

08<sup>th</sup> February, 2021

To

The District Environmental Engineer,  
Tamil Nadu Pollution Control Board  
Kappalur  
Madurai – 8

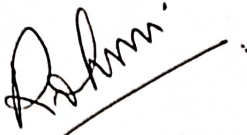
Dear Sir,

Sub: Annual report for Bio medical waste -Reg

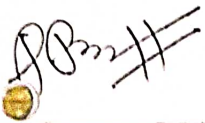
We here with furnish the Annual report for Bio medical waste for the year 2020 in Form IV as per  
BMW Rules-2016.

With warm regards,

for APOLLO SPECIALITY HOSPITALS – MADURAI,



Dr. ROHINI SRIDHAR  
Chief Operating Officer



RT798889724IN IWR:8284798889724

RL GANDHI NAGAR MA SO <625020>

Counter No:1,11/02/2021,10:17

To:THE DIST ENVI, TN POLLUTION CO

PIN:625008, Kappalur Indl Estate SO  
APOLLO HOSP, LAKE VIEW ROAD,  
MA-800085

Amt:35.00(Cash)

<Track on [www.indiapost.gov.in](http://www.indiapost.gov.in)>

भारतीय डाक

India Post

Apollo Speciality Hospitals, Lake View Road, K.K. Nagar, Madurai-625 020. Tele No. : (0452)2580892 - 94, 2581148 - 50  
Fax : 91-452-2580199, Email : [apollo\\_madurai@apollohospitals.com](mailto:apollo_madurai@apollohospitals.com) Emergency : (0452)2581111 / 1066

Registered Office : Apollo Hospitals Enterprise Limited, No. 19, Bishop Gardens, Raja Annamalaipuram, Chennai - 600 028.  
Corporate Identity Number (CIN) : L85110TN1979PLC008035



**From -IV  
(See rule 13)  
Annual Report**

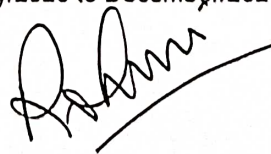
[To be submitted to the prescribed authority on or before 30<sup>th</sup> June every year for the period from January to December of the preceding year, by the Occupier of Health Care Facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

Sl.No	Particulars																																																						
1.	Particulars of the Occupier	:																																																					
	(i) Name of the authorized person (occupier or operator of facility)	:	Dr. Rohini Sridhar, Chief Operating Officer																																																				
	(ii) Name of HCF or CBMWTF	:	Apollo Speciality Hospitals, Madurai																																																				
	(iii) Address for Correspondence	:	Lake View Road K.K. Nagar, Madurai - 625020																																																				
	(i) Address of Facility	:	Lake View Road K.K. Nagar, Madurai - 625020																																																				
	(ii) Tel. No. Fax. No.	:	9842981211																																																				
	(V) E-mail ID	:	palanivel_p@apollohospitals.com																																																				
	(i) URL of Website	:	www.apollohospitals.com																																																				
	(ii) GPS coordinates of HCF of CBMWTF	:	----																																																				
	(iii) Ownership of HCF of CBMWTF	:	M/s. Ramky Energy and Environment Ltd																																																				
	(iv) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules.	:	AuthorizationNo.20BAC31341776Dated 05/09/2020 Valid up to 31/03/2021																																																				
	(v) Status of Consents under Water Act and Air Act.	:	Air & Water consent Order No: 2008231341543 & 2008131341543 Valid up to: 31/03/2021																																																				
2.	Type of Health Care Facility	:	Speciality Hospitals																																																				
	(i) Bedded Hospital	:	No. of Beds: 250																																																				
	(ii) Non-Bedded Hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	----																																																				
	(iii) License number and its date of expiry.	:	AuthorizationNo.20BAC31341776Dated 05/09/2020 Valid up to 31/03/2021																																																				
3.	Details if CBMWTF	:	----																																																				
	(i) Number healthcare facilities covered by CBMWTF	:	----																																																				
	(ii) No. of beds covered by CBMWTF	:	----																																																				
	(iii) Installed treatment and disposal capacity of CBMWTF	:	----																																																				
	(iv) Quantity of biomedical waste treated or disposal by CBMWTF	:	----																																																				
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow category: 17769 KG Red Category: 23543 KG White: 1250 KG (Puncture proof container) Blue Category: 2639 KG General Solid Waste: ----																																																				
5.	Details of the Storage, treatment, transportation, processing and Disposal Facility																																																						
	(i) Details of the on-site storage facility	:	Size : 8.75 feet x 6.00 feet Capacity: 50 sqft x 4 Rooms																																																				
	(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></td> <td></td> <td></td> </tr> <tr> <td>Plasma Paralysis</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td></td> <td>---</td> <td></td> </tr> <tr> <td>Sharps</td> <td></td> <td></td> <td></td> </tr> <tr> <td>encapsulation or concrete pit</td> <td></td> <td>----</td> <td></td> </tr> <tr> <td>Deep Burial pits:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td></td> <td>----</td> <td></td> </tr> <tr> <td>Any other treatment equipment:</td> <td></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				Plasma Paralysis				Autoclaves				Microwave				Hydroclave				Shredder				Needle tip cutter or destroyer		---		Sharps				encapsulation or concrete pit		----		Deep Burial pits:				Chemical disinfection:		----		Any other treatment equipment:			
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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.)
	(iv) No of vehicles used for collection and transportation of biomedical waste.	:	----
	(v) Details of incineration ash and ETP sludge generated and disposal during the treatment of wastes in Kg per annum)	:	----
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	M/s. Ramky Energy and Environment 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 Attached
7.	Detail trainings conducted on BMW		
	(i) Number of training conducted on BMW Management.		11
	(ii) Number of personnel trained		256
	(iii) Number of personnel trained at the time of induction		140
	(iv) Number of personnel not undergone any training so far.		----
	(v) Whether standard manual for training is available ?		Available
	(vi) Any other information)		----
8.	Details of the accident occurred during the year		Nil
	(i) Number of Accidents occurred		----
	(ii) Number of the 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?		----
	Details of Continuous online emission monitoring systems installed		----
10.	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year.		We have 100 KLD STP
11.	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		----
12.	Any other relevant information		----

Certified that the above report is for the period from January/2020 to December/2020



Name and Signature of the Head of the Institution

Dr. Rohini Sridhar, M.D., FRCPA., DNB.,  
Chief Operating Officer

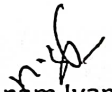
Date: 08/02/2021

Place: Madurai

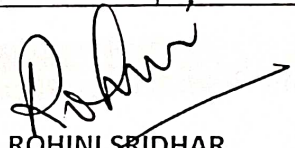


**APOLLO SPECIALITY HOSPITALS, MADURAI**  
**BIOMEDICAL WASTE - 2020**  
**YEARLY STATEMENT**

MONTH	RED	YELLOW	White (SHARP)	BLUE	TOTAL
JANUARY	2374.3	1855.6	159.7	274	4663.6
FEBRUARY	2194	1726	143.4	258.5	4321.9
MARCH	2226	1695	123.4	252.4	4296.8
APRIL	1402.4	1021.5	72.7	142.5	2639.1
MAY	1903.5	1432.3	87.3	195.5	3618.6
JUNE	1999.9	1502.4	97.4	207.5	3807.2
JULY	1800.9	1418	88.4	194.6	3501.9
AUGUST	1872.5	1487.1	91.4	214.9	3665.9
SEPTEMBER	1863.6	1398.8	93.8	223.2	3579.4
OCTOBER	1989.8	1466.3	100.9	219.6	3776.6
NOVEMBER	1929.1	1349.2	93.4	223.3	3595
DECEMBER	1987.9	1417.7	99.1	233.1	3737.8
Total	23543.9	17769.9	1250.9	2639.1	45203.8
Per Month Avarage	1961.991667	1480.825	104.2416667	219.925	3766.983333
Per Day Avarage	65	49	3	7	126

  
**G. Saranam Iyappa**  
Housekeeping - Officer

  
**P. PALANIVEL**  
General Manager - Engineering

  
**Dr. ROHINI SRIDHAR**  
Chief Operating Officer



Hospital name: Apollo Speciality Hospitals, Madurai



## MEETING MINUTES

Committee Name:	Infection Control Committee		
Date of Meeting:	25.02.2020	Time:	
Location:	Mini Conference Hall	Start:	12.30 p.m.
Minutes Prepared By:		End:	01.30 p.m.
Presided by:	Dr. Senthur Nambi		

### 1. Attendance at Meeting (add rows as necessary)

Dr. Senthur Nambi, Infectious Diseases  
Dr. K. Praveen Rajan, ADMS  
Dr. Usha Rani, Lab Services  
Mrs. Yamuna menon, Nursing Administrator  
Dr. Ram Murugan, Microbiology  
Dr. Jude vinoth, EMR  
Dr. Harikrishnan, Pulmonology  
Dr. Meenatchi, Microbiology

Dr. Vinothkumar, Pharmacy  
Mr. Robin, Lab services  
Mr. Anand, Pharmacy  
Ms. Emy, Sr. Infection Control  
Ms. Suganthi, Infection Control  
Ms. Krishnaveni, Lab Services

### 2. Meeting Agenda

Infection Control Quality Indicators Review  
Microbiology Data Review  
Antibiotics Data Review

Hospital name: Apollo Speciality Hospitals, Madurai

S.no	Key Issues Discussed	Agreed Action/ Decision	Assigned To/ Responsibility	Due Date	Follow up/ Status
1.	Antibiogram chart to be displayed in the emergency.	To create awareness among consultants	Mr.Anand	w.i.e	
2.	To strengthen the closed suction for all ventilator patients in critical care area.	To prevent infection			
3.	In hand hygiene graphical presentation – To added in number of actions & Moments.	In view of the prevalence of carbapenem resistant in critical care unit ,to know the sample size	Ms.Emy /Ms.Suganthi ICU Incharge		
4.	In view of the decrease percentage in housekeeping staff	To strengthen the hand hygiene awareness for housekeeping staffs.	Ms.Emy / Ms.Suganthi, Mr.Saranam Aiyppa		
5.	To indent additional laryngoscope in critical care area.	Steps taken to contain for carbapenam resistant organism 1.increased carbapenam resistant  2.clean of laryngoscope  3.Replace more laryngoscope	Infection control nurse, supervisors, critical care in charges		
6.	To take Bed sore wound swab – Based on clinical process, then to process.				
7.	Sponging In critical care area bath to be given with wet vipers only.	Wet wipes to be used instead of sponging towels.	NA Mam, ANS Critical in charges & supervisor		



### Minutes of the Meeting

Topic : Infection Control Meeting  
Date : 24<sup>th</sup> November 2020  
Time : 13.45 – 14.45  
Venue : ZOOM Meeting  
Minutes by : Mrs. Emy & Mrs. Suganthi

#### Attendance

S.No	Name	Designation
1.	Dr. Rohini Sridhar	COO
2.	Dr. K. Praveen Kumar	ADMS
3.	Dr. Senthur Nambi	Infection Control
4.	Dr. Usha Rani	Chief of Lab Services
5.	Dr. Padma Prakash	Intensive Care
6.	Dr. Jude Vinoth	Emergency Services
7.	Dr. Ram Murugan	Microbiology
8.	Dr. Harikrishnan	Pulmonology
9.	Dr. Meenatchi	Microbiology
10.	Dr. Vinoth Kumar	Pharmacy
11.	Mr. Anand	Pharmacy
12.	Mr. Palanivel	Engineering
13.	Mrs. Yamuna Menon	Nursing Administrator
14.	Mrs. Joy	Assistant Nursing Superintendent
15.	Mr. Saranam Iyyappa	Housekeeping
16.	Mrs. Emy	Infection Control
17.	Mrs. Suganthi	Infection Control
18.	Mrs. Krishnaveni	Lab Services

S.No	Points Discussed	Responsibility
1.	<b>Infection Control Tracker in COVID ICU</b> To collate data (ventilated, catheter, ICU days, etc.) on COVID patients	Mrs. Emy and Mrs. Suganthi
2.	<b>VRE RCA</b> To conduct a root cause analysis on the 3 Vancomycin Resistant Enterococcus cases in	Mrs. Emy and Mrs. Suganthi

	August 2020	
3.	<b>Carbapenam Resistance</b> To conduct RCA on the 3 carbapenam resistance in August 2020	Mrs. Emy and Mrs. Suganthi
4.	<b>Blood Cultures</b> To strengthen the process of sample collection before empirically starting antibiotics	Mrs. Emy and Mrs. Suganthi
5.	<b>De-escalation</b> To strengthen the de-escalation of antibiotics based on the culture reports	Mr. Anand
6.	<b>Central Line Culture</b> To train staffs on taking central line cultures	Mrs. Emy and Mrs. Suganthi
7.	<b>ET Culture</b> Appropriate labelling of Samples taken from ET tube	Mrs. Emy and Mrs. Suganthi
8.	<b>Bio Medical Segregation</b> To ensure proper disposal of masks in the Hospital	Mrs. Emy and Mrs. Suganthi

Approved by,

