



Date:- 10/10/2023

To

The Environmental Engineer (BMW)

Utter Pradesh Pollution Control Board

Department of Environment (Gov. of UP)

FG J7+JC3 near Commercial Belt Block F Beta II Greater Noida 201308

Subject: - Submission of Form IV (Annual Return for the Year of 2022)

Dear Sir,

This is in reference to the above mentioned subject we wish to bring your kind notice about the Bio medical waste during procedure handling and transportation.

Please find the enclosed form IV

This is for your information and records.

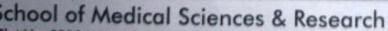
Thanks & Regards

(Dr. A.K. Gadpayle)

Medical Superintendent

SHARDA HOSPITAL

Total elelso



Medical Superintendor

Sharda Hospital

Plot No. 32&34, Knowledge Park-III, Greater Noida – 201 306

24-hours Helpline: +91-8447 333 999

Email: info@shardahospital.org | www.shardahospital.org



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. No.	Particulars		
1.	Particulars of the Occupier		SHARDA HOSPITAL
	(i) Name of the authorized person (occupier or operator of facility)	1	Dr. Ak (nadpayle (MS)
	I I		
	(ii) Name of HCF or CBMWTF	1	SHARDA HOSPITAL
	(iii) Address for Correspondence	:	PLOT - 32-34, Knowledge fork-III
	(iv) Address of Facility		-Do-
	(v)Tel. No, Fax. No	1	+91 8447333999
	(vi) E-mail ID		in po@smardahospital.org.
	(vii) URL of Website		www.shardahospitaleorg.
	(viii) GPS coordinates of HCF or CBMWTF		
	(ix) Ownership of HCF or CBMWTF	;	(State Government or Private or Semi Govt, or any other)
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	Authorization No.:113282.40valid up to Dec 23
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: Dec 2023
2.	Type of Health Care Facility	:	Hospital
1	(i) Bedded Hospital	1	No. of Beds: 1286
1	(ii) Non-bedded hospital	1	Hospital
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)		10211101
	(iii) License number and its date of expiry		
	Details of CBMWTF	1	
	(i) Number healthcare facilities covered by CBMWTF	:	to be Bubmisted directly by the waste management vandor-
	(ii) No of beds covered by CBMWTF	1	
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	To be 8 ubm Hed by the Bynergy was
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	1	Kg/day _ Do-
		1	Yellow Category :

	Quantity of waste generated or disposed	d in	g per Red Category : 1842 kg.
	annum (on monthly average basis)		White: 42.58 kg.
5 De			Blue Category: 426.16 kg.
			General Solid waste: 22.81.92 Lt.
5	Details of the Storage, treatment, transpor	tatio	processing and Disposal Facility
5	(i) Details of the on-site storage :		size : To BE Submitted by Syncopy waste
	facility		Capacity: Mangement Put Utd.
			Provision of on-site storage : (cold storage or any other provision)

disposal facilities		Type of treatment equipment	No of unit s	Cap acit y Kg/ day	Quantity treatedo r disposed in kg
		Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or destroyer Sharps encapsulation or concrete pit Deep burial pits: Chemical disinfection: Any other treatment equipment:	25		per annum
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.		Red Category (like plast	ic, glass	s etc.)	
(iv) No of vehicles used for collection and transportation of biomedical waste	2	NIA			
(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		Quant general Incineration Ash ETP Sludge	0.00		posed
(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of		SYNERGY WASTE PUT LT	MAID.	NAGE	MENT

	(vii) List of member HCF not handed over bio-medical waste.	. NIA
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	Shoot Attachad.
7	Details trainings conducted on BMW	Aller Control of the
	(i) Number of trainings conducted on BMW Management.	Sheet Attachem.

1	(ii) number of personnel trained		1500 Demonal.
	(iii) number of personnel trained at the time of induction		Monthly Training on-site undertake
	(iv) number of personnel not undergone any training so far		Nil
	(v) whether standard manual for training is available?		YES, BMW BOP'S FOLLOW UPS.
	(vi) any other information)		NIA
8	Details of the accident occurred during the year		NIT
	(i) Number of Accidents occurred		Nil
	(ii) Number of the persons affected		NII
	(iii) Remedial Action taken (Please attach details if any)		líq.
	(iv) Any Fatality occurred, details.		Nil
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 timesyou have not met the standards in a year?		MIA
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		1	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from	JAN-2022 to DEC-2022
	U. M. Q
	Name and Signature of the Head of the Institution
Date: 10 10 23	Secret Principles and the large Territory of the Principles and the second secret Principles and the second
Date:	

FORM - I [(See rule 4(o), 5(i) and 15

(2)]ACCIDENT REPORTING

**	Date and time of accident: Lin'L
2.	Type of Accident:
3.	Sequence of events leading to accident : WIL
4.	Has the Authority been informed immediately :
5.	The type of waste involved in accident :
6.	Assessment of the effects of the accidents on human health and the environment:
7.	Emergency measures taken :
8.	Steps taken to alleviate the effects of accidents:
9.	Steps taken to prevent the recurrence of such an accident :
10.	Does you facility has an Emergency Control policy? If yes give
detail	s: Date : [0.]. 20.23. Signature
	Designation

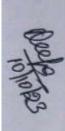
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42	TRAINER SIGN			9	HOD SIGN

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	TRAINNER :-	Man D.		DATE:- 11/07/23
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	TRAINER SIGN			HOD SIGN						

Bio Medical Waste Data (Jan-2022 To Dec-2022)

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22-Dec	22-Nov	22-0ct	22-Sep	22-Aug	22-Jul	22-Jun	22-May	22-Apr	22-Mar	22-Feb	22-Jan	Month	REPORT TOTAL		
183	178	124	108	106	120	129	143	102	45	99	139		1476	Bags	Ye
3005.6	2962.693	2747.797	2126.677	2302.451	2861.32	2921.61	2704.086	1833.85	640.3	1054.01	1621.77		26782.16	Weight	Yellow
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2596.57	2541.732	2278.364	1757.84	1924.927	2464.284	2234.88	2154.368	1739.43	459.713	824.08	1133.67		22109.86	Weight	Red
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652.52	585.28	524.223	441.142	414.152	614.286	472.73	545,64	419	83.21	117.82	244.3		5114.303	Weight	Blue
29	31	29	21	24	30	29	31	. 23	00	16	28		299	Bags	5
62.5	45.87	51.859	42.711	35.554	45,048	37.64	45.65	42.59	13.32	34.67	54.29		511.702	Weight	White
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2.11	0.76	2.12	4.008	0.43	0	0	0	0	1,59	4.96	8.92		24.898	Weight	Cyto
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417	404	301	258	251	297	309	339	245	97	211	311		3440	Bags	7
6319.3	6136.335	5604.363	4372.378	4677.514	5984.938	5666.86	5449.744	4034.87	1198.133	2035.54	3062.95		54542.93	Weight	Totals





	Monthly Biomedical waste audit	Biomedical waste management training	Monthly BMW waste weight generation report			BMW compliance rate		Agenda		Remya Rajan	Revathy S	Gopakumar	Rajamma T D	Mr.saurabh	Mr.Mahesh	Mr.Jitendra	Mr. Subodh Dubey	Mr.Leo Varkey	Mr. Sajin S.Nair	Mr.Niraj kumar	Ns. Saramma Mathew	www.g. sange smulane	P. D. S. V. S. S.		DATE TEAM MEMBERS	
	Housekeeping Executive	All hospital staff should aware of BMW management	Monthly waight recorded	Monthly BMW complaince rate		BMW segregation surperviase	BMW Wrong segregation	Discussions	Gopakumar	Remya Rajan	Revathy S	Rajamma T D	Mr.saurabh	Mr.Mahesh	Mr.Jitendra	Mr. Subodh Dubey	Mr.Leo Varkey	Mr. Sajin S.Nair	Mr. Niraj kumar	Ms Saramma Mathew	Dr.Brig, Ranjit Ghuliani	RECORDER: Niraj kumar	MEMBER SECRETARY: Dr. Sneha Mohan	CHAIRPERSON: Dr.A.K.Gadpayle	6th Dec 2022	BIO MEDICAL WASTE MANAGEMENT COMMITTEE DEC 2022
segregation	All area HK supervisor should monitor BMW	Arrange routine training related bio medical waste	weight record report	complaince rate should make by ICN	Monthly BMW audit	should monitor BMW	All area HK supervisor	Action plan																	TIME	EMENT COMMITTE
	HK Manager	iCN	HK supervisor	ICN	JOSTAJadne vil		ICN	Responsibility								K									2pm	E DEC 2022
	1 month	continue	1 week	1 month	T WOULD		continue	Timeline												1					VENUE	
	closed	Open	closed	closed	closed		Open	Status																	Hospital Board room, Hospital building, 1st floor	

ht generation									3	Revethy S Rev		Rajamma T D Mr	Mr.saurabh Mr	Mr. Mahesh Mr	Mr.Jitendra Mr.Sub	Mr.Subodh Dubey Mr.Li	. Mr. Leo Varkey Mr. S	Mr. Sajin S. Nair Mr. Nir.	Mr.Niraj kumar Ms.Sarar	Ms.Saramma Mathew Dr.Brig. I	Dr. Brig. Ranjit Ghuliani RECORDER: Niraj kumar	MEMBER SECRETARY: Dr. Sneha Mohan	TEAM MEMBERS CHAIRPERSON: Dr.A.K.Gadpayle	DATE 22nd N	8	
Rewathy S Remya Rajan Gopakumar Discussions BMW wrong segregation BMW segregation surperviase Monthly BMW complaince rate Monthly waight recorded All hospital staff should aware of BMW management	athy S As Rajan akumar skumar skumar g segregation g segregation tion surperviase	athy S Ja Rajan Ja Rajan	athy S (a Rajan akumar aksions g segregation g segregation complaince rate	athy S akumar akumar assions g segregation tion surperviase	athy S /a Rajan akumar assions g segregation	athy S va Rajan akumar assions	athy S ra Rajan akumar	athy S ra Rajan	athy S		Rajamma T D	Mr.saurabh	Mr.Mahesh	MrJitendra	Mr. Subodh Dubey	Mr.Leo Varkey	Mr. Sajin S.Nair	Mr.Niraj kumar	Ms. Saramma Mathew	Dr.Brig. Ranjit Ghuliani		Dr. Sneha Mohan	Gadpayle	22nd May 2023	310 MEDICAL WA	
Action plan Training to br given All area HK supervisor should monitor BMW segregation Monthly BMW audit complaince rate should make by ICN Every month wise weight record report should keep Arrange routine training related bio medical waste management Vaccine provide for all health workers	Action plan Training to br given All area HK supervisor should monitor BMW segregation Monthly BMW audit complaince rate should make by ICN Every month wise weight record report should keep Arrange routine training related bio medical waste management	Action plan Training to br given All area HK supervisor should monitor BMW segregation Monthly BMW audit complaince rate should make by ICN Every month wise weight record report should keep	Action plan Training to br given All area HK supervisor should monitor BMW segregation Monthly BMW audit complaince rate should make by ICN	Action plan Training to br given All area HK supervisor should monitor BMW segregation	Action plan Training to br given	Action plan																		TIME	BIO MEDICAL WASTE MANAGEMENT COMMITTEE MAY 2023	
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