



To

Regional Officer Pollution Control Board Kabir Nagar

1/2/19

Sub: Submission of Annual returs of Biomedical waste-2018-19 -Ramkrishna CARE Hospital

Sir,

We are herewith attaching Form IV of of Annual waste returns from Ramkrishna CARE Hospital, Raipur for the year 2018-19

Regards

Devendra Nirmalkar Incharge Houskeeping department/Coordinator BMW management



## Form - IV (See rule 13) ANNUAL REPORT

[To be submitted to the prescribed authority on or before 30<sup>th</sup> 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)]

(i) Name of the authorised person (occupier or : operator of facility)	Krishna Care Hospital  Angshree Sidhaal-h  nichna Medical Science
(i) Name of the authorised person (occupier or : operator of facility)	Salara Gidhaol-h
(i) Name of the authorised person (occupier or : operator of facility)	To los bidharth
	CMUSHTEE -
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A ICHINA I FIL COLCON DO
(iii) Address for Correspondence : ODD:	
(iv) Address of Facility	Encled
(v)Tel. No, Fax. No :	
(vi) E-mail ID	ndar · Niomalicar a care
(vii) URL of Website	Ramkrichna Caro HOSPI
(viii) GPS coordinates of HCF or CBMWTF	19 H 81.6537 461914
(IX) Ownership of fact to	Government or Private or vt. or any other)
(x). Status of Authorisation under the Bio-Medical : Authoris Waste (Management and Handling) Rules : 3913/	
(xi). Status of Consents under Water Act and Air : Valid up	to:
2 Type of Health Care Facility :	
(i) Bedded Hospital : No. of B	eds:3_59
(ii) Non-bedded hospital :	
(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any	
other) (iii) License number and its date of expiry  RA1	P0005/H053/9/19
Details of CBMWTF	1118
(i) Number healthcare facilities covered by :	
CBMWTF  (ii) No of beds covered by CBMWTF  : 359	
(ii) No of beds covered by 6224 (iii) Installed treatment and disposal capacity of :	Kg per day
(iii) Installed treatment and dispersion (CBMWTF:	

	(iv) Quantity of biomedical waste treated by CBMWTF		
	by CBMWTE	l or d	r disposed:Kg/day INE8 200
4.	Quantity of		
	Quantity of waste generated or dispose annum (on monthly average basis)	d in	in Kg per : Yellow Category 4.765 100
	annum (on monthly average basis)	u III	But George 2760
			Red Category: 5255
1			White: 505 1
			Blue Category: 505. 700
5	Details of the Storage treatment		General Solid waste: 121 400 4
	Details of the Storage, treatment, transport	rtatio	tion, processing and Disposal Facility
	(1) Details of the on-site storage facility	:	Size 12.3 x 13.5. 7-7 x 46
			Capacity: 236, 2859
		8	Provision of on-site storage : (cold storage or
			any other provision)
	(ii) Details of the treatment or	:	The state of the s
	disposal facilities	•	
			oquipment or
1			unit y r
			s Kg/ disposed
			day in kg
	**		per
			annum
			Incinerators
			Plasma Pyrolysis
			Autoclaves
			Microwave
4			Hydroclave Shredder
	1		
			Needle tip cutter or
			destroyer
1			Sharps encapsulation or
- 1	1		concrete pit
			- E
			Chemical 1ex
1			disinfection:
			Any other treatment 1 CLP
			equipment:
			Deep burial pits: Chemical disinfection: Any other treatment   SFP equipment:  Red Category (like plastic, glass etc.)  Red Category (like plastic, glass etc.)
	(iii) Quantity of recyclable wastes	•	120 FL You doing
	sold to authorized recyclers after		NA
	treatment in kg per annum.  (iv) No of vehicles used for collection	:	
	and transportation of biomedical		
			1
	(v) Details of incineration ash and		Quantity Where
	(v) Details of interior and disposed		general 1
	ETP sludge generated		generated disposed

		a <sup>a</sup>
1	during the treatment of wastes in Kg	
	per annum	Incineration
		`A -1
	(vi) N	ASI O. T. S KJ
	(vi) Name of the Common Bio-:	SMS Watergrace Ervidoprated
	Waste Treatment is	SMC Water erace Ervico Hra
	Total unough which waster	Do to Ched
	disposed of	PW
	(vii) List of member HCF not handed	
	over bio-medical waste.	
6	Do you have bio-medical waste	
1	management committee? If yes, attach	A Li es a lace of
1	minutes of the meetings held during	yes AHachael
	the reporting period	
7		5- D. Dan 11
1'	(i) Number of trainings conducted on	5 Per month
	BMW Management.	
1	(ii) number of personnel trained	20
1	(iii) number of personnel trained at	er week
- 1	the time of induction	45
	100.20 TO 100.00	709 None
	(iv) number of personnel not undergone any training so far	100 None
- 1	(v) whether standard manual for	
1	training is available?	-
- 1	(vi) any other information)	
ł	8 Details of the accident occurred	
	during the year	
1	(') Number of Accidents occurred	
	200 Number of the persons affected	
	(iii) Remedial Action taken (Fields	
	44-ab details if any)	
	Estality occurred, details.	Nill (All Pangoneter Within
	maeting the stalldards of the	Will (All rand where of the
	from the incinciator.	Linits)
	many times in last year could not met	
	the standards?  Details of Continuous online emission	
		NA
		Will CAIL Parameters tolitin
	10 Liquid waste generated und methods in place. How many times methods in place the standards in a	MIII ( I m) Le )
	methods in place. How many you have not met the standards in a	(M) 13 /
		Nill CAll Pargon etery White
	the disinfection	Mill (Hill landon electron Limits)
	11 Is the 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
		No Incine nevation dans

Certified that the above report is for the period from

Jan- 01 2018 10	21 Dec 2018
	hna Care Ho.
•••••	T. A. salls soften life
	Name and Signature of the Headrof the Institution

Date: 01/02/2019 Place Raipus