

OFFICE OF THE MEDICAL OFFICER I/C CHC, KALIMELA

Email <u>-chckalimela@gmail.com</u> Phone No:- 06850-272104



Letter No. 91 / NHM/22-23

Dated 29.01.2024

To

The Regional Director, State Pollution Control Board, Rayagada, Odisha

Sub: - Submission of annual Bio Medical Waste Disposal Report.

Sir,

Herewith I am sending the annual Bio Medical Waste Disposal Report for the period from 01.01.2023 to 31.12.2023.

This is for favor of your kind information & necessary action.

Yours faithfully,

Enclosure:- Three pages annual report of Bio waste Medical.

Medical Officer I/C CHC Kalimela Dist:- Malkangiri

Memo No:-92

Dated 29.01.2024

Copy submitted to the Chief District Medical Officer, Malkangiri for favour of your kind information & necessary action.

Medical Officer I/C CHC, Kalimela Dist:- Malkangiri

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From-IV See Rule -13 Annual Report

(Biomedical Waste Management rule-2016)

[To be submitted to the prescribed authority on or before 30the June every year for the period from January to December of the preceding year , by the occupier of health care facility (HCF) or bio-medical waste treatment facility CBWTF)]

SI.	Particulars				
No	1				
1	Particulars of the occupiers				
	(i)Name of the authorized person(occupier or operator of facility)		DR. Muktikanta Mallick, Medical Officer, I/C, CHC Kalimela.		
	(ii) Name of the HCF or CBMWTF		COMMUNITY HEALTH CENTER KALIMELA		
	(iii) Address for Correspondence		AT:- KALIMELA, PO:- KALIMELA, BLOCK:- KALIMELA, DIST:- MALKANGIRI, ODISHA, 764047		
50	(iv) Address of Facility		AT:- KALIMELA, PO:- KALIMELA, BLOCK:- KALIMELA, DIST:- MALKANGIRI, ODISHA, 764047		
	(v) Tel. No, Fax. No	5 1 2 2	9439989439		
	(vi) E-mail ID	2 B 5	chckalimela@gmail.com		
	(vii) GPS coordinates of HCF or CBMWTF	2			
	(ix) Ownership of HCF or CBMWTF		STATE GOVERNMENT		
	(x) Status of Authorization under the Bio-		Authorization No: 111/IND-IV-BW-911		
	(Medical waste Management and Handling)		NO:-3035482/SPCB/AUTHORISATION		
	Rules		BIOMEDICAL WASTE) DATE: 04.01.21		
	4		valid up to : 31.03.2023, Renewal		
	*		applied on Dt. 20.02.23, Application No-4736619		
2	Type of health Care Facility		BEDDED HOSPITAL		
	(i)Bedded Hospital		No. of beds: 30		
	(ii)Non Bedded Hospital (Clinic or Blood Bank, Clinical Laboratory or Research Institute or Veterinary Hospital or any other)		BLOOD STORAGE UNIT		
	(iii)License number and its date of expiry	0	Not Available		
3	Details of CBMWTF		9 4		
	(i) Number healthcare facilities covered by CBMWTF	p	01		
	(ii) No of beds covered by CBMWTF		30		
	(iii) Installed treatment and disposal capacity of CBMWTF	=			
	(iv)Quantity of Bio medical waste treated or disposed by CBMWTF				
4	Quantity of waste generated or disposed in		Yellow Category : 90 KG/PM		
	Kg per annum (on monthly average basis)	:	Red Category : 110/KG/PM		
	(2.1.11.01.01.1) 4.1.14.00		White: 9 KG/PM		
			Blue Category : 60 KG/PM		
			General solid Waste: 180 KG/PM		
5	Details of the storage, treatment, transportation	, processi			

	(i)Details of the on-site storages facility	Dr.	Size:				
			Capacity				
			Provision of on-site storage) cold storage				
	*		or any other provision				
1 1 2	(ii) Disposal Facilities		Type of treatment	No of	Capacit y Kg /	Quan	
			equipment	unit	Day	d or dispo ed in Kg pe annu m	
			Incinerators	1	0.200G M	1400 KG	
			Plasma				
		20	Pyrolysis				
			Autoclaves			E 6	
			Microwave				
		5	Hyroclave Shredder				
			Needle tip	4	.1 KG		
			cutter or destroy	_	.T KG	58 KG	
			Sharps encapsulation or concrete pit	e			
			Deep burial pits:	02	1.2 KG	1300	
		5	Chemical disinfection:	04	10 LTRS.	KG 2800 LTRS	
			Any other treatment equipments			2 1	
	(iii)Quantity of recyclable wastes sold to authorize recyclers after treatment in Kg per annum.	9	Red Category 14	ory 1437.95 Kg (Like plasti glass, etc) NIL			
	(iv) No of vehicles used for collection and transportation of bio medical waste		01	2 2		2	

-		T	T				
	(v)Details of incineration ash and ETP sludge generated and disposed during the treatment of waste in Kg per annum.	Incineration Ash ETP Sludge	Quantity generated 58 KG	Where disposed BURIAL PIT			
361	(vi)Name of the common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of						
	(vii)List of members HCF not handed over bio- medical waste						
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period.	YES, 08.07.2023					
7	Details training conducted on BVMW			***			
	(i)Number of training conducted on BMWM Management	01					
7. 1	(ii)Number of personnel trained		42				
	(iii)Number of personnel trained at the time of induction	42					
	(iv)Number of personnel not undergone any training so far	42					
	(v) Whether standard manual for training is available?	YES					
	(vi)Any other information	NO					
8	Details of the accident occurred during the year.	NO					
	Number of Accidents occurred	° 0					
	Number of the persons affected	0					
	Remedial Action taken (Please attach details if any)	NIL					
	Any Fatality occurred, details.	NIL					
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standard?	NIL					
	Details of Continuous online emission monitoring systems installed	NO					
10.	Liquid waste generated and treatment methods in [place. How many times you have not met the standards in a year?	Laboratory, Dressing Room, Labor Room, OT, NBSU, Sterilisation Room. NIL					
11.	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	Yes, NIL					
12.	Any others relevant information	Air Pollution Cor with the Incinera		attached			

Certified that the above report is for the periods from

1ST JANUARY 2023 TO 31ST DECEMEBER 2023

Name and Signature of the Institution CHC, KALMELA

Date: 29,01,2021
Place: kalimela