

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 Sono, Dist. Balasore.
	(iv) Address of Facility	: Anantapur CHC Balasore. Pin. 756046
	(v) Tel. No, Fax. No	: 9439982051
	(vi) E-mail ID	: anantapurchc@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! 14244 No.: IND.I.V.B4.1127, DE.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	: NA
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</i>
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	: _____	Yellow Category $59 \cdot 82 \text{ Kg} \times 12 = 712 \text{ Kg}$ Red Category : $61 \cdot 25 \text{ Kg} \times 12 = 735 \text{ Kg}$ White: $7 \cdot 86 \text{ Kg} \times 12 = 94 \cdot 32 \text{ Kg}$ Blue Category : $60 \cdot 75 \text{ Kg} \times 12 = 729 \text{ Kg}$ General Solid waste: $9 \cdot 3 \text{ Kg} \times 12 = 111 \text{ Kg}$
5	Details of the Storage, treatment, transportation, processing and Disposal Facility		
	(i) Details of the on-site storage facility	: Size :	
	(ii) Details of the treatment or disposal facilities	: Type of treatment equipment	No of unit Cap acit y Quantity treated per day in kg annum
		Incinerators	
		Plasma Pyrolysis	
		Autoclaves	
		Microwave	
		Hydroclave	
		Shredder	
		Needle tip cutter or destroyer	<i>Available</i>
		Sharps encapsulation or concrete pit	1
		Deep burial pits:	1
		Chemical disinfection:	<i>By Bleaching powder ⇒ Hypochlorite solution</i>
		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.) <i>N/A</i>	
	(iv) No of vehicles used for collection and transportation of biomedical waste	: 1	
	(v) Details of incineration ash and ETP sludge generated and disposed	: N/A	Quantity generated Where disposed

	during the treatment of wastes in Kg per annum	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.	NA
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.	2
	(ii) number of personnel trained	15
	(iii) number of personnel trained at the time of induction	28
	(iv) number of personnel not undergone any training so far	0
	(v) whether standard manual for training is available?	Yes
	(vi) any other information)	
8	Details of the accident occurred during the year	Nil
	(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	NA
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Staleed
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) <i>N/A</i>

Certified that the above report is for the period from *Dt. 1.1.24 to Dt. 31.12.2024*

Basanti Pal. (Dr. B. Pal) *2.1.25*
Name and Signature of the Head of the Institution

M.S., 1.20
MEDICAL SUPERINTENDENT

ANANTAPUR C.H.C

BALASORE

Date: *2.1.25*
Place *Anantapur*

Letter No. 337 /Dt. 2.1.25 /Anantapur C.H.C

To

Senior Environmental Scientist.

State Pollution Control Board, Odisha.

Submitted to Regional office Balasore *M.S.* *2.1.25*