

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)]

| Sl. No. | Particulars | | |
|--|---|---|---|
| 1. | Particulars of the Occupier | | |
| | (i) Name of the authorised person (occupier or operator of facility) | : | DR.T.BALAJI |
| | (ii) Name of HCF or CBMWTF | : | BALAJI HOSPITAL |
| | (iii) Address for Correspondence | : | 244, SAMBA STREET, TENKASI - 627 811. |
| | (iv) Address of Facility | : | 244, SAMBA STREET, TENKASI - 627 811. |
| | (v) Tel. No, Fax. No | : | 04633 - 223111 |
| | (vi) E-mail ID | : | balajihospital1@gmail.com |
| | (vii) URL of Website | : | www.balajihospital.org |
| | (viii) GPS coordinates of HCF or CBMWTF | : | - |
| | (ix) Ownership of HCF or CBMWTF | : | DR.T.BALAJI |
| | (x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules | : | Authorisation No: 19BAD25816237 valid up to 31.03.2021 |
| (xi). Status of Consents under Water Act and Air Act | : | Consent No: 190514292417 Valid up to: 31.03.2021 | |
| 2. | Type of Health Care Facility | : | PRIVATE HOSPITAL - BEDDED |
| | (i) Bedded Hospital | : | No. of Beds: 20 Nos |
| | (ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other) | : | NA |
| | (iii) License number and its date of expiry (Clinical Establishment No) | : | License No: TNVLALL20190002367 Date of Expiry : 09.10.2024 |
| 3. | Details of CBMWTF | : | M/S.Aseptic Systems BMW Company, Tirunelveli Dt. |
| | (i) Number healthcare facilities covered by CBMWTF | : | NA |
| | (ii) No of beds covered by CBMWTF | : | NA |
| | (iii) Installed treatment and disposal capacity of CBMWTF: | : | _____ Kg per day NA |
| | (iv) Quantity of biomedical waste treated or disposed by CBMWTF | : | _____ Kg/day NA |
| 4. | Quantity of waste generated or disposed in Kg per annum (on monthly average basis) JANUARY 2019 TO DECEMBER 2019 | Yellow Category | : 347.15 Kg/Yr |
| | | Red Category | : 297.61 Kg/Yr |
| | | White | : 103.4 Kg/Yr |
| | | Blue Category | : 125.75 Kg/Yr |
| | | General Solid waste: | |

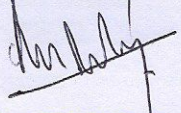
| | | | | | |
|--|---|--|---------------------------|------------------------|---|
| 5 | Details of the Storage, treatment, transportation, processing and Disposal Facility | | | | |
| (i) Details of the on-site storage facility | : | Size :- | | | |
| | | Capacity :- | | | |
| | | Provision of on-site storage: (cold storage or any other provision) | | | |
| (ii) Details of the treatment or disposal facilities | : | Type of treatment equipment | No of units | Capacity Kg/day | Quantity treated or disposed in kg per annum |
| | | Incinerators | } | | |
| | | Plasma Pyrolysis | | | |
| | | Autoclaves | | | |
| | | Microwave | | | |
| | | Hydroclave | | | |
| | | Shredder | | | |
| | | Needle tip cutter or destroyer | | | NA |
| | | Sharps encapsulation or concrete pit | | | |
| | | Deep burial pits: | | | |
| | | Chemical disinfection: | | | |
| | | Any other treatment equipment: | | | |
| | | | | | |
| | | | | | |
| (iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per | : | Red Category (like plastic, glass etc.) NA | | | |
| (iv) No of vehicles used for collection and transportation of biomedical waste | : | Disposed through | | | CBMWTF |
| (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum | : | Incineration Ash ETP Sludge | Quantity generated | Where disposed | |
| (vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of | : | M/S.Aseptic Systems BMW Company, A65, 5th cross street, NGO Colony, Tirunelveli - 627 110. | | | |
| (vii) List of member HCF not handed | : | NA | | | |

| | | | |
|----|---|---|----|
| 6 | Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period | : | NA |
| 7 | Details trainings conducted on BMW | : | |
| | (i) Number of trainings conducted on BMW Management. | : | |
| | (ii) number of personnel trained | : | |
| | (iii) number of personnel trained at the time of induction | : | |
| | (iv) number of personnel not undergone any training so far | : | |
| | (v) whether standard manual for training is available? | : | |
| | (vi) any other information) | : | |
| 8 | Details of the accident occurred during the year | : | |
| | (i) Number of Accidents occurred | : | |
| | (ii) Number of the persons affected | : | |
| | (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? | : | |
| | 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? | : | |
| 11 | Is 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 | : | |

Certified that the above report is for the period from 01.01.2019 to 31.12.2019

Name and Signature of the Head of the Institution

Date: 28.01.2020
Place: Tenkasi


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