



OFFICE OF THE SUPERINTENDENT, MENDHASAL CHC, KHORDHA
BLOCK PROGRAMME MANAGEMENT UNIT MENDHASAL (NHM)
Department of Health and Family Welfare, Govt. of Odisha
E-Mail – chcmendhasal1@gmail.com MO I/C-9439997293, BPM-9439997300, BAM-94399977351 Tel/Fax-

Letter No:- 430

Date:- 28/12/24

To,

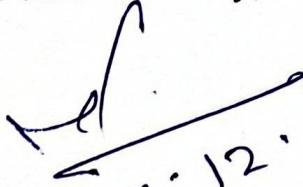
The District Informatics Officer
National Informatics Centre
Khordha.

Sub: Publication of **BMWM annual report** in the district web portal.

Sir,

We are attaching the soft copy of annual report 2023 (Form-iv). Kindly display the report minimum up to 15/03/2025 in document of district web portal.

Yours faithfully,


28.12.2024
SUPERINTENDENT
CHC MENDHASAL, KHORDHA

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)	: Dr. Mohan Hembram, Superintendent
	(ii) Name of HCF or CBMWTF	: CHC, Mendharaal.
	(iii) Address for Correspondence	: CHC, Mendharaal.
	(iv) Address of Facility	: CHC, Mendharaal.
	(v) Tel. No, Fax. No	: 9439997293
	(vi) E-mail ID	: chcmendharaal@gmail.com
	(vii) URL of Website	:
	(viii) GPS coordinates of HCF or CBMWTF	:
	(ix) Ownership of HCF or CBMWTF	: (State Government or Private or Semi Govt. or any other) State government.
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	: Authorisation No.: 3019 dt-04/03/2024 Valid upto: 31/03/2024
	(xi). Status of Consents under Water Act and Air Act	: Valid upto:
2	Type of Health Care Facility	:
	(i) Bedded Hospital	: No. of Beds: 06
	(ii) Non-bedded hospital	:
	Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	: -
	(iii) License number and its date of expiry	: 3019 / 31-03-2024 (Applied for ren)
3	Details of CBMWTF	:
	(i) Number of health care facilities covered by CBMWTF	: 1
	(ii) No. of Beds covered by CBMWTF	: 06 (Sim)
	(iii) Installed treatment and disposal capacity of CBMWTF;	: _____ Kg / day
	(iv) Quantity of bio medical waste treated or disposed by CBMWTF	: 3.37 Kg / day
4	Quantity of waste generated or disposed in Kg per Annum (on monthly average basis)	: Yellow Category: 37 kg Red Category: 32 kg White: 2.8 kg Blue Category: 19 kg General Solid Waste: 60 kg
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 & any other provision)			
(ii)	Disposal facilities	Type of treatment equipment	No of Units	Capacity Kg/day	Quantity Treated & disposed in kg per annum
		Incinerators	—		
		Plasma	—		
		Pyrolysis	—		
		Autoclaves	1		
		Microwave	—		
		Hydroclave	—		
		Shredder	1		
		Needle tip cutter or destroyer	3		
		Sharps			
		Encapsulation or concrete pit	1		
		Deep burial pits	6		
Chemical disinfection:	2				
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	—		
		Ash	—		
	ETP Sludge		—		
(vi)	Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of		M/S Saniclean Pvt. Ltd		
(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		

Details trainings conducted on BMW		
(i)	Number of trainings conducted on BMW Management	01
(ii)	Number of personnel trained	85
(iii)	Number of personnel trained at the time of induction	25
(iv)	Number of personnel not undergone any training so far	—
(v)	Whether standard manual for training is available?	Yes
8	Details of the accident occurred during the year	
(i)	Number of Accidents occurred	3420
(ii)	Number of persons affected	3420
(iii)	Remedial Action taken (Please attach details if any)	First Aid
(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?	Yes
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 - January-2023 to December-2023

[Signature]
05.06.2024

**SUPERINTENDENT
CHC MENDHASAL, KHORDHA**

Name and Signature of the Head of the Institution

Dr. Mohan Hembram

Date: 05/06/24

Place: ChC, Mendhasal