To

The Rigional Officer U.P. Pollution Control Board

Lucknow

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)]

l. Io.	Particulars		
	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	Dr. GUNJAN BANGA
	(ii) I taille et liet et ezitet	:	REGENCY HOSPITAL
	(iii) Address for Correspondence	:	REGENCY HOSPITAL LUCKNOW
•	(iv) Address of Facility		PIDT NO- 35 6 KHURRANI NAGI
	(v)Tel. No, Fax. No	:	14880458555
	(vi) E-mail ID	:	hope IXO @ Regency Heathear , n
	(vii) URL of Website		WWW. REGENCY HEALTHCAREIN
	(viii) GPS coordinates of HCF or CBMWTF		LAT 26.89852° LONG BO.9670
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or
			Semi Govt. or any other)
	(x). Status of Authorisation under the Bio-Medical	:	Authorisation No.:
	Waste (Management and Handling) Rules		2757.5137 18/01/2025valid up to 31/07/20
	(xi). Status of Consents under Water Act and Air	:	1.0/01/2025valid up to 31/07/20 Valid up to: 31/07/2027
	Act		
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds: 75
	(ii) Non-bedded hospital	:	
	(Clinic or Blood Bank or Clinical Laboratory or		_
	Résearch Institute or Veterinary Hospital or any other)		
	(iii) License number and its date of expiry		0915700201, 19/05/2026
3.	Details of CBMWTF	:	
	(i) Number healthcare facilities covered by CBMWTF	:	NA
	(ii) No of beds covered by CBMWTF	:	ИА
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	Kg per day



	(iv) Quantity of biomedical waste treated by CBMWTF	l or di	sposed	:	Kg	/day	NA		
4.	Quantity of waste generated or dispose annum (on monthly average basis)			:	Yellow Control Red Category White: Blue Category General States	gory : gory : olid wa	1206 5.83 252 ste:	1013168 (164 kg 3 Kg/M 197 kg)	Monl
5	Details of the Storage, treatment, transpo	rtatio					ty	,	
	(i) Details of the on-site storage facility	:	Capacity Provision	y: on of	on-site st		: (col	d storage or	r
	(ii) Details of the treatment or disposal facilities	:		of tre	atment	No of unit s	Cap acit y Kg/ day	Quantity treatedo r disposed in kg per annum	
			Auto Micro Hydr Shreo Need destr Shar	na Pysclaves owave oclav dder lle tip oyer os	rolysis s —	01		Hday 100 Heat to	JO Kg
	Subject to CBMWTE (SMS water grace Putty))	Conc Deep Cher disin	rete p buria	it al pits: n: treatment		-		
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:			y (like plas	tic, glas	s etc.)	75	spieci
	(iv) No of vehicles used for collection and transportation of biomedical waste	: "					***		BMM:
	(v) Details of incineration ash and ETP sludge generated and disposed				Quan gener	-		here sposed	
	ETT studge generated and disposed				gener	uicu	415	pposed_	

	during the treatment of wastes in Kg per annum		Incineration Ash ETP Sludge
	(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of	:	SMS Wester grace Medi maste Management Prt UD: VILL & P.O BINDOWA MOHANLALGANI LKD
	(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		DISCUSSED IN HOSPITAL INFECTION CONTROL COMMITTEE.
7	Details trainings conducted on BMW		
•	(i) Number of trainings conducted on BMW Management.		HUBsing (20) GDA&HK (24)
	(ii) number of personnel trained		300 + 150
	(iii) number of personnel trained at the time of induction		110
	(iv) number of personnel not undergone any training so far		NIL
	(v) whether standard manual for training is available?		AVAILABLE YES
	(vi) any other information)		
8	Details of the accident occurred during the year		08
	(i) Number of Accidents occurred		08
	(ii) Number of the persons affected		08
	(iii) Remedial Action taken (Please attach details if any)		ATTACHED
	(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		STP
	methods in place. How many times		ETP
	you have not met the standards in a		
	year?		IVIL
11	Is the disinfection method or sterilization meeting the log 4		yes

12	standards? How many times you have not met the standards in a year? Any other relevant information	(Air Pollution Control Devices attached with the Incinerator)
		7100

Certified that the above report is for the period from	
	<u> </u>
	Davs
	Name of the Institution

Date: 16/06/2025
Place REGENCY HOSPITAL LUCKNOW



