



**FRESENIUS
KABI**

**Fresenius Kabi
Oncology Ltd.**

Vill. Kishanpura, P.O. Guru Majra,
Tehsil Nalagarh, Distt. Solan (H.P.)
174101, INDIA
T + 91-1795-251300
www.fresenius-kabi.com

March 24, 2023

EHS/FKOL-II/2023/005

To

**The Principle Scientific Officer
H.P. State Pollution Control Board
SCF6-8, Market Complex, Sec-IV
Parwanoo. Distt- Solan (HP)-173220**

Online ID 10415

Sub: Annual Return regarding generation and disposal of Bio Medical Waste under, Bio-Medical Waste (M&H) Rules -2016, for the year 2022 (Jan-2022 to Dec-2022)

Dear Sir,

We Fresenius Kabi Oncology Ltd. situated at Kishanpura Baddi with reference to above subject are submitting herewith the Form IV i.e. Biomedical Waste Annual Return duly signed by authorized signatory

You are requested to acknowledge the receipt and update your records.

Thanking you

Yours truly,

For Fresenius Kabi Oncology Ltd

Authorized Signatory

H.P State Pollution Control Board,
Central Laboratory Sector-04,
Parwanoo, Distt. Solan (HP)-173220.
Received
24/03/2023

- Encl:** 1. Signed copy of dully filled annual report Form-IV
2. Annexure-1 Bio-medical waste quantity on Monthly basis.
3. Form I Accident Reporting form

Form - IV

[To be submitted to the prescribed authority on or before 30th June every year for the period from January

Sr. No.	Particulars	
1	Particulars of the Occupier	:
	(i) Name of the authorised person (occupier or operator of facility)	Arvind Sharma, Managing Director
	(ii) Name of HCF or CBMWTF	Fresenius Kabi Oncology Ltd.
	(iii) Address for Correspondence	Village Kishanpura, PO Gurumajra, Baddi-173205
	(iv) Address of Facility	Village Kishanpura, PO Gurumajra, Baddi-173205
	(v) Tel. No, Fax. No	01795-304300
	(vi) E-mail ID	rajendernegi.singh@fresenius-kabi.com
	(vii) URL of Website	http://www.fresenius-kabi-oncology.com/
	(viii) GPS coordinates of HCF or CBMWTF	Latitude -30.58.22-18393 N
	(ix) Ownership of HCF or CBMWTF	Private
	(x). Status of Authorisation under the Bio-Medical Waste (Management & Handling) Rules	Authorisation No : BMW (PWN)/ SOL-90 Date of expiry: 31.03.2024 (Synchronized with validity of consent issued vide HPSPCB No. 398 dated 28.08.2019 & Notification number HPSPCB (12)/Board meeting/BMW/20025-68 dated 18.09.2019)
	(xi). Status of Consents under Water Act and Air Act	Valid up to: 31.03.2029
2	Type of Health Care Facility	Oncology product manufacturing unit
	(i) Bedded Hospital	0
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or anyother)	Oncology product manufacturing unit
	(iii) License number and its date of expiry	Factory licence no: L&E(FAC)9-20171096-2267
3	Details of CBMWTF	
	(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)	: Yellow Category : 14569. kg Yellow Category (Liquid) : 1540 kg Red Category : 2754.2 kg White: NA Blue Category : 23793 kg
5	Details of the Storage, treatment, transportation, processing and Disposal Facility	Disposed out through authorized CBMWTF i.e. Enviro Engineers Shimla
	(i) Details of the on-site storage facility	: Size : 3 m x 2 m x 2m Capacity : 12 cu.m Provision of on-site storage : (cold storage or any other provision

	(ii) Details of the treatment or disposal facilities	:	Type of treatment equipment	No. of units	Capacity kg/day	Quantity disposed or treated in Kg/annum
			Incinerators			
			Plasma Pyrolysis			
			Autoclaves	2	100 liters & 100 liters	
			Microwave			
			Hydroclave			
			Shredder			
			Needle tip cutter or destroyer			
			Sharps encapsulation or concrete pit			
			Deep burial pits:			
			Chemical disinfection:			
			Any other treatment equipment:			
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.		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		NA			
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of		M/s Enviro Engineers, Shimla			
	(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		NO			
7	Details trainings conducted on BMW					
	(i) Number of trainings conducted on BMW Management.		1			
	(ii) number of personnel trained		5			
	(iii) number of personnel trained at the time of induction		3			
	(iv) number of personnel not undergone any training so far		NA			
	(v) whether standard manual for training is available?		Yes			

	(vi) any other information)		
8	Details of the accident occurred during the year		
	(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.		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?		ETP
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 Jan 2022 to Dec 2022

Date: 24 mar 2023

Place: Baddi

Name and Signature of the Head of the Institution



Annexure-I

Fresenius kabi Oncology Ltd, Baddi-II, Kishanpura

Bio Medical waste Disposal
through M/s Enviro Engineers, Shimla for period from Jan 2022 to Dec 2022

Month	Yellow Category (KG)	Yellow Category (KG) Liquid	Red Category (KG)	Blue Category (KG)
Jan-2022	1103	0	303	1525
Feb-2022	1247.9	0	225.2	2261
Mar-2022	764.56	600	135	644
Apr-2022	660	0	102	1914
May-2022	1116	0	132	2076
Jun-2022	1140	0	132	1819
Jul-2022	1430	0	230	1486
Aug-2022	1625	500	250	1233
Sep-2022	1290	100	370	1260
Oct-2022	1230	340	320	3740
Nov-2022	1450.62	0	235	2895
Dec-2022	1512	0	320	2940
Total	14569.0	1540	2754.2	23793

Authorized Signatory



FORM – I
[(See rule 4(o), 5(i) and 15 (2))]

ACCIDENT REPORTING

1. Date and time of accident : *NA*
2. Type of Accident : *NA*
3. Sequence of events leading to accident : *NA*
4. Has the Authority been informed immediately : *NA*
5. The type of waste involved in accident : *NA*
6. Assessment of the effects of the accidents on human health and the environment: *NA*
7. Emergency measures taken : *NA*
8. Steps taken to alleviate the effects of accidents : *NA*
9. Steps taken to prevent the recurrence of such an accident : *NA*
10. Does you facility has an Emergency Control policy? If yes give details:
Doc No. : P-E50-01(On site Emergency Plan)

Date : *24 Mar 2023*

Place: *Bareilly*

Signature

Designation

