

From –IV (See rule 13) Annual Report

INDIRA IVF CLINIC

(A Unit of IIHPL)

[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 authorized person	:	D 14
	(occupier or operator of facility)		Dr Meenasri Venukonti
	(ii) Name of HCF or CBMWTF	:	Indira IVF Karimnagar
	(iii) Address for Correspondence	:	H NO : 3-1-876,877 GAC TOWERS, 2ND FLOOR KARIMNAGAR. TELANGANA 505001
	(i) Address of CBMWTF		H NO: 3-7-304, NEAR GOPI KRISHNA FUNCTION HALL, VAVILALAPALLY, KARIMNAGAR.T.S., INDI
	(ii) Tel. No. Fax. No.	:	8306996114
	(V) E-mail ID	:	Katkuri.anvesh@indiraivf.in
	(i) URL of Website		
	(ii) GPS coordinates of HCF		CBMWTF
	(iii) Ownership of HCF of CBMWTF		Private
	(iv) Status of Authorization under the Bio-Medical Waste (Management	:	Authorization No.:KRN-350
	and Handing) Rules.		Valid up to: 20th APRIL 2023
	(v) Status of Consents under Water Act and Air Act.	:	Valid up to:
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds:
	(ii) Non-Bedded Hospital	:	
	(Clinic or Blood Bank or Clinical	~	
	Laboratory or Research Institute or		NA NA
	Veterinary Hospital or any other)		e ali Meenas
e Seal	(iii) License number and its date of	:	Regd. No. 86526 Plot No: 3-1-876 877, 8771A, 878, GAC Towers,
ND	RACIDITY CLINIC		Plot No: 3.1-876 877, 877/A, 878,
A UNIT O	Details if BMSYTAL PVT. LTD.)	:	GAC Towers
CHRIST	AN COVERED BY CONTRACT RACILITIES	:	NA Part Gyne Colors NA String of Control of
FLANC	(fi) No. of beds covered by CBMWTF		NA Sutant Gynecolog

	(iii) Installed treatment and disposal capacity of CBMWTF	:	NA
	(iv) Quantity of biomedical waste treated or disposal by CBMWTF	:	NA
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow category: 167.5kg/annum
			Red&Blue Category: 120.5 kg /annum
			White: kg/annum
			PPC Sharps: 6 kg/annum
			General Solid waste: kg /annum
5.	Details of the Storage , treatment, transportation	on, processi	ng and Disposal Facility
	(i) Details of the on-site storage facility	:	Size :
			Capacity:0.3 cu. meter
			Provision of on-site storage: The Biomedical waste is stored in color coded bins in air conditioned rooms for not more than 48 hours
	(ii) Disposal Facilities		Type of treatment No Capacity Quantity Equipment of Kg/day treated or Units disposed In Kg per Annum Incinerators Plasma Paralysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or destroyer Sharps encapsulation or concrete pit Deep Burial pits: Chemical disinfection: Any other treatment equipment:
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	NA
	(iv) No of vehicles used for collection and transportation of biomedical waste.	:	01
	(v) Details of incineration ash and ETP sludge generated and disposal during the treatment of wastes in Kg per annum)		Quantity Generated Where disposal Incineration Ash NA ETP Sludge

	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	H NO: 3-7-304, NEAR GOPI KRISHNA FUNCTION HALL, VAVILALAPALLY, KARIMNAGAR.T.S., INDIA
	(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.	Detail trainings conducted on BMW		
	(i) Number of training conducted on BMW Management. (ii) Number of personnel trained		2
	(iii) Number of personnel trained at the time of induction		
	(iv) Number of personnel not undergone any training so far.		0
	(v) Whether standard manual for training is available?		Yes
	(vi) Any other information)		Nil
8.	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		NA
	(ii) Number of the persons affected		NA
	(iii) Remedial Action taken (Please attach details if any)		NA
	(iv) Any Fatality occurred, details.		NA
9.	Are you meeting the standards of air Pollution from the incinerator?. How many times in last year could not met the standards?		INCINERATOR NOT AVALIABLE WITH OUR ORGANIZATION. OUT SOURCED.
	Details of Continuous online emission monitoring systems installed		OUT SOURCED
10.	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year.		NA
11.	It the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		NA
12.	Any other relevant information		Nil

V. Meenabi!

Name and Signature of the Head of the Institution

DR.MEENAS P. 1876

Date: Place