Form – IV (See rule13) ANNUAL REPORT-2023 (01-01-2023 to 31-12-2023)

[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)	PREETHI.S
	(ii) Name of HCF or CBMWTF	SHREE CONSULTANTS
	(iii) Address for Correspondence	No 724, Ist Floor, SVM Complex, Ramanuja road, Mysore 570004
	(iv) Address of Facility	No. 25, VARUNA VILLAGE, VARUNA HOBLI, MYSORE DISTRICT
	(v)Tel. No, Fax. No	0821- 2521317 ,0821-2441232,9845315102
	(vi) E-mail ID	Shree.biomed@rediffmail.com
	(vii) URL of website	www.shreeconsultants.co
	(viii) GPS coordinates of HCF or BMWTF	12.2680°N ,76.7434oE
	(ix) Ownership of HCF or CBMWTF	Partnership
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling)	Authorization AW-338917 valid up to 30-06-2028.
	(xi). Status of Consents under Water Act and Air Act	Valid up to: 30-06-2028
2	Type of Health Care Facility	
	(i) Bedded Hospital	.....
	(ii) Non-bedded hospital	
	a. Clinics/Dispensaries	7
	b. Veterinary Institutions	.....
	c. Animal House	.....
	d. Pathological Laboratory	1
	e. Blood Bank	.....
	f. Research Institutions	.....
	g. AYUSH	.....
	h. Others (Specify)	.....
	(iii) License number and its date of expiry	
3	Details of CBMWTF	
	(i) Number healthcare facilities covered by CBMWTF (Pl attach List)	8

	(ii) No of beds covered by CBMWTF	.....			
	(iii) Installed treatment and disposal capacity of CBWTF	2400kg/day			
	(iv) Quantity of biomedical waste treated or disposed cbwtf	.....			
	i) Bio-Medical waste generated by Bedded Hospital (in kg/day) (please attch list	.....			
	ii) Bio-Medical waste generated by NoN-Bedded Hospital (in kg/day) (please attch list along with quantity of	4.41 Kgs/day			
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	Yellow Category: 50.23 kgs /month			
		Red Category : 37.95 Kgs /month			
		White : 6.35 Kgs /month			
		Blue Category : 39.73 Kgs /month			
		General Solid waste: nil			
5	**Details of the Storage, treatment, transportation, processing and Disposal Facility**				
	i) Details of the on site storage	it's a storaged in designated area , storage has been provided.			
		Capacity :			
		Provision of on-site storage: Cold storage or any other provision			
	ii) Disposal	Type of treatment	No of Units	Capacity Kg/day	Quantity treated or disposed in Kg per Annum
		Incinerators	1	2400	602.76 kgs/yr
		Plasma Pyrolysis			
		Autoclaves	1	1200	1008.36kgs/yr
		Microwave Kgs/yr	0		
		Hydroclave	0		
		Shredder	1	1200	1008.36kgs/yr
		Needle tip cutter or Destroyer	Pl Provide	Pl Provide	Pl Provide
		Sharps encapsulation or Deep burial pits:	1	Pl Provide	Not applicable
		Chemical disinfection			
		Any other treatment equipment :ETP	1	..... KLD	1200kLD/yr
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	Red Category (like plastic, etc.) 455.40 kgs/yr			
	(iv) No of vehicles used for collection and transportation of biomedical waste	9			
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Type	Quantity generated	Where Disposed	Remarks
		Incineration Ash	111750.00Kgs/yr	TSDF	Pl attch copies of manifest
		ETP Sludge	500.00Kgs/yr		

	(vi) Name of the Common Bio-: Medical Waste Treatment Facility Operator through which wastes are disposed of	N/A
	(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**	NO
7	**Details trainings conducted on BMW**	
	(i) Number of trainings conducted on BMW Management	15
	(ii) number of personnel trained	N/A
	(iii) number of personnel trained at the time of induction	N/A
	(iv) number of personnel not undergone any training so far	N/A
	(v) whether standard manual for training is available?	N/A
	(vi) any other information)	N/A
8	**Details of the accident occurred during the year**	
	(i) Number of Accidents occurred	N/A
	(ii) Number of the persons affected	N/A
	(iii) Remedial Action taken (Please attach details if any)	N/A
	(iv) Any Fatality occurred, details.	N/A
9	**Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?**	Yes, no deviations till date
	Details of Continuous online emission monitoring systems installed	Installed
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Yes , no deviations till date
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	N/A

12	Any other relevant information	(Air Pollution Control Devices attached with the Incinerator) 30Mts Chimney, Heat Exchanger, Dust Collector, quencher, ventury scrubber.

Certified that the above Mandya report is for the period from JAN 2023 to DEC 2023 ...

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Date: 23-03-2024

Place : Mysore

Name and Signature of the Head of the Institution