


Form - IV
ANNUAL REPORT

Sl. No.	Particulars																	
1.	Particulars of the Occupier	:																
	(i) Name of the authorised person (occupier or operator of facility)	:	DR PREMI KR. MARANDI															
	(ii) Name of HCF or CBMWTF	:	CHC AMRAPARA															
	(iii) Address for Correspondence	:	AMRAPARA PAKUR															
	(iv) Address of Facility	:	AMRAPARA PAKUR															
	(v) Tel. No, Fax. No	:																
	(vi) E-mail ID	:	bpmu.amrapara@gmail.com															
	(vii) URL of Website	:	-															
	(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 Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.:valid up to															
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31/03/2020															
2.	Type of Health Care Facility	:																
	(i) Bedded Hospital	:	No. of Beds:..... 06 Beds															
	(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	:																
3.	Details of CBMWTF	:	NA															
	(i) Number healthcare facilities covered by CBMWTF	:	NA															
	(ii) No of beds covered by CBMWTF	:	NA															
	(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)	:	<table border="1"> <tr> <td>Yellow Category</td> <td>150kg</td> <td>month</td> </tr> <tr> <td>Red Category</td> <td>130 kg</td> <td>month</td> </tr> <tr> <td>White:</td> <td>20kg</td> <td>month</td> </tr> <tr> <td>Blue Category</td> <td>14kg</td> <td>month</td> </tr> <tr> <td>General Solid waste:</td> <td>380kg</td> <td>month</td> </tr> </table>	Yellow Category	150kg	month	Red Category	130 kg	month	White:	20kg	month	Blue Category	14kg	month	General Solid waste:	380kg	month
Yellow Category	150kg	month																
Red Category	130 kg	month																
White:	20kg	month																
Blue Category	14kg	month																
General Solid waste:	380kg	month																
5.	Details of the Storage, treatment, transportation, processing and Disposal Facility																	
	(i) Details of the on-site storage facility	:	<table border="1"> <tr> <td>Size</td> <td>:</td> <td></td> </tr> <tr> <td>Capacity</td> <td>:</td> <td></td> </tr> <tr> <td>Provision of on-site storage</td> <td>:</td> <td>(cold storage or any other provision)</td> </tr> </table>	Size	:		Capacity	:		Provision of on-site storage	:	(cold storage or any other provision)						
Size	:																	
Capacity	:																	
Provision of on-site storage	:	(cold storage or any other provision)																

disposal facilities		<p>Type of treatment equipment</p> <p>No of units</p> <p>Capacity Kg/day</p> <p>Quantity treated or disposed in kg per annum</p> <p>Incinerators</p> <p>Plasma Pyrolysis</p> <p>Autoclaves</p> <p>Microwave</p> <p>Hydroclave</p> <p>Shredder</p> <p>Needle tip cutter or destroyer</p> <p>Sharps encapsulation or concrete pit</p> <p>Deep burial pits:</p> <p>Chemical 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.)									
(iv) No of vehicles used for collection and transportation of biomedical waste	:										
(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 data-bbox="788 1028 1034 1106"></th> <th data-bbox="1034 1028 1241 1106">Quantity generated</th> <th data-bbox="1241 1028 1476 1106">Where disposed</th> </tr> </thead> <tbody> <tr> <td data-bbox="788 1106 1034 1184">Incineration Ash</td> <td data-bbox="1034 1106 1241 1184"></td> <td data-bbox="1241 1106 1476 1184"></td> </tr> <tr> <td data-bbox="788 1184 1034 1229">ETP Sludge</td> <td data-bbox="1034 1184 1241 1229"></td> <td data-bbox="1241 1184 1476 1229"></td> </tr> </tbody> </table>		Quantity generated	Where disposed	Incineration Ash			ETP Sludge		
	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	:										
(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									
7 Details trainings conducted on BMW											
(i) Number of trainings conducted on BMW Management.		02									
(ii) number of personnel trained		05									
(iii) number of personnel trained at the time of induction		05									
(iv) number of personnel not undergone any training so far		0									
(v) whether standard manual for training is available?		YES									
(vi) any other information)		NO									
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?		-
	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?		-
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	:	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from

..... 01/01/2019 to 31/12/2019

Date: 29/03/2020
 Place AMRAPARA
 (PAKUR)

Pranab Kumar
 Name and Signature of the Head of the Institution
 Incharge Medical Officer
 C.H.C., Amrapara