

OFFICE OF THE SUPERINTENDENT
CHC PUJARIGUDA

Dist: Nabarangpur Pin: 764073

Letter No: 033

Date: 18.01.24

To

The State Pollution Control Board (Head Office)
Paribesh Bhawan
A/118, Nilakantha Nagar, Unit VIII
Bhubaneswar-465012

Sub: Regarding Annual Reports on BMW for the year 2023 of all PHC and of CHC Pujariguda

Respected Sir/Madam,

With reference to the subject cited above herewith I am submitting the annual reports on Bio-Medical Waste management for the year 2023 i.e from 1st January 2023 to 31st December 2023 of the following institutions under CHC Pujariguda.

1. CHC Pujariguda
2. HWC PHC Singishari
3. HWC PHC Sunabeda
4. HWC PHC Kurshi
5. HWC PHC Badabharandi
6. HWC PHC Govt. Hospital Umerkote

Thanking You

Yours Faithfully


Superintendent
CHC Pujariguda

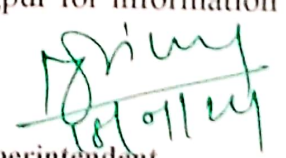
Memo No. 034

Copy to state Regional Pollution Control Board, Rayagada for information


Superintendent
CHC Pujariguda

Memo No. 035

Copy to Chief District Medical & Public Health Officer, Nabarangpur for information and necessary action


Superintendent
CHC Pujariguda

"Arriving late is a way of saying that your own time is more valuable than the time of the persons who waiting for you"



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 (CBMWTF)]

| Sl. No. | Particulars | | |
|---------|--|---|---|
| 1 | Particulars of the Occupier | : | |
| | (i) Name of the authorized person (occupier or : operator of facility) | : | Dr. Patitapaban Dwivedy . |
| | (ii) Name of HCF or CBMWTF | : | CHC PUTARIGUDA |
| | (iii) Address for Correspondence | : | PO-Bhamdai, via-Ukt, Dist-Nabarangpur |
| | (iv) Address of Facility | : | - do - |
| | (v) Tel. No, Fax. No | : | |
| | (vi) E-mail ID | : | |
| | (vii) URL of Website | : | |
| | (viii) GPS coordinates of HCF or CBMWTF | : | Latitude 19.70 (M.decimal)/Longitude 82.42 |
| | (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.: 1286 / 16.11.2019 Valid upto: 31-03-2024 |
| | (xi). Status of Consents under Water Act and Air Act | : | Valid upto: |
| 2 | Type of Health Care Facility | : | HCF |
| | (i) Bedded Hospital | : | No. of Beds: 16 |
| | (ii) Non-bedded hospital | : | |
| | 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 of health care facilities covered by CBMWTF | : | |
| | (ii) No. of Beds covered by CBMWTF | : | |
| | (iii) Installed treatment and disposal capacity of CBMWTF; | : | _____ Kg / day |
| | (iv) Quantity of bio medical 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: 4602 kg, 1200 Ltrs. Red Category: 234.8 kg White: 18 kg Blue Category: 209.8 kg General Solid Waste: 560 kg. |

| 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 | 0 | | |
| | Plasma Pyrolysis | 0 | | |
| | Autoclaves | 0 | | |
| | Microwave | 0 | | |
| | Hydroclave | 0 | | |
| | Shredder | 0 | | |
| | Needle tip cutter or destroyer | 05 | 0.2 | 34 kg/annum |
| | Sharps | 1 | | |
| | Encapsulation or concrete pit | 0 | | |
| | Deep burial pits | 3 | 3ft x 6ft | |
| | Chemical disinfection: | 2 | 4ft x 4ft | |
| | 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.) 140 kg. | | |
| (iv) No. of Vehicles used for collection and transportation of biomedical waste | : | 0 | | |
| (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 | | | | |
| (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 | |

| Details trainings conducted on BMW | | |
|------------------------------------|---|---|
| (i) | Number of trainings conducted on BMW Management | 12 |
| (ii) | Number of personnel trained | 89 |
| (iii) | Number of personnel trained at the time of induction | 14 |
| (iv) | Number of personnel not undergone any training so far | 01 |
| (v) | Whether standard manual for training is available? | YES |
| 8 | Details of the accident occurred during the year | NO |
| (i) | Number of Accidents occurred | NIL |
| (ii) | Number of 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? | NO |
| | Details of Continuous online emission monitoring systems installed | NO |
| 10 | Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year? | YES, 0 |
| 11 | Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year? | YES. |
| 12 | Any other relevant information | (Air Pollution Control Devices attached with the Incinerator) |

Certified that the above report is for the period from

1st Jan 2023 to 31st Dec 2023

Princy
16/01/24
Name and Signature of the Head of the Institution

Date: 16/01/2024

Place: CHC Puariguda

