

OFFICE OF THE SUPERINTENDENT, CHC KANAS, PURI

Phone No. 06752 - 240415, Email- kanaschc@gmail.com



(An ISO 9001-2015 Certified Hospital)

Date 09.09.2921

To

The Senior Scientist, Odisha State Pollution Cotrol Board, Paryabaran Bhawan, Bhubaneswar

Sub: Sumission of Annual report of CHC Kanas for the period from 01-01-2020 to 31-12-2020

Sir,

I am submitting herewith Annual Bio Medical Waste Management Report of CHC Kanas for the period from 01-01-2020 to 31-12-2020.

Yours faithfully,

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 (CBWTF)]

SI. No.	Particulars		
1.	Particulars of the Occupier (occupier or :operator of facility)	100	
1	(i) Name of the authorised person		Medical Officer I/C CHC Kanas, Puri
	(ii) Name of HCF or CBMWTF	4	CHC Kanas
	(iii) Address for Correspondence	;	AT/PO- Kanas, Puri
	(iv) Address of Facility		Kanas, Puri -752017
	(v)Tel. No, Fax. No	·	06752240415
	(vi) E-mail ID		kanaschc@gmail.com
	(vii) URL of Website		www.kanaschepuri.in
	(viii) GPS coordinates of HCF or CBMWTF		
	(ix) Ownership of HCF or CBMWTF		State Govt. Owned Hospital
100000000000000000000000000000000000000	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	13	Authoriseation No. 10928 dated 18/10/2019 valid up to 31/03/2024 Applied for Renewal on 20/03/2019 online
	(xi). Status of Consents under Water Act and Air Act	·	N.A.
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. Of Beds- 16 nos

	(ii) Non-bedded hospital		at .	•		
	(Clinic or Blood Bank or Clinical Laborator Institute or Veterinary Hospital or any oth	y or Re	esearch			
	(iii) License number and its date of expiry					
3.	Details of CBMWTF			:		
	(i) Number healthcare facilities covered CBMWTF	d by	ko			
	(ii) No of beds covered by CBMWTF			88		
	(iii) Installed treatment and disposal capa CBMWTF:	city of	f	1	Kg per day	
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF Quantity of waste generated or disposed in Kg per		100	_ Kg/day		
4.					Yellow Category: 240kg	
	annum (on monthly average basis)				Red Category: 1440 kg	
					White: 360 kg	
					Blue Category: 570kg	
					General Solid waste: 1.5ton	
5	Details of the Storage, treatment, transportation, processing and Disposal Facility					
	(i) Details of the on-site storage facility			×		
		:	Capacit	y: Pr	rovision of on-site storage : (cold storage or	
			any othe public ar	r prov	ision)- Normal Storage Room not easy to acess imals	

disposal facilities		Type of treatment equipment	No of units	Capacity Kg/ day	Quantity Treated or disposed in kg per annum
		Incinerators			
		incinerators	0	0	0
		Plasma Pyrolysis	0	0	0
		Autoclaves	1	0.5	18
		Microwave	0	0	0
		Hydroclave	0	0	0
		Shredder	0	0	0
5		Needle tip cutter or Destroyer Sharps	2	1	5
		encapsulation or	0	0	0
		concrete pit	2	3kg	360kg
		Deep burial pits:	2	5kg	1440kg
		Chemical disinfection:		1% disinf ectio n of sharp waste	8
(iii) Quantity of recyclable wastes sold to authorize recyclers after treatment in kg per annum.		Any other treatment equipment: Red Category (like plast 2015 kg)		tc.)	2
(iv) No of vehicles used for collection and transportation of biomedical waste	÷	Transported by M/s. Ma		urga Enter	prises

(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg		Quantity generated	Where disposed	
per annum	Incineration Ash	0	0	
	ETP Sludge	0	0	

(vi) Name of the Common Bio-:
Medical Waste Treatment Facility
Operator through which wastes are
disposed ofNot Available

(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 periodYes,
- 7 Details trainings conducted on BMW

(i) Number of trainings conducted on BMW Management -

5

	(ii) number of personnel trained	12
	(iii) number of personnel trained at	12
	the time of induction	
	(iv) number of personnel not	3
	undergone any training so far	
	(v) whether standard manual for	Yes
	Training is available?	
	(vi) any other information)	
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	

(0)((0)	awarda (danada (domen))		
l	(iv) Any Fatality occurred, details.		
y. 10	Pollution from the incinerator? How		*
	many times in last year could not met		N.A
	CONTRACTOR OF THE CONTRACTOR O		
	Details of Commons online emission		
	monitoring systems installed		NA
10	Limited section government and made to anti-	A September 1	
	Methods in place. How many times		Yes meet the standard
	you have not met the standards in a		
	Year?	- MOMO	
11	Is the disinfection method or		\$ - 582 ⁸
	sterilization meeting the log 4		Yes
	Standards? How many times you have	cle mean	
	not met the standards in a year?		
12	Any other relevant information	-	(Air Pollution Control Devices attached with the
	1	Î	Incinerator) (N.A)

Certified that the above report is for the period from 1st January 2020 to 31st December 2020.

Date: 09-09-2021

Place - Kanas

Superintendent MO I/COHC KARAS

Name and Signature of the Head of the Institution