PHE (N) NIlabadio

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)]

SI.	Particulars		
No.	Particulars of the Occupier	*	
1.	(i) Name of the authorised person (occupier or operator of facility)	•	pr. Rosmi Roga Somal modercul officer 1/1
	(ii) Name of HCF or CBMWTF		PHE (1) NUCatedia,
	(iii) Address for Correspondence		At/ NIIO hade Korput
	(iv) Address of Facility		1-0-
	(v)Tel. No. Fax. No	1	
	(vi) E-mail ID	*	
	(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)
Andrew State of the State of th	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	The second secon	Authorisation No.: 1953 valid up to
1000	(xi). Status of Consents under Water Act and Air Act		Valid up to:
1.	Type of Health Care Facility	1:	
1	i) Bedded Hospital	1:	No. of Beds:
1	ii) Non-bedded hospital	1:	
R	Clinic or Blood Bank or Clinical Laboratory or tesearch Institute or Veterinary Hospital or any other)		
6	iii) License number and its date of expiry		
L	Details of CBMWTF	1.	The control of the co
	(i) Number healthcare facilities covered by CBMWTF	1:	
1	ii) No of beds covered by CBMWTF	1:	
1	iii) Installed treatment and disposal capacity of	The state of the s	Kg per day

(iv) Quantity of biomedical waste treated of	at dispo			day.			
by CBMWTF			Yellow Ca	negory		6 Kg	
Quantity of waste generated or disposed in Kg pe annum (on monthly average basis)			Red Categ	AND DESCRIPTION OF THE PERSON	1	H of	
			White:		17	ons	
			Blue Cate	gory:	14	12 4	
			General S	olid wa	ste:	21008	
Details of the Storage, treatment, transportation, processing and Disposal Facility							
Details of the Storage treatment transport	Si	z.e :					
(i) Details of the on-site storage facility	To	Capacity:					
	Pr	rovision or	f on-site str	orage .	: (cole	f storage or	
(ii) Details of the treatment or	: au	Type of t	reatment	No of	Cap	Quantity treatedo	
disposal facilities		equipmen	11	unit	y	Ť	
				8	Kg/	disposed	
					day	in kg	
						per	
						annum	
		Incinera	The state of the s)			
			Pyrolysis *	0			
		Autoclaves Microwave Hydroclave					
		Shredder					
•		Needle tip cutter or					
		destroyer					
		Sharps					
			ulation or	,			
		concre	te pit ~	,			
	1	Deep	ourial pits:				
		Chemi	cal				
		disinfe	ection:				
	1 1	Service and the service of	other treatment				
		equipment:					
(iii) Quantity of recyclable wastes :		Red Cate	gory (like p	plastic,	glass e	etc.)	
sold to authorized recyclers after			166				
treatment in kg per annum.		100					
(iv) No of vehicles used for collection	1: 1						
and transportation of biomedical waste			•	ny			
(v) Details of incineration ash and			-	Quantity		Where	
ETP sludge generated and disposed	1	NI	1) 9	encrate	ed	disposed	

	during the treatment of wastes in Kg per annum		Incineration Ash ETP Sludge
and the same state of the same	(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of	and the same	and the second s
	(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		
7	Details trainings conducted on BMW (i) Number of trainings conducted on BMW Management.		
	(ii) number of personnel trained		
The Contract of the Contract o	(iii) number of personnel trained at the time of induction	Augusta (access	
	(iv) number of personnel not undergone any training so far		
	(v) whether standard manual for training is available?		
	(vi) any other information)	and a second second of	
8	Details of the accident occurred		
	during the year		N''U
	(i) Number of Accidents occurred		NIL
j	(ii) Number of the persons affected		WIL
	(iii) Remedial Action taken (Please attach details if any)	· rigazatur A	
	(iv) Any Fatality occurred, details.		NII
The same of the sa	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	and the second of the second o	
	Details of Continuous online emission monitoring systems installed		
0	Liquid waste generated and treatment		
Managed on the	methods in piace, 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?	a La Jacobs The
Any other relevant information	(Air Pollution Control Devices attached with the Incinerator)
	Inchiciator)

Certified that the above report is for the period from 4-01-2023 10 31-12-2023