

FORM - IV
(See rule 13)
ANUAL REPORT

[To be submitted to the prescribed authority on or before 30th June every year for the period January to December of the preceding (CBWTF) year, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility]

Sl. No.	Particulars		
1.	(i) Name of the authorised person (occupier of facility)	:	Rakesh Patel
	(ii) Name of HCF or CBMWTF	:	Not Applicable
	(iii) Address for correspondence	:	Fresenius Kabi Oncology Limited, D-35 Industrial Area, Kalyani, Nadia, Pin - 741235
	(iv) Address of Facility	:	D-35, Industrial Area, Kalyani, Nadia, Pin - 741235
	(v) Tel. No. Fax. No.	:	033 61665000, 033 255444
	(vi) E mail ID	:	
	(vii) URL, or Website	:	
	(viii) GPS coordinates of HCF or CBMWTF	:	Not Applicable
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other) - Not Applicable
	(x) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	Authorization No. - D0012204, dated 26.07.2019 Valid - One-time Authorization
	(xi) Status of Consents under Water Act and Air Act	:	Valid up to December, 2028
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds - Not Applicable
	(ii) Non bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	Bulk Drug Manufacturer with Microbiology Laboratory Occupational Health Centre
	(iii) License number and its date of expiry	:	Not Applicable
3.	Details of CBMWTF	:	Not Applicable
	(i) Number healthcare facilities covered by CBMWTF	:	
	(ii) No. of beds covered by CBMWTF	:	
	(iii) Installed treatment and disposal capacity of CBMWTF.	:	Kg/day
	(iv) Quantity of biomedical waste treated or disposed capacity by CBMWTF.	:	Kg/day
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category: 62.78 Kg per Month
		:	Red Category: 519.74 Kg per Month
		:	White: NA
		:	Blue Category: NA
		:	General Solid Waste: NA

5	Details of the on-site storage facility	:	Size : Length: 3.96 meter Width: 1.92 meter Height: 1.92 meter									
			Capacity : 14.598 m3									
			Provision of on-site storage: (cold storage or any other provision)									
	Disposal facilities		<table border="1"> <thead> <tr> <th>Type of treatment Equipment</th> <th>No. of Units</th> <th>Quantity Treated or disposed In Kg per Annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destroyer Sharps encapsulation Or concrete pits: Deep burial pits: Chemical disinfection: Any other treatment Equipment:</td> <td></td> <td></td> </tr> <tr> <td colspan="3">Not Applicable</td> </tr> </tbody> </table>	Type of treatment Equipment	No. of Units	Quantity Treated or disposed In Kg per Annum	Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or Destroyer Sharps encapsulation Or concrete pits: Deep burial pits: Chemical disinfection: Any other treatment Equipment:			Not Applicable		
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Not Applicable												
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in Kg per annum.	:	Red Category (like plastic, glass etc.) Not Applicable									
	(iv) No. of vehicles used for collection and transportation of biomedical waste	:	Not Applicable									
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		<table border="1"> <thead> <tr> <th></th> <th>Quantity</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td>Incineration Ash ETP Sludge</td> <td></td> <td></td> </tr> <tr> <td colspan="3">Not Applicable</td> </tr> </tbody> </table>		Quantity	Where disposed	Incineration Ash ETP Sludge			Not Applicable		
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	(vi) Name of the Common Bio-Medical Waste Treatment Facility operator through which wastes are disposed of		Medicare Environmental Management Pvt. Ltd. Kalyani Growth Centre, Phase - III, Plot No. K-26, P.O & P.S Kalyani, Nadia									
	(vii) List of member HCF not handed over bio-medical waste.		Not Applicable									
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period.		No									
7	Details training conducted on BMW											
	(i) number of trainings conducted on BMW Management.		15									
	(ii) number of personnel trained		12									

	(iii) number of personnel trained at the time of induction	5
	(iv) number of personnel not undergone any training so far	Nil
	(v) whether standard manual for training is available?	Yes
	(vi) any other information	No
8	Details of the accident occurred during the year	
	(i) Number of Accidents occurred	NO
	(ii) Number of the persons affected	NIL
	(iii) Remedial Action taken (Please attach details if any)	NA
	(iv) Any facility occurred, details.	NA
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?	Full-fledged ETP installed at site. Always complying with the statutory norms.
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	Not Applicable
12	Any other relevant information	: (Air Pollution Control Devices attached with the Incinerator) Not Applicable

Certified that the above report is for the period from **January 2023 to December 2023**.

Name and Signature of the Head of the Institution



Date: 30 Jan. 2024

Place: Kalyani

Fresenius Kabi Oncology Ltd.
D-35, Industrial area, Kalyani
Nadia - 741235

FORM – I
[(See rule 4(o), 5(i) and 15 (2))]

ACCIDENT REPORTING

1. Date and time of accident: Not Applicable for Reporting year
[01 Jan.2023 to 31 Dec.2023]
2. Type of Accident: **Not Applicable**
3. Sequence of events leading to accident: **Not Applicable**
4. Has the Authority been informed immediately? **Not Applicable**
5. The type of waste involved in accident: **Not Applicable**
6. Assessment of the effects of the accidents on human
health and the environment: **Not Applicable**
7. Emergency measures taken: **Not Applicable**
8. Steps taken to alleviate the effects of accidents: **Not Applicable**
9. Steps taken to prevent the recurrence of such an accident: **Not Applicable**
10. Does your facility has an Emergency Control Policy? If yes give
detail: Emergency Preparedness Plan available at site.

Attached Emergency Preparedness Plan 2023.

Date : 30 Jan 2024 Signature 

Place: Kalyani Designation: Head of HSE

