

Indira Gandhi Hospital, Shimla Himachal Pradesh  
No. HFW (MS) IGH/- 67/24

dated, the Shimla 1-7-24

To

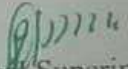
The Member Secretary,  
H.P. Pollution Control Board,  
Shimla-171001

Subject: - Submission of Annual BMW Report 2024.

Sir,

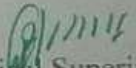
I have honour to submit Annual BMW Report for the year 2024. Copy of Annual BMW Report is being enclosed herewith. This is for your kind information and further necessary action please.

Yours faithfully,

  
Medical Superintendent  
Indira Gandhi Hospital,  
Shimla H.P.  
dated:-

Endst. No. As above

Copy to the Incharge, IT Section for uploading on IGMC website.

  
Medical Superintendent  
Indira Gandhi Hospital,  
Shimla H.P.

**Form -IV  
(See rule 13)  
Annual Report**

[To be submitted to the prescribed authority on or before 30<sup>th</sup> 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)]

Sr. No.	Particulars	
1.	Particulars of the Occupier	:
	(i) Name of the authorized person (occupier or operator of facility)	Medical Supdt. IG Hospital Shimla-I (H.P)
	(ii) Name of HCF or CBMWTF	IGmc & Hospital Shimla- H.P.
	(iii) Address for Correspondence	Medical Supdt, IGmc & Hospital Shimla- H.P.
	(iv) Address of Facility	- do.
	(v) Tel. No. Fax No.	0177-2858845
	(vi) E-mail ID	www.srms/igmc shimla@gmail.com.
	(vii) URL of Website	
	(viii) GPS coordinates of HCF of CBMWTF	
	(ix) Ownership of HCF of CBMWTF	<input checked="" type="checkbox"/> State Government of Private or Semi Govt. or any other)
	(x) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules.	Authorization No. 31-3-2026 BMW/SMC/003 (Shimla.) Valid up to 31-3-2026
	(xi) Status of Consents under Water Act and Air Act.	Valid up to: 31-3-2026
2.	Type of Health Care Facility	:
	(i) Bedded Hospital	No. of Beds 850
	(ii) Non-Bedded Hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	N/A
	(iii) License number and its date of expiry.	
3.	Details of CBMWTF	:
	(i) Number healthcare facilities covered by CBMWTF	M/S ENVIRO ENGINEERS, CHARAUNTHI SANJALI SHIMLA-6
	(ii) No. of beds covered by CBMWTF	850
	(iii) Installed treatment and disposal capacity of CBMWTF	N/A Kg per day

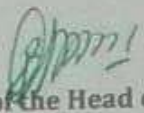
	(iv) Quantity of biomedical waste treated or disposal by CBMWTF		_____ Kg/day			
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	Yellow category:	52535.603 Kg			
		Red Category:	77650.885 Kg			
		White:	2328.957 Kg			
		Blue Category:	21367.842 Kg			
		General Solid waste	(Disposal By M.C.S. (h)mls)			
5.	Details of the Storage, treatment, transportation, processing and Disposal Facility					
(i)	Details of the on-site storage facility	Size :	N/A			
		Capacity:	N/A			
		Provision of on-site storage : (cold storage or any other provision)	N/A			
(ii)	Disposal Facilities	Type of treatment Equipment	No of Units	Capacity Kg/day	Quantity treated or disposed in Kg per Annum	
		Incinerators	NA			
		Plasma Pyrolysis	NA			
		Autoclaves	NA			
		Microwave	NA			
		Hydroclave	NA			
		Shredder				
		Needle tip cutter or destroyer	132 No			
		Sharps 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.) MS ENVIRO ENGINEERS			
(iv)	No of vehicles used for collection and transportation of biomedical waste.		MS ENVIRO ENGINEER			
(v)	Details of incineration ash and ETP sludge generated and disposal during the treatment of wastes in Kg per annum)	Quantity Generated (Kg per annum)	Where disposed			
		Incineration Ash				
		✓ ETP Sludge				



(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	M/S ENVED ENGINEERS, (MALAUNTHI) SANJAU LI SHIMLA - 6.
(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.	Yes copy Attached
7. Detail trainings conducted on BMW	15
(i) Number of training conducted on BMW Management.	450
(ii) Number of personnel trained	35
(iii) Number of personnel trained at the time of induction	.
(iv) Number of personnel not undergone any training so far.	NIL
(v) Whether standard manual for training is available?	Yes
(vi) Any other information	
B. Details of the accident occurred during the year	25
(i) Number of Accidents occurred	25
(ii) Number of the persons affected	3
(iii) Remedial Action taken (Please attach details if any)	All cases of needle stick injury, regular treatment for all the staff holder given
(iv) Any Fatality occurred, details	Sign boards are displayed N/A
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.	:	15
11.	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	:	yes
12.	Any other relevant information	:	(Air Pollution Control Device attached with the incinerator.)

Certified that the above report is for the period from January 2017 to December 2017

  
 Name and Signature of the Head of the Institution

Date:  
Place: