

From -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 biomedical waste treatment facility (CBMWTF)]

Sr. No.	Particulars	:
1.	Particulars of the Occupier	Dr Y.S.PGMC Nahan D.H.Somwarkar
	(i) Name of the authorized person (occupier or operator of facility)	
	(ii) Name of HCF or CBMWTF	Dr.Y.S.PGMC Nahan
	(iii) Address for Correspondence	- do -
	(iv) Address of Facility	- do -
	(v) Tel. No. Fax. No.	01702 - 222526
	(vi) E-mail ID	R.K.S.R.K.Nahan@gmail.com
	(vii) URL of Website	
	(viii) GPS coordinates of HCF or CBMWTF	
	(ix) Ownership of HCF or CBMWTF	(State Government of Private or Semi Govt. or any other)
	(x) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules.	Authorization No. Valid up to.....
	(xi) Status of Consents under Water Act and Air Act.	Valid up to:
2.	Type of Health Care Facility	Medical College
	(i) Bedded Hospital	No. of Beds 313
	(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	N/A
	(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

12/4/2024 0/0 Neg. Dept.
D No 275 Forward to M.S. Office
for N/A PRO
Chapay
15/04/2024
Dr YSPGMC, Nahan

4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	Yellow category: 9614.79 Kg Red Category: 10557.953 Kg White: 175.3 Kg Blue Category: 2218.27 KG General Solid waste 22507.313 KG																																																																												
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7.	Detail trainings conducted on BMW	YES
	(i) Number of training 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?	BMW WM Rules 2016 & Amendments
	(vi) Any other information	
8.	Details of the accident occurred during the year	Needle Pick injuries
	(i) Number of Accidents occurred	0.5 Needle Pick injuries
	(ii) Number of the persons affected	0.5
	(iii) Remedial Action taken (Please attach details if any)	Injuries referred to A&E & JCTC.
	(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?	— 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.	
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 Device attached with the Incinerator.)

*Certified that the above report is for the period from January 2023 to December 2023

Name and Signature of the Head of the Institution

Date:

Place: