

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 : <https://delhi.apollohospitals.com>

Engg/CE/BMW/2023-24/04

June 14, 2023

Delhi Pollution Control Committee

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

8/16/06/2023
(ENQUIRY COUNTER)
DELHI POLLUTION CONTROL COMMITTEE
DEPARTMENT OF ENVIRONMENT
GOVT. OF NCT OF DELHI
4TH FLOOR, ISBT BUILDING,
KASHMERE GATE, DELHI-110006

Sub: Annual Report (Form- IV) for the year 2022 under Bio-Medical Waste Rule 2016

Please Find enclosed the Annual Report for the year 2022 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)	:	P. Shivakumar
	(ii) Name of HCF or CBMWTF	:	Indraprastha Medical Corporation 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	:	011-71791918/ Fax 71795600
	(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 applied for renewal on 12.04.2023
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: Consent # DPCC/WMC/2018/42638 valid upto 22.01.2023 applied for renewal on 20.12.2022
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds:....718
	(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 (Jan 2022 – December 2022)	Yellow Category : 8235.15 Kg (Average per month) <hr/> Red Category : 20378.72 (Average/ month) <hr/> White: 575.36 (Average/ month) <hr/> Blue Category 2535.10 kg (Average per month) <hr/> 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 <hr/> Capacity : <hr/> Provision of on-site storage : (cold storage or any other provision) - NO																																								
	(ii) Details of the treatment or disposal facilities :	<table border="0"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capacity Kg/yr</th> <th>Quantity treated or disposed per day in kg per annum</th> </tr> </thead> <tbody> <tr> <td>Autoclaves</td> <td>2 Nos</td> <td>972 ltrs</td> <td></td> </tr> <tr> <td>432 ltrs</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Microwave Hydroclave</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td>1 Nos</td> <td>50 KG</td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td>Yes</td> <td></td> <td></td> </tr> <tr> <td>Sharps encapsulation or pit</td> <td></td> <td></td> <td>- concrete</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/yr	Quantity treated or disposed per day in kg per annum	Autoclaves	2 Nos	972 ltrs		432 ltrs				Microwave Hydroclave				Shredder	1 Nos	50 KG		Needle tip cutter or destroyer	Yes			Sharps encapsulation or pit			- concrete	Deep burial pits:				Chemical disinfection:				Any other treatment equipment:			
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Any other treatment equipment:																																										
	(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	Nos 1 - Twice a day																																								
	(v) Details of incineration ash and ETP sludge generated and disposed	<table border="0"> <thead> <tr> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	Quantity generated	Where disposed																																						
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	during the treatment of wastes in Kg per annum	Incineration Ash STP/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.	General Induction Program : 36 Session Contract Induction Program : 46 Session On-site Training on Bio-Medical Waste : 54 Session Departmental Training Session : 152 Session As a part of JCI Refresher Course : 80 Session
	(ii) number of personnel trained	General Induction Program: 1098 Contract Induction Program: 957 On-site Session : 1184 Departmental Training Session : 3102 As a part of JCI Refresher : 6734 Total: 13,075
	(iii) number of personnel trained at the time of induction	General Induction Program: 1098 Contract Induction Program: 957 Total: 2055
	(iv) number of personnel not undergone any training so far	All new entrants are covered in Induction Programs
	(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 standards? How many times you have not met the standards in a year?		Autoclaving is being done
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)**

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Name and Signature of the Head of the Institution

Date: 14/06/2023
Place DELHI



Annexure II

TOTAL QUANTITY OF BIO MEDICAL WASTE GENERATED /KG/ANNUM

MONTH - 22	Autoclavable (Kg.) (Red Bags)	Autoclavable (Kg.) (BlueBags)	Incinerable (Kg.) (Yellow Bags)	B.D Boxes (Sharp Containers)	Cyto
JANUARY	14710.75	1967.02	6459	409.54	464.6
FEBRUARY	17385.73	2177.3	7155.5	413.87	381.28
MARCH	22435.5	2738.96	8337.06	712.7	344.08
APRIL	21956	2707.35	8686.9	533.8	362
MAY	22834.57	2984.16	9522.38	661.6	338
JUNE	19495	2892.6	7743.4	721.6	302.9
JULY	22431.3	2895.5	9833.3	645.5	241.1
AUGUST	19829.4	2337.5	8110.3	585.4	164.8
SEPTEMBER	18793.12	2329.2	7626.3	547.4	227.9
OCTOBER	19147.7	1757.1	8473.11	560.8	285.4
NOVEMBER	22942.57	2730.48	8863.6	521.1	272.27
DECEMBER	22583	2904	8011	591	299.6
TOTAL	244544.64	30421.17	98821.85	6904.31	3683.93
Average / month	20378.72	2535.10	8235.15	575.36	306.99
Average / day (30 days)	679.29	84.50	274.51	19.18	10.23
Average @ 365 days	669.99	83.35	270.74	18.92	10.09

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

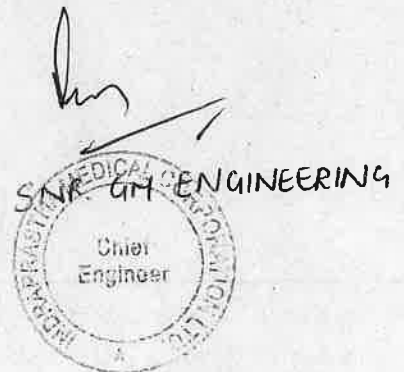
Yes, the organization has a protocol on management of Needle Stick injury, accident, inoculation and percutaneous, mucus, membrane, exposure to blood and body fluid. (P.50 Infection Control Manual)

Date 14/06/2023

Place DELHI

Signature

Designation



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December 2022

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. P. Shivakumar	Managing Director
2	Dr. Shanti Bansal	Director Medical Services
3	Dr (Brig.) Amit Roy	Deputy Director Medical Services
4	Dr. Gaurav Katyal	V.P Operations
5	Mr. Rohit Kapoor	Vice President - Human Resources
6	MR. Viyom Gupta	Senior GM Engineering
7	Dr. Leena Mendiratta	Infection Control Head
8	Mr. Sachin Patidar	Senior GM Materials
9	Sister Elizabeth	Asst. Director Nursing
10	Dr. Sanjeev Sharma	Senior GM Clinical Pharmacologist
11	Mr. Saaji Oommen	Radiation Safety Officer
12	Satish Kumar	Chief Quality Officer
13	Mr. Ankit Abrol	Dy. GM Housekeeping
14	Dr. Priti Bansal	Dy. Medical Superintendent
15	Aashish Sood	General Manager IT
15	Aarti Kalia	Engineering
15	Sonia Bhatia	Training Cell
16	Gursharan Singh	Engineering



ATTENDANCE SHEET

DEPARTMENT:

PROGRAM:

TRAINER:

DATE :

TIME :

BMW Committee Meeting

Emergency Conference Room -

27/04/23 12:00 PM

S.NO.	CL.NO	NAME	SIGNATURE	SCORES
1	008098	Dr. LEENA MENDIRATTA	<i>[Signature]</i>	Labs
2	1156683	Himani Sharma	<i>[Signature]</i>	Quality
3	1081085	ANRIT ARDOL	<i>[Signature]</i>	HR
4	1054016	GURSHARAN SINGH	<i>[Signature]</i>	Engg
5	1054058	Shyamala Raghunath.	<i>[Signature]</i>	Nursing
6	1054106	Aarti Kalia	<i>[Signature]</i>	Engg
7	1054179	Vijay Gupta	<i>[Signature]</i>	Engg
8	1054144	Dr. Gaurav Kalyan	<i>[Signature]</i>	operations
9	1054040	Dr. Pooja Bansal	<i>[Signature]</i>	Medical
10	1233997	Dr. Shantini Bimal	<i>[Signature]</i>	DMS
11	1238803	Dr. Kullie Anand	<i>[Signature]</i>	Medical
12				
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Minutes of the Meeting
Bio Medical Rules

Date 20.04.2023

	Points	Responsibility	Action / Plan
1	Waste Mixing observed in various floor areas	Nursing /HK	1.HK to identify the mixing to inform the concerned unit incharge. 2.HK to raise incident and report in the incident format as attached.
2	Problems with needle cutter in few places (rusted and not properly fixed)	Engg	1.Nursing to identify the areas and inform engineering for the same to address the issue with vendor. 2. Phase wise needle cutters are repaired and replaced
3	Lot of waste mixing found in OT complex Areas	Nursing	The members suggested that we should have pictorial boards above the SS bins placed on floors and other areas (to have a better understanding of segregation of waste) both in Hindi & English.
4	Needle cutter box was overflowing , Needle cutter needs replacement	HK/ Nursing	the box was sealed and replaced and the staff was briefed that once the box is 3/4th full , they have to seal it label it and then send for final disposal
5	HK Staff found taking garbage bag for transportation without gloves	HK	The HK staff was immediately stopped by HK Supervisor and briefed. Gloves were made available to him and counselled to wear them while transporting waste bags
6	Needle cutter box with medicine trolley found open , no lid to cover	Nursing / HK/ Materials	HK has stored the boxes lid in the store will put it when the box is 3/4th full and then will seal it and send it for final disposal as per rules Materials : to provide boxes with attached lid covers
7	Personal Protected Equipment's like Gloves, Caps, Masks, Aprons & Gumboots etc., as per BMW guidelines		The operator was not present
8	BMW Storage Room locked		Room was unlocked
9	Designated waste storage room provided separately for storage of red , blue & yellow bags		Still the condition is same, the left over waste of torn bags remains their itself. No personnel from Engineering & HK are ready to take responsibility for the cleaning of the same
10	Consent The Air & Water(Prevention & Control of Pollution) Act, 1981 & Authorization of BMW is pending		Still pending. Applied for renewal, follow up's done but certificate awaited