



A/HR/Letter /03

Date:15/02/2022

To,
The chairman,
Sumantai Wasnik Institute of Nursing
Nagpur, Maharashtra

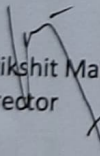
Subject: Regarding providing affiliation to your nursing college for the clinical training of nursing students.

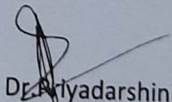
Dear Madam,

I am pleased to inform you that our hospital is hereby giving affiliation to your college for the clinical posting of Basic Nursing students for Academic year 2021- 2022 and 2023- 2024.

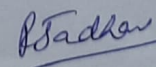
For your information

Regards


Parikshit Mahajan
Director


Dr. Priyadarshini
Medical Admin




PRINCIPAL
SUMANTA! WASNIK
INSTITUTE OF NURSING
NAGPUR

MAHARASHTRA POLLUTION CONTROL BOARD

Tel: 24010437/24020781
 Fax: 24024068/24023515
 Website: <http://mpcb.gov.in>
 Email: ps@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.0000100356/CR - 2105000597

Date: 14/05/2021

To,
AUREUS INSTITUTE OF MEDICAL SCIENCES PRIVATE LIMITED
 106, Plot No. 106, Wanjari Nagar, Opp. Rajabaxa, Hanuman
 Mandir Medical Collage Road, Nagpur
 Nagpur,
 Nagpur-440003



Your Service is Our
 Duty

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. Combine Consent and Bio-Medical Waste Authorization granted by the Board vide no. 1811000366, dated- 05.11.2018
 2. Your application for Combine Consent and Bio-Medical Waste Authorization dated 06.01.2021
 3. Report submitted by SRO- Nagpur-I
 4. Documents uploaded by applicant on 24.02.2021

After examining the proposal, The Maharashtra Pollution Control Board hereby Renew Combined Consent and BMW Authorization to operate 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 Authorization under Rule 5 of the Hazardous Wastes (Management & Transboundary Movement) Rules, 2016 respectively. Under Environment (Protection) Act, 1986, subject to terms and conditions as specified below and in the **Schedules(I-IV) and Annexures (I-II)** enclosed in this order.

1. This CCA shall be in force for a period From **01-04-2020 To 01-04-2023**
2. The capital investment of the HCF is **₹2877 Lakhs** (As per C.A Certificate submitted by HCF)
3. HCF Area: - Plot Area 1147.35 M² with Built-up area 1445.87 M².
4. **Activities Included**
 - a. Number of Beds : **100 Nos** (As per BNH certificate no. 994 valid upto 31-03-2021)
 - i. General Beds : -- Nos
 - ii. ICU/ICU Beds : -- Nos
 - iii. Operation Theatre : -- Nos
 - iv. Maternity Beds : -- Nos
 - v. Oncology Beds : -- Nos

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NAGPUR

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5. **Conditions under the Water (P&CP) Act, 1974:-**

1. Quantity of total water consumption shall not exceed 40.00 M³/day. You shall not use the ground water without obtaining prior permission of Central Ground Water Authority.
2. You shall provide adequate treatment & disposal facility for Sewage & Effluent generated as specified in **Annexure-I**
3. You shall provide water meter at water intake point & at sewage/Effluent disposal point and shall maintain monthly records thereof.

6. **Conditions under the Air (P&CP) Act, 1981:-**

1. You shall use the fuel for DG set and Boiler(s) as specified in the **Annexure-II**.
2. You shall provide adequate emission control system to DG set and Boiler(s) as specified in **Annexure-II**.
3. You shall strictly observe noise standards applicable for DG set stack emission and ambient noise level as per **Annexure-II**.

7. **Conditions under Hazardous Waste (M & TM) Rules 2016:-**

You shall have valid membership of CHWTSDF and shall dispose the Hazardous waste generated i.e. ETP sludge in strict compliance with said rules and maintain record thereof.

Sr No	Type of Waste	HW Category no.	Quantity (MT/Annun)	Disposal
1	35.3 Chemical sludge from waste water treatment	NA	As per Actual	NA

8. **Conditions under Solid Waste Management rules 2016 (As Amended, 2018 and 2019):-**

1. You Shall Handover Solid waste (Other Than BMW) to Local bodies as per provisions of SWM Rules, 2016.
2. You shall Not mix general solid waste with Bio Medical Waste.

9. **Conditions under BMW Management rules, 2016 (As Amended, 2018 and 2019):-**

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 T&D CTF **M/s Superb Hygienic Disposals** Strictly complying with the Provisions of Schedule-I and Maintain record of the same.
3. **Cytotoxic Drugs/ Waste:** 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 HCE 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).

Handwritten signature
PRINCIPAL
SUMANTA WASHNIK
INSTITUTE OF NURSING
NAGPUR



SUPERB
HYGIENIC DISPOSALS

CERTIFICATE

Certificate No: SHD/20-21/001645

Date : 17-02-2021

This is to certify that in terms of Bio Medical Waste Treatment Facility with **SUPERB HYGIENIC DISPOSALS**, You are hereby granted registration for and on behalf of **SUPERB HYGIENIC DISPOSALS** from **01-01-2021** to **31-12-2022**

Registration No : E732

Customer Code	Name & Address of the Occupier	Category	Qty Of Waste (Kg)	No. Of Beds
NGHP0822	AUREUS INSTITUTE OF MEDICAL SCIENCE PVT. LTD., MEDICAL COLLEGE DR. ASHISH GANJARE A UNIT OF AUREUL INSTITUTE OF-MEDICAL SCIENCE PVT LTD.,PLOT NO. 16, WANJARI NAGAR,,NEAR MEDICAL COLLEGE MAIN GATE,NAGPUR,	HOSPITAL PATHOLOGY LAB. CLINIC		100 ONE HUNDRED

As per MPCB norms, proper segregation & disposal of the same by delivering the waste to the CBWTF vehicle at designated point is the responsibility of individual generation.

Compliance as per MPCB rules as under be ensured from your end :-

1	Proper Segregation and Handling over the waste to us.
2	Waste sharps/Needles to be disinfected & Mutilates (Burning/Cutting) before Handling over to us.
3	Glass material to be given separately after disinfection & breaking at your end.
4	Ensure Delivery of both Yellow & Red bags to collection vehicle.
5	No untreated bio-medical waste should be kept stored a period of 48 hours.

We hereby certify that the Bio Medical Waste received at our end is disposed off as per the norms laid down by MPCB from time to time

B. Adkar
PRINCIPAL
SUMANTA WASNIK
INSTITUTE OF NURSING
NAGPUR

For SUPERB HYGIENIC DISPOSALS

[Signature]
AUTHORISED SIGNATORY

SUMANTA WASNIK INSTITUTE OF NURSING

NAGPUR

DETAILS OF AFFILIATED HOSPITAL

1} Name of affiliated Hospital:- *Azure Institute of Medical Science Nagpur*

Address:- *Plot No.16, Wanjaw Nagar, Opp, Rajabaksha Hanuman Mandir, Medical college Road, Nagpur.*

Telephone Number: *0712-2743300*

Distance from college: *13.7*-----Kms.

Number of Beds registered as per BNH Act :- *100*

2} Total constructed area of Hospital Building:- ----- Sq ft

3} Hospital Administration Block :-

- Deputy Superintendent room :- *YES*
- Medical officers room :- *YES*
- Matron room :- *YES*
- Assistant Matron room :- *YES*
- Reception :- *YES*
- Registration room :- *YES*
- Others :- *yes (available)*

Asadkar

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NAGPUR

4} Out Patient Department (OPD) :-

Total area of OPD Complex 3000 sq.ft Sq ft

No of OPD'S 8

5} In Patient Departments (IPD) :-

Total area of IPD Complex 12000 Sq ft

No of IPD'S Department Ward, Deluxe, ICU

Bed Distribution :-

- General - 23
- MBS - 12
- TLS - 4
- OPX - 9
- Suit - 2
- ICU - 15
- ISO - 5
- BMT - 2
- Dialysis - 6
- Residual lounge - 4
- Pre-op - 3
- Post op - 5
- Casualty - 5
- Day care - 5

6} Operation Theatres Block :-

Total area of OT Block 4000 Sq ft

No of OT'S available 04

7} Casualty facilities :-

State Government Permission Letter Yes - NMC Reg. certificate

Radhika
 PRINCIPAL
 SUMANTA WASNIK
 INSTITUTE OF NURSING
 NAGPUR

8} Central Clinical Laboratory :-

Pathology, Biochemistry and Microbiology :- Available

Attached Toilet :- Available (Available/Not Available)

ECG Facility :- Available

Other investigations facilities :- Available

9} Radiology and Sonography section :- Available

10} Labour Room :- Available (Available/Not Available)

With all facilities

Date :- 28/04/22

Place :- Nagpur



Sumanta Wasnik
Principal
PRINCIPAL
SUMANTA WASNIK
INSTITUTE OF NURSING
NAGPUR

1	No of beds	100
2	Average no of patients attending OPD per month	1500
3	Average no of deliveries per month	10
4	Average no of abnormal deliveries per month	5

Sr no	Ward	No of beds
1	Medical ward	
2	Surgical ward	
3	Casualty	
4	Major OT	03
5	Minor OT	01
6	Dental	-
7	Eye/ENT	-
8	Burns and plastic	
9	Neonatology with nursery	-
10	Communicable disease	-
11	Community health nursing	-
12	Cardiology	02
13	Oncology	03
14	Neurology/ neuro surgery	02
15	ICU/ICCU	15
16	Pediatric ward	-
17	Gynecology ward	03
18	Ortho	02
19	Any other	-

S. Sathar
PRINCIPAL
SUMANTA WASNIK
INSTITUTE OF NURSING
NAGPUR



INDIAN YOUTH WELFARE MULTIPURPOSE SOCIETY'S SUMANTAI WASNIK INSTITUTE OF NURSING

DHABHA, NAGPUR - 440023
Tel. No. : 0712-6505666

e-mail : swcon1@yahoo.in
sumantaiwasnikinstitute@gmail.com
Website : http://www.swconnagpur.org

Ref. No. SWCON/3068/2022

Date : 27/04/2022

To,

The Matron
Aureus Institute of Medical
Science

Nagpur

Subject :- Regarding requesting to provide information regarding your hospital for the purpose of filling it in the MUHS, Nashik Inspection format for our college....

Respected Sir/Madam,

With due respect, this is to bring to your kind notice that, Inspection by MUHS, Nashik University is due for our college.

As part of requirement for filling in the inspection proforma, the information about your hospital is required.

I request you to kindly provide the information about your esteemed hospital in the attached format.

I will be highly obliged to you if you will kindly do the needful at your earliest convenience.

Thanking you

Yours sincerely

R. Jadhav

Principal

Enclosures:- Format to be filled



R. Jadhav

**PRINCIPAL
SUMANTAI WASNIK
INSTITUTE OF NURSING
NAGPUR**

Priyanka

HR.
28/4/22
5:10 pm