



OFFICE OF THE SUPERINTENDENT, CHC BARGAON, SUNDARGARH  
BLOCK PROGRAMME MANAGEMENT UNIT  
E-Mail-bpmubargaon@yahoo.com



Letter. No. 39 /BPMU-BARGAON-2022-23

Date. 7/1/2023

TO,

The DIO,  
NIC, Sundargarh.

Sub: - (Request for uploading annual Report 2021 ( January 2021 to December 2021) of Bio Medical waste Management of Bargaon CHC)

Respected Sir,

With reference to the subject cited above, I am to requesting you to kindly upload the annual report of 2021 of Bio medical Waste management of Bargaon CHC in the district Website.

This is for fovour of information and necessary action.

Enclosed :- Bio medical waste Management Annual Report .

Thanking You

*Ash*  
7/1/2023  
Superintendent  
Bargaon CHC

Memo No 40 Date 7/1/2023  
Copy Submitted to The DPHO , SUndargarh for your kind information .

*Ash*  
7/1/2023  
Superintendent  
Bargaon CHC

Memo No 41 Date 07/1/2023  
Copy Submitted to The CDM& PHO , Sundargarh for your kind information .

*Ash*  
7/1/2023  
Superintendent  
Bargaon CHC



**OFFICE OF THE SUPERINTENDENT, CHC BARGAON, SUNDARGARH**  
**BLOCK PROGRAMME MANAGEMENT UNIT**

E-Mail- bpmubargaon@yahoo.com

**Letter. No.** 248 /BPMU-BARGAON-2022-23 **Date.** 9/4/2022

TO,

The Member Secretary,  
State Pollution Control Board, BBSR, Odisha.

Sub: - (Regarding Annual report submission for the Year 2021)

Respected Sir,

With reference to the subject cited above, I am here with submitting the annual report of 2021 of Bio medical Waste management of Bargaon CHC.

This is for favour of information and necessary action.

Enclosed :- Bio medical waste Management Annual Report .

Thanking You

  
Superintendent  
Bargaon CHC

Memo No 249 Date 9/4/2022  
Copy Submitted to The DPHO, SUndargarh for your kind information.

  
Superintendent  
Bargaon CHC

Memo No 250 Date 9/4/2022  
Copy Submitted to The CDM& PHO, Sundargarh for your kind information .

  
Superintendent  
Bargaon CHC

(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 (CBMTF)]

S. No.	Particulars
1	Particulars of the Occupier (i) Name of the authorized person (occupier or : operator of facility) : <u>Superintendent, Baragan ctk.</u> (ii) Name of HCF or CBMTF : <u>Superintendent, Baragan ctk.</u> (iii) Address for Correspondence : <u>CHC, Baragan</u> (iv) Address of Facility : <u>At/ke. Baragan, Sindangauh.</u> (v) Tel. No, Fax. No : <u>9439993582.</u> (vi) E-mail ID : <u>bpmbangan@yahoo.com</u> (vii) URL of Website : (viii) GPS coordinates of HCF or CBMTF : (ix) Ownership of HCF or CBMTF : <u>(State Government or Private or Semi Govt. or any other)</u> (x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules : <u>Authorisation No.: 10944 / 05/11/2010.</u> (xi). Status of Consents under Water Act and Air Act : <u>Valid upto: ..... Val up to 21/3/2015.</u>
2	Type of Health Care Facility : (i) Bedded Hospital : <u>No. of Beds: 30</u> (ii) Non-bedded hospital : Clinical Laboratory or Research Institute or Veterinary Hospital or any other) : (iii) License number and its date of expiry : Details of CBMTF : (i) Number of health care facilities covered by CBMTF : <u>1</u> (ii) No. of Beds covered by CBMTF : <u>30</u> (iii) Installed treatment and disposal capacity of CBMTF, : _____ Kg / day (iv) Quantity of bio medical waste treated or disposed by CBMTF : _____ Kg / day
4	Quantity of waste generated or disposed in Kg per Annum (on monthly average basis) : Yellow Category: <u>480.950 kg.</u> Red Category: <u>390.050 kg.</u> White: <u>105.020 kg.</u> Blue Category: <u>189.425 kg.</u> General Solid Waste: <u>1525 kg</u>
	Details of the Storage, Treatment, Transportation, Processing and Disposal Facility (i) Details of the on-site storage : <u>Size:</u>



7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management	2
	(ii) Number of personnel trained	35
	(iii) Number of personnel trained at the time of induction	1
	(iv) Number of personnel not undergone any training so far	35
	(v) Whether standard manual for training is available?	Yes
8	Details of the accident occurred during the year	
	(i) Number of Accidents occurred	0
	(ii) Number of persons affected	0
	(iii) Remedial Action taken (Please attach details if any)	0
	(iv) Any Fatality occurred, details	0
9	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	
	Details of Continuous online emission monitoring systems installed	
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Yes.
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	
	(Air Pollution Control Devices attached with the Incinerator)	

Certified that the above report is for the period from

January 2021 to December 2021

Name and Signature of the Head of the Institution

Date: 09/11/2022.  
Place: Bargain ctc.

Signature  
09/11/2022  
Superintendent  
Bargain CTC