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NOTIFICATION

No.C.18011/6/94-FST, the 3rd February, 2000. In pursuance to the provision of clause 7 and 9 of the Bio-Medical Waste (Management and Handling) Rules, 1998 issued by the Ministry of Environment & Forests, Government of India, the Governor of Mizoram is pleased to appoint/constitute the Prescribed Authority and Advisory Committee consisting of the following members with immediate effect and until further orders:—

A - PRESCRIBED AUTHORITY =

Secretary, Environment & Forests Department, Government of Mizoram.

B - ADVISORY COMMITTEE

1.	Secretary, Environment & Forests Deptt.		Chairman
	Chairman, Mizoram Pollution Control Board	_	Co-Chairman
3.	Secretary, Health Services		Member
4.	Secretary, L.A.D.		Member
5.	Secretary, P.H.E.		Member
6.	Director, Health Services		Member
7.	Chief Engineer, P.H.E.	-	Member
8.	Director, L.A.D		Member
9.	Director, AH & Vety		Member
10.	President, CYMA	****	Member
	Member Secretary, MPCB, Aizawl	_	Member
	Executive Engineer, MPCB, Aizawl	_	Member-Secretary

The terms and references in respect of the prescribed Authority and the Advisory Committee shall be regulated under the provisions of the aforesaid Rules. The main functions and responsibilities of the Prescribed Authority/Advisory Committee shall be as under:—

PRESCRIBED AUTHORITY:

- (1) The Prescribed Authority shall function under the supervision and control of the Government of Mizoram.
- (2) The Prescribed Authority shall on receipt of Form-I make such enquiry as it deems fit and if it is satisfied that the Applicant possesses the necessary capacity to handle bio-medical waste in accordance with these rules, grant or renew an authorisation as the case may be.
- (3) An authorisation shall be granted for a period of three years including an initial trial period of one year from the date of issue. Therefore, an application shall be made by the accupier/operator for renewal. All such subsequent authorisation shall be for a period of three years.

ADVISORY COMMITTEE :

The Advisory Committee shall as and when required, advise the State Government and the prescribed authority about matters related to the implementation of these rules.

The rules as Published by the Ministry of Environment & Forests, Government of India, is annexed hereto for ready reference.

L. Kawlhmingthanga,
Joint Secretary to the Govt. of Mizoram,
Environment & Forests Department.

MINISTRY OF ENVIRONMENT AND FORESTS

NOTIFICATION

New Delhi, 20th July, 1998.

S.O. 630 (E).—Whereas a notification in exercise of the powers conferred by Sections 6, 8 and 25 of the Environment (Protection) Act, 1986 (29 of 1986) was published in the Gazette vide S.O. 746 (E) dated 16 October, 1997 inviting objections from the public within 60 days from the date of the publication of the said notification of the Bio-Medical Waste (Management and Handling) Rules, 1998 and whereas all objections received were duly considered.

Now, therefore, in exercise of the powers conferred by section 6, 8 and 25 of the Environment (Protection) Act, 1986 the Central Government hereby notifies the rules for the management and handling of bio-medical waste.

1. SHORT TITLE AND COMMENCEMENT:

(1) These rules may be called the Bio-Medical Waste (Management and Handling) Rules, 1998.

(2) They shall come into force on the date of their publication in the official Gazette.

2. APPLICATION:

These rules apply to all persons who generate, collect, receive, store, transport, treat, dispose, or handle bio-medical waste in any form.

- 3. DEFINITIONS: In these rules unless the context otherwise requires:
- (1) "Act" means the Environment (Protection) Act, 1986(29 of 1986);
- (2) "Animal House" means a place where animals are reared/kept for experiments or testing purposes;
- (3) "Authorisation" means permission granted by the prescribed authority for the generation, collection, reception, storage, transportation. treatment, disposal and/or any other form of handling of bio-medical waste in accordance with these rules and any guidelines issued by the Central Government.
- (4) "Authorised person" means an occupier or operator authorised by the prescribed authority to generate, collect, receive, store, transport, treat, dispose and/or handle bio-medical waste in accordance with these rules and, any guidelines issued by the Central Government.
- (5) "Bio-medical Waste" means any waste, which is generated during the diagnosis, treatment or immunisation of human beings or animals or in research activities pertaining thereto or in the production or testing of biologicals, and including categories mentioned in Schedule I:
 - (6) "Biologicals" means any preperation made from organisms or micro-organisms or product of metabolism and bio-chemical reactions intended for use in the diagnosis, immunisation or the treatment of human beings or animals or in research activities pertaining thereto;
 - (7) "Bio-medical waste treatment facility" means any facility wherein treatment disposal of bio-medical waste or processes incidental to such treatment or disposal is carried out;
 - (8) "Occupier" in relation to any institution generating bio-medical waste, which includes a hospital, nursing hone, clinic dispensary, veterinary institution, animal house, pathological laboratory, blood bank by whatever name called, means a persons who has control over that institution and/or its premisses;
 - (9) "Operator of a bio-medical waste facility" means a person who owns or controls or operates a facility for the collection, reception, storage, transport, treatment, disposal or any other form or handling of bio-medical waste;
 - (10) "Schedule" means schedule appended to these rules:

4. DUTY OF OCCUPIER:

It shall be the duty of every occupier of an institution generating biomedical waste which includes a hospital, nursing home, clinic, dispensary, veterinary institution, animal house, pathological laboratory, blood bank by whatever name called to take all steps to ensure that such waste is handled without any adverse effect to human health and the environment.

5. TREATMENT AND DISPOSAL:

- (1) Bio-medical waste shall be treated and disposed of in accordance with Schedule 1, and in compliance with the standard prescribed in Schedule V.
- (2) Every occupier, where required, shall set up in accordance with the time-schedule in Schedule VI, requisite bio-medical waste treatment facilities like incinerator, autoclave, microwave system for the treatment of waste, or, ensure requisite treatment of waste at a common waste treatment facility or any other waste treatment facility.

6. SEGREGATION, PACKAGING, TRANSPORTATION AND STORAGE

- (1) Bio-medical waste shall not be mixed with other wastes.
- (2) Bio-medical waste shall be segregated into containers/bags at the point of generation in accordance with Schedule II prior to its storage, transportation, treatment and disposal. The containers shall be labelled according to Schedule III.
- (3) If a container is transported from the premises where bio-medical waste is generated to any waste treatment facility outside the premises, the container shall apart from the label prescribed in Schedule III also carry information prescribed in Schedule IV.
- (4) Notwithstanding anything contained in the Motor Vehicles Act, 1988, or rules thereunder, untreated bio-medical waste shall be transported only in such vehicle as may be authorised for the purpose by the competent authority as specified by the government.
- (5) No untreated bio-medical waste shall be kept stored beyond a period of 48 hours:

 Provided that if for any reason it becomes necessary to store the waste beyond such period, the authorised person must take permission of the prescribed authority and take measures to ensure that the waste does not adversely affect human health and the environment.

7. PRESCRIBED AUTHORITY:

(1) The Government of every State and Union Territory shall establish a prescribed authority with such members as may be specified for granting authorisation and implementing these rules. If the prescribed authority comprises of more than one member, a Chairperson for the authority shall be designated.

- (2) The prescribed authority for the State or Union Territory shall be appionted within one month of the coming into force of these rules.
- (3) The prescribed authority shall function under the supervision and control of the respective Government of the State or Union Territory.
- (4) The prescribed authority shall on receipt of Form I make such enquiry as it deems fit and if it satisfied that the applicant possess the necessary capacity to handle bio-medical waste in accordance with these rules, grant or renew an authorisation as the case may be.
- (5) An authorisation shall be granted for a period of three years, including an initial trial period of one year from the date of issue. Thereafter, an application shall be made by the occupier/operator for renewal. All such subsequent authorisation shall be for a period of three years. A provisional authorisation will be granted for the trial period, to enable the occupier/operator to demonstrate the capacity of the facility.
- (6) The prescribed authority may after giving reasonable opportunity of being heard to the applicant and for reasons thereof to be recorded in writing, refuse to grant or renew authorisation.
- (7) Every application for authorisation shall be disposed of by the prescribed authority within ninety days from the date of receipt of the application.
- (8) The prescribed authority may cancel or suspend an authorisation, if for reasons, to be recorded in writing, the occupier/operator has failed to comply with any provision of the Act or these rules:

8. AUTHORISATION:

- (1) Every occupier of an institution generating, collecting, receiving, storing, transporting, treating, disposing and/or handling bio-medical waste in any other manner, except such occupier of clinics, dispensaries, pathological laboratories, blood banks providing treatment/service to less than 1000 (one thousand) patients per month, shall make an application in Form I of the prescribed authority for grant of authorisation.
- (2) Every operator of a bio-medical waste facility shall make an application in Form I to the prescribed authority for grant of authorisation.
- (3) Every application in Form I for grant of authorisation shall be accompanied by a fee as may be prescribed by the Government of the State or Union Territory.

9. ADVISORY COMMITTEE:

The Government of every State/Union Territory shall constitute an advisory committee. The committee will include experts in the field of medical and health animal husbandry and veterinary sciences, environmental management, municipal administration, and any other related department or organisation including non-

governmental organisations. The State Pollution Control Committee shall be represented. As and when required, the Committee shall advise the Government of the State/Union Territory and the prescribed authority about matters related to the implementation of these rules.

10. ANNUAL REPORT:

Every occupier/operator shall submit an annual report to the prescribed authority in Form II by 31 January every year, to include information about the categories and quantities of bio-medical wastes handled during the preceeding year. The prescribed authority shall send this information in a compiled form to the Central Pollution Control Board by March 31 every year.

11. MAINTENANCE OF RECORDS:

- (1) Every authorised person shall maintain records related to the generation, collection, reception, storage, transportation, treatment, disposal and/or any form of handling of bio-medical waste in accordance with these rules and any guidelines issued.
- (2) All records shall be subject to inspection and verification by the prescribed authority at any time.

12. ACCIDENT REPORTING:

When any accident occurs at any institution or facility or any other site where bio-medical waste is handled or during transportation of such waste, the authorised person shall report the accident in Form III to the prescribed authority forthwith.

13. APPEAL:

Any person aggrieved by an order made by the prescribed authority under these rules may, within thirty days from the date on which the order is communicated to him prefer an appeal to such authority as the Government of State/Union Territory may think fit to constitute:

Provided that the authority may entertain the appeal after the expiry of the said period of thirty days if it said that the appellant was prevented by sufficient cause from filing the appeal in time.

SCHEDULE I (See Rule 5)

CATEGORIES OF BIO-MEDICAL WASTE

Option	Waste Category	Treatment & Disposal
Category No. 1	HUMAN ANATOMICAL WAST (human tissues, organs, body parts)	E incineration@/deep burial*
Category No. 2	ANIMAL WASTE (animal tissues, organs, body parts carcassess bleeding parts, fluid, blood and experimental animals used in research waste generated by veterinary hospitals colleges, discharge from hospitals, animals House)	incineration@/deep burial*
Category No. 3	MICROBIOLOGY & BIOTECH NOLOGY WASTE wastes from laboratory cultures, stocks or specimens of micro-orga- nism live or attenuated	•
	vaccines, human and animal cell culture used in research and infectious agents from research and industrial laboratories, wastes from production of biologicals, toxins, dishes and devices used for transfer of cultures)	
Category No. 4	WASTE SHARPS (needles, syringes, scal- pels, blades, glass, etc. that may cause puncture vi	lisinfection (chemical) reatment@@/autocla- ing/microwaving and nultilation/shredding##
Category No. 5	(Wastes comprising of included cutdated, contaminated to	ncineration@/destruc- ion and drugs disposal n secured landfills

Option	Waste Category	Treatment & Disposal
Category No. 6	SOLID WASTE (Items contaminated with blood, and body fluids including cotton dressings, soiled plaster casts, lines, beddings, other material contaminated with blood).	incineration@ autoclaving/micro- waving.
Category No. 7	SOLID WASTE (Waste generated from disposable items other than the waste sharps such as tubings, cathe- ters, intravenous sets- e(c).	disinfection by chemical treatment@@ auto- claving/microwaving and mutilation/shred- ding.#非
Category No. 8.	LIQUID WASTE (Waste generated from laboratory and washing cleaning, housekeeping and disinfecting activities).	disinfection by chemical treatment@@ and discharge into drains.
Category No. 9.	INCINERATION ASH (ash from incineration of any bio-medical waste)	disposal in municipal landfill.
Category No. 10.	CHEMICAL WASTE (chemicals used in pro- duction of biologicals, chemicals used in disin- fection, as insecticides, etc.)	Chemical treatment@@ and discharge into drains for liquids and secured landfill for solids.

^{@@} Chemicals treatment using at least 10% hypochloride solution or any other equivalent chemical reagent. It must be ensured that chemical treatment ensures disinfection.

Multilation/shredding must be such so as to prevent unauthorised reuse.

[@] There will be no chemical pretreatment before incineration.
Chlorinated plastics shall not be incinerated.
Deep burial shall be an option available only in towers with population less than five lakes and in rural areas.

SCHEDULE - II

(See Rule 6)

COLOUR CODING AND TYPE OF CONTAINER FOR DISPOSAL OF BIO-MEDICAL WASTES

Colouring Conding	Type of Container	Waste Category	Treatment options as per Schedule I
Yellow	Plastic bag	Cat 1, Cat.2, and	Incineration deep burial
Red	Disinfected container plastic bag	Cat 3. Cat. 6 and Cat. 7	Autoclaving/Microwaving- Chemical Treatment
Blue White translucent	Plastic bag/puncture proof container	Cat.4. Cat 7	Autoclaving/microwaving Chemical Treatment and destruction/shredding
Black	Plastic bag	Cat.5, Cat.9 and Cat 10 (solid)	Disposal in secured landfill

Notes:

- Colour coding of waste categories with multiple treatment options as defined in Schedule I, shall be selected depending on treatment option chosen, which shall be as specified in Schedule I
- Waste collection bags for waste types needing incineration shall not be made of chlorinated plastics
- 3 Categories 7 and 10 (liquid) do not require containers/bags.
- 4 Category 3 if disinfected locally need not be put in containers/bags.

SCHEDULE - III

(See Rule 6)

LABEL FOR BIO-MEDICAL WASTE CONTAINERS/BAGS

BIOHAZARD SYMBOL



BIOHAZARD

CYTOTOXIC HAZARD SYMBOL



CYTOTOXIC

HANDLE WITH CARE

Note:

1. ABEL shall be non-washable and prominently visible.

(See Rul	
LABEL FOR TRANSPORT OF BIO-ME	DICAL WASTE CONTAINERS/BAGS
	DayMonth
Reference to the Second Control of the Secon	Year,
Waste category No	Date of generation
Waste class	
Waste description	
Sender's Name Address	Receiver's Name & Address
Phone No	Phone No
Telex No	Telex No
Fax No	Fax No
Contact Person	Contact Person
In case of emergency please contact:	
Name & Address:— Phone No. Note:	
Label shall be non-washable and prominer	ntly visible.
SCHEDU (See Rule 5 and	
STANDARDS FOR TREATMENT AN WASTES STANDARDS F	ND DISPOSAL OF BIO-MEDICAL FOR INCINERATORS:
All incinerators shall meet the following of	perating and emission standards:
 A. Operating Standards 1. Combustion efficiency (CE) shall be at 2. The Combustion efficiency is computed 	least 99.00% i as follows:
* C.E. = %C02	

%C02 + %C0

- 3. The temperature of the primary chamber shall be 800 ± 50 deg. Co
- 4. The scondary chamber gas residence time shall be at least 1(one) second at 1050+50°C, with minimum 3% Oxygen in the stack gas.
- B. Emission Standards

	Parameters	Concentration mg/Nm3 a correction)	it (12%	
	Particulate matter	150		T. 1
(2)	Nitrogen Oxides	450		-
(3)	HCI	50	• •	, .

- (4) Minimum stack height shall be 30 metres above ground
- (5) Volatile organic compounds in ash shall not be more than 0.01%

Note

- O Suitable designed pollution control devices should be installed/retrofitted with the incinerator to achieve the above emission limits, if necessary.
- Wastes to be incinerated shall not be chemically treated with any chlorinated desinfectants.
- o Chlorinated plastics shall not be incinerated.
- Toxic metals in incineration ash shall be limited within the regulatory quantities as defined under the Hazardous Waste (Management and Handling Rules) 1989.
- Only low sulphur fuel like L.D.O/L.S.H.S/Diesel shall be used as fuel in the incinerator.

STANDARDS FOR WASTE AUTOCLAVING:

The autoclaving should be dedicated for the purposes of disinfecting and treating bio-medical waste,

- (I) When operating a gravity flow autoclave, medical waste shall be subjected to:
 - square inch (psi) for an autoclave residence time of not less than 60 minutes: or

- (ii) a temperature of not less than 1350° and a pressure of 31 psi for an autoclave residence time of not less than 45 minutes; or
- (iii) a temperature of not less than 149°Co and a pressure of 52 psi for an autoclave residence time of not less than 30 minutes.
- (II) When operating a vacuum autoclave, medical waste shall be subjected to a minimum of one pre vacuum pulse to purge the autoclave of all air. The waste shall be subjected to the following:
 - (i) a temperature of not less than 121°C and pressure of 15 psi per an autoclave residence time of not less than 45 minutes; or
 - (ii) a temperature of not less than 135°C and a pressure of 31 psi for an autoclave residence time of not less than 30 minutes:
- Medical Waste shall not be considered properly treated unless the time, temperature and pressure indicators indicate that the required time, temperature and pressure were reached during the autoclave process. If for any reasons, time temperature or pressure indicator indicates that the required temperature pressure or residence time was not reached, the entire load of medical waste must be autoclaved again untill the proper temperature, pressure and residence time were achieved.
- (IV) Recording of operational parameters.

Each autoclave shall have graphic or computer recording devices which will automatically and continuously monitor and record dates, time of day, load identification number and operating parametres throughout the entire length of the autoclave cycle.

(V) Validation test

Spore testing:

The autoclave should completely and consistently kill the approved biological indicator at the maximum design capacity of each autoclave unit Biological indicator for autoclave shall be Bacillus stearothemophilus spores using vials or spore striks, with at least 1×10^4 spores per millilitre. Under no circumstances will an autoclave have minimum operating parameters less than a residence time of 30 minutes, regardings of temperature and pressure, a temperature less than 121° or a pressure less than 15° psi.

(VI) Routine Test

A chemical indicator striptape that changes colour when a certain temperature is reached can be used to verify that a specific temperature has been achived. It may be necessary to use more than one strip over the waste package at different location to ensure that the inner content of the package has been adequately autoclaved.

STANDARDS FOR LIQUID WASTE:

The effluent generated from the hospital should conform to the following limits:

PARAMETERS

PERMISSIBLE LIMITS

pН	6.5-9.0
Suspended solids	100 mg/1
Oil and grease	10 mg/i
BOD	30 mg/1
COD	250 mg/l
Dio-assay test	90% survival of fish after
·	96 hours in 100% effluent.

these limits are applicable to those hospitals which are either connected with sewers without terminal sewage treatment plant or not connected to public sewers. For discharge into public sewers with terminal facilities, the general standards as notified under the Environment (Protection) Act, 1986 shall be applicable.

STANDARDS OF MICROWAVING:

- 1. Microwave treatment shall not be used for cytotoxic, hazardous or radioactive wastes, contaminated animal carcasses, body parts and large metal items.
- 2. The microwave system shall comply with the efficacy test/routine tests and a performance guarantee may be provided by the supplier before operation of the unit.
- 3. The microwave should completely and consistently kill the bacteria and other pathogenic organisms that is ensured by approved biological indicators at the maximum design capacity of each microwave unit. Siological indicators for microwave shall be Bacillus Subtilis spores using vials or spore strips with at least 1X104 spores per milliliter

STANDARDS FOR DEEP BURIAL

- 1. A pit or trench should be dug about 2 meters deep. It should be half filled with easte, then covered with lime within 50 cm of the surface, before filling the rest of the pit with soil.
- 2. It must be ensured that animals do not have any access to burial sites. Covers of galvanised iron/wire meshes may be used.
- 3. On each occasion, when wastes are added to the pit, a layer of 10 cm of soit shall be added to cover the wastes.
- 4. Burial must be performed under close and dedicated supervision.
- 5. The deep burial site should be relatively impermeable and no shallow well should be close to the site.

- 6. The pits should be distant from habitation and sited so as to ensure that no contam nation occurs of any surface water or ground water. The area should not be prone to flooding or erosion.
- 7. The location of the deep burial site will be authorised by the prescr bed authority.
- 8. The institution shall maintain a record of all pits for deep burial.

SCHEDULE VI (See Rule 5)

SCHEDULE FOR WASTE TREATMENT FACILITIES LIKE INCINERATION AUTOCLAVE/MICROWAVE SYSTEM

A.	Hospitals and nursing homes in towns with population of 30 lakhs and above	by 31st December, 1999 or earlier
	20076	184.1
В.	Hospitals and nursing homes in towns with population of below 30 lakhs	
	(a) with 500 beds and above	by 31st December, 1999 or earler
	(b) with 200 b s and above but less than 500 beds	by 31st December, 2000 or earlier
	(c) with 50 beds and above but less than 200 beds	by 31st December, 2001 or earlier
	(d) with less than 50 beds	by 31st December, 2002 or earlier
C.	All other institutions generating	<u>.</u>
٠.	bio-med cal waste not included in A and B above	by 31st December, 2002 or earlier

FORM 1 (see Rule 8)

APPLICATION FOR AUTHORISATION (To be submitted in duplicate.)

To,

The Prescribed Authority
(Name of the State Govt/UT Administration)

Address.

1. Particulars of Applicant

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(i) Name of the Applicant with the state of the Applicant (In block letters & in full) with the state of the

(ii) Name of the Institution:

Address:

Tele No., Fax No. Telex No.

Activity for which authorisation is sought:

- (i) Generation
- (ii) Collection
- (iii) Reception
- (iv) Storage
- (v) Transportation
- (vi) Treatment
- (vii) Disposal
- (viii) Any other form of handling
- 3. Please state whether applying for fresh authorisation or for renewal:

(In case of renewal previous authorisation-number and date)

- 4. (i) Address of the institution handling bio-medical wastes
 - (ii) Address of the place of the treatment facility
 - (iii) Address of the place of disposal of the waste
- 5. (i) Mode of transportation (if any) of bio-medical wasto:
 - (ii) Mode(s) of treatment:
- 6. Brief Description of method of treatment and disposal (attach details):
- 7. (i) Category (see Schedule I) of waste to be handled
 - (ii) Quantity of waste (category-wise) to be handled per month.
- 8. Declaration

I do hereby declare that the statements made and information given above are true to the best of my knowledge and belief and that I have not concealed any information.

I do also hereby undertake to provide any further information sought by the prescribed authority in relation to these rules and to fulfill any conditions stipulated by the prescribed authority.

Date:

FORM II (See Rule 10)

y y ANNUAL REPORT

(To be	submitted to the prescribed authority by 31 January every year).
1.	Particulars of the applicant:
	(i) Name of the authorised person(occupier/operator):
50 A 15	(ii) Name of the institution:
	Address Tele No Telex No. Fax No.
2.	Categories of waste generated and quantity on a monthly average basis:
3.	Brief details of the treatment facility:
	In case of off-site facility:
	(i) Name of the operator
	(ii) Name and address of the facility: Tel No., Telex No., Fax No.
4.	Category-wise quantity of waste treated:
5.	Mode of treatment with details:
6.	Any other information:
7.	Certified that the above report is for the period from
Date	Signature
Place.	Designation
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FORM III (See Rule 12)

ACCIDENT REPORTING

ı.	I. Date and time of accident:	. 1		
2.	2. Sequence of events leading to accident:	· · · · · · · · · · · · · · · · · · ·		
3.	3. The waste involved in accident:			
4.	4. Assessment of the effects of the accidents on humannian conment:	man health	and the	envir
5.	5. Emergency measures taken:			
5.	6. Steps taken to alleviate the effects of accidents:			
	7. Steps taken to prevent the recurrence of such an	accident :		
Da	Date S	sig n atur e	• • • • • • • • • • • • • • • • • • • •	
Pla	Place De	esignation		• • • •

(F.No.23-2/96-HSMD VIJAISHARMA, Jt. Secy.