Application for Annual Report to be submitted by the occupier of health care facility (HCF) or common Bio-Medical Waste Treatment Facility (CBMWTF) under the BIO-Medical Waste Management Rules,2016

Form IV (YEAR-2019)

Particulars of Occupier:				
(i) Name of the authorized person		NIRMAL BASUMATARY		
(occupier or operator of facility)				
(ii) Name of HCF or CBMWTF:		LGBRIMH, TEZPUR		
		Street Name 1	LGBRIMH Campus, Tezpur	
(iii) Address for Correspondence		Street Name 2	Ex Police Line, Near Tezpur Police Reserve, Sonitpur	
		Vill/ Town	Tezpur	
		District Sonitpur		
		Pincode	784001	
		Mobile +919678898655		
		Phone No. 03712-232651		
		Email ID .	Igbrimh@yahoo.co.in	
(iv) Address of Facility		Street Name 1	LGBRIMH, TEZPUR	
		Street Name 2	LGBRIMH Campus, Tezpur	
		Vill/ Town	Tezpur	
		District	Sonitpur	
		Pin code	784001	
		Mobile	+91967889865	
		Phone No.	03712-232651	
		Fax No	03712-233623	
		Email ID	Igbrimh a yahoo.co.in	
(v) URL of Website		LGBRIMH.GOV.IN		
(vi) GPS Coordinate of HCF or CBMWMF:		26.63035092.810206		
(vii) Ownership of HCF or CBMWTF:		Central Government		
(viii) Status of Authorization under the Bio- Medical Waste (Management and Flandling) Rules:		Authorization No: WB/OTWA/BMW-488/18-19/01/17()		
ix) Status of Consents under Water Act and Vir Act:		Authorization No: WB/TEZ/T-1745/18-19/01/1489 . Dated 22/01/19		
Lype of Health Care Facility: Tertiary	care he	ospital	**************************************	
i) Bedded Hospital		No. of Beds: 336 no.		
ii) Non bedded hospital:		y other		
iii) (a) Licence number :		S/SPR/242/A/128		
b) Date of explary:	ALL PROPERTY AND ADDRESS OF	20-10-22		
3.Details of CBMWTF:	Nil			
i) Number of Health care facilities	Nil			
overed by CBMWTE:			1	
ii) No of beds covered by CBMWTF:	Nil			

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(iii)Installed treatment and (kg per day)	disposal capacit	y of CBMWTF	Nil	Nil			
(iv) Quantity of bio medical CBMWTF.(kg per day)	waste treated o	or disposed by	Nil				
4. Quantity of waste generated or disposed in kg per annum			Yellow Category	Yellow Category 198.18			
(on monthly average basis):			Red Category		917.91		
			White Category(Trans		34.68		
			General solid waste	-	186.39		
			General Solid Waste		10,000.00		
5. Details of the storage, trea	itment, transpoi	rtation, processin	g and Disposal facility:				
(i) Details of the on-site	Size			8 SQ METER			
storage facility:	Capacity			10 cubic meter			
		of on-site storage		Any other provision			
		of treatment	No. of units	Capacity	Quantit		
	equipment			(kg/day)	treated o		
					disposed		
(ii)Disposal facilities					kg per		
	Inc	inerators	*	10.101 //	annum		
	Inchierators		1	10-12 kg/hour	198.18		
	Plasma Pyrolysis		Nil				
	Autoclaves		1	78 liters	1104.3		
	Microwave		Nil		Nil		
	Hydroclave		Nil ,		Nil		
	Shredder		1	50-100 kg	917.91		
	Needle tip cutter or destroyer		14	- ,	34.68		
		capsulation or	1	2100×4300	34.68		
	Deep burial pits		1	1.2 diameter			
	Chemical Disinfection		0 11				
			Sodium Hypochlorite	-	***		
	Any other treatment equipment		STP- 450 KLD, Local hypochlorite treatment plant				
ii) Quantity of recyclable							
astes sold to authorized ecyclers after treatment in kg	70 57 1						
er annum.	78.57 kg						
v) No of vehicles used for bllection and transportation	6 No, BMW	Waste Carrier	Trolley (Tricolor),				
biomedical waste							
) Details of incineration ash		Quantity gener	rated	Where disposed			
d ETP sludge generated and	Incineration			- There dispe	micro disposed		
sposed during the treatment	Ash		4.3	De- P. 1.1			
waste in Kg per annum			4.5	Deep Burial			
	ETP Sludge						

(vi) Name of the Common Bio-	Nil
medical Waste Treatment Facility	
Operator through which waste are	
disposed of	
(vii) List of member HCF not handed	Nil
over Bio-medical waste	YES
6. Do you have Bio-medical waste management committee?	165
7. Details training conducted on	
BMW	
(i) Number of trainings conducted on	10 times
BMW Management	10 dines
(ii) Number of personnel trained	300 persons
(iii) Number of personnel trained at	71 persons
the time of induction	71 persons
(iv) Number of personnel not	Nil
undergone any training so far	
(v) Whether standard manual for	Yes
training is available .	
(vi) Any other information	Nil
8. Details of accident occurred during t	he year
(i) Number of accidents occurred	1-needle stick injury
(ii) Number of persons affected	
(iii) Remedial action taken	Yes.
(iv) Any fatality occurred, details	Nil
9. (a) Are you meeting the standard	YES
of air pollution from the incinerator?	
(b) How many times in last year	Nil ·
could not meet the standards?	
(c) Details of continuous online	NOT YET INSTALLED.
emission monitoring systems	
installed?	
10. (a) Liquid waste generated and treatment methods in place	100000 Litres approx. By Sewage Treatment Plant
(b) How many times you have not	Nil
met the standards in a year	
11. (a) Is the disinfection method or	YES
sterilization meeting the log 4	
standards?	
(b) How many times you have not	Nil ,
met the standards in a year?	
12. Any other relevant information	
List of documents to be enclosed/submi	tted:
Remedial Action taken	
Attach minutes of meeting held	
during the reporting period	
List of member HCF not handed over	
bio-medical waste	
Date:	Name of the authorized person
Place: Tezpur	11/0

Nodal Officer LGBRIMH, Tezpur