



OFFICE OF THE MEDICAL OFFICER I/c
BLOCK PROGRAMME MANAGEMENT SUPPORT UNIT, CHC-PADMAPUR
Email:bpmupadmapur@gmail.com Phone: 06857-266141



Letter No : 06 /NHM /Padmapur

Date : 05 / 01 /2025

To

The State Regional Officer
State Pollution Control Board
Rayagada

Sub: Regarding submission of Annual Report of Bio Medical Waste Management

Sir,

With reference to the subject cited above, I am submitting here with the annual report of Bio Medical Waste management of CHC Padmapur from 01.01.2024 to 31.12.2024.

This is for your kind information and necessary action.

Yours Faithfully


Medical officer I/c,
CHC-Padmapur

Memo no. 07 / Padmapur

Dated 05.01.2025

Copy Submitted to Chief District Medical & Public Health Officer, Rayagada for your kind information and necessary action.

Copy Submitted to the Regional Officer, SPCB, Bhubaneswar for your kind information and necessary action.


Medical officer I/c
CHC-Padmapur((Rayagada))

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)	:	Dr. Rutuparna Patnaek. Mo Yc, CHC Padmapur.
	(ii) Name of HCF or CBMWTF	:	CHC Padmapur.
	(iii) Address for Correspondence	:	At/PO - Padmapur, Dist - Rayagada
	(iv) Address of Facility	:	-do-
	(v) Tel. No, Fax. No	:	7539063246
	(vi) E-mail ID	:	bpmupadmapur@gmail.com
	(vii) URL of Website	:	NA
	(viii) GPS coordinates of HCF or CBMWTF	:	NA
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation 10550/SPCB/Andhra. 29/07/21 to 31/03/25valid up to
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: NA
2.	Type of Health Care Facility	:	Govt. Hospital.
	(i) Bedded Hospital	:	No. of Beds: 16
	(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	:	NA
	(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


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Dist- Rayagada

	(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 : Red Category : White: Blue Category : General Solid waste:																																																							
5	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) Details of the treatment or 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>2</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>1</td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td>3</td> <td></td> <td></td> </tr> <tr> <td>Sharps</td> <td>1</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>2</td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Any other treatment equipment:</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	2			Microwave				Hydroclave				Shredder	1			Needle tip cutter or destroyer	3			Sharps	1			encapsulation or concrete pit				Deep burial pits:	2			Chemical disinfection:				Any other treatment equipment:			
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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 :	One vehicle used by District (SHINE LTD.) for collection & transportation of BMD.																																																							
	(v) Details of incineration ash and ETP sludge generated and disposed :	<table border="1"> <thead> <tr> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>				Quantity generated	Where disposed																																																		
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 Medical Officer,
 CHC, Padmapur
 Dist- Rayachoti

	during the treatment of wastes in Kg per annum	Incineration Ash ETP Sludge
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	SHINE LAUNDRY SERVICES PVT. LTD BHUBANESWAR
	(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	02
	(i) Number of trainings conducted on BMW Management.	02
	(ii) number of personnel trained	28
	(iii) number of personnel trained at the time of induction	28
	(iv) number of personnel not undergone any training so far	0
	(v) whether standard manual for training is available?	YES
	(vi) any other information	-
8	Details of the accident occurred during the year	
	(i) Number of Accidents occurred	NIL
	(ii) Number of the persons affected	NIL
	(iii) Remedial Action taken (Please attach details if any)	NIL
	(iv) Any Fatality occurred, details.	NIL
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?	All times we have met standards for liquid waste management, Generation & treatment.
11	Is the disinfection method or sterilization meeting the log 4	YES


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 Dist- Rayagada

	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

.....01.01.2024 to 31.12.2024.....

Name and Signature of the Head of the Institution

Date: 03/01/2025
 Place: PADMAPUR.


 Medical Officer I/C
 CHC, Padmapur
 Dist- Rayagada

Month Wise Waste generate in Qty(In Kgs)-CHC PADMAPUR

Sl No	Name of the Month	Yellow			Red	Blue	White(PPC)
		Anatomical	Soiled	Total			
1	Jan-24	22.1	18.175	40.275	31.975	25.1	1.56
2	Feb-24	20.5	16.225	36.725	32.69	25.62	1.575
3	Mar-24	21.1	11.15	32.25	30.345	29.1	1.56
4	Apr-24	19.5	10.1	29.6	17.27	20.745	1.49
5	May-24	18.8	11.1	29.9	31.375	23.465	1.7
6	Jun-24	17.9	12.165	30.065	33.845	25.585	1.83
7	Jul-24	19.1	14.1	33.2	37.49	29.27	1.87
8	Aug-24	17.3	13.7	31	35.825	29.015	1.69
9	Sep-24	21.5	16.2	37.7	36.9	31.1	1.58
10	Oct-24	25.5	17.2	42.7	40.85	33.965	1.735
11	Nov-24	24.1	15.8	39.9	38.8	29.87	1.625
12	Dec-24	20.4	14.4	34.8	39.325	33.8	1.65
Total		247.8	170.315	418.115	406.69	336.635	19.865
Monthly Average		20.65	14.19	34.84	33.89	28.05	1.66


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