

**Form IV (See rules 13)**  
**ANNUAL REPORT**

SL NO.	PARTICULARS		
1.	Particulars of the occupier	:	
	I. Name of the authorized person (Occupier or operator of facility)	:	Mr. K.K. Sarma Dy. Hospital Superintendent
	II. Name of the <b>HCF</b> or CBMWTF	:	GNRC HOSPITAL, SIXMILE (A UNIT OF GNRC LTD)
	III. Address for correspondence	:	Sixmile, Guwahati, Pin- 781022, Dist- Kamrup (M) Assam
	IV. Address of facility	:	- Same as above-
	V. Tel No, Fax No	:	1800-345-0022, Fax no- 2227711
	VI. E-Mail ID	:	<a href="mailto:cs.gnrc@gnrchospitals.com">cs.gnrc@gnrchospitals.com</a>
	VII. URL of website	:	<a href="http://www.gnrchospitals.com">www.gnrchospitals.com</a>
	VIII. GPS coordinates of HCF or CBMWTF	:	<a href="#">Enclosed</a>
	IX. Ownership of HCF or CBMWTF	:	(State government of Private or semi govt or any other) Public Ltd. Company.
	X. Status of authorization under the Bio-medical waste (management and handling) rules	:	Authorization no.:EB/OTWA/BMW-239/11-12/62 DTD-01/9/2015 VALID UPTO 31/8/18
	XI. Status of consents under water act and air act	:	Valid up to: Applied for FY: 2016-17 vide letter no: GNRC/PCB/Sixmile/16-17/01, DTD; 30/12/15
2.	Type of health care facility	:	<b>HOSPITALS</b>
	i. Bedded hospital	:	No of beds: <b>80</b>
	ii. Non-Bedded hospital (Clinic or blood bank or clinical laboratory or research institute or Veterinary Hospital or any other)	:	NA
	iii. License number and its date of expiry	:	<b>SHA/203 (R) Dtd applied for renewal on: 16.05.2016.</b>
3.	Details of CBMWTF		
	i. Number healthcare facilities covered by CBMWTF	:	<b>NA</b>
	ii. No of beds covered by CBMWTF	:	<b>NA</b>
	iii. Installed treatment and disposal capacity of CBMWTF:	:	_____ Kg per day NA
	iv. Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg per day NA
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis) by HCF	:	<b>Yellow category: 403.5Kg, solid per month (4842 kg per annum ) &amp; 15,000 ltrs per day (450,000 lts permonth , app. 54,75,000 ltr per annum )- liquid effluent</b> <b>Red category: 95kg pm (1140Kg pa)</b> <b>White: 9.8Kg pm (117.6Kg pa)</b> <b>Blue category: 60kg pm (720kg pa)</b>

			<b>General solid waste: 2700 Kg per month (32400 kg pa)</b>
5	Details of the storage, treatment, transportation, processing and disposal facility ( copy enclosed)		
	i. Details of the on-site storage facility	:	Size: 27ft length, 12ft breath, 6 ft height Capacity: 200Kg/day Provision of on-site storage: (Cold storage or any other provision) <b>Local storage for final disposal by out sourced agency</b>
	ii. Details of the treatment or disposal facilities	:	Type of treatment No Capa Quantity Equipment of city treated or Units Kg/day disposed in Kg per annum  Incinerators Plasma Pyrolysis Autoclaves:  Incinerators Plasma Pyrolysis Microwave Hydroclave Shredder Needle tip cutter or destroyer: 15 NOS Sharps encapsulation or concrete pit Deep burial pits Chemical disinfection: 10%sodium hypochlorite (NaoCl) solution for treatment Any other treatment equipment: ETP for liquid effluents.
	iii. Quantity of recyclable wastes sold to authorized recyclers after treatment in Kg per annum	:	Red category (Like plastic, glass etc)  NO
	iv. No of vehicle used for collection and transportation of bio chemical waste	:	<b>OUT SOURCED</b>
	v. Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum.	:	<b>Quantity Where disposed Generation Incineration By CBMWTF Ash ETP sludge6kg/Year</b>
	vi. Name of the common bio-medical waste treatment facility operator through which wastes are disposed of		<b>M/S Fresh Air Waste Management Private Ltd.</b>
	vii. List of member HCF not handed over bio-medical waste		<b>NA</b>
6.	Do you have bio-medical waste management committee? If yes, attach minute of the meetings held during the reporting period		<b>Yes- attached</b>
7	Details training conducted on BMW		<b>20nos</b>

	i. Number of trainings conducted on BMW management.		<b>20nos</b>
	ii. Number of personnel trainer		<b>4nos</b>
	iii. Number of personnel trained at the time of induction		<b>120nos</b>
	iv. Number of personnel not undergo any training so far		<b>Nil</b>
	v. Whether standard manual for training is available?		<b>Yes</b>
	vi. Any other information		<b>No</b>
8.	Details of the accident occurred during the year		
	i. Number of accidents occurred		<b>Nil</b>
	ii. Number of the persons affected		<b>Nil</b>
	iii. Remedial action taken (Please attach details if any)		<b>NA</b>
9.	Are you meeting the standards of air pollution from the incinerator? How many times in last year could not met the standards?		<b>By CBMWTF, NO</b>
	Details of continuous online emission monitoring systems installed.		<b>No</b>
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		<b>Yes, maintained</b>
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		<b>Standard maintained</b>
12	Any other relevant information	:	<b>(Air pollution control devices attached with the incinerator). NA</b>

Certified that the above report is for the period from May 2015 to July 2016

I do hereby declare that the statements made and information given above are true to the best of my knowledge and belief and I have not concealed any information.

I do also hereby undertake to provide any further information sought by prescribed authority in relation to this rules and to fulfill any conditions stipulated by the prescribe authority.

MR KARUNA KANTA SARMA.(. Dy hospital Superintendent)

Name and head of the institution.

Date: 27.08.2016

Place: Guwahati.

## Details of the on site Storage Facility (Point No -5)

Segregation Step -1

Collection Step -2

Transportation to Central Storage Site -3

The above facilities are In house only.

Transportation to Final Disposal Site

Treatment & Disposal Step

The above facilities out sourced

### Segregation

- 1) Responsibility of All Staff.
- 2) Display of Segregation Guideline.
- 3) Color Coding & Labeling.
- 4) Needle Destroyer for Needles.
- 5) For Sharps: Puncture Proof -Container.

### Collection

1. Collected by House Keeping Staff.
- 2) 4 Hourly in ICU and 6 hourly in Wards , other clinical areas.
- 3) Used PPE While Collecting Waste.

### Central Storage Area ( Temporary Storage)

- 1) Color Coded Containers.
- 2) Labeling.
- 3) Away From Patient area.
- 4) Fire Extinguisher.
- 5) Availability of PPE.

- 6) Facility of washing hand and Containers.
- 7) Electronic Weight Machine for measurement of different type of Waste.
- 8) Waste Transportation Trolley .
- 9) Friendly Environment.
- 10) Waste should not be keep stored in the Hospital beyond the period of 48 hours.
- 11.The size of the storage area is length 27feet and breath 12 feet.
- 12.The capacity of the storage area is upto 200kg.
- 13) Maintain and update on day basis Register for Bio-Medical Waste.

The Above Facilities In House only ( H.C.F)

## **BIO-MEDICAL WASTE MANAGEMENT COMMITTEE**

Date 02-08-2016. Time 3pm.

Vanue: GNRC Sixmile

Chairperson-Miss Satabdee Borah (CEO GNRC SIX MILE)

Secretary-Mr. Krishna Nath (Sr coordinator)

Mrs.Manju Saikia (Infection control nurse)

### **Member**

Mr. K.K. Sarma ( DMS)

Dr. M.Rahman (D H S)

Mr. Avinash Barman ( Sr. Executive)

Mr. Surajit Hazarika ( Civil Eng)

Mrs. Namrata S. Pradhan ( Nursing suptd)

Mr. Biswajit Das ( CS)

Dr. Chitrlekha Gogoi ( Incharge Lab)

Dr. P.S. Medhi (HOD Microbiology)

# Agenda

Hospital waste management committee has been established with a view to improve hospital waste management and for proper implementation of BMWM rules 2016 under the chairmanship of CEO. It is a board based committee with representative from Hospital Administration, Clinical dept., Pathology and Microbiology department and has power to take decision on all matters related to BMWM for GNRC Hospitals Six mile. The smaller core group is responsible for implementation of new rules 2016. The responsible of the various categories of the staff are generation, collection and transportation, disposal of waste formulated and implemented by the committee.

## Scope of service

To aim to provide for a system for management of all potentially infectious and hazardous waste in accordance with BMW (Management and handling) rules 2016.

## Minutes

1. New BMWM guideline (2016) to be implemented properly.
2. Frequency of training on new BMWM guideline to be increased.
3. PPE to be used for all concerned person.
4. Structure of the BMWM area to be improved. Tiles to be fitted, height to be increased.
5. Vaccination to be covered to all employees.
6. In case of any kind of adverse event, incident reporting system to be followed.

DD (decimal degrees)\*

Latitude

Longitude

DMS (degrees, minutes, secondes)\*

Latitude

☉ N ☉ S ° ' ''

Longitude

☉ E ☉ W ° ' ''

\* World Geodetic System 84 (WGS 84)



Guwahati-Shillong Rd, Six Mile, Guwahati, Assam, India

Latitude: 26.13248 | Longitude: 91.806914



New: name your GPS Coordinates!

MONTHLY BIO MEDICAL WASTE RECORD FOR THE MONTH OF JULY.  
2016, GNRC HOSPITALS SIXMILE, GUWAHATI., ASSAM.

CATEGORY	TYPES OF WASTE	QUANTITY GENERATED OR COLLECTED KG/MONTH
YELLOW	1.HUMAN ANATOMICAL WASTE 2.ANIMAL ANATOMICAL WASTE 3.SOILED WASTE 4.EXPIRED OR DISCARDED MEDICINES 5.CHEMICAL LIQUID WASTE 6.DISCARDED LINEN  7.MICROBIOLOGY,BIOTECHNOLOGY AND OTHER CLINICAL LAB WASTE	0.9KG/MONTH NIL 375KG 0.6KG  450000LTRS 19.8KG  6.9KG
RED	COTAMINATED WASTE(RECYCLABLE)	96KG
WHITE(TRANSLUCENT )	WASTE SHARPS INCLUDING METALS	9.9KG
BLUE	GLASSWARE METALLIC BODY IMPLATS.	60KG

