

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)]

S. N.	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	Dr. Sarvesh Agarwal
	(ii) Name of HCF or CBMWTF	:	Mahavir Jaipuria Rajasthan Hospital
	(iii) Address for Correspondence	:	Milap Nagar, JLN Marg, Jaipur - 302018
	(iv) Address of Facility	:	Milap Nagar, JLN Marg, Jaipur - 302018
	(v) Tel. No, Fax. No	:	0141 2720020
	(vi) E-mail ID	:	project@rajasthanhospital.in
	(vii) URL of Website	:	www.rajasthanhospital.in
	(viii) GPS coordinates of HCF or CBMWTF	:	26.855858, 75.802405
	(ix) Ownership of HCF or CBMWTF	:	Private
	(x) Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: F(BMW)/Jaipur/138(1)/2017-18/1116-1117 valid up to 31 Mar 2022
(xi) Status of Consents under Water Act and Air Act	:	Valid up to: 31 Mar 2022	
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds : 50
	(ii) Non-bedded hospital	:	
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	NA
	(iii) License number and its date of expiry	:	General/2019/39 Valid up to: 30 Apr 2020
3.	Details of CBMWTF	:	NA
	(i) Number healthcare facilities covered CBMWTF	:	NA
	(ii) No of beds covered by CBMWTF	:	NA
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	NA
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	NA

4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis) Average Waste generated per month for the period May – Dec 2018	Yellow Category	:7.69 Kg/Month
		Red Category	:8.34 Kg/Month
		White	:5.62 Kg/Month
		Blue Category	:7.85 Kg/Month
		General Solid waste.	:70.88 Kg/Month
5.	Details of the Storage, treatment, transportation, processing and Disposal Facility		
(i) Details of the on-site storage facility	Size	: Two huts 7' x 10' x 6'	
(ii) Provision of on-site storage (cold storage or any other provision)	Capacity	: Two x 420 Sq ft	
(ii) Details of the treatment of disposal facilities	Type of treatment equipment	No of units	Quantity treated per day
	Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclav Shredder Needle tip cutter or destroyer Sharps Encapsulation Concrete pit Deep burial pits Chemical disinfection Any other treatment equipment:		Outsourced NA
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.			Red Category (like plastic, glass etc.) NA (Outsourced)
(iv) No of vehicles used for collection and transportation of biomedical waste			NA (Outsourced)
(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Quantity generated		Where disposed
		NA	
(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of			Instromedix (India) Pvt Ltd
(vii) List of member HCF not handed over bio-medical waste			NA

6.	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	:	Yes. Minutes of meeting attached.
7.	Details trainings conducted on BMW	:	
	(i) Number of trainings conducted on BMW Management.	:	14
	(ii) Number of personnel trained	:	60
	(iii) Number of personnel trained at the time of induction	:	25
	(iv) Number of personnel not undergone any training so far	:	02
	(v) Whether standard manual for training is available?	:	Yes
8.	(vi) Any other information	:	NA
	Details of accidents occurred during the year	:	NA
	(i) Number of accidents occurred	:	NA
	(ii) Number of the persons affected	:	NA
	(iii) Remedial action taken (Please attach details if any)	:	NA
9.	(iv) Any fatality occurred & details	:	NA
	Are you meeting the standards of air pollution from the incinerator? How many times in last year could not meet the standards?	:	NA
	Details of continuous online emission monitoring systems installed	:	NA
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 standards? How many times you have not met the standards in a year?	:	NA
12.	Any other relevant information	:	NA

Certified that the above report is for the period from 01 Jan 2018 to 31 Dec 2018.

DR SARVESH AGARWAL

Name and Signature of the Head of the Institution

Date: 3/1/2019

Place: JAIPUR



Mahavir Jaipuria

Rajasthan
Hospital
2018

Meeting Committee: Objectives of Biomedical Waste Management committee held on: 06-05-

- Agenda: Discussion on Guidelines
- Time: 01:00 PM
- Meeting started with welcoming all the committee members
- Meeting was governed by Dr. Vijay Saraswat who explained the motive of this meeting.
- After the discussion on motive meeting was followed by Dr. Gargi Sharma who explained the objectives that ensure that bio-medical waste of Rajasthan hospital is handled in accordance with Biomedical waste Management Rules, 2018 & Environment Protection Act without any adverse effect to human health & environment of the hospital
- To ensure occupational safety of all health care workers involved in handling of biomedical waste
 - Needle recapping must be strictly prohibited
 - Segregation of infectious waste should be done early
 - Heavy duty gloves should be worn while handling infectious waste
 - Colour coding should be strictly adhered to
 - Infectious and non-infectious waste should never be allowed to mix
 - Bags should be tied when they are to be removed for transportation
 - Meeting ended up with the note of motivation and dedication towards their responsibilities

Gargi
3/2/19

🌐 www.rajasthanhospital.in | ☎ +91 141 2720020

🏥 Mahavir Jaipuria Rajasthan Hospital, Milap Nagar, JLN Marg, Jaipur 302018

Meeting of Biomedical Waste Management Committee held on: 11-10-2018

Hospital

- Agenda: Waste Removal & Transportation
- Time: 02:00 PM
- Meeting started with welcoming all the committee members
- Dr. Gargi explained waste removal & transportation to minimize the risk of any infection
 1. The staff handling waste must use PPE.
 2. The bags must be removed when $\frac{3}{4}$ th full, if not earlier.
 3. The waste bag is tied up & transferred to the temporary storage area on the same floor (e.g. Dirty Utility) carefully, without any spillage. In the temporary storage area these bags may be put in a larger bag of the same colour with an appropriate label. The label must at least contain the following information
 - Date
 - Area / Floor / Unit
 - Shift
 4. At shift end garbage from every floor is transported by designated trolley to central waste collection area.
 5. The waste movement is to be done through a designated lift. No other material/Patient should be allowed with the Bio-Medical waste in the same lift.
 6. The housekeeping staff to ensure that all bags are tied when being transported and there is no spillage or leakage.
 7. In case any bags has a cut or tear, ensure that double bagging is done before moving
 8. In case of spill, refer to Infection Control Policy of the hospital.

Gargi
3/2/19