

Ref: PPGCL/ENV/FY24/239

Date: 15.01.2024

To,  
The Member Secretary,  
U.P. Pollution Control Board,  
Building No. TC-12V  
Vibhuti Khand, Gomti Nagar  
Lucknow-226010

Subject: Bio-Medical Waste Annual return for the period Jan'23 to Dec'23 under Bio-Medical Waste Management Rules, 2016.

Dear Sir,

With Reference to the above mentioned subject please find the Bio-Medical Waste annual return in Form – IV for the period Jan'23 to Dec'23.

This is your information and record please.

Thanking You,

Sincerely

For Prayagraj Power Generation Company Ltd



S H Pandey  
Chief O&M Services

Encl: Form – IV

Cc: i) The Regional Officer

U.P. Pollution Control Board, Prayagraj



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 authorised person (occupier or operator of facility)	:	S H Pandey
	(ii) Name of HCF or CBMWTF	:	HCF-CLINIC/PATHOLOGY
	(iii) Address for Correspondence	:	P.O- LOHGARA, TEHSIL- BARA, DISTT: PRAYAGRAJ, UTTAR PRADESH, PRAYAGRAJ,212107
	(iv) Address of Facility	:	P.O- LOHGARA, TEHSIL- BARA, DISTTPRAYAGRAJ, UTTAR PRADESH, PRAYAGRAJ,212107
	(v) Tel. No, Fax. No	:	
	(vi) E-mail ID	:	shpandey@ppgcl.co.in
	(vii) URL of Website	:	www.ppgcl.co.in
	(viii) GPS coordinates of HCF or CBMWTF	:	Latitude 25°2079.3 N, Longitude 81° 3919.6 E
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other) : Private
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: 8409820 & 10362026 for Clinic 8415053 for Pathology, valid one time
(xi). Status of Consents under Water Act and Air Act	:	Valid up to : 31.12.2025	
2	Type of Health Care Facility	:	Outdoor facility
	(i) Bedded Hospital	:	No
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	Clinic Pathology
	(iii) License number and its date of expiry	:	Authorisation No.: 8409820 & 10362026 for Clinic 8415053 for Pathology (One Time)
3	Details of CBMWTF	:	Not applicable
	(i) Number healthcare facilities covered by CBMWTF	:	NA
	(ii) No of beds covered by CBMWTF	:	NA
	(iii) Installed treatment and disposal capacity of CBMWTF	:	Kg per day : NA

	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	Kg per day : NA			
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow category: 30.4 Kg (annual), 184.5 Ltr (annual) Red category: 245.4 Kg (annual) White: 15.5 Kg (annual) Blue category: 15.1 Kg (annual) General Solid waste: Nil			
5	Details of the Storage, treatment, transportation, processing and Disposal Facility					
	(i) Details of the on-site storage facility	:	Size : 20 Ltr (approx)			
			Capacity: 20 Ltr (approx.), Color coded bins			
			Provision of on-site storage : (cold storage or any other provision): Storage in designated bin			
	(ii) disposal facilities	:	Type of treatment equipment	No of units	Capacity Kg/ day	Quantity treated or disposed in kg per annum
			Incinerators	0	NA	
			Plasma Pyrolysis	0	NA	
			Autoclaves	1	Capacity 14 ltr pressure 15PSI	
			Microwave	0	NA	
			Hydroclave	0		
			Shredder Needle tip cutter or destroyer Sharps	4	Electrical- 3 Nos, Manual- 1 No, Capacity - 1ltr	
			encapsulation or concrete pit Deep burial pits	0		
			Chemical disinfection	1	Sodium Hypochlorite	
			Any other treatment equipment		Registered member of CBMWTF- Bio medical waste is being disposed off through authorised agency M/s FERRO BUILDHARDS (I) PVT. LTD	
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.): None			

	(iv) No of vehicles used for collection and transportation of biomedical waste	:	NA, as transportation of bio medical waste is done by M/s Ferro Build Hard (India) Pvt. Ltd.		
	(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	NA	NA
			ETP Sludge	NA	NA
	(vi) Name of the Common BioMedical Waste Treatment Facility Operator through which wastes are disposed of	:	M/s Ferro Build Hard (India) Pvt. Ltd.		
	(vii) List of members HCF not handed over bio-medical waste	:	None		
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	:	NA		
7	Details trainings conducted on BMW	:			
	(i) Number of trainings conducted on BMW Management.	:	03		
	(ii) number of personnel trained	:	22		
	(iii) number of personnel trained at the time of induction	:	02		
	(iv) number of personnel not undergone any training so far	:	None		
	(v) whether standard manual for training is available?	:	Bio medical waste Rules and procedures		
	(vi) any other information)	:	None		
8	Details of the accident occurred during the year	:	None		
	(i) Number of Accidents occurred	:	NA		
	(ii) Number of the persons affected	:	NA		
	(iii) Remedial Action taken (Please attach details if any)	:	NA		
	(iv) Any Fatality 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?	:	NA as no incinerator at site		
	Details of Continuous online emission monitoring systems installed	:	NA		

10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	:	Liquid waste is treated with Sodium Hypochlorite.
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	:	NA
12	Any other relevant information	:	None

Certified that the above report is for the period from Jan'23 to Dec'23.

Date: 15.01.2024

Place: Lohgara



S H Pandey

Chief - O&M Services

Name and Signature of the Head of the Institution

Company Name: Asarfi Hospital LTD

**EMPLOYEE DETAILS**

(To be Filled By Contractor)

Name: Suraj Kumar

S/o, D/o, W/o: Chhote Lal

Post for which provisionally Selected: Admin Com Pharmacist

Ref. Appointment Advise No.: \_\_\_\_\_

Mobile No.: 8971726385

Date: 31/12/2023

Age/ Sex: 38 Y / Male / Female

Date of Birth: 10/05/1985

Dated:      /      /     

*Suraj*

(Signature Of Candidate)

*Suraj*

(Authorised Signatory) with Seal



**INVESTIGATION REPORT**

BLOOD		
HB%	<u>12.4</u>	gm%
TLC	<u>5700</u>	cumm/4000-11000
ESR	<u>04</u>	mm
B.Group	<u>AB4</u>	RH
FBS/ RBS	<u>90</u>	mg/dl
PBS	<u>    </u>	mg/dl
Platelet	<u>167</u>	Lac

DLC		
N	<u>60</u> %	30-70
L	<u>31</u> %	20-40
M	<u>05</u> %	00-06
E	<u>04</u> %	00-08
B	<u>00</u> %	00-01
CXR-PA View		
ECG		

Urine		
Routine	Alb	<u>    </u>
	Sug	<u>    </u>
Microscopic	Pus cell	<u>0-1</u>
	RBC Cell	<u>    </u>
If any		
Audiometry		
Spirometry		

Covid-19      Fully Vaccinated      YES / NO

**PHYSICAL EXAMINATION (Filled By OHC)**

Previous history

ASTHMA	<u>    </u>	DM	<u>    </u>	HT	<u>    </u>	EPILEPSY	<u>    </u>	MEDICATION	<u>    </u>
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Drug allergy if any:     

Disease	Hydrocele	Yes	No
	Hernia	Yes	No

HEIGHT	<u>166</u>	CM
EAR	<u>    </u>	
NOSE	<u>    </u>	
TEETH	<u>    </u>	

WEIGHT	<u>68</u>	Kg
THROAT	<u>    </u>	
HEARING	<u>    </u>	
SKIN	<u>    </u>	

EYE	WITHOUT GLASSES	L/Eb
		R/Eb

WITH GLASSES	L/Eb
	R/Eb

NEAR VISION : \_\_\_\_\_  
 COLOUR BLINDNESS (If required) : \_\_\_\_\_

BP 130/90 mmhg

PULSE 62 /Min.

ABDOMEN	<u>    </u>
LIVER	<u>    </u>
SPLEEN	<u>    </u>

HEART	<u>    </u>
LUNGS	<u>    </u>
CNS	<u>    </u>

Identification Marks : Cut mark on right side of eye

Remarks : \_\_\_\_\_

Observation : FIT/UNFIT for the Job

*[Signature]*  
 (Signature of Medical Officer)

Company Name - Asarfi Hospital LTD

FORM 5  
[Rule 16(2)]  
Certificate

Serial No. (72)

Date: 31/12/23

I hereby certify that I have personally examined  
Shri/Mrs. Suresh Kumar son/daughter/husband of  
Chhale Lal residing at  
Vill - Ghodipar Post - Ghodipar Dist. Sonapur

1. Who is desirous of being employed in a factory, and that his/her date of birth (if available) is 10-05-1985 and the age as nearly as can be ascertained from any examination is 38 years, and that he/she is fit in accordance with the minimum physical standards prescribed, for employment in factory as an adult/child. His/Her descriptive marks are: Cut mark on right side of eye

- 2. Reason for-
  - i. Refusal of Certificate
  - ii. Certificate being revoked

Signature of examinee  
Suresh

Left thumb impression of examinee  


Signature of Certifying Surgeon

Signature of Certifying Surgeon  
21/1



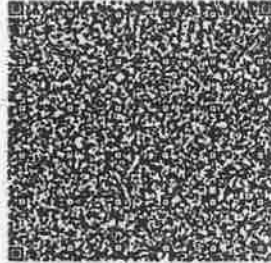
भारत सरकार  
Government of India

भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India

नामांकन क्रम/ Enrolment No.: 0000/00691/63905

To  
सुरज कुमार  
Suraj Kumar  
S/O, Chhote Lal Saroj  
Ghuripur  
Jaunpur Uttar Pradesh - 222201  
8971726385

Digitally Signed and Verified  
UNIQUE IDENTIFICATION AUTHORITY OF INDIA  
Date: 2023-07-11 11:00:05



आपका आधार क्रमांक / Your Aadhaar No. :

**4320 8100 5530**

VID : 9172 6861 1376 6801

मेरा आधार, मेरी पहचान



भारत सरकार  
Government of India



सुरज कुमार  
Suraj Kumar  
जन्म तिथि/DOB: 10/05/1985  
पुरुष/ MALE

Issue Date: 13/07/2019

**4320 8100 5530**

VID : 9172 6861 1376 6801

मेरा आधार, मेरी पहचान



Government of India



सूचना

- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- सुरक्षित QR कोड / ऑफलाइन XML / ऑनलाइन ऑथेंटिकेशन से पहचान प्रमाणित करें।
- यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.

- आधार देश भर में मान्य है।
- आधार कई सरकारी और गैर सरकारी सेवाओं को पाना आसान बनाता है।
- आधार में मोबाइल नंबर और ईमेल ID अपडेट रखें।
- आधार को अपने स्मार्ट फोन पर रखें, mAadhaar App के साथ।

- Aadhaar is valid throughout the country.
- Aadhaar helps you avail various Government and non-Government services easily.
- Keep your mobile number & email ID updated in Aadhaar.
- Carry Aadhaar in your smart phone – use mAadhaar App.

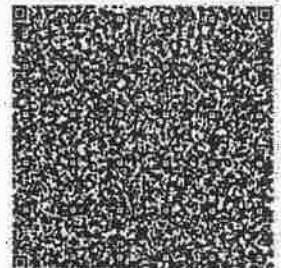


भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India



पता:  
S/O, Chhote Lal Saroj, Ghuripur, Jaunpur,  
Uttar Pradesh - 222201

Download Date: 12/07/2022



**4320 8100 5530**

VID : 9172 6861 1376 6801

1947 | help@uidai.gov.in | www.uidai.gov.in

suraj





Ministry of Health & Family Welfare  
Government of India

## Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 49165925563

### Beneficiary Details

Beneficiary Name **Suraj Kumar**  
Age **37**  
Gender **Male**  
ID Verified **Aadhaar # XXXXXXXX5530**  
Unique Health ID (UHID) **50-3246-2423-2784**  
Beneficiary Reference ID **37705059314760**  
Vaccination Status **Fully Vaccinated (2 Doses) and a Precaution Dose**

### Vaccination Details

Vaccinated By **Sindhu Singh**  
Vaccination At **CHC Shankargarh (18 Plus)**

Dose Number	Date of Dose	Vaccine Name	Batch Number	Vaccine Type	Manufacturer
1/2	27 May 2021	COVISHIELD	4121Z075	COVID-19 vaccine, non-replicating viral vector	Serum Institute of India Pvt. Ltd.
2/2	20 Sep 2021	COVISHIELD	4121AA018M	COVID-19 vaccine, non-replicating viral vector	Serum Institute of India Pvt. Ltd.
Precaution dose	13 May 2022	COVISHIELD	4121AA089M	COVID-19 vaccine, non-replicating viral vector	Serum Institute of India Pvt. Ltd.

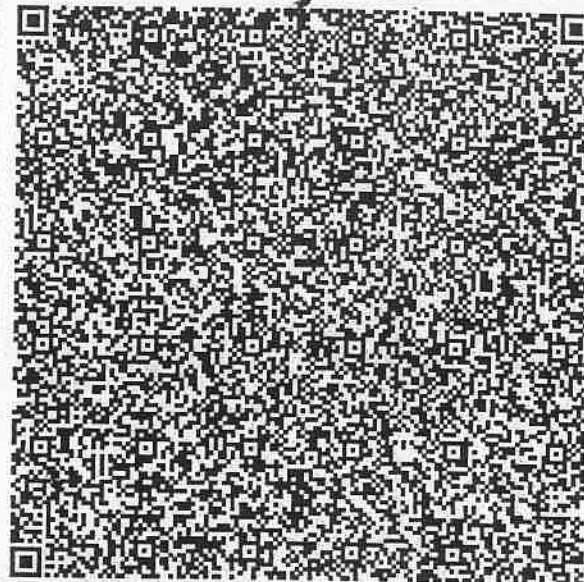


Together, India will defeat  
COVID-19"

- Prime Minister Narendra Modi

In case of any adverse events, kindly contact the nearest Public Health Center/  
Healthcare Worker/District Immunization Officer/State Helpline No. 1075

**COWIN**  
Winning Over COVID



This certificate can be verified by scanning the QR code at  
<http://verify.cowin.gov.in>

10A-12

ID: 0601241653

Diagnosis Information:  
Sinus Rhythm  
Normal ECG\*\*

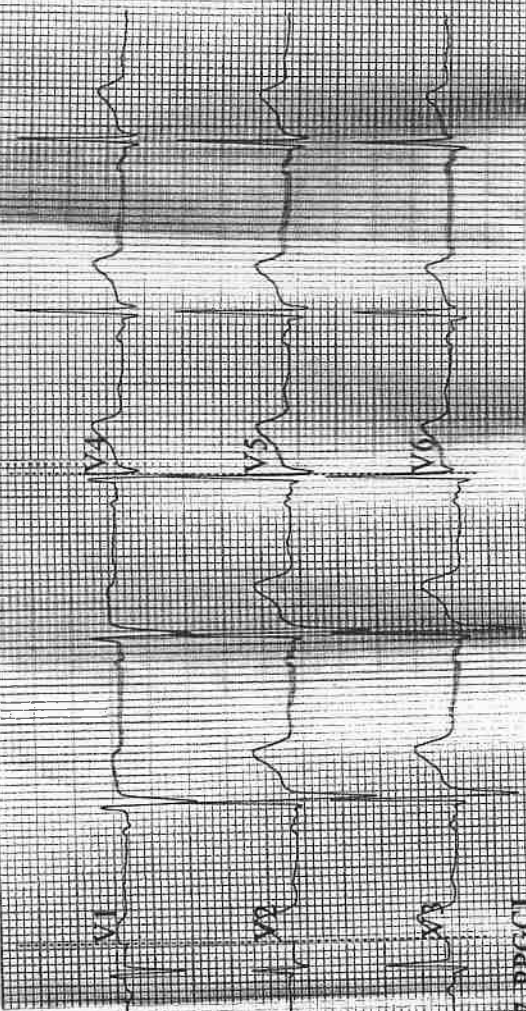
Male  
38 Years  
cm

mmHg

kg

*Sorani*

HR	66	bpm
P	96	ms
PR	136	ms
QRS	89	ms
QT/QTc	393/42	ms
P/RS/T	59/62/82	ms
RV5/SV1	1.49/0.96	mV



V10 SEMIP V17 EPGCL

CARDIART

Report Confirmed by: