MAULANA AZAD INSTITUTE OF DENTAL SCIENCES

MAMC COMPLEX, BSZ MARG, NEW DELHI-110002

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No.F./18(229)/MAIDS/Estt./BMW Annual Report/1624

Date: 10 0 0 1 2 025

To

The Member Secretary,

DPCC, Department of Environment,

Govt. of NCT of Delhi,

5th Floor, ISBT Building,

Kashmiri Gate, Delhi-110006.

Subject: Filling of Annual report of Bio-Medical Waste generated in MAIDS from January 2024 to December 2024.

Sir,

Kindly find enclosed herewith the Annual Report under Bio-Medical waste generated in MAIDS for the period of January 2024 to December 2024.

This is for the information required.

(Director-Principal)

Amexure: Quantum of Biomedical waste generated from January 2024 to December 2024, MAIDS.

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)]

	T		
SI Particulars			
No. 1. Particulars of the Occupier	1		Lessba
Col all assess the property (occupied of		Dr. Arundeep Kauss	Tamba
(i) Name of the authorised person (occupation of facility)		,	
operator or memy			. a bental
WITT .		Mawana Azad Insti	tute b science
(ii) Name of HCF or CBMWTF	-	MANC CAMPUS, BSZ	MARG, NEW DELM
(iii) Address for Correspondence		Sala as above	
(iv) Address of Facility		011-23233925, 011- director maids @ 3ths	28217081
(v)Tel. No, Fax. No	-	11-13233 120/ Small	ii. com
(vi) E-mail ID	<u> </u>	www.maids.ac. 80	
(vii) URL of Website		BOE CODING INCTALL	ED ne
(viii) GPS coordinates of HCF or CBMWTF	-	BAR CODING INSTALL (State Government or Private or	CUNDER CLOVE DE LHI
(ix) Ownership of HCF or CBMWTF	1	Semi Govt, or any other) AUTONO	1000
- Die Medical	-	Authorisation DRC 11(5) LD13/2019 BM	INCT AITH 11124
(x). Status of Authorisation under the Bio-Medical	'	ORC [11(5)[D1)[20(9] 8M	William
Waste (Management and Handling) Rules		valid up to 21.1031.2	929
(xi). Status of Consents under Water Act and . Air	1:	Valid up to:	
Act			
Type of Health Care Facility	:	No of Beds 844 (Dost)	
- (i) Bodded Hospital	·	No of Beds 844 DOST C	Sport R 7
(ii) Non-bedded hospital	:		
	-	NA	
(Clinic or Blood Bank or Clinical Laboratory or			
Research Institute or Veterinary Hospital or any			,
other)		5-52390	
(iii) License number and its date of expiry		3-92910	
Details of CBMWTF	:		
(i) Number healthcare facilities covered by	;	WA	
CBMWTF		8+2 (post op) .	
(ii) No of beds covered by CBMWTF	-	847 thos. ch.	
(iii) Installed treatment and disposal capacity of	:	Kg/day & A	
CBMWTF:			
(iv) Quantity of biomedical waste treated or disposed			
by CBMWTF	<u>:</u>	Kg/day	
		Yellow Category	
Quantity of waste generated or disposed in Kg per		Red Category:	
annum (on monthly average basis)		White:	
(attached with)	- 1	Blue Category:	
		General Solid waste:	
Details of the Storage, treatment, transportation, process			
(i) Details of the Storage, treatment, transportation, process	: 0	XID FEET	
facility Capacity			
		on-site storage (cold storage or	
any othe			
I I I I I I I I I I	1	•	

disposal facilities		equipment	of units	acity Kg/ day	treatedor disposed in kg	
			units	_	-	
				day	per	
					annum	
				0	amian	
		Incinerators		4		
		Plasma Pyrolysis		1		
1		Autoclaves				
		Microwave		1		
		Hydroclave				
		Shredder			NA	
		Needle tip cutter or			• • •	
				-		
		destroyer		1		
		Sharps				
		encapsulation or		-		
,		concrete pit				
1		Deep burial pits:				
		Chemical		_		
		disinfection:				
, 1		Any other				
		treatment				
		equipment:			J	
I. I. I. a vector		Red Category (like plas	tic, glass	etc.)		
(iii) Quantity of recyclable wastes	•	Rod Category (Marie La		
sold to authorized recyclers after						
treatment in kg per annum.		04 (2 yellow 1	bago	1 .		
(iv) No of vehicles used for collection	:	04 12 yellow	ZKELI	,		
and transportation of biomedical						
waste		O When cond	roted 1			1
		Quantity Where gene disposed Incineration	Ash I	NA		
		ETP Sludge	71311			
(v) Details of incineration ash and		Ell pinage	J			
ETP sludge generated and disposed						
during the treatment of wastes in Kg						
per annum	ser' III					
	1.72	The state of the s			o buch	L+
(vi) Name of the Common Bio-:		MIS SHE WA	Her,	Orac	eprei	1
Medical Waste Treatment Facility		M112				
Operator through which wastes are						
disposed of						
(vii) List of member HCF not handed		N/A			al .	
over bio-medical waste.	-					
Do you have bio-medical waste		yes				
Management committee? If yes, attach						
minutes of the meetings held		TWICE YST				
during the reporting period.						
					-	

on BMW Management (ii) number of personnel trained	All Sanitation & Nursing S	all
the time of induction	All Home	
undergone any training so far	None	
(v) whether standard manual for training is available?	Y€5	
(vi) any other information)	L	
Details of the accident occurred during the year		
	5	
(ii) Number of the persons affected	GIVED NET	0
(iii) Remedial Action taken (Please attach details if any)		alver
(iv) Any Fatality occurred, details.		
Pollution from the incinerator? How many times in last year could not met	No (No incorporator at M	4105)
Details of Continuous online emission monitoring systems installed	A St	
Liquid waste generated and treatment	ETP at GB pant Hospital	
you have not met the standards in a year?	e shouted for Liquid wa	ste
Is the disinfection method or		
	W.Y.	
Any other relevant information	(Air Pollution Control Devices attached with the Incinerator)	
	(i) Number of trainings conducted on BMW Management (ii) number of personnel trained (iii) number of personnel trained at the time of induction (iv) number of personnel not undergone any training so far (v) whether standard manual for training is available? (vi) any other information) Details of the accident occurred during the year (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. Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards? Details of Continuous online emission monitoring systems installed Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	(ii) Number of personnel trained at the time of induction (iv) number of personnel not undergone any training so far (v) whether standard manual for training is available? (vi) any other information Details of the accident occurred during the year (i) Number of Accidents occurred (iii) Remedial Action taken (Please attach details if any) (iv) Any Fatality occurred, details. Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards? Details of Continuous online emission monitoring systems installed Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year? Is the disinfection method or instandards? How many times you have not met the standards? Any other relevant information MI CAPITATION INVITED S All HCING All

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Name and Signature of the Head of the Institution

Date: 10 | 06 | 2025 |
Place: New Della

Dr. ANNOSEP KNUK

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MAULANA AZAD INSTITUTE OF DENTAL SCIENCES AN AUTONOMOUS BODY UNDER GOVT. OF NCT OF DELHI) MAMC COMPLEX NEW DELHI-110002.

Year 2024				
Month	Yellow Bag (KG)	Red Beg (KG)	Sharp Box(KG)	
January, 2024	260	225.9	30.9	
Febuary, 2024	249.5	227.6	32.8	
March, 2024	246	247.7	42.5	
April, 2024	243.8	240.8	30	
May, 2024	182.9	173.1	39.2	
June, 2024	180	185.9	27.7	
July, 2024	205.2	200.2	49.4	
August, 2024	229.4	230.2	36.5	
September, 2024	223.3	216.9	23.8	
October, 2024	212.5	214.3	22.9	
November, 2024	232.4	226.1	34.7	
December, 2024	232.5	232.4	54.5	
- Total	2697.5 KGS	2621.1 KGS	424.9 KGS	

