

27th January, 2025

To

The District Environmental Engineer,
Tamil Nadu Pollution Control Board
Kappalur
Madurai - 8

Dear Sir,

Sub: Annual report for Bio medical waste -Reg

We here with furnish the Annual report for Bio medical waste for the year 2024 in Form IV as per BMW Rules-2016.

With warm regards,

for APOLLO SPECIALITY HOSPITALS - MADURAI,


P. Neelakannan
Chief Operating Officer



Chial 18002666888 - Wear Mask - Stay Safe
RT612159691IN TNR:8284612159691
RL ANNA NAGAR 50 MADURAI 625020
Counter No:1.20/02/2025.13:50
To: DIST ENV ENGINEER, TNPC
PIN: 625003, Kappalur, Indilestale 50
From: P. PALAHIVEL, APOLLO HOSPITAL
Wt: 128gms, JEG: 17.0
Amt: 61.36, Tax: 9.36, Amt. Paid: 61.00 (Cash)
Track no: 999, 10000001, 000000

Apollo Speciality Hospitals, Lake View Road, K.K. Nagar, Madurai - 625 020. Tele No: (0452) 2580892 - 94, 2581148 - 50
Fax: 91 - 452 - 2580199, E-mail: apollo_madurai@apollohospitals.com Emergency: (0452) 2581111 / 1066

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



**From -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. Neelakannan Chief Operating Officer																																
	(ii) Name of HCF or CBMWTF	:	Apollo Speciality Hospitals, Madurai																																
	(iii) Address for Correspondence	:	Lake View Road K.K. Nagar, Madurai - 625020																																
	(i) Address of Facility	:	Lake View Road K.K. Nagar, Madurai - 625020																																
	(ii) Tel. No. Fax. No.	:	9842981211																																
	(V) E-mail ID	:	palanivel_p@apollohospitals.com																																
	(i) URL of Website	:	www.apollohospitals.com																																
	(ii) GPS coordinates of HCF of CBMWTF	:	----																																
	(iii) Ownership of HCF of CBMWTF	:	M/s. Ramky Energy and Environment Ltd																																
	(iv) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules.	:	AuthorizationNo. 23BAZ54338327 Dated 07/09/2023 Valid up to 31/03/2028																																
	(v) Status of Consents under Water Act and Air Act.	:	Air & Water consent Order No: 2307250923313 & 2307150923313 Valid up to: 31/03/2028																																
2.	Type of Health Care Facility	:	Speciality Hospitals																																
	(i) Bedded Hospital	:	No. of Beds: 300																																
	(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.	:	AuthorizationNo. 23BAZ54338327 Dated 07/09/2023 Valid up to 31/03/2028																																
3.	Details if 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 disposal by CBMWTF	:	----																																
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow category: 21214 KG Red Category: 27713 KG White: 1665 KG (Puncture proof container) Blue Category: 3539 KG General Solid Waste: ----																																
5.	Details of the Storage , treatment, transportation, processing and Disposal Facility	:																																	
	(i) Details of the on-site storage facility	:	Size : 8.75 feet x 6.00 feet Capacity: 50 sqft x 4 Rooms																																
	(ii) Disposal Facilities	:	<table border="1"> <thead> <tr> <th>Type of treatment Equipment</th><th>No of Units</th><th>Capacity Kg/day</th><th>Quantity treated or disposed In Kg per Annum</th></tr> </thead> <tbody> <tr><td>Incinerators</td><td></td><td></td><td></td></tr> <tr><td>Plasma Paralysis</td><td></td><td></td><td></td></tr> <tr><td>Autoclaves</td><td></td><td></td><td></td></tr> <tr><td>Microwave</td><td></td><td></td><td></td></tr> <tr><td>Hydroclave</td><td></td><td></td><td></td></tr> <tr><td>Shredder</td><td></td><td></td><td></td></tr> <tr><td>Needle tip cutter or</td><td></td><td></td><td></td></tr> </tbody> </table>	Type of treatment Equipment	No of Units	Capacity Kg/day	Quantity treated or disposed In Kg per Annum	Incinerators				Plasma Paralysis				Autoclaves				Microwave				Hydroclave				Shredder				Needle tip cutter or			
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Needle tip cutter or																																			

	(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 LTP sludge generated and disposal during the treatment of wastes in kg per annum	
	(vi) Name of the Common Bio Medical Waste Treatment Facility Operator through which wastes are disposed of	M/s. Ramky Energy and Environment 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 Attached
7	Detail trainings conducted on BMW	
	(i) Number of training conducted on BMW Management	16
	(ii) Number of personnel trained	140
	(iii) Number of personnel trained at the time of induction	160
	(iv) Number of personnel not undergone any training so far	---
	(v) Whether standard manual for training is available?	Available
	(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?	---
	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 100 KLD STP
11	If 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	---

Certified that the above report is for the period from January/2024 to December/2024



Name and Signature of the Head of the Institution

Date: 27/01/2025

Place: Madurai

APOLLO SPECIALITY HOSPITALS, MADURAI
BIOMEDICAL WASTE - 2024
YEARLY STATEMENT

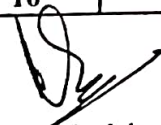
MONTH	RED	YELLOW	White (SHARP)	BLUE	TOTAL
JANUARY	2329.4	1780.1	140.5	290.2	4540.2
FEBRUARY	2147.7	1692.2	131.9	277.5	4249.3
MARCH	2344	1808.4	142.6	298.6	4593.6
APRIL	2230.6	1721.1	137.1	287.4	4376.2
MAY	2357.3	1800.3	141.2	301.4	4600.2
JUNE	2273.4	1752.6	136.4	294.8	4457.2
JULY	2378.1	1819.2	143	298	4638.3
AUGUST	2351	1795.1	136.1	303.3	4585.5
SEPTEMBER	2295	1728	135	294	4452.1
OCTOBER	2369	1816	141	303	4629.3
NOVEMBER	2292	1734	138	291	4454.9
DECEMBER	2345	1767	142	300	4553.8
Total	27713	21214	1665	3539	54131
Per Month Avarage	2309	1768	139	295	4511
Per Day Avarage	77	59	5	10	150



M. Magesh
Executive - Housekeeping



P. Palanivel
General Manager - Engineering



P. Neelakannan
Chief Operating Officer

Hospital name: Apollo Speciality Hospitals, Madurai

MEETING MINUTES

Committee Name:	Infection Control Committee		
Date of Meeting:	28.03.24	Time	
Location:	Conference Hall	Start:	12 p.m.
Minutes Prepared By:	Ms.Suganthi	End:	1 p.m.
Presided by:	Dr. Senthur Nambi		

1. Attendance at Meeting (add rows as necessary)

Mr. P. Neela Kannan, COO
 Dr. K. Praveen Rajan, JDMS
 Dr. Ranjani, Microbiology
 Mr. P. Palanivel, GM Engg
 Mrs. Karpagam, GM Operations
 Mrs. Anita Ani Bai Nursing Administrator
 Mrs. Joy Leela DNS
 Dr, Brajesh clinical pharmacologist
 Mr. Anand, Pharmacy
 Mr. Robin, Lab Services
 Ms. Ramya V Quality Systems
 Mr. Saranam Ayyappa, HK
 Ms. Suganthi, Infection Control

Dr. Ayyappan, Consultant ICU
 Dr. Ganesh, Consultant ICU
 Dr. Bennet Rajmohan, Sr. Consultant GS
 Dr. Hari Krishnan, Consultant Pulmonology
 Dr. Rikesh, Consultant CTICU
 Ms. Victoria, Nursing Supervisor
 Ms. Bindu, Nursing Supervisor
 Ms. Dani Praveena, Nursing Supervisor
 Ms. Vasanth, Patient Safety Officer
 Ms. Krishnaveni, Lab Services
 Ms. Sharmila Devi, ICN

2. Meeting Agenda

Infection Control Quality Indicators Review

Bundle compliance

Hand hygiene percentage

Microbiology Data Review

Antibiotics Data Review

Discussed regarding Azom dosage for

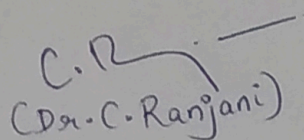
S.no	Key Issues Discussed	Agreed Action/ Decision	Assigned To/ Responsibility	Due Date	Follow up/ Status
1.	Kitchen Audit Points	To close the Kitchen audit observation points	Mr. Karthick	15.04.2024	
2.	Inclusion / replacement of any surgical items	Inclusion / replacement / Change of any surgical items can be discussed in the DTC / OT committee and Infection Control team can give their inputs.	Mr. Anand	10.04.2024	
3.	AWCCH Antibiotic Consumption	AWCCH Antibiotic Consumption has raised and the same has to be discussed with the paediatrician	Mr. Anand & Ms. Suganthi	10.04.2024	
4.	Irrational antibiotic combination Alert	Irrational antibiotics should be avoided in the Formulary	Mr. Anand	10.04.2024	
5.	BIOFIRE Test	To do marketing for the BIOFIRE test among local hospitals Madurai to promote the number of samples.	Mr. Manikandan DGM marketing	30.4.2024	

Hospital name: Apollo Speciality Hospitals, Madurai

6.	Employee Needle stick Injury Counselling	To provide counselling for the employee who got Needle stick injury and to provide the recommendation for the same & document it and forwarded to HR	Ms. Suganthi		
7.	UTI & VAP	To Strengthen the tracking of UTIs and VAP.	Ms. Suganthi		

General comments (if any)

Nil


(Dr. C. Ranjani)

Signed by:

(Chairperson)

Hospital name: Apollo Speciality Hospitals, Madurai

MEETING MINUTES

Committee Name:	Infection Control Committee		
Date of Meeting:	27.12.2024	Time	
Location:	Conference Hall	Start:	12 p.m.
Minutes Prepared By:	Ms.Suganthi	End:	1 p.m.
Presided by:	Dr. Senthur Nambi		

1. Attendance at Meeting (add rows as necessary)

Dr. K. Praveen Rajan, JDMS
 Dr. Mithun - Pathologist & Lab In charge
 Dr. Ranjani, Microbiology
 Mr. P. Palanivel, GM Engg
 Mrs. Anita Ani Bai Nursing Administrator
 Mrs. Joy Leela DNS
 Mr. Anand, Pharmacy
 Mr. Robin, Lab Services
 Ms. Ramya V Quality Systems
 Mr. Magesh, HK Executive
 Mr. Palani senthil murugan - Ops Head in AWCCH
 Ms. Suganthi, Infection Control

Dr. Ayyappan, Consultant ICU
 Dr. Gahesh, Consultant ICU
 Dr. Hari Krishnan, Consultant Pulmonology
 Ms. Victoria, Nursing Supervisor
 Ms. Vasantha, Patient Safety Officer
 Ms. Krishnaveni, Lab Services
 Ms. Sharmila Devi, ICN

2. Meeting Agenda

Infection Control Quality Indicators Review

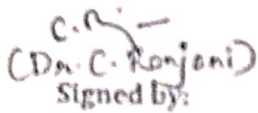
Bundle compliance
 Hand hygiene percentage
 Microbiology Data Review
 Antibiotics Data Review

Discussed regarding Azom dosage for

S.no	Key Issues Discussed	Agreed Action/ Decision	Assigned To/ Responsibility	Due Date	Follow up/ Status
1.	Potency test for 1% sodium hypo	• To check potency of hypo chloride	ICN	W.i.e	
2.	Hepatitis B vaccine	• Pharmacy staff to check availability of Hepatitis B vaccine in Chennai	Mr.Anand -pharmacy	15.1.2025	
3.	Single use device (Cath lab)	• Monitoring all single use devices and ensure documentation of each devices.	Cath lab in charge	15.1.2025	
	CSSD -CAHO audit points	• Audited points to be followed and implement the suggestions given	All in charges and supervisors	15.1.2025	

General comments (If any)

Nil


(Dr. C. Ronjani)
Signed by:

(Chairperson)