

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) | : | Sr. Juliana D'Cunha Administrator |
| | (ii) Name of HCF or CBMWTF | : | KURJI HOLY FAMILY HOSPITAL |
| | (iii) Address for Correspondence | : | P.O. Sadaquat Ashram, Patna 800010, Bihar |
| | (iv) Address of Facility | : | P.O. Sadaquat Ashram, Patna 800010, Bihar |
| | (v) Tel. No, Fax. No | : | 0612-2262156/2262540/2264117 Fax: 0612 2268374 |
| | (vi) E-mail ID | : | khfhosp@gmail.com |
| | (vii) URL of Website | : | www.kurjiholyfamilyhospital.com |
| | (viii) GPS coordinates of HCF or CBMWTF | : | 25.6357° N 85.1121° E |
| | (ix) Ownership of HCF or CBMWTF | : | Private |
| | (x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules | : | Authorisation No.: BMW/52/01/B-309 valid upto 31/7/2022 |
| | (xi). Status of Consents under Water Act and Air Act | : | Valid upto 31/7/2022 |
| 2. | Type of Health Care Facility | : | |
| | (i) Bedded Hospital | : | No. of Beds: 300 |
| | (ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other) | : | - |
| | (iii) License number and its date of expiry | : | - |
| 3. | Details of CBMWTF | : | |
| | (i) Number healthcare facilities covered by CBMWTF | : | - |
| | (ii) No of beds covered by CBMWTF | : | - |
| | (iii) Installed treatment and disposal capacity of CBMWTF: | : | _____ Kg per day |
| | (iv) Quantity of biomedical waste treated or disposed by CBMWTF | : | _____ Kg/day |
| 4. | Quantity of waste generated or disposed in Kg per annum (on monthly average basis) | : | Yellow Category : 15000 Red Category : 2100 White: Blue Category : 3800 General Solid waste: 36000 |

बिहार राज्य प्रदूषण नियंत्रण परिषद्
पाटलीपुत्र औद्योगिक क्षेत्र, पटना-10
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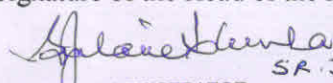
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|--|---|--|--------------------|---|--|
| 5 | | Details of the Storage, treatment, transportation, processing and Disposal Facility | | | |
| (i) Details of the on-site storage facility | : | Size : 2 Rooms | | | |
| | : | Capacity : 10 x 12 sq ft. | | | |
| | : | Provision of on-site storage : (cold storage or any other provision) | | | |
| disposal facilities | | Type of treatment equipment | No of systems | Capacity | Quantity treated or disposed in kg per annum |
| | | Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or destroyer 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 annum. | : | Red Category (like plastic, glass etc.) Nil | | | |
| (iv) No of vehicles used for collection and transportation of biomedical waste | : | One | | | |
| (v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum | | | Quantity generated | Where disposed | |
| | | Incineration Ash ETP Sludge | 360Kg. | treated using complete biological mode and then used as fertilizer for garden | |
| (vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of | : | CBWTF Indira Gandhi Institute of Medial Sciences, Sheikhpura, Patna. Service provider Ms. Sangam Mediserve Pvt. Ltd. | | | |
| (vii) List of member 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 Minutes attached |
| 7 | Details trainings conducted on BMW | |
| | (i) Number of trainings conducted on BMW Management. | 3 |
| | (ii) number of personnel trained | 200 |
| | (iii) number of personnel trained at the time of induction | 100 |
| | (iv) number of personnel not undergone any training so far | 10 (Newly joined staff) |
| | (v) whether standard manual for training is available? | Yes |
| | (vi) any other information) | |
| 8 | Details of the accident occurred during the year | Nil |
| | (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? | N/A |
| | Details of Continuous online emission monitoring systems installed | N/A |
| 10 | Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year? | ETP Plant |
| 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 |
| 12 | Any other relevant information | : (Air Pollution Control Devices attached with the Incinerator) |

Certified that the above report is for the period from January 2018 to December 2018

Name and Signature of the Head of the Institution

Date:
25/6/2019
Place:patna


SR. JULIANA D'UNHA
ADMINISTRATOR
KURJI HOLY FAMILY HOSPITAL
SADAQUAT ASHRAM
PATNA-800 010. BIHAR, INDIA