Annual Report as on March 31, 2010

Name of the State Pollution Control Board/Committee : GOA STATE POLLUTION CONTROL BOARD

Name of the Contact Person dealing with Bio-medical Waste Management related with Telephone contact no. & mobile no.: Mr. Sanjeev Joglekar (AEE), (0832)2438528/9404314296

Format for Submission of Annual Report by SPCB/PCC

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|----------------------------|-------|--------|-----------|---------|----------|---------|---------|------------|------------|--------|------------|-----------|---------|-----------|--------|----------|---------|
| Health Care | Total | Total | | | No. of | No. of | | Tota | ı no. of t | | it equipme | Total Qty | | No. of | Total | | |
| Facilities (HCF) | no. | | CBWTF | | HCF | HCF | HCF | | | CB | WTF) | of BMW | Qty of | | no. of | | |
| under Schedule VI | of | Beds | / Private | which | having | applied | | | | | | generated | | Care | Show | | |
| Health Care | HCF | | agencies | are | treatme | for | Authori | | | | | kg/day | treated | Facilitie | Cause | | |
| Facilities (HCF) | | | | utilisi | nt and | Authori | sation | | | | | | | | kg/day | S | Notices |
| under Schedule VI | | | | ng | disposal | sation | | | | | | | | | | violated | issued |
| of the Rules | | | | CBW | | | | | | | | | | | | BMW | to |
| | | | | TF | S | | | Incine | | Autocl | Microwa | Hydrocl | Shredd | | | | |
| | | | | | ~ | | | With | Withou | ave | ve | ave | er | | | | |
| | | | | | | | | Air | t | | | | | | | | |
| | | | | | | | | Pollutio | APCD | | | | | | | | |
| | | | | | | | | n | | | | | | | | | |
| | | | | | | | | Control | | | | | | | | | |
| | | | | | | | | Device | | | | | | | | | |
| | | | | | | | | (APCD) | | | | | | | | | |
| A) Hospitals & | | | | | | | | | | | | | | | | | |
| Nursing homes in | | | | | | | | | | | | | | | | | |
| town with | | | | | | | | | | | | | | | | | |
| population of 30 | | | | | | | | | | | | | | | | | |
| lakhs and above | | | | | | | | | | | | | | | | | |
| B) Hospitals & | | | | | | | | | | | | | | | | | |
| Nursing homes in | | | | | | | | | | | | | | | | | |
| town with | | | | | | | | | | | | | | | | | |
| population below 30 | | | | | | | | | | | | | | | | | |
| lakhs: | | | | | | | | | | | | | | | | | |
| iakiis. | | | | | | | | | | | | | | | | | |
| a) with 500 beds and | | | | | | | | | | | | | | | | | |
| a) with 500 beds and above | 1 | | | | | | | | | | | | | | | | |
| b) with 200 beds but | 1 | | | | | | | | | | | | | | | | |
| less than 500 beds | 1 | | | | | | | | | | | | | | | | |
| 1000 than 500 tous | | 4271 | NIL | NIL | 1 | 234 | 226 | NIL | 2 | 52 | 1 | | | 2437.685 | 2437 7 | 1 | 1 |
| c) with 50 beds but | 13 | .2,1 | 1,11 | 1,11 | • | 231 | | | | 52 | | | | 2.57.005 | 2.57.7 | | • |
| less than 200 beds | 1.0 | | | | | | | | | | | | | | | | |
| d) with less than 50 | 216 | | | | | | | | | | | | | | | | |
| beds | 210 | | | | | | | | | | | | | | | | |
| ocus | | | l | | | | | l | ı İ | | | l | | I | I | | ı l |

| C) All other institutions generating biomedical waste not included in A) and B) | 3 | | | | | | | | | | | | | | | | |
|---------------------------------------------------------------------------------|-----|------|-----|-----|---|-----|-----|-----|---|----|---|--|----------|--------|---|---|---|
| Total | 234 | 4271 | NIL | NIL | 1 | 234 | 226 | NIL | 2 | 52 | 1 | | 2437.685 | 2437.7 | 1 | 1 | 1 |