



INDIRA GANDHI MEDICAL COLLEGE & RESEARCH INSTITUTE

(Government of Puducherry Institution)

Vazhuthavur Road, Kathirkamam, Puducherry – 605 009

☎ 0413-2277545, Extn: 3123 / Email: bmwigmcri2020@gmail.com

BIOMEDICAL WASTE MANAGEMENT COMMITTEE

No. **4295**/BMW (Com. Med)/IGMC&RI /2025

Date: **06/02/2025**

From

Dr. Prakash. M
Nodal Officer (i/c), BMW Committee,
Associate Professor, Community Medicine,
IGMCRI, Puducherry

To

The Member Secretary
Puducherry Pollution Control Committee,
Department of Science, Technology & Environment,
III Floor, PHB Building,
Anna Nagar, Puducherry

//Through The Director, IGMC&RI//

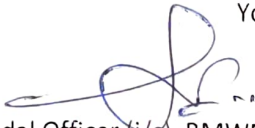
Respected Sir/Madam,

Sub:- Submission of Bio-medical waste Annual report 2024- reg.,

This is to inform you that Bio-medical waste Annual report in form -IV and Accident report in form -I for the year 2024 of Indira Gandhi Medical College & Research Institute is attached herewith for your kind perusal & necessary action.

Thanking You,

Yours Sincerely,


(Nodal Officer (i/c), BMW Committee)
NODAL OFFICER
Biomedical Waste Management Committee
Indira Gandhi Medical College
& Research Institute,
Kathirkamam, Puducherry - 605 009.

Enclosures:

1. Form IV (Annual Report)
2. Form I (Accident Report)

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	Remarks	
1	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	Director IGMCRI, Puducherry
	(ii) Name of HCF orCBMWTF	:	Indira Gandhi Medical College and Research Institute
	(iii) Address for Correspondence	:	Vazhudavur road, Kathirkamam. Puducherry-605009.
	(iv) Address of Facility	:	Same as above
	(v)Tel. No, Fax. No	:	0413-2274552, +91-0413-2277289
	(vi) E-mail ID	:	<u>puducherrymedicalcollege@gmail.com</u> & <u>igmcri.py@gov.in</u>
	(vii) URL of Website	:	www.igmcri.com
	(viii) GPS coordinates of HCF or CBMWTF	:	CBMWTF
	(ix) Ownership of HCF or CBMWTF	:	State Government
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: 440746/2024/26/08/2024.....valid up to 31/5/2027
(xi). Status of Consents under Water Act and Air Act	:	Valid up to:	
2	Type of Health Care Facility	:	Tertiary care hospital
	(i) Bedded Hospital	:	No. of Beds: 750
	(ii) Non-bedded hospital (Clinic or BloodBankor Clinical Laboratory or Research Institute or Veterinary Hospital orany other)	:	NA
	(iii) License number and its date of expiry	:	NA
3	Details of CBMWTF	:	NA
	(i) Number healthcare facilities covered by CBMWTF	:	
	(ii) No of beds covered by CBMWTF	:	
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	Kg perday
(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	Kg/day	
4	Quantity of waste generated or disposed in Kg per annum.	:	Yellow Category: 48047Kg /annum
		:	Red Category: 45882 kg/annum
		:	White: 4024 kg/annum
		:	Blue Category: 5456kg/annum
		:	General Solid waste: 1,08,566 kg/ annum

5	Details of the Storage, treatment, transportation, processing and Disposal Facility																					
	(i) Details of the on-site storage facility	:	Size : (10*10*11)*3																			
		:	Capacity : 250 kg																			
		:	Provision of on-site storage : (cold storage or any other provision)																			
	disposal facilities	:	<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity of Kg / day</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td rowspan="7">}</td> <td rowspan="7">}</td> <td rowspan="7">}</td> </tr> <tr> <td>Plasma Pyrolysis</td> </tr> <tr> <td>Autoclaves Microwave</td> </tr> <tr> <td>Hydroclave Handled by Shredder</td> </tr> <tr> <td>Needle tip cutter or destroyer</td> </tr> <tr> <td>Sharps encapsulation or concrete pit</td> </tr> <tr> <td>Deep burial pits:</td> </tr> <tr> <td>Chemical disinfection:</td> <td rowspan="2">}</td> <td rowspan="2">}</td> <td rowspan="2">}</td> </tr> <tr> <td>Any other treatment equipment:</td> </tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity of Kg / day	Quantity treated or disposed in kg per annum	Incinerators	}	}	}	Plasma Pyrolysis	Autoclaves Microwave	Hydroclave Handled by Shredder	Needle tip cutter or destroyer	Sharps encapsulation or concrete pit	Deep burial pits:	Chemical disinfection:	}	}	}	Any other treatment equipment:
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Any other treatment equipment:																						
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.)																				
(iv) No of vehicles used for collection and transportation of biomedical waste	:	Handled by CBMWTF Transport done by CBMWTF																				
(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 ETP Sludge - Under processing																				
(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	Pondicherry solid waste management company private limited. Thuthipet. Villianur commune. Puducherry																				
(vii) List of member HCF not handed over bio-medical waste.	:	Nil																				
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	:	Yes																			
7	Details trainings conducted on BMW																					
	(i) Number of trainings conducted on BMW Management.	:	10																			
	(ii) number of personnel trained	:	20 Per Batch																			
	(iii) number of personnel trained at the time of induction	:	10																			
	(iv) number of personnel Not undergone any training so far	:	-																			
	(v) whether standard manual for training is available?	:	IEC materials (posters)																			
(vi) any other information)	:																					

8	Details of the accident occurred during the year		Nil
	(i) Number of Accidents occurred		Nil
	(ii) Number of the persons affected		Nil
	(iii) Remedial Action taken (Please attach details if any)		Nil
	(iv) Any Fatality occurred, details.		Nil
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. How many times you have not met the standards in a year?		STP (under PWD)
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		NA
12	Any other relevant information	:	Nil

Certified that the above report is for the period from Jan 2024 to Dec 2024.

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Name and Signature of the Head of the Institution

Date: 06.02.2025
Place: Puducherry

Dr. C. UDAYASHANKAR
DIRECTOR
INDIRA GANDHI MEDICAL COLLEGE
AND RESEARCH INSTITUTE
PUDUCHERRY - 605 007.

FORM - I
[(See rule 4(0), 5(1) and 15 (2))]
ACCIDENT REPORTING

1. Date and time of Accident:
2. Type of Accident:
3. Sequence of events leading to accident:
4. Has the Authority been informed immediately:
5. The type of waste involved in accident:
6. Assessment of the effects of the accidents on human health and the environment:
7. Emergency measures taken:
8. Steps taken to alleviate the effects of accidents:
9. Steps taken to prevent the recurrence of such an accident:
10. Does your facility have an Emergency Control Policy? If yes give details:

} Nil

Date: 06.02.2025
Place: Puducherry

Signature: 
Designation:

Dr. C. UDAYASHANKAR
DIRECTOR
INDIRA GANDHI MEDICAL COLLEGE
AND RESEARCH INSTITUTE
PUDUCHERRY - 605 009.