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)]

SI. No.	Particulars		
1,	Particulars of the Occupier		
	(i) Name of the authorised person (occupier or operator of facility)		SHEELA KETAN
	(ii) Name of HCF or CBMWTF		Apollo Specialty Hospital
	(iii) Address for Correspondence	:	No: 320, Anna Salai Chennai
	(iv) Address of Facility		No : 320, Anna Salai Chennai
	(v)Tel. No, Fax. No	1	044-24329044
	(vi) E-mail ID	;	muthukumaran_b@apollohospiatals.com
	(vii) URL of Website		www.apollohospitals.com
	(viii) GPS coordinates of HCF or CBMWTF		Latitude;13.033625
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No: 19BAC25804273 Date:05/08/2019 01/04/2019 valid up to 31/03/2024
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31/03/2020
2.	Type of Health Care Facility	:	Hospitals
Ì	(i) Bedded Hospital	:	No. of Beds: 290
	(ii) Non-bedded hospital	:	
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)		N/A
	(iii) License number and its date of expiry	100	
3.	Details of CBMWTF	:,	
	(i) Number healthcare facilities covered by CBMWTF	:	
	(ii) No of beds covered by CBMWTF	:	290

	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.		Red Category (like plastic, glass etc.)
	(iv) No of vehicles used for collection and transportation of biomedical waste	i	One vehicle
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		Quantity Where generated disposed Incineration Ash nil nil ETP Sludge
	(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of		G J Muticlave Pvt Ltd
	(vii) List of member HCF not handed over bio-medical waste.		
6	Do you have bio-medical waste Management committee? If yes, attach minutes of the meetings held during the reporting period		Yes,
7	Details trainings conducted on BMW	-	Bio medical waste management committee
	(i) Number of trainings conducted on BMW Management.		
	(ii) number of personnel trained		150 person
	(iii) . number of personnel trained at the time of induction		Ongoing process
	(iv) number of personnel not undergone any training so far		Nil
	(v) whether standard manual for Training is available?		Yes
•	(vi) any other information)		
8	Details of the accident occurred during the year		Nil
	(i) Number of Accidents occurred		Nil
	(ii) Number of the persons affected		Nil

	(iii) Installed treatment and disposal capacity of CBMWTF:	:	496 Kg per day	
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	496 Kg/day	
4,	Quantity of waste generated or disposed in Kg per		Yellow Category	: 92,423 (7701)
	annum (on monthly average basis)		Red Category	: 75,353 (6279)
			White	: 1,242 (103)
			Blue Category	: 12,043 (1003)
			General Solid waste	: 4,21,504 (35,125)

5	Details of the Storage, treatment, transportation, processing and Disposal Facility					
	(i) Details of the on-site storage	Size :54 sift x 6 Rooms Capacity:				
		Provision of on-site storage any other provision)			: (cold storage or	
	disposal facilities	Type of treatment equipment	No of	Cap acit y Kg/	Quantity treatedo unit r disposed	
		2		day	in kg per annum	
		Incinerators - nil	16		umtum	
		Plasma Pyrolysis -				
		Autoclaves nill,				
		Microwave -nill				
		Hydroclave -nil			<u>#</u>	
		Shredder-nil				
		Needle tip cutter or N	Nil			
		Destroyer-nil		:=X		
	- a	Sharps: 1242 KG				
		encapsulation or-nil				
	× ×	concrete pit-nil				
		Deep burial pits:-nil				
	k.,	Chemical-nil				
		disinfection:-nil		- 5		
		Any other treatment				
<u> </u>		equipment:-nil				

	trained on the importance of PPE and surprise audit to be done by IC team		
Report on Site visit to G.J.Multiclave	Waste disposal as per TNPCB guidelines is being adhered and the premises is maintained well	9	
Barcoding of Sharp container and Hub cutters			•
Other points :Surprise audit by IC team while loading waste onto the vendor vehicle	Found one BMW staff not wearing the appropriate gloves instead was wearing the surgical gloves. Training to be a regular practice	HK Supervisor	Immediate

Apollo Speciality Hospital

No 320 Annasalai Teynampet chennai-600035

BMW Annual Report for the period of January 2021 To December 2021

lonth	InfectiousWast e (Yellow Cover)Category 1,3,6	Clinical Waste (Red Cover) KgCategory 7	Bottle Waste (Blue Cover) KgCategory 4	Sharp Waste (White Cover) Kg	Total Waste kg	Approved Limit kg/Per day	Treatment and disposal Average Per Day	General Waste (Green cover) kg
Va.cuet.com=	Category 1,3,6	Calegory 7	Category 4				The state of the s	
an'21	8275.42	5452.64	920.44	93.9	14742.4	820	476	32103
eb'21	7092.9	5092.8	775.1	88.4	13049.2	820	466	30932
lar'21	8298.0	6240.9	1110.3	112.2	15761.4	820	508	36838
pr'21	8275.9	5835.8	914.0	99.4	15125.1	820	504	35579
ay'21	8617.5	5200.9	1218.0	84.2	15120.6	820	488	34321
ın'21	7148.9	5628.3	856.5	99.0	13732.7	820	458	32216
ul'21	7821.6	6587.5	1027.4	99.7	15536.2	820	501	36553
ug'21	7282.6	6494.6	1068.9	111.6	14957.7	820	483	37796
ep'21	7360.9	7063.3	1014.2	107.5	15545.9	820	518	33427
ct'21	7224.5	7080.1	1056.4	113.9	15474.9	820	499	37936
ov'21	7267.0	7025.2	996.7	122.2	15411.1	820	514	33215
ec'21	7758.0	7651.9	1085.5	110.1	16605.5	820	536	40587
otal	92423.22	75353.94	12043.44	1242.10	181062.70	9840.00	5950.15	421504

APOLLO SPECIALITY HOSPITAL

BIO-MEDICAL WASTE MANAGEMENT COMMITTEE

Date: 15-05-2021

Venue : Telemedicine room

Members present:

Dr.Thilagavathy - AMS

Ms.Maria – GM, Operations

Ms.Mumtaz – Quality System Office

Ms. Muthuram - Nursing Superintendent

Ms.Chandra - Infection Control

Ms. Kalpana – Housekeeping

Mr.Parthasarathy - Housekeeping

Previous meeting points discussed and follow up is being done

Minutes of the meeting

Points discussed	Action to be taken	Responsibility	EDC
Covid protocol for Bio- medical waste management	On-the job training to be done by the Supervisors	HK Supervisors	On-going process
Usage of PPE and reiterated the importance of PPE for HK and PCA staff	Staff to be trained on a regular basis on the importance of PPE and surprise audit to be done by IC team	HK Supervisors	On-going process
Surprise audit of BMW storage rooms by IC team	Storage rooms to be kept under lock and key which was not done in the Clinical Waste room as the boy had taken the key to the floor	HK Supervisor	Immediate



APOLLO CANCER CENTRES, CHENNAI BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING

Date: 22/12/21Time: 3-4/PmMembers attended:

S.N	NAME		
	NAME.	DEPARTMENT	SIGNATURE
1	Mani oth Ly	oputin	Man the Fro
2	K. Chandle	Infection Control.	(hart)
3	G Muthuram	Nuking	
4	Mum TAZ TSM	Quality Ca	Jump
5	Padikasu	Quality System	1/2/1/-
6	V	N.	Buchlay
7	Kalpana. M	HK	Fy
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APOLLO CANCER CENTRE

BIO-MEDICAL WASTE MANAGEMENT COMMITTEE

Date: 22-12-2021

Venue: B Block Conference room

Members present:

Ms.Maria – General Manager - Operations

Ms.Muthuram - Chief Nursing Officer

Ms.Mumtaz – Quality System Office

Ms. Chandra – Infection Control Nurse

Ms.Kalpana – Housekeeping

Mr.Padikasu – Housekeeping

Previous meeting points discussed and no pending issues.

Minutes of the meeting

Points discussed	Action to be taken		
Needle Stick and Cut Injuries		Responsibility	EDC
Sio Medical Waste	 The infection control nurse gave a status of number of injuries – Needle Stick and Cut Injury. There were 5 injuries during handling the BMW. It was suggested that frequent training to be conducted for the staff handling BMW. Regular supervision to be done by the HK Supervisors to ensure adherence to the processes 	Housekeeping and Infection Control	Ongoing
egregation at source	It was brought to the notice by the BMW Supervisor that proper segregation of BMW is not happening in a few areas. Regular training and monitoring to be done	Nursing and IC Team	On-going process
Jsage of PPE	The importance of PPE was reinforced by the GM –Operations and it was suggested all staff handling BMW to be regularly	HK Supervisors and reiterated the importance of PPE for HK and PCA staff	On-going process



APOLLO SPECIALITY HOSPITALS, CHENNAI BIOMEDICAL WASTE MANAGEMENT COMMITTEE MEETING- 2021.

Date: 15.05.2021

3 pm - 4 pm Telemedicine Room

Members attended:

	incliners accended:		
S.N	NAME	DEPARTMENT	SIGNATURE
1	Mari Thitago	Operations	Main this.
2	G' Muther gran		Compact of Fg.
3	& Thilagarathy	Nuvsing.	(furnam)
4	K. Charden	Med Lering	Things
5	10 A	Mussing Injectionant	ed 12 (Change
6	V. Parther Squathy.	Quelity System	Olul
7	04 14 4	House keeping.	O della sara
8	M. Kelpana	Housekoeping	fry.
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