

To,

The H.P. State Pollution Control Board Him Parivesh,
Phase 3, New Shimla, Shimla,

Himachal Pradesh 171009

Respected Sir/Madam,

This is to inform you that we, INDIRA IVF Clinic Located at Block no 3 . Basement, 2, SDA Complex, Kasumpti, Shimla, Himachal Pradesh 171009 has submitted the BMW annual report for the year Jan 2023- Dec 2023.

Thanking you

Enclosure:

1. Covering letter
2. Form-IV
3. Annual BMW report

Centre Head
Indira IVF Clinic

Shimla, Himachal Pradesh 171009

Centre Seal

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

AUTHORIZED SIGNATORY

बेटी बचाओ/बेटी पढ़ाओ,
अभियान में सहयोग करें।



SAVE GIRL CHILD

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

*Received by
Dr. Rajender Kumar
Scientific Officer*
(Signature)
29.01.2024

Director Seal

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 authorized person (occupier or : operator of facility)	:	Indika IVF Clinic
	(ii) Name of HCF or CBMWTF	:	Indika IVF Clinic
	(iii) Address for Correspondence	:	Block No 3 2nd floor Basement - 2
	(iv) Address of Facility	:	S.D.A Complex Kasumpti 171009
	(v) Tel. No, Fax. No	:	7230064450
	(vi) E-mail ID	:	Kartik.Sharma@Indika-ivf.in
	(vii) URL of Website	:	- N.A. -
	(viii) GPS coordinates of HCF or CBMWTF	:	- N.A. -
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: ..BMW/NB/RLSML-67 Valid upto: <u>One Time Authentication.</u>
	(xi). Status of Consents under Water Act and Air Act	:	Valid upto:
2	Type of Health Care Facility	:	Test Tube Baby Center.
	(i) Bedded Hospital	:	No. of Beds: <u>No</u>
	(ii) Non-bedded hospital	:	Non - Bedded Hospital
	Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	
	(iii) License number and its date of expiry	:	N.A.
3	Details of CBMWTF	:	
	(i) Number of health care facilities covered by CBMWTF	:	N.A.
	(ii) No. of Beds covered by CBMWTF	:	
	(iii) Installed treatment and disposal capacity of CBMWTF;	:	_____ Kg / day
	(iv) Quantity of bio medical waste treated or disposed by CBMWTF	:	_____ Kg / day
4	Quantity of waste generated or disposed in Kg per Annum (on monthly average basis)	:	Yellow Category: 23.770 kg Red Category: 40.970 kg White: 4.640 kg Blue Category: 14.730 kg General Solid Waste:
5	Details of the Storage, Treatment, Transportation, Processing and Disposal Facility		
	(i) Details of the on-site storage	:	Size:

facility	Capacity:			
	Provision of on-site storage : (Cold storage or any other provision)			
(ii) Disposal facilities	Type of treatment equipment	No of Units	Capacity Kg/day	Quantity Treated or disposed in kg per annum
	Incinerators			
	Plasma Pyrolysis	NA		
	Autoclaves	1		
	Microwave	NA		
	Hydroclave			
	Shredder			
	Needle tip cutter or destroyer	1	10 Pcp	5 Kg
	Sharps	NA		
	Encapsulation or concrete pit	NA		
	Deep burial pits	NA		
	Chemical disinfection:	NA		
	Any other treatment equipment:	NA		
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in Kg per annum	:	Red Category (like plastic, glass, etc.) NA		
(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 Generated	Where disposed	
	Incineration			
	Ash			
(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of		Enviro Engineers, CBWTF Solan (H.P)		
		ETP Sludge		
(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		NA		


7	Details trainings conducted on BMW		
	(i) Number of trainings conducted on BMW Management		2
	(ii) Number of personnel trained		3
	(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?		—
8	Details of the accident occurred during the year		None
	(i) Number of Accidents occurred		
	(ii) Number of 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?		NA.
	Details of Continuous online emission monitoring systems installed		
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		Cont. 1.1. Hypochloride
11	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.
12	Any other relevant information		(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from

..... From Jan 2023 To Dec 2023

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Name and Signature of the Head of the Institution


Dr. Ankana Sharma.

Date: 29/01/2024

Place: Kasumpati Shimla

171009.

Jan 23 to Dec 2023

Month	Yellow	Red	Blue	White	Total Kgs
Jan-23	1.21	5	1.5	0	7.71
Feb-23	3.18	3.92	1.57	1	9.67
Mar-23	0.5	1.12	1.5	1	4.12
Apr-23	1.59	4.23	0.8	0	6.62
May-23	1.35	3.55	3.25	0	8.15
Jun-23	2.8	2.9	1.69	0.5	7.89
July-23	2.32	3.1	0.69	0	6.11
Aug-23	1.5	1.98	0.5	0	3.98
Sep-23	3.15	6.07	0.45	0.13	9.8
Oct-23	1.9	2.3	0.31	0.01	4.52
Nov-23	2.77	5	1.55	1	10.32
Dec-23	1.5	1.8	0.92	1	5.22
Total	23.77	40.97	14.73	4.64	84.11