# 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: L242320L1988PL.C030958
Phones: 91-11-26925858, 26925801, Fax: 91-11-26823629
E-mail: imcl@apoliohospitals.com, Website: apollohospdelhi.com

Engg/CE/BMW/2020-21/01

**Delhi Pollution Control Committee** 

Bio-Medical Waste Cell, 4<sup>th</sup> Floor, ISBTBuilding, Kashmere Gate, Delhi-06. 11 June 2020

(ENOURY COUNTER)
DELHI POLLUTION CONTROL COMMITTESS
DEPARTMENT OF ENVIRONMENT
GOVT. OF NOT OF DELHI
4T' FLOOR, ISBT BUILDING,
KASEMERE 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 2019 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 30<sup>th</sup> 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)]

SI.	Particulars	T	
No.			
۱.	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
o marting and physical control and a second	(iii) Address for Correspondence	THE COLUMN TWO COLUMN TO THE C	Ltd 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		
A COCCUMENTAL DE LE CONTRACTOR DE L'ACCUMENTAL	(ix) Ownership of HCF or CBMWTF		(State Government or Private or Semi Govt. or any other) – Private in collaboration with Delhi Govt
Samoooooooooooooooooooooooooooooooooooo	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules		BMW Authorisation No. DPCC/BMW/AUTH/NEWNo/2019/04628
ACTION 1. (A TEXT ACTION AND ACTION A	(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	<b> </b> ;	No. of Beds:750
And the state of t	(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
3.	(i) Number healthcare facilities covered by CBMWTF  (ii) No of beds covered by CBMWTF  (iii) Installed treatment and disposal capacity of		Not Applicable  Not Applicable

	(iv) Quantity of biomedical waste treated by CBMWTF	l or di	sposed	:	K	Ig/day - f	Not App	olicable
4.				•	6515.33 Kg (Average Red Cate 16267.42 White: 644.kg (Blue Ca	Average tegory	month e/ mor	nth) h)
- Land Control of the					3309.40 kg (Average per month) General Solid waste:			
5	Details of the Storage, treatment, transpo	rtation	n proces	sing a	1			
		:	Size		0 Sqft		· -	
	facility		Capacit	.y:			·····	
			Provisi	on of	on-site	storage	: (col	d storage or
					vision) - N	-		<u>.</u>
восования в голиния полиния по	(ii) Details of the treatment or disposal facilities	,		e of tre oment	eatment	No of unit	Cap acit	Quantity- treatedo
A DOGITO OR DESCRIPTION OF THE PROPERTY OF THE			•			S	y Kg/ day	r disposed in kg per annum
	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in key per annum	·	2 N (80 472 Mici Hyd Shro destr Shar enca cone Dee Che	KG) Itrs rowav roclav edder He tip royer rps psulat erete p p buria mical nfectio other	e  1 Nos 50 cutter or  ion or  it al pits:  n: treatment	0 KG Yes		daves :
AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	treatment in kg per annum.  (iv) No of vehicles used for collection and transportation of biomedical waste		Not app	licable				
	(v) Details of incineration ash and ETP sludge generated and disposed	Annual Laboratory (Control of the Control of the Co				ntity crated		nere posed

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	during the treatment of wastes in Kg per annum	Incineration Ash ETP Sludge – sent to Common bio medical waste treatment facility
VALQUELLAND MANAGEMENT PROPERTY PROPERT	(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	
The state of the s	(i) Number of trainings conducted on BMW Management.	General Induction – 23 Contract Induction – 42
	District dialog in the second	Onsite sessions – 37
- The state of the		As part of JCI refresher – 38
		TOTAL 140
	(ii) number of personnel trained	General Induction – 1025
		Contract Induction - 1050
		Onsite sessions - 605
		As part of JCI refresher – 3812
		TOTAL 6492
	(iii) number of personnel trained at	General Induction – 1025
	the time of induction	Contract Induction – 1050
		TOTAL 2075
A DANGER POR PROPERTY OF THE P	(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	NIL
	during the year	
-	(i) Number of Accidents occurred	
ANADOMONOMAN	(ii) Number of the persons affected	
THE PERSON NAMED IN COLUMN NAM	(iii) Remedial Action taken (Please	
romalisty, a described in	attach details if any)	
	(iv) Any Fatality occurred, details.	
9.	Are you meeting the standards of air	Not applicable
***************************************	Pollution from the incinerator? How	
	many times in last year could not met the standards?	
	ine standards.	

	Details of Continuous online emission monitoring systems installed	Not applicable
	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	y – December)	
		****
	I CHUAKE	HKO.
		MANAGING * KELTIF
	ne and Signature of the Head of the Ir	

Date: CKIVEIACPlace Kiec Isi Chi

### Annexure II

## TOTAL QUANTITY OF BIO MEDICAL WASTE GENERATED /KG/ANNUM

MONTH - 19	Autociavable (Kg.) (Red Bags)	Autoclavable (Kg.) (BlueBags)	Incinerable (Kg.) (Yellow Bags)	B.D Boxes ( Sharp Containers)
JANUARY	13520	. 1783	5709	900
FEBRUARY	11174	880.77	4634	1381
MARCH	13311	1913	4906	639
APRIL	17288	2737	6520	471
MAY	13749	2408	5449	245
JUNE	12502	2981	6302	472
JULY	21398	4259	10485	756
AUGUST	17594	7664	3139	477
SEPTEMBER	19635	3600	7620	592
OCTOBER	19505	4486	7777	570
NOVEMBER	19824	3772	8038	617
DECEMBER	15709	3229	7605	608
TOTAL	195209	39712.77	78184	7728
Average / month	16267.42	3309.40	6515.33	483.00
Average / day	542.25	110.31	217.18	16.10

#### 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

ENDE 136

Place Place NECHT

Signature

Designation

# Indraprastha Medical Corporation Limited

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#### December 1, 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. P. Shivakumar	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 Patidhar	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	

