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)]

SI.	Particulars	į.		
No.	Particulars of the Occupies			
1.	Particulars of the Occupier (i) Name of the authorised person (occupier or	:	3	
	operator of facility)		DR.R.MEEnakshi Do., DNB	
	(ii) Name of HCF or CBMWTF	14.	ARAVIND EYE HOSPITAL	
	(iii) Address for Correspondence	:	1, SN High Road	
	(iv) Address of Facility		Tirunelveli Janction	
H	(v)Tel. No, Fax. No	:	0462-4356100	
	(vi) E-mail ID	:	dymeenak Shi@ aravind . Dry	
	(vii) URL of Website		WWW. aravind - org	
	(viii) GPS coordinates of HCF or CBMWTF		9	
1 Y	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other) AEH-Trw	
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: 20BAZ-6.7.8.6016 Dt 2011.20	
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31/3/21	
	Type of Health Care Facility	:		
	(i) Bedded Hospital	:	No. of Beds: 14.2	
	(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		184/2019 Dt-5/8/19 6 12/.	
	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:	:	Kg per day	

	(iv) Quantity of biomedical waste treated by CBMWTF	l or di	sposed		Kg	/day		
4.					Red Category: 53kg			
			<i>a</i>	General S	olid w	aste:)	
5	Details of the Storage, treatment, transpo (i) Details of the on-site storage	rtatio	n, proces Size		nd Disposa	l Facil	ity	
	facility		Capacity: 600 Provision of on-site storage : (cold storage or any other provision)					
	(ii) Details of the treatment or disposal facilities	:	Туре	-	atment	No of unit s	Cap acit y Kg/ day	Quantity treatedo r disposed in kg per annum
	v		Plasi		rolysis	NA	NA	NA NA
	1 1		Micr Hydr Shre	claves rowave roclav dder	e	NA NA	NA NA	62.6kg NA NA
	16 16 16 16 16 16 16 16 16 16 16 16 16 1		destr	royer	ion or		10.9	3107
			Dee Che disir Any	mical nfectio	al pits: on: treatment		-	
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.)			9		
	(iv) No of vehicles used for collection and transportation of biomedical waste		W.		0	atita	13./	here
	(v) Details of incineration ash and ETP sludge generated and disposed				Quar gene	rated		sposed

	during the treatment of wastes in Kg per annum	X	Incineration Z Ash ETP Sludge	
	(vi) Name of the Common Bio- Medical Waste Treatment Facility		Aseptic Systems BMW Compa	y
	Operator through which wastes are disposed of		TVI	
	(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 Meeting	
7	Details trainings conducted on BMW		Ves	
	(i) Number of trainings conducted on BMW Management.		4 (Quarterly)	
	(ii) number of personnel trained		400	
	(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			0.00000
	(i) Number of Accidents occurred		Noî)	
	(ii) Number of the persons affected (iii) Remedial Action taken (Please		(A) 1	
	attach details if any)		nil	
	(iv) Any Fatality occurred, details.		N2) 1	
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		NP	1
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)
			N. W.

Certified that the above report is for the period from	(January 19 to December 19)
*	
	Name and Signature of the Head of the Institution
	Name and Signature of the Head of the Institution

Date: 10.06.2020 Place: Tirunelveli. Dr.R. Meenakshi, D.O. Dip.NB Chief Medical Officer Aravind Eye Hospital Tirunelveli Jn.



M/s. Aseptic System Bio Medical Waste Management Company nellaictf@gmail.com

Annual Report for the Period of January - 2019 to December - 2019

ARAVIND EYE HOSPITAL (266) TIRUNELVELI - TIRUNELVELI

No	Month		Total Weight			
		Red	Yellow	Blue	White	
1	JAN	5.00	6.00	2.00	1.00	14.00
2	FEB	4.00	7.00	3.00	2.00	16.00
3	MAR .	6.00	5.00	1.00	3.00	15.00
4	APR	1.00	1.00	4.00	1.00	7.00
5	MAY	4.00	6.00	3.00	1.00	14.00
6	JUN	3.00	7.00	2.00	2.00	14.00
7	JUL	5.00	5.00	1.00	1.00	12.00
8	AUG	3.00	3.00	2.00	2.00	10.00
9	SEP	6.00	4.00	1.00	3.00	14.00
10	OCT	4.00	8.00	3.00	2.00	17.00
11	NOV	5.00	4.00	3.00	3.00	15.00
12	DEC	7.00	7.00	2.00	2.00	18.00
	Total	53.00	63.00	27.00	23.00	166.00

This is a computer generated Report