

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. Basanti Pal.
	(ii) Name of HCF or CBMWTF	: CHC Anantapur
	(iii) Address for Correspondence	: At P.O - Anantapur, Sora, Dist Balasore
	(iv) Address of Facility	: Anantapur CHC, Balasore Pin: 756046
	(v) Tel. No, Fax. No	: 9439982051
	(vi) E-mail ID	: anantapurche@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.: 14244IND-X-BW-1127/Dt. 8.8.2022valid up to Dt. 31.3.2027
(xi) Status of Consents under Water Act and Air Act	: Valid up to: Dt. 31.3.2027	
2.	Type of Health Care Facility	: CHC
	(i) Bedded Hospital	: No. of Beds:....6
	(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		
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 <i>Monthly average Kg per annum</i> Yellow Category: $33.8 \text{ Kg} \times 12 = 405.6 \text{ Kg}$. Red Category: $48.6 \text{ gm} \times 12 = 583 \text{ Kg}$ White: $7.6 \text{ Kg} \times 12 = 91.2 \text{ Kg}$ Blue Category: $43.3 \text{ Kg} \times 12 = 519.6 \text{ Kg}$ General Solid waste: $49 \times 12 = 588 \text{ Kg}$.	
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	

5	Details of the Storage, treatment, transportation, processing and Disposal Facility			
	(i) Details of the on-site storage facility	Size		
	disposal facilities	Type of treatment equipment	No of units	Capacity Kg/day
		Incinerators		
		Plasma Pyrolysis		
		Autoclaves		
		Microwave		
		Hydroclave		
		Shredder		
		Needle tip cutter or destroyer		Available
		Sharps encapsulation or concrete pit	1	
		Deep burial pits:	1	
		Chemical disinfection:	By Bleaching powder / HEPAC	
		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.)	NA	
	(iv) No of vehicles used for collection and transportation of biomedical waste		# NA	
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Incineration Ash	Quantity generated	Where disposed
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	ETP Sludge	NA	

The Bio-Medical Waste Management Rules, 2016

	(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		2
	(i) Number of trainings conducted on BMW Management.		
	(ii) number of personnel trained		12
	(iii) number of personnel trained at the time of induction		↑
	(iv) number of personnel not undergone any training so far		0 23
	(v) whether standard manual for training is available?		
	(vi) any other information)		Yes
8.	Details of the accident occurred during the year		No:
	(i) Number of Accidents occurred		
	(ii) Number of the persons affected		
	(iii) Remedial Action taken (Please attach details if any)		
	(iv) Any Fatality occurred, details.		
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		
10.	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		Started
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 Dt. 1.1.2023 to Dt 31.12.2023

Letter No - 180 / Dt. 2.2.2024 / Anantapur C.H.C.

Submitted to Regional office, Balasore & State Pollution Control Board, Odisha

Name and Signature of the Head of the Institution
M. Baranti Pal. (Mr. B Pal)

Date: 2.2.2024
 Place Anantapur

**MEDICAL SUP- DENT
 ANANTAPUR U.M.C.
 BALASORE**