

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 (CBWTF)]

Sl. No.	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	DR SURESH KUMAR LENKA
	(ii) Name of HCF or CBMWTF	:	CHC,MANDASAH
	(iii) Address for Correspondence	:	AT/PO-MANDASAH, DIST- JAGATSINGHPUR
	(iv) Address of Facility	:	AT/PO-MANDASAH, DIST- JAGATSINGHPUR
	(v) Tel. No, Fax. No	:	
	(vi) E-mail ID	:	mophcmandasahi@gmail.com
	(vii) URL of Website	:	
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	(State Government
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorization No.: 3956/SPCB/AUTHORIZATION.bmw dt-31/03/2018 valid up to - 31-03-2023
	(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:.....16
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	NA
	(iii) License number and its date of expiry	:	NA
3.	Details of CBMWTF	:	NA
	(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
Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category 1-38.95 Kg Yellow Category -2.-150.95 kg
		Red Category-353.65 Kg
		White:10.8 Kg

4		Blue Category :196.28 Kg
		General Solid waste:-1750 Kg
5	Details of the Storage, treatment, transportation, processing and Disposal Facility	
(i) Details of the on-site storage facility	:	Size :NA Capacity : Provision of on-site storage : One Dedicated Common Bio Medical Waste Store Room of Size '10"*12" has been constructed inside the containment area with provision of colour coded buckets & one Autoclave with facilities for hand washing .

disposal facilities		<p>Type of treatment equipment</p> <p>No of units</p> <p>Capacity</p> <p>Quantity treated or disposed day in per annum</p> <p>Incinerators – No</p> <p>Plasma Pyrolysis –No</p> <p>Autoclaves Microwave – Yes(one)</p> <p>Hydroclave Shredder-NO</p> <p>Needle tip cutter or-YES(seven) destroyer -</p> <p>Sharps -one encapsulation or pit - concrete</p> <p>Deep burial pits:-Four</p> <p>Chemical-Yes disinfection: -</p> <p>Any other treatment equipment:</p>									
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.) OUT SOURCED									
(iv) No of vehicles used for collection and transportation of biomedical waste	:	ONE BY OUT SOURCED AGENCY									
(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></td> </tr> <tr> <td>ETP Sludge</td> <td>NA</td> <td></td> </tr> </tbody> </table>		Quantity generated	Where disposed	Incineration Ash			ETP Sludge	NA	
	Quantity generated	Where disposed									
Incineration Ash											
ETP Sludge	NA										
(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	DHH JAGATSINGHPUR									
(vii) List of member HCF not handed over bio-medical waste.	•	NIL									
6 Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		YES SCANNED COPY OF 12 nos OF MINUTES ENCLOSED									
7 Details trainings conducted on BMW											
(i) Number of trainings conducted on BMW Management.		ONE									
(ii) number of personnel trained		22 NOS OF PESONEL TRAINED (Refresher Training)									
(iii) number of personnel trained at the time of induction		18 NOS OF PESONEL TRAINED									

	(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	NIL
	(ii) Number of the persons affected	NIL
	(iii) Remedial Action taken (Please attach details if any)	NIL
	(iv) Any Fatality occurred, details.	NIL
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	NA
.10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	LIQUID WASTE MANAGEMENT SYSTEM IS FUNCTIONAL SINCE 25/11/2016. The Liquid waste generated from Lab., Labour Room, OT & Dressing Room are being treated with 10% Sodium Hypochlorite & discharge to Soak Pit.
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	
.12	Any other relevant information	:

Certified that the above report is for the period from DT-01/01/2021 TO 31/12/2021

.....
.....
.....
.....

Name and Signature of the Head of the Institution

[Signature]
Superintendent
CHC Mandasahi

Date: 04.3.2022
Place Mandasahi