

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

F.No. 02/MS/476/BMW/2024/25

Date - 15.09.2025

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 August, 2025 duly signed by the Medical Superintendent on behalf of the Director, AIIMS, Bhubaneswar.

Thanks & regards

Nodal Officer

Bio Medical Waste Management

AIIMS, Bhubaneswar

डी. मानस रजन साहु /Dr Manas Ranjan Sahu अतिरिक्त प्रोफेसर /Additional Professor फोरेंसिक चिकित्सा एंव विष विज्ञान विभाग Dept. of Forensic Medicine & Toxicology एम्स, भुवनेश्वर, AIIMS, Bhubaneswar Form – IV (See rule 13) MONTHLY REPORT

	SI. No.	Particulars					
	1	Particulars of the Occupier		:			
		(i) Name of the authorized person (occupier or : operator of facility)		:	The Director ,AIIMS, Bhubaneswa	ır	
		(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 : www.aiimsbhubaneswar.nic.in			
		(vii) URL of Website					
		(viii) GPS coordinates of HCF or CBMWTF		:			
		(ix) Ownership of HCF or CBMWTF		: Autonomous Organizati		on	
	(x). Status of Authorization under the Bio- Medical		:	Authorization No.: 8269		
		Waste (Management and Handling) Rules			Valid up to: 31-03-2025		
	_	i). Status of Consents under Water Act and Air	1 :		Valid up to: 31-03-2025		
		Act					
2		Type of Health Care Facility	:				
		(i) Bedded Hospital	:	+	No. of Beds:960		
	Clir	(ii) Non-bedded hospital nical Laboratory or Research Institute or	:		-NA-		
	8 5	Veterinary Hospital or any other)				-	
	(iii) License number and its date of expiry	:			4	
3		Details of CBMWTF	:		1		
		(i) Number of health care facilities covered by CBMWTF	:		-NA-		
7	0.5	(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-		
Q	uanti	ty of waste generated or disposed in	:		Yellow Category: 22082.14/month		
		Annum (on monthly average basis)			Red Category: 19732.44/month	1.	
	g pci	Almam (on monthly average basis)		White: 238.53Kg/month Blue Category:1846.960 kg/month			
			ŀ				
			H				
			-	Cyto-Toxic Category: 194.54kg/month			
				General Solid Waste: 93400 kg/month			
	Details of the Storage, Treatment, Transpor				n, Processing and Disposal Facility	i	
	(i)	Details of the on-site storage	: [Siz	e:5 no's room for BMW and 5000sqft solid waste.	for	

	facility					()
7			Provisi	Capacity:		
1			Provision of on-site storage: (Cold storag			d storage
	(ii) Disposal facilities			any other	provision)	
		1				Quant Treate or
			Type of		1	dispos
			treatment	No of	Capacity	in kg
			equipment	Units	Kg/day	per
						annu
		-	Incinerators	_		
		-	Plasma	Ε	,	
		*	Pyrolysis			
			Autoclaves			
			Microwave			
			Hydroclave			
			Shredder		; 	
		1	Needle tip cutter or		Hand	
			destroyer		CBMV	
			uestroyer		Operator(S Pvt.L	
		1	Sharps		1 11.1	acu,
			Encapsulation			
			or concrete	. 2		
			pit			1. 11
			Deep burial			
			pits			
		4.1	Chemical			
			disinfection:			
			Any other			
		· .	treatment	_		
	(iii) Quantity of recyclable wastes		equipment:	om.(/I:I		. 13
	sold to authorized recyclers after		neu Catego	огу (пке р	lastic, glass	s, etc.)
	treatment in Kg per annum					
	(iv) No. of Vehicles used for	:	(i)06 no's batte	erv onera	ted waste	carrying
	collection and transportation of		()-> 5 5	vehicle		carrying
	biomedical waste		(ii)25 no's manually hand pulling trolley.			
	(v) Details of incineration ash and			Quantit		iere
	ETP sludge generated and			Generate	ed disp	osed
	disposed during the treatment of		Incineration			
	wastes in Kg per annum		Ash		- 1	1.
	(vi) Nome of the C		ETP Sludge	40 kg		orticulture
	(vi) Name of the Common Bio-		Sani clean Pvt. Ltd Tangiapada, Khurda- Odisha 752057			
	Medical Waste Treatment Facility Operator through which wastes				2057	
	are disposed of					
	(vii) List of member HCF not handed					
	over bio-medical waste.					
	Do you have bio-medical waste					
	management committee? If yes, attach			yes	, i-	
	minutes of the meetings held during the					
	reporting period					

		,
	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management	20
(ii) Number of personnel trained		60
	(iii) Number of personnel trained at the time of induction	30
	(iv) Number of personnel not undergone any training so far	
	(v) Whether standard manual fortraining is available?	Yes ,we use ppt, videos, kit, leaflet ,painting etc.
8	Details of the accident occurred during the year	, American de la companya de la comp
	(i) Number of Accidents occurred	NIL
	(ii) Number of persons affected	NIL
By Mary	(iii) Remedial Action taken (Pleaseattach details if any)	NA
	(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	NA
	not met the standards?	
	Details of Continuous online emissionmonitoring systems installed	NA
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	ETP is fully functional
11	Is the disinfection method or sterilization meeting the log 4	NA
	standards? How many times you have not	
12	met the standards in a year?	
12	Any other relevant information	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from	01/08/2025 to 31/08/2025	

Date: Place:

Name and Signature of the Head of the Institution/Medical अस्पताल अध्Superintendent एम्स भूक्पेश्वर/AIIMS Shubanes