

## Annual Returns form for Health Care Facilities / Common Bio-medical Waste Treatment and Disposal Facility (CBWTF)

PCB ID : 117506		Health Care Facility / CBWTF Name : Bimr Hospitals	
1	Year	2022 <input type="button" value="v"/>	
2	Type of Health Care Facility	Bedded Hospital Private <input type="button" value="v"/>	
3	Number of Beds	<input type="text" value="350"/>	
4	License Number and Date of Expiry of License	<input type="text" value="AWHB- 55815"/>	<input type="text" value="31/03/20"/>
5	Do you have Captive Treatment Facility ?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
<b>Quantity of Waste Generated or Disposed in Kg per annum (on monthly average basis)</b>			
6	Yellow Category	<input type="text" value="6653.805"/>	
7	Red Category	<input type="text" value="24230.100"/>	
8	White Category	<input type="text" value="562.007"/>	
9	Blue Category	<input type="text" value="8989.090"/>	
10	General Solid Waste	<input type="text" value="18432.500"/>	
<b>Details of the Storage, Treatment, Transportation, Processing and Disposal Facility</b>			
11	Details of the on-site storage facility	Color coded Bins	
12	Treatment Facility	<input type="text" value="ACT,NDS"/>	
13	Quantity of Recyclable Waste sold to Authorized Recyclers after Treatment ( in kg / Year )	<input type="text" value="0.00"/>	
14	Number of Vehicles used for Collection and Transportation of Biomedical Waste	<input type="text" value="1"/>	
15	Details of Incineration Ash and ETP Sludge generated and disposed during the Treatment of waste (in Kg / Year )	<input type="text" value="0"/>	
16	Name of the Common Bio-Medical Waste Treatment Facility Operator through which waste are disposed of	Davis Surgico (cbwtf) J.A. Hospit <input type="button" value="v"/>	
17	Do you have bio-medical waste management committee ? If yes, minutes of the meetings held during the reporting period	<input checked="" type="radio"/> Yes <input type="radio"/> No	

Details of Trainings conducted on Bio Medical Waste Management		
18	Number of Trainings conducted on BMW Management	<input type="text" value="6"/>
19	Number of Personnel Trained	<input type="text" value="450"/>
20	Number of Personnel Trained at the time of Induction	<input type="text" value="110"/>
21	Number of Personnel not undergone any Training so far	<input type="text" value="0"/>
22	Whether standard manual for Training is available ?	<input checked="" type="radio"/> Yes <input type="radio"/> No
23	Any other information	N.A.
Details of the accident occurred during the year		
24	Number of Accident occurred	<input type="text" value="0"/>
25	Number of the persons affected	<input type="text" value="0"/>
26	Remedial Action taken ( details if any )	N.A.
27	Any Fatality Occurred , details	N.A.
28	Are you meeting the standards of air Pollution from the incinerator ? How many times in last year could not met the standards?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="text"/>
29	Details of Continuous Online Emission Monitoring systems installed	N.A.
30	Liquid waste generated and treatment methods in place . How many times you have not met the standards in a year	<input type="text" value="0"/>
31	Is the disinfection method or sterilization meeting the log 4 standards ? How many times you have not met the standards in a year ?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="text"/>
32	Any other relevant information	N.A.
		Update

