अ०भा०आ०सं० A. I. J. M. S.

ALL INDIA INSTITUTE OF MEDICAL SCIENCES ANSARI NAGAR, NEW DELHI- 110029

No. F.33/BMW/2018-Estt. (H)

Dated: 19.07.2018

Subject: Submission of Annual Report for the period Jan 2017- Dec 2017 for Bio Medical Waste Management at AIIMS-reg.

Reference Rule – 13 of Biomedical Waste Management Rules- 2017 [Published in the Gazette of India, Extraordinary, Part II, Section 3, Sub-section (i)] by the Ministry of Environment, Forest and Climate Change Government of India vide Gazette NO. D.L.- 33004/99 dated 28th March 2017.

The rule mandates that "every **occupier** or operate of common bio-medical waste treatment facility shall submit an annual report to the prescribed authority in Form-IV".

In this regard, the annual report for the period of Jan 2017 to Dec 2017 in the prescribed format if placed below at Flag 'A' to be subsequently submitted to Delhi Pollution Control Committee.

Submitted for kind perusal & signature please.

Dr. Vijaydeep Siddharth, Nodal Officer,

Bio Medical Waste Mgt.

Medical Superintendent please

ALL INDIA INSTITUTE OF MEDICAL SCIENCES Ansari Nagar, New Delhi 110029

No. F. 33/BMW/2018-Estt. (H)

Dated:-19/07/2018

To,

Sr. Environmental Officer
Delhi Pollution Control Committee,
Department of Environment
4th Floor, ISBT Building
Kashmere gate, Delhi-6

Subject: Submission of Annual Report for the period Jan 2017-Dec 2017 for Bio Medical Waste Management at AIIMS-reg.
Sir.

This is in reference to Rule-13 of Bio Medical Waste Management Rules-2016 [Published in the Gazette of India, Extraordinary, Part II, Section 3, Subsection (i)] by the Ministry of Environment, Forest and Climate Change Government of India vide Gazette NO. D. L.-330044/ dated 28th March 2017, mandating institutions to submit their annual reports on or before 30th June.

In this regard, the annual report for the period of Jan 2017 to Dec 2017, duly signed by Director AIIMS (in the capacity of the 'occupier' as per the Biomedical Waste Management Rules-2017) in the prescribed format (form IV) is enclosed along with the relevant annexure.

Dr. D.K. Sharma Medical Superintendent

Copy to:

Deputy Assistant Director General Directorate General of Health Services Ministry of Health and Family Welfare Government of India

From –IV (See rule 13) Annual Report

S.No	Particulars	Lali.			
1.	Particulars of the Occupier	1 -			
	(i) Name of the authorized person	: : :	Director AIIMS		
	(occupier or operator of facility)		Prof. Randeep Guleria		
	(ii) Name of HCF or CBMWTF		All India Institute of Medical Sciences (AIIMS)		
	(iii) Address for Correspondence	: 21	AIIMS, Ansari Nagar, New Delhi-110029		
	(IV)Address of Facility	136	Same as above		
	(v)Tel. No. Fax. No.		26594800		
	(VI) E-mail ID		director.aiims@gmail.com		
	(VII)URL of Website		aiims.edu		
	(VIII)GPS coordinates of HCF of CBMWTF		dillio.ogd		
	(IX)Ownership of HCF of CBMWTF		Autonomous Organization		
	(X)Status of Authorization under the Bio- Medical Waste (Management and Handing) Rules.		Authorization No DPCC/BMW/AUTH/NEW NO/2017/03334		
	(XI)Status of Consents under Water Act and Air Act. Valid up to:		Certificate No. 0-029036 Valid up to 09/03/2022		
2.	Type of Health Care Facility	:			
	(i) Bedded Hospital	ELL	No. of Beds: 2412		
	(ii) Non-Bedded Hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or	:	N.A.		
	Veterinary Hospital or any other) (iii) License number and its date of expiry.		N.A.		
3.	Details if CBMWTF				
	(i) Number healthcare facilities covered		N.A.		
213	by CBMWTF				
	(ii) No. of beds covered by CBMWTF		N.A.		
	(iii) Installed treatment and disposal capacity of CBMWTF		N.A.		
	(iv) Quantity of biomedical waste treated or disposal by CBMWTF		N.A.		
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)		Yellow category: 2,98,290 kg/month		
			Red Category:3,14,708 kg/month		
			White: 8,957 kg/month		
			Blue Category:2,19,848 kg/month		
			General Solid waste 25,20,000 kg/month		
ō.	Details of the Storage , treatment, transportation, processing and Disposal Facility: Handled by CBMWTF				
	(i) Details of the on-site storage facility		Size : (99X6.5X9)X2		
14			Capacity: 250 KG		
			Provision of on-site storage : (cold storage or any other provision)		
	(ii) Disposal Facilities		Type of treatment No Capacity Quantity Equipment of Kg/day treated or Units disposed		

			NIL In Kg per Annum
			Incinerators Plasma Paralysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or destroyer Handled by CBMWTF Operator
			Sharps encapsulation or concrete pit Deep Burial pits: Chemical disinfection: Any other treatment
	(iii) Quantity of recyclable wastes sold to		equipment: Red Category (like plastic, glass etc.)
	authorized recyclers after treatment in kg per annum.		Handled by CBMWTF operator
	(iv) No of vehicles used for collection and transportation of biomedical waste.	÷	3 Vehicles
	(v) Details of incineration ash and ETP sludge generated and disposal during the treatment of wastes in Kg per annum)		Quantity Generated Where disposal Incineration NIL NIL Ash ETP Sludge (STP) 3650 kg/p.a used for complex horticulture
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of		One, Biotic Waste Solutions Private limited
	(vii) List of member HCF not handed over bio-medical waste.	:	Nil Nil
6.	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period.		No
7.	Detail trainings conducted on BMW		
	(i) Number of training conducted on BMW Management.		27
	(ii) Number of personnel trained		505
	(iii) Number of personnel trained at the time of induction		2100
	(iv) Number of personnel not undergone any training so far.		2150
	(v) Whether standard manual for training is available -?		Utilizing through posters, videos & power point presentation.
	(vi) Any other information)		Nil
8.	Details of the accident occurred during the year		Nil
	(i) Number of Accidents occurred		

	(ii) Number of the persons affected	Nil
	(iii) Remedial Action taken (Please attach details if any)	NA NA
	(iv) Any Fatality occurred, details.	NO
9.	Are you meeting the standards of air Pollution from the incinerator?. How many times in last year could not met the standards?	N.A.
	Details of Continuous online emission monitoring systems installed	N.A.
10.	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year.	STP
11.	It the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	N.A.
12.	Any other relevant information	(Air Pollution Control Device attached with the incinerator.) N.A.

Certified that the above report is for the period from

01/01/2017 to 31/12/2017

Date:

Place:

Name and Signature of the Head of the Institution