Form- IV (See rule 13)

ANNUALREPORT

[Tobesubmittedtothe prescribedauthorityonorbefore30thJune everyyear for theperiodfromJanuarytoDecember ofthe precedingyear, bythe occupierof healthcare facility(HCF) or commonbio-medicalwaste treatmentfacility (CBWTF)

S.No.	Particulars		
1.	Particulars ofthe Occupier	:	
	(i) Name oftheauthorisedperson (occupier oroperator of facility)	:	Dr. N. Jaya Prakash
	(ii) Name ofHCFor CBMWTF	:	CHC Chandragiri
	(iii) Address forCorrespondence	:	Chandragiri
	(iv) Address ofFacility	:	Medical CHC Chandragiri
	(v) Tel. No, Fax. No	:	.
	(vi) E-mailID	:	chc. chandragiri@gmail.com
	(vii) URLof Website	:	
	(viii)GPScoordinates ofHCFor CBMWTF	:	-
	(ix) Ownership ofHCFor CBMWTF	:	State Govt or privat
	(x) Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	valid upto 31. 3.2025

S.No.	Particulars		
	(xi) Status of Consents under WaterAct and AirAct	:	Valid upto 31.3.2025
2.	Typeof Health CareFacility	:	
	(i) BeddedHospital	:	50 beded
	(ii) Non-bedded hospital (Clinic or Blood Bank orClinical Laboratoryor ResearchInstitute orVeterinaryHospital orany other)	:	NA
	(iii) License numberand its dateof expiry	:	
3.	Details of CBMWTF	:	MEDIAD Marketing Service
	(i) Number healthcare facilities covered byCBMWTF	:	
	(ii) No. ofbeds covered by CBMWTF	:	
	(iii) Installed treatment and disposalcapacityof CBMWTF:	:	
	(iv) Quantityof biomedicalwaste treated ordisposed by CBMWTF	:	
4.	Quantityofwastegenerated or disposed in Kgper annum (on monthlyaveragebasis) (#***Interpretation –MonthwiseandTotal AnnualQuantity)***	:	Yellow Category: 62,972.gm. Red Category: 39.344 gm. White: 286.16 gm. Blue Category: 21.232 gm Total Waste Generated: 152.164 gm General Solid waste: 92.500gm.
5.	Details of theStorage, treatment, transportation, processingandDisposalFacility #***Interpretation– Only Point No. (vi) isto be filledbythe (Hospital)Occupier (if wasteis being handed overto the operator ofcommon Bio-medicalWaste treatmentfacility)&restofthe points are for the operatorofcommon Bio-medicalWastetreatmentfacility.***		

<table>
<tr><th>S.No.</th><th>Particulars</th><td></td><td></td></tr>
<tr><td rowspan="3"></td><td rowspan="3">(i) Details of theon-sitestorage facility</td><td></td><td>Size:</td></tr>
<tr><td></td><td>Capacity:</td></tr>
<tr><td></td><td>Provision of on-sitestorage: (cold storageor anyother provision)</td></tr>
<tr><td></td><td>(ii)Disposal facilities</td><td></td><td><table>
<tr><th>Typeof treatment equipment</th><th>No. of units</th><th>Capacity Kg/day</th><th>Quantity treatedor disposedin kg per annum</th></tr>
<tr><td>Incinerators</td><td></td><td></td><td></td></tr>
<tr><td>Plasma Pyrolysis</td><td></td><td></td><td></td></tr>
<tr><td>Autoclaves</td><td></td><td></td><td></td></tr>
<tr><td>Microwave</td><td></td><td></td><td></td></tr>
<tr><td>Hydroclave</td><td></td><td></td><td></td></tr>
<tr><td>Shredder</td><td></td><td></td><td></td></tr>
<tr><td>Needletipcutter or destroyer</td><td></td><td></td><td></td></tr>
<tr><td>Sharps encapsulationor concrete pit</td><td></td><td></td><td></td></tr>
<tr><td>Deepburialpits:</td><td></td><td></td><td></td></tr>
<tr><td>Chemical disinfection:</td><td></td><td></td><td></td></tr>
<tr><td>Any other treatment equipment:</td><td></td><td></td><td></td></tr>
</table></td></tr>
<tr><td></td><td>(iii)Quantityofrecyclablewastes soldto authorized recyclers after treatment in kgperannum.</td><td></td><td>Red Category(likeplastic, glass etc.)</td></tr>
<tr><td></td><td>(iv)No ofvehicles used for collection and transportation ofbiomedical waste</td><td></td><td></td></tr>
<tr><td></td><td>(v)Details of incineration ash and ETP sludgegenerated and disposed duringthe treatment of wastes in Kgperannum</td><td></td><td><table>
<tr><th></th><th>Quantity generated</th><th>Where disposed</th></tr>
<tr><td>Incineration Ash</td><td></td><td></td></tr>
<tr><td>ETPSludge</td><td></td><td></td></tr>
</table></td></tr>
<tr><td></td><td>(vi) Name ofthe CommonBio-Medical Waste Treatment FacilityOperator through which wastes aredisposed of</td><td></td><td>Golden Eagle Waste Management Co.
Mediad Marketing Services</td></tr>
</table>

S.No.	Particulars		
	(vii) Listof member HCFnot handed over bio-medicalwaste		NA
6.	Doyou havebio-medicalwaste managementcommittee?Ifyes, attach minutes of the meetings held duringthereportingperiod		.
7.	Details trainingsconducted on BMW		
	(i) Number of trainings conducted onBMW Management.		02.
	(ii) numberof personnel trained		40
	(iii) numberof personnel trained at thetime ofinduction		40
	(iv) numberof personnel not undergone anytrainingso far		NiL
	(v) Whetherstandard manual for trainingis available?		Yes.
	(vi) anyother information)		
8.	Details of theaccident occurred duringtheyear		
	(i) Number ofAccidents occurred		
	(ii) Number ofthe persons affected		
	(iii) Remedial Action taken (Please attach details if any)		
	(iv) AnyFatalityoccurred, details		
9.	Areyou meetingthe standards of air Pollution from theincinerator?How manytimes in lastyear could notmet the standards?		NA
	Details of Continuous online emission monitoringsystems installed		NA

S.No.	Particulars		
10.	Liquid wastegenerated and treatment methods in place. Howmanytimes you havenot met thestandards in a year?		0
11.	Is the disinfection method or sterilizationmeetingthe log4 standards?Howmanytimesyou have not met thestandards in ayear?		
12.	Anyother relevant information		

Certified that the above report is forthe periodfrom ~~1 Jan.2016 to 31 Dec.2016.~~

1 Jan 2024 to 31.Dec.2024

Date: 31/12/24

Place: Chandragiri

Name and Signatureof theHead of theInstitution

Medical Officer
CHC Chandragiri