

**Form - IV**  
**(See rule 13)**  
**ANNUAL REPORT**

[To be submitted to the prescribed authority on or before 30<sup>th</sup> 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	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	Dr.Kim, Chief Medical Officer ARAVIND EYE HOSPITAL
	(ii) Name of HCF or CBMWTF	:	ARAVIND EYE HOSPITAL
	(iii) Address for Correspondence	:	1, Anna Nagar
	(iv) Address of Facility		Madurai 625 020
	(v) Tel. No, Fax. No	:	0452 - 4356100
	(vi) E-mail ID	:	kim@aravind.org
	(vii) URL of Website		www.aravind.org
	(viii) GPS coordinates of HCF or CBMWTF		
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other) Aravind Eye Hospital - TRUST
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: <b>18BAD11986714</b> dated 16/10/2018 valid up to 31/03/2021
	(xi). Status of Consents under Water Act and Air Act	:	<b>F.0803MDU/RS/DEE/TNPCB/MD U/W&amp; A/2016 to: 31.03.2021</b> <b>F.0803MDU/RS/DEE/TNPCB/MD U/W&amp; A/2016 to: 31.03.2021</b>
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds:250 Nos.
	(ii) Non-bedded hospital  (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	Not Applicable (NA)
	(iii) License number and its date of expiry		MADUALL20190004394 CEA Registration – 29.11.2019 to 28.11.2024
3.	Details of CBMWTF	:	NA
	(i) Number healthcare facilities covered by CBMWTF	:	NA
	(ii) No of beds covered by CBMWTF	:	
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	_g per day



	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	0. ___ Kg/day		
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category	: 1872 kg per annum	
			Red Category : 624 kg per annum		
			White: 330 Kg per annum		
			Blue Category :478 kg per annum		
			General Solid waste:		
5	Details of the Storage, treatment, transportation, processing and Disposal Facility				
	(i) Details of the facility on-site storage	:	Size:10 x6		
			Capacity : 5000 kg		
			Provision of on-site storage any other provision) : (cold storage or		
	(ii) Details of the disposal facilities treatment or		Type of Treatment equipment	No of Units per ann	Capacity Kg / Day
			Incinerators	NA	NA
			Plasma Pyrolysis	NA	NA
			Autoclaves	2	500 gms
			Microwave	NA	NA
			Hydroclave	NA	NA
			Shredder	---	---
			Needle tip cutter or destroyer sharps	11	25 gms
			Encapsulation or concrete pit	---	---
			Deep burial pits	---	---
			Chemical Disinfection	2	4.0 KLD
			Any other treatment equipment	---	---
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.)		
	(iv) No of vehicles used for collection and transportation of biomedical waste	:	Common Facility Vehicle provided by CBMWTF		
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum			Quantity generated	Where disposed
			Incineration	NA	NA
			Ash	NA	NA
			ETP Sludge	NA	NA



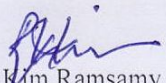
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	M/s. Ramky Energy & Environment Ltd, Madurai
	(vii) List of member HCF not handed over bio-medical waste.		----
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		HIC Minutes
7	Details trainings conducted on BMW		Yes
	(i) Number of trainings conducted on BMW Management.		4 (Quarterly)
	(ii) number of personnel trained		200
	(iii) number of personnel trained at the time of induction		20
	(iv) number of personnel not undergone any training so far		-----
	(v) whether standard manual for training is available?		Yes
	(vi) any other information)		No
8	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		NIL
	(ii) Number of the persons affected		NIL
	(iii) Remedial Action taken (Please attach details if 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 met the standards?		NA
	Details of Continuous online emission monitoring systems installed		NA
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		NA
11	Is the disinfection method or sterilization meeting the log 4		NA



	standards? How many times you have not met the standards in a year?		
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator) Provided Gen set with Acoustic enclosures with stack

Certified that the above report is for the period from 01.01.2020 to 31.03.2021

Name and Signature of the Head of the Institution

  
Dr. Kim Ramsamy  
Chief Medical officer

Date: 01.01.2020

Place Madurai