

Form- IV
(See Rule 13)
ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30th 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	:	DrAmareshSahoo
	(i) Name of the authorized person (occupier or operator of facility)	:	
	(ii) Name CBMWTF	:	CHC Subarnapur . Banki , Cuttack
	(iii) Address of Correspondence	:	Via :- Athagarh , Dist - Cuttack
	(iv) Address of Facility	:	Via :- Athagarh , Dist - Cuttack
	(v) Tel. No, Fax. No	:	9437080487
	(vi) Email ID	:	bpmusubarnapur@gmail.com
	(vii) URL of Website	:	
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF of CBMWTF	:	(State Government or Private or Semi Govt. or any other) State Government
	(x) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	Authorization No.: 11488 /SPCB/Authorization(Biomedical Waste),Date 20.11.2021 Valid up to 31.03.2025
	(xi) Status of Consents under Water Act and Air Act	:	Valid up to: Nil
2	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds: 06
	(ii) Non-bedded Hospital	:	
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)		
	(iii) License number and its date of expiry	:	Not applicable
3	Details of CBMWTF		
	(i) Number healthcare facilities covered by CBMWTF	:	
	(ii) No of beds covered by CBMWTF	:	
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	_____ Kg per day
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg/day
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category :16kg 845gm Red Category :68kg180gm White :48kg925gm Blue Category :59kg160gm General Solid Waste :16kg220gm
5	Details of the Storage, treatment, transportation, processing and Disposal Facility		
	(i) Details of the on-site storage facility	:	Size :
			Capacity :
			Provision of on-site storage : (Cold storage

Disposal facilities		or any other provision) Type of treatment No Cap-Quantity Equipment ofacitytreatedor units Kg/ disposed day in Kg per annum Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter- 4 32kg200gm or destroyer Sharps encapsulation or - concrete pit 4 nos Deep burial pits: 1 no Chemical - disinfection: 2 units Any other treatment Equipment:									
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.) Handed over outsource agency									
(iv) No of vehicles used for collection and transportation of biomedical waste	:	One									
(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum	:	<table border="1"> <thead> <tr> <th></th> <th>Quantity Generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td>Incineration Ash</td> <td></td> <td>Nil</td> </tr> <tr> <td>ETP Sludge</td> <td></td> <td></td> </tr> </tbody> </table>		Quantity Generated	Where disposed	Incineration Ash		Nil	ETP Sludge		
	Quantity Generated	Where disposed									
Incineration Ash		Nil									
ETP Sludge											
(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	Mediaid marketing Bhubaneswar									
(vii) List of member HCF not handed over bio-medical waste.	:										
6 Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		Yes (4 nos of meeting) Minutes of the meeting is attached herewith									
7 Details trainings conducted on BMW											
(i) Number of trainings conducted on BMW Management.		2									
(ii) Number of personnel trained	:	84									
(iii) Number of personnel trained at the time of induction	:	5									
(iv) Number of personnel not undergone any training so far	:	Nil									
(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 person affected	:	
	(iii) Remedial Action taken (Please attach details if any)	:	
	(iv) Any Fatality occurred, details.	:	
9	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		Nil
	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?		Yes Always met the standards
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		It is done every alt days. Always met the standards.
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from

January 2021 to December 2021. This is certify that Bio medical waste management is done as per guideline.

Name and Signature of the Head of the Institution

Pr
11/02/22

Date: 11/02/2022 .

Place: Banki

Superintendent
CHC, Subarnapur
Cuttack