

To be submitted to the prescribed authority on or before 31st March 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)

| S No. | Particulars | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|--|---|--|--|------------------|--|--------------|--|--|--|------------------|--|--|--|------------|--|--|--|-----------|--|--|--|------------|--|--|--|----------|--|--|--|
| 1. | Particulars of the Occupier | : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (i) Name of the authorised person (occupier or operator of facility) | : | Indian Spinal Injuries Center | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (ii) Name of HCF or CBMWTF | : | Indian Spinal Injuries Center | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (iii) Address for Correspondence | : | Sector C1 vasant kunj New Delhi – 110064. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (iv) Address of Facility | : | Sector C1 vasant kunj New Delhi – 110064. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (v) Tel. No, Fax. No | : | 011-42255370 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (vi) E-mail ID | : | acma@isiconline.org | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (vii) URL of Website | : | www.isiconline.org | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (viii) GPS coordinates of HCF or CBMWTF | : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (ix) Ownership of HCF or CBMWTF | : | Private Hospital | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (x) Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules | : | Authorisation No. DPCC/BMW/AUTH/NEWN0/2017/3291 Valid upto - 04/03/2022 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (xi) Status of Consents under Water Act and Air Act | : | Valid up to - Consent Order No DPCC/WMC/2015/36425 Valid up to 18-02-2020 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. | Type of Health Care Facility | : | Health care | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (i) Bedded Hospital | : | No. of Beds : 185 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other) | : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. | (iii) License number and its date of expiry | : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Details of CBMWTF | | Biotic Waste Solutions Pvt. Ltd.. 46, SSI Industrial Area GT Karnal Road, Delhi – 110033. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (i) Number healthcare facilities covered by CBMWTF | : | N.A | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (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 disposed by CBMWTF | | N.A | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. | Quantity of waste generated or disposed in Kg per annum (on monthly average basis) | : | Yellow Category :1723.84 (Avg. Per Month) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | Red Category :2242.59(Avg. Per Month) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | White:127.605(Avg. Per Month) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | Blue:483.16 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. | Details of the Storage, treatment, transportation, processing and Disposal Facility | | General Solid waste: 6566 (Avg. Per Month) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | (i) Details of the on-site storage facility | : | There is a separate storage area for bio medical waste. Capacity : Provision of on-site storage : (cold storage or any other provision) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (ii) Details of the treatment or disposal facilities | : | <table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/ day</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td></td> <td></td> <td></td> </tr> </tbody> </table> | Type of treatment equipment | No of units | Capacity Kg/ day | Quantity treated or disposed in kg per annum | Incinerators | | | | Plasma Pyrolysis | | | | Autoclaves | | | | Microwave | | | | Hydroclave | | | | Shredder | | | |
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| | | Incinerators | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Plasma Pyrolysis | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | | Microwave | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Hydroclave | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Shredder | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|--|--------------------------------------|--|--|--|
| | Needle tip cutter or destroyer | | | |
| | Sharps encapsulation or concrete pit | | | |
| | Deep burial pits: | | | |
| | Chemical disinfection | | | |
| | Any other treatment equipment | | | |

| | | | |
|-----|---|--------------------|--|
| | (iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum. | : | N.A |
| | (iv) No of vehicles used for collection and transportation of bio medical waste | : | N.A |
| | (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum | | N.A |
| | | Quantity generated | Where disposed |
| | | Incineration | |
| | | Ash | |
| | ETP Sludge | | |
| | (vi) Name of the Common Bio Medical Waste Treatment Facility Operator through which wastes are disposed of | : | Biotic Waste Solutions Pvt. Ltd.. |
| | (vii) List of member HCF not handed over bio-medical waste | : | N.A |
| 6. | Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period | : | We have a separate environment management committee and Bio medical Waste management is covered under it . |
| 7. | Details training conducted on BMW | | |
| | (i) Number of training conducted on BMW Management. | : | 102 |
| | (ii) Number of personnel trained | : | 1151 |
| | (iii) Number of personnel trained at the time of induction | : | 199 |
| | (iv) Number of personnel not undergone any training so far | : | Nil |
| | (v) Whether standard manual for training is available? | : | Yes |
| | (vi) Any other information | : | NA |
| 8. | Details of the accident occurred during the year | : | None |
| | (i) Number of Accidents occurred | : | |
| | (ii) Number of the persons affected | : | |
| | (iii) Remedial Action taken (Please attach details if any) | : | |
| | (iv) Any Fatality occurred, details. | : | |
| 9. | Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards? | : | Not applicable |
| 10. | Details of Continuous online emission monitoring systems installed | : | Not applicable |
| 11. | Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year? | : | Details on PTP & STP Capacity-PTP-40 KLD In place- Chemical process Met all standards. Capacity-STP-250 KLD MBBR technology Met all standard |
| 12. | Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year? | : | N.A |
| 13. | Any other relevant information. | : | |

STATE OF NEW YORK

IN SENATE
January 12, 1911

REPORT OF THE

COMMISSIONERS OF THE LAND OFFICE
IN RESPONSE TO A RESOLUTION
PASSED BY THE SENATE
MAY 11, 1909