

**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 authorized person (occupier or : operator of facility)	:	DR. NITASHA
	(ii) Name of HCF or CBMWTF	:	SHREE AUM MULTISPECIALITY HOSPITAL
	(iii) Address for Correspondence	:	NH-44, TRET MORA - BARI BRAHMANA - SAMBA
	(iv) Address of Facility	:	SAME
	(v) Tel. No, Fax. No	:	01923-294600 - 94191-52045
	(vi) E-mail ID	:	shreeaumhospital@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 Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: PCC/RD3/BMW/21-143-45 ..... Valid upto: DEC-2028
	(xi). Status of Consents under Water Act and Air Act	:	Valid upto: UNDER PROCESS
2	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds: <u>24</u>
	(ii) Non-bedded hospital	:	NA
	Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	
	(iii) License number and its date of expiry	:	NA
3	Details of CBMWTF	:	
	(i) Number of health care facilities covered by CBMWTF	:	NA
	(ii) No. of Beds covered by CBMWTF	:	
	(iii) Installed treatment and disposal capacity of CBMWTF;	:	<u>NA</u> Kg / day
	(iv) Quantity of bio medical waste treated or disposed by CBMWTF	:	<u>NA</u> Kg / day
4	Quantity of waste generated or disposed in Kg per Annum (on monthly average basis)	:	Yellow Category: 660.40 KG / ANNUM Red Category: 688.89 KG / ANNUM White: 3.80 KG / ANNUM Blue Category: 149.08 KG / ANNUM General Solid Waste: 1.50 kg
5	Details of the Storage, Treatment, Transportation, Processing and Disposal Facility	:	
	(i) Details of the on-site storage	:	Size: 6' - 6'

facility	Capacity:			
	Provision of on-site storage : (Cold storage or any other provision)			
(ii) Disposal facilities	Type of treatment equipment	No of Units	Capacity Kg/day	Quantity Treated or disposed in kg per annum
	Incinerators	NA		
	Plasma Pyrolysis	NA		
	Autoclaves		700 to 800 gms	350 kg
	Microwave	NA		
	Hydroclave	NA		
	Shredder	NA		
	Needle tip cutter or destroyer	06	2.5 kg	
	Sharps			
	Encapsulation or concrete pit	NA		
	Deep burial pits	NA		
	Chemical disinfection:			
	Any other treatment equipment:	NA		
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in Kg per annum	:	Red Category (like plastic, glass, etc.) NA		
(iv) No. of Vehicles used for collection and transportation of biomedical waste	:	ONE BY ANMOL HEALTH CARE		
(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	NA	NA	
	Ash			
	ETP Sludge	NA	NA	
(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of		ANMOL HEALTH CARE SAMBA		
(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		

	Details trainings conducted on BMW		YES
	(i) Number of trainings conducted on BMW Management		4
	(ii) Number of personnel trained		7
	(iii) Number of personnel trained at the time of induction		NA
	(iv) Number of personnel not undergone any training so far		5
	(v) Whether standard manual for training is available?		YES
8	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		NA
	(ii) Number of persons affected		NIL
	(iii) Remedial Action taken (Please attach details if any)		NIL
	(iv) Any Fatality occurred, details		NIL
9	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		NIL
	Details of Continuous online emission monitoring systems installed		NIL
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		NIL
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		AS PER STANDARDS
12	Any other relevant information		(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from

1-1-2021 TO 31-12-2021

Name and Signature of the Head of the Institution

Date: 4-8-22

Place: SAMBA

