Form - IV

(See rule 13)

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or before 20 th lung evenus	ear for the period from lanuary to

						atment facility (CBWTF)]		
Application Type: HCF				Submit To SRO-Nagpu				
i) Unit Name HCG NCHRI Cancer Centre		ii) Plant Name HCG NCHRI Cancer Centre						
Member of CBMWTF: Yes								
Type of Health Care Facility Bed	ded							
1) Particulars								
i) First Name Venkateshwarlu		ii) Middle Name Ramachandram			iii) Last Na Marapaka	lame		
iv) Designation Chief Operating Officer		v) Aadhaar No 660118239157			vi) PAN No BADPM1497			
vii) Address as per Aadhaar Car #3-1-50 Pittalagudem, Chamled,Pitt Nalgonda,, A.P. 508256					ix) Fax No	0.		
x) e-mail venkateshwarlu.m@hcgel.com	https://www.hc	xi) URL of website https://www.hcgoncology.com/hospital_profiles/hcg-nchri-cance r-centre-nagpur						
2) Details of the HCF	•							
i) Name of the HCF HCG NCHRI Cancer Centre, Nagpur	ii) Email ambarish.m@h	ii) Email ambarish.m@hcgel.com			iii) Name of the contact person Ambarish Modak			
iv) Contact No. 7767008333								
3) Address of the HCF								
i) Building Name/Building No./Se Number Khasra No.50, 51	Mouja Wanjri ,I	ii) Street / Village Mouja Wanjri ,Ring Road Near Yashoda Rao police station Automotive Square Kalam Bande Nawaz Nagar				iii) City / Taluka Automative Square		
iv) District Nagpur	v) Pin-Code N 440017	v) Pin-Code Number 440017			vi) Near by Landmark			
vii) Latitude coordinate 21.1787261	viii) Longitud 79.1230968	viii) Longitude coordinate 79.1230968			ix) Ownership Private			
4) Status of Consent and Author	risation under the Bio-M	edical Waste (Ma	nager	ment and Handling) Ru	les			
i)Authorization No. 1903000353	ii)Authorizati 2021-06-21	ii)Authorization validity Date 2021-06-21						
i)Consent Number 1903000353	ii)Consent va 2021-06-10	ii)Consent validity Date 2021-06-10						
5) Total No of Beds (As per valid Authorization)				53				
6) Registration Number (e.g. Bombay Nursing Home reg. no.,MSDC,MBTC)					986			
7) Registration Expiry Date					2023-03-31			
8) Faculty of Medicine 1								
9) Name of the Common Bio-Me M/s. M/s. Superb Hygiene Disposals,		acility Operator t	hroug	gh which wastes are di	sposed of			
11) Details of BMW i) Authorized BMW Quantity MT/	/anum (as per valid CCA)			1				
Yellow 84.0000	Red 50.00	Red 50.0000		Blue 25.0000		White 25.0000		
ii) Generation of BMW Quantity	(kg/day)							
Yellow 2.8000	Red 1.60	Red 1.6000			Blue 0.8300 White 0.8300			
iii) Quantity of Biomedical waste given to CBMWTDF (kg/day)								
Yellow 2.8000	Red 1.6000	Blue	w	hite 0.8300	Gene	eral Solid Waste 7.0000		

12) Details trainings conducted on BMW i) Number of trainings conducted on BMW Management. 20							
ii) Number of personnel trained 48							
iii) Number of personnel trained at the time of induction 38							
iv) number of personnel not undergone any training so far							
v) whether standard manual for training is available? Yes							
vi) any other information No							
13) Details of the accident occurred during the year i) Number of Accidents occurred							
ii) Number of the persons affected							
iii) Remedial Action taken (Please attach details if any) No							
iv) Any Fatality occurred, If yes details. No							
14) Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year? Yes							
15) Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year? Yes							
Place Nagpur	Designation Chief Operating Officer	Date 2020-06-30					