ANNUAL REPORT

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.		j		
1,	Particulars of the Occupier	:		
	(i) Name of the authorised person (occupier or : open	rator	offacility) Da. Rity Report	,
	(ii) Name of HCF or CBMWTF	:	Saewadaya hospilal	
	(iii) Address for Correspondence	;	Saevadala postifal docated voice	(up)-(up)
	(iv) Address of Facility		,	,
	(v)Tel. No, Fax. No	:	1800 313 1414	
	(vi) E-mail ID	:	100 @ 309 water to spile of com.	
	(vii) URL of Website	· ·	www. soavoolyahoopded, 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 Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.:	•
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 311th December 2026,	
2.	Type of Health Care Facility	:		
	(i) Bedded Hospital	;	No. of Beds:220	
	fii) Non-bedded hospital	<u> </u>		

	Laborator (Clinic or Blood Bank or Clinical y or Research Institute or Veterinary Hospital or any other)		
	(iii) License number and its date of expiry		17994078 000 24110124
3,	Details of CBMWTF	:	
	(i) Number healthcare facilities covered by CBMWTF	:	МР
	(ii) No of beds covered by CBMWTF		
<u> </u>	(iii) Installed treatment and disposal capacity of CBMWTF:	1 400	Kg per day
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	i.	Kg/day
4.	Quantity of waste generated or disposed in Kg per	:	Yellow Category : 10222+ 2 Cylo /annun
	annum (on monthly average basis)	11	Yellow Category: 10222+ 2 Cylo /annun Red Category: 15892 kgs /annun White: 490 kgs./annun Blue Category: 3054 kgs/annun
<u> </u>			White: 490 Kgs./annum
			Blue Category: Bosy kgs/annum
1			General Solid waste: 1050 Ky Department,
5	Details of the Storage, treatment, transportation, pr	rocess	sing and Disposal Facility
1	(i) Details of the site storage : Size	;	7 MIA
	facility	ity:	
	1 1		or on-site storage : (cold storage or provision)
di	Spoult tability	of tre	eatment No Cap Quantity

				Kg/ day	disposed in kg per annum	
F A N E S	Incinerators Plasma Pyroly Autoclaves Microwave Hydroclave Shredder Needle tip cut	\				
9 6 1	destroyer Sharps encapsulatior concrete pit Deep burial p Chemical			Muse Non	with walk	কেএ)
	disinfection: Any other treatment equipment:	,		•		
(iii) Quantity of recyclable wastes: Re sold to authorized recyclers after treatment in kg per annum.	ed Category (I	ike plasti	c, gla	ss etc.)		
(iv) No of vehicles used for collection : and transportation of biomedical b	ol (mou	with	yne U (#	જી જી	
per annum A	ncineration Ash ETP Sludge	Quantiti general HIA HA	ed	dls	nere sposed	
(vi) Name of the Common Bio-: Medical Waste Treatment Facility Operator through which was disposed of	е	Yuhlda	i m	Meen	htt ra bor	Sawba) Try Hrago Tawba)
(vii) List of member HCF not handed over medical waste.	er blo-	111	<i>f</i>	<u> </u>		-

6 Do you have bio-medical waste management committee? If yes, attach minutes of the meetings

held during the reporting period
Details trainings conducted on BMW

Liquid waste generated and

11 Is the disinfection method or

sterilization meeting the log 4 standards? How many times you have

methods in place. How many times you have not met the standards in a

Novel Au Standard met.

MIA

10 treatment

year?

(i) Number of trainings conducted on BMW

Management. (ii) number of personnel trained A50 (iii) number of personnel trained at 850 the time of induction (iv) number of personnel not MIL undergone any training so far (y) whether standard manual for Yes training is available? (vi) any other information) Details of the accident occurred 122 Hopefle Strip What during the year Buscaoling (i) Number of Accidents occurred 15 (ii) Number of the persons affected " ****S (iii) Remedial Action taken (Please attach details if any) (iv) Any Fatality occurred, details. MO 9. Are you meeting the standards of air Pollution from the incinerator? How AIM many times in last year could not met the standards? Details of Continuous online emission monitoring systems installed

not met the standards in a year?

12 Any other relevant information : (Air Pollution Control Devices attached with the

Certified that the above report		
-19n - 2024 H	131 Desember - 2014 -	Medical Director Sarvodaya Hospita
Date: Place	Name and Signature of the	also.
, hujanta).	30,00 STORESTON	

incinerator)