



ଜାତୀୟ ସ୍ୱାସ୍ଥ୍ୟ ମିଶନ



OFFICE OF THE SUPERINTENDENT

BLOCK PROGRAMME MANAGEMENT SUPPORT UNIT

CHC TENTULIKHUNTI, NABARANGPUR

Ph. 06858 228630 Email: bpo.tentulikhunti@gmail.com

Letter No... 58

Date... 07.02.2026

To the DeGM
Nabarangpur

Sub : Request to upload the Bio-Medical Waste Management report 2025 of CHC Tentulikhunti in the district official Website ([www.nabarangpur .odisha.gov.in](http://www.nabarangpur.odisha.gov.in))

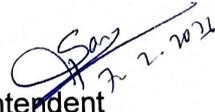
Sir,

With reference to the subject cited above I request you to upload the Bio-Medical waste management report 2025 of CHC Tentulikhunti in the district official Website (www.nabarangpur .odisha.gov.in) for information to all concern.

This is for favour of your information and kind co-operation.

Yours faithfully

Enclosure: BMW Annual Report 2025


Superintendent
CHC Tentulikhunti

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	:	
	(i) Name of the authorized person (occupier or : operator of facility)	:	Dr. Samalai Prasad Panda
	(ii) Name of HCF or CBMWTF	:	CHC Tentulikhunti
	(iii) Address for Correspondence	:	CHC Tentulikhunti Po-Tentulikhunti Block:Tentulikhunti Dist: Nabarangpur
	(iv) Address of Facility	:	CHC Tentulikhunti Po-Tentulikhunti Block:Tentulikhunti Dist: Nabarangpur
	(v)Tel. No, Fax. No	:	
	(vi) E-mail ID	:	bpo.tentulikhunti@gmail.com
	(vii) URL of Website	:	
	(viii) GPS coordinates of HCF or CBMWTF	:	Latitude: 19.29(N Decimal Degrees) Longitude 82.72(E Decimal Degrees)
	(ix) Ownership of HCF or CBMWTF	:	
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	Authorization No.:19631/IND-IV-BW-901/Dt. 03.11.2025 Valid up to: 31.03.2027
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31.03.2027
2	Type of Health Care Facility	:	Govt. Hospital
	(i) Bedded Hospital	:	No. of Beds: 16
	(ii) Non-bedded hospital	:	
	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 of health care facilities covered by CBMWTF	:	
	(ii) No. of Beds covered by CBMWTF	:	
	(iii) Installed treatment and disposal capacity of CBMWTF;	:	
	(iv) Quantity of bio medical waste treated or disposed by CBMWTF	:	
4	Quantity of waste generated or disposed in Kg per Annum (on monthly average basis)	:	Yellow Category: 368kg Red Category: 656kg White: 15kg

Blue Category: 195kg

General Solid Waste: 120 kg

5 Details of the Storage, Treatment, Transportation, Processing and Disposal Facility																																																							
	(i) Details of the on-site storage facility	:	Size: 6ftx6ft																																																				
			Capacity: NA																																																				
			Provision of on-site storage : (Cold storage or any other provision)																																																				
	(ii) Disposal facilities		<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of Units</th> <th>Capacity Kg/day</th> <th>Quantity Treated or disposed in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Incinerators</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td>Plasma Pyrolysis</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td>0</td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td>5</td> <td>150 kg</td> <td>45 kg</td> </tr> <tr> <td>Sharps</td> <td>1</td> <td>150 gm</td> <td>48 kg</td> </tr> <tr> <td>Encapsulation or concrete pit</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Deep burial pits</td> <td>2</td> <td>2 kg</td> <td>660 kg</td> </tr> <tr> <td>Chemical disinfection:</td> <td>1</td> <td>20 ltr</td> <td>2000ltrs</td> </tr> <tr> <td>Any other treatment equipment:</td> <td>0</td> <td></td> <td></td> </tr> </tbody> </table>	Type of treatment equipment	No of Units	Capacity Kg/day	Quantity Treated or disposed in kg per annum	Incinerators	0			Plasma Pyrolysis	0			Autoclaves	0			Microwave	0			Hydroclave	0			Shredder	0			Needle tip cutter or destroyer	5	150 kg	45 kg	Sharps	1	150 gm	48 kg	Encapsulation or concrete pit				Deep burial pits	2	2 kg	660 kg	Chemical disinfection:	1	20 ltr	2000ltrs	Any other treatment equipment:	0		
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(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in Kg per annum	:	Red Category (like plastic, glass, etc.) NA																																																					
(iv) No. of Vehicles used for collection and transportation of biomedical waste	:																																																						
(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																																																				
(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of			Ash																																																				
			ETP Sludge																																																				
(vii) List of member HCF not handed over bio-medical waste.			DHH Nabarangpur																																																				

	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	Yes
	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management	2
	(ii) Number of personnel trained	14
	(iii) Number of personnel trained at the time of induction	
	(iv) Number of personnel not undergone any training so far	
	(v) Whether standard manual for training is available?	Yes
8	Details of the accident occurred during the year	
	(i) Number of Accidents occurred	
	(ii) Number of persons affected	
	(iii) Remedial Action taken (Please attach details if any)	
	(iv) Any Fatality occurred, details	
9	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	NA
	Details of Continuous online emission monitoring systems installed	NO
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Yes
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
12	Any other relevant information	

Certified that the above report is for the period from January 2025 to December 2025


 Name and Signature of the Head of the Institution

Date: 19.01.2026

Place: CHC Tentelikhunti