

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).

| Sl. No. | Particulars | | |
|---------|----------------------------------------------------------------------------------------------------------------------------------|---|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. | Particulars of the Occupier | : | The Calcutta Medical Research Institute |
| | (i) Name of the authorized person (occupier or operator of facility) | : | Mr. Bobby Verghese |
| | (ii) Name of HCF or CBMWTF | : | The Calcutta Medical Research Institute |
| | (iii) Address for Correspondence | : | 7/2, Diamond Harbour Road, Kolkata-700027 |
| | (iv) Address of Facility | : | 7/2, Diamond Harbour Road, Kolkata-700027 |
| | (v) Tel. No, Fax. No | : | +91(033)4090 4090 |
| | (vi) E-mail ID | : | corporatehelpdesk@cmri.in |
| | (vii) URL of Website | : | http://www.cmri.in |
| | (viii) GPS coordinates of HCF or CBMWTF | : | Latitude-12.95320 Longitude-77.58350 |
| | (ix) Ownership of HCF or CBMWTF | : | (State Government or Private or Semi Govt. or any other)-Private |
| | (x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules | : | Authorization No:-20/2S,(BM)-320/99-2000,valid up to 31/12/2021 |
| | (xi). Status of Consents under Water Act and Air Act | : | Valid up to: 31/12/2021 |
| 2. | Type of Health Care Facility | : | Private Hospital |
| | (i) Bedded Hospital | : | No. of Beds:440 |
| | (ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other) | : | N.A |
| | (iii) License number and its date of expiry | : | 34227693,Valid Up to 18.4.2024 |
| 3. | Details of CBMWTF | : | - |
| | (i) Number healthcare facilities covered by CBMWTF | : | N.A |
| | (ii) No of beds covered by CBMWTF | : | N.A |
| | (iii) Installed treatment and disposal capacity of CBMWTF: | : | N.A-Kg per day |
| | (iv) Quantity of biomedical waste treated or disposed by CBMWTF | : | N.A-Kg/day |
| 4. | Quantity of waste generated or disposed in Kg per annum (on monthly average basis) | : | Yellow Category:-1987.12 kg/monthly avg Red Category:-2980.66 kg /monthly avg White:- 61.16 kg/monthly avg Blue Category:-142.97 kg/monthly avg Covid Waste:- 920.57 kg/monthly avg |

| | | |
|-----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 5 | Details of the Storage, treatment, transportation, processing and Disposal Facility | |
| (i) Details of the on-site storage facility | : | Size : 649.30 sqft. Capacity : 700 Kg(48 hrs) Provision of on-site storage : (cold storage or any other provision) – Designated area only for BMW |
| (ii) Details of the treatment or disposal facilities | : | Type of treatment No Cap Quantity equipment of acid treated unit y r s Kg/ disposed day in kg per annum 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: Red Category (like plastic, glass etc.) |
| (iii) Quantity of recyclable wastes sold to authorize recyclers after treatment in kg per annum. | : | N.A |
| (iv) No of vehicles used for collection and transportation of biomedical waste | : | 34 (One car reports daily) |
| (v) Details of incineration ash and ETP sludge generated and disposed | : | N.A |
| during the treatment of wastes in Kg per annum | : | Incineration Ash ETP Sludge |
| (vi) Name of the Common Biomedical Waste Treatment Facility Operator through which wastes are disposed of | : | Medicare Environmental Management Pvt Ltd, 41,F,Road,Belgachia,Near HMC Dump Site,Howrah-711105 |
| (vii) List of member HCF not handed over bio-medical waste. | : | N.A |

| | | |
|----|-------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| 6 | Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period | YES, Minutes of the meeting attached here with |
| 7 | Details trainings conducted on BMW | - |
| | (i) Number of trainings conducted on BMW Management. | 48 |
| | (ii) number of personnel trained | 1414 (117.83/month) |
| | (iii) number of personnel trained at the time of induction | 100 |
| | (iv) number of personnel not undergone any training so far | NIL |
| | (v) Whether standard manual for training is available? | N.A (follow BMW 2016 revised rules) |
| | (vi) any other information | N.A |
| 8 | Details of the accident occurred during the year | NIL |
| | (i) Number of Accidents occurred | NIL |
| | (ii) Number of the persons affected | |
| | (iii) Remedial Action taken (Please attach details if any) | N.A |
| | (iv) Any Fatality occurred, details. | NIL |
| 9. | Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards? | N.A |
| | Details of Continuous online emission monitoring systems installed | N.A |
| 10 | Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year? | 110180 KL |
| 11 | Is the disinfection method or sterilization meeting the log 4 | - |
| | Standards? How many times you have not met the standards in a year? | - |
| 12 | Any other relevant information | - |

Certified that the above report is for the period from 1.1.2020-31.12.2020

Date: 12.01.21

Place: Kolkata

Name and Signature of the Head of the Institution