

OFFICE OF THE CHIEF DISTRICT MEDICAL & PUBLIC HEALTH OFFICER, SUNDARGARH



	Letter No				Date 62/01/25
To,	The Dighi	9 10	- done sonc	i Manager	
		-glorg	03/	•	
Sub: I	Request to upload a	annual repo	ort of Bio Medical Was	te Management report of DHH	,Sundargarh.
	With reference	to the sub	bject cited above it is	to state that as per Bio Medi	ical Waste Guideline the annual
repor	t of BMWM should	d be uploa	ded in district web site	e.Hence I am submitting the da	ata(Annual report for the period
from	January-2024 to De	ecember-20	024) and requested to	upload the same in the district	web site.
Encl-	This is for your I Annual report BMV	kind inform	nation and early action	•	
				Yours faithfully,	1
				2 mar	11.21
			District	Medical Officer (MS)-cum	
Mem	10 No: 20			DHH, Sundarga Dt: 62/01/25	rh.
		d to the D	PHO, Sundargarh for	kind information	1
				5 200	d 1.21
			District	Medical Officer (MS)-cum-	Suprintendant,
	_			DHH, Sundargarh	
Mem	o No: 21	_		Dt: 02/01/25	
	Copy submitted	d to the CI	OM&PHO, Sundarga	rh for kind information.	
				Durand	·21
			District Me	edical Officer (MS)-cum-Su	
				DHH, Sundargarh.	,
Memo	o No: 22	_		Dt: 02/01/25	
	Copy submitted	to the Dir	rector of Public Heal	th ,Odisha,Bhubaneswar for	
				D ward	11.21
			District	Medical Officer (MS)-cum-	-Suprintendant,
				DHH, Sundargarh	

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

SI.	Particulars			
No.		T		
1.	Particulars of the Occupier	_		
	(i) Name of the authorised person (occupier or operator of facility)	:		
	operator of facility)	:	DR. PRADEEP KUMAR	
	(ii) Name of HCF or CBMWTF		PRASAD	
	(iii) Address for Correspondence	:	DHH, SUNDARGARH	
	(iv) Address of Facility	:	DHH SUNDARGARH ODISHA ,7	F1000
			DHH, SUNDARGARH, ODISHA,	
	(v)Tel. No, Fax. No	:	9439999168	7400
	(vi) E-mail ID (vii) URL of Website	:	hat Sundargarch @ Yahoo . in	
	(viii) GPS coordinates of HCF or CBMWTF			
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or	
	(v) Status of Authorization		Semi Govt. or any other)	
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation 12650 / 12.08.24 No.:	
	(vi) Status of Comment 1 W		valid up to 31.93:25	
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31, 0%, 200	
<u>.</u>	Type of Health Care Facility		No-3843	
	(i) Bedded Hospital	:		
	•	:	No. of Beds:330	
	(ii) Non-bedded hospital	:		
	(Clinic or Blood Bank or Clinical Laboratory or		NA	
	Research Institute or Veterinary Hospital or any			
	other)			
	(iii) License number and its date of expiry		NA	
	Details of CBMWTF	:	1 MF1	
	(i) Number healthcare facilities covered by CBMWTF	:		
	(ii) No of bcds covered by CBMWTF			
	(iii) Installed treatment and disposal capacity of	:		
	CBMWTF:		NA Kg per day	

_	(iv) Quantity of biomedia		
	(iv) Quantity of biomedical waste treating CBMWTF	ated or	or disposed : NA Kg/day
4.	Quantity of waste generated or disp annum (on monthly average basis)	osed i	Red Category: 1668.895
			White: 119.886
			Blue Category: 814.385
5	Details of the Standard		General Solid waste: 21380 Kg
	Details of the Storage, treatment, trans (i) Details of the on-site storage	-	
	(i) Details of the on-site storage facility	: :	Size: UBO Saft.
	lacinty		Capacity: 160 V9
			Provision of on-site storage : (cold storage or
			any other provision)
	(ii) Details of the treatment or	:	Type of treatment No Cap Quantity
	disposal facilities		equipment of acit treatedo unit y r
			s Kg/ disposed
			day in kg
			per
			annum
			Incinerators Hounded to
			Plasma Pyrolysis QS Agency
			Autoclaves treated in the
		1	Microwave CBMWTP
			Hydroclave
			Shredder
			Needle tip cutter or . 30
			destroyer - 02 Sharps
			encapsulation or -
			concrete pit
			Deep burial pits: - 02
	ļ		Chemical Liquid waite manage
	1		disinfection: waite maray
	. •		Any other treatment - 10 Clow Cost No
			equipment:
	(iii) Quantity of recyclable wastes	:	Red Category (like plastic, glass etc.)
	sold to authorized recyclers after		Handed to OS Agency
	treatment in kg per annum.		33 17
	(iv) No of vehicles used for collection : and transportation of biomedical		
- 1			03
_	waste		0 2
- 1	(v) Details of incineration ash and		Quantity Where
\top_1	ETP sludge generated and disposed		generated disposed

/		
	during the treatment of wastes in Kg	Incineration Nil
	per annum	Ash Nel Descore by
	l 1°	ETP Sludge 46 324 kg Dispose by
	(vi) Name of the Common Bio-	: MIS MEDIAID MARKETING
	Madical Waste Treatment Facility	000 1000
	Operator through which wastes are	SERVICES, DOSK
	disposed of	
- 1	(vii) List of member HCF not handed	A 111
- 1	over bio-medical waste.	
- }	6 Do you have bio-medical waste	
	management committee? If yes, attach	1 1
	minutes of the meetings held during	Yes
	the reporting period	
-	7 Details trainings conducted on BMW	
	(i) Number of trainings conducted on	
	BMW Management.	8
1	(ii) number of personnel trained	240
	(iii) number of personnel trained at	
	the time of induction	70
	(iv) number of personnel not	28
	undergone any training so far	
	(v) whether standard manual for	Yes, CPPT, 60p, Posters)
	training is available?	
	(vi) any other information)	
-	Details of the accident occurred	Needle Stick injury
8	during the year	Metale Secon 6 12-7
	(i) Number of Accidents occurred	OL .
	(ii) Number of the persons affected	
	(iii) Remedial Action taken (Please	followed Needle Steek enjury
-		Reporting Protocol & PEP Anotocol
	attach details if any)	N0
, .	(iv) Any Fatality occurred, details.	NA, As it is Handed by
9.	Are you meeting the standards of air	ICM, PIS ED D
ĺ	Pollution from the incinerator? How	0s Agency
	many times in last year could not met	
	the standards?	20 - 10
	Details of Continuous online emission	Yes Charcode)
	monitoring systems installed	STP & LOW Cost model Tank.
10	Liquid waste generated and treatment	STY 8 LOW COST MOCKET
	methods in place. How many times	Au time Normal resport
	you have not met the standards in a	received .
	year?	
11	Is the disinfection method or	
	sterilization meeting the log 4	

12 Any other relevant information : (Air Pollution Control Devices attached with the Incinerator)	standards? How many times you have not met the standards in a year? 12 Any other relevant information .		(Air Pollution Control Devices attached with the Incincrator)
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Certified that the above report is for t	he period from
01, 01, 2	024 10 31 12 2024
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