

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 authorized person (occupier or : operator of facility)	:	Med. Supl A. H.G. M.C Kalkua Mrs Chitra Vashnavi
	(ii) Name of HCF or CBMWTF	:	M/S Anmol Health Care
	(iii) Address for Correspondence	:	M/S Anmol Health Care
	(iv) Address of Facility	:	Associated Hospital G.M.C Kalkua
	(v) Tel. No, Fax. No	:	
	(vi) E-mail ID	:	
	(vii) URL of Website	:	Med.supt@hku1@gmail.com
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: Renewl under Process..... Valid upto:
	(xi). Status of Consents under Water Act and Air Act	:	Valid upto: under Process PerHCF.
2	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds: 300
	(ii) Non-bedded hospital	:	
	Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	N.A.
	(iii) License number and its date of expiry	:	
3	Details of CBMWTF	:	
	(i) Number of health care facilities covered by CBMWTF	:	
	(ii) No. of Beds covered by CBMWTF	:	
	(iii) Installed treatment and disposal capacity of CBMWTF;	:	_____ Kg / day
	(iv) Quantity of bio medical 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: 1263 Kg 850 gm Red Category: 687 Kg 178 gm White: 7 Kg 200 gm gm Blue Category: 457 Kg 177 gm General Solid Waste: 26 29 960 kg
	<i>Annual Report</i> <i>(Covid waste yellow Bio-BSB = 682 kg 380 gm)</i> <i>HCF → 337 Bags</i>		
5	Details of the Storage, Treatment, Transportation, Processing and Disposal Facility		
	(i) Details of the on-site storage	:	Size: 6', 10' FT

facility		Capacity:			
		Provision of on-site storage : (Cold storage or any other provision)			
(ii)	Disposal facilities	Type of treatment equipment	No of Units	Capacity Kg/day	Quantity Treated or disposed in kg per annum
	<u>Out source</u>	Incinerators			
		Plasma Pyrolysis			
		Autoclaves			
		Microwave			
		Hydroclave			
		Shredder			
		Needle tip cutter or destroyer			
		Sharps			
		Encapsulation or concrete pit			
		Deep burial pits			
		Chemical disinfection:			
		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.)	
	(iv) No. of Vehicles used for collection and transportation of biomedical waste	:	<u>Out sourced</u>		
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		Quantity Generated	Where disposed	
		Incineration			
		Ash			
		ETP Sludge			
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of		<u>Animal Health Care.</u>		
	(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		<u>Yes</u>		

Details trainings conducted on BMW		
(i)	Number of trainings conducted on BMW Management	6 times.
(ii)	Number of personnel trained	73
(iii)	Number of personnel trained at the time of induction	
(iv)	Number of personnel not undergone any training so far	
(v)	Whether standard manual for training is available?	Yes
8	Details of the accident occurred during the year	
(i)	Number of Accidents occurred	None
(ii)	Number of persons affected	None
(iii)	Remedial Action taken (Please attach details if any)	
(iv)	Any Fatality occurred, details	None
9	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	NA
	Details of Continuous online emission monitoring systems installed	Yes
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Yes
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	Yes
12	Any other relevant information	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from

1st Jan 2021 to 31 Dec. 2021

Name and Signature of the Head of the Institution



Nd-m/umct+K/AK/5214

Date: 06/01/2022

Place: Associated H. G. M. C
Kalkera

Rajani
SIC B.M.O