## FROM- IV (See rule 13) Monthly Report (August 2023)

s.no	Particulars						
[	Particulars of the occupier						
	(i) Name of the authorized person	Medical Superintendent, AIIMS Kalyani					
y la sed	(occupier or: operator of facility)	Dr. Ajay Mallick					
	and a share a s						
	(ii) Name of HCF or C BMWTF	All India Institute of Medical Sciences Kalyani					
	(iii) Address for correspondence	Al I MS Kalyani,					
		NH-34 Connector, Basantapur, Saguna, Nadia,					
		West Bengal - 741 245					
	(iv) Address of Facility	Same as above					
	(v) Tel. No, Fax No	· · · · ·					
	(vi) E—mail ID	ms@aiimskalyani.edu.in					
	(vii) L RL of website						
	(viii) GPS coordinates of HCF or						
	CBM WTF						
	(ix) Ownership of HCF or	Autonomous organization					
	CBM WTF						
	(x) Status of Authorization under						
	the B io-Medical Waste						
	(Management and Handling) Rules						
	(xi) Status of consents under water						
	Act and Air act						
2	Type of Health care Facility	NIA (This is a represent 060 hadded hospital)					
a ý	(i) Bedded Hospital	NA (This is a proposed 960 bedded hospital)					
	(ii) Non-bedded hospital	NA					
	Clinical Laboratory or Research	and the second of the second					
	Institute or Veterinary' Hospital or						
	any other	NA					
	(iii) License number and its date of	INA					
	expiry Details of CBMWTF	NA					
3	(i) Number of health care facilities	NA					
	(1) Number of health care facilities covered by CB M WTF	NA					
	(ii) No. of beds covered b	NA					
	CBM WTF						
	(iii) Installed treatment and	NA					
1.5	disposal capacity of CBMWTF						
	(iv)Quantity of bio medical waste	NA					
	treated or disposed by CBMWTF;						
4	Quantity of waste generated or	Yellow Red White Blue					
	disposed in KG per Annum (on	COVID 0.00 0.00kg 00.00 00.0					
	monthly average basis)	kg kg kg					
	internet in strage second )	Others 828.97 1480.62 74.68k 58.5					
		kg $kg$ $g$ $kg$					
		Total 828.97 1480.62 74.68k 58.50					
		kg kg g kg					
5	Details of the storage. Treatment, Tr	ansportation, processing and Disposal Facility:					

	Handled by CB M WTF (i) Details of the on-site storage		Size: 1 5' X 3'	Size: 1 5' X 3' X 7'			
	(i) Disposal facilities		Capacity: 50kg Provision on site storage: (cold storage any other provision) None				
			treatment equipment	No of Capacity Quantity Units (kg/day) treated o disposed in kg/annur			
			Incinerators		.1	ing annun	
	a a de la companya de		plasma paralysis				
			Autoclves				
			Microwaves				
			Hydroclave				
	· · ·		Shreeder				
			Needle tip cutter or destroyer Sharps	Ma	Managed by CBMWTF Operator		
			Encaptualtion or concrete pit				
			Deep burial pits				
			Chemical disinfection Any other treatment				
	(iii) Quantity of recyclable wastes		Red category (like plastic, glass etc.) handled				
	sold to authorized recyclers after treatment in kg per annum		by CBM WTF operator				
	(iv) no of vehicles used for collection and transportation of biomedical waste		NH	* • 5.0	leansair a' ann a' a Ann a' ann a'		
	(v) Details of incineration ash and disposed during the treatment r I		· · · · ·	Quanti	and the second sec	here sposed	
	wastes in kg per annum		Incineration		Vil	NA	
			Ash	N	Jil	NA	
			ETP Sludge	-			
	(vi) Name of the common BIO medical waste treatment facility operator through which wastes are disposed of		Medicare Environment Management Private Limited				
	(vii) List of member HCF not handed over bio-medical waste		NA				
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		Not at present	<i></i>	9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	Details of trainings conducted on BM W					1	
7	(i)Number of trainings conducted on BMW Management						

	ii)Number of personnel trained		
	<ul><li>(iii) Number of personnel trained</li><li>at the time of induction</li><li>(iv) Number of personnel not</li></ul>		Nil
	undergone any training so far	6 n	
5	(v) Whether standard manual for training 1s available?		Utilizing posters, power points and hands on training.
8	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		Nil
	(ii) Number of persons affected		Nil
	(iii) Remedial Action taken (please attach details i1 any)		Nil
	(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 meet the standards?		NA
	Details of continuous online emission monitoring system installed		NA
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		STP
11	1s this the disinfection method or sterilization meeting the log 4 standards? Ho many timesyou have not met the standards ill a year?		NA
12	Any other relevant information		No.

Certified that the above report is for the period from 01.08.2023 to 31.08.2023

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Name and Signature of FIC- of Bio Medical Waste Management

Date:01/01/23 Place: Kalyene

Professor Dr. Ajay Mallick

Medical Superintendent

& Chairperson of Swachhta and Kayakalp Committee