

Form – IV (See rule 13)**ANNUAL REPORT**

[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

| Sl. No. | Particulars | | |
|---------|------------------------------------------------------------------------------------------|---|-------------------------------------------------------------------------|
| 1 | Particulars of the Occupier | : | |
| | (i) Name of the authorized person (occupier or : operator of facility) | : | Dr. B.K Aggarwal, Principal MM Institute of Medical Sciences & Research |
| | (ii) Name of HCF or CBMWTF | : | M.M.I.M.S.R MULLANA |
| | (iii) Address for Correspondence | : | M.M. Institute of medical sciences & research |
| | (iv) Address of Facility | : | Mullana (Ambala) |
| | (v) Tel. No, Fax. No | : | 01731-822550, 822551, Fax No. – 01731-274482 |
| | (vi) E-mail ID | : | Principalmmmc@mmumullana.org |
| | (vii) URL of Website | : | www.mmumullana.org |
| | (viii) GPS coordinates of HCF or CBMWTF | : | No |
| | (ix) Ownership of HCF or CBMWTF | : | Trust |
| | (x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules | : | Authorisation No.: BMW22A MB20457606 Valid upto: 30/9/2026 |
| | (xi). Status of Consents under Water Act and Air Act | : | Valid upto: 30/09/2026 |
| 2 | Type of Health Care Facility | : | Medical College |
| | (i) Bedded Hospital | : | No. of Beds: 938 |
| | (ii) Non-bedded hospital | : | NA |
| | Clinical Laboratory or Research Institute or Veterinary Hospital or any other) | : | |
| | (iii) License number and its date of expiry | : | NA |
| 3 | Details of CBMWTF | : | |
| | (i) Number of health care facilities covered by CBMWTF | : | NA |
| | (ii) No. of Beds covered by CBMWTF | : | NA |
| | (iii) Installed treatment and disposal capacity of CBMWTF; | : | <u>NA</u> |
| | (iv) Quantity of bio medical waste treated or disposed by CBMWTF | : | <u>NA</u> |

| | | | | | | |
|---|----------------------------------------------------------------------------------------------------------------------|---|----------------------------------------------------------------------|--------------------|------------------------|-----------------------------------------------------|
| 4 | Quantity of waste generated or disposed in Kg per Annum (on monthly average basis) | : | Yellow Category: 1974.70 | | | |
| | | | Red Category: 598.87 | | | |
| | | | White: 48.57 | | | |
| | | | Blue Category: 494.67 | | | |
| | | | General Solid Waste: | | | |
| 5 | Details of the Storage, Treatment, Transportation, Processing and Disposal Facility | | | | | |
| | (i) Details of the on-site storage facility | : | Size: 10×10×12 ft Air cooled | | | |
| | | | Capacity: | | | |
| | | | Provision of on-site storage : (Cold storage or any other provision) | | | |
| | (ii) Disposal facilities | | Type of treatment equipment | No of Units | Capacity Kg/day | Quantity Treated or disposed in kg per annum |
| | | | Incinerators | NA | NA | NA |
| | | | Plasma Pyrolysis | NA | NA | NA |
| | | | Autoclaves | NA | NA | NA |
| | | | Microwave | NA | NA | NA |
| | | | Hydroclave | NA | NA | NA |
| | | | Shredder | NA | NA | NA |
| | | | Needle tip cutter or destroyer | NA | NA | NA |
| | | | Sharps | NA | NA | NA |
| | | | Encapsulation or concrete pit | NA | NA | NA |
| | | | Deep burial pits | NA | NA | NA |
| | | | Chemical disinfection: | NA | NA | NA |
| | | | Any other treatment equipment: | NA | NA | NA |
| | (iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in Kg per annum | : | Red Category (like plastic, glass, etc.) NA | | | |
| | (iv) No. of Vehicles used for collection and transportation of biomedical waste | : | 1 Vehicle by Rudraksh Envirocare Pvt. Ltd. | | | |
| | (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum | | | Quantity Generated | Where disposed | |
| | | | Incineration | NA | NA | |
| | | | Ash | NA | NA | |
| | | | ETP Sludge | NA | NA | |

| | | |
|----|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| | (vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of | M/s. Rudraksh Envirocare Pvt. LTD. Village:- Bhadog, Tehsil:- Naraingarh, Distt:- Ambala |
| | (vii) List of member HCF not handed over bio-medical waste. | -- |
| 6 | Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period | Yes |
| 7 | Details trainings conducted on BMW | |
| | (i) Number of trainings conducted on BMW Management | 45 |
| | (ii) Number of personnel trained | 1815 |
| | (iii) Number of personnel trained at the time of induction | 300 |
| | (iv) Number of personnel not undergone any training so far | 0 |
| | (v) Whether standard manual for training is available? | Yes |
| 8 | Details of the accident occurred during the year | |
| | (i) Number of Accidents occurred | NIL |
| | (ii) Number of persons affected | NIL |
| | (iii) Remedial Action taken (Please attach details if any) | NIL |
| | (iv) Any Fatality occurred, details | NIL |
| 9 | Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards? | NA |
| | Details of Continuous online emission monitoring systems installed | NA |
| 10 | Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year? | 2.4 KL / day treated in own ETP (installed) |
| 11 | Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year? | Yes meeting all standards of disinfection |
| 12 | Any other relevant information | (Air Pollution Control Devices attached with the Incinerator) |

Certified that the above report is for the period from 1/1/2022 – 31/12/2022

Name and Signature of the Head of the Institution

Date: 23/03/2023
Place: MMIMSR,
Mullana, Ambala