



**Birla  
Fertility  
& IVF**

To,

**SENIOR ENVIRONMENTAL ENGINEER**  
The Regional Officer, W.B. P.C. 13  
Mani Square,  
Block No. 8IT,  
Western Side, 8<sup>th</sup> Floor, 164/1,  
Maniktala Main Road, Kolkata-700 054



Date 6<sup>th</sup> July 2025

**Sub: - Submission of Annual Return under Bio Medical Waste Regulations**  
**Authorization No. 270/WBPCB-RO-1/0/2097/2022**

Dear Sir/ Madam,

With reference to the authorization as mentioned above issued to our clinic under the Bio Medical Waste Management Regulation 2016, we are hereby submitting the annual return in Form IV for the year 2024. Kindly acknowledge the same.

Enclosed-

1. Form IV
2. Copy of bmw authorization

Regards

Birla Fertility and IVF  
A Unit of C K Birla Healthcare Pvt Ltd  
11/1, SARAT BOSE ROAD. PO-LR SARANI.  
PS-BHAWANIPUR. KOLKATA-700020

Email – [compliance@birlafertility.com](mailto:compliance@birlafertility.com)



**CK Birla Healthcare Pvt Ltd**  
**Corporate Office- 77B, 1<sup>st</sup> Floor, CRS Tower, Sec -18, Gurugram, Haryana-122015**  
**+91 11 41592200, +91 11 42092198 (Fax), [reachus@ckbhospital.com](mailto:reachus@ckbhospital.com), [www.ckbhospital.com](http://www.ckbhospital.com)**  
**Registered Office: Birla Tower, 8<sup>th</sup> Floor, 25 Barakhamba Road, New Delhi-110001, CIN- U74140DL2014PTC272562**



**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 (CBWTF)]

Sl. No.	Particulars	
1.	Particulars of the Occupier	
	(i) Name of the authorised person (occupier or operator of facility)	Dr. Swati Mishra
	(ii) Name of HCF or CBMWTF	Birla Fertility and IVF a Unit of CK Birla Healthcare Pvt Ltd
	(iii) Address for Correspondence	11/1, SARAT BOSE ROAD. PO-LR SARANI. PS-BHAWANIPUR. KOLKATA-700020
	(iv) Address of Facility	11/1, SARAT BOSE ROAD. PO-LR SARANI. PS-BHAWANIPUR. KOLKATA-700020
	(v) Tel. No, Fax. No	
	(vi) E-mail ID	compliance@birlafertility.com
	(vii) URL of Website	www.birlafertility.com
	(viii) GPS coordinates of HCF or CBMWTF	LAT : 22.53915 ; LONG: 88.354069
	(ix) Ownership of HCF or CBMWTF	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	Authorisation No.: 270/WBPCB-RO-1/0/2097/2022 Valid up to 31.07.2027
	(xi). Status of Consents under Water Act and Air Act	Valid up to: NA
2.	Type of Health Care Facility	
	(i) Bedded Hospital	No. of Beds: 07 BEDS
	(ii) Non-bedded hospital	NA
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	
	(iii) License number and its date of expiry	2097, VALID TILL 31.07.2027
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 per day



**Birla Fertility & IVF** (A unit of CK Birla Healthcare Pvt Ltd)

1<sup>st</sup> Floor, North Block, Ideal Plaza, 11/1, Sarat Bose Road, Kolkata, WB - 700020, India

033-40942999 | reachus.kolkata@birlafertility.com | www.birlafertility.com

Registered Office: Birla Tower, 8th Floor, 25 Barakhamba Road, New Delhi 110001, India | CIN No. U74140DL2014PTC272562



(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 : 54kg Red Category : 57kg White: 5kg Blue Category : 12kg General Solid waste: 60 kg																																																
5 Details of the Storage, treatment, transportation, processing and Disposal Facility																																																	
(i) Details of the on-site storage facility	Size : <b>TEMPORARY STORAGE</b> Capacity : Provision of on-site storage : (cold storage or any other provision)																																																
(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 pits:</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 pits:				Chemical disinfection:				Any other treatment equipment:			
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(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	Red Category (like plastic, glass etc.)																																																
(iv) No of vehicles used for collection and transportation of biomedical waste	OUTSOURCED																																																
(v) Details of incineration ash and ETP sludge generated and disposed	<table border="1"> <thead> <tr> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> </tbody> </table>	Quantity generated	Where disposed																																														
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	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	Greentech Environ 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	NA
7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management.	6
	(ii) number of personnel trained	10
	(iii) number of personnel trained at the time of induction	
	(iv) number of personnel not undergone any training so far	00
	(v) whether standard manual for training is available?	YES
	(vi) any other information)	
8	Details of the accident occurred during the year	NIL
	(i) Number of Accidents occurred	
	(ii) Number of the persons affected	
	(iii) Remedial Action taken (Please attach details if any)	
	(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 met the standards?	YES
	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?	NA
11	Is the disinfection method or sterilization meeting the log 4	YES





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

Certified that the above report is for the period from  
 .....1<sup>ST</sup> JAN 2024 TO 31<sup>ST</sup> DEC 2024  
 .....

Name and Signature of the Head of the Institution

Date: 06.07.2025  
 Place:- Kolkata


