

## All India Institute of Medical Sciences, Bhubaneswar अखिल भारतीय आयुर्विज्ञान संस्थान, भुवनेश्वर

F.No. - 34/MS/476/BMW/2023

Date -07.03.2024

To

Deputy Assistant Director General

Directorate General of Health Services

Ministry of Health & family Welfare

Environment & Climate change Cell

Nirman Bhawan, New Delhi -110001

Sub – Submission of monthly report for Bio Medical Waste Management

Dear Sir /madam,

This is in reference to your letter no P-18012/12/2016 Environment dated 11/04/2017 regarding above mentioned subject.

Please find enclosed the report of Bio Medical Waste Management for the month of **February 2024** duly signed by the Medical Superintendent on behalf of the Director, AIIMS, Bhubaneswar.

Thanks & regards

**Nodal Officer** 

**Bio Medical Waste Management** 

AIIMS, Bhubaneswar

Dr. Prabhas Ranjan Tripathy
Professor
Department of Anatomy

AllMS, Bhubaneswar-751019

SI. No.	Particulars		,			
1	Doubland					
<u>.                                    </u>	Particulars of the Occupier	:				
	(i) Name of the authorized person (occupier	:	The Director ,AIIMS, Bhubaneswar			
	or : operator of facility)		, and an estimate			
	(ii) Name of HCF or CBMWTF	: .	AIIMS, Bhubaneswar			
	(iii) Address for Correspondence	:	Sijua, Dumduma			
	(iv) Address of Facility	:	-Do-			
•	(v)Tel. No, Fax. No	:	0674-2476789			
	(vi) E-mail ID	:	info@aiimsbhubaneswar.edu.in			
	(vii) URL of Website	:	www.aiimsbhubaneswar.nic.in			
	(viii) GPS coordinates of HCF or CBMWTF	:				
	(ix) Ownership of HCF or CBMWTF	:	Autonomous Organization			
	(x). Status of Authorization under the Bio- Medical	:	Authorization No.: 8269			
	Waste (Management and Handling) Rules		Valid up to:31-03-2024			
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: <b>31-03-2024</b>			
2	Type of Health Care Facility		,			
		:				
	(i) Bedded Hospital	:	No. of Beds: <u>960</u>			
	(ii) Non-bedded hospital	:	-NA-			
	Clinical Laboratory or Research Institute or Veterinary Hospital or any other)					
	(iii) License number and its date of expiry	<u> </u> :				
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;	:	-NA-			
	(iv) Quantity of bio medical waste treated or disposed by CBMWTF	:	-NA-			
4	Quantity of waste generated or disposed in	:	Yellow Category:4992.14 kg/month			
	Kg per Annum (on monthly average basis)		Red Category: 18562.33 kg/month			
			White Category:99.89 Kg/month			
			Blue category ; 74.945 kg/month			
			Cyto -toxic category :137.68 kg/month			
			General Solid Waste: 95982kg/month			
5	Details of the Storage, Treatment, Transportation, Processing and Disposal Facility					
Y in	(i) Details of the on-site storage	:	Size:5 no's room for BMW and 5000sqft for solid waste.			

	facility			Capacity:		1	
				Provision of on-site storage: (Cold storage or any other provision)			
	(ii)	Disposal facilities		Type of treatment equipment	No of Units	Capacity Kg/dáy	Quantity Treated or disposed in kg per annum
				Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or destroyer		Handle l CBMWT Operato Pvt.Ltd)	TF r(Sani clean
				Sharps Encapsulation or concrete pit Deep burial pits Chemical disinfection:			
				Any other treatment equipment:	<u> </u>		
	(iii)	Quantity of recyclable wastes sold to authorized recyclers after treatment in Kg per annum	:	Red Category		ï	
	(iv)	No. of Vehicles used for collection and transportation of biomedical waste	:	(i)06 no's battery operated waste carrying vehicles. (ii)27 no's manually hand pulling trolley.			
	(v)	Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per Month	,	Incineration Ash ETP Sludge	Quan Gene 22.500 k	rated	Where disposed  forticulture work
- 4	(vi)	Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of		Sani clean Pvt. Ltd Tangiapada, Khurda- Odisha 752057			
	(vii)	List of member HCF not handed over bio-medical waste.					
6		have bio-medical waste nent committee? If yes, attach of the meetings held during the period			У	es	

7	Details trainings conducted on BMW			
,	(i) Number of trainings conducted			
	OII DIVIVV IVIanagement	12		
1	(ii) Number of personnel trained			
	(iii) Number of personnel trained at	350		
F 2	the time of induction	150		
	(iv) Number of personnel not			
	undergone any training so far	,		
,	(v) Whether standard manual for	Yes ,we use ppt, videos, kit, leaflet ,painting		
	training is available?	etc.		
8	Details of the accident occurred during the year	Cit.		
	(i) Number of Accidents occurred	NIL		
	(ii) Number of persons affected	NIL ,		
	(iii) Remedial Action taken (Please attach details if any)	NA :		
y.	(iv) Any Fatality occurred, details	NIL		
9	Are you meeting the standards of air	NA		
	Pollution from the incinerator? How	***		
	many times in last year could not met the standards?			
	Details of Continuous online emission monitoring systems installed	NA		
10	iquid waste generated and treatment ETP is fully functional methods in place. How many times you have not met the standards in a year?			
11	Is the disinfection method or	NA		
	sterilization meeting the log 4			
	standards? How many times you have not			
	met the standards in a year?			
12	Any other relevant information	(Air Pollution Control Devices attached with the Incinerator)		

certified that the above tep	of is for the period from	01/02/2024 to 29/02/2024	
	• • • • • • • • • • • • • • • • • • • •		

Name and Signature of the Head of the Institution

Date:

Place:

अस्पताल अधीक्षक / Medical Superintendent एम्स भुवनेश्वर / AIIMS Bhubaneswar