SCHELL EYE HOSPITAL, CMC VELLORE.

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 | |
|-------|--|--|
| | (i) Particulars of the Occupier | |
| | Name of the authorized person (occupier or operator of facility) | Ebinezar Sundarraj |
| | (ii) Name of HCF or CBMWTF | SCHELL EYE HOSPITAL |
| 1. | (iii) Address of Correspondence | O/o The General Superintendent, #3 Ida Scudder Road, CMC, Vellore- 632004. |
| | (iv) Address of Facility | Schell Eye Hospital, S.F No 1397/1A, 1398 & 1399, Virupatchipuram village, Vellore Taluk. |
| | (v) Tel. No & Fax. No | 0416-2282001 & 0416-2232035 |
| | (vi) E-mail ID | gs@cmcvellore.ac.in |
| | (vii) URL of website | www.cmch-vellore.edu |
| | (viii) GPS coordinates of HCF or CBMWTF | Not Applicable. |
| | (ix) Ownership of HCF or CBMWTF | Christian Medical College Vellore Association. |
| | (x) Status of authorization under the Bio-Medical Waste (Management and Handling) Rules | Authorization No: 17BAZ7006405 Dated: 31/01/2017 Valid up to: 30/01/2018 |
| | (xi) Status of consent under Water Act and Air Act | Valid up to: 31/03/2027. |
| 2. | Type of Health Care Facility | |
| | (i) Bedded Hospital | No. of Beds: 140 |
| | (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 | Not Applicable. |
| 3. | Details of CBMWTF | |
| | (i) Number healthcare facilities covered by CBMWTF | Ken Bio-links - Common Bio- medical Waste Treatment Facility. |
| | (ii) No of beds covered by CBMWTF | Ken Bio-links - Common Bio- medical Waste Treatment Facility. |
| | (iii) Installed treatment and disposal capacity of CBMWTF | Ken Bio-links - Common Bio- medical Waste Treatment Facility. |
| | (iv) Quantity of Biomedical waste treated or disposed by CBMWTF | Ken Bio-links - Common Bio- medical Waste Treatment Facility. |

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| 4. | Quantity of waste generated or | disposed in Kg per | Yellow Category: 451 kg/month. | | |
|----|---|--------------------|---|--|--|
| | annum (on monthly basis) | | Red Category: 102 kg/month. | | |
| | | | White: | | |
| | | | Blue Category: 436 kg/month. | | |
| | | | General Solid Waste: 6388 | | |
| | | | kg/month | | |
| | | | | | |
| 5. | Details of the storage, treatment, transportation, processing and Disposal facility | | | | |
| | (i) Details of the on-site storage | Size: | | | |
| | facility | Capacity: | | | |
| | | | Provision of on-site : (Cold Storage or any other | | |
| | | provision) | site : (Cold Storage of any other | | |
| | (ii) Details of the treatment or | Type of Treatmen | nt No of Capacity Quantity | | |
| | disposal facilities | Type of Treatmen | | | |
| | disposal facilities | | units kg/day treated or disposed in | | |
| | | | | | |
| | | | kg per | | |
| | | T ' (| annum | | |
| | | Incinerator | | | |
| | | Plasma pyrolysis | | | |
| | | Autoclaves | | | |
| | | Microwave | | | |
| | Hydro clave | | | | |
| | | Shredder | | | |
| | | - | Needle tip cutter or | | |
| | | Destroyer | | | |
| | | Sharps encapsulat | ion or | | |
| | | Concrete pit | | | |
| | | Deep burial pits: | | | |
| | | Chemical disinfec | | | |
| | | Any other treatme | ent | | |
| | | equipment: | | | |
| | (iii) Quantity of recyclable | | | | |
| | wastes sold to authorised | Not Applicable. | Not Applicable. | | |
| | recyclers after treatment in kg | | | | |
| | per annum. | | | | |
| | (iv) No of vehicles used for | 3. | | | |
| | collection and transportation of | | | | |
| | biomedical waste. | | | | |
| | (v) Details of incineration ash | Not Applicable. | | | |
| | and ETP Sludge generated and | | | | |
| | disposed during the treatment of | | | | |
| | wastes in kg per annum. | | | | |
| | (vi) Name of the Common Bio- | | | | |
| | medical Waste Treatment | | Common Bio-medical Waste Treatment | | |
| | Facility Operator through which | Facility. | | | |
| | wastes are disposed of | | | | |
| | (vii) List of member HCF not | NIL | | | |
| | handed over bio-medical waste. | | | | |
| 6. | Do you have bio-medical waste | | | | |
| | management committee? If yes, | YES, Minutes end | closed. | | |
| | attach minutes held during in | | | | |

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| | the reporting period. | | | |
|-----|---|--------------------------------------|--|--|
| 7. | Details trainings conducted on BMW | | | |
| | (i) Number of trainings conducted on BMW management | 79 per annum | | |
| | (ii) Number of personnel trained | 2524 per annum | | |
| | (iii) Number of personnel trained at the time of induction | 1167 per annum | | |
| | (iv) Number of personnel not undergone any training so far | NIL | | |
| | (v) Whether standard manual for training is available? | Yes. | | |
| 8. | Details of accident occurred during the year | NIL | | |
| | (i) Number of accident occurred | NIL | | |
| | (ii) Number of persons affected | NIL | | |
| | (iii) Remedial action taken (please attach details if any) | NIL | | |
| | (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? | Not Applicable. | | |
| | Details of continuous online emission monitoring systems installed | Not Applicable. | | |
| 10. | Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year? | Parameters are within the Standards. | | |
| 11. | Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year? | Parameters are within the Standards. | | |
| 12. | Any other relevant information. | Nil | | |

Certified that the above report is for the period from January 2016-December 2016

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Name and Signature of the Head of The Institution

Date: 30.06.2017 Place: Vellore