

**MAULANA AZAD INSTITUTE OF DENTAL SCIENCES**  
MAMC COMPLEX, BSZ MARG, NEW DELHI-110002

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No. F. MAIDS/1837

To,

Date: 29.06.2019

**The Member Secretary**  
Delhi Pollution Control Committee  
Department of Environment  
Govt. of NCT of Delhi  
4<sup>th</sup> Floor, ISBT Building  
Kashmere Gate, Delhi- 110006

**Subject: Filing of Annual Report of Bio-Medical Waste generated in MAIDS**

Kindly find enclosed herewith the Annual Report under Bio-Medical Waste generated in MAIDS for the period of 1<sup>st</sup> July, 2018 to 29<sup>th</sup> June, 2019.

**Annexure:** Quantum of Bio-medical waste generated from July 2018 - June 2019, MAIDS.

Thanking You,

Your's Faithfully



**Prof. (Dr.) Mahesh Verma**

Director Principal

MAIDS, New Delhi - 02

**Dr. MAHESH VERMA**

Director - Principal

Maulana Azad Institute of Dental Sciences  
New Delhi-110002

## FORM IV: ANNUAL REPORT

S. No.	Particulars	
1.	<b>Particulars of Occupier</b>	
I.	Name of Authorized person (Occupier of Operator)	PROF (DR) MAJESH VERMA DIRECTOR - PRINCIPAL
II.	Name of HCF of CBMWTF:	Maulana Azad Institute of Dental Sciences (MAIDS)
III.	Address for Correspondence:	MAIDS, MIAMC complex, B22 Marg, H Delhi 110002.
IV.	Address of Facility	Same as above.
V.	Tel. No, Fax No:	011-23233925, 011-23217051
VI.	E-mail ID:	dpmaids@gmail.com
VII.	URL of Website:	www.maids.ac.in
VIII.	GPS coordinates of HCF or CBMWTF	In process
IX.	Ownership of HCF or CBMWTF	Autonomous (Under Govt of NCT, Delhi)
X.	Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	Applied in DPOC for the same with application no. 556835
XI.	Status of Consents under Water Act and Air Act	Report received on 01-04-2019 & is valid for 3yrs
2.	<b>Type of Health Care Facility</b>	
I.	Bedded Hospital:	No. of Beds: 8+2 (Post operative)
II.	Non-bedded health care facility (Clinic or Blood Bank or Clinical Laboratory or Research Institute Or Veterinary Hospital or any other)	NA
III.	License number and its date of expiry	S-52390
3.	<b>Details of CBMWTF</b>	
I.	Number healthcare facilities Covered by CBMWTF	NA
II.	No. of beds covered by CBMWTF:	NA
III.	Installed treatment and disposal Capacity of CBMWTF	NA .....kg/day
IV.	Quantity of biomedical waste Treated or disposed by CBMWTF	NA .....kg/day

4.	Quantity of waste generated or Disposed in Kg per annum (on monthly average basis) (July 2018 to June, 2019)	Category	Quantity(kg/annum)	
		Yellow	1465 Kgs	
		Red	2930 Kgs	
		Blue	889 Kgs	
		White		
		General Solid Waste	-	
5.	Details of the Storage, treatment, transportation, processing and disposal Facility			
	I. Details of On Site Storage	Size: NA		
		Capacity: NA		
		Provision for Onsite Storage (Cold Storage or any other provision): NA		
	II. Details of Onsite Disposal Facility	Type of Treatment Equipment	No. of Units	Capacity kg/day
		Incinerators	NA	NA
		Plasma Pyrolysis	NA	NA
		Autoclaves	NA	NA
		Microwave	NA	NA
		Hydroclave	NA	NA
		Shredder	NA	NA
		Needle tip cutter of destroyer	NA	NA
		Sharps encapsulation or concrete pit	NA	NA
		Deep Burial pits	NA	NA
		Chemical disinfection	NA	NA
		Any other equipment used for treatment	NA	NA
	III. Quantity of recyclable waste Sold to authorized recyclers After treatment in kg per Annum.	Red Category (like plastic, glass etc.) NA		

	IV. No of vehicles used for Collection and transportation Of biomedical waste	NA		
	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	NA	NA
		Ash	NA	NA
		ETP Sludge	NA	NA
	VI. Name of the Common Bio-Medical Waste Treatment Facility Operator through Which wastes are disposed of	M/S SMS Water Grace		
	VII. List of member IICF not Handed over bio-medical Waste	NA		
6.	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	Yes		
7	<b>Details of Training conducted on BMW</b>			
	I. Number of trainings conducted on	10-15		
	II. BMW Management			
	III. Number of personnel trained	All		
	IV. Number of personnel trained At the time of induction	All		
	V. Number of personnel not Undergone any training so Far	None		
	VI. Whether standard manual for Training is available?	Yes		
	VII. Any other Information	NA		
8.	Details of Accident Occurred			
	I. Number of Accidents occurred	11 (Needle stick injury) } Record is maintained		
	II. Number of the persons affected	11 } by Nursing Offices Mysore		
	III. Remedial Action taken (Please attach details if any)	Yes (1: IT Injection) (2: Screening for Hep B, C, HIV - found negative)		
	IV. Any fatality occurred, details	No		
9.	Are you meeting the standards of air Pollution from the incinerator?	NA (since no incinerator in MAIDS)		

	How many times in last year	NA
	Could not meet 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?	ETP of GB Pant Hospital is shared for liquid waste
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	(Air pollution Control Devices attached with the Incinerator) NA

*Khushboo Singh*  
 CDR (KHUSHBOO SINGH)  
 Member, BMW, MAIDS

Certified that above report is for the period from

..... JULY, 2018 TO JUNE, 2019 .....

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Name and Signature of Head of Institution  
**DR. MAHESH VERMA**  
 Director - Principal  
 Maulana Azad Institute of Dental Sciences  
 New Delhi-110002

Date:- 29-06-2019

Place: New Delhi

JULY 2018 to JUNE, 2019

DATE	RED BEG KGS	YELLOW BEG KGS	SHARP BOX KGS
Jul-18	246	127	106
Aug-18	217	138	98
Sep-18	255	111	89
Oct-18	239	128	78
Nov-18	221	103	61
Dec-18	230	120	73
Jan-19	308	140	82
Feb-19	244	122	67
Mar-19	216	108	65
Apr-19	238	126	25
May-19	245	114	60
Jun-19	271	128	85

G. TOTAL 2930 KGS 1465 KGS 889 KGS

Sanitation Sup.

Chandra