



**OFFICE OF THE SUPERINTENDENT,
CHC BARKOTE, DEOGARH
NATIONAL HEALTH MISSION, DEOGARH
BLOCK PROGRAMME MANAGEMENT UNIT,
DIST: DEOGARH, 768110
E-mail: bpmubamparda@gmail.com**



Letter No 433

Date 07.06.24

To,

The Member Secretary,
State Pollution Control Board,
Paribesh Bhawan, A/118, Nilakantha Nagar,
Unit -VIII, Bhubaneswar - 751 012, Odisha

Sub,-

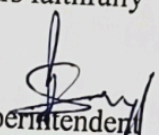
Regarding submission of Annual Report of Bio Medical Waste Management.

Sir,

With reference to the subject cited above, I am submitting herewith the Annual Report on Bio Medical Waste Management of CHC Barkote, Dist.- Deogarh for the period from Dt.- 01/01/2024 to 31/12/2024 in the prescribed format.

This is for favour of your kind information and necessary action.

Yours faithfully


Superintendent
CHC Barkote
Dist.- Deogarh

Encls.- Annual Report Format on Bio Medical Waste Management

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											
1.	Particulars of the Occupier:	Dr. Babu Singh										
	(i) Name of the authorised person (occupier or operator of facility) :	Community Health Centre, Barkote										
	(ii) Name of the HCF or CBMWTF :	Community Health Centre, Barkote, At/PO- Barkote, Dist -Deogarh, Odisha, Pin - 768110										
	(iii) Address for Correspondence :	Community Health Centre, Barkote, At/PO- Barkote, Dist -Deogarh, Odisha, Pin - 768110										
	(iv) Address of facility :	7682091690										
	(v) Tel. No./ Fax No. :	bpmubamparda@gmail.com										
	(vi) E-mail ID :											
	(vii) URL of Website :											
	(viii) GPS coordinates of HCF or CBMWTF:											
	(ix) Ownership of HCF or CBMWTF (State Government or Private or Semi Govt. or any other) :	State Government										
	(x) Status of authorisation under the Bio-Medical Waste (Management and Handling) Rules :											
	(xi) Status of Consents under water Act and Air Act :											
2.	Type of Health Care Facility :	No. of Beds: 16										
	(i) Bedded Hospital : Yes											
	(ii) Non-bedded hospital : (Clinic or Blood Bank or Clinical Laboratory or research Institute or Veterinary Hospital or any other)											
	(iii) License number and its date of expiry:											
3.	Details of CBMWTF :	-										
	(i) Number healthcare facilities covered by CBMWTF :	-										
	(ii) No. of beds covered by CBMWTF :	-										
	(iii) Installed treatment and disposal capacity of CBMWTF :	-										
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF :											
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis) :	<table border="1"> <tr> <td>Red-</td> <td>594 Kg</td> </tr> <tr> <td>Yellow-</td> <td>469 Kg</td> </tr> <tr> <td>Blue-</td> <td>564 Kg</td> </tr> <tr> <td>Black-</td> <td>705 Kg</td> </tr> <tr> <td>Jerry Cane-</td> <td>70 Kg</td> </tr> </table>	Red-	594 Kg	Yellow-	469 Kg	Blue-	564 Kg	Black-	705 Kg	Jerry Cane-	70 Kg
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