

**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 authorized person (occupier or : operator of facility)	:	BMOH, TAKI RURAL HOSPITAL
	(ii) Name of HCF or CBMWTF	:	SNG ENVIROSOLUTIONS OVT LTD
	(iii) Address for Correspondence	:	Taki Rural Hospital, Taki, North 24 Parganas, 743429.
	(iv) Address of Facility	:	Vill & PO- Taki, PS- Hasnabad, North 24 Parganas, pin-743429
	(v) Tel. No, Fax. No	:	8972322122
	(vi) E-mail ID	:	takirh.hasnabad@gmail.com
	(vii) URL of Website	:	NA
	(viii) GPS coordinates of HCF or CBMWTF	:	NA
	(ix) Ownership of HCF or CBMWTF	:	State Government
	(x). Status of Authorization under the Bio- Medical Waste (Management and Handling) Rules	:	Authorisation No.: C0118883 ..... ..... Valid upto: ...31.08.2023
	(xi). Status of Consents under Water Act and Air Act	:	Valid upto: 31.08.2023
2	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds: 50
	(ii) Non-bedded hospital	:	
	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 of health care facilities covered by CBMWTF	:	1 i.e. Taki Rural Hospital
	(ii) No. of Beds covered by CBMWTF	:	50
	(iii) Installed treatment and disposal capacity of CBMWTF;	:	4 Kg / day
	(iv) Quantity of bio medical waste treated or disposed by CBMWTF	:	_____ Kg / day
4	Quantity of waste generated or disposed in Kg per Annum (on monthly average basis)	:	<i>Yellow Category: 78Kg</i> <i>Red Category: 39 Kg</i> <i>White: 0.5 Kg</i> <i>Blue Category : 28 Kg</i> <i>General Solid Waste: 150Kg</i>
5	Details of the Storage, Treatment, Transportation, Processing and Disposal Facility		
	(i) Details of the on-site storage	:	Size:

	facility		Capacity:																																																				
			Provision of on-site storage : (Cold storage or any other provision)																																																				
	(ii) Disposal facilities		<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of Units</th> <th>Capacity Kg/day</th> <th>Quantity Treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr><td>Incinerators</td><td></td><td></td><td></td></tr> <tr><td>Plasma Pyrolysis</td><td></td><td></td><td></td></tr> <tr><td>Autoclaves</td><td>3 Kg/ Day</td><td></td><td>1095 Kg/ Annum</td></tr> <tr><td>Microwave</td><td></td><td></td><td></td></tr> <tr><td>Hydroclave</td><td></td><td></td><td></td></tr> <tr><td>Shredder</td><td></td><td></td><td></td></tr> <tr><td>Needle tip cutter or destroyer</td><td></td><td></td><td></td></tr> <tr><td>Sharps</td><td></td><td></td><td></td></tr> <tr><td>Encapsulation or concrete pit</td><td></td><td></td><td></td></tr> <tr><td>Deep burial pits</td><td></td><td></td><td></td></tr> <tr><td>Chemical disinfection:</td><td></td><td></td><td></td></tr> <tr><td>Any other treatment equipment: (Liquid Waste Management )</td><td>2 nos.</td><td>20kg/day</td><td>647 kg</td></tr> </tbody> </table>	Type of treatment equipment	No of Units	Capacity Kg/day	Quantity Treated or disposed in kg per annum	Incinerators				Plasma Pyrolysis				Autoclaves	3 Kg/ Day		1095 Kg/ Annum	Microwave				Hydroclave				Shredder				Needle tip cutter or destroyer				Sharps				Encapsulation or concrete pit				Deep burial pits				Chemical disinfection:				Any other treatment equipment: (Liquid Waste Management )	2 nos.	20kg/day	647 kg
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	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in Kg per annum	:	Red Category (like plastic, glass, etc.)																																																				
	(iv) No. of Vehicles used for collection and transportation of biomedical waste	:																																																					
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		<table border="1"> <thead> <tr> <th></th> <th>Quantity Generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr><td>Incineration</td><td></td><td></td></tr> <tr><td>Ash</td><td></td><td></td></tr> <tr><td>ETP Sludge</td><td></td><td></td></tr> </tbody> </table>		Quantity Generated	Where disposed	Incineration			Ash			ETP Sludge																																										
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	(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of																																																						
	(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																																																				

7	Details trainings conducted on BMW		
	(i) Number of trainings conducted on BMW Management		6
	(ii) Number of personnel trained		22
	(iii) Number of personnel trained at the time of induction		35
	(iv) Number of personnel not undergone any training so far		0
	(v) Whether standard manual for training is available?		Yes
8	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		0 (Zero)
	(ii) Number of persons affected		0 (Zero)
	(iii) Remedial Action taken (Please attach details if any)		NA
	(iv) Any Fatality occurred, details		0 (Zero)
9	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		NA
	Details of Continuous online emission monitoring systems installed		NA
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		Yes. 150 Times
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. 0 Time
12	Any other relevant information		NA

Certified that the above report is for the period from  
 .....JULY 2021 to JUNE 2022.....

Date:

31/07/22

Place:

TAKI

Name and Signature of the Head of the Institution

*Handwritten Signature*  
 31/07/22  
**Block Medical Officer of Health**  
**Hasnabad**  
**TAKI RURAL HOSPITAL**  
**North 24 Parganas**



উপস্থিত সভ্যগণের নাম/ Name of Members Present

৯১/৯.	S/w Susmita Das	১৭/১৭.
১০১/১০.	S/w T. ROY	১৮/১৮.
১১১/১১.	S/w. Paruli Khatun	১৯/১৯.
১২১/১২.	S/w Chhanda Baidya	২০/২০.
১৩১/১৩.	✓ S/w R. Basu	২১/২১.
১৪১/১৪.		২২/২২.
১৫১/১৫.		২৩/২৩.
১৬১/১৬.		২৪/২৪.

রেজল্যুশন / RESOLUTIONS ADOPTED

A meeting is held on 18.06.2022 in Take Rural Hospital. In this meeting BMOH and MO, Sister incharge, ICN, pharmacist, lab technician and other staffs are participated.

Resolution of the meeting.

- Hand washing should be maintained properly by everyone of the hospital and checked by ward sisters and ICN.
- Availability of Hypochlorite solution. always checked by ward sisters.
- Scavengers should ~~also~~ use PPE and checked by all nursing staffs.
- Lab reagents thrown keep Lab technician in proper way and that be checked by MO.
- BMOH training should be given by ICN.



• Availability of liquid soap must be checked by ward sisters and ICN.

• Gloves ~~are~~ should be put in ~~the~~ Red bucket by scavengers.

•

5.2022  
MOH  
to  
accepted

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and.

ion.

E.

hnician  
by.

*Signature*  
Block Medical Officer of Health  
HASNABAD  
TAKI RURAL HOSPITAL  
NORTH 24 PARGANAS