

Date 19-07-2022

To,

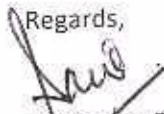
Regional Officer
UP Pollution Control Board
Sector-1, Noida.

Subject: Annual Report of bio Medical Waste for 2021.

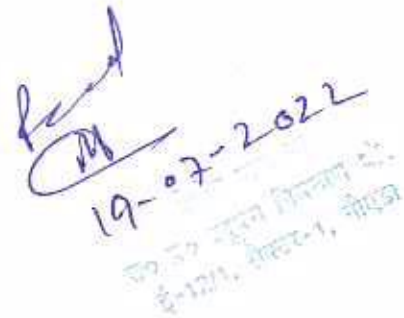
Respected Sir,

With Reference to the above mentioned subject, please find the enclosed duly filled Form IV pertaining to the annual return for the year January 2021 to December 2021.

Regards,



Raj Kumar Raina
Unit Head
Apollo hospital
E-2, Sec-26, Noida



19-07-2022
उप. प्र. प्र. विभाग-1,
ई-2/26, नोएडा



Form - IV
(See rule 13)
ANNUALREPORT

[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)]

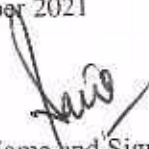
Sl. No.	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorized person (occupier or operator of facility)	:	Raj Kumar Raina
	(ii) Name of HCF or CBMWTF	:	Apollo Hospitals Noida
	(iii) Address for Correspondence	:	E-2, Sec-26, noida
	(iv) Address of Facility	:	E-2, Sec-26, noida
	(v) Tel. No, Fax. No	:	0120-4012000
	(vi) E-mail ID	:	Eng_noida@apollohospitalsdelhi.com
	(vii) URL of Website	:	https://noida.apollohospitals.com/
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	Authorization No.: 14143680, 21.12.2021 valid up to 31.07.2023
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to:31.07.2023
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Bed: 75 Beds
	(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	:	14143680, 31.07.2023
3.	Details of CBMWTF	:	NA
	(i) Number healthcare facilities covered by CBMWTF	:	NA
	(ii) No of beds covered by CBMWTF	:	NA
	(iii) Installed treatment and disposal capacity of CBMWTF:	:	_____ Kg per day... NA
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg/day...NA
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category ; 6092.93 kg Red Category : 14189.39 Kg White: 770.61 Kg Blue Category : 1586.10 Kg Covid Waste 214 Kg General Solid waste:

5		Details of the Storage, treatment, transportation, processing and Disposal Facility			
	(i) Details of the on-site storage facility :	Size :			
		Capacity :			
		Provision of on-site storage : (cold storage or any other provision)			
Disposal Facilities Medicare Environmental Management Pvt. Ltd., C-21 Phase - 1, M.G. Road, UPSIDC Industrial Area, Ghaziabad .201015		Type of treatment equipment	No of systems	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 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				
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		Quantity generated	Where disposed	
		Incineration Ash		NA	
		ETP Sludge			
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	Medicare Environmental Management Pvt. Ltd., C-21 Phase - 1, M.G. Road, UPSIDC Industrial Area, Ghaziabad .201015			
	(vii) List of member HCF not handed over bio-medical waste.	NA			
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	Documents Attached			

7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management.	Documents Attached
	(ii) number of personnel trained	Documents Attached
	(iii) number of personnel trained at the time of induction	Documents Attached
	(iv) number of personnel not undergone any training so far	Documents Attached
	(v) whether standard manual for training is available?	Documents Attached
	(vi) any other information)	Documents Attached
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)	Nil
	(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?	NA
	Details of Continuous online emission monitoring systems installed	NA
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	NA
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?	NA
12	Any other relevant information	(Air Pollution Control Devices attached with the Incinerator): NA

Certified that the above report is for the period from

Annual report from January 2021 to December 2021


Name and Signature of the Head of the Institution

Date: 19/7/2022

Place: Noida

Monthly Waste Generation Report

Hospital: Apollo Hospitals Noida Period: 01-2021 : 12-2021

Sl No.	Month	Yellow Bags		Red Bags		Blue Mark Box		Whites		Cytotoxic Bags		Covid Yellow Bag		Total	
		Count	Weight	Count	Weight	Count	Weight	Count	Weight	Count	Weight	Count	Weight	Count	Weight
1	January 2021	133	666.74	223	1097.59	42	159.79	48	71.39	0	0	0	0	446	1995.51
2	February 2021	103	441.08	224	1018.13	33	115.03	44	58.97	0	0	7	25.82	411	1659.03
3	March 2021	129	497.20	264	1169.93	30	114.26	54	58.47	0	0	0	0	477	1839.86
4	April 2021	113	388.67	258	1087.09	25	103.79	47	62.27	1	2.92	21	79.63	465	1724.37
5	May 2021	112	481.19	225	1074.58	33	132.18	27	34.67	0	0	34	108.98	431	1831.60
6	June 2021	122	544.25	230	1238.39	52	176.25	36	63.33	0	0	0	0	440	2022.22
7	July 2021	131	534.04	256	1212.90	35	121.64	39	52.04	0	0	0	0	461	1920.62
8	August 2021	128	510.66	237	1119.42	37	164.90	53	98.66	0	0	0	0	455	1893.64
9	September 2021	107	505.74	224	1266.12	33	134.75	32	56.46	0	0	0	0	396	1963.07
10	October 2021	128	612.43	295	1700.66	36	148.46	47	90.95	0	0	0	0	506	2552.50
11	November 2021	97	429.15	193	1041.81	22	92.66	36	49.40	0	0	0	0	348	1613.02
12	December 2021	111	481.78	254	1162.77	32	122.39	43	74.00	0	0	0	0	440	1840.94
Total		1414	6092.93	2883	14189.39	410	1586.1	506	770.61	1	3	62	214	5276	22856.38



UTTAR PRADESH POLLUTION CONTROL BOARD

TC-12V, Vibhuti Khand, Gomti Nagar, Lucknow-226010

Phone :2400852, 2400851, Fax:0651- 2400850

<http://www.uppcb.com/>

FORM III (See Rule 10) AUTHORISATION

(AUTHORISATION FOR OPERATING A FACILITY FOR COLLECTION, RECEPTION, TREATMENT, STORAGE, TRANSPORT AND DISPOSAL OF BIOMEDICAL WASTES)

1. File no. of authorisation and date of issue: No:- 14143680 and Date:-21/12/2021
2. M/s APOLLO HOSPITAL, RAJ KUMAR RAINA an occupier or operator of the facility located at Apollo Hospitals, E-2, Sector-26, Noida, GAUTAM BUDH NAGAR, 201301 is hereby granted an authorisation for:

Generation, segregation	✓	Collection	✓
Storage	✓	Transportation	
Reception	✓	Use	
Recycling Packaging	✓	Offering for sale Transfer	
Treatment or Processing or Conversion Any other form of handling		Disposal or destruction	

3. M/s APOLLO HOSPITAL is hereby authorized for handling of biomedical waste as per the capacity given below:

- (i) Number of beds of HCP: 75 Beds (Hospital)
- (ii) Number of health care facilities covered by CBMWTF: N.A
- (iii) Installed treatment and disposal capacity: N.A
- (iv) Area or distance covered by CBMWTF: N.A
- (v) Quantity of Biomedical waste handled, treated or disposed: 67.0 Kg/day (approx.)

4. This authorisation shall be in force for a period of 03 (upto 31.07.2023) Years from the date of issue

- 4.1 The authorization shall be valid for till 31/07/2023

Specific Conditions:

1. This authorisation shall be in force for a period upto 31.07.2023
2. The Validity of authorisation for bedded health Care Facility shall be synchronised with the validity of the consents
3. The authorization shall comply with the provisions of the Environment (Protection) Act, 1986 and the rules made there under.
4. The authorization or its renewal shall be produced for inspection at the request of an officer authorized by the prescribed authority.
5. The person authorized shall not rent, lend, sell, transfer or otherwise transport the biomedical wastes without obtaining prior permission of the prescribed authority.
6. Any unauthorized change in personnel, equipment or working conditions as mentioned in the application by the person authorized shall constitute a breach of his authorization.
7. It is the duty of the authorized person to take prior permission of the prescribed authority to close down the facility and such other terms and conditions may be stipulated by the prescribed authority.
8. The Bio-Medical waste shall be segregated into containers or bags at the point of generation in accordance with schedule I prior to its storage, transportation, treatment.
9. The containers or bags referred to in sub-rule (2) shall be labeled as specified in schedule IV.
10. The occupier shall ensure that bio- medical waste generated in hospital is handled without any adverse effect to human health and the environment.
11. If a container is transported from the premises where bio-medical waste is generated to any waste treatment facility container shall, apart from the label prescribed in schedule IV, also carry information in schedule IV.
12. Bio-medical waste shall not be mixed with other waste.
13. No untreated bio-medical waste shall be kept beyond a period of 48 Hrs. If it becomes necessary to store beyond 48 Hrs. The authorized person must take permission from the prescribed authority to ensure that it does not adversely affect human health and the environment.
14. As per Bio-Medical Waste Management, Rules 2016 and its amendment the hospital install Bar Coding facility.
15. The occupier shall submit an annual report to the prescribed authority in form IV by 30th June every year to include information about the categories and quantities of Bio-medical waste handled during the preceding year.
16. This authorization shall be valid subject to the validity of agreement with the Common Bio Medical Waste Treatment Facility. Renewed agreement should be submitted before the expiry of existing agreement.
17. The occupier shall maintain a record to the generation, collection, reception, storage, transportation, treatment, disposal and or any form of Bio-medical waste in accordance with these rules and verification by the prescribed authority at anytime.
18. The occupier shall ensure the Mercury Spillage Management within the Hospital/Nursing Home etc due to breakages of thermometers, pressure & other measuring equipment as the spilled mercury does not become part of bio-medical or other solid wastes generated from the health care facilities.
19. Bar code system for bags or container containing bio-medical waste to be sendout of the premises or place for any purpose should be submitted within 15 days.
20. The occupier shall ensure that waste water generated from the hospital shall be treated as per norms and should obtain consent to operate, under provision of Water (Prevention & Control of Pollution) Act, 1974 under section 25/26 and Air (Prevention & Control of Pollution) Act, 1981 under section 21/22.
21. It is within powers and function of the U.P. Pollution Control Board to modify/ revoke the terms and conditions of the authorization issued under the Bio-medical waste Management Rules, 2016.

Praveen
3/1/2023

ATTENDANCE SHEET

TRAINING PROGRAM
 TRAINER
 DATE
 TIME/DURATION
 VENUE

: Biomedical waste management
 : RIN Suby Varghese (DCH)
 : 1.09.21
 : 1.30 pm to 2.30 pm
 : 3rd floor

SN	CLOCK NO	NAME	DEPARTMENT	SIGN
1	1111401	RIN NISHA	LABOUR ROOM	<i>[Signature]</i>
2	117268	RIN HEMA	MBU	<i>[Signature]</i>
3	1201024	RIN SABIHA	ICU	<i>[Signature]</i>
4	1172616	RIN PRATHIMA	EMR	<i>[Signature]</i>
5	1116757	RIN ROSHNI	ICU	<i>[Signature]</i>
6	089985	RIN SARAD	RIN	<i>[Signature]</i>
7	1130103	RIN LATA	FW	<i>[Signature]</i>
8	1200270	RIN VAISHALI	ICU	<i>[Signature]</i>
9	020520	RIN SHEEJA	ICU	<i>[Signature]</i>
10	027346	RIN NEETHU MATHU	ICU	<i>[Signature]</i>
11	030169	RIN SHINET	1st Floor	<i>[Signature]</i>
12	1137862	RIN Shelly	1st FLOOR	<i>[Signature]</i>
13	N-352	RIN Inesha	1st floor	<i>[Signature]</i>
14	1154457	RIN SWARNIL	1st Floor	<i>[Signature]</i>
15	109049	RIN POOJA	1st floor	<i>[Signature]</i>
16	1122655	RIN RUTHSAN	1st FLOOR	<i>[Signature]</i>
17	030601	RIN SIMILIKK	DIALYSIS	<i>[Signature]</i>
18	0065	KATERINA PAI	OP PHARMACY	<i>[Signature]</i>
19	APH 3328	SHIVAM	OP Pharmacy	<i>[Signature]</i>
20	APH0966	Javed Ali	OP Pharmacy	<i>[Signature]</i>
21	APH0986	Pranav kumar	OP Pharmacy	<i>[Signature]</i>

ATTENDANCE SHEET

TRAINING PROGRAM

: BIO-MEDICAL WASTE MANAGEMENT

TRAINER

: RIN SUBI

DATE

: 26/12/2021

TIME/DURATION

: 2.30 PM - 3.30 PM

VENUE

: 3RD FLOOR CAFETERIA

SN	CLOCK NO	NAME	DEPARTMENT	SIGN
1	1082057	RIN SHIHU	2ND FLOOR	
2	026482	CAJASIA	C-N	
3	22-8456	RIN: BANIYA	MDA	
4	026038	S/O - SCARDONUA CA	OT	
5	8614	RIN - Neha	2nd Floor	
6	026520	RIN SHEGTA	ICU	
7	1075924	RIN - RINKI	RIU	
8	10163	Rinkma	G. AD.	
9	-	Sari Tawari	Sim Sap	
10	102	Madhu Kr-shaw	Security	
11	007277	Rufeli Einge	Lab Services	
12	005737	Hemulata	Lab Services	
13	03513	Stacy C.2	Lab Services	
14	1061278	RUBY	Vaccine	
15	11-3912	Immanuel Juma	ICU	
16	004643	Ramlat Rajbhos	Nephrology	
17	007734	Vipin	Nephrology	
18	006994	Asay	Nephrology	
19	1054859	Rupesh	Nephrology	
20	006937	Maiti Subal Chandra	Nephrology	
21	006939	Rajesh Harsa	Nephrology	

TRAINING PROGRAM

TRAINER

DATE

TIME/DURATION

VENUE

ATTENDANCE SHEET

: BIO-MEDICAL WASTE MANAGEMENT

: Rm Subi

: 13/5/2022

: 1 HOUR

SN	CLOCK NO	NAME	DEPARTMENT	SIGN
1	11144.4	Thothank	II Pharmacy	[Signature]
2	120102	RIN Jyoti Raju	Pharm	[Signature]
3	11081157	RIN Pooja Sharma	II Floor	[Signature]
4	1062067	RIN Shreya	II Floor	[Signature]
5	10179	Kusum	LDH	[Signature]
6	10157	Randhira	LDH	[Signature]
7	10180	Rakha	G.D.A	[Signature]
8	N-3922	RIN Indhira	1st floor	[Signature]
9	1154457	RIN Anshu	1st Floor	[Signature]
10	10059	Bhuvak	H.K	[Signature]
11	10153	Savitri	H.K	[Signature]
12	10203	[Signature]	G.D.A	[Signature]
13	026482	SADASHA	G.N.	[Signature]
14	110122	SWI	NURSING	[Signature]
15	1229867	SWATI SHARMA	NURSING	[Signature]
16	028986	RIN Anvika	M.B.U	[Signature]
17	10205	SAROT SINGH	H.K	[Signature]
18	10168	Pranika	H.K	[Signature]
19	111401	RIN NISHA RATHORE	LABOUR ROOM (Nsg.)	[Signature]
20	—	[Signature]	H.K	[Signature]
21	10172	Ritamoni Tandan	G.D.A	[Signature]

ATTENDANCE SHEET

TRAINING PROGRAM

: BIO-MEDICAL WASTE MANAGEMENT

TRAINER

: RIN SUBY

DATE

: 13/10/2022

TIME/DURATION

: 1 HOUR

VENUE

: BASEMENT

SN	CLOCK NO	NAME	DEPARTMENT	SIGN
1	005137	Hemlata	Lab Services	
2	006380	Lusum	Lab Services	
3	005999	Carveshkar	Lab Services	
4	006073	Rajinder kumar	Lab Services	
5	10104	राजेश	H.K	
6	10180	Rekha	GT. DA	
7	8169	RIN SHINBY	The Dept. Neph	
8	8614	RIN - Mele	2nd floor	
9	10023	रवी	GT. DA	
10	10112	Misha	GT. DA	
11	10207	सुनील	H.K	
12	10180	जिगीता	H.K	
13	-	रिदल	H.K	
14	10012	RIN LEVYDESSY	DIALYSIS	
15	100210	RIN SWETA SINGH	DIALYSIS	
16	40020	RIN JESSY	DIALYSIS	
17	1143424	RIN ANGEL P. MATHEW	DIALYSIS	
18	1054743	Vandit Rajbhar	Nephrology	
19	006994	Pran Kishor	Nephrology	
20	202	Madhu Krishna	Security	
21	116324	RIN Jayashree	GT Floor	

MEETING MINUTES

Committee Name:	Infection Control Committee		
Date of Meeting:	21.1.21		
Location:	AHC Cafeteria, 3 rd Floor	Start Time :	3pm
Minutes Prepared By:	R/N Suby ICN	End Time :	4pm
Presided by:	Mr. Raj Raina – Unit Head		

1. Attendance at Meeting	
Mr Raj Raina	R/N Sheeja
Dr Saurabh	R/N Sonia
Ms. Beena Valson	Mr Vinod
Dr Neha Minocha	Mr Ram Nandan Raut
Dr Rahul Gupta	
Dr S P Sarkar	
R/N Suby Varghese	
R/N Inderpreet	
Mr. Shobhnath	
Mr Sunil	

2. Meeting Agenda
a. Follow up of Needle stick injury. b. Restricted Antibiotic review c. HAI discussion

3. Previous Agenda
a. Recall in CSSD b. Adherence to OT cleaning in between cases

J. Action Items/Discussion tracker					
Key issues discussed	Root cause identified	Agreed action / decision	Assigned to / responsibility	Due date	Follow up / status
Previous meeting point discussion					
Recall in CSSD	To strengthen	Scheduled for recall next month	CSSD	10.1.21	closed
Adherence to OT cleaning in between cases		Strict monitoring in between cases	OT in charge	Continuous process	
Follow up of Needle stick injury	To strengthen	Follow up all needle stick injury cases - 3month,6month,1yr	ICN	28.02.21	
Restricted Antibiotic review		Pharmacy & Infection control to check & report		15.02.21	
HAI	To strengthen the process	New HAI Bundles to be followed in ICU & NICU	ICU & NICU	28.02.21	

General comments (if any): NIL



Signed by:

(Chairperson)

Apollo Hospital, Noida

MEETING MINUTES

Committee Name:	Infection Control Committee		
Date of Meeting:	29.07.21		
Location:	AHC Cafeteria, 3 rd Floor	Start Time :	3pm
Minutes Prepared By:	R/N Suby ICN	End Time :	4pm
Presided by:	Mr. Raj Raina – Unit Head		

1.Attendance at Meeting	
Mr Raj Raina	R/N Sheeja
Dr Saurabh	R/N Sumangala
Ms. Beena Valson	Mr Vinod
Dr Neha Minocha	Mr Ram Nandan Raut
Dr Madhur Rastogi	
Dr S P Sarkar	
R/N Suby Varghese	
R/N Sheeja Mathew	
Mr. Shobhnath	
Mr Kailash	
Mr Sunil	

2.Meeting Agenda
<ul style="list-style-type: none"> a. Biomedical waste management- Chemo waste & blood bags waste b. HAI discussion

3.Previous Agenda
<ul style="list-style-type: none"> a. Biomedical waste management b. BSI & VAP bundle c. HAI discussion

L. Action Items/Discussion tracker					
Key issues discussed	Root cause identified	Agreed action / decision	Assigned to / responsibility	Due date	Follow up / status
Previous meeting point discussion					
Biomedical waste management	To strengthen the process	Follow the waste management policy & regular check	ICN	Daily	Continuous process
BSI & VAP bundle					Continuous process
HAI					Continuous process
Chemo waste management & blood bags	Not done accordingly	SOP to be prepared	Kailash	31.07.21	

General comments (if any): NIL



Signed by:

(Chairperson)