

**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 preceding year, by the occupier of health care facility (HCF) or common bio-Medical Waste treatment facility (CBWTF)

ANNUAL REPORT FOR THE PERIOD OF JAN-2021 TO DEC-2021

S.No	PARTICULARS	
1	Particulars of the occupier	
	(i) Name of the authorised person (Occupier or operator of facility)	NATIONAL HOSPITAL
	(ii) Name of HCF or CBMWTF	DR. HARBINDER SINGH
	(iii) Address for correspondence	NATIONAL HOSPITAL
	(iv) Address of facility	AIRPORT ROAD, KARAN BAGH, JAMMU
	(v) Tel. No, Fax-No,	-do-
	(vi) E-Mail ID	9469469469
	(vii) URL of Website	nationalhospitaljmu@gmail.com
	(viii) GPS Coordinates of HCF or CBMWTF	www.nationalhospitaljk.com
	(ix) Ownership of HCF or CBMWTF	(State Government or Private or Semi-Government or any other) <u>Private</u>
	(x) Status of authorization under the Bio-Medical waste (Management and Handling) Rules.	Authorization.....No.....Valid upto.....
	(xi) Status of Consents under Water Act and Air Act.	Valid upto.....
2	Type of Health Care Facility	
	(i) Bedded Hospital	No of Beds..... <u>10 - Beds</u>
	(ii) Non-Bedded Hospital (clinic or Blood Bank or Clinical Laboratory or Research Institute or veterinary Hospital or any other)	<u>HOSPITAL</u>
	(iii) Licence number and its date of expiry	<u>DRA/CE(R&R)CMO-J/2021/59 - Valid up to 31-10-22</u>
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 per day
4	Quantity of Waste generated or disposed in Kg's per annum (on monthly average basis)	Yellow category <u>249.95kg</u> Red Category <u>636.60kg</u> White Category <u>21.69kg</u> Blue Category <u>193.2kg</u> General Solid Waste.....
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)			
(ii)	Details of the treatment or disposal facilities.	Type of treatment	No of Units	Capacity Kg/day	Quantity treated or disposed in Kg per annum
		Incinerators:			
		Plasma Pyrolysis:			
		<input checked="" type="checkbox"/> Autoclaves:			
		<input checked="" type="checkbox"/> Microwaves:			
		Hydroclave:			
		Shredder:			
		<input checked="" type="checkbox"/> Needle tip cutter or destroyer:			
		Sharps encapsulation or concrete pit:			
		Deep burial Pits:			
		<input checked="" type="checkbox"/> Chemical disinfection:			
		Any other treatment equipment:			
(iii)	Quantity of recycleable wastage 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 Bio-Medical waste.				
(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			
(v)	Name of the common Bio-Medical Waste treatment facility operator through which waste are disposed off.	ANMOL HEALTHCARE			
(vi)	List of member HCF not handed over Bio-Medical Waste.	<input checked="" type="checkbox"/> Yes			
6	Do you have Bio-Medical Waste management community? If yes, attach minutes of the meetings held during the reporting period.				
7	Details trainings conducted on BMW				
(i)	No of trainings conducted on BMW management	4			

	(ii) No of personnel trained		4
	(iii) No of personnel trained at the time of induction		4
	(iv) No of personnel not undergone any training so far		Yes
	(v) Whether standard manual for training is available?		
	(vi) Any other information		
8	Details of the accident occurred during the year		
	(i) No of Accident occurred		-Nil-
	(ii) No of the 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 incinerators? How many times in last year could not met the standards?		
	(i) Details of continues online emission monitoring system installed.		-Nil-
10	Liquid Waste generated and treatment methods in place. How many times you have not met the standards in a year?		-STP- on regular basis
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		-Nil-
12	Any other relevant information		(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from

..... 1st January 2021 till 31st December
 2021


 Name and Signature of the Head of the Institution

Date: 14/9/22

Place: Karan Bagh, Jammu