

## Form- IV

( See rule 13)

## ANNUAL REPORT

(To be submitted to the prescribed authority on or before 30<sup>th</sup> 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)

S.No	Particulars		
1	Particulars of the Occupier	:	Administrator St.Isabel Hospital
	i. Name of the authorized person (Occupier or operator of facility)		GJ Multiclave Pvt.Ltd
	ii. Name of the HCF or CBMWTF		G J multiclave
	iii. Address for Correspondence		St.Isabel's hospital 49,oliver road ,Mylapore ,Chennai-4
	iv. Address of Facility		245,Thenmelpakkam village Singaperumal koil st Chengelpet ,Kancheepuram Dist
	v. Tel .No Fax No		044-24990181,82
	vi. E mail ID		info@stisabelshospital.in
	vii. URL of Website		Nil
	viii. GPS coordinates of HCF or CBMWTF		Nil
	ix. Ownership of HCF or CBMWTF		(State Government or Private or Semi Govt. or any other)Registered under society Act
	x. Status of Authorization under the Bio – medical waste ( Management and Handling Rules		Authorisation No :19BAZ1687010 -----Valid up -----Applied
	xi. Status of consents under the water act and Air Act		Valid Up to :Applied
2.	Type of Health care Facility		Hospital
	i. Bedded hospital		No. of Beds:.....300
	ii. Non – Bedded hospital		---
	iii. ( clinic or blood Bank Clinical Labaratory or Rasearch institute or veterinary Hospital or any other)		
	iv. License number and its date of expiry		Z-9/119/01 26.11.2021
3.	Details of CBMWTF		---

	i.	Number health care facilities covered by CBMWTF		---																																									
	ii.	No of beds covered by CBMWTF		---																																									
	iii.	Installed treatment and disposal capacity of CBMWTF		NA ___ Kg per day																																									
	iv.	Quantity of biomedical waste treated or disposed by CBMWTF		NA ___ Kg/day																																									
4		Quantity of waste generated or disposed in Kg per annum ( On monthly average basis)		Yellow Category : 20031.070 KG Red Category : 1 1 0 0 6 . 5 9 0 K G White : 384.600 KG Blue Category :1953.340 KG																																									
5	Details of the storage,treatment,transportion,processing and disposal Facility																																												
	i.	Details of the on-site storage facility	:	Size: NA Capacity: Provision of on-site storage (cold storage or any other provision)																																									
	ii.	Details of the treatment or disposal facilities	:	<table border="1"> <tr> <td>Incinerators</td> <td></td> <td></td> <td></td> <td rowspan="10">Quantity treated or dispose in Kg</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> <tr> <td>Sharps encapsulation or concrete pit</td> <td></td> <td></td> <td>-</td> </tr> <tr> <td>Deep burial pits: Chemical disinfection:</td> <td></td> <td></td> <td>-</td> </tr> <tr> <td>Any other treatment equipment:</td> <td></td> <td></td> <td></td> </tr> </table>	Incinerators				Quantity treated or dispose in Kg	Plasma Pyrolysis				Autoclaves				Microwave				Hydroclave				Shredder				Needle tip cutter or destroyer			-	Sharps encapsulation or concrete pit			-	Deep burial pits: 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	:	NA
	(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 (vii) list of member HCF not handed over bio-medical waste	:	GJ multiclave India private Ltd
6.	Do you have bio-medical waste management committee? If yes attach minutes of the meetings held during the reporting period		Yes
7	Details training s conducted on BMW		
	(i) Number of trainings conducted on BMW Management		6-8
	(ii) Number of personnel trained		300-350 members
	(iii) Number of personnel trained at the time of induction		30 members
	(iv) Number of personnel not undergone any training so far		Nil
	(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 Accident Occurred		1 (Needle stick Injury)
	(ii) number of the persons affected		1
	(iii)Remedial Action taken (Please attach details if any)		Details enclosed
	(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 ?	NA
	Details of continuous online emission monitoring system installed	Nil
10	Liquid waste generated and treatment methods in place.How many times you have not met the standards in a year?	Nil
11	Is the disinfection method or sterilization meeting the log 4 standards ? how many times you have not met the standards in a year ?	Nil
12	Any other relevant information	( Air pollution Control devices Attached with the Incinerator)

January 2020 – December 2020

Certified that the above report is for the period from -----

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Date: 26.02.2021

Place: Mylapore

*Shamit*



Name and signature of the Head of the institution