

Date: 12.05.2021

To

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The District Environmental Engineer, Tamil Nadu Pollution Control Board No.25, SIDCO Industrial Estate, Thuvakudy, Trichy – 620015.

#### Sub ; Annual report for Bio Medical Waste - Reg

With reference to the above we have with furnish the Annual Report for Bio Medical Waste for the year of 2020 in Form IV as per BMW Rules - 2018

Thanking You,

or APOLLO SPECIALITY HOSPITALS - TRICHY

Dr. ROHINI SRIDHAR Chief Operating Officer

Enol:

1. Form - IV

2. BMW Management Committee Meeting Minutes

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Apollo Speciality Hospitals, Chennal By-pass Road, Ariyamangalam, Old Palpannal, Trichy - 620 010. Ph : 0431 - 660 77 77 / 220 77 77 Website : www.apollohospitals.com

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



#### 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).

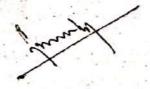
(HC	and the second s	
	Particulars	
1	Particulars of the Occupier	D. BOURN CRIDITAD CL. CO. Ser Office
	(i) Name of the authorised person (occupier or operator of facility)	Dr. ROHINI SRIDHAR, Chief Operating Officer
	(ii) Name of HCF	Apollo Speciality Hospitals
	(iii) Address for Correspondence	Chennai Bye pas road, Ariyamangalam, Old Palpannai, Trichy - 620010
	(iv) Address of Facility	Chennai Bye pas road, Ariyamangalam, Old Palpannai, Trichy - 620010
	(v) Tel. No. Fax. No	0431 - 6607777, 2207777
	(vi) E-mail ID	Palanivel p@apollohospitals.com
8.7	(vii) URL of website	www.apollohospitals.com
	(viii) GPS coordinates of HCF	
	(ix) Ownership of HCF	
	(x) Status of Authorisation under the Bio-Medical waste (Management and Handling) Rules	Authorization: 20BAZ32584541 Valid upto: 31.03.2024
	(xi) Status of Consents under Water Act and Air Act	Air – Cosent Order No : 2008232292957 Valid upto : 31.03.2024 Water – Consent Order No : 2008132292957 Valid upto : 31.03.2024
2	Type of Health Care Facility	Speciality Hospital
	(1) Bedded Hospital	200
	(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	Registration No: 8035 of 1979
3	Details of 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 disposed by CBMWTF	
4	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	Red – 8081.75 Kg Yellow – 8976.05 Kg Sharp – 209.1 Kg Blue – 625.2 Kg Black + 0

5.	Details of the storage, treatment, trans (1) Details of the on-site storage	Size: 1) 9.101	ssing and	2) 9 10ft x	4.9 ft 3) 9.1
	facility	x 4.9 ft 4) 9.10	) fix $4.9 \text{ f}$	t 5) 9.10ft x	4.9 ft
	(ii)Disposal facilities	Type of treatment equipment	No of units	Capacity Kg/day	Quantity treated or disposed in kg per annum
		Incinerators Plasma Pyrolysis Autoclaves Microwave Hydroclave Shredder Needle tip cutter or destroyer Sharps encapsulation or concrete pit Deep burial pits: Chemical disinfection: Any other treatment			
	(iii) Quantity of recyclable wastes sold to authorized recyclers after Treatment in kg per annum.	equipment:			
	(iv) No of vehicles used for collection and transportation of biomedical waste				
	(v) Details of incineration ash and ETP sludge generated and disposed	Description	Quantity Generated		Where Disposed
	during the treatment of wastes in Kg	Incineration			
	per annum	Ash ETP Sludge			
	(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of	of Studge			
	(vii) List of member HCF not handed over bio-medical waste.				
	Do you have bio-medical waste Management committee? If yes,	Yes			

6	Do you have bio-medical waste Management committee? If yes,	Yes
	attach minutes of the meetings held	
7	during the reporting period	
7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management.	131
	(ii) number of personnel trained	1570
	(iii) number of personnel trained at the time of induction	175
, , ,	(iv) number of personnel not undergone any training so far	
-	(v) whether standard manual for Training is available?	Available
N tr	(vi) any other information)	
8	Details of the accident occurred during the year	
	(i) Number of Accidents occurred	
	(ii) Number of the persons affected	
1,7	(iii) Remedial Action taken (Please attach details if any)	
77	(iv) Any Fatality occurred, details.	
9	Are you meeting the standards of air	
1	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 150 KLD STP
11	Is the disinfection method or sterilization meeting the log 4 Standards? How many times you have	
12	Not met the standards in a year?	
12	Any other relevant information	

Certified that the above report is for the period from: 01.01.2020 to 31.12.2020

Date: 12.05.2021 Place: Trichy



	AP(	DLLO SPECIA	LTY HOSPITALS, T	RICHY	HALLES
Ye	early Stateme	nt For BMW-	JANUARY 2020 TO	DECEMBER:	2020
MONTH	RED	YELLOW	WHITE (Sharp)	BLUE	TOTAL
Jan-20	767.9	757.3	11.3	69.2	1605.7
Feb-20	765.4	737.6	11.4	62.5	1576.9
Mar-20	622.9	638.8	10.9	62.3	1334.9
Apr-20	266.6	204.2	4.4	22.3	497.5
May-20	519.95	563.25	9.2	55.7	1148.1
Jun-20	695.9	644.9	8,4	56.2	1405,4
Jul-20	572.6	940.3	11.2	39.5	1563.6
Aug-20	843	960.1	25	54	1882.1
Sep-20	791	920	26.8	47.8	1785.6
Oct-20	795.5	885.6	22.2	52,5	1755.8
Nov-20	732	869	33.1	50.1	1684.2
Dec-20	709	855	35.2	53.1	1652.3
TOTAL	8081.75	8976.05	209.1	625.2	17892.1

M.Gunasekaran HK-HOD P.Palanivel GM-Engineering

Dr.ROHINFSRIDHAR Chief operating Officer



## MEETING MINUTES

Committee Name:	Covid Meeting			
Date of Meeting: (DD/MM/YYYY)	07.03.2020	Time: 01.00Pm-02.00Pm		
Location:	ASHT, Trichy	Start:	01.00pm	
Minutes Prepared By:	Dr.Sivam	End:	02.00pm	
Presided by:	Dr.Ramasubramanian	9/4	300	

S.No	nce at Meeting (add rows as nece	Names
1	Orthopedics	Dr.Balasubramanian
2	Anesthetist	Dr.Azhagappan
3	0&G	Dr.Uma Velmurugan
4	Lab	Dr.Sindhuja
5	Nursing	Mrs.Premila
6	Nursing	Mrs.Angel
7	ОТ	Mrs.Kanimozhi
8	Lab	Mrs.Christilda
9	ER/CCU	Dr.Sudharshan
10	Radiology	Dr.Muthu magesh
11	General Medicine	Dr.Gobinath
12	Quality	Mr.Saviour
13	Medical Admin	Dr.Sivam
14	ER	Dr.Vijay Anand
15	Cardiology	Dr.Kader
16	ENT	Dr.Jitu Sam George
17	Operations	Mr.Sangeeth



Key Issues Discussed	Agreed	Assigned To/		
	Action/ Decision	Responsibility	EDC	
Surveillance Forms Modifications in existing	Agreed	Dr.Ram.V	One week	
Stand for Hand rub	Agreed	Mr.Ravi(Material)	15th march	
Change of PFT room from Ophthalmologist room	Agreed	Mr.Sangeeth(Operation)	One month	
Sputum Collection in washroom - Should be taken in separate room	Agreed	Mr.Sangeeth (Operation)	One month	
Antibiotic APP	Agreed	Dr.Sivam	One month	
Headgel	Agreed	Dr.Sivam	One month	
Viral markers	Agreed	Dr.Ram.V	One month	
CSSD - Dedicated person for CSSD washing (HK)	Agreed	Dr.Sivam	15 days	
Linen/ Scrub dresses/ Blankets in Recovery should be settled out	Agreed	Mr.Sangeeth (Operation)	15 days	
Minimization of traffic in OT corridor	Agreed	Dr.Sivam	At the earliest	
Vaccinations - HK for Hepatitis (System-look out)	Agreed	Mr.Prabhu(HK. HR)	One week	
Baseline titre& Elisa for all needle stick injuries	Agreed	Dr.Sivam	immediate	
Transportation of Samples for cultures	Agreed	Dr.Sivam	One week	



ICMR Project - identified / Process could be delayed	Agreed	Dr.Ram.V	At the earliest
Vaccine Clinic - Possibility of opening	Agreed	Dr.Sivam/Mr.Sangeeth	At the earliest
Every 3 <sup>rd</sup> Wednesday – Dr.Ramasubaramanian Visit	Agreed	Dr.Sivam / ICC	Every month
Wearing of shoes allowed in Endoscopy	Agreed	Dr.Sivam	immediate

General comments (if any):

NIL

Signed by:

(Chairperson)



### MEETING MINUTES

Committee Name:	Infection control committee Meeting			
Date of Meeting: (DD/MM/YYYY)	19.11.2020	Time: 02.30Pm-03.30Pn		
Location:	ASHT, Trichy	Start:	02.30pm	
Minutes Prepared By:	MS .D. Chitradevi	End:	03.30pm	
Presided by:	Dr.Ramasubramanian			

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S.No	Department	Names
1	Neurosurgeon	Dr .myilan chinnappan
2	Lab-microbiology	Dr Deiago edwin
3	cardiology	Dr.Ravindran
1	Lab	Dr.Sindhuja
5	General medicine	Dr.vijayamoorthy
6	Plastic	Dr.vidhunraj
7	Radiology	Dr.muthu magesh
8	Anaesthesiology	Dr saravanan
9	General surgeon	Dr mansoor
10	Urology	Dr Alagappan
11	Anaesthesiology	Dr karthik
12	Anaesthesiology	Dr Alagappan
13	Internists	Dr muthuvankatesh
14	Emergency Medicine	Dr Annamalai Periyanan
15	Cardiothoracic	Dr srikanth
16	Pulmonology	Dr Tamilarasan
17	Nursing	Mrs.Premila
18	Quality	Mrs.Anel
19	OT	Mrs.Kanimozhi
20	Diet	Mrs.Gokila rani
21	paediatric	Dr Diviya
22	urology	Dr Nandhakumar
24	OT incharge	Mrs kanimozhi
25	lab	Mrs Christilda
26	ICN	Mrs chitradevi
27	House keeping	Mr marsal



### 2. Meeting Agenda

- Nursing practice Barrier Nursing Audit,
  - Biomedical Waste Management Audit
- Infection control activity Staff Vaccination
- Training Programme
- Antibiotic sensitivity pattern
- MRSA and MDR organisms isolated
- Environmental surveillance
- Hand hygiene Audit
- Antibiotic consumption Surgical Prophylaxis
  - High end antibiotic utilization
- Culture Vs Antibiotics
- Notifiable diseases
- CSSD Re-autoclaving, Recall,

Biological Indicator, Machine Breakdown

### 3. Previous meeting discussions/ follow ups (if any):

- 1.Antibiotic APP
- 2.head gel for OT cases
- 3.Cough room



### **MEETING MINUTES**

Committee Name:	Infection control committee Meeting			
Date of Meeting: (DD/MM/YYYY)	19.11.2020	Time: 02.30Pm-03.30Pi		
Location:	ASIIT, Trichy	Start:	02.30pm	
Minutes Prepared By:	MS .D. Chitradevi	End:	03.30pm	
Presided by:	Dr.Ramasubramanian			

S.No	Department	Names	
1	Neurosurgeon	Dr .myilan chinnappan	
2	Lab-microbiology	Dr Deiago edwin	
3	cardiology	Dr.Ravindran	
1	Lab	Dr.Sindhuja	
5	General medicine	Dr.vijayamoorthy	
6	Plastic	Dr.vidhunraj	
7	Radiology	Dr.muthu magesh	
8	Anaesthesiology	Dr saravanan	
9	General surgeon	Dr mansoor	
10	Urology	Dr Alagappan	
11	Anaesthesiology	Dr karthik	
12	Anaesthesiology	Dr Alagappan	
13	Internists	Dr muthuvankatesh	
14	Emergency Medicine	Dr Annamalai Periyanan	
15	Cardiothoracic	Dr srikanth	
16	Pulmonology	Dr Tamilarasan	
17	Nursing	Mrs.Premila	
18	Quality	Mrs.Anel	
19	ОТ	Mrs.Kanimozhi	
20	Diet	Mrs.Gokila rani	
21	paediatric	Dr Diviya	
22	urology	Dr Nandhakumar	
24	OT incharge	Mrs kanimozhi	
25	lab	Mrs Christilda	
26	ICN	Mrs chitradevi	
27	House keeping	Mr marsal	



ICMR Project - identified / Process could be delayed	Agreed	Dr.Ram.V	At the earliest
Every month 3rd Wednesday - Dr.Ramsubaramanian Visit	Agreed	Dr.Sivam / ICC	Every month

General comments (if any):

NIL

Signed by:

(Chairperson)





## APOLLO SPECIALITY HOSPITAL - TRICHY

Topic

: HOSPITAL INFECTION CONTROL COMMITTEE MEEING

Time

: 02.00PM

Date

: 19.11.2020

Presided By: Dr. Rohini Sridhar - COO/DMS

S.	NAME	DEPARTMENT	SIGNATURE
No	Dr. Mayilan chinnappan	Heussury	4-11-
2	Dr. Diego Edevin	Mirstilogy-Lab	Oper
3	Dr. Ravindran.	Cardidegy.	Racel.
4	Dr. Sindhya	Lab	f. Lindhyja.
5	Dr. Vijayamoorthy	General medicine.	9
6	Dr. ridhom	PLS	-
7	De- Multin meigen	Rediology	H M L
8	Dr. S. dothik V-S	Anaeth cerol ogy	adjulant
(	A Same	UNIT HEAD of SR.GM	m
10	R. SARGESTHI	speration	R.L.
11	Dr. Mansoor	Gen flap &	
12	D. AZHAGAPPA	Araes Hurology	(B)
13	Alagagar C	Vology	
14	Dr. 4. Muthereresolge	Mice.	
15	Dr. S. garavaran	Atraes has logy	2
16	2. Annamakai Pariyanan	Emergency Medicine	Amenter.

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S. No	NAME	DEPARTMENT	SIGNATURE
17	Premela Robert	Ne.	WAO
18	Tamiloresay	pulmonologers	Luy
19	,	of Enclarge	Brishe
20	G. KOHILARANI	DIETETION	1
21	Christilda	Lah	E
22	Marahal	Housekerping	Afrod-
23	Dr. Duyer M	Pediatrus	(po)
24	The Sai County Bhuman		V.
25	Dr Narolhopunan	moundy	8m
26	Mrs. Angel.c	Quality	Bot
27	D. Chitradevi	ICN	Our
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\* BMW-

DEPARTMENT OF POSTS, INDIA प्राप्ति स्वीकृति / ACKNOWLEDGEMENT

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