



**OFFICE OF THE MEDICAL SUPERINTENDENT GOVT. RAJIV GANDHI HOSPITAL  
GANGYAL JAMMU.**

**E-mail [medicalsuperintendentrgjh@gmail.com](mailto:medicalsuperintendentrgjh@gmail.com)**

To  
The Incharge PCB,  
Jammu.

No:-RGH/J/ 1376-77

Date:- 26-03-2024

Subject:-Submission of Annual Biomedical waste report of RGH for the year 2023-24.

R/Sir,

In reference to the subject cited above, kindly find enclosed herewith the annual biomedical waste report for the year 2023-24.

This is for your kind information and futher necessary action please.

Yours faithfully,

Medical Superintendent  
Govt. Rajiv Gandhi Hospital & RPU  
Gangyal Jammu.

**Copy to:-**

1. Director Health Services, Jammu for kind information.
2. Office copy.

**Form - IV  
(See rule 13)  
ANNUAL REPORT**

[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)]

Sl. No.	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	Medical Superintendent
	(ii) Name of HCF or CBMWTF	:	Gout. Rajiv Gandhi Hospital, Gangga
	(iii) Address for Correspondence	:	Pin 180010
	(iv) Address of Facility	:	
	(v) Tel. No, Fax. No	:	0191 2400316
	(vi) E-mail ID	:	medicalsuperintendent@ghj@gmail.com
	(vii) URL of Website	:	www.ghjammu.co.in
	(viii) GPS coordinates of HCF or CBMWTF	:	Lat 32.692912° Long 74.857584°
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation applied No.: App. No. (422315) .....valid up to .....
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: November 2024
2.	Type of Health Care Facility	:	CHC
	(i) Bedded Hospital	:	No. of Beds:..... 08
	(ii) Non-bedded hospital	:	
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	N/A
	(iii) License number and its date of expiry	:	-
3.	Details of CBMWTF	:	-
	(i) Number healthcare facilities covered by CBMWTF	:	-
	(ii) No of beds covered by CBMWTF	:	-
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	_____ Kg per day

	(iv) Quantity of biomedical waste treated or disposed by CBMWTF :	_____ Kg/day																																																
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis) :	Yellow Category : 214.982 Red Category : 281.754 White: 4.914 Blue Category : 68.216 General Solid waste:																																																
5	Details of the Storage, treatment, transportation, processing and Disposal Facility																																																	
	(i) Details of the on-site storage facility :	Size : 6x4 feet Capacity : Provision of on-site storage : (cold storage or any other provision)																																																
	(ii) Details of the treatment or disposal facilities :	<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/day</th> <th>Quantity treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td>]</td> <td>NIL</td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td>]</td> <td>NIL</td> <td></td> </tr> <tr> <td>Autoclaves</td> <td>—</td> <td>06</td> <td></td> </tr> <tr> <td>Microwave</td> <td>]</td> <td>NIL</td> <td></td> </tr> <tr> <td>Hydroclave</td> <td>]</td> <td>NIL</td> <td></td> </tr> <tr> <td>Shredder</td> <td>]</td> <td>NIL</td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td>—</td> <td>10</td> <td></td> </tr> <tr> <td>Sharps encapsulation or concrete pit</td> <td>]</td> <td>NIL</td> <td></td> </tr> <tr> <td>Deep burial pits:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td>—</td> <td>01</td> <td></td> </tr> <tr> <td>Any other treatment equipment:</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum	Incinerators	]	NIL		Plasma Pyrolysis	]	NIL		Autoclaves	—	06		Microwave	]	NIL		Hydroclave	]	NIL		Shredder	]	NIL		Needle tip cutter or destroyer	—	10		Sharps encapsulation or concrete pit	]	NIL		Deep burial pits:				Chemical disinfection:	—	01		Any other treatment equipment:			
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	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum. :	Red Category (like plastic, glass etc.) All BMW left by ANMOL health care Agency																																																
	(iv) No of vehicles used for collection and transportation of biomedical waste :	01 veh, Alternate day																																																
	(v) Details of incineration ash and ETP sludge generated and disposed :	NA      Quantity generated      Where disposed																																																

	during the treatment of wastes in Kg per annum	Incineration Ash ETP Sludge	NA
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of		ANMOL Health Care
	(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		3 times
	(i) Number of trainings conducted on BMW Management.		All staff trained
	(ii) number of personnel trained		-
	(iii) number of personnel trained at the time of induction		NIL
	(iv) number of personnel not undergone any training so far		Yes
	(v) whether standard manual for training is available?		
	(vi) any other information)		
8	Details of the accident occurred during the year		NIL
	(i) Number of Accidents occurred		None
	(ii) Number of the persons affected		None
	(iii) Remedial Action taken (Please attach details if any)		NA
	(iv) Any Fatality occurred, details.		NO
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?		Yes
11	Is the disinfection method or sterilization meeting the log 4		Yes

	standards? How many times you have not met the standards in a year?		
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from

..... 1<sup>st</sup> January 2023 to 31<sup>st</sup> December 2023 .....

Name and Signature of the Head of the Institution  
 Dr. Rajiv Gandhi Hospital & C.P.O.  
 Gargol, Jammu

Date: 26-03-2024  
 Place: Jammu