

Form - IV
(Seerule13)
ANNUALREPORT

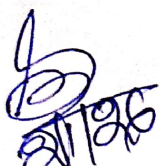
[To be submitted to the prescribed authority on or before 30th June every year for the period from January to December of the preceding year, by the occupier of health care facility (HCF)]

Sl. No	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	Dr. Soubhagya Rasmi ranjan samal
	(ii) Name of Health Care Facility		Community Health Centre Barbil
	(iii) Address for Correspondence		At/Po- Barbi I, Keonjhar, Odisha Pin -758035
	(iv) Address of Facility		At/Po- Barbi I, Keonjhar, Odisha Pin -758035
	(v) Tel.No, Fax.No		
	(vi) E-mail ID		Bpmu.barbil@gmail.com
	(vii) URL of Website		Chcbarbil.in
	(viii) GPS coordinates of Health Care Facility		
	(ix) Ownership of Health Care Facility		(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules		Authorisation No.: 1859/IND-IV-BW-660valid up to 31-03-2028.....
	(xi). Status of Consents under Water Act and Air Act		Valid upto:
2	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds:30 Bedded
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any	:	

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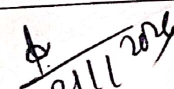
	other)																																		
	(iii) License number and its date of expiry																																		
3	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category: 80																																
			Red Category: 102																																
			White: 5kg																																
			Blue Category: 40 kg																																
			General Solid waste: 150kg																																
4	Details of the Storage, treatment, transportation, processing and Disposal Facility																																		
	(i) Details of the on-site storage facility		Size :																																
			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></td> <td></td> <td></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> </tbody> </table>	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum	Incinerators				Plasma Pyrolysis				Autoclaves				Microwave				Hydroclave				Shredder				Needle tip cutter or destroyer			
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			Sharps Encapsulation or concrete pit			
			Deep burial pits			
			Chemical disinfection			
			Any other treatment equipment			
	(iii) Quantity of recyclable wastes sold to authorised 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		Incineration & Ash ETP Sludge	Quantity Generated	where Disposed	
	(vii) List of member HCF not handed over bio-medical waste.					
5	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period					
6	Detail trainings conducted on BMW					
	(i) Number of trainings conducted on BMW Management.		2			
	(ii) number of personnel trained		35			
	(iii) number of personnel trained at the time of induction		60			
	(iv) number of personnel not undergone any training so far		64			
	(v) whether standard manual for					


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	training is available?		yes
	(vi) any other information)		
7	Details of the accident occurred during the year		
	(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.		
8	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not meet the standards?		NA
	Detail of Continuous online emission monitoring systems installed		
9	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		NA
10	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		
11	Any other relevant information		(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from Jan 2025- Dec 2025

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.....
.....

Institution

Name and Signature of the Head of the

[Handwritten Signature]

Date:
Place

Superintendent
CHC Barbil, Keonjhar

[Handwritten Signature]
2/1/26
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SCHEDULE I
(See Rule 5)

CATEGORIES OF BIO-MEDICAL WASTE

Waste Category No.	Waste Category (Type)	Treatment and Disposal [Option +]
Category No.1	Human Anatomical Waste (human tissues, organs, body parts)	Incineration @/deep burial*
Category No.2	Animal Waste (animal tissues, organs, body parts carcasses, bleeding parts, fluid, blood and experimental animals used in research, waste generated by veterinary hospitals, colleges, discharge from hospitals, animal houses)	Incineration @/deep burial*
Category No.3	Microbiology and Biotechnology Wastes (Wastes from laboratory cultures, stocks or specimens of micro-organisms live or attenuated vaccines, human and animal cell culture used in research and infectious agents from research and industrial laboratories, wastes from production of biologicals, toxins, dishes and devices used for transfer of cultures)	Local autoclaving/ micro-waving/incineration@
Category No.4	Waste sharps (Needles, syringes, scalpels, blades, glass, etc. that may cause puncture and cuts. This includes both used and unused sharps)	Disinfection (chemical treatment @@/autoclaving/microwaving and mutilation/shredding##
Category No.5	Discarded Medicines and Cytotoxic drugs (wastes comprising of outdated, contaminated and discarded medicines)	incineration@/destruction and drugs disposal in secured landfills
Category No.6	(Soiled) Waste (Items contaminated with blood, and body fluids including cotton, dressings, soiled waste, linen beddings, other material	incineration@ autoclaving/microwaving

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Waste Category No.	Waste Category (Type)	Treatment and Disposal [Option +]
Category No.7	Solid Waste (Wastes generated from disposable items other than the waste [sharps] such as tubings, catheters, intravenous sets etc.)	Disinfection by chemical treatment @@ autoclaving/microwaving and mutilation/shredding##
Category No.8	Liquid Waste (waste generated from laboratory and washing, cleaning, housekeeping and disinfecting activities)	Disinfection by chemical treatment and discharge into drains.
Category No.9	Incineration Ash (ash from incineration of any bio-medical waste)	Disposal into municipal landfill
Category No.10	Chemical Waste (Chemicals used in production of biomedical, chemicals used in disinfection, as insecticides etc.)	Chemical treatment @@ and discharge into drains for liquids and secured landfill for solids

@@ Chemicals treatment using at least 1% hypochlorite solution or any other equivalent chemical reagent. It must be ensured that chemical treatment ensures disinfection.

Mutilation/shredding must be such so as to prevent unauthorized reuse.

@ There will be no chemical pretreatment before incineration. Chlorinated plastics shall not be incinerated.

* Deep burial shall be an option available only in towns with population less than five lakhs and in rural areas.

[+ Option given above are based on available technologies. Occupier/operator wishing to use other State-of-the-art technologies shall approach the Central Pollution Control Board to get the standards laid down to enable the prescribed authority to consider grant of authorization]

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2/11/2014

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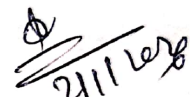
Annexture-11

BRIEF DESCRIPTION OF TREATMENT ACTIVITY

The various wastes are segregated at the point of Generation and kept in colour coded bins with Bi-o degradable bags containing 2/3rd covered. After 24 hours each bag is collected by the BMW worker and weighed in presence of supervisor smt. Suprava mohanta nursing officer I /Cand finally shifted to the BMW store room. These waste are handed over to CBWTF M/s Utkal Envirocare selected by CDM & PHO(K) for shifting of the waste within 48 hours.


21/1/26

Staff Nurse I/C
CHC barbil


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CHC barbil

BMW ANNUAL REPORT FOR THE YEAR 2025 OF CHC Barbell(Jan 2025 to Dec 2025)

CHC Barbil , Keonjhar

MONTH	CAT1	CAT2	CAT3	CAT4	CAT5	CAT6	CAT7	CAT8	CAT9	CAT10
Jan-25	22.15	Nil	Nil	3.09	Nil	51.001	88.099	9.35	Nil	11.25
Feb-25	15.225	Nil	Nil	1.772	Nil	36.859	93.687	10.325	Nil	13.65
Mar-25	18.225	Nil	Nil	1.084	Nil	47.375	85.773	15.65	Nil	12.35
Apr-25	13.52	Nil	Nil	1.657	Nil	48.74	84.211	21.45	Nil	10.25
May-25	11.525	Nil	Nil	2.946	Nil	44.859	80.617	14.55	Nil	9.65
Jun-25	21.52	Nil	Nil	1.215	Nil	39.742	89.548	12.32	Nil	14.23
Jul-25	18.62	Nil	Nil	1.466	Nil	41.366	106.726	14.32	Nil	11.32
Aug-25	22.65	Nil	Nil	1.187	Nil	39.863	94.359	18.23	Nil	11.25
Sep-25	18.254	Nil	Nil	1.274	Nil	41.654	93.219	11.32	Nil	13.45
Oct-25	19.55	Nil	Nil	0.736	Nil	40.003	91.829	15.12	Nil	16.32
Nov-25	15.632	Nil	Nil	1.085	Nil	38.773	80.757	10.82	Nil	18.23
Dec-25	12.325	Nil	Nil	0.418	nil	39.429	71.037	7.95	Nil	14.32
Total	209.196		0 0	17.93	0	509.664	1059.862	161.405	0	156.27

[Signature]
 nursing officer i/c
 CHC barbil

[Signature]
 Superintendent
 CHC barbil
Superintendent
CHC Barbil, Keonjhar