



OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH OFFICER,
BHADRAK ((MEDICAL WING))

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Letter No:- 5739

/MED/BMW

Date:- 24.06.2019

To
The Member Secretary,
State Pollution Control Board,
Paribesh Bhawan, A/118, Nilakantha Nagar,
Unit:-VIII, Bhubaneswar:-751012,
Odisha.

Sub:- Transmission of annual report of Bio Medical Waste Management of District Head Quarters Hospital, Bhadrak for the year 2018-19.

Sir,

I am transmitting herewith annual report of Bio- Medical Waste Management of District Head Quarters Hospital, Bhadrak for the year 2018-19 in the prescribed format which has been duly filled in.

Yours faithfully,


DMO (MS) cum Superintendent, DHH,
Bhadrak

Memo No:- 5740

Date:- 24.06.2019

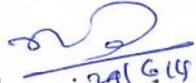
Copy forwarded to the Regional Officer, State Pollution Control Board, Odisha, Balasore for information & necessary action.


DMO (MS) cum Superintendent, DHH,
Bhadrak

Memo No:- (5741)

Date:- 24.06.2019

Copy forwarded to the ADMO (PH), Bhadrak for information & necessary action.


DMO (MS) cum Superintendent, DHH,
Bhadrak

(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 Pradip Kumar Khuntia																																
	(ii) Name of HCF or CBMWTF	:	District Head Quarters Hospital, Bhadrak.																																
	(iii) Address for Correspondence	:	At/Po:- Nuabazar, Dist:- Bhadrak, Pin:- 756100																																
	(i) Address of Facility	:	District Head Quarters Hospital, Bhadrak. At/Po:- Nuabazar, Dist:- Bhadrak, Pin:- 756100																																
	(ii) Tel. No. Fax. No.	:																																	
	(V) E-mail ID	:	hdtbhadrak@gmail.com																																
	(i) URL of Website	:																																	
	(ii) GPS coordinates of HCF of CBMWTF	:																																	
	(iii) Ownership of HCF of CBMWTF	:	(State Government of Private or Semi Govt. or any other): State Government																																
	(iv) Status of Authorization under the Bio-Medical Waste (Management and Handing) Rules.	:	Authorization No. IND-IV-PCP (BMW)-37 Valid up to 31/03/2023.....																																
	(v) Status of Consents under Water Act and Air Act.	:	Valid up to:																																
2.	Type of Health Care Facility	:																																	
	(i) Bedded Hospital	:	Yes																																
	(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.	:	IND-IV-PCP (BMW)-37 Date of expiry:- 31/03/2023.....																																
3.	Details if 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 disposal by CBMWTF	:	_____ Kg/day																																
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow category:-12046 kg per annum Red Category:- 3701 kg per annum White:-1329 kg per annum Blue Category:- 5717 kg per annum General Solid waste:- 126300 kg per annum																																
5.	Details of the Storage, treatment, transportation, processing and Disposal Facility	:																																	
	(i) Details of the on-site storage facility	:	Size :- 450 sq ft Capacity:- 180 sq ft Provision of on-site storage : (cold storage or any other provision)																																
	(ii) Disposal Facilities	:	<table border="1"> <thead> <tr> <th>Type of treatment Equipment</th> <th>No of Units</th> <th>Capacity Kg/day</th> <th>Quantity treated or disposed In Kg per Annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Plasma Paralysis</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Autoclaves(non fun)</td> <td>1</td> <td>23</td> <td>12046</td> </tr> <tr> <td>Microwave</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Hydroclave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Shredder(non fun)</td> <td>1</td> <td>11</td> <td>3701</td> </tr> <tr> <td>Needle tip cutter or</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Type of treatment Equipment	No of Units	Capacity Kg/day	Quantity treated or disposed In Kg per Annum	Incinerators	0	0	0	Plasma Paralysis	0	0	0	Autoclaves(non fun)	1	23	12046	Microwave	0	0	0	Hydroclave				Shredder(non fun)	1	11	3701	Needle tip cutter or			
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	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Blue Category (like plastic, glass etc.) 5717 kg per annum
	(iv) No of vehicles used for collection and transportation of biomedical waste.	:	1
	(v) Details of incineration ash and ETP sludge generated and disposal during the treatment of wastes in Kg per annum)		Quantity Generated Where disposal Incineration:- 0 Ash:- 0 ETP Sludge:- 0
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	Don't have any
	(vii) List of member HCF not handed over bio-medical waste.	:	0
6.	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period.	:	Yes
7.	Detail trainings conducted on BMW		
	(i) Number of training conducted on BMW Management.		2 batches
	(ii) Number of personnel trained		100
	(iii) Number of personnel trained at the time of induction		150
	(iv) Number of personnel not undergone any training so far.		0
	(v) Whether standard manual for training is available?		Yes
	(vi) Any other information)		No
8.	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		0
	(ii) Number of the persons affected		0
	(iii) Remedial Action taken (Please attach details if any)		
	(iv) Any Fatality occurred, details.		
9.	Are you meeting the standards of air Pollution from the incinerator?How many times in last year could not met the standards?		No incinerator
	Details of Continuous online emission monitoring systems installed		
10.	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year.		Yes
11.	It 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 Device attached with the incinerator.)

Certified that the above report is for the period from

Annual report for the year 2018-19(January 2018 to December 2018)

Date: 24.06.2019
Place: Bhubaneswar, D.H.H.

Name and Signature of the Head of the Institution
Dr. Praclip Kumar Khuntia,
D.M.O.(M.S.)-cum-
Superintendent
D.H.H., Bhubaneswar