



OFFICE OF THE DISTRICT MEDICAL OFFICER (MS) CUM-
SUPERITENDENT, NUAPADA
ROGI KALYAN SAMITI, D.H.H., NUAPADA- 766105
TEL:- 06678223017 Mail:- dhhnuapada@gmail.com



Letter No 663

Date 27/4/2022

To,

The Member Secretary,
State Pollution Control Board
Paribesh Bhaban, A/118, Nilakantha Nagar
Unit-8, Bhubaneswar- 751002, Odisha

Sub:- Submission of Bio-Medical Waste management activities report for the period from 1st January 2021 to 31st December'2021 of DHH Nuapada.

Sir,

With reference to the subject cited above, I am submitting herewith the Annual Report of Bio-Medical Waste Management activities of District Head Quarter Hospital Nuapada for the year 2021 i.e period from 1st January 2021 to 31st December'2021

This is for favour of your kind information and necessary action.

Yours' faithfully

Prayash
27.4.22

DMO(MS)-cum Supdt.
DHH Nuapada

Memo No. 664 / Date 27/4/2022
Copy forwarded to the DIO NIC Nuapada for information. He is requested to up load the annual report in Nuapada District website.

Prayash
27.4.22

DMO(MS)-cum Supdt.
DHH Nuapada

Memo No. 665 / Date 27/4/2022
Copy forwarded to the Regional Officer SPCB Sambalpur Office for information and necessary action.

Prayash
27.4.22

DMO(MS)-cum Supdt.
DHH Nuapada

Memo No. 666 / Date 27/4/2022
Copy forwarded to the CDM & PHO Nuapada for kind information & necessary action.

Prayash
27.4.22

DMO(MS)-cum Supdt.
DHH Nuapada

Form – IV
(Sec 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)	:	Dr. Sudhisanjan Nayak DMO(CMS)-cum-Superintendent
	(ii) Name of HCF or CBMWTF	:	District Head Quarter Hospital Nuapada
	(iii) Address for Correspondence	:	At/PO/Dist - Nuapada, pin-766105
	(iv) Address of Facility	:	- do -
	(v) Tel. No, Fax. No	:	
	(vi) E-mail ID	:	dhhnuapada@gmail.com
	(vii) URL of Website	:	www.nuapada.h.c.in
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: 7543/SPCB/Authorisation ..Dated: 25/07/2019..... Valid upto: 31/03/2024
	(xi). Status of Consents under Water Act and Air Act	:	Valid upto: valid up to 31.03.2020 Applied for Renewal vide letter no. 495/ dt. 28.03.2022
2	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds: 170
	(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	:	-
	(ii) No. of Beds covered by CBMWTF	:	
	(iii) Installed treatment and disposal capacity of CBMWTF;	:	_____ 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)	:	Yellow Category: 10516kg, 236gm Red Category: 8154kg, 587gm White: 569kg, 261gm Blue Category: 3407kg, 773gm General Solid Waste:
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	Type of treatment equipment	No of Units	Capacity Kg/day	Quantity Treated or disposed in kg per annum
	Incinerators	-		
	Plasma Pyrolysis	-	-	
	Autoclaves	02	-	
	Microwave	-	-	
	Hydroclave	-	-	
	Shredder	01	-	
	Needle tip cutter or destroyer	23	-	
	Sharps	01	-	
	Encapsulation or concrete pit	2	-	
	Deep burial pits	3	-	
	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.)		
(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		Quantity Generated	Where disposed	
	Incineration	N/A		
	Ash	N/A		
	ETP Sludge	N/A		
(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				

Annual Report Bmwm

Mo 7

	Details trainings conducted on BMW		
	(i)	Number of trainings conducted on BMW Management	3
	(ii)	Number of personnel trained	120
	(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?	-
8	Details of the accident occurred during the year		
	(i)	Number of Accidents occurred	-
	(ii)	Number of 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		(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from
 ...1st January 2021... to ...31st December' 2021...

Prayank
27.4.22

Name and Signature of the Head of the Institution
 D.M.O.(MS)-cum-Superintendent
 D.H.H., Nuapada

Date: 27.04.2022
 Place: Nuapada