

**IN THE HIGH COURT OF JUDICATURE AT PATNA**  
**Civil Writ Jurisdiction Case No.13467 of 2017**

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Vikash Chandra Guddu Baba

... .. Petitioner/s

Versus

The State of Bihar and Ors

... .. Respondent/s

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**Appearance :**

For the Petitioner/s : Mr. Vikash Chandra @ Guddu Baba (In Person)  
For the CPCB : Mr. Lalitesh Mani, Adv.

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**CORAM: HONOURABLE THE CHIEF JUSTICE**  
**and**  
**HONOURABLE MR. JUSTICE HARISH KUMAR**  
**ORAL ORDER**

**(Per: HONOURABLE THE CHIEF JUSTICE)**

13 25-02-2026

When the matter was taken up on 02.05.2025, the following order was passed.

*“The affidavit filed by the Bihar State Pollution Control Board indicates that the gap analysis of the bio-medical waste which is being generated and the bio-medical waste being treated, has been addressed, and based on the gap between the generation and treatment of bio-medical waste, it has been assessed that 06 additional CBWTFs in the entire State of Bihar would be required.*

*2. One of such units would be required at Muzaffarpur, Bhagalpur, Sasaram, Gopalganj, Purnia and Madhubani.*

*3. This Court has also been informed that tenders were floated inviting bids from interested companies/ enterprises for setting up of such units. However, because of some discrepancies in the bid submitted by one of the*



*participants in the tender process, the entire tender was cancelled and a fresh tender has been issued on 14.07.2023.*

*4. The learned counsel for the Board to inform this Court on the next date about the finalization of the tender process.*

*5. Re-notify this case on 11.07.2025.”*

2. This matter was taken up in the first hour and we made a query to the learned counsel appearing for Bihar State Pollution Control Board (hereinafter referred to as, “BSPCB”) about the finalization of the tender process. Learned counsel sought for some time to obtain the instruction. However, since the issues involved in this case is very important and having far reaching consequences, inasmuch as direction has been sought for by the petitioner in this Public Interest Litigation to the respondent to take immediate and appropriate steps for disposal of the bio-medical waste, as the biochemical waste are found scattered hither and thither, causing several kinds of diseases such as AIDS, Hepatitis B and C., Typhoid, Encephalitis, Cholera, Tuberculosis etc.; we asked the learned counsel for BSPCB to ensure the appearance of the Member Secretary, State Pollution Control Board through virtual mode

Accordingly, Mr. Neeraj Narayan, the learned Member Secretary, BSPCB appeared before us through virtual mode and stated that he had assumed the office of Member



Secretary on 09.10.2024 and is also aware about the order dated 02.05.2025.

However, it is stated by the Member Secretary that since the period prescribed in the fresh tender, which was floated on 14.07.2023, elapsed in view of the pendency of the case before this Court, after disposal of such case, another two tenders were floated on 11<sup>th</sup> July, 2025 and 5<sup>th</sup> August, 2025 and in pursuance of such tenders, bids were invited and some persons applied for the same. On 19<sup>th</sup> of August, 2025 technical bid was opened and examined for the tender floated on 11.07.2025 and so far as the tender, which was floated on 5<sup>th</sup> of August, 2025, the technical bid was opened on 3<sup>rd</sup> October, 2025. On 17<sup>th</sup> December, 2025 financial bids were opened. The Member Secretary, BSPCB further said that when an information was received that one Special Leave Petition has been filed before the Hon'ble Supreme Court challenging the order passed by Patna High Court in CWJC No. 10325 of 2023 and in CWJC No. 12296 of 2023, relating to the cancellation of the tender process, no progress could be made for finalisation of the tender process. However, he has received the information today from the learned counsel for the BSPCB that the said Special Leave Petition has been dismissed and therefore, at present there would be no difficulty to finalize the tender.



3. The Member Secretary has requested for two months time to be granted to him to apprise this Court about the development made relating to the finalization of the tender.

4. Bio-Medical Waste Management Rules, 2016 (hereinafter referred to as, "Rules, 2016") came into force on 28<sup>th</sup> March, 2016, after it was published in the Gazette of India. It would be relevant to encapsulate Rules 3 to 9 of Rules, 2016.

**3. Definitions.-** *In these rules, unless the context otherwise requires,-*

(d) *"authorised person" means an occupier or operator authorised by the prescribed authority to generate, collect, receive, store, transport, treat, process, dispose or handle bio-medical waste in accordance with these rules and the guidelines issued by the Central Government or the Central Pollution Control Board, as the case may be;*

(f) *"bio-medical waste" means any waste, which is generated during the diagnosis, treatment or immunisation of human beings or animals or research activities pertaining thereto or in the production or testing of biological or in health camps, including the categories mentioned in Schedule I appended to these rules;*

(g) *"bio-medical waste treatment and disposal facility" means any facility wherein treatment, disposal of*



*bio-medical waste or processes incidental to such treatment and disposal is carried out, and includes common bio-medical waste treatment facilities;*

*(m) “occupier” means a person having administrative control over the institution and the premises generating bio-medical waste, which includes a hospital, nursing home, clinic, dispensary, veterinary institution, animal house, pathological laboratory, blood bank, health care facility and clinical establishment, irrespective of their system of medicine and by whatever name they are called;*

*(o) “prescribed authority” means the State Pollution Control Board in respect of a State and Pollution Control Committees in respect of an Union territory;*

**4. Duties of the Occupier.-** *It shall be the duty of every occupier to-*

*(a) take all necessary steps to ensure that bio-medical waste is handled without any adverse effect to human health and the environment and in accordance with these rules,*

*(b) make a provision within the premises for a safe, ventilated and secured location for storage of segregated biomedical waste in colored bags or containers in the manner as specified in Schedule 1, to ensure that there shall be no secondary handling, pilferage of*



*recyclables or inadvertent scattering or spillage by animals and the bio-medical waste from such place or premises shall be directly transported in the manner as prescribed in these rules to the common bio-medical waste treatment facility or for the appropriate treatment and disposal, as the case may be, in the manner as prescribed in Schedule 1;*

*(c) pre-treat the laboratory waste, microbiological waste, blood samples and blood bags through disinfection or sterilisation on-site in the manner as prescribed by the World Health Organisation (WHO) or National AIDs Control Organisation (NACO) guidelines and then sent to the common bio-medical waste treatment facility for final disposal;*

*(d) phase out use of chlorinated plastic bags, gloves and blood bags within two years from the date of notification of these rules;*

*(e) dispose of solid waste other than bio-medical waste in accordance with the provisions of respective waste management rules made under the relevant laws and amended from time to time;*

*(f) not to give treated bio-medical waste with municipal solid waste;*

*(g) provide training to all its health care workers and others, involved*



*in handling of bio medical waste at the time of induction and thereafter at least once every year and the details of training programmes conducted, number of personnel trained and number of personnel not undergone any training shall be provided in the Annual Report;*

*(h) immunise all its health care workers and others, involved in handling of bio-medical waste for protection against diseases including Hepatitis B and Tetanus that are likely to be transmitted by handling of bio-medical waste, in the manner as prescribed in the National Immunisation Policy or the guidelines of the Ministry of Health and Family Welfare issued from time to time;*

*(i) establish a Bar-Code System for bags or containers containing bio-medical waste to be sent out of the premises or place for any purpose within one year from the date of the notification of these rules;*

*(j) ensure segregation of liquid chemical waste at source and ensure pre-treatment or neutralisation prior to mixing with other effluent generated from health care facilities;*

*(k) ensure treatment and disposal of liquid waste in accordance with the Water (Prevention and Control of Pollution) Act, 1974 (6 of 1974);*

*(l) ensure occupational safety of all its health care workers and others*



*involved in handling of bio- medical waste by providing appropriate and adequate personal protective equipments;*

*(m) conduct health check up at the time of induction and at least once in a year for all its health care workers and others involved in handling of bio-medical waste and maintain the records for the same;*

*(n) maintain and update on day to day basis the bio-medical waste management register and display the monthly record on its website according to the bio-medical waste generated in terms of category and colour coding as specified in Schedule I;*

*(o) report major accidents including accidents caused by fire hazards, blasts during handling of bio-medical waste and the remedial action taken and the records relevant thereto, (including nil report) in Form I to the prescribed authority **and also** along with the annual report,*

*(p) make available the annual report on its web-site and all the health care facilities shall make own website within two years from the date of notification of these rules,*

*(q) inform the prescribed authority immediately in case the operator of a facility does not collect the bio-medical waste within the intended time or as per the agreed time;*



*(r) establish a system to review and monitor the activities related to bio-medical waste management, either through an existing committee or by forming a new committee and the Committee shall meet once in every six months and the record of the minutes of the meetings of this committee shall be submitted along with the annual report to the prescribed authority and the healthcare establishments having less than thirty beds shall designate a qualified person to review and monitor the activities relating to bio-medical waste management within that establishment and submit the annual report;*

*(s) maintain all record for operation of incineration, hydro or autoclaving etc., for a period of five years;*

*(t) existing incinerators to achieve the standards for treatment and disposal of bio-medical waste as specified in Schedule II for retention time in secondary chamber and Dioxin and Furans within two years from the date of this notification.*

**5. Duties of the operator of a common bio-medical waste treatment and disposal facility.-** *It shall be the duty of every operator to -*

*(a) take all necessary steps to ensure that the bio-medical waste*



*collected from the occupier is transported, handled, stored, treated and disposed of, without any adverse effect to the human health and the environment, in accordance with these rules and guidelines issued by the Central Government or, as the case may be, the central pollution control board from time to time;*

*(b) ensure timely collection of bio-medical waste from the occupier as prescribed under these rules;*

*(c) establish bar coding and global positioning system for handling of bio- medical waste within one year;*

*(d) inform the prescribed authority immediately regarding the occupiers which are not handing over the segregated bio-medical waste in accordance with these rules;*

*(e) provide training for all its workers involved in handling of bio-medical waste at the time of induction and at least once a year thereafter;*

*(f) assist the occupier in training conducted by them for bio-medical waste management,*

*(g) undertake appropriate medical examination at the time of induction and at least once in a year and immunise all its workers involved in handling of bio-medical waste for protection against diseases, including Hepatitis B and Tetanus, that are likely to*



*be transmitted while handling bio-medical waste and maintain the records for the same;*

*(h) ensure occupational safety of all its workers involved in handling of bio-medical waste by providing appropriate and adequate personal protective equipment;*

*(i) report major accidents including accidents caused by fire hazards, blasts during handling of bio-medical waste and the remedial action taken and the records relevant thereto, (including nil report) in Form I to the prescribed authority and also along with the annual report;*

*(j) maintain a log book for each of its treatment equipment according to weight of batch; categories of waste treated; time, date and duration of treatment cycle and total hours of operation;*

*(k) allow occupier, who are giving waste for treatment to the operator, to see whether the treatment is carried out as per the rules;*

*(l) shall display details of authorisation, treatment, annual report etc on its web-site;*

*(m) after ensuring treatment by autoclaving or microwaving followed by mutilation or shredding. whichever is applicable, the recyclables from the treated bio-medical wastes such as*



*plastics and glass, shall be given to recyclers having valid consent or authorisation or registration from the respective State Pollution Control Board or Pollution Control Committee;*

*(n) supply non-chlorinated plastic coloured bags to the occupier on chargeable basis, if required;*

*(o) common bio-medical waste treatment facility shall ensure collection of biomedical waste on holidays also;*

*(p) maintain all record for operation of incineration, hydroor autoclaving for a period of five years; and*

*(q) upgrade existing incinerators to achieve the standards for retention time in secondary chamber and Dioxin and Furans within two years from the date of this notification.*

**6. Duties of authorities.-** *The Authority specified in column (2) of Schedule-III shall perform the duties as specified in column (3) thereof in accordance with the provisions of these rules.*

**7. Treatment and disposal.-**  
*(1) Bio-medical waste shall be treated and disposed of in accordance with Schedule I, and in compliance with the standards provided in Schedule-II by the health care facilities and common bio-medical waste treatment facility.*

*(2) Occupier shall hand over*



*segregated waste as per the Schedule-1 to common bio-medical waste treatment facility for treatment, processing and final disposal:*

*Provided that the lab and highly infectious bio-medical waste generated shall be pre-treated by equipment like autoclave or microwave.*

*(3) No occupier shall establish on-site treatment and disposal facility, if a service of common bio- medical waste treatment facility is available at a distance of seventy-five kilometer.*

*(4) In cases where service of the common bio-medical waste treatment facility is not available, the Occupiers shall set up requisite biomedical waste treatment equipment like incinerator, autoclave or microwave, shredder prior to commencement of its operation, as per the authorisation given by the prescribed authority.*

*(5) Any person including an occupier or operator of a common bio medical waste treatment facility, intending to use new technologies for treatment of bio medical waste other than those listed in Schedule I shall request the Central Government for laying down the standards or operating parameters.*

*(6) On receipt of a request referred to in sub-rule (5), the Central Government may determine the standards and operating parameters for new*



*technology which may be published in Gazette by the Central Government.*

*(7) Every operator of common bio-medical waste treatment facility shall set up requisite biomedical waste treatment equipments like incinerator, autoclave or microwave, shredder and effluent treatment plant as a part of treatment, prior to commencement of its operation.*

*(8) Every occupier shall phase out use of non-chlorinated plastic bags within two years from the date of publication of these rules and after two years from such publication of these rules, the chlorinated plastic bags shall not be used for storing and transporting of bio-medical waste and the occupier or operator of a common bio-medical waste treatment facility shall not dispose of such plastics by incineration and the bags used for storing and transporting biomedical waste shall be in compliance with the Bureau of Indian Standards. Till the Standards are published, the carry bags shall be as per the Plastic Waste Management Rules, 2011.*

*(9) After ensuring treatment by autoclaving or microwaving followed by mutilation or shredding, whichever is applicable, the recyclables from the treated bio-medical wastes such as plastics and glass shall be given to such recyclers having valid authorisation or*



*registration from the respective prescribed authority.*

*(10) The Occupier or Operator of a common bio-medical waste treatment facility shall maintain a record of recyclable wastes referred to in sub-rule (9) which are auctioned or sold and the same shall be submitted to the prescribed authority as part of its annual report. The record shall be open for inspection by the prescribed authorities.*

*(11) The handling and disposal of all the mercury waste and lead waste shall be in accordance with the respective rules and regulations.*

**8. Segregation, packaging, transportation and storage.***-(1) No untreated bio-medical waste shall be mixed with other wastes.*

*(2) The bio-medical waste shall be segregated into containers or bags at the point of generation in accordance with Schedule 1 prior to its storage, transportation, treatment and disposal.*

*(3) The containers or bags referred to in sub-rule (2) shall be labeled as specified in Schedule IV.*

*(4) Bar code and global positioning system shall be added by the Occupier and common bio-medical waste treatment facility in one year time.*

*(5) The operator of common bio-medical waste treatment facility shall*



*transport the bio-medical waste from the premises of an occupier to any off-site bio-medical waste treatment facility only in the vehicles having label as provided in part 'A' of the Schedule IV along with necessary information as specified in part 'B' of the Schedule IV.*

*(6) The vehicles used for transportation of bio-medical waste shall comply with the conditions if any stipulated by the State Pollution Control Board or Pollution Control Committee in addition to the requirement contained in the Motor Vehicles Act, 1988 (59 of 1988), if any or the rules made there under for transportation of such infectious waste.*

*(7) Untreated human anatomical waste, animal anatomical waste, soiled waste and, biotechnology waste shall not be stored beyond a period of forty-eight hours:*

*Provided that in case for any reason it becomes necessary to store such waste beyond such a period, the occupier shall take appropriate measures to ensure that the waste does not adversely affect human health and the environment and inform the prescribed authority along with the reasons for doing so.*

*(8) Microbiology waste and all other clinical laboratory waste shall be pre-treated by sterilisation to Log 6 or disinfection to Log 4, as per the World*



*Health Organisation guidelines before packing and sending to the common bio-medical waste treatment facility.*

**9. Prescribed authority.-(1)**

*The prescribed authority for implementation of the provisions of these rules shall be the State Pollution Control Boards in respect of States and Pollution Control Committees in respect of Union territories.*

*(2) The prescribed authority for enforcement of the provisions of these rules in respect of all health care establishments including hospitals, nursing homes, clinics, dispensaries, veterinary institutions, animal houses, pathological laboratories and blood banks of the Armed Forces under the Ministry of Defence shall be the Director General, Armed Forces Medical Services, who shall function under the supervision and control of the Ministry of Defence.*

*(3) The prescribed authorities shall comply with the responsibilities as stipulated in Schedule III of these rules.*

Thus in view of Rule 9 of Rules, 2016 the Member Secretary, BSPCB is the prescribed authority for implementation of the provisions of the Rules.

5. Let an affidavit be filed by the Member Secretary, BSPCB by the next date as to what steps have been taken by the Board for implementation of the provisions of Rules, 2016. All



the steps should be highlighted in detail with documentary proof.

6. The affidavit shall be filed by 25.03.2026.

7. The matter be listed on 30.03.2026, on which date the Member Secretary, State Pollution Control Board shall remain present through virtual mode.

8. This Court expects that, in the meantime, the Member Secretary, BSPCB shall do well to finalize the tender process and apprise this Court about the development.

**(Sangam Kumar Sahoo, CJ)**

**(Harish Kumar, J)**

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