

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. Durganidhi Kumar
	(ii) Name of HCF or CBMWTF		INDRA IV CLINIC (A UNIT OF INDRA HOSPITAL)
	(iii) Address for Correspondence		2nd Floor, RAS PLAZA, Jangp
	(iv) Address of Facility		Chowk Mathewi 6, Champaran
	(v) Tel No, Fax No		845401
	(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)
	(x) Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules		Authorisation No: BMW/2692/19/B-6490 valid up to
	(xi) Status of Consents under Water Act and Air Act		Valid up to:
2.	Type of Health Care Facility		
	(i) Bedded Hospital		No. of Beds: 24
	(ii) Non-bedded hospital		
	(Clinical or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)		
	(iii) License number and its date of expiry		
3.	Details of CBMWTF		
	(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
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)		Yellow Category
			Red Category 8.2 kg/m
			White 2.4 kg/m
			Blue Category
			General Solid waste

प्राप्त किया

5

Details of the Storage, treatment, transportation, processing and Disposal Facility

(i) Details of the on-site storage facility

Size

Capacity

Provision of on-site storage : (cold storage or any other provision)

disposal facilities

Type of treatment equipment	No of	Capacity	Quantity treated or disposed in kg per annum
Incinerators Plasma			
Pyrolysis			
Autoclaves			
Microwave			
Hydroclave			
Shredder			
Needle tip cutter or destroyer	- 2		
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.

Red Category (like plastic, glass etc.)

(iv) No of vehicles used for collection and transportation of biomedical waste

Own Vehicles of Medical Environment Management

(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum

	Quantity generated	Where disposed
Incineration Ash		
ETP Sludge		

(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of

Medicare Environment Management

(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		2
	(ii) number of personnel trained		2
	(iii) number of personnel trained at the time of induction		1
	(iv) number of personnel not undergone any training so far		1
	(v) whether standard manual for training is available?		
	(vi) any other information		
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?		-
	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?		-
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 1-1-22 to 31-12-22

Name and Signature of the Head of the Institution

Date 12/6/23

Place Hoshiarpur