



**NARINDER MOHAN  
HOSPITAL & HEART CENTRE**  
(A UNIT OF NARINDER MOHAN FOUNDATION)  
NABH & NABL ACCREDITED HOSPITAL



NMH/HL/24-25/1

To,  
The Chief Medical Officer (CMO)  
District Health Office  
Ghaziabad, Uttar Pradesh – 201002

**Subject:** Submission of Annual Environmental Compliance Report for the Year 2024.

**Respected Sir/Madam,**

We are pleased to submit herewith the **Annual Environmental Compliance Report** for the period calendar year **2024**, in accordance with the stipulations and reporting requirements prescribed by the **Uttar Pradesh Pollution Control Board (UPPCB)** and in adherence to applicable environmental regulations and statutory norms.

Kindly acknowledge receipt of the same and take it on record. Should any further information, clarification, or documentation be required, we shall be pleased to provide it at the earliest convenience.

We take this opportunity to reaffirm our continued cooperation and alignment with the vision and directives of the Uttar Pradesh Pollution Control Board in ensuring a cleaner and more sustainable environment.

**Thanking you.**

**Yours sincerely,**

*N. Mohan*

**Organization Name:** Narinder Mohan Hospital  
**Address:** Mohan Nagar  
**Contact No.:** 0120 2657501  
**Email ID:** nmhgzbb@gmail.com  
**Enclosure:** Annual Environmental Compliance Report 2024



MARK OF EXCELLENCE

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**FOR ADMINISTRATIVE PURPOSE ONLY**

**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 (CBMWTF)]

Sl. No.	Particulars	
1.	Particulars of the Occupier (i) Name of the authorised person (occupier or operator of facility)	NAKINDER MOHAN HOSPITAL & HEART CENTER DR. NISHITH MITTAL (MS)
	(ii) Name of HCF or CBMWTF	NAKINDER MOHAN HOSPITAL & HEART CENTER CBMWTF: ENVIRON WASTE CONNECTIONS LLP EN 102-104, PHASE-3 UPSIDC MG ROAD INDUSTRIAL AREA HAPUR UP-201015, UP CODE -9
	(iii) Address for Correspondence	NAKINDER MOHAN HOSPITAL, MOHAN NAGAR, GHAZIABAD
	(iv) Address of Facility	NAKINDER MOHAN HOSPITAL, MOHAN NAGAR, GT ROAD GH. ZIABAD
	(v) Tel. No. Fax No	01202657501 TO 505 nkh.upb@gmail.com, info@nmh.net.in
	(vi) E-mail ID	www.nmh.net.in
	(vii) URL of Website	GPS TRACKER REPORT OF VEHICLE CARRYING WASTE OF : ENVIRON WASTE CONNECTIONS LLP
	(viii) GPS coordinates of HCF or CBMWTF	NAKINDER MOHAN FOUNDATION TRI ST
	(ix) Ownership of HCF or CBMWTF	Authorisation No.:
	(x) Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	Valid upto
	(xi) Status of Consents under Water Act and Air Act	Valid up to: 31.07.2026
2.	Type of Health Care Facility	ospital
	(i) Bedded (100) and	No. of Beds : 300
	(ii) Non-bedded hospital	
	(iii) Clinic or Blood Bank or Clinical Laboratory or	

Research Institute or Veterinary Hospital or any other)	
(iii) License number and its date of expiry	
3. Details of CBMWTF	ENVIRON WASTE CONNECTIONS LLP
(i) Number healthcare facilities covered by CBMWTF	: 300 (NMH)
(ii) No of beds covered by CBMWTF	: NA Kg per day
(iii) Installed treatment and disposal capacity of CBMWTF:	

(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)	: 7686.33KG
	Yellow Category : 412.24
	White 1kg
	Red Category : 5250.16KG
	Blue Category : 1341.5 kg
	General Solid waste: NA
5. Details of the Storage, treatment, transportation, processing and Disposal Facility	
(i) Details of the on-site storage facility	Size : NA Capacity : NA 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 unit : Cap of acid treated Quantity disposed in kg per annum Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or destroyer Sharps encapsulation or

		concrete pit: Deep burial pits: Chemical disinfection: Any other treatment equipment:	NA
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.)	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		Quantity Generated NA	Where Disposed NA

	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	:	ENVIRON WASTE CONNECTIONS LLP BN 102-104, PHASE-3 UPSIDC MG ROAD INDUSTRIAL AREA HAPUR UP-201015, UP CODE -9
(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		NA
7 Details trainings conducted on BMW Management:		32 scheduled training & 6 induction training
(i) Number of trainings conducted on BMW Management:		385
(ii) number of personnel trained		
(iii) number of personnel trained at the time of induction		96
(iv) number of personnel not undergone any training so far		Nil
(v) whether standard manual for training is available?		YES NMH BIOMEDICAL WASTE MANAGEMENT SOP
(vi) any other information)		NA
8 Details of the accident occurred during the year		Not Any
(i) Number of Accidents occurred		
(ii) Number of the persons affected		
(iii) Remedial Action taken (Please attach details if any)		

9.	(iv) Any Fatality occurred, details. Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	0	INCINERATOR NOT IN THE UNIT
	Details of Continuous online emission monitoring systems installed		
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	NA	THROUGH STP 0 TIMES NON COMPLIANCE
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

*Handwritten signature*

Certified that the above report is for the period from  
JANUARY 2024 TO DECEMBER 2024.....

*Handwritten signature*

National Superintendent  
Signature of the Head of the Institution  
Narinder Singh  
Mohan Nagar, Gurdaspur

Date: *Handwritten date*  
Place: *Handwritten place*



# NARINDER MOHAN HOSPITAL AND HEART CENTRE



## BIOMEDICAL WASTE RECORD JANUARY 2024 TO DECEMBER 2024

MONTH	YELLOW IN KG	RED IN KG	BLUE IN KG	WHITE
JANUARY	763	458	61.5	35.6
FEBRUARY	778.65	485.9	81.5	39.8
MARCH	825.2	526.3	105.7	40
APRIL	474.37	350.12	98.16	37.3
MAY	558.9	400.89	85.53	33.96
JUNE	595.85	380.34	122.35	34.461
JULY	671.66	450.11	134.8	34.07
AUGUST	660.3	559.5	139.3	41.14
SEPTEMBER	843.3	494.2	160.7	38.91
OCTOBER	843.7	554.2	197.1	21.5
NOVEMBER	305.9	289.4	67.16	26.9
DECEMBER	345.5	301.2	87.7	28.6
TOTAL WEIGHT	7686.33	5250.16	1341.5	412.241

Dr. Amit Kumar

Infection Control Officer

Dr. Amit Kumar

MBBS, MD (KGMU Lucknow)

Consultant Microbiologist

U.P. Reg. No. 60391

Narinder Mohan Hospital & Heart Centre  
Ghaziabad-201007 (U.P.)

Medical Superintendent

Narinder Mohan Hospital & Heart Centre

Ghaziabad