Form - IV (See rule13) 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 nealth care facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

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SI.			
No	Particulars		
1.	Particulars of the Occupier (i) Name of the authorised person	:	DR RAMESH SRISHNA. K
	(occupier or : operator of facility)		MEDICAL SUPERIENTENDENT
	(ii) Name of HCF or CBMWTF.	:	VICTORIA HOSPITAL
	(iii) Address for Correspondence -	;	
	(iv) Address of Facility		_
	(v)Tel. No, Fax. No	:	7AX: 26703267
	(vi) E-mail ID	:	Victoria hospital bangalore @ ymail. Com
	(vii) URL of Website		bangalore roog.
	(viii) GPS coordinates of HCF or CBMWTF		
	(ix) Ownership of HCF or CBMWTF	:	MARIDI Environmentally- (State Government or Michelder
			Semi Govt, or any other)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No. 155. PCB/Bonw/HCE/2017-18/H
	(vi) Status of Consents under Water Act and Air		1 A 07 20 7 valid up to 30 06 (808)
	(xi). Status of Consents under Water Act and Air Act		Valid up to: 12/1/2017 630/6/2021
2.	Type of Health Care Facility		
	(i) Bedded Hospital		New Beds 46A.
	(ii) Non-bedded hospital		

Manager (Manager) (Manager	Clinic or Blood Bank or Clinical y					
	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	:	B 2			
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	Kg per day *			
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	Kg/day			
4.	Quantity of waste generated or disposed in Kg per		Yellow Category : 31-91316 /			
	annum (on monthly average basis)		Red Category: 19321kg/A			
			White: 1259 kg/A			
			Blue Category: 6A21 Ray/A			
			General Solid waste:			
5	Details of the Storage, treatment, transportation, processing and Disposal Facility					
	(i) Details of the site storage : Size					
İ	facility	ity:				
			ion of on-site storage : (cold storage or ner provision)			

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	desposal facilities	100	Type of treatment equipment	of unit	Cap acit y Kg/ day	Ouantity treatedo r disposeds in kg per	
			Incinerators 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:		elector X	annum	
	 (iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum. (iv) No of vehicles used for collection and transportation of biomedical waste 	Red Category (like plastic, glass etc.)					
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		Quantity Where generated 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.						
7	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period Details trainings conducted on BMW						
	(i) Number of trainings conducted on BMW Management.						

			The state of the s	
	(ii) number of personnel trained		*	-
	(iii) number of personnel trained at		~	
	the time of induction			
	(iv) number of personnel not			
	undergone any training so far		*	
	(v) whether standard manual for			
	training is available?			
	(vi) any other information)		He start of	
3	Details of the accident occurred		*	
	during the year			
	(i) Number of Accidents occurred	1		
	(ii) Number of the persons affected	1		
	(iii) Remedial Action taken (Please			
	attach details if any)		5.5	
	(iv) Any Fatality occurred, details.		~	
) .	Are you meeting the standards of air	1		_
	Pollution from the incinerator? How			
	many times in last year could not met			
	the standards'?			
	Details of Continuous online emission	1		-
	monitoring systems installed		**	
()	Liquid waste generated and treatment	1	,	
	methods in place. How many times			
	you have not met the standards in a			
	year?			
1	Is the disinfection method or	1		-
	sterilization meeting the log 4			
	standards? How many times you have			
	not met the standards in a year?			
2	Any other relevant information	1:	(Air Pollution Control Devices attached with the	_
			Incinerator)	

Certific	ed that the above report is for the period t	royn A	0	
	Jan 2019		2619	
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		Name	and का देश कि देश कि हैं	de Green Institution
			ಎ ಳ್ಳೋನಿಯ: ಆಸ	£ 35
Date:			ವಿಕ್ಕೋನಿಯಾ ಆಸ್ಪ ಮಾಗಳೂರು - 560 (062

Date: Place