


**Form - IV**  
**(See rule 13)**  
**ANNUAL REPORT**

Sl.no	Particulars				
1	<b>Particulars of the Occupier</b>				
	(i) Name of the authorised person (occupier or operator of facility)	District Medical Superintendent, District Hospital Champhai			
	(ii) Name of HCF or CBMWTF	Local Administrative Department			
	(iii) Address for Correspondence	District Hospital, Vengsang, Champhai			
	(iv) Address of Facility	District Hospital, Champhai			
	(v) Tel. No, Fax. No	9612575852			
	(vi) E-mail ID	medsupcpi@gmail.com			
	(vii) URL of Website				
	(viii) GPS coordinates of HCF or CBMWTF	NIL			
	(ix) Ownership of HCF or CBMWTF	State Government			
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	Authorisation No.:H.88088/Poltn/21(10)/09-MPCB/221-224 Dt:05/09/18 valid up to : 5 <sup>th</sup> September, 2023			
(xi). Status of Consents under Water Act and Air Act	Valid up to: 28 <sup>th</sup> February, 2023				
2	Type of Health Care Facility	No. of Beds: 100 bedded			
	(i) Bedded Hospital				
	(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	<b>Details of CBMWTF</b>				
	(i) Number healthcare facilities covered by CBMWTF	1			
	(ii) No of beds covered by CBMWTF	100			
	(iii) Installed treatment and disposal capacity of CBMWTF:				
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF				
	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	Yellow Category – 7.8 kg/day			
		Red Category n – 11.41 kg/day			
		White – 1.07 kg/day			
		Blue Category - 1.04 kg/day			
		General Solid waste - 13.25 kg/day			
5	<b>Details of the Storage, treatment, transportation, processing and Disposal Facility</b>				
	(i) Details of the on-site storage facility	Size	12ft X 8ft X 8ft		
		Capacity	768 sqft		
		Provision of on-site storage (cold storage or any other provision)	other		
	(ii) Details of the treatment or disposal facilities	Type of treatment/ equipment	No of Unit's	Capacity Kg/day	Quantity Treated/disposed in kg/yr
		Incinerators	1	20kg/day	2847kg/yr
		Plasma Pyrolysis			

	Autoclaves	2		
	Microwave			
	Hydroclave	5		
	Shredder			
	Needle tip cutter or destroyer	11	1.07kg/day	390.55kg/yr
	Sharps /encapsulation or concrete pit	1	64sqft	390.55kg/yr
	Deep burial pits:	1	96sqft	2847kg/yr
	Chemical disinfection			
	Any other treatment /equipment			
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	Red Category (like plastic, glass etc.)	NIL	
	(iv) No of vehicles used for collection and transportation of biomedical waste	1		
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		Quantity generated	Where disposed
		Incineration		
		Ash	2kg/day	Deep burial pit
		ETP Sludge	500litre/day	Soak pit
	(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of	Local Administrative Department		
	(vii) List of member HCF not handed over bio-medical waste.			
6	<b>Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period</b>	YES		
7	<b>Details trainings conducted on BMW</b>			
	(i) Number of trainings conducted on BMW Management.	5 times		
	(ii) number of personnel trained	100		
	(iii) number of personnel trained at the time of induction	20		
	(iv) number of personnel not undergone any training so far	3		
	(v) whether standard manual for training is available?	YES		
	(vi)( any other information)	NIL		
8	Details of the accident occurred during the year	NIL		
	(i) Number of Accidents occurred	NIL		
	(ii) Number of the 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?	YES NIL		
	Details of Continuous online emission	NIL		

	monitoring systems installed	
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	YES NIL
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	YES NIL
12	Any other relevant information	(Air Pollution Control Devices attached with the Incinerator)
Certified that the above report is for the period from		1 <sup>st</sup> January- 31 <sup>st</sup> December, 2021

Date:  
Place: Champhai

  
 (Dr. ZATLUANGA)  
 District medical Superintendent  
 District Hospital Champhai

**GOVERNMENT OF MIZORAM  
OFFICE OF THE DISTRICT MEDICAL SUPERINTENDENT  
DISTRICT HOSPITAL, CHAMPHAI**

No. D.32019/1/2008-DMS(CPI)

*Dated Champhai, the 9<sup>th</sup> May, 2022*

To

**The Director  
Hospital & Medical Education  
Mizoram:Aizawl**

Subject: *Submission of Annual Report (2021) on Bio- Medical Waste Management as per BMWM Rules, 2016-reg*

Reference: No.B.11014/65/2021-DHME/PROG dt: 2<sup>nd</sup> Feb, 2022

Madam,

With reference to your letter No. cited above, I have the honour to submit herewith Annual Report (2021) on Bio- Medical Waste Management as per BMWM Rules, 2016 of District Hospital Champhai for the period 1<sup>st</sup> January to 31<sup>st</sup> December, 2021.

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

*Encl: As above*

Yours faithfully,



**(Dr.ZATLUANGA)  
District Medical Superintendent  
District Hospital, Champhai**