



		· · · · · · · · · · · · · · · · · · ·	
	TOTAL SCORE	·	
Finally, the Assesso	YY" should be filled ONLY by the Assessor or will ADD Scores in different AREAS gestions should be written in concerned area only		
	CRITERIA	MAX. SCORE	UNIT'S SCORE
	MANDATORY	ALL YES	
X	ESSENTIAL	04	
	ANY GAPS IDENTIFIED IN THIS SECTION OF STANDARDS (ONLY FOR ASSESSOR	S)	·
Y	ANY SUGGESTIONS FOR UNIT PERTAINING TO THIS SECTION OF STANDARDS (ONLY FOR ASSESSO	RS)
INFRASTRUCTUR	DE CONTRACTOR OF THE CONTRACTO	Mark 1 for YES / 0 for NO	Mark - 1 for YES / (for NO
M	MANDATORY	Mark Control	
MI	Should have minimum 12 beds inclusive of 4 level II-B beds. The unit may be bigger in the same proportion. (For every 1 ventilated bed, there should be 4 non ventilated beds)	1	
M2	One basic mechanical ventilation devices	1	
M3	Two devices for non-invasive ventilation (can be with above devices in M2 or separate)	1	
M4	Every bed should have the space of 100 sq.ft. (this is inclusive of 50 sq.ft. of the ancillary areas)	<u> </u>	<u> </u>

राष्ट्रीय राजधानी क्षेत्र दिल्ही केरकार गाउँच Covernment of National Capital Territory of Delhi INDIA



दिल्ली नगर निगम Z (1822803) Municipal Corporation of Delhi

फार्म संख्या /FORM NO. नियम संख्या 8 टेक्सिन (See Rule - 8)

प्रमोण पेत्र / CERTIFICATE

(जन्म एवं मृत्यु पंजीकरण अधिनियम, 1969 की धारा के अंतर्गत दिया गुर्धा) (Issued under section ¹⁷ of the Registation of Births and Deaths Act, 1969)

यह प्रमाणित किया जाता है कि निम्नलिखित सूचना मूल लेख ऐं ली गई है जो कि This is to certify that the following information has been taken from the original record of

रजिस्टर में उल्लिखित है (स्थानीय क्षेत्र) which is register for (Local Area)

Nigam Bodh Ghat

Municipal Corporation of Delhi of District

North

Civil Line Zone

Zone of

क्षेत्र.

Death

के रा. रा. क्षेत्र दिल्ली। of NCT of Delhi.

नाम / Name :

दिल्ली नगर निगम के जिला -

SWARAN KANTA SURI

लिंग / Gender:

Female

तिथि / Date of

Death

13/05/2005

स्थान / Place of

Death

K-27 MALKA GANJ

.

पंजीकरण की तिथि / Date of Registration No.

20/05/2005

पंजीकरण संख्या / Registration No. :

MCDOLR05028174

मृतक के पति का नामName of Husband of Deceased

LT.SH.KRISHAN LAL SURI

the Section (Birth & Drieba, hogaes Dody Cressian Bround Municipal Gerschaffen of Belle 朝帝 《SEAL: Civil Maha 7

Sub-Registrat / Registrat of Birth & Death

उप-रजिस्ट्रार/एजिस्ट्रार, जन्म व मृत्यु

NAMPOTORI COMORNION OF DELIN MERCHAN

DETRI MUNICIPAL CORPORATION OF DEET ME DEET MUNICIPAL CORPORATION OF DEET M

ENGLISH VERSION

信包 / Date





r			
M5	A separate marked area/room for expression of milk and breastfeeding	4	
М6	Hospital must have a room for providing separate stay facility for all mothers babies within unit's/hospital's premises	1	
M7	Are there designated areas for clean utility and dirty utility?	4	
	Adequate measures for maintaining the ambient temperature of the baby care area, like use of air		
M8	conditioning (hot climate) and of room warmers (cold climate) to maintain the temperature between the 26-28 degree Celsius range	1 /	
M9	Availability of compressed air facility	1/	
M10	Availability of oxygen facility		·
мп	Availability of suction facility	1	
M12	Well illuminated but adjustable day and night lighting Cool white	. 1	
M13	Reinforced light of 1000-1500 lux shadow free illumination for examination.	1	
M1,4	Availability of continuous water supply round the clock	4	
M15	There should be at least 4 6 sockets/bed of appropriate amperage as required by level IIA & IIB beds in the unit	. 1	
M16	Blood Bank/Storage unit with component therapy 24x7 services in the hospital/conveniently Outsourced	1	
M17	Uninterrupted availability of power supply through a generator / UPS etc.	1	
B a	ESSENTIAL		
El	Facility for dimming of general lighting in the NICU for developmental care	1	
· E2	Sound absorbent walls and ceiling of the NICU. Background noise should not be more than 45db and peak intensity should not be more than \$0 db.	7	
E3	Has there been a power audit of the unit to ascertain if electrical load of the unit was calculated and accordingly electrical wiring and installations done	1	
. E4	There should be provision for contingency space/rooms for shifting the unit in case of temporary closure of the unit due to epidemics	1	
	TOTAL SCORE		,







E3	Cold light source for detection of pneumothorax	0	
E4	2D ECHO facility on call	1	
E5	Invasive BP monitoring for ventilated babies	1	
E6	Flux Meter	0/	
	TOTAL SCORE		1
Finally, the Assesso	Y" should be filled ONLY by the Assessor or will ADD Scores in different AREAS estions should be written in concerned area only		
	CRITERIA	MAX. SCORE	UNIT'S SCORE
	MANDATORY CONTRACTOR OF THE STATE OF THE STA	ALL YES	·
X	ESSENTIAL	. 06 .	
	ANY GAPS IDENTIFIED IN THIS SECTION OF STANDARDS (ONLY FOR ASSESSORS)	
Y	ANY SUGGESTIONS FOR UNIT PERTAINING TO THIS SECTION OF STANDARDS (O	NLY FOR ASSESSOI	RS)
HUMAN RESOURC	ES	Mark - 1 for YES / 0 for NO	Mark -1 for YES / 0 for NO





			NATIONIN
1			
	TOTAL SCORE		
Finally, the Assessor wi	should be filled ONLY by the Assessor all ADD Scores in different AREAS ons should be written in concerned area only		
	CRITERIA	MAX. SCORE	UNIT'S SCORE
	MANDATORY	ALL YES	
X	ESSENTIAL	04	
	ANY GAPS IDENTIFIED IN THIS SECTION OF STANDARDS (ONLY FOR ASSESSOR	S)	
Σ_{i}	ANY SUGGESTIONS FOR UNIT PERTAINING TO THIS SECTION OF STANDARDS (ONLY FOR ASSESSO	RS)
INFRASTRUCTURE		Mark 1 for YES / 0 for NQ	Mark - 1 for YES / (
M. A.	MANDATORY		
MI	Should have minimum 12 beds inclusive of 4 level II-B beds. The unit may be bigger in the same proportion. (For every 1 ventilated bed, there should be 4 non ventilated beds)	1.	
M2	One basic mechanical ventilation devices	1	<u> </u>
M3	Two devices for non-invasive ventilation (can be with above devices in M2 or separate)	1 1 .	
M4	Every bed should have the space of 100 sq.ft. (this is inclusive of 50 sq.ft. of the ancillary areas)	<u> </u>	<u></u>
		•	

राष्ट्रीय राज्यानी क्षेत्र हिल्ही क्षेत्रकार महत्त Government of National Capital Territory of Delhi INDIA



दिल्ली नगर निगम Z (1822803) Municipal Corporation of Delhi

फार्म संख्या /FORM NO. (नियम संख्या 8 टेन्स्य) (See Rule - 8)

प्रमाण पेत्रं / CERTIFICATE

(जन्म एवं मृत्यु पंजीकरण अधिनियम, 1969 की धारा के अंतर्गत दिया गृथा) (Issued under section ¹⁷ of the Registation of Births and Deaths Act, 1969)

यह प्रमाणित किया जाता है कि निम्नलिखित सूचना मूल लेख से ली पई है जो कि This is to certify that the following information has been taken from the original record of

रजिस्टर में उल्लिखित है (स्थानीय क्षेत्र)

which is register for (Local Area)

Nigam Bodh Ghat

of

Civil Line Zone

क्षेत्र,

Death

La salme

Zone of

दिल्ली नगर निगम के जिला

Municipal Corporation of Delhi of District

North

के रार्र रा. क्षेत्र दिल्ली। of NCT of Delhi

नाम / Name :

SWARAN KANTA SURI

लिंग / Gender :

Female

तिथि / Date of

Death

Death

13/05/2005

-- (5)

K-27 MALKA GANJ

स्थान / Place of

पंजीकरण की तिथि / Date of Registration No.

20/05/2005

पंजीकरण संख्या / Registration No. :

MCDOLR05028174

मृतक के पति का नामName of Husband of Deceased

LT.SH.KRISHAN LAL SURI

ob Seristra (Birth & Draths, Sean Body Cranding Trans

सील / SEAL Civil Man र

Sub-Registrar / Registrar of Birth & Death

THE MUNICIPAL CORPORATION OF DELIM MUNICIPAL CORPORATION OF DE

जप-रजिस्ट्रार/शिक्ट्रार, जन्म व मृत्यु दिल्ली नगर निगम

DE DELHI MUNICIPAL CORPORATION OF DELIF LEGIS DE DELHI MUNICIPAL CORPORATION OF DELFE MUNICIPAL DE DELHI MUNICIPAL CORPORATION OF DELFE MUNICIPAL

福图 / Date

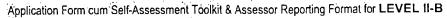
ENGLISH VERSION





			1
M5	A separate marked area/room for expression of milk and breastfeeding	1	
M6	Hospital must have a room for providing separate stay facility for all mothers babies within unit's/hospital's premises	1	
M7	Are there designated areas for clean utility and dirty utility?	11	
M8	Adequate measures for maintaining the ambient temperature of the baby care area, like use of air conditioning (hot climate) and of room warmers (cold climate) to maintain the temperature between the 26-28 degree Celsius range	1	
M9	Availability of compressed air facility		
M10	Availability of oxygen facility		
M11	Availability of suction facility	1	
M12	Well illuminated but adjustable day and night lighting Cool white	. 1	
M13	Reinforced light of 1000-1500 lux shadow free illumination for examination.	1	
M14	Availability of continuous water supply round the clock	4	
M15	There should be at least 4 - 6 sockets/bed of appropriate amperage as required by level IIA & IIB beds in the unit	1	
M16	Blood Bank/Storage unit with component therapy 24x7 services in the hospital/conveniently Outsourced	1	
M17	Uninterrupted availability of power supply through a generator / UPS etc.		
	ESSENTIAL &		The state of the s
El	Facility for dimming of general lighting in the NICU for developmental care	1	
- E2	Sound absorbent walls and ceiling of the NICU. Background noise should not be more than 45db and peak intensity should not be more than 80 db.	1	
E3	Has there been a power audit of the unit to ascertain if electrical load of the unit was calculated and accordingly electrical wiring and installations done	1	
E4	There should be provision for contingency space/rooms for shifting the unit in case of temporary closure of the unit due to epidemics	1	
	TOTAL SCORE		







0 Cold light source for detection of pneumothorax 2D ECHO facility on call E4\ Invasive BP monitoring for ventilated babies Flux Meter E6 TOTAL SCORE... Note: The rows "X" and "Y" should be filled ONLY by the Assessor Finally, the Assessor will ADD Scores in different AREAS The Gaps and Suggestions should be written in concerned area only MAX. SCORE UNIT'S SCORE CRITERIA ALL YES MANDATORY DSSENTIAL 06 ANY GAPS IDENTIFIED IN THIS SECTION OF STANDARDS (ONLY FOR ASSESSORS) ANY SUGGESTIONS FOR UNIT PERTAINING TO THIS SECTION OF STANDARDS (ONLY FOR ASSESSORS) Mark - 1 for YES / Mark -1 for YES / 0

for NO

0 for NO

HUMAN RESOURCES





	TOTAL SCORE		
Finally, the Assessor	should be filled ONLY by the Assessor will ADD Scores in different AREAS cions should be written in concerned area only		
	CRITERIA	MAX. SCORE	UNIT'S SCORE
3.00	MANDATORY	ALL YES	
, X	ESSENTIAL	04	
	ANY GAPS IDENTIFIED IN THIS SECTION OF STANDARDS (ONLY FOR ASSESSOR	S)	
Y	ANY SUGGESTIONS FOR UNIT PERTAINING TO THIS SECTION OF STANDARDS (ONLY FOR ASSESSO	RS)
			·
INFRASTRUCTURE		Mark I for YES / 0 for NO	Mark - 1 for YES / 0 for NO
i M	MANDATORY	34,	97.
MI	Should have minimum 12 beds inclusive of 4 level II-B beds. The unit may be bigger in the same proportion. (For every 1 ventilated bed, there should be 4 non ventilated beds)	1	
M2	One basic mechanical ventilation devices	1	
M3	Two devices for non-invasive ventilation (can be with above devices in M2 or separate)	1	·
M4	Every bed should have the space of 100 sq.ft. (this is inclusive of 50 sq.ft. of the ancillary areas)	. 1	

राष्ट्रीय राजवानी क्षेत्र हिल्ही नेरकार Sovernment of National Capital Territory of Delhi



Z (1822803) दिल्ली नगर निगम Municipal Corporation of Delhi -

फार्म संख्या / FORM NO. नियम संख्या S देखिए (See Rule - 8)

प्रमाण पेत्रं / CERTIFICATE

(जन्म एवं मृत्यु पंजीकरण अधिनियम, 1969 की धारा के अंतर्गत दिया गुर्वा (Issued under section 17 of the Registation of Births and Deaths Act, 1969)

This is to certify that the following information has been taken from the original record of रजिस्टर में उल्लिखित है (स्थानीय क्षेत्र)

which is register for (Local Area)

Nigam Bodh Ghat

यह प्रमाणित कियां जाता है कि निम्नलिखित सूचना मूल लेख रे ली गई है जो कि

Civil Line Zone

रा. क्षेत्र दिल्ली।

of NCT of Delhi.

क्षेत्र,

Death

Zone of

दिल्ली नगर निगम के जिला

Municipal Corporation of Delhi of District

North

SWARAN KANTA SURI

नाम / Name :

लिंग / Gender :

Female

तिथि / Date of

Death

13/05/2005

स्थान / Place of

Death

K-27 MALKA GANJ

गंजीकरण की तिथि / Date of Registration Na

20/05/2005

ंजीकरण संख्या / Registration No. :

MCDOLR05028174

मृतक के पति का नामName of Husband of Deceased

LT.SH KRISHAN LAL SURI

th Resident (Bith & Dress)

ENGLIŞH VERSION

जप-रजिस्ट्रार /रजिस्ट्रार, जन्म व मृत्यु दिल्ली नगर निगम

Sub-Registrar / Registrar of Birth & Death





M5	A separate marked area/room for expression of milk and breastfeeding	4	
М6	Hospital must have a room for providing separate stay facility for all mothers babies within unit's/hospital's premises	1	
M7	Are there designated areas for clean utility and dirty utility?	1	
	Adequate measures for maintaining the ambient temperature of the baby care area, like use of air		
M8	conditioning (hot climate) and of room warmers (cold climate) to maintain the temperature between the 26-28 degree Celsius range	1	
M9	Availability of compressed air facility	1	
M10	Availability of oxygen facility	1	
MII	Availability of suction facility	1	
M12	Well illuminated but adjustable day and night lighting.Cool white	. 1	
. M13	Reinforced light of 1000-1500 lux shadow free illumination for examination.	1	
M.1,4	Availability of continuous water supply round the clock:	4	
M15	There should be at least 4 6 sockets/bed of appropriate amperage as required by level IIA & IIB beds in the unit	1	
M16	Blood Bank/Storage unit with component therapy 24x7 services in the hospital/conveniently Outsourced	1	
M17	Uninterrupted availability of power supply through a generator / UPS etc.	1	
B .	ESSENITAL		
El	Facility for dimming of general lighting in the NICU for developmental care	1	
· E2	Sound absorbent walls and ceiling of the NICU. Background noise should not be more than 45db and peak intensity should not be more than 80 db.	1	
-E3	Has there been a power audit of the unit to ascertain if electrical load of the unit was calculated and accordingly electrical wiring and installations done	1	
E4	There should be provision for contingency space/rooms for shifting the unit in case of temporary closure of the unit due to epidemics	1	
	TOTAL SCORE		







E3	Cold light source for detection of pneumothorax	0	
E4	2D ECHO facility on call	1	
E5	Invasive BP monitoring for ventilated babies	1 /	
E6	Flux Meter	0	
	TOTAL SCORE		:
Finally, the Assesse	"Y" should be filled ONLY by the Assessor or will ADD Scores in different AREAS gestions should be written in concerned area only		
	CRITERIA	MAX. SCORE	UNIT'S SCORE
X	MANDATORY SPECIAL SECTION OF THE PROPERTY OF T	ALL YES	
	ESSENTIAL:	. 06 .	
	ANY GAPS IDENTIFIED IN THIS SECTION OF STANDARDS (ONLY FOR ASSESSORS) .	
Y	ANY SUGGESTIONS FOR UNIT PERTAINING TO THIS SECTION OF STANDARDS (O	NLY FOR ASSESSOR	RS)
HUMAN RESOURC	CES	Mark - 1 for YES / 0 for NO	Mark -1 for YES / 0 for NO





1			NATE
	TOTAL SCORE		
Finally, the Assessor wi	should be filled ONLY by the Assessor II ADD Scores in different AREAS ns should be written in concerned area only		
	CRITERIA	MAX. SCORE	UNIT'S SCORE
	MANDATORY	ALL YES	
Χ	ESSENTIAL	04	
	ANY GAPS IDENTIFIED IN THIS SECTION OF STANDARDS (ONLY FOR ASSESSORS	S)	
Y	ANY SUGGESTIONS FOR UNIT PERTAINING TO THIS SECTION OF STANDARDS (C	ONLY FOR ASSESSO	RS)
		_	
INFRASTRUCTURE		Mark 1 for YES / 0 for NQ	Mark - 1 for YES / 0 for NO
M.	MANDATORY	Proje	
MI	Should have minimum 12 beds inclusive of 4 level II-B beds. The unit may be bigger in the same proportion. (For every 1 ventilated bed, there should be 4 non ventilated beds)	1.	
M2	One basic mechanical ventilation devices	1	·
M3	Two devices for non-invasive ventilation (can be with above devices in M2 or separate)	1 . 1	
M4	Every bed should have the space of 100 sq.ft. (this is inclusive of 50 sq.ft. of the ancillary areas)		

Z(1822803) Municipal Comporation of Delhi Sovernment of National Capital Territory of Delhi फार्म संख्या /FORM NO. √(See Rule - 8) प्रमोश पेत्र / CERTIFICATE (जन्म एवं मृत्यु पंजीकरण अधिनियम, 1969 की धारा के अंतर्गत दिया गृष्टी) 17 of the Registation of Births and Deaths Act, 1969) (Issued under section यह प्रमाणित किया जाता है कि निम्नलिखित सूचना मूल लेख से ली गई है जो कि Death This is to certify that the following information has been taken from the original record of क्षेत्र. रजिस्टर में उल्लिखित है (स्थानीय क्षेत्र) Civil Line Zone Nigam Bodh Ghat Zone of which is register for (Local Area) of रा. क्षेत्र दिल्ली। दिल्ली नगर निगम के जिला -North of NCT of Delhi. Municipal Corporation of Delhi of District SWARAN KANTA SURI नाम / Name : Female लिंग / Gender: 13/05/2005 Death तिथि / Date of K-27 MALKA GANJ Death स्थान / Place of 20/05/2005 पंजीकरण की तिथि / Date of Registration No MCDOLR05028174 पंजीकरण संख्या / Registration No.: मृतक के पति का नामName of Husband of Deceased LT.SH.KRISHAN LAL SURI उप-रजिस्ट्रार/एजिस्ट्रार, जन्म व मृत्यु दिल्ली नगर निगम सील 📈 SEAL : 🔿 Sub-Registrar / Registrar of Birth & Death ENGLIŞH VERSION





M5	A separate marked area/room for expression of milk and breastfeeding	1	
M6	Hospital must have a room for providing separate stay facility for all mothers babies within unit's/hospital's premises	1	
M7	Are there designated areas for clean utility and dirty utility?	<u> </u>	
M8	Adequate measures for maintaining the ambient temperature of the baby care area, like use of air conditioning (hot climate) and of room warmers (cold climate) to maintain the temperature between the 26-28 degree Celsius range	1	
M9	Availability of compressed air facility		
M10	Availability of oxygen facility	1	
MII	Availability of suction facility	1	
M12	Well illuminated but adjustable day and night lighting Cool white	1	
M13	Reinforced light of 1000-1500 lux shadow free illumination for examination.	1	
M14	Availability of continuous water supply round the clock	1	
M15	There should be at least 4 - 6 sockets/bed of appropriate amperage as required by level IIA & IIB beds in the unit	1	
M16	Blood Bank/Storage unit with component therapy 24x7 services in the hospital/conveniently Outsourced	1	
M17	Uninterrupted availability of power supply through a generator / UPS etc.	1	
	ESSENITAL		
El	Facility for dimming of general lighting in the NICU for developmental care	1	
· E2	Sound absorbent walls and ceiling of the NICU. Background noise should not be more than 45db and peak intensity should not be more than 80 db.	1	
E3	Has there been a power audit of the unit to ascertain if electrical load of the unit was calculated and accordingly electrical wiring and installations done	1	
E4	There should be provision for contingency space/rooms for shifting the unit in case of temporary closure of the unit due to epidemics	1	
	TOTAL SCORE		







E3	Cold light source for detection of pneumothorax	0	
E4 \	2D ECHO facility on call	1	
E5	Invasive BP monitoring for ventilated babies	<u> </u>	
E6	Flux Meter	0/	
	TOTAL SCORE		÷
Finally, the Assess	"Y" should be filled ONLY by the Assessor or will ADD Scores in different AREAS gestions should be written in concerned area only		
	CRITERIA	MAX. SCORE	UNIT'S SCORE
	MANDATORY	ALL YES	
X	ESSENTIAL	. 06 .	
	ANY GAPS IDENTIFIED IN THIS SECTION OF STANDARDS (ONLY FOR ASSESSORS))	
Y	ANY SUGGESTIONS FOR UNIT PERTAINING TO THIS SECTION OF STANDARDS (O	NLY FOR ASSESSOI	RS)
HUMAN RESOURCE	CES	Mark - 1 for YES / 0 for NO	Mark -1 for YES / 0