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)]

SI. No.	Particulars	William I	
1.	Particulars of the Occupier	:	SREE RENGA HOSPITAL
	(i) Name of the authorised person (occupier or operator of facility)	:	SREE RENGA HOSPITAL
	(ii) Name of HCF or CBMWTF	:	SREE RENGIA HOSPITAL
	(iii) Address for Correspondence	;	12 VARADA REDDY ST.
	(iv) Address of Facility		VEDACHALA MAGIAR, CHENGALPATTI
	(v)Tel. No, Fax. No	:	044 27431544
	(vi) E-mail ID	:	knodrania han com
	(vii) URL of Website		www. steerengahospital. com
	(viii) GPS coordinates of HCF or CBMWTF		
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other) PRIVATE
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: \8 B AD 140 71080
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31-03-2024
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	: \	No. of Beds:+7
1	(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	:	
	(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

	(iv) Quantity of biomedical waste treate by CBMWTF	ed or o	disposed	:	K	.g/day		
4.	Quantity of waste generated or disposannum (on monthly average basis)	ed in	Kg per		Yellow (Red Cate White: Blue Cat General	egory :	8 11	757.90 144.30 5.80 536.70
5	Details of the Storage, treatment, transp	ortatio	on, proces	ssing a				
	(i) Details of the on-site storage	:	Size	:			See Line	
	facility		Capacity:					
				on of	on-site s	storage	: (col	d storage or
	(ii) Details of the treatment or disposal facilities	:	Туре		atment	No of unit s	Cap acit y Kg/ day	Quantity treatedo r disposed in kg per
	O CONTRACTION OF THE STATE OF T		Plass Auto Micr Hydr Shree destr Sharp encap cone Deep Cher disin	dder dle tip royer ps psulatirete pi burian ical fection other i	cutter or on or t l pits:			annum
	(iii) Quantity of recyclable wastes sold to authorized recyclers after	:		pment: tegory	(like plas	stic, glas	s etc.)	
	treatment in kg per annum. (iv) No of vehicles used for collection and transportation of biomedical waste	:						
	(v) Details of incineration ash and ETP sludge generated and disposed				Quan	ntity rated		posed

	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	GI J MULTICLAVE (INDIA) PUT LTD
	(vii) List of member HCF not handed over bio-medical waste.	NOT APPLICABLE
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 (i) Number of trainings conducted on	12 1100 m 5 PC
	BMW Management. (ii) number of personnel trained	AROUND 100
	(iii) number of personnel trained at the time of induction	30
	(iv) number of personnel not undergone any training so far	0
	(v) whether standard manual for training is available?	YES
8	(vi) any other information) Details of the accident occurred during the year	
	(i) Number of Accidents occurred	0
	(ii) Number of the persons affected (iii) Remedial Action taken (Please attach details if any)	NA
	(iv) Any Fatality occurred, details.	NONE
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	NOT APPLICABLE
	Details of Continuous online emission monitoring systems installed	NOT APPLICABLE
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	
11	Is the disinfection method or sterilization meeting the log 4	NOT APPLICABLE

	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	1st Jan 2018 to 31st Dec 2018
	11719

Date: 29 Jun 2019 Place Chengalpattu

Name and Signature of the Head of the Institution

SREE RENGA HOSPITAL

No: 12, Varadha Reddy Street, Vedachala Nagar, Chengalpattu - 603 001. Ph: 044 - 27432240, 27431544