

Date : 24-06-2024

To,
The Senior Environmental Engineer,
WMC-1 ISBT, DPCC
Delhi-110006

Subject:- Submission of Annual Return of year Jan 2023-Dec 2023

Respected Sir/Ma'am,

We INDIRA IVF CLINIC (A UNIT OF INDIRA IVF HOSPITAL PVT LTD) located at D-11/145, Ground Floor, Block-D, Near Rohini East Metro Station, Pillar No-391, Sector-8, Pocket-11 New Delhi-110085, registered under Bio-Medical Waste (Management & Handling) Rules, 2016 bearing authorization registration no DPCC/(11)(5)/2019/BMW/NST/AUTH/1496081. Application No: 548120, Validity lifetime. Have submitted the Bio-Medical Wastage Annual report for the period from January 2023 to December 2023.

Enclosure:

1. Form- IV
2. Annual Biomedical waste dispatch record.

Thanking you

For INDIRA IVF CLINIC (A UNIT OF INDIRA IVF HOSPITAL PVT LTD)

Dr. Nirmal Bhargava,
(Center Head)

Centre Seal



SAVE GIRL CHILD

बेटी बचाओ/बेटी पढ़ाओ, अभियान में सहयोग करें।

Indira IVF Hospital Pvt. Ltd.

Registered Office :

4th Floor, C Tower, Times Square Building, Marol, Gamdevi, Andheri Kurla Road, Andheri East, Marol Naka, Mumbai- 400059, (Mah.), India

गर्भ/भ्रूण का लिंग परीक्षण करना/करवाना कानूनन अपराध है। यह कार्य हमारे यहां नहीं किया जाता है।

Website www.indiravf.com

Email info@indiravf.in

CIN: U85110MH2015PTC400059

**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 authorised person (occupier or operator of facility) | : | DR. NIRMAL BHARGAVA |
| | (ii) Name of HCF | : | INDIRA IVF CLINIC (A UNIT OF INDIRA IVF HOSPITAL PVT.LTD) |
| | (iii) Address for Correspondence | : | D-11/145, Ground Floor, Near Rohini East Metro Station, Opp.Metro Pillar No.391, Sec-8, Rohini New Delhi-110085 |
| | (iv) Address of Facility | : | D-11/145, Ground Floor, Near Rohini East Metro Station, Opp.Metro Pillar No.391, Sec-8, Rohini New Delhi-110085 |
| | (v) Tel. No, Fax. No | : | 011-49879756 |
| | (vi) E-mail ID | : | centerhead.rohini@indiraivf.in |
| | (vii) URL of Website | : | https://www.polestarinfosystem.com/login.html |
| | (viii) GPS coordinates of HCF | : | |
| | (ix) Ownership of HCF | : | Private |
| | (x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules | : | Authorisation No :- DPCC/(11)(5)(01)-2019/BMW/NST/AUTH/1496081. Date of Expiry Life time |
| (xi). Status of Consents under Water Act and Air Act | : | N/A | |
| 2. | Type of Health Care Facility | : | |
| | (i) Bedded Hospital | : | No. of Beds: 0 |
| | (ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other) | : | CLINIC |
| | (iii) License number and its date of expiry | : | DPCC/(11)(5)(01)-2019/BMW/NST/AUTH/1496081. Date of Expiry Lifetime |
| 3. | Details of CBMWTF | : | NA |
| | (i) Number healthcare 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 biomedical waste treated or disposed by CBMWTF | : | NA |
| 4. | Quantity of waste generated or disposed in Kg per annum (on monthly average basis) | : | Yellow Category_ 7.500 kg |
| | | : | Red Category_ 67.750 kg |
| | | : | White: 6.500 kg. |
| | | : | Blue Category_ 15.700 kg |
| | | : | General Solid waste: 0.00 kg |
| 5. | Details of the Storage, treatment, transportation, processing and Disposal Facility | | |
| | (i) Details of the on-site storage | : | Size : |

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| disposal facilities | | Type of treatment equipment units Kg/ | No of disposed | Capacity day | Quantity treated or in kg per annum |
|--|---|---|----------------|--------------|-------------------------------------|
| (iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum. | : | Red Category (like plastic, glass etc.) 20KG | | | |
| (iv) No of vehicles used for collection and transportation of biomedical waste | : | NA | | | |
| (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum | | Quantity Where generated disposed Incineration Ash ETP Sludge | | | |
| (vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of | | POLSTAR INFOSYSTEM | | | |
| (vii) List of member HCF not handed over bio-medical waste. | | NA | | | |
| 6 Do you have bio-medical waste Management committee? If yes, attach minutes of the meetings held during the reporting period. | | NO | | | |

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| | | | |
|----|---|---|----------------|
| 7 | Details trainings conducted on BMW | | |
| | (i) Number of trainings conducted on BMW Management | | 3 |
| | (ii) number of personnel trained | | 10 |
| | (iii) number of personnel trained at the time of induction | | 3 |
| | (iv) number of personnel not undergone any training so far | | |
| | (v) whether standard manual for training is available? | | NO |
| | (vi) any other information) | | |
| 8 | Details of the accident occurred during the year | | |
| | (i) Number of Accidents occurred | | 0 |
| | (ii) Number of the persons affected | | 0 |
| | (iii) Remedial Action taken (Please attach details if any) | | NO |
| | (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? | | NA |
| | Details of Continuous online emission monitoring systems installed | | NA |
| 10 | Liquid waste generated and treatment methods in place. | | 0 |
| | How many times you have not met the standards in a year? | | 0 |
| 11 | Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year? | | Not Applicable |
| 12 | Any other relevant information | : | |

Certified that the above report is for the period from 01Jan'2023 to 31Dec'2023

Name and Signature of the Head of the Institution

Date:

Place:

INDIRA IVF HOSPITAL PVT. LTD. 4209
D-11/45, Ground Floor, Near Rohini East Metro Station
Opp. Metro Pillar 391, Sec-8, Rohini
CBWTF Code : 04209



| Month | Blue(count) | Blue (kg) | Red (count) | Red (kg) | Yellow (count) | Yellow(kg) | White (count) | White (kg) |
|--------------|--------------|-------------|-------------|--------------|----------------|------------|---------------|------------|
| Jan-2023 | 1 | 0.500 | 7 | 1.400 | 1 | 0.200 | 0 | 0.000 |
| Feb-2023 | 0 | 0.000 | 2 | 2.200 | 0 | 0.000 | 0 | 0.000 |
| Mar-2023 | 1 | 0.500 | 4 | 5.500 | 1 | 0.600 | 0 | 0.000 |
| Apr-2023 | 0 | 0.000 | 6 | 7.900 | 1 | 0.500 | 0 | 0.000 |
| May-2023 | 2 | 2.500 | 4 | 4.150 | 1 | 0.500 | 0 | 0.000 |
| Jun-2023 | 2 | 3.200 | 10 | 8.800 | 3 | 1.600 | 1 | 1.000 |
| Jul-2023 | 0 | 0.000 | 8 | 3.700 | 3 | 1.100 | 1 | 1.500 |
| Aug-2023 | 1 | 4.000 | 10 | 6.800 | 2 | 1.000 | 1 | 1.000 |
| Sep-2023 | 0 | 0.000 | 8 | 7.400 | 1 | 0.500 | 0 | 0.000 |
| Oct-2023 | 1 | 2.000 | 4 | 5.500 | 0 | 0.000 | 0 | 0.000 |
| Nov-2023 | 2 | 2.000 | 8 | 8.000 | 1 | 0.500 | 2 | 2.000 |
| Dec-2023 | 1 | 1.000 | 12 | 6.400 | 2 | 1.000 | 1 | 1.000 |
| TOTAL | 11 | 15.7 | 83 | 67.75 | 16 | 7.5 | 6 | 6.5 |

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