

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

**PCB ID : 110531 Health Care Facility / CBWTF Name : Akash Hospital & Diagnostic Center Indore**

1	Year	2020 <input type="button" value="v"/>
2	Type of Health Care Facility	Bedded Hospital Private <input type="button" value="v"/>
3	Number of Beds	24 <input type="text"/>
4	License Number and Date of Expiry of License	75343 <input type="text"/> 28/02/202 <input type="text"/>
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	26.4 <input type="text"/>
7	Red Category	13.8 <input type="text"/>
8	White Category	4.2 <input type="text"/>
9	Blue Category	8.9 <input type="text"/>
10	General Solid Waste	182 <input type="text"/>

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

11	Details of the on-site storage facility	hoswin incinotor pvt ltd indore <input type="text"/>
12	Treatment Facility	DSN,DAC,DNC <input type="text"/>
13	Quantity of Recyclable Waste sold to Authorized Recyclers after Treatment ( in kg / Year )	0 <input type="text"/>
14	Number of Vehicles used for Collection and Transportation of Biomedical Waste	1 <input type="text"/>
15	Details of Incineration Ash and ETP Sludge generated and disposed during the Treatment of waste (in Kg / Year )	0 <input type="text"/>
16	Name of the Common Bio-Medical Waste Treatment Facility Operator through which waste are disposed of	Hoswin Incinerator Pvt. Ltd <input type="button" value="v"/>
17	Do you have bio-medical waste management committee ? If yes, minutes of the meetings held during the reporting period	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="text" value="yes"/>

### Details of Trainings conducted on Bio Medical Waste Management

19	Number of Personnel Trained	9
20	Number of Personnel Trained at the time of Induction	
21	Number of Personnel not undergone any Training so far	6
22	Whether standard manual for Training is available ?	<input type="radio"/> Yes <input checked="" type="radio"/> No
23	Any other information	na

**Details of the accident occurred during the year**

24	Number of Accident occurred	0
25	Number of the persons affected	0
26	Remedial Action taken ( details if any )	na
27	Any Fatality Occurred , details	na
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 no
29	Details of Continuous Online Emission Monitoring systems installed	na
30	Liquid waste generated and treatment methods in place . How many times you have not met the standards in a year	na
31	Is the disinfection method or sterilization meeting the log 4 standards ? How many times you have not met the standards in a year ?	<input type="radio"/> Yes <input checked="" type="radio"/> No no
32	Any other relevant information	na

Update