

## M. G. M. HOSPITAL & RESEARCH CENTRE PVT. LTD.

#### WOMEN AND CHILD CARE INSTITUTE

JAGAT NARAYAN ROAD, KADAM KUAN, PATNA - 800 003

Ph.: 0612-2683250, 2681551, 8102226550 e-mail: manjugitamishra@hotmail.com

Date:- 04/12/21

To,

The Chief Engineer
Waste Management Cell
Bihar State Pollution Control Board
Parivesh Bhawan, N.S.B. -2, Pataliputra
Industgrial Area, PO- Sadaquat Ashram,
Patna – 800010

#### **Sub: Submission of Monthly Bio- Medical Waste Repot**

Dear Sir,

With reference to your letter, MGM Hospital & Research Centre Pvt. Ltd at Jagat Narayan Road, Kadamkuan, Patna -800003, are hereby submitting report on Bio – Medical waste management, as per provision of rule 5, of management and handling rules for the month of "... Lovenber 2021.

Kindly acknowledge the same and oblige.

Thanking You,

..i.G.M. Hospital & Research Centre Pvt. Ltd.

Dr. P P Mishra

Director

Director- MGM Hospital

Prepared by

**Kunal Shankar** 

(Incharge- Housekeeping)

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### Monthly Report for the Month Of - November

Particulars of t	he ap	plicant
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1) Name of the authorized person (occupier/ operation):

 Name & address of the health care unit: MGM Hospital & Research Centre Pvt. Ltd, Jagat Narayan road, Kadamkuna, Patna – 800003.

Category	was per Schedule – 1 of the Waste Quantity		Category	Waste Quantity	
Category No. 1	25	ly	Category No. 6	160	La.
Category No. 2	-	0	Category No. 7	15	100
Category No. 3	62	69	Category No. 8		1
Category No. 4	98	100	Category No. 9	The second of	-
Category No. 5	18	Tale	Category No. 10		

Note: All quantities to be given in kg./month, Except Category No. 8, which will be in kr./ month Brief details of the treatment facility: Incase off-site facility:

- Name of the operator: IGIMS
- Name and Address of the facility: Sangam Mediserve Pvt. Ltd, Shekhpura, Patna -14
- 3) Category wise quantity of waste treated/ sent to common BMW treatment facility:

  Incineration / Burial (Yellow Bags)

  Autoclave / Microwave

  Red bags:

  | 175 | kg.(own facility/common BMW treatment facility)

  Sharp Container:

  | 12 | kg.(own facility/common BMW treatment facility)
- 4) Any other relevant information: NA
- 5) Certified that the above report for the month of .... \\[ \lambda \lambda \cong \lambda \cong \lambda \cong \lambda \]

Date: