

June 17, 2025

BLK/MS/2025/JUN/20

To, The Regional Officer, Bahadurgarh SCF NO. 42 & 43 Shopping Centre, Sector -06, Huda, Bahadurgarh Ph.01276-243077, (O) Email:-hspcbrobdh@gmail.com

Dear Sir.

Sub: Submission of Annual Bio-Medical Waste Report (Form-IV)

Please find enclosed the annual report (Form IV) for the period January 2024 to December 2024 of Bio-Medical Waste (including Covid Waste) maintained by the Healthcare establishment namely BLK MAX OPD Clinic at Medical Clinic, Rohtak, 1st Floor, Landmark Building Medical Mor, Rohtak, Haryana (Run By Dr. B.L. Kapur Memorial Hospital, a unit of Lahore Society)

Kindly acknowledge.

Thanking you.

Dr. Atish Sinha

Yours sincerely, For Dr. B.L. Kapur Memorial Hospital (a Unit of Lahore Hospital Society)

Dr. Atish Sinha

Medical Superintendent

Dr. B. L. Kapur Memorial Hospital Pusa Road, New Delhi-110 005

Medical Superintendent

Encls:

Annexure-1 Form IV for annual report of Bio Medical Waste

Annexure-2 Form 1 for Accident report

Annexure-3 Copy of waste generated or disposed in kg. per annum (on Monthly Average basis)

Annexure-4 Copy of Minutes of meeting

Dr. B. L. Kapur Memorial Hospital (A Unit of Lahore Hospital Society) Pusa Road, New Delhi-110 005 24-Hour Helpline: +91-11-3040 3040 E: info@blkhosnital com

Haryana State Pollution Control Book ROHTAK

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 2024 to December 2024 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 :	C. Allah Caha				
	(I) Name of the authorised person (occupier or operator of facility)	Dr. Atish Sinha Dr.B.L. Kapur Memorial Ho	ospital /POHTA	K CLINIC)		
	(ii) Name of the HCF or CBMWTF	Pusa Road, New Delhi-110	0005	ar outiloj		
	(iii) Address For Correspondence	same as above	0000			
	(iv) Address of Facility	PH:- 011-3065 3961, F- +	91-011-2575 2	885		
	(v) Tel.No, Fax.No	Info@blkhospital.com	31-011-2010-2			
	(vi) E-Mail ID	http://www.blkhospital.com	m/about-us/Con	noliances		
	(vii) URL OF Website	(State Government or priva	te or semi Gov	t, or any other) socie	ty	
	(viii) GPS Coordinates of HCF OR CBMWTF	(State Government or priva	te or semi Gov	t or any other) socie	ly	
	(ix)) Ownership of the Health Care Facility	Refer point no 3. This author	risation shall be	in force till the hospital	is opperational.	
2018	(x) Status of Authorization under the the Bio-Medical Waste (Management and Handling) Rules	No. HSPCB/BMW/2022-202	3 Dated 23/06/2	022		
	(xi) Status Of Consents Under Water Act and Air Act	Authorization No. BMW22R				
2	Type of Health Care Facility :	Number of beds. N/A	man an ann ann an an an an an an an an an			
	(I) Bedded Hospital	(Details and document su	ubmitted to DH	5)		
	(ii) Non Beded Hospital(Clinic/Blood bank or laboratory or Veterinary Hospital or any Other)	Not Applicable				
× 61.50		Applied Form				
	(iii) License Number and its Date of Expiry	Аррисотон				
3	Details of CBMWTF	6182				
1	(i) Number healthcare facilities coveredby CBMWTF	32891				
/	(ii) No. of beds covered by CBMWTF	28 ton per day				
	(iii) Installed Treatment and disposable capicity of CBMWTF	14.45 ton / day				
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	Category		BMW /Month	Covid waste/N	
			7	O.O. Many of the second	0.0 5 5 5000	
		Yellow Category		0.0	14 0.0 00	
		Red Category		0.0	00	
4	Quantity of waste generated or disposed in Kg per annum (on Monthly average basis)	White Category		0.0		
		Blue Category				
		Yellow Cytotoxic Waste				
				1	1	
5	Details of storage, treatment, transportation, processing and Disposal Facility					
.,	(I) Details of the on-site storage facility	Provision of on-site storage	Square metre	ed Bio medical waste		
		Provision) N/A				
	(ii) Disposal facilities	Type of treatment Equipements	No. of Units	Capacity kg/ day	Quantity Trea Disposed in K	
	(ii) Disposal facilities	Equipements		Capacity kg/ day	Disposed in F	
	(ii) Disposal facilities	Equipements Incinerators	Units	Capacity kg/ day	Disposed in F	
	(ii) Disposal facilities	Equipements Incinerators Plasma	Units N/A	Capacity kg/ day	Disposed in F	
	(ii) Disposal facilities	Equipements Incinerators Plasma Pyrolysis	N/A N/A N/A		Disposed in F	
	(ii) Disposal facilities	Equipements Incinerators Plasma Pyrolysis Autoclaves	N/A N/A N/A N/A	Capacity kg/ day	Disposed in h Annum	
	(ii) Disposal facilities	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave	N/A N/A N/A N/A N/A		Disposed in I	
	(ii) Disposal facilities	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave	N/A N/A N/A N/A N/A N/A		Disposed in I Annum	
	(ii) Disposal facilities	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder	N/A N/A N/A N/A N/A N/A N/A		Disposed in I	
	(ii) Disposal facilities	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr	Units N/A N/A N/A N/A N/A N/A N/A N/A N/A N/		Disposed in h Annum	
	(ii) Disposal facilities	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder	N/A N/A N/A N/A N/A N/A N/A		Disposed in h Annum	
	(ii) Disposal facilities	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr	Units N/A N/A N/A N/A N/A N/A N/A N/A N/A N/		Disposed in h Annum	
	(ii) Disposal facilities	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr Sharp encapsulation or Concrete Pit Deep burial pits	Units N/A N/A N/A N/A N/A N/A N/A N/A N/A N/		Disposed in I	
	(ii) Disposal facilities	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr Sharp encapsulation or Concrete Pit Deep burial pits Chemcial disinfection	Units N/A N/A N/A N/A N/A N/A N/A N/		Disposed in I Annum	
	(ii) Disposal facilities	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr Sharp encapsulation or Concrete Pit Deep burial pits Chemcial disinfection. Any other treatment	Units N/A N/A N/A N/A N/A N/A N/A N/	N/A	Disposed in I Annum	
		Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr Sharp encapsulation or Concrete Pit Deep burial pits Chemcial disinfection Any other treatment equipment:	Units N/A N/A N/A N/A N/A N/A N/A N/	N/A N/A N/A Applicable (Dispo	Disposed in I Annum	
	(iii) Quantity of recyclable wastes sold to authorized recycler after treatment in Kg per annum	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr Sharp encapsulation or Concrete Pit Deep burial pits Chemcial disinfection Any other treatment equipment:	Units N/A N/A N/A N/A N/A N/A N/A N/	N/A N/A N/A Applicable (Dispo	Disposed in Annum N/A N/A	
		Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr Sharp encapsulation or Concrete Pit Deep burial pits Chemcial disinfection. Any other treatment	Units N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A N/A N/A Applicable (Dispo	Disposed in Annum N/A N/A	
	(iii) Quantity of recyclable wastes sold to authorized recycler after treatment in Kg per annum	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr Sharp encapsulation or Concrete Pit Deep burial pits Chemcial disinfection Any other treatment equipment:	Units N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A N/A N/A Applicable (Dispo	Disposed in I Annum	
	(iii) Quantity of recyclable wastes sold to authorized recycler after treatment in Kg per annum	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr Sharp encapsulation or Concrete Pit Deep burial pits Chemcial disinfection Any other treatment equipment: Red Category (like plastic	Units N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A N/A N/A Applicable (Dispo	Disposed in It Annum N/A N/A	
	(iii) Quantity of recyclable wastes sold to authorized recycler after treatment in Kg per annum (iv) No. of vehicles used for collection and transportation of Biomedical waste :	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr Sharp encapsulation or Concrete Pit Deep burial pits Chemcial disinfection Any other treatment equipment: Red Category (like plastic 05{ CLOSE BODY VEHIII Incineration	Units N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A N/A N/A Applicable (Dispo	Disposed in I Annum	
	(iii) Quantity of recyclable wastes sold to authorized recycler after treatment in Kg per annum (iv) No. of vehicles used for collection and transportation of Biomedical waste : (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of waste in:	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr Sharp encapsulation or Concrete Pit Deep burial pits Chemcial disinfection. Any other treatment equipment: Red Category (like plastic 05{ CLOSE BODY VEHI	Units N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A St Applicable (Disposed Proposed P	Disposed in I Annum N/A N/A sed to BMW) NON FROM BL	
	(iii) Quantity of recyclable wastes sold to authorized recycler after treatment in Kg per annum (iv) No. of vehicles used for collection and transportation of Biomedical waste :	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr Sharp encapsulation or Concrete Pit Deep burial pits Chemcial disinfection Any other treatment equipment: Red Category (like plastic 05{ CLOSE BODY VEHIII Incineration	Units N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A N/A N/A Applicable (Dispo	Disposed in I Annum N/A N/A sed to BMW) NON FROM BL	
	(iii) Quantity of recyclable wastes sold to authorized recycler after treatment in Kg per annum (iv) No. of vehicles used for collection and transportation of Biomedical waste : (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of waste in:	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr Sharp encapsulation or Concrete Pit Deep burial pits Chemcial disinfection. Any other treatment equipment: Red Category (like plastic 05{ CLOSE BODY VEHI	Units N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A N/A Applicable (Disported For Collect Where Disposed e IN BMW as per the	Disposed in Mannum N/A N/A sed to BMW) TON FROM BLi se guidelines 201	
	(iii) Quantity of recyclable wastes sold to authorized recycler after treatment in Kg per annum (iv) No. of vehicles used for collection and transportation of Biomedical waste (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of waste in Kg per annum	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr Sharp encapsulation or Concrete Pit Deep burial pits Chemcial disinfection Any other treatment equipment: Red Category (like plastic 05{ CLOSE BODY VEHI Incineration Ash STP Sludge M/s SD Bio Medical Was	Units N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A N/A Applicable (Disported For Collect Where Disposed e IN BMW as per the	Disposed in Mannum N/A N/A sed to BMW) TON FROM BLi se guidelines 201	
	(iii) Quantity of recyclable wastes sold to authorized recycler after treatment in Kg per annum (iv) No. of vehicles used for collection and transportation of Biomedical waste : (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of waste in Kg per annum : (vi) Name of the Common Bio-medical Waste Treatment Facility Operator through which waste are	Equipements Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destr Sharp encapsulation or Concrete Pit Deep burial pits Chemcial disinfection Any other treatment equipment: Red Category (like plastic 05[CLOSE BODY VEHI Incineration Ash STP Sludge	Units N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A N/A Applicable (Disported For Collect Where Disposed e IN BMW as per the	Disposed in Mannum N/A N/A sed to BMW) TON FROM BLi se guidelines 201	

	training conducted on BMW		SECRECATION DISCOUNT & TRANSPORT			
	Aumber of Trainings conducted on bio medical waste management Numbers of personnel trained		SEGREGATION, DISPOSAL & TRANSPORTATION			
	Trumbers of personnel trained	:				
	(ii) Numbers of Personnel trained at the time of induction					
	(iv) Numbers of personnel not undergone any training so far		NIL			
1/	(v) Whether standard manaual for training is available? (vi) Any other information		YES			
1	Details of accidents occurred during the year	:	Not Applicable			
1	(i) Numbers of accident occurred	:	Discarding sharps			
- 15	(ii) Numbers of the person affected	:				
1	(iii) Remedial action taken(Pls. attached details if any)		None			
	(iv) Any Fatality occurred details		Injection T.T after injury and Injection Hep.B & ART started as per the standard			
9	Are you meeting the standards of air pollution from the incinerator? How Many times in last Year could not the standards?		Nothing Occurred			
9			Not Applicable			
	Details of continous online emission monitering systems installed					
10	Liquid wate generated and treatment methods in place. How many times was be-		Not Applicable			
			YES (meeting the standards)			
11	Is the disinfection method or sterlization meeting the log 4 standards? How many times you have not the standards in a year?		The standards)			
40			YES (meeting the standards)			
12	Any other relevant information					
ser inted t	that the above report is the period from January 2024 to December 2024	nan-pale-street	(Air pollution control devices attached with the incinerator) Not Applicable			

Date 17.06.2024 Place New Delhi de.

Name and Signature of the Head of the Institution Dr. Atish Sinha Medical Superintendent

Dr. Atish Sinha Medical Superintendent Dr. B. L. Kapur Memorial Hospital Pusa Road, New Delhi-110 005

		QUANTITY OF BIO MEDICAL WASTE HANDLED, TREATED AND DISPOSED/ DAY- 0.13 KG/ DAY	annrowed	approved BY	Average	TOTAL	December	November	October	September	August	Alut	June	May	April	March	Februray	Yennuek		Month
	TY OF BIO L WASTE , TREATED SEED/ DAY=	BY DOCC		366	31	8	11	8	n n	16	8	31	8	116	28	31		No of Days		
			0	0	0	0		•	0	0	0	0	0		0	0	No. of bag	Yella		
	0.13KG/ DAY	0.00	0.00	0	0	0	0			0	0	0	0	0	۰		Weight	Yellow Waste		
		1.	0	0		0	0	0	0	0	0	0	0	0	0	•	No. of bag	Yellow W		
	•	0.00	0	0	0	0	0	0		0	0	0	0	0	0	0	Weight	Yellow Waste (covid)		
			0	0	0	0	0	0	0	0	0	0	0	0		0	No. of beg	Blue Pu Co		
	0.13KG/DAY	0.00	0.00	0	0	0		0	0	0	0	0	0	0	0	0	Weight	Blue Puncture Proof Container		
			0	0	0	0	٥	0	۰	•	0	0	0		0	0	No. of bag	Blue pun		
		0.00	0	0		0	٥		0	0	0	0	0	0	0	٥	Weight	Blue puncture proof (covid)		
			0	0	0	0	0	0	0	0	0	0	0	0	0	0	No. of bag	oof Red Waste		
	0.13 KG/ DAY	0.00	0.00	0	0	0	۰	o	0	0	0	0	0	0	0	0	Weight	Red Waste		
			0	0	0	0	o	٥	o	0	0	0	0	٥	0	0	No. of bag	Red Was		
		0.00	0.00	0	0	0	0	0	0	·	0	0	0	0	0	0	Weight	Red Waste (Covid)		
			0	0	0	0	٥	0	٥	٥	o	0	0	0	0	0	No. of bag	White Pun Cont		
	2	0.00	0.00	0	o	0	0	•	0	0	0	0	0	0	0	0	Weight	White Puncture Proof Container		
			0	0	0	٥	0	•	0	o	o	0	0	0	0	0	No. of bag	White Pun Contains		
		0.00	9	0	0	0	0	.0	0	0	0	0	0	٥	0	0	Weight	White Puncture Proof Container (Covid)		
			0.00	0	0	0	0	0	0	0	0	0	0	0	0	•	No. of bag	Yellow (
		0.00	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Weight	Yellow Cytotoxic Waste		
		0.00	0.00	0	0	0	0		0	0	0	0	0	0	0	۰	No. of bag	Yellow (Waste		
		0.00	0.00	0	٥		0	0	0	0	0	0	0	0	0	0	Weight	Yellow Cytotoxic Waste (Covid)		

Yearly Bio-Medical Waste Report January 2024 to December - 2024

ROHTAK CLINIC ANNUAL REPORT FOR GENERAL WASTE OF YEAR 2024

(JANUARY 2024 TO DECEMBER 2024)

Sl.no	No. of Days	Month	General waste Kg.	General waste Kg./day			
1	31	January	0	0.00			
2	29	Febuary	0	0.00			
3	. 31	March	0	0.00			
4	30	April	0	0.00			
5	31	May	0	0.00			
6	30	June	0	٥.00			
7	31	July	0	0.00			
8	31	August	0.0	0.00			
9	30	September	0	0.00			
10	31	October	0	0.00			
11	30	November	0	0.00			
12	31	December	0	0.00			
OTAL	366		0.0				
/erage/m	onth		0.00				

FORM I

[(See rules 4(o), 5(i) and 15(2)] ACCIDENT REPORTING

-		
1	Date and time of accident	N/A
2	Type of Accident	N/A
3	Sequence of events leading to accident	N/A
4	Has the Authority been informed immediately	N/A
5	The type of waste involved in accident	N/A
6	Assesssment of the effects of the accidents on human and health and the environment	N/A
7	Emergency measures taken	N/A
	Steps taken to alleviate the effects accidents	N/A
	Steps taken to prevent the recurrence of such an accident	N/A
.0	Does your facility has an Emergency Control policy ? If yes, give details	N/A

Signature

Name

: Mr. Jitender Kumar Sharma

Designation: Head-Hospital Operations

Date: 17/6/25