hazardous Waste (Management & Handling and Transboundry Movement)Rule, 2008) and returning it to the instrument manufactures apart from necessary taking steps to ensure that the spilled mercury does not become as part of bio-medical or other solid waste generated from the NCHs.
 - vii) Authorized person shall obtain prior permission form MPCB for generation & disposal of Bio-Medical waste quantity of category specified exceed the limits authorized at condition No. 4 above.
7. i) You shall submit an Annual Report to the prescribed authority in Form- by 31st January every year (including information about the categories and quantities of BMW handled during the preceding year.
- ii) You shall maintain records related to the generation, collection, reception, storage, transportation, treatment, disposal and/or any form of handling of BMW in accordance with these Rules and any guidelines issued.
- iii) All records shall be subject to inspection and verification by the prescribed Authority at any time.
8. When any accident occurs at any institution or facility or any other site where BMW is handled or during transportation of such waste, the authorized person shall report the accident in Form III to the prescribed authority forthwith.
9. This authorization is issued subject to condition as mentioned below.
- i) You shall submit compliance of authorization conditions every six months to Sub-Regional Office Latur.
 - ii) You shall provide Annual report in Form-II duly certified by facility operator.
 - iii) You shall provided valid copy of registration under Bombay Nursing Home Act.
 - iv) You shall obtain Consent to

Operate from Board under



Water (P & CP) Act, 1974 and Air (P & CP) Act, 1981 forthwith.

- v) The Occupier will obey all the lawful instructions issued by the Board Officers from time to time.
- vi) The Hospital shall not carry any expansion, change, Addition, Modification, and Modernization in the existing set up till to obtain prior permission from the Board.

10. The Hospital Authority shall furnish the following BG's towards compliance of conditions of authorization within 15 days from date of issuance of the authorization as per Circular of MPCB, HQ, Mumbai vide letter No. MPCB/PSO/BMW/B-1825 dtd.10.04.2013.

No.	Activity/Condition to be Complied	Compliance Timeline (Months)	Bank Guarantee Amount	Bank Guarantee Validity
I (A)	Operation and Maintenance			
1	To Segregate and Handle BMW as per Rule	Continuous	25,000/-	31/08/2023
2	Operation and Maintenance of STP/ETP to achieve prescribed discharge standards	Continuous	25,000/-	31/08/2023
I (B)	Records			
1	To Maintain records of BMW and submission of Annual Report in Form -II before 31 st January	Continuous	15,000/-	31/08/2023
2	To maintain records of BMW material delivered to CBMWTSDF	Continuous	10,000/-	31/08/2023
II	Performance			
1	To provide Separate BMW storage facility As per guidelines of CPCB.	Continuous	25,000/-	31/08/2023
III	Related to consent			
1	PP shall provide ETP/STP of adequate capacity within 6 months.	6 months	50,000/-	31/08/2023
	Total		1,50,000/-	

- (i) The above Bank Guarantee(s) shall be submitted by the applicant at the respective Regional Office within 15 days of the date of issue of BMW Authorization.

11. The Board reserves the right to review, amend, suspend, revoke etc. this authorization and same shall be binding on the hospital authority.

12. This authorization should not be construed as exemption from obtaining necessary NOC/permission from any other Government agencies.

MPCB-BMW_AUTH



(Dr. P. M. Joshi)
Regional Officer, Aurangabad



To,
M/s Niramay Hospital,
Tambari Vibhag, Dist. Osmanabad,
Authorization Fees Received:-

Sr no	Amount	Transaction number	Date
1	7500/-	TXN2003000795	09/03/2020

Copy To:-Sub-Regional Officer, MPC Board, Latur.

Maharashtra Pollution Control Board

MPCB-BMW_AUTH



 Government of Maharashtra District Hospital, Osmanabad 		
STD Code% Telephone No% Office Telephone No % NRHM Telephone No %	02472 222650 226924 227005	Address: Civil Surgeon, District Hospital, Osmanabad Office :- Marwadi Galli, Osmanabad Fax No % 02472 & 226924 E-Mail % cs_osmanabad1@rediffmail.com & cs.osmanabad1@gmail.com
HEALTH SERVICES		Outward No.D.H. O'bad / Date: 14-11-22 /2022 14754-57

प्रति,
 प्राचार्य,
 के.टी.पाटील
 कॉलेज ऑफ नर्सिंग,
 उस्मानाबाद.

विषय:- के.टी.पाटील कॉलेज ऑफ. नर्सिंग उस्मानाबादच्या प्रशिक्षणार्थीना
 प्रात्यक्षिक अनुभववासाठी परवानगी मिळणे बाबत...

संदर्भ:- आपले पत्र क.केटीपीसीओएन/4163/2022 दि.26/08/2022.

महोदय,

उपरोक्त विषयी संदर्भीय पत्रानुसार मागणी केल्याप्रमाणे, के. टी. पाटील कॉलेज ऑफ नर्सिंग उस्मानाबाद च्या कोर्सच्या विद्यार्थ्यांना प्रात्यक्षिक अनुभवासाठी संदर्भीय शासन निर्णयातील सुचनेनुसार प्रात्यक्षिक अनुभवासाठी नविन दराप्रमाणे जिल्हा रुग्णालय, स्त्री रुग्णालय व मधील प्रात्यक्षिक अनुभवासाठी खाटा वापरण्यास परवानगी देण्यात येत आहे.

तसेच आपण नियमानुसार प्रतिप्रशिक्षणार्थी रु. 50/- प्रतिदिन प्रती खाटा या प्रमाणात प्रशिक्षण शुल्क या कार्यालयाच्या रोख विभागात भरणा करून रितसर शासनास प्रदान केल्याची शासकीय पावती घेण्यात यावी.

उपरोक्त संस्थेस नविन शासन निर्णयानुसार तसेच नवीन करारनामा नुसार प्रात्यक्षिक अनुभवासाठी रु.100/- च्या बॉर्डपेपरवर करार करण्याच्या अधिनराहून जिल्हा रुग्णालय उस्मानाबाद येथील खाटा प्रात्यक्षिकास परवानगी देण्यात येते.


 जिल्हा शल्यचिकित्सक,
 जिल्हा रुग्णालय उस्मानाबाद.

Civil Surgeon
General Hospital, Osmanabad.

प्रत माहितीस्तव सविनय सादर

4. मा.संचालक, आरोग्य सेवा संचालनालय, आरोग्य भवन, मुंबई.
5. मा. उपसंचालक, आरोग्य सेवा (शुश्रूषा)मुंबई.
6. मा. उपसंचालक, आरोग्य सेवा लातूर



 Government of Maharashtra District Hospital, Osmanabad 		
STD Code: Telephone No: Office Telephone No : NRHM Telephone No :	02472 222650 226924 227005	Address: Civil Surgeon, District Hospital, Osmanabad Office :- Marwadi Galli, Osmanabad Fax No: 02472 & 226924 E-Mail: cs_osmanabad1@rediffmail.com & cs.osmanabad1@gmail.com
HEALTH SERVICES		Outward No. D.H. O'bad / Date: 14-1-22 1/2022 14754-50

प्रति,
 प्राचार्य,
 के.टी.पाटील
 कॉलेज ऑफ नर्सिंग,
 उस्मानाबाद.

विषय:- के.टी.पाटील कॉलेज ऑफ. नर्सिंग उस्मानाबादच्या प्रशिक्षणार्थीना
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तसेच आपण नियमानुसार प्रतिप्रशिक्षणार्थी रु. 50/- प्रतिदिन प्रती खाद्य या प्रमाणात प्रशिक्षण शुल्क या कार्यालयाच्या रोख विभागात भरणा करून रितसर शासनास प्रदान केल्याची शासकीय पावती घेण्यात यावी.

उपरोक्त संस्थेस नविन शासन निर्णयानुसार तसेच नवीन करारनामा नुसार प्रात्यक्षिक अनुभवासाठी रु.100/- च्या बॉर्डरपेपरवर करार करण्याच्या अधिन राहून जिल्हा रुग्णालय उस्मानाबाद येथील खाद्य प्रात्यक्षिकास परवानगी देण्यात येते.

जिल्हा शल्यचिकित्सक,
 जिल्हा रुग्णालय उस्मानाबाद.

Civil Surgeon
General Hospital, Osmanabad.

प्रत माहितीस्तव सविनय सादर

4. मा.संचालक, आरोग्य सेवा संचालनालय, आरोग्य भवन, मुंबई.
5. मा. उपसंचालक, आरोग्य सेवा (शुश्रूषा)मुंबई.
6. मा. उपसंचालक, आरोग्य सेवा लातूर





महाराष्ट्र शासन

सार्वजनिक आरोग्य विभाग

जिल्हा शल्य चिकित्सक, जिल्हा रुग्णालय, उस्मानाबाद

Annexure -III

FORM C

Certificate of Registration under Section 5 of the
Bombay Nursing Home Registration Act.

Amendment 2006

(Under Rule 5)

No:-161

This is to certify that **Mr. Gorakh Sahebrao Bhosale** has been registered under the Bombay Nursing Homes Registration Act Amendment 2006 in respect **SUVIDHA HOSPITAL & ICU CENTER** situated at Umersh Gore Comple Barshi Naka, Osmanabad Tal :- Osmanabad Dist:- Osmanabad and has been authorized to carry on the said Nursing Home.

Registration No.:-161

Date of issue of Certificate : 8/3/2022

This Certificate shall be valid up to 31 March 2025

ICU/NICU Bed
Maternity Bed
Other Bed
Total Bed

Cots:-03
Cots:- 20
Cots:- 27
Cost:- 50



(Signature)
Civil Surgeon
General Hospital, Osmanabad
Civil Hospital, Osmanabad





Ref. No:- SUV/462/2023

Date:- 18/12/2023

To,
Principal,
K.T. Patil College of B.Sc. Nursing,
Osmanabad.

Sub:- Regarding Hospital Affiliation & Permission for Posting of the student of
ASPM's K.T. Patil College of B.Sc. Nursing, Osmanabad.

Respected Sir,

With reference to the above cited subject, reference & our meeting dated 18/12/2023, I am pleasure in informing you that your esteemed institution i.e. ASPM's K.T. Patil College of B.Sc. Nursing, Osmanabad (4 years degree course) have been granted affiliation of our multispecialty hospital & students of your college are permitted for hospital training in all the three shifts as per your convenience. This affiliation is valid for 05 years & subject to renewal after every 05 (five) years.

Thanking You,

Shelke
Director M.O.
Dr. Swaroj P. Shelke
Suvidha Hospital & ICU Centre
Reg. No. 2010/06/2224
Barshi Naka, Osmanabad

Copy to :- 1. Nursing superintendent, Suvidha Hospital, Osmanabad.

2. Administrative officer, Suvidha Hospital, Osmanabad

SUVIDHA HOSPITAL & ICU CENTRE

Shri Umesh Gore Commercial Complex, DIC Road, Barshi Naka, Osmanabad - 413 501
☎ : 02472 - 224520 | Email: suvidha24365@gmail.com



भारतीय गैर न्यायिक

एक सौ रुपये

Rs. 100

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ONE
HUNDRED RUPEES

भारत INDIA
INDIA NON JUDICIAL

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2020

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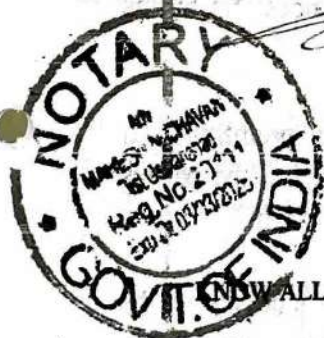
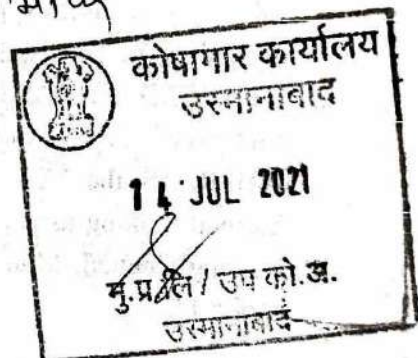
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पत्ता- 7, बा. 4

हस्ते- एम.न. भोव

मु.ख.का.

फुलचंद गायकवाड
उस्मानाबाद
ला.नं. 3409020



MEMORANDUM OF UNDERSTANDING

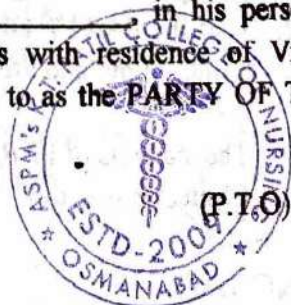
Now ALL MEN BY THESE PRESENTS:

This understanding made and executed by and between,

Suvidha Hospital & ICU Centre, Shri. Umesh Gore Commercial Complex, DIC Road, Barshi Naka, Osmanabad duly registered under Bombay Nursing Home Act 1949, here in represented by _____

in his personal capacity as Director of Hospital of legal age _____ years with residence of Vidya Nagar, Tambri Vibhag, Osmanabad, here in after referred to as the PARTY OF THE FIRST PART:

NOTARY
GOVT. OF INDIA
Adv. MAHESH NARAYAN CHAVAN
Dist. Osmanabad (Maha.)
Call No. 0200192205



30 JUL 2021

जोड़पत्र-२

दस्तावेज प्रमाण/अनुच्छेद क्रमांक:-

जोड़पत्र आदेश क्रमांक:-

जोड़पत्र प्रमाणित दस्तावेज निम्नलिखित प्रकारसे जारी:-

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21/07/2021

जोड़पत्र

के.टी. पाटील कॉलेज
ऑफ नर्सिंग
3, 015

21/07/2021

AND 100

Adarsh Shikshan Prasarak Mandal (ASPM) a society duly registered society under

Public Trust Act 1950 and Society's Registration Act, 1860, with business and postal

address at Administrative Building, Shripatirao Bhosale Highschool, Tambri Vibhag

Osmanabad, represented by _____ legal age _____ years

residence _____ of

_____ in personal

capacity _____ as _____ ASPM

_____ here in after referred as the

PARTY OF THE SECOND PART.

WITNESSETH

1. That the PARTY OF THE FIRST PART agrees and allows the affiliation and training of the ASPM'S K. T. Patil College of Nursing of the PARTY OF THE SECOND PART subject to the policies, procedures, and Guidelines governing the affiliation and Training of Students in the hospital.
2. WHEREAS, the PARTY OF THE FIRST PART is a Private Hospital where in the students of said Nursing College undergoing their training.
3. WHEREAS, the PARTY OF THE SECOND PART will send its nursing students for hospital training as per the norms of Indian Nursing Council, New Delhi, Maharashtra Nursing Council, Mumbai and Maharashtra University Of Health Sciences, Nashik as applicable.

NOW, THEREFORE, for and in consideration of the foregoing premises and consideration of the express stipulations and covenants herein agreed upon, the parties have hereunto agreed to be bound by the following terms and conditions to wit:

1. That honesty, integrity and courtesy shall always be observed by the students of the PARTY OF THE SECOND PART during their training in the Hospital.
2. The PARTY OF THE FIRST PART shall not be liable to any harm and damages due to accident or unavoidable circumstances that may occur to students /Clinical Instructors during their training.
3. That the PARTY OF THE FIRST PART shall be the one to determine the schedule of training time and areas of assignment of the students of the PARTY OF THE SECOND PART.
4. The students of PARTY OF THE SECOND PART shall be supervised by nursing tutor / Clinical instructor.

(Cont.)

NOTARY

GOVT. OF INDIA

Adv. MAHESH NARAYAN CHAVAN

Dist. Osmanabad (Maha.)

Cell No. 9860192990

20 JUL 2021

5. The students of PARTY OF THE SECOND PART shall be follow the rules and regulation of hospital.
6. The students of PARTY OF THE SECOND PART should be take care of hospital articles and instruments.
7. The students of PARTY OF THE SECOND PART must respect the health team of hospital.
8. The students PARTY OF THE SECOND PART must participate and contribute in all National Health Programmes & Health Camps.

Terms:-

1. This memorandum of understanding will become effective on the final date signing and will have duration of five years & subject to renewal after five years.
2. This Memorandum of understanding may be terminated by either party by providing 180 days written notice to the Coordinators listed below.

IN THE WITNESS WHERE OF, the parties have affixed their signatures this **Suvidha Hospital & ICU Centre, Shri. Umesh Gore Commercial Complex, DIC Road, Barshi Naka, Osmanabad**

1. Mr. Gorakh S. Bhosale.

Director of Hospital

Mr. Gorakh S. Bhosale
Director
Suvidha Hospital and
ICU Centre, Osmanabad

2. Name :- Mr. Sudhir K. Patil

Designation :- president.

Adarsh Shikshan Prasarak Mandal, Osmanabad

Deponent

अध्यक्ष
आदर्श शिक्षण प्रसारक मंडळ
उस्मानाबाद

SIGNED IN THE PRESENCE OF:

1) Dr. Gajanan R. Wale

2) Mr. Jatteppa S. Kolhe

Before Me
NOTARY
GOVT OF INDIA
Adv MAHESH NARAYAN CHAVAN
Dist Osmanabad/Maharashtra
Cell No. 9850182995



30 JUL 2021

MAHARASHTRA POLLUTION CONTROL BOARD

Phone : 0240-2473461/63
Fax : 0240-2473462
Email : roaurangabad@mpcb.gov.in
Visit At : <http://mpcb.gov.in>



Regional Office,
Paryavaran Bhawan, A-4/1, MIDC Area Chikalthana,
Near Seth Nandlal Dhoot Hospital, Jaina Road,
Aurangabad-431210.

LETTER OF BIO-MEDICAL WASTE AUTHORISATION

[Authorization for Generation of Bio-Medical Wastes under Rule 7(4)]

- I. File number of authorisation and date of issue
RO-AURANGABAD/BMW-AUTH/ 2007000322 Date: 20/7/2020
- II. M/s. Suvidha Hospital and ICU Centre, is hereby granted an authorization for generation of biomedical waste on the premises situated at Shri Umesh Gore Complex, DIC Road, Barshi Naka, Osmanabad.
- III. This authorization shall valid for a period up to 30.06.2025. An application shall be made by the occupier/operator for renewal 3 Months before expiry of earlier authorisation.
- IV. This authorisation is issued subject to compliance of 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.
- V. No of Beds: 50

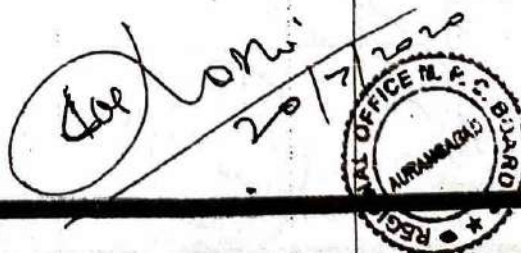
Terms and Conditions of authorization

1. The "authorized Person" Dr. G.S. Bhosale, shall comply with the provisions of the Environment (Protection) Act, 1986, and the Rules made there under.
2. The authorization shall be produced for inspection at the request of an officer authorized by the prescribed authority i.e. Member Secretary, MPCB.
3. Any unauthorized change in equipment or working conditions as mentioned in the application by the person authorized shall constitute a breach of this authorization.
4. The authorization is granted for generation of Bio-Medical Waste (BMW) in waste Categories and quantities listed here in below:

Category	Type of Waste	Type of Bag or Container to be used	Quantity Kg/Month	Treatment and Disposal options
	2	3	4	5
Yellow	(a) Human Anatomical Waste: Human tissues, organs, body parts and fetus below the viability period (as per the Medical Termination of Pregnancy Act 1971, amended from time to time).	Yellow coloured non-chlorinated plastic bags	10.0	CBMWTSDF Beed



Attest
SUVIDHA HOSPITAL & ICU CEN
Shri Umesh Gore Complex
Barshi Naka, Osmanabad



(b) Animal Anatomical Waste : Experimental animal carcasses, body parts, organs, tissues, including the waste generated from animals used in experiments or testing in veterinary hospitals or colleges or animal houses.			
(c) Soiled Waste: Items contaminated with blood, body fluids like dressings, plaster casts, cotton swabs and bags containing residual or discarded blood and blood components.		18.0	CBMWTSDF Beed
(d) Expired or Discarded Medicines: Pharmaceutical wastelike antibiotics, cytotoxic drugs including all items contaminated with cytotoxic drugs along with glass or plastic ampoules, vials etc.	Yellow coloured non-chlorinated plastic bags or containers		CBMWTSDF Beed
(e) Chemical Waste: Chemicals used in production of biological and used or discarded disinfectants.	Yellow coloured containers or non-chlorinated plastic bags		
(f) Chemical Liquid Waste Liquid waste generated due to use of chemicals in production of biological and used or discarded disinfectants, Silver X-ray film developing liquid, discarded Formalin, infected secretions, aspirated body fluids, liquid from laboratories and floor washings, cleaning, house-keeping and disinfecting activities etc.	Separate collection system leading to effluent treatment system	--	After resource recovery, the chemical liquid waste shall be pre-treated before mixing with other wastewater. The combined discharge shall conform to the discharge norms given in Schedule-II
(g) Discarded linen, mattresses, beddings contaminated with blood or body fluid:	Non-chlorinated yellow plastic bags or suitable packing material	--	

MPCB-BM



	(h) Microbiology, Biotechnology and other clinical laboratory waste: Blood bags, Laboratory cultures, stocks or specimens of microorganisms, live or attenuated vaccines, human and animal cell cultures used in research, industrial laboratories, production of biological, residual toxins, dishes and devices used for cultures.	Autoclave safe plastic bags or containers		
Red	Contaminated Waste (Recyclable) (a) Wastes generated from disposable items such as tubing, bottles, intravenous tubes and sets, catheters, urine bags, syringes (without needles and fixed needle syringes) and vacutainers with their needles cut) and gloves.	Red coloured non-chlorinated plastic bags or containers	6.0	CBMWTSDF Beed
White (Translucent)	Waste sharps including Metals: Needles, syringes with fixed needles, needles from needle tip cutter or burner, scalpels, blades; or any other contaminated sharp object that may cause puncture and cuts. This includes both used, discarded and contaminated metal sharps	Puncture proof, Leak proof, tamper proof Containers	10.0	CBMWTSDF Beed
Blue	(a) Glassware: Broken or discarded and contaminated glass including medicine vials and ampoules except those contaminated with cytotoxic wastes.	Cardboard boxes with blue colored marking	--	
	(b) Metallic Body Implants	Cardboard boxes with blue colored marking	--	
No onsite treatment of BMW is permitted. The above mentioned Bio Medical Waste shall be sent to Common BMW Treatment and Disposal facility authorized by MPCB for Osmanabad.- M/s. Champavati Waste Management, Laximan Nagar, Barshi Road, Beed, Tq. & Dist. Beed.				

5. The liquid / solid waste generated from the treatment activity (from laboratory and washing, cleaning, housekeeping and disinfecting activities) shall be treated suitably by providing effluent treatment facility to conform the standards prescribed in Schedule V of said Rules and the Environment (Protection) Act, 1986.

6. i) BMW shall not be mixed with other wastes or reused or solid in any form.
- (ii) BMW shall be segregated into containers / bags at the point of generation in accordance with Schedule-II prior to storage, treatment and disposal. The containers shall be labeled according to Schedule III.
- (iii) If a container containing BMW is to be transported from the premises where BMW is generated to any waste treatment facility outside the premises, the container shall, apart from the Label prescribed in

MPCB-BMW AUTH



SUNITA HOSPITAL & ICU CENT.
Umeshi Care Complex
Barshi Naka, Osmanabad

(Signature)



20/7/2020

Schedule III, also carry information prescribed in Schedule IV and shall be transported by authorized Transporter only.

- (iv) Notwithstanding anything contained in the Motor Vehicles Act, 1988 or Rules there under, BMW shall be transported only in such vehicle as may be authorized for the purpose by the competent authority as specified by the Government.
 - (v) No untreated BMW shall be kept stored beyond a period of 48 hours.
 - (vi) Necessary protective gear for the waste handlers shall be provided by the hospital authority.
 - (vii) You shall ensure proper collection of mercury spillage arising mainly due to breakage of the monometer pressure gauges (sphygmomanometers) other equipments used in health care facilities as well as its storage in accordance with the Hazardous waste (Management & Handling) Rules (presently these Rules has to be read as 'Hazardous Waste (Management & Handling and Transboundry Movement)Rule, 2008) and returning it to the instrument manufactures apart from necessary taking steps to ensure that the spilled mercury does not become as part of bio-medical or other solid waste generated from the HCFs.
 - vii) Authorized person shall obtain prior permission form MPCB for generation & disposal, of Bio-Medical waste quantity of category specified exceed the limits authorized at condition No. 4 above.
7. i) You shall submit an Annual Report to the prescribed authority in Form- by 31st January every year including information about the categories and quantities of BMW handled during the preceding year.
- ii) You shall maintain records related to the generation, collection, reception, storage, transportation, treatment, disposal and/or any form of handling of BMW in accordance with these Rules and any guidelines issued.
- iii) All records shall be subject to inspection and verification by the prescribed Authority at any time.
8. When any accident occurs at any institution or facility or any other site where BMW is handled or during transportation of such waste, the authorized person shall report the accident in Form III to the prescribed authority forthwith.
9. This authorization is issued subject to condition as mentioned below.
- i) You shall submit compliance of authorization conditions every six months to Sub-Regional Office Latur.
 - ii) You shall provide Annual report in Form-II duly certified by facility operator.
 - iii) You shall provided valid copy of registration under Bombay Nursing Home Act.
 - iv) You shall obtain Consent to Operate from Board under Water (P & CP) Act, 1974 and Air (P & CP) Act, 1981, forthwith.



- v) The Occupier will obey all the lawful instructions issued by the Board Officers from time to time.
- vi) The Hospital shall not carry any expansion, change, Addition, Modification, and Modernization in the existing set up till to obtain prior permission from the Board.

10. The Hospital Authority shall furnish the following BG's towards compliance of conditions of authorization within 15 days from date of issuance of the authorization as per Circular of MPCB, HQ, Mumbai vide letter No. MPCB/PSO/BMW/B-1825 dtd.10.04.2013.

Sr. No.	Activity / Condition to be Complied	Compliance Timeline (Months)	Bank Guarantee Amount	Bank Guarantee(s) validity
I (A)	Operation and Maintenance			
1	To Segregate and Handle BMW as per Rule	Continuous	25,000/-	31/10/2025
2	Operation and Maintenance of STP/ETP to achieve prescribed discharge standards.	Continuous	25,000/-	31/10/2025
I (B)	Records			
1	To Maintain records of BMW and submission of Annual Report in Form -II before 31 st January	Continuous	15,000/-	31/10/2025
2	To maintain records of BMW material delivered to CBMWTSDF	Continuous	10,000/-	31/10/2025
II	Performance			
1	To provide separate BMW storage facility as per guidelines of CPCB.	Continuous	25,000/-	31/10/2025
III	Related to consent			
1	PP shall provide ETP/STP of adequate capacity within 6 months.		50,000/-	31/10/2025
	Total		1,50,000/-	

(i) The above Bank Guarantee(s) shall be submitted by the applicant at the respective Regional Office within 15 days of the date of Issue of BMW Authorization.

11. The Board reserves the right to review, amend, suspend, revoke etc. this authorization and same shall be binding on the hospital authority.

12. This authorization should not be construed as exemption from obtaining necessary NOC/permission from any other Government agencies.

To,
M/s. Suvidha Hospital and ICU Centre,
Shri Umesh Gore Complex, DIC Road,
Barshi Naka, Osmanabad.

MPCB-BMW_AUTH

(Dr. P.M. Joshi)

Regional Officer, Aurangabad



SUVIDHA HOSPITAL & ICU CENTRE

Shri Umesh Gore Complex
Barshi Naka, Osmanabad



आरोग्य विभाग
जिल्हापरीषद, धाराशिव
जिल्हाआरोग्य अधिकारीकार्यालय, दुसरामजला, जिल्हापरीषद धाराशिव



कार्यालय -

जिल्हाआरोग्य अधिकारी, कार्यालय
जिल्हापरीषद, धाराशिव
पिन- ४१३५०१

Website : <http://maha-arogya.gov.in>

Email : dhoosmanabad@gmail.com, idsposmanabad@rediffmail.com

Email : nrhmdpmosmanabad@gmail.com

Fax No. 02472 - 225298 (DHO)

02472 - 227258 (Epidemic Cell) ,

02472 - 220499 (EST)

02472 - 221613 (NRHM) ,

02472 - 220451 (Medicine Store)

जाऊं/जिपउ/आवि/प्रसिध्दी/कावि/

166 / 2023

दिनांक- 2/10/2023

प्रति,

प्राचार्य,

के.टी. पाटीलकॉलेजऑफनर्सिंग, धाराशिव.

विषय :-प्रात्यक्षिकअनुभवासाठी शुल्करुनपरवानगी मिळणेबाबत.

संदर्भ :-१)मा.अव्वर सचिव महाराष्ट्र शासननिर्णय क्र. प्राशाआ/२०१२/६३९/प्रक्र११७आरोग्य-४

दिनांक १८ सप्टेंबर २०१२

२)आपल्यासंस्थेचाप्राप्तअर्जRef. No. KTPCON/4921/2023 Date 26/10/23

३) Ref. No:KTPCON/4979/2023 Date- 11/12/2023...

उपरोक्त संदर्भित विषयान्वये आपणास कळविण्यात येते की, संदर्भ क्रमांक २ नुसार आपल्या संस्थेने मागणी केले नुसार बी.एस.सी.नर्सिंग, आणि एम.ए.सी.नर्सिंग या अभ्यासक्रमाच्या प्रात्यक्षिक अनुभवासाठी प्रशिक्षणार्थी प्रत्यक्ष अनुभवासाठी, प्रशिक्षणासाठी परवानगी मिळणे बाबत प्रशिक्षणासाठी या कार्यालयाकडे उक्त संदर्भ २ प्रमाणे शैक्षणिक वर्ष २०२४-२५ च्या या १ वर्ष शैक्षणिक वर्षा करिता प्राथमिक आरोग्य केंद्र पोहनेर, येडशी, समुद्रवाणी व नागरी प्राथमिक आरोग्य केंद्र वैराग रोड क्र.१ आणि नागरी प्राथमिक आरोग्य केंद्र क्र. २ या ठिकाणी प्रात्यक्षिक अनुभवासाठी परवानगी मागण्यात आली त्या प्रमाणे संस्थेने मागणी केल्या प्रमाणे परवानगीसाठी संदर्भ क्र.१ प्रमाणे प्रति प्रशिक्षणार्थी, प्रती दिन रु.५०/- अक्षरी (पन्नास रुपये) प्रमाणे बी.एस.सी.नर्सिंग ३३ प्रशिक्षणार्थीचे १२ दिवसाचे १९८००/-रु. व एम.एस. सीनर्सिंग १० प्रशिक्षणार्थीचे १२ दिवसाचे ६०००/-रु. शासकिय शुल्कचलनाद्वारे दिनांक २९/१२/२०२३ नुसार जमा केल्याची पावती कार्यालयास प्राप्त झाल्याने त्यांना सदरील प्रशिक्षणासाठी परवानगी देण्यात येते.

तरी संदर्भक्र.३ नुसार चलन शासन खाती भरना करुन मागणी प्रमाणे उक्त प्रशिक्षणार्थींना प्रात्यक्षिक अनुभवासाठी प्राथमिक आरोग्य केंद्र पोहनेर येथे त्यांना प्रशिक्षणासाठी परवानगी देण्यात येते.

प्रत माहितीस्तव व योग्य कार्यवाहीस्तव:-

१. तलुका आरोग्य अधिकारी

२. वैद्यकिय अधिकारी प्रा.आ.केंद्र पोहनेर

K.T. Patil College of B.Sc. Nursing

Osmanabad.

Inward No. 2673

Date 04-01-2024

Signature of Inward Clerk

जिल्हा आरोग्य अधिकारी
जिल्हा परिषद धाराशिव





आरोग्य विभाग
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जिल्हा आरोग्य अधिकारी कार्यालय, दुसरा मजला, जिल्हा परीषद धाराशिव



कार्यालय -

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जाक्रं/जिपउ/आवि/प्रसिध्दी/कावि/ 16/ /२०२३
दिनांक - 30/११/२०२३

प्रति,

प्राचार्य,

के.टी. पाटील कॉलेज ऑफ नर्सिंग, धाराशिव.

विषय :- सन २०२४-२५ या वर्षाकरीता प्रात्यक्षिक अनुभवासाठी परवानगी.

संदर्भ :- १) मा.अवर सचिव महाराष्ट्र शासन निर्णय क्र. प्राशाआ/२०१२/६३९/ प्रक्र ११७ आरोग्य
-४ दिनांक १८ सप्टेंबर २०१२.

२) आपल्या संस्थेचा प्राप्त अर्ज Ref. No. KTPCON/4921/2023 Date 26/10/23

उपरोक्त संदर्भान्वये आपणास कळविण्यात येते की, संदर्भ क्रमांक १ नुसार आपल्या संस्थेने मागणी केले नुसार बी.एससी.नर्सिंग, ए.एन.एम., जी.एन.एम. आणि एम.ए.सी. या अभ्यासक्रमाच्या प्रात्यक्षिक अनुभवासाठी प्रशिक्षणार्थी प्रत्यक्ष अनुभवासाठी, प्रशिक्षणासाठी परवानगी मिळणे बाबत प्रशिक्षणासाठी या कार्यालयाकडे उक्त संदर्भ २ प्रमाणे शैक्षणिक वर्ष २०२४-२५ च्या या १ वर्ष शैक्षणिक वर्षा करिता प्राथमिक आरोग्य केंद्र पोहनेर, येडशी, समुद्रवाणी या ठिकाणी प्रात्यक्षिक अनुभवासाठी परवानगी मागणी करण्यात आलेली आहे.

तरी संस्थेने मागणी केल्याप्रमाणे परवानगी साठी संदर्भ क्र. १ प्रमाणे प्रति प्रशिक्षणार्थी, प्रती दिन रु.५०/- अक्षरी (पन्नास रुपये) प्रमाणे प्रशिक्षणार्थीचे संख्ये नुसार व प्रशिक्षणाचे दिवसा प्रमाणे शासकिय शुल्क चलनाद्वारे शासन खाती भरणा करुन शासन प्रदान पावती चलन प्रत या कार्यालयास सादर करण्यात यावी.

जिल्हा आरोग्य अधिकारी
जिल्हा परीषद धाराशिव

प्रत माहितीस्तव सविनय सादर :-

१. मा.संचालक आरोग्य सेवा, रुग्णालये-राज्यस्तर मुंबई.

२. मा.उपसंचालक आरोग्य सेवा मंडळ लातूर

4/11/2023



K.T. Patil College of B.Sc. Nursing
Osmanabad.
Inward No. 2666
Date 04/12/2023
Signature of Inward Clerk