



DATTA MEGHE

INSTITUTE OF HIGHER
EDUCATION & RESEARCH
(DEEMED TO BE UNIVERSITY)

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No.382J of 2024

Date:5.7.2024

Notification

It is for the information of all concerned that as approved by the Academic Council and Executive Council in its meeting held on 27.6.2024 and 1.7.2024 respectively, the Bio-Medical Waste Management Policy is hereby notified as under.

Bio-Medical Waste Management Policy

Objective

The objective of this policy shall be to implement a comprehensive biomedical waste management system at DMIHER (DU), aimed at ensuring the safe and responsible handling and disposal of biomedical waste in compliance with Government of India regulations and statutory guidelines. This policy shall serve as a foundation for all practices related to biomedical waste collection, segregation, treatment, and disposal within the institution.

Need and Scope

DMIHER (DU), as a healthcare service provider operating on a large scale, generates significant amounts of hospital waste. Proper management of this waste is essential to prevent potential health risks and environmental harm. The policy provides a structured approach to handle biomedical waste efficiently and in compliance with applicable laws and regulations. This demonstrates DMIHER (DU)'s commitment to public safety, regulatory compliance, and environmental sustainability.

This policy applies to all healthcare facilities and laboratories under DMIHER (DU) involved in the generation, handling, treatment, or disposal of biomedical waste. It includes all students, staff, and external contractors engaged in waste management processes, covering the entire cycle of waste from generation to final disposal.

Purpose

According to the Bio-medical Waste Management Rules, 2016, "bio-medical waste treatment and disposal facility" refers to any setup where treatment, disposal, or other processes related to biomedical waste are carried out. This policy establishes guidelines to ensure safe handling of biomedical waste, buffer zone requirements, and health and environmental considerations. Compliance with location and operational standards shall be maintained, following consultation with the State Pollution Control Board (SPCB) or Pollution Control Committee (PCC).

Healthcare Waste Management

Healthcare Facilities (HCFs) within DMIHER (DU) bear primary responsibility for managing healthcare waste generated within their facilities. This includes:

1. **Segregation:** Waste shall be separated at the source based on its type, in accordance with color-coded categories.

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- Re-accredited by NAAC (4th Cycle) with A++ Grade (CGPA3.78)

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2. **Collection and In-House Transportation:** Designated staff shall collect and transport waste safely within the facility, using appropriate containers to prevent contamination.
3. **Pre-Treatment:** Waste requiring pre-treatment, such as disinfection, shall be managed before external disposal.
4. **Storage:** Temporarily stored waste shall be contained securely to prevent leaks, exposure, and health risks.

Types of Healthcare Waste:

1. **Biomedical Waste:** Waste generated during diagnosis, treatment, or immunization, which poses potential infection risks.
2. **General Waste:** Non-hazardous waste from healthcare facilities, disposed of as per standard waste disposal practices.
3. **Other Waste:** Includes e-waste and radioactive waste, each requiring specific handling protocols.

Biomedical Waste Categorization and Storage

Biomedical waste is categorized into four main color-coded categories based on the type of waste and treatment requirements:

1. Yellow Category:

- I. **Types of Waste:** Includes human anatomical waste, animal anatomical waste, soiled waste, expired medicines, chemical waste, and microbiology waste.
- II. **Storage Requirements:** Yellow-coloured non-chlorinated plastic bags and containers shall be used, adhering to Bio-Medical Waste Management (Amendment) Rules, 2018.

2. Red Category:

- I. **Types of Waste:** Contaminated recyclable waste (e.g., tubing, bottles, and gloves).
- II. **Storage Requirements:** Red-coloured non-chlorinated plastic bags with a minimum thickness of 50 microns to contain recyclable contaminated waste safely.

3. White Category:

- I. **Types of Waste:** Sharps waste, including needles, syringes, and items that can cause punctures or cuts.
- II. **Storage Requirements:** White-coloured, puncture-proof, leak-proof, and tamper-proof containers to prevent injury or contamination.

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4. Blue Category:

- I. Types of Waste: Glassware, including discarded vials and ampoules, and metallic implants.
- II. Storage Requirements: Puncture-proof, leak-proof containers marked with blue color, including cardboard boxes for glass and metallic waste items.

Compliance and Reporting

To ensure accountability and regulatory compliance, DMIHER (DU) shall implement the following measures:

1. Barcode and GPS-Based Tracking: All biomedical waste containers shall be barcoded and tracked via GPS to monitor movement from generation to final disposal.
2. Annual Reporting: All healthcare facilities under DMIHER (DU) shall submit an annual report to the State Pollution Control Board (SPCB) by July 30 each year, detailing waste handling practices, quantities generated, and compliance status as per Bio-Medical Waste Management Rules, 2016.
3. Staff Training and Immunization: Regular training sessions and immunizations (e.g., Hepatitis B and Tetanus) shall be provided to personnel handling biomedical waste to ensure adherence to safety standards.
4. Effluent Treatment Plant (ETP): An ETP shall be in place to treat liquid biomedical waste, ensuring discharged waste meets pollution control standards and protecting environmental health.

This Biomedical Waste Management Policy shall be reviewed periodically to ensure continued compliance with statutory requirements and to incorporate emerging best practices in waste management. Amendments shall be made as necessary to reinforce DMIHER (DU)'s commitment to environmental safety, public health, and regulatory standards.

Abbreviations

- I. **NAAC:** National Assessment and Accreditation Council
- II. **HRD:** Human Resource Development
- III. **UGC:** University Grants Commission
- IV. **BMWM:** Bio Medical Waste Management
- V. **BMW:** Bio Medical Waste

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- VI. **HCF:** Health Care Facility
- VII. **CBWTF:** Common Bio-medical Waste Treatment and Disposal Facility
- VIII. **CRZ:** Coastal Regulation Zones
- IX. **SPCB:** State Pollution Control Board
- X. **PCC:** Pollution Control Committee

Dr. Sweta Kale Pisulkar
Registrar, DMIHER (DU)

Copy to:

1. Hon'ble Chief Advisor, DMIHER (DU)
2. Hon'ble Vice Chancellor, DMIHER(DU)
3. Hon'ble Pro Vice Chancellor, DMIHER(DU)
4. The Chief Coordinator, DMIHER (DU)
5. The Director General (Admin.), DMIHER (DU)
6. The Executive Director, Quality Assurance (Academic Excellence)
7. The Executive Director, Research & Development, DMIHER (DU)
8. The Executive Director, DMIHER GLOBAL
9. The Director, Off Campus, Wanadongri, Nagpur
10. All the Heads of Institutions, DMIHER (DU)
11. The Principal, FNTCN/SMCON, Wardha/Wanadongri
12. All the Deans (Academics), DMIHER (DU)
13. The Director, School of Advanced Studies, DMIHER (DU)
14. The Director, SHER, DMIHER (DU)
15. The Director, People & Planning, DMIHER (DU)
16. The Director, Strategy, DMIHER (DU)
17. The Director, Admissions
18. The Director, Advanced Learning, DMIHER (DU)
19. The Director, International, DMIHER (DU)
20. The Dean, Examinations, DMIHER(DU)
21. The Director, Examinations, Assessment and Evaluation, DMIHER (DU)
22. The OSD, DMIHER(DU)
23. The Finance Officer, DMIHER (DU)
24. Deputy Director, HR
25. AO/AOs/AAOs of all constituent colleges
26. Website Incharge

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