Date: 22/01/2020

TO,
ENVIRONMENTAL ENGINEER,
POLLUTION CONTROL BOARD,
PATIALA – 147001.

SUBJECT: Submission of annual biomedical report (form IV) for the period of 01/01/2019 to 31/01/2019.

Dear Sir,

Please find the enclosed biomedical annual report form IV for the period of 01/01/2019 to 31/12/2019 along with total garbage collection report, trainings conducted to the staff details at COLUMBIA ASIA HOSPITAL, PATIALA – 147001 during above mentioned time period.

Thanks & Regards,

Gurkirat,

General Manager,

Columbia Asia Hospital,

Patiala - 147001.



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. | Particulars | | |
|-----|---|---|--|
| No. | | | |
| 1. | Particulars of the Occupier | : | |
| | (i) Name of the authorised person (occupier or operator of facility) | : | Columbia Asia Hospital |
| | (ii) Name of HCF or CBMWTF | : | BHUPINDRA ROAD NEAR PHATAK NO-22 PATIALA |
| | (iii) Address for Correspondence | : | SAME AS ABOVE |
| | (iv) Address of Facility | | |
| | (v)Tel. No, Fax. No | : | Gurkiyatise Columbial adiahosp |
| | (vi) E-mail ID | : | |
| 8 | (vii) URL of Website | | |
| | (viii) GPS coordinates of HCF or CBMWTF | | |
| | (ix) Ownership of HCF or CBMWTF | : | (State Government or Private or Semi Govt. or any other) |
| | (x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules | : | Authorisation No.: RMH/PTA/2019/10026764 |
| | (xi). Status of Consents under Water Act and Air Act | : | Valid up to: Water-CTOW PTA 2019 1002574 AIV-PTA 2018 85 10151 |
| 2. | Type of Health Care Facility | : | 1111 218 03 1015 |
| | (i) Bedded Hospital | : | No. of Beds: 80 |
| | (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 | : | NA |
| | (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 treat | | Kg/day | | | | | | |
|----|---|-------------------------------|--|--|---|-----------------------|--------------------------------|--|--|
| A | by CBMWTF | | | | K | cg/day | | | |
| 4. | Quantity of waste generated or dispo annum (on monthly average basis) | or disposed in Kg per sis) | | | Yellow Red Cat White: Blue Ca General | tegory : | | 685-28 493.50 35-33 589.01 | |
| 5 | Details of the Storage, treatment, transp | sing a | | | | | | | |
| | (i) Details of the on-site storage facility | | Size Capacit | : | | 10: | | + . | |
| | | | | on of | on-site s | storage | ; (co | ld storage or | |
| | (ii) Details of the treatment or disposal facilities | : | | of tre | atment | No of unit s | Cap acit y Kg/ day | Quantity treatedo r disposed in kg per annum | |
| | | | Plasm Autoc Micro Hydro Shred | owave oclave der e tip c | | / | - | / | |
| | | | encap concre Deep Chem disinfe | sulation to the sure of the su | pits: | | -/\ - | | |
| 1 | (iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum. | : | Red Cate | egory (| (like plast | ic, glass | etc.) | | |
| 8 | (iv) No of vehicles used for collection and transportation of biomedical waste | : | | | | | | | |
| 1 | (v) Details of incineration ash and ETP sludge generated and disposed | | | | Quanti genera | | Whe | | |

| | during the treatment of wastes in Kg | | | | | | | | |
|-----|--|---|--------------------|--|--|--|--|--|--|
| | per annum | | Incineration | | | | | | |
| | | | Ash | | | | | | |
| | (vi) Name of the Common Bio- | | ETP Sludge | | | | | | |
| | Medical Waste Treatment Facility | : | Medicaso Environa | | | | | | |
| | Operator through which wastes are | | Managana 1 0 -1 1 | | | | | | |
| | disposed of | | Management Put Lto | | | | | | |
| | (vii) List of member HCF not handed | | | | | | | | |
| - | over bio-medical waste. | | | | | | | | |
| 6 | Do you have bio-medical waste | | | | | | | | |
| | management committee? If yes, attach | | Ano | | | | | | |
| | minutes of the meetings held during | | Tes | | | | | | |
| 7 | the reporting period | | | | | | | | |
| ' | Details trainings conducted on BMW | | | | | | | | |
| | (i) Number of trainings conducted on BMW Management. | | 1 . | | | | | | |
| | | | 43 | | | | | | |
| | (ii) number of personnel trained | | 416 | | | | | | |
| | (iii) number of personnel trained at the time of induction | | 82 | | | | | | |
| | | | 02 | | | | | | |
| 1 | (iv) number of personnel not undergone any training so far | | N 1 1 / | | | | | | |
| | (v) whether standard manual for | | NIC | | | | | | |
| 1 | training is available? | | Yes | | | | | | |
| | (vi) any other information) | | 108 | | | | | | |
| 8 | Details of the accident occurred | | A | | | | | | |
| | during the year | - | | | | | | | |
| | (i) Number of Accidents occurred | | | | | | | | |
| | (ii) Number of the persons affected | | | | | | | | |
| | (iii) Remedial Action taken (Please | | | | | | | | |
| | attach details if any) | | | | | | | | |
| | (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 | | NA | | | | | | |
| | the standards? | | | | | | | | |
| | Details of Continuous online emission | | | | | | | | |
| | monitoring systems installed | | | | | | | | |
| 10 | Liquid waste generated and treatment | | | | | | | | |
| | methods in place. How many times | | STP Installed | | | | | | |
| | you have not met the standards in a | | 211/18/104-20 | | | | | | |
| 1.1 | year? | | | | | | | | |
| 11 | Is the disinfection method or | | NIL | | | | | | |
| | sterilization meeting the log 4 | | 1014 | | | | | | |

| standards? How many times you have not met the standards in a year? | | |
|--|---|---|
| Any other relevant information | : | (Air Pollution Control Devices attached with the Incinerator) |

| Certifi | ed that the above report is for the period | d from 18+ Jan 12019 to 318+ Dec 12019 |
|---------|--|---|
| | *************************************** | Fox |
| | *************************************** | 4 |
| | | Name and Signature of the Head of the Institution |
| Date: | Patiala | |

| | BIO MEDICAL WASTE | COLLECTIO | NUETAILS | KUIVI JAIN-2 | | | | | | | | | | - | |
|------|--------------------|-----------|----------|--------------|--------|--------|----------|---------|---------|--------|--------|--------|--------|---------|----------|
| S.NO | GARBAGE COLOR CODE | Jan '19 | Feb ' 19 | Mar ' 19 | Apr'19 | May'19 | Jun ' 19 | Jul '19 | Aug '19 | Sep'19 | Oct'19 | Nov'19 | Dec'19 | Total | Average |
| | | | | | | | | | | | | | | | A LOUIS |
| | 1 RED GARBAGE | 467.21 | 437.48 | 573.23 | 511.69 | 499.01 | 439.66 | 514.57 | 472.8 | 458.45 | 468.41 | 507.2 | 572.31 | 5922.02 | 493.5017 |
| | 2 YELLOW | 674.61 | 694.48 | 687.96 | 667.52 | 677.61 | 639.22 | 686.75 | 695.08 | 725.4 | 670.08 | 707.48 | 697.11 | 8223.3 | 685.275 |
| | 3 White | 483.85 | 579.13 | 617.04 | 588.76 | 570.94 | 500.64 | 574.62 | 670.49 | 778.9 | 537.29 | 587.94 | 578.53 | 7068.13 | 589.0108 |
| | 4 White PPC | 21.43 | | 28.86 | 27.15 | 36.75 | 31.02 | 41.17 | 47.18 | 36.79 | 34.36 | 41.52 | 42.41 | 423.9 | 35.325 |

*NOTE: ABOVE MENTIONED TOTALS ARE ON KG.