

Indraprastha Medical Corporation Limited

(Indraprastha Apollo Hospitals, New Delhi - A Joint Sector Venture of Govt. of Delhi)

Regd. Office : Sarita Vihar, Delhi-Mathura Road, New Delhi-110 076 (India)

Corporate Identity Number : L24232DL1988PLC030958

Phones : 91-11-26925858, 26925801, Fax : 91-11-26823629

E-mail : imcl@apollohospitals.com, Website : apollohospdelhi.com

Engg/CE/BMW/2019-20/06

Delhi Pollution Control Committee

Bio-Medical Waste Cell,
4th Floor, ISBT Building,
Kashmere Gate, Delhi-06.

AS 19/6/19
(ENQUIRY COUNTER)
DELHI POLLUTION CONTROL COMMITTEE 18 June 2019
DEPARTMENT OF ENVIRONMENT
GOVT. OF NCT OF DELHI
4TH FLOOR, ISBT BUILDING,
KASHMERE GATE, DELHI-110006

Sub: Annual Report (Form- IV) for the year 2016 under Bio-Medical Waste Rule 2016

Please Find enclosed the Annual Report for the year 2018 as per Bio- Medical Waste Management & Handling Rules, 2016.

Thanking You

For INDRAPRASTHA MEDICAL CORPORATION LTD.


Viyom Kumar Gupta
Chief Engineer

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 authorized person (occupier or operator of facility)	:	Ashok Bajpai
	(ii) Name of HCF or CBMWTF	:	Indraprastha Medical Corporation Ltd Ltd
	(iii) Address for Correspondence	:	Sarita Vihar, Delhi Mathura Road , New Delhi 110076
	(iv) Address of Facility	:	Same as above
	(v) Tel. No, Fax. No	:	011-29871918/ Fax 26825600
	(vi) E-mail ID	:	Viyom_g@apollohospitalsdelhi.com
	(vii) URL of Website	:	www.apollohospitalsdelhi.com
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other) – Private in collaboration with Delhi Govt
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	BMW Authorisation No. DPCC/BMW/AUTH/NEWNo/2019/04628
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: Consent # DPCC/WMC/2018/42638 valid upto 22.01.2023
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds:....750
	(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	:	
3.	Details of CBMWTF	:	Not Applicable
	(i) Number healthcare facilities covered by CBMWTF	:	Not Applicable
	(ii) No of beds covered by CBMWTF	:	Not Applicable
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	_____Kg per day - Not Applicable

	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg/day - Not Applicable			
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis) – As per details attached in Annexure I	:	Yellow Category :33049 bags (Weight 99442.51 kg)			
			Red Category : 69619 bags (weight 231061.49) kg			
			White: 4780 (Nos) Average weight: 8722.85			
			Blue Category : 10568 bags , weight 39913.10			
			General Solid waste:			
5	Details of the Storage, treatment, transportation, processing and Disposal Facility					
	(i) Details of the on-site storage facility	:	Size : 830 Sqft			
			Capacity :			
			Provision of on-site storage : (cold storage or any other provision) - NO			
	(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
			<p>Incinerators Plasma Pyrolysis Autoclaves : 2 Nos 972 ltrs (80 KG) , 472 ltrs As per annexure attached</p> <p>Microwave Hydroclave Shredder – 1 Nos 50 KG Needle tip cutter or Yes destroyer Sharps encapsulation or concrete pit Deep burial pits:</p>			
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Not applicable			
	(iv) No of vehicles used for collection and transportation of biomedical waste	:	Not applicable			
	(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 – sent to Common bio medical waste treatment facility
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	M/s Biotic waste solutions 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, copy of minutes attached in Annexure II
7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management.	230 Sessions
	(ii) number of personnel trained	6070
	(iii) number of personnel trained at the time of induction	2162
	(iv) number of personnel not undergone any training so far	-
	(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	
	(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?	- Not applicable
	Details of Continuous online emission monitoring systems installed	Not applicable
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Liquid waste treatment by STP. Have been meeting standards
11	Is the disinfection method or sterilization meeting the log 4	Autoclaving is being done

	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) – Not Applicable.

Certified that the above report is for the period from (January – December)

.....

ABajpai
 ASHOK BAJPAI

Name and Signature of the Head of the Institution

Date: *New Delhi*
 Place: *17/06/19*

ABajpai

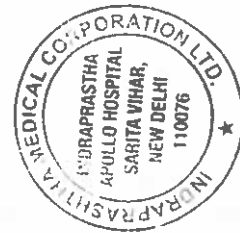
Client/Sub-Centre -Id

:020510037

FROM 2018-04 TO 2019-05

Client/Sub-Centre Name : Indraprastha Apollo Hospital

		Yellow		Blue		Red		White		Sharps		Others		Total	
		Wt	Bag	Wt	Bag	Wt	Bag	Wt	Bag	Wt	Bag	Wt	Bag	Wt	Bag
1	June	2573	8459.93	803	3117.08	5386	19034.29	118	200.56	238	465.28	0	0.00	9098	31277.14
2	July	2633	8343.48	837	3442.19	5272	18842.24	328	503.47	64	104.86	0	0.00	9134	31236.24
3	August	2645	7816.67	1017	3740.98	5065	17091.08	237	365.73	0	0.00	0	0.00	8964	29014.47
4	September	2362	7059.49	907	3499.04	4854	16203.88	317	465.73	0	0.00	0	0.00	8440	27228.13
5	October	2708	7955.86	972	3716.07	5560	18029.28	368	629.20	0	0.00	0	0.00	9608	30330.42
6	November	2731	8277.03	806	3009.22	5238	17432.30	119	155.12	196	283.98	0	0.00	9090	29157.65
7	December	2740	7775.05	760	2967.16	5594	17697.95	398	897.99	83	64.97	0	0.00	9575	28403.11
8	January	1935	5708.90	476	1783.35	4378	13520.55	23	53.34	384	847.32	0	0.00	7196	21913.47
9	February	1622	4634.05	234	880.79	3570	11174.34	483	1381.38	0	0.00	0	0.00	5903	18070.55
10	March	1707	4806.77	508	1913.78	4065	13313.62	300	639.40	0	0.00	0	0.00	6578	20773.57
11	April	4862	14902.22	1745	6158.22	10928	36678.28	343	539.03	259	359.30	0	0.00	18137	58635.06
12	May	4531	13603.06	1505	5687.21	9729	32043.69	181	245.33	341	520.86	0	0.00	16287	52100.15
						69619	231061.49	3215	6076.27	1563	2646.58	0	0.00	118016	379139.95



FORM I

(See rule 4(O), 5(i) and 15(2))

ACCIDENT REPORTING

1. Date and time of accident : NIL
2. Type of Accident : No such incident
3. Sequence of events leading to accident : No such incident
4. Has the Authority been informed immediately : No such incident
5. The type of waste involved in accident: : No such incident
6. Assessment of the effects of the accidents on human health and environment : NIL
7. Emergency measures taken : No such incident
8. Steps take to alleviate the effects of accidents : No such incident
9. Steps taken to prevent the recurrence of such an accident : No such incident
10. Does your facility has an Emergency control policy? If yes give details

Yes, the organization has a protocol on management of Needle Stick injury, accident, inoculation and percutaneous, mucus, membrane, exposure to blood and body fluid. (P.50 Infection Control Manual)

Date 12/06/19

Place Delhi


Signature,

Designation

Indraprastha Medical Corporation Limited

(Indraprastha Apollo Hospitals, New Delhi - A Joint Sector Venture of Govt. of Delhi)

Regd. Office : Sarita Vihar, Delhi-Mathura Road, New Delhi-110 076 (India)

Corporate Identity Number : L24232DL1988PLC030958

Phones : 91-11-26925858, 26925801, Fax : 91-11-26823629

E-mail : imcl@apollohospitals.com, Website : apollohospdelhi.com

February 7, 2019

CIRCULAR

This is for the information of all concerned as addition of new member in new Bio Medical waste management committee per requirement of Bio Medical Waste Management Rule 2016. The list of members is as following:

S.No	Name	Designation
1.	Mr. Ashok Bajpai	Managing Director
2	Dr. Karan Thakur	Vice President – Operations & Communications
3	Dr. Raman Sardana	Head Infection prevention & control and coordinator Laboratory services
4	Satish Kumar	Chief Quality Officer
5	Mr. Rohit Kapoor	Senior GM HR
6	MR. Viyom Gupta	Senior GM Engineering
7	Mr. Sachin Patidar	GM Materials
8	Sister Gracy Phillip	Nursing Superintendent
9	Dr. Gaurav Katyal	GM Operations
10	Ms. Sarla Kachroo	Dy. GM Housekeeping
11	Dr. Priti Bansal	Dy. Medical Superintendent
12	Mr. Anupam Srivastava	Head – Training Cell
13	Dr. Leena Mendiratta	Infection Control Officer



ATTENDANCE SHEET

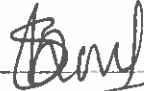

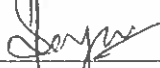


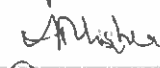
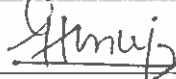


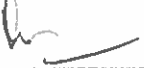
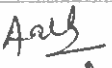
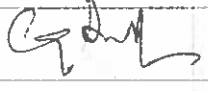
DEPARTMENT:

PROGRAM:

TRAINER:

DATE :

TIME :

S.NO.	CLNO	NAME	SIGNATURE	
1	1186	Sarala		H/K
2	8004	Dr. RAMAN SARDANA		Infection Control Lab
3	9001	Dr. Vikas Saxena		DMS office
4	1319	Dr. Ravi Khar		Dy DMS office
5	1129443	Satish Kumar		Quint
6	1014730	Anuradha Mishra		HK
7	235	Gracy Phnijs		Nursing
8	1928	Lachin Patidar		MMD
9	1616	Dr. Karan Shakul		ops
10	1844	VYOM GUPTA		Engg.
11	1633	Aarti Kalia		Engg.
12	1194	Gursharan Singh		Engg.
13				
14				
15				
16				
17				
18				
19				
20				
21				

Minutes of Meeting - Bio Medical Waste Management Rules 2016

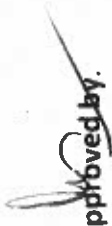
Points	Responsibility	Agreed action plans with timelines	Status update on 02.03.2019
1	Nursing	It was briefed to all the members that all the blood bags from blood banks are collected separately and are being autoclaved before sending it out for final disposal.	Complied with as per the new BMW management rules 2016.
2	Nursing /Engg/HK	Pre- treatment is being done for all laboratory waste , microbiology waste blood bags samples etc, - Local Autoclaving before sending it out for final disposal	Complied with as per new BMW management rules 2016
3	HR	Presently all the healthcare workers and others involved in handling bio- medical waste are immunized for protection including hepatitis B	HK to check for Tetnaus
4	HK/Engineering	Training given to HK personal. Process started.	Completed, records are being maintained.
5	Marketing	Make available the annual report on its web- site and all the health care facilities	20 th March 2019.
6	Materials	To check the feasibility whether the yellow bags can be autoclaved or not	Materials
7	Materials	Phased out of Chlorinated bags	Complied with

Minutes of Meeting - Bio Medical Waste Management Rules 2016

Points	Responsibility	Agreed action plans with timelines	Status update on 02.03.219
6	Engg	Currently Barcoding system is complied with. bags are being scanned and records are generated and maintained.	Complied with- Also to discuss in next committee meeting

Committee Members present : Dr. Raman Sardana , Dr. Karan Thakur, Mr. Viyom Gupta, Mr. Sachin Patidar, Mr. Gracy Phillip, Mr. Sarla Kachroo, Dr. Ranu Khan, Dr. Vikas Sanghwan, Ms Anuradha, Mr. Gursharan Singh & Ms Aarti Kalia.

Minutes Prepared by 


Approved by.

Next Committee meeting due on 5th March 2019

Minutes of the Meeting

Date 01.02.2019

**BARCODING GUIDELINES (AS per Bio Medical Waste Management
Rules 2016)**

Members Present :

Dr. Sardana, Mr. Viyom Gupta, Garacy Phillip, Dr. Leena, Dr. Ranu Khan, Dr. Gaurav Katyal, Sarla Kachroo, Anuradha Mishra, Gursharan & Aarti Kalia, Dr. Ranu Khan & Nursing Sisters

Minutes Prepared by



Approved by



Next Committee meeting due on 5th March 2019

BARCODING GUIDELINES

(As per Bio- Medical Waste Management rules 2016)

TABLES

TYPES

- Pre- printed on the designated colour coded bags / containers.
- Bar code or QR code labels can be pasted on designated colour coded bags and containers

SIZE

- Equal to more than 50µ
- As per Plastic Waste Management Rules 2016

SPECIFICATION

Colour mark on the label – for easy identification

- Bar code colour mark – Yellow / Red/ Blue in form of block



- Size – 7 mm x 7 mm or Text of font size 12.
- Colour mark or text shall be at the top left corner of the bar code label.
- For cytotoxic drugs alphabet C should be printed on yellow colour block. c

UNIQUE NUMBER & SPECIFICATION

Unique Number of HCF

- SPCB will upload a list of HCFs along with their unique number of HCF at their website. (Sequence number followed by following parameters)

SPCB
Andhra Pradesh

Name of the
HCF followed
by Unique
Number

Name of the
State / UT

Type of HCF

Unique
Number of
HCF

LABEL SEQUENCE NUMBER

• CBWTF's Scope

• Eg. Of QR Code & Bar Code



IMCL110029DLBH00578



IMCL110029DLBH00578

REQUIREMENT (For Code Label)

- Label to be pasted only at the Centre or close to Centre of the colour coded bag
- Size should be apt to accommodate desired information.
- Should be black in colour and its background should be white in colour and clearly legible on the label.
- Tamper proof, water proof, and should not fade at least for 48 hours after its use.
- To be able to resist the prevailing atmospheric temperature.
- No traces of heavy metals of any objectionable chemical constituent
- Good quality preferably every chromo paper label.
- The adhesive used for bar code label should be pressure sensitive , tear resistance and should be of acrylic based.

SPECIFICATION (Bar Code Label)

- HCF – own digital weighing machine and bar code scanner
- Automatic transfer of data (pertaining to weight of the scanned bags)
- The waste acceptance receipt should be clearly legible and should not fade for at least a period of 5 years
- Generate reports and update in the website – before 2
- Daily report format should be according to Annexure II in given guidelines