## 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)]

S1.	Particulars			
No.				
1.	Particulars of the Occupier	:		
	(i) Name of the authorised person (occupier or operator of facility)	:	zaid Altab Dalal	
	(ii) Name of HCF or CBMWTF	:	D.S.HealthCare	
	(iii) Address for Correspondence	:	Mominabad Ashquit	osc Ang
	(iv) Address of Facility		Momunasad Ashqi kon	a dig.
	(v)Tel. No, Fax. No	:	UP OF	')
	(vi) E-mail ID	:	dishe alth care an for	Amout com
	(vii) URL of Website	1.1.1	www.amal.hospital.	Sem
	(viii) GPS coordinates of HCF or CBMWTF		33.705827, 75.1550	070
	(ix) Ownership of HCF or CBMWTF	1:	(State Government or Private or	-1.
			Semi Govt. or any other)	
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.:	
			valid up to	
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to:	
2.	Type of Health Care Facility	:	Hospital	
	(i) Bedded Hospital	:	No. of Beds: 3	
	(ii) Non-bedded hospital	:	30.	
	(Clinic or Blood Bank or Clinical Laboratory or			
	Research Institute or Veterinary Hospital or any other)			
	(iii) License number and its date of expiry	-	11110010010010	
3.	Details of CBMWTF		KHCS 23 561	
3.		:		
	(i) Number healthcare facilities covered by CBMWTF	:		
	(ii) No of beds covered by CBMWTF	:	30	
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	ISK.LDKg per day	

	(iv) Quantity of biomedical waste treated or by CBMWTF				5.92 K				
Quantity of waste generated or disposed in Kg per			:	Yellow			904.7	_	
	annum (on monthly average basis)				Red Cat	egory :	FC	77.16	
				White: 34.1					
				Blue Ca	tegory :	: 467			
							420.6		
Details of the Storage, treatment, transportation, processing and Disposal Facility									
(i) Details of the on-site storage :			Size	:	10	CX C	AF	eet	
facility	facility	t	Size : 12 X 20 Feet Capacity: 2400					1	
			-	-	on-site s			ld storage or	1
					vision)	storage	. (00)		
	(ii) Details of the treatment or :		-	-	atment	No	Cap	Quantity	1
	disposal facilities		~ 1	oment	atment	of	acit	treatedo	
			oquit	interit		unit	у	r	
						S	Kg/	disposed	1.
							day	in kg	
								per	-
								annum	
			Incinerators			-			
			Plasma Pyrolysis Autoclaves						
		1							
			Microwave						
			Hydroclave Shredder		9				
					auttan an				
	The former and the second		destr		o cutter or		-		
			Shar	-					
				ps psulati	on or		-		
			CONC	-					
			-	buria					
			Chen	nical	-				
			disinfection:						
			Any other treatment						
			equip	pment					N. S.
	(iii) Quantity of recyclable wastes :	]	Red Category (like plastic, glass etc.)					TT an	
	sold to authorized recyclers after		534,088 Kashmir Heel S34,088 System Lossifi					inca	
	treatment in kg per annum.		2	21	,000	Syg	ilem	Lassi	base-
	(iv) No of vehicles used for collection :		01.						
-	and transportation of biomedical								
-	waste								
4	(v) Details of incineration ash and		Quantity Where generated disposed						

	during the treatment of wastes in Kg per annum	Incineration Ash ETP Sludge
	<ul><li>(vi) Name of the Common Bio- : Medical Waste Treatment Facility</li><li>Operator through which wastes are disposed of</li></ul>	Kashmir Healthcare System Lassipure Pulurma None.
	(vii) List of member HCF not handed over bio-medical waste.	None.
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	NO
7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management.	15
	(ii) number of personnel trained	5
	(iii) number of personnel trained at the time of induction	5
	(iv) number of personnel not undergone any training so far	Ч.
	(v) whether standard manual for training is available?	Yes.
	(vi) any other information)	None
8	Details of the accident occurred during the year	None
	(i) Number of Accidents occurred	D
	(ii) Number of the persons affected	0
	(iii) Remedial Action taken (Please attach details if any)	U
	(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 the standards?	Yes
	Details of Continuous online emission monitoring systems installed	NO
	D Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Yes, None
	Is the disinfection method or sterilization meeting the log 4	Yes.

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)

Certified that the above report is for the period from

... 01, Jan-2023 to 31, Dec-2023. .....

Name and Signature of the Head of the Institution

Date: 10/6/24 Place Anountinog.