



Date: 23/01/2026
Place : Puducherry

From

Dr. Prakash M
Nodal Officer, BMWM Committee
Associate Professor, Community Medicine
IGMCRI, Puducherry

To

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



23/1/26

//Through The Director, IGMCRI//

Respected Sir/Madam

Sub: Submission of Bio-medical waste Annual report 2025 reg.,

This is to inform you that the Biomedical waste annual report in form –IV and accident report in form –I for the year 2025 of Indira Gandhi Medical College and Research Institute is attached herewith for your kind perusal and necessary action.

Thanking You

Yours Sincerely,

Dr. Prakash.M

23/1/2026

(Nodal Officer, BMWM Committee)

NODAL OFFICER
Biomedical Waste Management Committee
Indira Gandhi Medical College
& Research Institute,
Kathirkamam, Puducherry - 605 008.

For used
M. S. S.
23/1/2026
PROFESSOR
Department of Community Medicine
Indira Gandhi Medical College
& Research Institute,
PUDUCHERRY - 605 008.

Form - IV
(See rule 13)
ANNUAL REPORT

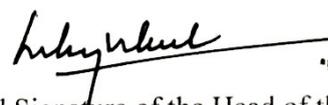
[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

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	:	puducherrymedicalcollege@gmail.com & igmcri.py@gov.in
	(vii) URL of Website	:	www.igmcri.com
	(viii) GPS coordinates of HCF or 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/PPCC/AUTHO/JSA(PPCC)/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: 38,163Kg /annum
		:	Red Category: 37,497 kg/annum
		:	White: 4,061 kg/annum
		:	Blue Category: 5,934kg/annum
		:	General Solid waste: 81,995kg/ annum

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?		Effluent Treatment Plant is established and the standards have been met every time when checked by Pollution Control Board
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 2025 to Dec 2025.

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Name and Signature of the Head of the Institution

Date: 23-01-2026
Place: Puducherry

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

FORM - I
[(See rule 4(o), 5(i) 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 you facility has an Emergency Control policy? If yes give details:

NIL

Date : 23-01-2026
Place : PUDUCHERRY

Signature .. 
Designation

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