

**FORM IV (See rule 13)**  
**ANNUAL REPORT**  
**JANUARY 2025 TO DECEMBER 2025**

(To be submitted to the prescribed authority on or before 30<sup>th</sup> 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))

| S. No. | Particulars                                                                                   |                                                                                                                                                                                                   |
|--------|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1.     | Particulars of the occupier:                                                                  |                                                                                                                                                                                                   |
|        | (i) Name of the authorized person (occupier)                                                  | Dr. Seema Rai, HOD<br>Dr. Mohit Mathur, D.M.S                                                                                                                                                     |
|        | (ii) Name of the HCF:                                                                         | NEHRU HOMOEOPATHIC MEDICAL COLLEGE AND HOSPITAL                                                                                                                                                   |
|        | (iii) Address for correspondence:                                                             | B BLOCK DEFENCE COLONY, NEW DELHI-110024                                                                                                                                                          |
|        | (iv) Address of facility:                                                                     | B BLOCK DEFENCE COLONY, NEW DELHI-110024                                                                                                                                                          |
|        | (v) Tel. No., Fax. No.                                                                        | 011-24331193, 011-24330803                                                                                                                                                                        |
|        | (vi) E-mail ID                                                                                | principalnhmc@gmail.com                                                                                                                                                                           |
|        | (vii) URL of website                                                                          | www.nhmc.delhigovt.nic.in                                                                                                                                                                         |
|        | (viii) GPS coordinates with HCF                                                               | -                                                                                                                                                                                                 |
|        | (ix) Ownership of HCF or CBMWTF                                                               | State Government/ GNCT of Delhi                                                                                                                                                                   |
|        | (x) Status of authorization under the Bio- Medical Waste (Management and Handling) Rules      | AUTHORISATION NUMBER<br>DPCC/(11)(5)(01)/2023/BMW/NST/AUTH/71929<br>044K,<br>VALID UPTO- 06/07/2027                                                                                               |
|        | (xi) Status of consent under water Act                                                        | ETP under construction                                                                                                                                                                            |
| 2.     | Type of health care Facility                                                                  | Homoeopathic Medical college & hospital                                                                                                                                                           |
|        | (i) Bedded hospital                                                                           | 100                                                                                                                                                                                               |
|        | Non-bedded hospital, clinic or blood bank or Research Institute or Veterinary Hospital/other) | N/A                                                                                                                                                                                               |
|        | (ii) license number and its date of expiry                                                    | UNDER GOVT. OF NCT OF DELHI                                                                                                                                                                       |
| 3      | Details of CBMWTF                                                                             | N/A                                                                                                                                                                                               |
| 4      | Quantity of waste generated or disposed in kg per annum                                       | January 2025-December 2025<br>Yellow Category: 46.212 Kg<br>Red Category: 349.342 Kg<br>White: 15.322Kg<br>Blue Category: 22.198 Kg<br>Fluid for ETP: 292.145 Kg<br>General Solid Waste: 22549 Kg |
| 5      | Details of storage, treatment,                                                                |                                                                                                                                                                                                   |

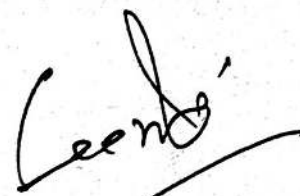
|                                                                                                                                                                                                                                | transportation, process and disposal                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                       |             |                    |                                       |                                                                                               |   |         |                     |                                                                                                                                                                                                                                |  |                          |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-------------|--------------------|---------------------------------------|-----------------------------------------------------------------------------------------------|---|---------|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------|--|
|                                                                                                                                                                                                                                | (i) Details of on-site storage facility                                                               | SIZE=12*10 FEET(APPROX)<br>Capacity-more than sufficient foe waste generated.<br>Provision of on site storage(cold storage or any other provision):No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                       |             |                    |                                       |                                                                                               |   |         |                     |                                                                                                                                                                                                                                |  |                          |  |
|                                                                                                                                                                                                                                | (ii) Details of the treatment or disposal facilities                                                  | <table><tr><th>Type of treatment</th><th>No. Of Unit</th><th>Capacity IN Kg/day</th><th>Quantity Treated or disposed kg/annum</th></tr><tr><td>Incinerators -<br/>Plasma Pyrolysis -<br/>Autoclaves ( 78 Lt capacity )<br/>Installed in opd lab</td><td>1</td><td>1kg/day</td><td>350kg/ annum approx</td></tr><tr><td>Microwave -<br/>Hydroclave-<br/>Shredder -<br/>Needle tip cutter or destroyer<br/>Sharps<br/>Encapsulation or<br/>Concrete pit deep<br/>Burial pits<br/>Chemical disinfection – pretreatment of liquid waste with hypochlorite is done</td><td></td><td>8<br/><br/><br/><br/><br/>Nil</td><td></td></tr></table> | Type of treatment                     | No. Of Unit | Capacity IN Kg/day | Quantity Treated or disposed kg/annum | Incinerators -<br>Plasma Pyrolysis -<br>Autoclaves ( 78 Lt capacity )<br>Installed in opd lab | 1 | 1kg/day | 350kg/ annum approx | Microwave -<br>Hydroclave-<br>Shredder -<br>Needle tip cutter or destroyer<br>Sharps<br>Encapsulation or<br>Concrete pit deep<br>Burial pits<br>Chemical disinfection – pretreatment of liquid waste with hypochlorite is done |  | 8<br><br><br><br><br>Nil |  |
| Type of treatment                                                                                                                                                                                                              | No. Of Unit                                                                                           | Capacity IN Kg/day                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Quantity Treated or disposed kg/annum |             |                    |                                       |                                                                                               |   |         |                     |                                                                                                                                                                                                                                |  |                          |  |
| Incinerators -<br>Plasma Pyrolysis -<br>Autoclaves ( 78 Lt capacity )<br>Installed in opd lab                                                                                                                                  | 1                                                                                                     | 1kg/day                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 350kg/ annum approx                   |             |                    |                                       |                                                                                               |   |         |                     |                                                                                                                                                                                                                                |  |                          |  |
| Microwave -<br>Hydroclave-<br>Shredder -<br>Needle tip cutter or destroyer<br>Sharps<br>Encapsulation or<br>Concrete pit deep<br>Burial pits<br>Chemical disinfection – pretreatment of liquid waste with hypochlorite is done |                                                                                                       | 8<br><br><br><br><br>Nil                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |             |                    |                                       |                                                                                               |   |         |                     |                                                                                                                                                                                                                                |  |                          |  |
|                                                                                                                                                                                                                                | (iii) Quantity of recyclable waste sold to authorized recycle                                         | NA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                       |             |                    |                                       |                                                                                               |   |         |                     |                                                                                                                                                                                                                                |  |                          |  |
|                                                                                                                                                                                                                                | (iv) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes | Not applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                       |             |                    |                                       |                                                                                               |   |         |                     |                                                                                                                                                                                                                                |  |                          |  |
|                                                                                                                                                                                                                                | (v) Name of common Bio medical waste treatment facility operator through which waste are disposed     | Biotic Waste Solution pvt. Ltd.<br>Plot 46-47 SSI Industrial Area, GT Karnal Road, Delhi-110033                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                       |             |                    |                                       |                                                                                               |   |         |                     |                                                                                                                                                                                                                                |  |                          |  |
|                                                                                                                                                                                                                                | (vi) List of member HCF not handed over biomedical waste                                              | Not applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                       |             |                    |                                       |                                                                                               |   |         |                     |                                                                                                                                                                                                                                |  |                          |  |
| 6.                                                                                                                                                                                                                             | Do you have BIOMEDICAL Waste Management Committee? If yes, attach minutes of meeting held during      | Yes,<br><br>minutes attached                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                       |             |                    |                                       |                                                                                               |   |         |                     |                                                                                                                                                                                                                                |  |                          |  |

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|    | the reporting period                                                                                                             |                                                                                |
| 7. | Details of training conducted on BMW                                                                                             |                                                                                |
|    | (i) Number of training conducted on BMW                                                                                          | 06                                                                             |
|    | (ii) Number of persons trained                                                                                                   | 216                                                                            |
|    | (iii) Number of persons trained at the time of induction                                                                         | 121                                                                            |
|    | (iv) Number of person not undergone any training so far                                                                          | NIL                                                                            |
|    | (i) Whether standard manual for training available                                                                               | YES                                                                            |
| 8. | Details of accident occurred during the year                                                                                     | Nil                                                                            |
|    | Number of accidents occurred                                                                                                     | Nil                                                                            |
|    | Number of person affected                                                                                                        | Nil                                                                            |
|    | Remedial action taken (please attach detail if any)                                                                              | -                                                                              |
|    | Any fatality occurred, details                                                                                                   |                                                                                |
|    | Are you meeting the standard of air pollution from the incineration/How many times                                               | NA                                                                             |
|    | Details of continuous online emission monitoring system installed                                                                | NA                                                                             |
|    | Liquid waste generated and treatment method in place. How many times you have not met the standard in a year                     | Infectious liquid waste pre treated with hypochlorite and handed over to CBWTF |
|    | Is the disinfection method or sterilization meeting the log 4 standard?/ How many times you have not met the standards in a year | Disinfection done with hypochlorite                                            |
|    | Any other relevant information                                                                                                   | -                                                                              |

Certified that the above report is for the period from January 2025 to December 2025

Date: 08-01-2026

Place: NMMC Hospital  
New Delhi



Name and Signature of the Head of Institution