

Date: 18.06.2019



To,

District Environment Engineer,
Tamil Nadu Pollution Control Board,
950/1 Poonamallee High Road,
Arumbakkam,
Chennai – 600 106.

Sub: Submission of form –IV annual report

Respected sir,

Please find enclosed the annual report in form IV for the period from January 2018 to December 2018.

Kindly acknowledge the receipt of the same.

Thanking you,

For APOLLO SPECIALITY HOSPITAL,

Bmuthukumar
B.MUTHUKUMARAN
Sr.Manager-Engineering.



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)	:	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	:	044-24329044										
	(vi) E-mail ID	:	muthukumaran_b@apollohospitals.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 : 18BAC12793882 Dated: 06/12/2018										
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31-03-2019										
2.	Type of Health Care Facility	:	Hospitals										
	(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	:											
3.	Details of CBMWTF	:											
	(i) Number healthcare facilities covered by CBMWTF	:											
	(ii) No of beds covered by CBMWTF	:	290										
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	450 Kg per day										
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	450 Kg/day										
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	<table border="1"> <tr> <td>Yellow Category</td> <td>: 58,179</td> </tr> <tr> <td>Red Category</td> <td>: 80,093</td> </tr> <tr> <td>White</td> <td>: 1008</td> </tr> <tr> <td>Blue Category</td> <td>: 17,849</td> </tr> <tr> <td>General Solid waste</td> <td>: 15,000</td> </tr> </table>	Yellow Category	: 58,179	Red Category	: 80,093	White	: 1008	Blue Category	: 17,849	General Solid waste	: 15,000
Yellow Category	: 58,179												
Red Category	: 80,093												
White	: 1008												
Blue Category	: 17,849												
General Solid waste	: 15,000												

5	Details of the Storage, treatment, transportation, processing and Disposal Facility					
	(i) Details of the facility	on-site storage	:	Size : 54 Sq.ft x 6 Rooms		
				Capacity :		
				Provision of on-site storage or any other provision)		:(cold storage or
	(ii) Details of the disposal facilities	treatment or	:	Type of treatment equipment	No of units	Capacity Kg/day Quantity treated or disposed in kg per annum
				Incinerators	- Nil	
				Plasma Pyrolysis Autoclaves	- Nil	
				Microwave	- Nil	
				Hydroclave	- Nil	
				Shredder	- Nil	
				Needle tip cutter or 75 Destroyer	- Nil	-3.5 1253
				Sharps	- 55	
				encapsulation or concrete pit	- Nil	-
				Deep burial pits:	- Nil	
				Chemical disinfection:	- Nil	-
				Any other treatment equipment:	- Nil	
	(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	:		One vehicle		
	(v) Details of incineration ash and ETP sludge generated and disposed			Quantity generated	Where disposed	
	during the treatment of wastes in Kg per annum			Incineration Ash ETP Sludge		
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:		G J Multiclave 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 , Minutes of the meeting details attached		
7	Details trainings conducted on BMW					

	(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) Remedial Action taken (Please attach details if any)	
	(iv) Any Fatality occurred, details.	Nil
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	N/A
	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?	Yes Nil
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	: (Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from **January -2018 to December 2018**

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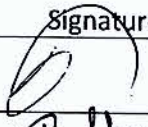
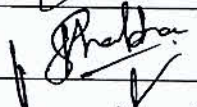

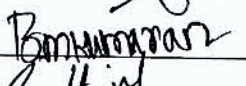
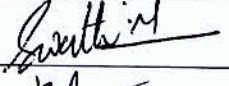
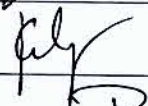

Name and Signature of the Head of the Institution

Date:
Place

Sr. Vice President - Operations
Apollo Speciality Hospital, Chennai-35.

Apollo Speciality Hospitals,
Bio Medical Waste Management Committee

Date of Meeting :05-06-2018
Venue: Conference Hall

Members of the committee	Signature
Dr. Abdul Ghafur, Sr.Consultant, Infectious Diseases	
Ms. K.P.Shobha, DGM, Operations	
Ms. Mumtaz, Quality Office	
Mr.Muthukumaran, Engineering	
Ms.Swathi, Nursing Superintendent	
Ms.Kalpana, Housekeeping	
Ms.Rajeswari, Infection Control Nurse	

Agenda: List of items discussed in the meeting
1.Usage of needle cutter
2.Disposal of Cytotoxic Waste (Plastic()) in yellow cover
3.% of hypo chlorite solution to be used in sharp container

Points discussed

1. Non clinical plastic waste should be discarded in general waste (green), not in red bins.
2. Blood bag should be discarded in yellow bin.
3. Cytotoxic drugs, expired medicines, antibiotics should be discarded in a separate yellow bin with cytotoxic waste © symbol.
4. Liquid waste to be treated with 1-2% sodium hypochlorite solution or to be connected to an effluent treatment plan.
5. All microbiological wastes including culture plates should be discarded in yellow bin after autoclaving.
6. To check Tamil Nadu Pollution Control guidelines regarding safe disposal needles (Whether to use needle cutter or separate white puncture proof sharp container.)
If needle cutter can be used color of cutter to be changed from yellow to white
7. To vaccinate all biomedical workers with Tetanus Toxoid and Hepatitis B vaccine.
8. To ensure safe transportation of glass waste in blue bins.

Action taken


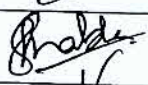
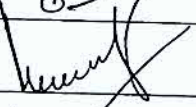
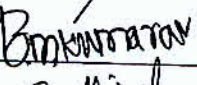
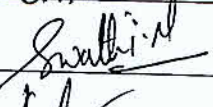

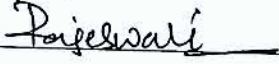
1. All Cytotoxic waste (Both plastic and bottles) should be disposed in infectious waste bin with a sticker denoting 'C' and Bio-Hazard. Separate bins for Cytotoxic Waste has been placed in the Wards.
 - a) In A-Block, bins have been placed in treatment rooms in all floors and 4th floor Chemo mixing area.
 - b) In B-Block, bin has been placed in Daycare and Chemo mixing area.
2. Henceforth Hypo-Chlorite solution will not be used in sharp containers. Once it is full all containers will be sent to G.J Multiclave for Disposal. It will not be re-used.
3. 10% Hypo-Chlorite solution will be replaced with 1% in Spillage kit which is kept in all floors. Solution will be changed everyday.

Apollo Hospitals Enterprise Limited

Location Address:

Bio Medical Waste Management Committee

Date of Meeting :10-11-2018
Venue: Infection Control Department

Members of the committee	Signature
Dr. Abdul Ghafur, Sr.Consultant, Infectious Diseases	
Ms. K.P.Shobha, DGM, Operations	
Ms. Mumtaz, Quality Office	
Mr.Muthukumaran, Engineering	
Ms.Swathi, Nursing Superintendent	
Ms.Kalpana, Housekeeping	
Ms.Rajeswari, Infection Control Nurse	

Agenda:
1) Non clinical plastic items-disposal
2) Disposal of blood bags
3) Cytotoxic waste –BMW guidelines
4) Change of needle cutter

Points Discussed:

1. The disposal practice of non clinical plastic items in stationary waste must be reinforced among the health care workers.
2. As per the previous meeting discussion, the disposal of Blood bag in yellow bin has to be streamlined in wards.
3. The disposal of cytotoxic waste, expired medicines and antibiotics with symbol 'C' is followed as per the BMW guidelines.
4. As per the BMW guidelines, the needle cutter (small white Box) has to be used for needle disposal and it should not be reused, but according to the feasibility of the institution the yellow boxes is currently practiced for the needle disposal and it is reused. So color of needle cutter to be changed from yellow to white- has to be implemented.



Signature of the Center Head



Signature of the HK HOD

Sr. Vice President - Operations
Apollo Speciality Hospital, Chennai-35.