



Old # 753, New # 432, Poonamallee High Road, Kilpauk, Chennai - 600 010. Ph:2641 3445, 2641 3446. Fax: 044- 2642 6766.

Email: padmaclinic2010@gmail.com

Date:

The District Environmental Engineer, Tamil Nadu Pollution Control Board,

No: 950/1, Poonamallee High Road, Arumbakkam, Chennai-600106.

Sir,

Sub: Bio-Medical Waste (BMW)- Under Bio-Medical Waste Management & Handling Rules, 2016 - Furnishing of Bio Medical annual Returns for the period January-2018 to December- 2018 Form No: IV Submission-Reg.

Please find the enclosed form-IV of Bio Medical Annual returns for the period of January 2018 - December 2018.

Kindly acknowledge the receipt.

Yours faithfully,

Authorized Signate

For M/s. PADMA CLINIC AND NURSING HOME

600 010

OC DEE, TANDON OCT OF THE POPULATION OF THE POPU

Form - IV

(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 (CBWTF)]

Sl.No.	Particulars		
	Particulars of the Occupier :		
	(i) Name of the authorised person (occupier or operator of facility) :	Dr PADMAJA GIREESH	
	(ii) Name of HCF or CBMWTF:	PADMA CLINIC AND NURSING HOME.	
	(iii) Address for Correspondence :	752 & 753, Poonamallee High Road, Kilpauk,Chennai 600010	
	(iv) Address of Facility	752 & 753, Poonamallee High Road, Kilpauk,Chennai 600010	
1	(v)Tel. No, Fax. No:	044 26413445	
	(vi) E-mail ID :		
	(vii) URL of Website		
	(viii) GPS coordinates of HCF or CBMWTF	GPS coordinates Not Available	
	(ix) Ownership of HCF or CBMWTF : (HEALTH CARE ESTABLISHMENT	
	(x). Status of Authorisation under the Bio- Medical Waste (Management and Handling) Rules	Valid Authorisation	
	(xi). Status of Consents under Water Act and Air Act	ORDER NO. 1808112231727 and 1808212231727 Valid up to 31/03/2020	
	Type of Health Care Facility :		
	(i) Bedded Hospital : No. of Beds:	No of Beds -40	
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	Not Applicable	
	(iii) License number and its date of expiry		
	Details of CBMWTF:		
	(i) Number healthcare facilities covered by CBMWTF		

	(ii) No of beds covered by CBMWTF:	Not Applicable for us			
	(iii) Installed treatment and disposal capacity of CBMWTF:				us
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF				
	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	Yellow Category		gory	2348
		Red Category		ory	2492.5
4		White:			14
		Blue Category :		ry:	465
		General Solid waste:		waste:	General Garbage 5KG/DAY
5	Details of the Storage, treatment, transportation, processing and Disposal Facility				
	(i) Details of the on-site storage facility	Size - Dedicated storage Room Size 4 m X 3			
		Capacity:	: To store 250 Kg of Waste		
		Provision of on-site storage : (cold storage or an other provision) - No Cold storage Provision			
	Disposal Facilities	No of Capacity Units kg/day Quantity treated of disposed in kg per annum			
				dispose	d in kg per
	Incinerators	Units		dispose	d in kg per
		Units		dispose	d in kg per
	Incinerators	Units		dispose	d in kg per
	Incinerators Plasma Pyrolysis	Units	kg/day	dispose	d in kg per nnum
	Incinerators Plasma Pyrolysis Autoclaves Microwave	Units	kg/day	dispose ar	d in kg per nnum
	Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave	Units	kg/day	dispose ar	d in kg per nnum
	Incinerators Plasma Pyrolysis Autoclaves Microwave	Units	kg/day	dispose ar	d in kg per nnum
	Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder	Units	No On s	dispose ar iite Disposal	d in kg per nnum
	Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or destroyer	Units	No On s	dispose ar	d in kg per nnum
	Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or destroyer Sharps encapsulation or concrete pit	Units	No On s	dispose ar site Disposal	d in kg per nnum
	Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or destroyer Sharps encapsulation or concrete pit Deep burial pits:	Units	No On s Not A KL/day Type Sodiu	dispose ar disposal d	d in kg per nnum

	iv) No of vehicles used for collection and transportation of biomedical waste	Does not arise as vehicle provided by CBMW		
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Incinerati on Quantity Where Ash ETP generated disposed		
	(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of	GJ MULTI CLAVE(INDIA) PRIVATE LIMITED No Ash and ETP sludge are generated in ou premises)		
	(vii) List of member HCF not handed over bio- medical waste.	Not Applicable		
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	Yes		
7	Details trainings conducted on BMW			
	(i) Number of trainings conducted on BMW Management.	Two trainings/Month		
	(ii) number of personnel trained	10 Nos		
	(iii) number of personnel trained at the time of induction	06 Nos		
	(iv) number of personnel not undergone any training so far	NIL		
	(v) whether standard manual for training is available?	Yes		
	(vi) any other information)	NIL		
8	Details of the accident occurred during the year	No accident occurred		
	(i) Number of Accidents occurred	NA		
	(ii) Number of the persons affected	NA		
	(iii) Remedial Action taken (Please attach details if any)	NA		
	(iv) Any Fatality occurred, details.	NA		
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	NO
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	All the norms of Treated trade effluent (Lab, OT floor washings and from dialysis)
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	Standards Achieved through the year as prescribed by board
12	Any other relevant information	NIL

Certified that the above report is for the period from January 2018 to December 2018

Date:

Place

Name and signature of the Head of the Institution

CHENNAI 600 010

*