

Date: 02.03.2020



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 2019 to December 2019.

Kindly the acknowledge the receipt of the same.

Thanking you,

For APOLLO SPECIALITY HOSPITAL,

Bmuthukumar

B.MUTHUKUMARAN
Sr.Manager-Engineering.



*Received on
06/03/2020
By V. J. Ar*



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.: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
	(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)	:	Yellow Category :69,855 Red Category :74,872 White:1,223 Blue Category :15,502 General Solid waste:15,000			
5	Details of the Storage, treatment, transportation, processing and Disposal Facility					
	(i) Details of the on-site storage facility	:	Size :54 Sq.ft X 6 Rooms Capacity : Provision of on-site : (cold storage or storage any other provision)			
	(ii) Details of the treatment or disposal facilities	:	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 destroyer-Nil		-	
			Sharps-55			
			encapsulation or-Nil		-	
			concrete pit-Nil			
			Deep burial pits: - Nil			
			Chemical-Nil			
			disinfection: -Nil			
			Any other treatment -Nil			
			equipment:			
	(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		
	(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) 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 -2019 to December-2019**

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Name and Signature of the Head of the Institution

Date:
Place


SHEELA KETAN
Chief Operating Officer
Apollo Speciality Hospitals,
Chennai - 600 035.

Apollo Speciality Hospitals,

Bio Medical Waste Management Committee

Date of Meeting : 10-06-2019
Venue: Conference Hall

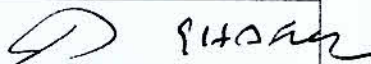
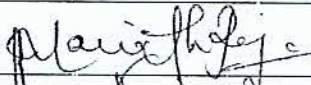
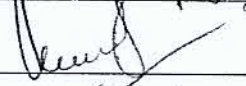
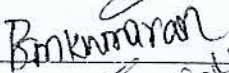
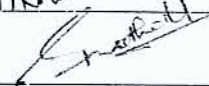
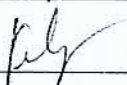
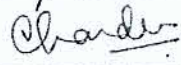
Members of the committee
Ms. Maria, Operations
Ms. Mumtaz, Quality Office
Mr.Muthukumaran, Engineering
Ms.Swathi, Nursing Superintendent
Ms.Kalpana, Housekeeping
Ms.Chandra, Infection Control Nurse

Points discussed
<ol style="list-style-type: none">1. As per TNPCB guidelines needle cutter to be changed from yellow to white in a phased manner.2. To replace white dustbins with coloured dustbins .3. Regular training on BMW handling is being taken by IC team.4. Condemned linen and mattresses to be sent to G.J.Multiclave on a regular basis instead of storing in the premises.5. Visit to G.J.Multiclave was done by HK & IC team.

Apollo Cancer Institute,

Bio Medical Waste Management Committee

Date of Meeting : 15-11-2019
Venue: Conference Hall

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

Points discussed
<ol style="list-style-type: none">1. Blood bags are being sent to Blood Bank for autoclaving and later handed over to G.J. Multiclave.2. Modified Infectious Waste sticker.3. All chemo mixing area, dustbin with yellow cover and Infectious Waste© has been placed.4. White dustbins replaced with colored dustbins in CCU and Daycare.5. Sharp container and needle cutter containers color changed from yellow to White.6. Re-emphasised on sending contaminated linen and mattress to G.J. Multiclave.