

Annual Returns form for Health Care Facilities / Common Bio-medical Waste Treatment and Disposal Facility (CBWTF)

PCB ID : 117772

Health Care Facility / CBWTF Name : Divya Drishti Netralaya And Leser Center And Pulkit Child Care Centre

1	Year	2020
2	Type of Health Care Facility	Bedded Hospital Priv
3	Number of Beds	04
4	License Number and Date of Expiry of License	WB -60736 30/08/20
5	Do you have Captive Treatment Facility ?	<input type="radio"/> Yes <input checked="" type="radio"/> No

Quantity of Waste Generated or Disposed in Kg per annum (on monthly average basis)

6	Yellow Category	260.0
7	Red Category	140.0
8	White Category	.35.0
9	Blue Category	70.0
10	General Solid Waste	800.0

Details of the Storage, Treatment, Transportation, Processing and Disposal Facility

11	Details of the on-site storage facility	COLOUR CODED BIOHAZARD LABELLED PLASTIC CONTAINER USED FOR
12	Treatment Facility	CHM,DBN,DIS,DSN,DNC,BND,NEE,NCS,NDS
13	Quantity of Recyclable Waste sold to Authorized Recyclers after Treatment (in kg / Year)	00
14	Number of Vehicles used for Collection and Transportation of Biomedical Waste	1
15	Details of Incineration Ash and ETP Sludge generated and disposed during the Treatment of waste (in Kg / Year)	00

16	Name of the Common Bio-Medical Waste Treatment Facility Operator through which waste are disposed of	Select Your CBWTF <input type="text"/>
17	Do you have bio-medical waste management committee ? If yes, minutes of the meetings held during the reporting period	N.A. <input type="radio"/> Yes <input checked="" type="radio"/> No
Details of Trainings conducted on Bio Medical Waste Management		
18	Number of Trainings conducted on BMW Management	<input type="text" value="01"/>
19	Number of Personnel Trained	<input type="text" value="03"/>
20	Number of Personnel Trained at the time of Induction	<input type="text"/>
21	Number of Personnel not undergone any Training so far	<input type="text" value="00"/>
22	Whether standard manual for Training is available ?	<input type="radio"/> Yes <input checked="" type="radio"/> No
23	Any other information	GENERATED BIOMEDICAL WASTE DISPOSED THROUGH INCINERATOR OF M/S DAVIS SURGICO <input type="text"/>
Details of the accident occurred during the year		
24	Number of Accident occurred	<input type="text" value="00"/>
25	Number of the persons affected	<input type="text" value="00"/>
26	Remedial Action taken (details if any)	N.A.
27	Any Fatality Occurred , details	NO
28	Are you meeting the standards of air Pollution from the incinerator ? How many times in last year could not met the standards?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="text" value="N.A."/>
29	Details of Continuous Online Emission Monitoring systems installed	N.A.
30	Liquid waste generated and treatment methods in place . How many times you have not met the standards in a year	<input type="text" value="TREATED AND DIS"/>
31	Is the disinfection method or	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="text" value="00"/>

	sterilization meeting the log 4 standards ? How many times you have not met the standards in a year ?	
32	Any other relevant information	CGENERATED BIOMEDICAL WASTE DISPOSED THROUGH INCINERATOR OF M/S DAVIS SURGICO
Update		

