## Form - IV (Seerule13) ANNUALREPORT

[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)]

SI. No.	Particulars		ير تر
1.	Particulars of the Occupier	:	
	(i)Name of the authorized person (occupier or operator of facility)		Dr. Pramod Kumar Praharaj
	(ii)Name of HCF or CBMWTF	:	Sani Clean
	(iii)Address for Correspondence	:	DISTRICT HEAD QUARTER HOSPITAL,KENDRAPARA
	(iv)Address of Facility		SAME AS ABOVE
	(v)Tel.No,Fax.No	:	06727-233062
	(vi)E-mail ID	:	hdtkendrapara2@gmail.com
	(vii)URL of Website		www.kendrapara.dhhodisha.in
	(viii)GPS coordinates of HCF or CBMWTF		Sachikant Kundu
	(ix)Ownership of HCF or CBMWTF	:	(State Government or Privateor Semi Govt. or any other)
	(x).Status of Authorization under the Bio-Medical	:	Valid up to 31.03.24
	Waste (Management and Handling) Rules		
	(xi).Status of Consents under Water Act and Air	:	applied
,	Act Type of Health Care Facility	:	
2.	(i)Bedded Hospital	:	No. of Beds:165
	(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		
		:	
3.	Details of CBMWTF		
	(i) Number healthcare facilities covered by CBMWTF		
	(ii)No of beds covered by CBMWTF	:	V and day
	(iii)Installed treatment and disposal capacity of	:	Kg per day

	(iv)Quantity of biomedical waste treated of By CBMWTF	or dis	posed :	k	Kg/day		
•	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)		per :		Category ategory :	: 1 7466.	2082.377 793
				White:		269.	
					ategory:		3.455
					al Solid waste:		). <del>4</del> 55
5	DetailsoftheStorage,treatment,transportat	tion.p	rocessingand			70000	
ļ	(i)Details of the on-site storage	:	Size :	Disposa	enty		
ļ	facility	Ĺ.					
1	lacinty	1	Capacity:				
	[	1		of on-sites to	o rage	:(cold	storage or
}			Any other	provision)			
	(ii)Details of the treatment or Disposal facilities		Type of equipme	treatment ent	No of unit s	Сар У Kg/ day	Quantity treated o r disposed in kg per annum
			Plasma Autocla Microw Hydroc Needle Sharps or conc <b>Deep b</b> Chemic disinfec Any ot equipm	Incinerators -0 Plasma Pyrolysis -0 Autoclaves -1 Microwave -1 Hydroclave Shredder-1 Needle tip cutter or destroyer- 13 Sharps encapsulation or concrete pit -2 <b>Deep burial</b> pits:-9 Chemical disinfection: Any other treatment equipment:			
	(iii)Quantity of recyclable wastes Sold to authorize recyclers after treatment in kg per annum.	:	Red Cate	gory (like	plastic, glasse	es etc.)-0	
ł	(iv) No of vehicles used for collection	:					
							Where
	waste (v)Details of incineration ash and				Quantity		disposed
- F					generated		alshosed

	During the treatment of wastes in Kg		Incineration
	per annum		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		Yes
	management committee? If yes, attach		
	minutes of the meetings held during		
	The		
	Reporting period		
7	Details trainings conducted on BMW		
	(i)Number of trainings conducted on		4 Batches
	BMW Management.		
	(ii)number of personnel trained		227
	(iii)number of personnel trained at		0
	The time of induction		y.
	(iv) number of personnel not		Yes
	Under gone any training so far		
	(v)whether standard manual or		
	Trainings available?		
	(vi)any other information)		
8	Details of the accident occurred		
	During the year		0
	(i)Number of Accidents occurred		0
	(ii)Number of the persons affected		0
	(iii)Remedial Action taken(Please		0
	Attach details if any)		0
	(iv)Any Fatality occurred, details.		
9.	Are you meeting the standards of air		Not Applicable
	Pollution from the incinerator? How		
	many times in last year could not met		
	The standards?		
	Details of Continuous online emission		
	Monitoring systems installed		N N
10	Liquid waste generated and treatment		Yes
	methods in place. How many time s		
·	you have not met the standards in a		
	Year?		
11	l'infaction method or		
11	is the distinction		

	standards?Howmanytimesyouhave 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 01-01-2024 to 31-12-2024

Dr. Pramod Kumar Praharaj

DMO (MS) Cum Superintendent, DHH, Kendrapara (Name and Signature of the Head of the Institution)

Date: 20/6125 Place Kendtrapara