

ANNEXURE-V
CLINICAL MATERIAL IN
HOSPITAL

Maharashtra University of Health Sciences, Nashik
Inspection Committee Report for Academic Year 202---202---



Clinical Material in Hospital

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

HOSPITAL DETAILS

Sr. No.	Particulars to be verified	Particular	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.) To be made available on web site	Available	Adequate
a.	Whether Hospital is registered under any act under Local Authority such as Corporation, Municipality, Gram Panchayat etc.: Copy to be made available on web site	Available	Adequate
b.	Student Bed Ratio for UG & PG to be verified: (As per MSR) Calculate at Actual <u>1:3</u>	Yes	Adequate
c.	Average Bed Occupancy in % : (Minimum 75%) <u>91%</u>	Yes	Adequate
d.	Clinical facilities for PG to be verified:-(As per MSR)	Yes	Adequate
	(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	Available and functioning.
<ul style="list-style-type: none"> 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 it should be available on college website In case of "Inadequate", it must be marked as "Inadequate" with evidence. To be submit to university with report 			

Here we declare all relevant document uploaded are clear and visible on web site & are true as per my knowledge & Belief
Any Other, Please Specify:-

Date:- 31-01-2026

Chairman of LIC

Member Of LIC

Dr. Gajanan R. Wale
Ph.D.(N), MSW, LLB
Dean/ Principal Signature
K.T. Patil College of Nursing
Dharashiv (M.S.)
Member Of LIC

ASPM'S
K T PATIL COLLEGE OF NURSING, DHARASHIV
List of Hospitals

INDEX

S. No	Particulars	Specialty	Type of Hospital	Bed Strength
01	Pulse ICU Centre and Hospital, Dharashiv	Multispecialty	Parent	100
01	Niramay Hospital & Critical care Centre, Dharashiv	Maternity	Parent	50
02	District General Hospital, Dharashiv	Multispecialty	Affiliated	236
03	District Women's Hospital, Dharashiv	Maternity	Affiliated	60
04	Suvidha Hospital & ICU Centre, Dharashiv	General & ICU	Affiliated	50
05	RPH & UPH	General	Affiliated	-



DEPARTMENT OF PUBLIC HEALTH

Certification Of Registration

Under the Bombay Nursing Homes Registration Act, 1949 and Maharashtra Nursing Home Regulation Rules Amendment 2021
(Under Rule 5)

This is to certify that

Shri. /Smt./Dr. **SUDHIR KESHAV PATIL** has been registered under the Bombay Nursing Homes Registration Act Amendment 1949 in respect of **Pulse ICU Center and Hospital** situated at **26/2257 Kapaleshwar Complex Dharashiv 413501** and has been authorized to carry on the said Nursing Home.

No. of Beds

A. Maternity Count	: 20
B. ICU(Adult) Count	: 15
C. ICU(Pediatric) Count	: 5
D. Other Count	: 60

Total : 100

Registration Number	: MH/DHA/NH0264
Date of Registration	: 25-07-2025
Date of Issues Certificate	: 28-07-2025
Certificate is Valid upto	: 31-03-2028
Place	: Dharashiv



(Signature)

Dharashiv,

Dr. Gajanan R. Wale
Ph.D., M.S., M.B.B.S.
Principal

C. T. Patil College of Nursing
Dharashiv-413501 (M.S.)



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.

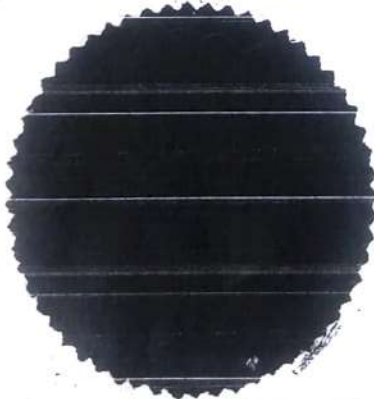
Resolved that **Dr. Harshad Raghavendra Dambal**, a member of the society/trust **Adarsh Shikshan Prasarak Mandal, Dharashiv (Osmanabad)** and **Niramay Hospital**, situated At Tambri Vibhag, Osmanabad, Taluka – District – Osmanabad will be a Parent Hospital of K T Patil College of Nursing, Osmanabad,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



ए. मा. च. २१६१९५०६
This is my Name & Signature for mark and the contents of this my affidavit.
GOVT. OF INDIA
Adv. Mahesh N. Chavan
Dist. Osmanabad.

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., M.D. (D.N.B.)

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





महाराष्ट्र शासन

सार्वजनिक आरोग्य विभाग

जिल्हा शल्य चिकित्सक, जिल्हा रुग्णालय, धाराशिव

Annexure -III

FORM C

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

Amendment 2006

(Under Rule 5)

Reg. No: - 01

This is to certify that **Dr. Harshal Raghvendra Dambal** has been registered under the Bombay Nursing Home Registration Act Amendment 2006 in respect of **Niramay Multispeciality Hospital & Critical Care Centre** situated at Near Bhosale High School, Tambari Vibhag, Dharashiv Tal:-**Dharashiv** Dist:- **Dharashiv** and has been authorized to carry on the said Nursing Home.

Registration No.:-01

ICU Beds: - 06
NICU Beds: - 05
Maternity Beds: - 19
Other Beds: - 20
Total Beds: - 50

Date of issue of Certificate:- 19 March 2025

This Certificate shall be valid up to: - 31 March 2028



Civil Surgeon

General Hospital, Dharashiv
Civil Surgeon
District Dharashiv

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, IPTI Building, 4A Ring Road, IP Estate, New Delhi 110 002, India
Phone: +91-11-42609800, Fax: +91-11-2332 3415, Email: helpdesk@nabh.co, Website: www.nabh.co



SI No. 001123



NABH as an organisation is ISQua Accredited



MAHARASHTRA POLLUTION CONTROL BOARD

Tel: 0240 - 2473462
Fax: 0240 - 2473461
Website: <http://mpcb.gov.in>
Email:
roaurangabad@mpcb.gov.in



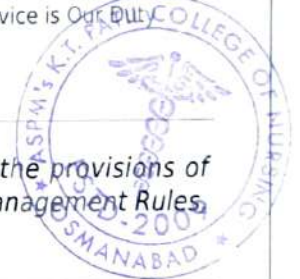
Paryavaran Bhavan, A - 4/1,
MIDC Area , Chikalthana,
Near Seth Nandlal Dhoot
Hospital, Jalna Road ,
Chatrapati Sambhaji Nagar -
431 210

ORANGE/S.S.I

Date: 05/02/2024

No:- Format1.0/RO/UAN No.0000189271/CO/2402000353

To,
Niramay Hospital ✓
, Tambari Road Osmanabad,
Tal & Dist-Osmanabad,
,
-413501
Email: drsdambal@gmail.com
Contact No.: 9822622148



Combined Consent to 1st Operate and BMW Authorization (CCA) under the provisions of Water (P & CP) Act, 1974, Air (P & CP) Act, 1981 and Bio-Medical Waste Management Rules, 2016 as amended and Hazardous Waste (M & TM) Rules, 2016.

- Ref:**
1. Combine Consent and Bio-Medical Waste Authorization granted by the Board vide no.MPCB-CONSENT-0000189271& BMW Auth No.
 2. Your application for Combine Consent and Bio-Medical Waste Authorization dated 01/12/2023

After examining the proposal, The Maharashtra Pollution Control Board hereby grant 1st operate Combined Consent and BMW Authorization to HCE under Section 25/26 of the Water (P&CP) Act, 1974, Section 21 of the Air (P&CP) Act, 1981 and Bio-Medical Waste Management Rules, 2016, and Hazardous Wastes (Management & Transboundary Movement) Rules, 2016 respectively, under Environment (Protection) Act, 1986, subject to terms and conditions as specified below and in the **Schedule(I-IV) and Annexure (I-II)** enclosed in this order.

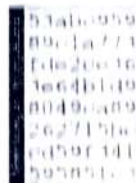
1. 21.12.2021 to 31.12.2029

Dr. Gajaniand R. Wale
Ph.D.(N), MSW, LLB
Principal
K.T. Patil School of Nursing
Dharashiv-413001(M.S.)

1. You shall adhere to the BMW generation quantity and storage conditions as specified in Schedule I of BMW Management Rules, 2016 as amended.
 2. You shall segregate and handover BMW to BMW Unit of **Chhatrapati Wastes Management, Road** strictly complying with the Provisions of Schedule I and Maintain record of the same.
 3. **Cytotoxic Drugs/ Wastes:** You shall have separate storage, marked with the symbol of Bio Hazard & Cytotoxic Hazard for outdated, discarded, unused cytotoxic drugs/waste and submit details of Management and Handling of outdated, discarded, unused cytotoxic drugs in the format prescribed by CPCB which is available on www.cpcb.nic.in along with Annual Report to MPCB with a copy to CPCB before 30th June of every year.
 4. **Mercury Waste:** You shall manage the Mercury Waste in HCF in environmentally sound manner (including storage, spilled collection, transportation and disposal) as per guidelines published by CPCB as detailed in document entitled "Environmentally Sound Management of Mercury Waste in Health Care Facilities" (www.cpcb.nic.in).
10. You shall not undertake Modifications/ Upgradation in existing facility without obtaining prior Environment Clearance under the Provision of EIA notification, 2006 Or Consent to Establish from the MPC Board as applicable.
 11. Any unauthorized change in Location, Name, personnel, equipment or working conditions as mentioned in the application by you shall constitute a breach of this CCA. In case of any change you shall apply fresh for CCA or amendment as applicable.
 12. You shall not Rent, Lend, Sell, Transfer or Close Down the facility or otherwise transport / Handover the Bio-Medical waste generated for any other purpose without obtaining prior written permission of the MPC Board.
 13. This Board reserves the right to review, amend, suspend, revoke, or change any of the conditions applicable under this CCA and the same shall be binding on the HCF.
 14. You shall maintain records of MPC board Officers visit and shall obey all the lawful instructions issued by the Board Officers from time to time.
 15. Any violation of provisions of BMW Management Rules, 2016 as amended shall attract the penal provisions of Environment (Protection) Act, 1986 and Violations under the provisions of Water (P&CP) Act 1974, Air (P&CP) act 1981 shall attract provisions of respective act including closure of the facility and prosecution.
 16. This CCA shall not be construed as exemption from obtaining necessary NOC/permission from any other Government agencies as applicable.
 17. You shall submit the bank guarantee of INR 1.25 lakhs towards compliance of conditions as specified in Schedule III to The Regional Officer, MPCB, Aurangabad within 30 days. Non submission of B.G. in specified time shall attract revocation of this CCA without further notice.



[Handwritten signature]



Signed by: Sujit Dholam
Regional Officer
For and on behalf of
Maharashtra Pollution Control Board
aurangabad@mpcb.gov.in
2024-02-05 18:24:15

[Handwritten signature]

Received Consent/Authorization fee of -

Dr. Gajanan R. V.
Regional Officer
MPCB, Aurangabad
MPCB, Aurangabad

Sr.No	Amount(Rs.)	Transaction/DR.No.	Date	Transaction Type
1	30000.00	TXN2312000212	01/12/2023	Online Payment
2	30000.00	TXN2401000157	01/01/2024	Online Payment

Copy to:

1. Regional Officer, MPCB, Aurangabad and Sub-Regional Officer, MPCB, Latur
2. Cheif Accounts Officer, MPCB, Sion, Mumbai
3. IC EIC for record & website updating purpose.



Conditions under Water (P & CP), 1974 Act: (Refer Condition No. 5)

A. Water Consumption Details -

Sr. No.	Purpose for water consumed	Water consumption quantity (CMD)
1.	Industrial Cooling, spraying in mine pits or boiler feed	0.00
2.	Domestic purpose	6.00
3.	Processing whereby water gets polluted & pollutants are easily biodegradable	0.00
4.	Processing whereby water gets polluted & pollutants are not easily biodegradable and are toxic	0.00
5.	Other such as agriculture, gardening, etc.	0.00

B. Conditions for Sewage & Effluent Generation, Treatment and Disposal:-

Sr. No.	Description	Permitted quantity of discharge (CMD)	Standards to be achieved	Disposal
1	Domestic Sewage	4.25	As per clause 'C'	100% Recycle
2	Trade effluent	0	As per clause 'C'	100% Recycle

C. You shall operate the combined waste water treatment plant of adequate design and capacity to treat the domestic sewage and trade effluent so as to achieve the following standards as prescribed below under E (P) Act, 1986 and Rules made there under and recycle treated effluent after achieving standard prescribed below.

Sr. No.	Parameters	Discharge Standards applicable	
		Limiting Concentration in mg/except for pH	
1	pH	6.5-9.0	
2	Oil & Grease	10	
3	BOD (3 days 27°C)	30	
4	COD	250	
5	Total Suspended Solids	100	
6	Bio-Assay Test	90 % survival of fish after 96 hours in 100 % effluent	

- D. You shall ensure replacement of pollution control system or its parts after expiry of its expected life as defined by manufacturer so as to ensure the compliance of standards and safety of the operation thereof.
- E. You shall provide Primary/ Secondary/ tertiary treatment system and disinfection facility.
- F. The Applicant shall obtain prior consent of the Board to take steps for Expansion/Modification of any treatment and disposal system or an extension or addition thereto.
- G. You shall provide Specific Water Pollution control system as per above conditions and conditions of Environmental Clearance, if applicable.

Dr. Gajanan R. Patil
 Dr. Gajanan R. Patil
 FICP
 Principal
 K.T. Patil
 Chembur

Terms & conditions for Incinerator(s) and D.G. Set(s) under Air (P & CP) Act, 1981 and Bio Medical waste management Rule, 2016: (Refer Condition No.6)

1. You shall observe following fuel pattern and erect following stack (s):

Sr. No.	Stack Attached to	Fuel Type	Quantity	Stack Height (Mtr)
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2. The Applicant shall obtain prior permission of MPC board for providing additional control equipment with necessary specifications and operation thereof or replacement/alteration well before its life come to an end or erection of new pollution control equipment.
3. The Board reserves its rights to vary all or any of the condition in the consent, if due to any technological improvement or otherwise such variation (including the change of any control equipment, either in whole or in part as necessary).
4. Conditions for D.G. Set:-
- Noise from the D.G. Set should be controlled by providing an acoustic enclosure or by treating the room acoustically for control of noise.
 - Acoustic enclosure/acoustic treatment of the room should be designed for minimum 25 dB (A) insertion loss or for meeting the ambient noise standards, whichever is on higher side. A suitable exhaust muffler with insertion loss of 25 dB(A) shall also be provided. The measurement of insertion loss will be done at different points at 0.5 meters from acoustic enclosure/room and then average.
 - You shall make efforts to bring down noise level due to DG set, outside industrial premises, within ambient noise requirements by proper siting and control measures.
 - Installation of DG Set must be strictly in compliance with recommendations of DG Set manufacturer.
 - A proper routine and preventive maintenance procedure for DG set should be set and followed in consultation with the DG manufacturer which would help to prevent noise levels of DG set from deteriorating with use.
 - D.G. Set shall be operated only in case of power failure.
 - The applicant should not cause any nuisance in the surrounding area due to operation of D.G. Set.
 - The applicant shall comply with the notification of MoEFCC dated 17.05.2002 regarding noise limit for generator sets run with diesel.
5. You shall take adequate measures for control of noise levels from its own sources within the premises so as to maintain ambient air quality standard in respect of noise to less than 75 dB (A) during day time and 70 dB (A) during night time. Day time is reckoned in between 6 a.m. and 10 p.m. and night time is reckoned between 10 p.m. and 6 a.m.

SCHEDULE-I

Authorization for Management of Bio-Medical Waste (Category and Quantity)

The authorization is granted for Generation and Segregation of BioMedical Waste (BMW) in waste categories and quantities listed here in below:

Sr. No	Category	Type of Waste	Quantity not to exceed (Kg/Month)	Segregation Colour coding	Treatment & Disposal
1	Yellow	a) Human Anatomical waste	10.00	Yellow coloured non- chlorinated plastic bags.	Bio medical Waste shall be sent to MPCB authorized BMW-CTF Champavati Waste Management, Beed Beed
		b) Animal Anatomical Waste	0.00		
		c) Soiled Waste	18.00		
		d) Expired or Discarded Medicines	5.00		
		e) Chemical Waste	4.00		
		f) Chemical Liquid Waste	0.00	Separate collection system leading to effluent treatment system.	
		g) Discarded linen, mattresses, beddings contaminated with blood or body fluid.	0.00	Yellow coloured non - chlorinated plastic bags or suitable packing material.	
		h) Microbiology Biotechnology and other clinical laboratory waste	0.00	Autoclave safe plastic bags or containers.	
2	Red	Contaminated waste (Recyclable)	21.00	Red coloured non chlorinated plastic bags or containers.	Bio medical Waste shall be sent to MPCB authorized BMW-CTF Champavati Waste Management, Beed Beed
3	White (Translucent)	Waste sharps including Metals	17.00	Puncture proof, Leak proof, tamper proof container.	Bio medical Waste shall be sent to MPCB authorized BMW-CTF Champavati Waste Management, Beed Beed
4	Blue	a) Glassware	0.00	Puncture proof, Leak proof with Blue coloured marking.	Bio medical Waste shall be sent to MPCB authorized BMW-CTF Champavati Waste Management, Beed Beed
		b) Metallic body implants	0.00		

(Signature)

Dr. Gajanan R. W.
Principal
K.T. Patil School of Nursing
Charechiv-413501(M.S.)

Responsibilities of CBWTF


1. You shall handover Bio Medical waste only to MPCB Authorized Common Bio medical waste treatment and Disposal facility **Champavati Waste Management, Beed** and maintain records thereof for 5 years.
2. You shall establish bar code for handling of bio-medical waste.
3. You shall ensure segregation of Bio-Medical Waste in colour coded bags as per BMW Management Rules, 2016
4. You shall not store Bio Medical waste beyond 48 hours from the generation.
5. You shall use only non-chlorinated plastic coloured bags.
6. You shall ensure use of colour coded bins and bags for segregation of BMW as required under BMW Management Rules 2016.
7. You shall not mix General/other Solid waste with Bio Medical Waste.
8. You shall ensure segregation, treatment and disposal of General / Other Municipal solid waste as per Solid Waste Management rules, 2016.
9. You shall pay the charges to authorized Common Bio Medical waste Treatment and Disposal facility for its services as agreed upon during the membership registration or as amended.
10. You shall comply and strictly abide with the conditions stipulated in BMW Management Rules, 2016 as amended time to time.
11. You shall handover Plastic / Metal waste (BMW) to Common Bio medical waste treatment and Disposal facility allocated to you for treatment & disposal or plastic/metal recycler authorized by MPCB for BMW Handling and maintain records thereof & submit to MPCB in Annual report.
12. You shall provide training to all workers involved in handling of bio-medical waste at the time of induction and at least once a year thereafter and maintain record thereof.
13. You shall undertake appropriate medical examination of all BMW Waste handlers & staff at the time of induction and at least once in a year and immunize all involved in management of Bio Medical Waste for protection against diseases, including Hepatitis B and Tetanus, that are likely to be transmitted while handling bio medical waste and maintain the records for the same.
14. You shall ensure use of personal protective Equipment such as Heavy Duty Gloves (Workman's Gloves), Gum Boots or safety shoes for waste collectors, Face mask, Head Cap, Splash Proof Gowns or aprons etc., Disposal gloves by waste handlers.
15. You shall develop and operate own website. The website should be uploaded on monthly basis with all the information relating to Bio-Medical waste management including this CCA and other permission and report.
16. You shall maintain all record for Generation, for a period of five years and produce whenever asked by MPCB authorities.
17. The occupier and operator of a Health Care Establishment shall be liable for all the damages caused to the environment or the public due to improper handling of bio-medical wastes.
18. You shall ensure submission of Annual Report of BMW for the period Jan to Dec, including category and quantity of BMW Generated and Disposed in Form IV for preceding year before 30th June of every year to the Regional Office, MPCB, Aurangabad and uploading the same to MPCB Portal (<https://www.ecmpcb.in/>).

Bank Guarantees

1. Bank Guarantee imposed to ensure timely compliance, to be observed by operator.

Sr.No	Activity / Condition to be Complied	Compliance Timeline (Months)	Bank Guarantee Amount
1A	Operation and Maintenance		
1	To Segregate and Handle BMW as per Schedule I	Continuous	25,000.00
2	Towards Operation and Maintenance of STP/ETP to achieve prescribed discharge standards	Continuous	50,000.00
1B	Records		
1	To Maintain records of BMW and submission of Annual Report for preceding calendar year in Form -IV before 30th June every year	Continuous	25,000.00
2	To maintain records of BMW handed over to CBMWTF	Continuous	10,000.00
2	Performance		
1	To provide BMW separate storage facility as per guidelines of CPCB	Continuous	15,000.00
Total			1,25,000.00

Note: You shall extend the existing submitted Bank Guarantee for the Activity / Condition to be Complied mentioned in the above table valid upto the validity of this CCA + 4 months additional. Submit a fresh Bank Guarantee for the newly added Activity / Condition to be Complied mentioned in the above table valid upto the validity of this CCA + 4 months additional.


 Dr. Gajanan
 Ph.D., M.S.
 Principal
 K.T. Patil School of Nursing,
 Dharashiv-413501(M.S.)


General Conditions

The following general conditions shall apply:-

1. You shall provide facility for collection of environmental samples and samples of trade and sewage effluents, air emissions and hazardous waste to the Board staff at the terminal or designated points and shall pay to the Board for the services rendered in this behalf.
2. Whenever due to any accident or other unforeseen act or event, such emissions occur or is apprehended to occur in excess of standards laid down, such information shall be forthwith reported to Board, concerned Police Station, Executive Engineer MIDC and Local Body. In case of failure of pollution control equipment's, the process connected to it shall be stopped.
3. You shall provide an alternate electric power source sufficient to operate all pollution control facilities installed to maintain compliance with the terms and conditions of the consent. In the absence, the applicant shall stop, reduce or otherwise, control operation to abide by terms and conditions of this consent.
4. You shall submit to this office, the 30th day of September every year, the Environmental Statement Report for the financial year ending 31st March in the prescribed Form-V as per the provisions of rule 15 of the Environment (Protection) (Second Amendment) Rules, 1992.
5. You shall comply with the Hazardous Waste (M, H & TM) Rules, 2016 and submit the Annual Returns as per Rule 20(2) of Hazardous Waste (M, H & TM) Rules, 2016 for the preceding year April to March in Form-IV by 30th June of every year to Regional Office, Aurangabad.
6. You shall engage qualified staff/personnel/agency to see the day to day compliance of consent & authorization condition towards Environment Protection.
7. Separate drainage system shall be provided for collection of trade and sewage effluents. Terminal manholes shall be provided at the end of the collection system with arrangement for measuring the flow. No effluent shall be admitted in the pipes/sewers downstream of the Terminal manholes. No effluent shall find its way other than in designed and provided collection system.
8. Neither storm water nor discharge from other premises shall be allowed to mix with the effluents from the HCE.
9. You shall install a separate meter showing the consumption of energy for operation of domestic and industrial effluent treatment plants and air pollution control system. A register showing consumption of chemicals used for treatment shall be maintained.
10. You should not cause any nuisance in surrounding area. You shall maintain good housekeeping.
11. You shall bring minimum 33% of the available open land under green coverage/ plantation. The applicant shall submit a yearly statement by 30th September every year on available open plot area, number of trees surviving as on 31st March of the year and number of trees planted.
12. The non-hazardous solid waste arising in the HCE premises, sweepings, etc. be disposed of scientifically so as not to cause any nuisance / pollution. The applicant shall take necessary permissions from civic authorities for disposal of solid waste.
13. You shall achieve the National Ambient Air Quality standards prescribed vide Government of India, Notification Dated. 16/11/2009 as amended.

14. You shall submit an official e-mail address and any change will be duly informed to the MPCB.
15. You shall observe provisions of E-waste (Management) Rules 2016 & as amended time to time and Batteries (Management and Handling) Amendment Rules, 2010.
16. An inspection book shall be opened and made available to the Board's officers during their visit to the HCE.
17. In case you use/ handle/ generate the cytotoxic waste you shall strictly adhere to the standards/ SOPs applicable and waste shall be labelled specifically as "Cytotoxic Waste" with symbol on waste containers/ bags and shall handover to BMW CTFs.
18. You shall obtain required permissions from competent authority for radio active material user/ handling/ disposal of waste before commencement of such activity.
19. The Energy source for lighting purpose shall preferably be LED based.
20. You shall harvest rainwater from roof tops of the buildings and storm water drains to recharge the ground water and utilize the same for different industrial applications within the plant
21. You shall provide personal protection equipment as per norms of Factory Act 1948
22. You are responsible to submit application for renewal of Combined Consent & Biomedical Waste authorization before 60 days of expiry.

This certificate is digitally & electronically signed.



Dr. Gajanand R. Wale
Ph.D.(N) MSW, LL.B.
Principal
K.T. Patil School of Nursing
Nharashiv-413501(M.S.)

(PRE-NATAL DIAGNOSTIC TECHNIQUES (REGULATION AND PREVENTION OF MISUSE) RULES, 1996)

SCHEDULE III

CERTIFICATE OF REGISTRATION

In exercise of the powers conferred under Sec. 19 (1) of the Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act, 1994 (57 of 1994), the Appropriate Authority **CIVIL SURGEON DHARASHIV** hereby grants registration to the Genetic Counseling Centre/Genetic laboratory*/ Genetic clinic *named below for purposes of carrying out Genetic Counseling Pre-natal Diagnostic Procedures*/Pre-natal Diagnostic Tests as defined in the aforesaid Act for a period of five years ending on **03/08/2027**

This registration is granted subject of the aforesaid Act and Rules there under and any contravention there of shall result in suspension of cancellation of this Certificate of Registration before the expiry of he said Period of five years.

- A) Name and address of the Genetic Counseling Centre/ Genetic Laboratory/
Genetic Clinic '**NIRAMAY HOSPITAL, TAMBRI VIBHAG,
DHARASHIV TQ& DIST.DHARASHIV**
- B) Name of Applicant for registration Application :
DR.RAGHWENDRA A. DAMBAL

Operator :

- 1.DR.VAISHALI DAMBAL(DGO DNB) (MON/TUE/THU/FRI/SAT 11 am TO 7pm WED/SUN 11 am TO 12pm)
- 2.DR.PRAMOD PAWAR (MD DM CARD)2DECHO (FIRST/THIRD/FOURTH SUN EVERY MONTH 12pm TO 4pm)
3. DR.JAJJEET DESHMUKH (MD DM CARD)2DECHO (SECOND/FOURTH WED EVERY MONTH 12pm TO 4pm)
- 4.DR.AMJAD SAYYAD (MD DNB CARD.) 2DECHO (FIRST/THIRD WED SECOND SUNDAY EVERY MONTH 12pm TO 4pm)
- 5.DR. SIDDHANT SHIRISH GANDHI (DNB CARD.) (FIFTH WED & SUN EVERY MONTH 12pm TO 4pm)

- C) Pre-natal diagnostic procedures approved for (Genetic Clinic)
- i) Ultrasound
 - ii) Amniocentesis
 - iii) Chorionic villa biopsy
 - iv) Foetosecopy
 - v) Fetal skin or organ biopsy
 - vi) Cordocentesis
 - vii) Any other (specify) 2D ECHO
- D) Pre-natal diagnostic procedures approved of (for Genetic Laboratory)
- i Chromosomal Studies
 - ii Biochemical studies
 - iii Molecular studies

Registration No. allotted " 12" 1.MEDISON, MODEL NO- SA.600 (SEALED)

SERIAL.NO.6G02B1014 (MRC NO-MH/OM/OM/12/00006)

2.SAMSUNG , MODEL NO- V 6

SERIAL.NO. S3FGM3HX500035E (MRC NO-MH/OM/0203)

For renewed Certificate of Registration only Period of validity of earlier Certificate From **04/08/2022** To **03/08/2027** or Registration

Date :

02/08/2024



Signature, Name and Designation of

The Appropriate Authority

**Civil Surgeon
Dharashiv**

Dr. Gajendra
K.T. Patil



Maharashtra Pollution Control Board
महाराष्ट्र प्रदूषण नियंत्रण बोर्ड

Champavati Waste Management
Shinde Building In front of Mukta Loance Barshi Road Beed
Shinde Building In front of Mukta Loance Barshi Road Beed - 431122
Phone No:9970147400
Email Id:bmwbeed@gmail.com



BIOHAZARD



Unique Registration No.: OSHP0017



Registration Certificate

Outward No.: CWM/24-25/000330

Date: 17-Jan-2025

This is to certify that **NIRAMAY HOSPITAL, AT. VIDYA NAGAR, TAMBRI VIBHAG, DHARASHIV TQ. DIST. DHARASHIV -413501** is registered with Champavati Waste Management, Beed for Management of Bio Medical Waste in accordance with, the provision of Bio Medical Waste Management Rules, 2016, as amended and in compliance with the provisions of CPCB guidelines.

1. Authorized Person of HCE (Name and Designation)	DR.SUSHRUT RAGHVENDRA DAMBAL DOCTOR
2. Bombay Nursing Home Act Registration Details	
a. BNH Registration Number	01
b. BNH Issue Date	24-Mar-2022
c. Total Number of Beds	50
d. BNH Validity(Form 'C')	31-Mar-2025
3. Common Treatment Facility Registration Details	
a. Date of Registration	17-Jan-2025
b. No. of Beds Registered	50
c. Registration Validity	16-Jan-2026
4. Renewal of CTF Membership(if applicable)	
a. Renewal Date	16-Jan-2026
b. No. of Beds Registered	50
5. MPCB Consent (Establish/ 1 st Operate/Renewal) Details	
a. Consent/ CCA Number	O/RO/UAN NO.0000189271/CO/2402000353
b. Issue Date	21-Dec-2021
c. Validity up to	31-Dec-2029



Dr. Gajanand R. Wale

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

SR

For Champavati Waste Management

Note : HCE shall display copy of Registration Certificate at front Desk and Temporary BMW storage area.

MAHARASHTRA POLLUTION CONTROL BOARD

Tel: 24010437/24020781
Fax: 24024068/24023515
Website: <http://mpcb.gov.in>
Email: psa@mpcb.gov.in



Kalpataru Point, 2nd and
4th floor, Opp. Cine Planet
Cinema, Near Sion Circle,
Sion (E), Mumbai-400022

RED/S.S.I

No:- Format1.0/PSO/UAN No.MPCB-
CONSENT-0000187918/CR/2402001833

Date:
23/02/2024



To
Champavati Waste Management Beed
Sr No 282/307 At Post Pali Tq Dist Beed, Sr No 282/307
At Post Pali, Taluka & Dist Beed-431122
Email: bmwbeed@gmail.com
Contact No.: 9970147400

(Operator and Owner of
facility)


Renewal of Combined Consent and BMW Authorization (CCA) under the provisions of Water
(P & CP) Act, 1974, Air (P & CP) Act, 1981 and Bio-Medical Waste Management Rules, 2016
as amended and Hazardous Waste (M & TM) Rules, 2016.

- Ref: 1. CCA granted by Board Vide No. Format1.0/PSO/UAN
No.0000139492/CR/2301001341 dtd 16/01/2023
2. Your application for Combine Consent and Bio-Medical Waste Authorization
dated 22/11/2023
3. This office email dated 11/01/2024
4. SCN for refusal issued on 30/01/2024.
5. Your reply dated 09/02/2024

After examining the proposal, The Maharashtra Pollution Control Board hereby Renew
Combined Consent and BMW Authorization to CBWTF under Section 25/26 of the Water
(P&CP) Act, 1974, Section 21 of the Air (P&CP) Act, 1981 and Bio-Medical Waste
Management Rules, 2016, and Hazardous Wastes (Management & Transboundary
Movement) Rules, 2016 respectively, under Environment (Protection) Act, 1986, subject to
terms and conditions as specified below and in the **Schedule(I-IV) and Annexure (I-IV)**
enclosed in this order.

1. This CCA shall be in force for a period From **31-12-2023 To 31-12-2024**
2. The capital investment of the Plant is **₹83.20 Lakhs**
3. Plant Area: - Plot Area 2023.00 M² with Built-up area 250.00 M².
4. The Jurisdiction allocated for waste collection: A) All Talukas of Dist. Beed, B) Taluka
Dharashiv (Osmanabad), Tuljapur, Bhoorn, Paranda, Kalamb, Washi of Dist. Dharashiv
(Osmanabad)
5. **Conditions under the Water (P&CP) Act, 1974:-**

1. Quantity of total water consumption shall not exceed 3 M³/day. You shall not use
the ground water without obtaining prior permission of Central Ground Water
Authority.


Dr. Gajanand R. Wate
Ph.D.(N) MSW,LLB
Principal
K.T. Patil School of Nursing
Dharashiv-431122 (M.S.)

विद्यार्थी खण्डालय, उस्मानाबाद



सामान्य रुग्णालय, उस्मानाबाद येथे विविध कक्षांत खाटांची उपलब्धता

१)	वैद्यकीय रुग्ण कक्ष	-	४६
२)	शस्त्रक्रिया रुग्ण कक्ष	-	६०
३)	नेत्र रुग्ण कक्ष	-	२०
४)	बालरुग्ण कक्ष	-	२०
५)	प्रसुती कक्ष	-	४५
६)	कान, नाक, घसा कक्ष	-	०४
७)	अस्थीव्यंग रुग्ण कक्ष	-	१५
८)	क्षयरुग्ण कक्ष	-	२०
९)	आय.सी.यू. कक्ष	-	०६
		एकूण खाटां	२३६





Dr. Gajananand R. Wale

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

"TRUE-COPY"

NOTARY
GOVERNMENT OF INDIA
Adv. SAHAJI S. BAGAL
OSMANABAD N. 9421350872

4 AUG 2009

 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

2022/14754-50

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 कं.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
 खाट वापरण्यास परवानगी देण्यात येत आहे.

तसेच आपण नियमानुसार प्रतिप्रशिक्षणार्थी रु. 50/- प्रतिदिन प्रती खाट 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 बॉडपेपरवर करार करण्याच्या अधिन राहून जिल्हा रुग्णालय
 उस्मानाबाद येथील खाट प्रात्यक्षिकास परवानगी देण्यात येते.

जिल्हा शल्यचिकित्सक,
 जिल्हा रुग्णालय उस्मानाबाद.

Civil Surgeon
General Hospital, Osmanabad.

प्रत माहितीस्तव सविनय सादर

- मा.संचालक, आरोग्य सेवा संचालनालय, आरोग्य भवन, मुंबई.
- मा. उपसंचालक, आरोग्य सेवा (शुश्रूषा)मुंबई.
- मा. उपसंचालक, आरोग्य सेवा लातूर



MAHARASHTRA POLLUTION CONTROL BOARD

Tel: 24010437/24020781
Fax: 24024068/24023515
Website: <http://mpcb.gov.in>
Email: ps0@mpcb.gov.in



Kalpataru Point, 2nd and
4th floor, Opp. Cine Planet
Cinema, Near Sion Circle,
Sion (E), Mumbai-400022

RED/S.S.I

No:- Format1.0/PSO/UAN No.MPCB-
CONSENT-0000187918/CR/2402001833

Date:
23/02/2024



To

Champavati Waste Management Beed
Sr No 282/307 At Post Pali Tq Dist Beed, Sr No 282/307
At Post Pali, Taluka & Dist Beed-431122
Email: bmwbeed@gmail.com
Contact No.: 9970147400

(Operator and Owner of
facility)

Renewal of Combined Consent and BMW Authorization (CCA) under the provisions of Water
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- Ref: 1. CCA granted by Board vide No. Format1.0/PSO/UAN
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the ground water without obtaining prior permission of Central Ground Water
Authority.

Dr. Gajanand R. W.
Ph.D (N) M.Ed.
Principal
K.T. Patil School of
Pharashiv, Osmanabad

Government of Maharashtra District Hospital, Osmanabad		
STD Code%	02472	Address: Civil Surgeon, District Hospital, Osmanabad
Telephone No%	222650	Office :- Marwadi Galli, Osmanabad
Office Telephone No %	226924	Fax No% & 02472 & 226924
NRHM Telephone No %	227005	E-Mail% & cs_osmanabad1@rediffmail.com & cs.osmanabad1@gmail.com
<u>HEALTH SERVICES</u>	▼	Outward No.D.H. O'bad / Date 14-11-22 12022/14754-59

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 कं.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 रूग्णालय, स्त्री
रूग्णालय 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 बॉर्डेपरवर करार करण्याच्या अधिन राहून जिल्हा रूग्णालय
उस्मानाबाद येथील खाटा प्रात्यक्षिकास परवानगी देण्यात येते.

जिल्हा शल्यचिकित्सक,
जिल्हा रूग्णालय 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, धाराशिव

Annexure - III

FORM C

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

Amendment 2006

(Under Rule 5)

Reg. No: - 161

This is to certify that **Mr. Gorakh Sahebrao Bhosale** has been registered under the **Bombay Nursing Home Registration Act Amendment 2006** in respect of **Suvidha Hospital & ICU Centre** situated at **Shri Umesh Gore Commercial Complex, Barshi Naka, DIC Road, Dharashiv Tal:-Dharashiv Dist:- Dharashiv** and has been authorized to carry on the said Nursing Home.

Registration No.:- 161

ICU Beds: - 05
NICU Beds: - 00
Maternity Beds: - 05
Other Beds: - 40
Total Beds: - 50

Date of issue of Certificate:- 07 MAY 2028

This Certificate shall be valid up to: - 31 March 2028



Bharajay

Civil Surgeon

General Hospital, Dharashiv

Civil Surgeon

District Dharashiv

Self Attested
Bhosale
12/07/28



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,


Director/M.O.
Dr. Swaroop P. Shinde
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

रु. 100

ONE HUNDRED RUPEES



भारत INDIA
INDIAN NON JUDICIAL



महाराष्ट्र RAASHTRA

© 2020 ©

XD 826154

अ.क्र. 5688 दिनांक 16 JUL 2021

नांव- यशम क. री, पारिम कोलेज मीन

पत्ता- कोली

हस्ते- एम. ए. मीन

मु. ख. का. [Signature]

फुलचंद गायकवाड
उस्मानाबाद
ला. नं. 3409020

कोषागार कार्यालय
उस्मानाबाद
16 JUL 2021
मु. प्र. री / एम. को. अ.
उस्मानाबाद



MEMORANDUM OF UNDERSTANDING

KNOW ALL MEN BY THESE PRESENTS:

This understanding made and executed by and between,

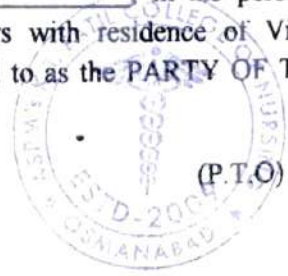
Suvidha Hospital & ICU Centre, Shri. Umesh Gore Commercial Complex, DIC Road, Barshi Naka, Osmanabad Duly registered under Bombay Nursing Home Act 1949, here in represented by _____ in his personal capacity as Director of Hospital of legal age ___ years with residence of Vidya Nagar, Tambri Vibhag, Osmanabad, here in after referred to as the PARTY OF THE FIRST PART:

[Handwritten signature]

[Handwritten signature]

[Signature]

NOTARY
GOVT. OF INDIA
Adv. MAHESH NARAYAN CHAVAN,
Dist. Osmanabad (Maha.)
Reg. No. 27111/2020



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. Gorakh S. Bhosale,

Director of Hospital

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

2. Name :- Mr. Sudhir K. Patil

Designation :- president.

Adarsh Shikshan Prasarak Mandal, Osmanabad

Amey
Deponent

अध्यक्ष
आदर्श शिक्षण प्रसारक मंडळ
उस्मानाबाद

SIGNED IN THE PRESENCE OF:

1) Dr. Grijanand R. Wale *DR*

2) Mr. Jatteppa. S. Koli

Before Me

NOTARY
GOVT OF INDIA
ADV. MAHESH NARAYAN CHAVAN
Dist. Osmanabad/Maharashtra
Cell No 9850192995



20 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	CBMWTSD/ Beed



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Dr. G.S. Bhosale

SUVIDHA HOSPITAL AND ICU CENTRE
 Shri Umesh Gore Complex
 Barshi Naka, Osmanabad



	<p>(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.</p>			
	<p>(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.</p>		18.0	CBMWTSDF Beed
	<p>(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.</p>	Yellow coloured non-chlorinated plastic bags or containers		CBMWTSDF Beed
	<p>(e) Chemical Waste: Chemicals used in production of biological and used or discarded disinfectants.</p>	Yellow coloured containers or non-chlorinated plastic bags		
	<p>(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.</p>	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
	<p>(g) Discarded linen, mattresses, beddings contaminated with blood or body fluid.</p>	Non-chlorinated yellow plastic bags or suitable packing material	--	

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	(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. Champavur 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

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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 form 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. The 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 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.

(Dr. P.M. Joshi)

Regional Officer, Aurangabad



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

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जिल्हा परिषद धाराशिव

जिल्हा आरोग्य अधिकारी कार्यालय, दुसरा मजला जिल्हा परिषद धाराशिव



कार्यालय जिल्हा आरोग्य अधिकारी कार्यालय दुसरा मजला जिल्हा परिषद धाराशिव पिन: 413501	Website : http://maha-arogya.gov.in Email : dhoosmanabad@gmail.com , Fax No. 02472 - 225298 (DHO) 220499 (EST) 02472 - 221613 (NRHM), 02472 - 220451 (Medicine Store)
आरोग्य सेवा	जा.क्र.जिपघा/आवि/प्रसिध्दी/कावि/ 66 /2025 दिनांक:- 18/09/2025

प्रति,

✓ प्राचार्य,

के.टी.पाटील कॉलेज आफ नर्सिंग
धाराशिव जि.धाराशिव

विषय:- ANM,GNM, B.Sc व M.Sc नर्सिंग च्या विद्यार्थ्यांना प्रात्यक्षिक अनुभवासाठी परवानगी देणे बाबत...

संदर्भ:- १) आपले पत्र क्र.KTPCON/५९४९/२०२५ दि.२५/०७/२०२५
२)या कार्यालयाचे पत्र जा.क्र.जिपघा/आवि/प्रसिध्दी/कावि/४७/२०२५ दि.२९/०७/२०२५
३)आपण सादर केलेले बँक चलन रु.३६०००/- भरणा केल्याचे पावती दि.०३/९/२०२५

उपरोक्त संदर्भान्वये आपणास कळविण्यात येते की आपल्या के.टी.पाटील कॉलेज आफ नर्सिंग च्या विद्यार्थ्यांस प्रा. आ.केंद्र पोहनेर,येडशी ता. जि.धाराशिव मागणी केले नुसार ANM,GNM, B.Sc व M.Sc नर्सिंग प्रशिक्षणार्थींना प्रात्यक्षिक अनुभवासाठी ४८ प्रशिक्षणार्थींसाठी ग्रामीण भागातील प्रत्यक्ष अनुभवासाठी प्रशिक्षणासाठी परवानगी मिळणे बाबत या कार्यालयाकडे उपरोक्त संदर्भ १ प्रमाणे परवानगी मिळणे बाबत अर्ज सादर केलेला होतो.

संदर्भ क्र. २ नुसार आपणास प्रती प्रशिक्षणार्थी प्रती दिवस रु.५०/- अक्षरी (पन्नास रुपये) प्रमाणे प्रशिक्षणार्थींचे संख्या नुसार व प्रशिक्षणाचे दिवसा प्रमाणे शासकीय शुल्क चलनाद्वारे शासनखाती भरणा करण्या बाबत कळविण्यात आले होते.

तसेच संदर्भ क्र.३ नुसार आपण प्रती प्रशिक्षणार्थी प्रती दिवस रु.५०/- अक्षरी (पन्नास रुपये) प्रमाणे ४८ प्रशिक्षणार्थींचे १० दिवसा करिता रु. ३६०००/- अक्षरी (छत्तीस हजार रु. फक्त) शासनास चलना द्वारे शासन शुल्क भरणा केल्याची पावती या कार्यालयास सादर केली आहे.

तरी आपणास कळविण्यात येते कि आपण प्रा. आ. केंद्र पोहनेर येथे प्रत्यक्ष अनुभवासाठी प्रशिक्षणासाठी परवानगी देण्यात येत असून ४८ प्रशिक्षणार्थींच्या तिन तुकड्या (१२ प्रशिक्षणार्थींची एक बँच) तयार करव्यात व तयार केलेल्या तुकड्याची माहिती वैद्यकिय अधिकारी प्रा.आ.केंद्र पोहनेर व येडशी यांना देवून त्यांच्या आदेशा नुसार काम करावे.

(डॉ.सतिश हरिदास)

जिल्हा आरोग्य अधिकारी
जिल्हा परिषद धाराशिव
जिल्हा परिषद, धाराशिव.

प्रत माहितीस्त्व सविनय सादर:-

- १) मा.संचालक आरोग्य सेवा, आरोग्य सेवा आयुक्तालय मुंबई/पुणे
- २) मा.उपसंचालक आरोग्य सेवा लातूर मंडळ लातूर
- ३) वैद्यकिय अधिकारी प्रा.आ. केंद्र पोहनेर व येडशी यांना देवून कळविण्यात येते कि संबंधित प्रशिक्षणार्थींस वरलि प्रमाणे प्रशिक्षणाची व्यावस्था करून केलेल्या कामाचा अहवाल या कार्यालयास सादर करावे.