

Date :31/01/2025

To,

The Environment Engineer
Kolkata Regional Office
West Bengal Pollution Control Board
Mani Square Manicktala Main Road,
Kolkata- 700054 West Bengal

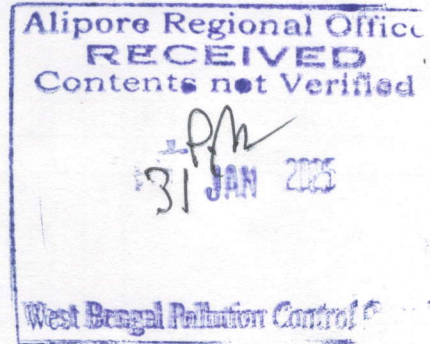
Sub: Submission of Annual Report of BMW for the year 2024.

Respected Sir/ Madam,

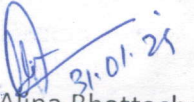
This is to inform you that **INDIRA IVF CLINIC (A UNIT OF INDIRA IVF HOSPITAL LIMITED)** located at First Floor, Premises No.545, Street No.5, Ward 124 Diamond Harbour Road, PO. & PS. Thakurpukur, Kolkata (W) 700063 (WB) , has submitted the BMW annual report for the year 2024. Necessary documents are attached for the annual report.

Enclosures:-

- Form- IV
- Annual BMW Report



Thanking You


Dr. Alina Bhattacharjee
Center Head- Indira IVF Hospital Ltd.
Centre Seal Thakurpukur, West Bengal

Doctor Seal

INDIRA IVF CLINIC
(A UNIT OF INDIRA IVF HOSPITAL PVT. LTD.)
First Floor, Premises No. 545, Street No. 5
Ward 124, Diamond Harbour Road
P.O. & P.S.- Thakurpukur
Kolkata-700 063, W.B.

1



SAVE GIRL CHILD

बेटी बचाओ/बेटी पढ़ाओ, अभियान में सहयोग करें।

Indira IVF Hospital Limited

Registered Office :

4th Floor, C Tower, Times Square Building, Marol, Gamdevi, Andheri Kurla Road, Andheri East, Marol Naka, Mumbai- 400059, (Mah.), India

गर्भ/भ्रूण का लिंग परीक्षण करना/करवाना कानूनन अपराध है। यह कार्य हमारे यहां नहीं किया जाता है।

Website : www.indiraivf.com

Email : info@indiraivf.in

CIN: U85110MH2015PLC406059

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)]

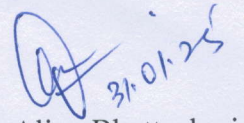
| | | | |
|---|--|---|---|
| 1 | Particulars of the Occupier | : | |
| | (i) Name of the authorised person (occupier or operator of facility) | : | Dr. Alina Bhattacharjee |
| | (ii) Name of HCF or CBMWTF | : | HCF:- Indira IVF Clinic (A unit of Indira IVF Hospital Ltd.) |
| | (iii) Address for Correspondence | : | First Floor, Premises No. 545, Street No.5, Ward 124,Diamond Harbour Road, PO. & PS. Thakurpukur, Kolkata (W) 700063 (WB) |
| | (iv) Address of Facility | : | First Floor, Premises No. 545, Street No.5, Ward 124,Diamond Harbour Road, PO. & PS. Thakurpukur, Kolkata (W) 700063 (WB) |
| | (v)Tel. No, Fax. No | : | 7230026663 |
| | (vi) E-mail ID | : | abhishek.sukhwal@indiraivf.in |
| | (vii) URL of Website | : | |
| | (viii) GPS coordinates of HCF or CBMWTF | : | HCF – At latitude 22.4667622 longitude 88.3082604 |
| | (ix) Ownership of HCF or CBMWTF | : | (Private) |
| | (x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules | : | Authorization No.: D0016375 Valid Upto: 31/03/2027 |
| | (xi). Status of Consents under Water Act and Air Act | : | Valid Upto: 31/03/2027 |
| 2 | Type of Health Care Facility | : | HCF - IVF Clinic |
| | (i) Bedded Hospital : | : | No. of Beds :-0 |
| | (ii) Non-bedded hospital (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 | : | 011749102545 Expiry: 31/03/2025 |
| 3 | Details of CBMWTF : | : | M/s Medicare Environmental Management Pvt. Ltd. |
| | (i) Number healthcare facilities covered by CBMWTF | : | NA |
| | (ii) No of beds covered by CBMWTF | : | NA |
| | (iii) Installed treatment and disposal capacity of CBMWTF | : | _____ Kg per day |
| | (iv) Quantity of biomedical waste treated or | : | _____ Kg/day |

| | disposed by CBMWTF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------------------|---|-----------------|--|-----------------------------|-------------|-----------------|--|--------------|--|--|--|------------------|--|--|--|------------|--|--|--|-----------|--|--|--|------------|--|--|--|----------|--|--|--|--------------------------------|--|--|--|--------------------------------------|--|--|--|------------------|--|--|--|-----------------------|--|--|--|-------------------------------|--|--|--|
| 4 | Quantity of waste generated or disposed in Kg per annum (on monthly average basis) | : | Yellow Category: 157.3 kg per annum (Approx) Red Category : 192.66 kg per annum (Approx) White: 18 per annum (Approx) Blue Category :2 per annum (Approx) General Solid waste: 125 kg per annum (Approx) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 | Details of the Storage, treatment, transportation, processing and Disposal Facility | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (i) Details of the on-site storage facility | : | Size : 15 kg buckets of different colours for storage Capacity : 15 KG Per Day Provision of on-site storage : NA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (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></td><td></td></tr> <tr><td>Plasma Pyrolysis</td><td></td><td></td><td></td></tr> <tr><td>Autoclaves</td><td></td><td></td><td></td></tr> <tr><td>Microwave</td><td></td><td></td><td></td></tr> <tr><td>Hydroclave</td><td></td><td></td><td></td></tr> <tr><td>Shredder</td><td></td><td></td><td></td></tr> <tr><td>Needle tip cutter or destroyer</td><td></td><td></td><td></td></tr> <tr><td>Sharps encapsulation or concrete pit</td><td></td><td></td><td></td></tr> <tr><td>Deep burial pit:</td><td></td><td></td><td></td></tr> <tr><td>Chemical disinfection</td><td></td><td></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 | | | | Plasma Pyrolysis | | | | Autoclaves | | | | Microwave | | | | Hydroclave | | | | Shredder | | | | Needle tip cutter or destroyer | | | | Sharps encapsulation or concrete pit | | | | Deep burial pit: | | | | Chemical disinfection | | | | Any other treatment equipment | | | |
| Type of treatment equipment | No of units | Capacity Kg/day | Quantity Treated or disposed in kg per annum | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Incinerators | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Plasma Pyrolysis | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Autoclaves | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Microwave | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Hydroclave | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Shredder | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Needle tip cutter or destroyer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sharps encapsulation or concrete pit | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Deep burial pit: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Chemical disinfection | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Any other treatment equipment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | (iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum. | : | CBMWTF dose the work of treatment and disposal of our bio medical wastes so details of quantity or recyclable wastes solid to authorized recyclers after treatment will provide by CBMWTF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | |
|---|--|---|--|
| | (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum | : | CBMWTF does the work of treatment and disposal of our bio medical wastes so details of quantity or recyclable wastes solid to authorized recyclers after treatment will be provided by CBMWTF. |
| | (vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of | : | M/s Medicare Environmental Management Pvt. Ltd. |
| | (vii) List of member HCF 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 | | We have Biomedical Waste Management committee and our housekeeping staff is in incharge given training staffs are also regarding BMWM & Moreover he also looks after the proper storage of BMWTF for its disposal. |
| 7 | Details trainings conducted on BMW | | |
| | (i) Number of trainings conducted on BMW Management. | | 4 |
| | (ii) number of personnel trained | | 4 |
| | (iii) number of personnel trained at the time of induction | | 4 |
| | (iv) number of personnel not undergone any training so far | | Not any, because at the time of joining we give proper training to the staff regarding BMW. |
| | (v) whether standard manual for training is available? | | YES |
| | (vi) any other information | | NO |
| 8 | Details of the accident occurred during the year | | 0 |
| | (i) Number of Accidents occurred | | 0 |
| | (ii) Number of the persons affected | | 0 |
| | (iii) Remedial Action taken (Please attach details if any) | | NA |
| | (iv) Any Fatality occurred, details. | | NA |
| 9 | Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not me the standards? | | NA |
| | Details of Continuous online emission | | NA |

| | | |
|----|---|----|
| | 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? | NA |
| 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 | NA |

Certified that the above report is for the period from January 2024 to December 2024.



Dr. Alina Bhattacharjee
Authorized Signatory

Name and Signature of the Head of the Institution

Date: 31stJan 2025

Place: Kolkata

Plant-Medicare Environmental Management Pvt. Ltd. (Howrah Facility) Period: 01-2024 : 12-2024

| SI No. | Month | Yellow Bags | | Red Bags | | Blue Mark Box | | Whites | | Cytotoxic Bags | | Covid Yellow Bag Total | | Total | |
|--------------|----------|-------------|--------------|------------|---------------|---------------|----------|-----------|-----------|----------------|----------|------------------------|----------|------------|---------------|
| | | Count | Weight | Count | Weight | Count | Weight | Count | Weight | Count | Weight | Count | Weight | Count | Weight |
| 1 | Jan 2024 | 5 | 4.00 | 25 | 22.30 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 | 30 | 26.30 |
| 2 | Feb 2024 | 5 | 5.00 | 30 | 24.00 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 | 35 | 29.00 |
| 3 | Mar 2024 | 9 | 5.30 | 27 | 14.75 | 0 | 0.00 | 1 | 2.00 | 0 | 0.00 | 0 | 0.00 | 37 | 22.05 |
| 4 | Apr 2024 | 40 | 21.30 | 43 | 19.20 | 1 | 2.00 | 1 | 2.00 | 0 | 0.00 | 0 | 0.00 | 85 | 44.50 |
| 5 | May 2024 | 33 | 18.40 | 35 | 21.40 | 0 | 0.00 | 1 | 1.00 | 0 | 0.00 | 0 | 0.00 | 69 | 40.80 |
| 6 | Jun 2024 | 25 | 13.10 | 28 | 14.40 | 0 | 0.00 | 3 | 5.00 | 0 | 0.00 | 0 | 0.00 | 56 | 32.50 |
| 7 | Jul 2024 | 26 | 14.40 | 32 | 16.50 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 | 58 | 30.90 |
| 8 | Aug 2024 | 12 | 7.20 | 17 | 10.01 | 0 | 0.00 | 1 | 1.00 | 0 | 0.00 | 0 | 0.00 | 30 | 18.21 |
| 9 | Sep 2024 | 24 | 12.10 | 28 | 16.00 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 | 0 | 0.00 | 52 | 28.10 |
| 10 | Oct 2024 | 33 | 18.10 | 16 | 11.00 | 0 | 0.00 | 1 | 3.00 | 0 | 0.00 | 0 | 0.00 | 50 | 32.10 |
| 11 | Nov 2024 | 32 | 16.50 | 6 | 3.80 | 0 | 0.00 | 1 | 2.00 | 0 | 0.00 | 0 | 0.00 | 39 | 22.30 |
| 12 | Dec 2024 | 38 | 21.90 | 38 | 19.30 | 0 | 0.00 | 1 | 2.00 | 0 | 0.00 | 0 | 0.00 | 77 | 43.20 |
| Total | | 282 | 157.3 | 325 | 192.66 | 1 | 2 | 10 | 18 | 0 | 0 | 0 | 0 | 618 | 369.96 |