

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)	:	Medical Officer I/C, CHC, Laxmipur
	(ii) Name of HCF or CBMWTF	:	
	(iii) Address for Correspondence	:	MO I/C, CHC, Laxmipur
	(iv) Address of Facility	:	CHC, Laxmipur, P.O. Laxmipur, Dist-Koraput
	(v) Tel. No, Fax. No	:	9439990525
	(vi) E-mail ID	:	nhm.laxmipur2020@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.: 11974/SPLB/Authorisation/8.11.2019/ IND-IV-BW-923 valid up to 31/3/2023
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31/3/2025
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds:..... 30
	(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	:	
	(i) Number healthcare facilities covered by CBMWTF	:	06
	(ii) No of beds covered by CBMWTF	:	30
	(iii) Installed treatment and disposal capacity of CBMWTF	:	2 Kg per day

	(iv) Quantity of biomedical waste treated or disposed by CBMWTF :	1.5 Kg/day		
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	Yellow Category : 3410 kg Red Category : 559 kg White: 8 kg Blue Category : 140 kg General Solid waste: 290 kg		
5	Details of the Storage, treatment, transportation, processing and Disposal Facility			
	(i) Details of the on-site storage facility	Size :	4 ft x 3 ft	
		Capacity :		
		Provision of on-site storage :	(cold storage or any other provision)	
	(ii) Details of the treatment or disposal facilities	Type of treatment equipment	No of units	Cap acit y Kg/day
				Quantity treated or disposed in kg per annum
		Incinerators	— Nil	
		Plasma Pyrolysis		
		Autoclaves	— 01	
		Microwave	{ Nil	
		Hydroclave	{ Nil	
		Shredder	— 01	
		Needle tip cutter or destroyer	→ 05 Nos	
		Sharps encapsulation or concrete pit	→ 4 Nos	
		Deep burial pits:	— 04	
		Chemical disinfection:	{ 6 runw.	
		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.) 559 kg		
	(iv) No of vehicles used for collection and transportation of biomedical waste	01		
	(v) Details of incineration ash and ETP sludge generated and disposed	Quantity generated	Where disposed	

	during the treatment of wastes in Kg per annum	Incineration Ash ETP Sludge	} N/A N/A
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of		Medical officer etc.
	(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, Available
7	Details trainings conducted on BMW		Yes
	(i) Number of trainings conducted on BMW Management.		07
	(ii) number of personnel trained		07 All
	(iii) number of personnel trained at the time of induction		20
	(iv) number of personnel not undergone any training so far		NIL
	(v) whether standard manual for training is available?		yes.
	(vi) any other information)		
8	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		5
	(ii) Number of the persons affected		05
	(iii) Remedial Action taken (Please attach details if any)		Prophylaxis treatment given as per advice.
	(iv) Any Fatality occurred, details.		NO.
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		N/A.
	Details of Continuous online emission monitoring systems installed		N/A.
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

01 Jan 2021 to 31/12/2021.

Name and Signature of the Head of the Institution

Date: 22/2/2022
Place: Laxmipur

Medical Officer I/C
CHC Laxmipur
Koraput