

To

28.01.2020

The Environmental Engineer,
Panjab Pollution Control Board,
Plot No 55, Phase 2
S.A.S. Nagar

Recd
B Singh
28/1/2020




Subject: Submission of Annual Bio-Medical Waste Report FY 2019(1st Jan 2019 to 31st Dec 2019

Dear Sir,

Please find enclosed the Annual Bio-Medical Waste Report for the year 2019 with below enclosures:

- 1 Annual Report Form iv
- 2 Accident Reporting Form 1
- 3 Specification for maintenance of BMW waste record month wise for the year 2019

With Best Regards,


Authorized Signatory

Fortis Healthcare Ltd. Mohali

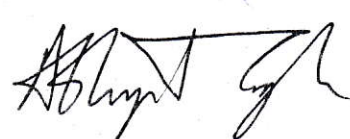




Form - IV
(See rule 13)
ANNUAL REPORT

[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 authorised person (occupier or operator of facility)	:	Mr. Abhijit Singh.
	(ii) Name of HCF or CBMWTF	:	FORTIS HEALTHCARE LTD.
	(iii) Address for Correspondence	:	40 FORTIS HOSPITAL, SEC-62, Ph-8, Mohali
	(iv) Address of Facility	:	FORTIS HOSPITAL SEC. 62, Ph-8, Mohali
	(v) Tel. No, Fax. No	:	0172-469222 - NIL
	(vi) E-mail ID	:	abhijit.singh@fortishealthcare.com.
	(vii) URL of Website	:	www.fortishealthcare.com.
	(viii) GPS coordinates of HCF or CBMWTF	:	NL - 30.413832, EL 76.434924
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: BMW/Renewal/SAS/2019/9276266valid up to 31/03/2024
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: Water + 31/03/2020 Air 31/03/2021
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds:..... 360
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	NA
	(iii) License number and its date of expiry	:	NA
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:	:	NA Kg per day

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	(iv) Quantity of biomedical waste treated or disposed by CBMWTF :	Nil Kg/day																																						
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis) :	Yellow Category 86653.33 PA / 7221.11 kg/month Red Category : 112909.78 kg PA / 9409.15 kg/month White: 4431.59 kg/A (369.30 kg/month) Blue Category : 24871.92 kg/A (2072.66/month) General Solid waste: Avg. 1723.98 kg/month (574.83 kg)																																						
5	Details of the Storage, treatment, transportation, processing and Disposal Facility (with S.G.W.)																																							
	(i) Details of the on-site storage facility :	Size : 450 - 550 Sfl. Capacity : 750 kgs/day (Approx.) Provision of on-site storage : (cold storage or any other provision)																																						
	(ii) Details of the treatment or 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 rowspan="10" style="text-align: center; vertical-align: middle;">/ NA /</td> </tr> <tr> <td>Plasma Pyrolysis</td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td></td> <td></td> </tr> <tr> <td>Microwave</td> <td></td> <td></td> </tr> <tr> <td>Hydroclave</td> <td></td> <td></td> </tr> <tr> <td>Shredder</td> <td></td> <td></td> </tr> <tr> <td>Needle tip cutter or destroyer</td> <td></td> <td></td> </tr> <tr> <td>Sharps encapsulation or concrete pit</td> <td></td> <td></td> </tr> <tr> <td>Deep burial pits:</td> <td></td> <td></td> </tr> <tr> <td>Chemical disinfection:</td> <td></td> <td></td> </tr> <tr> <td>Any other treatment equipment:</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			/ NA /	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:		
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	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	Red Category (like plastic, glass etc.) — NA —																																						
	(iv) No of vehicles used for collection and transportation of biomedical waste	— NA —																																						
	(v) Details of incineration ash and ETP sludge generated and disposed	<table border="1"> <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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—	—																																							

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	standards? How many times you have not met the standards in a year?		NIL
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator)

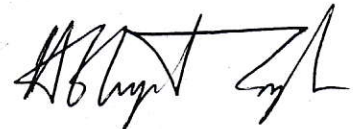
Certified that the above report is for the period from

..... 1st January 2019 To 31st December 2019

Name and Signature of the Head of the Institution

Date: 27th Jan 2020
Place: Fortis Mohali

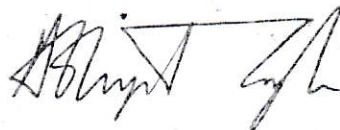
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Abhijit Singh
Zonal Director
Fortis Hospital
Sector-62, Phase-VIII, Mohali

	during the treatment of wastes in Kg per annum	Incineration Ash ETP Sludge 225 kg.
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	M/s Rainbow Environment Pvt Ltd Vill - Balyali Kalau, Tehsil - Kharan Dist - Multan
	(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	Yes (Minutes of meetings attached.)
7	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management.	34 Nos
	(ii) number of personnel trained	519
	(iii) number of personnel trained at the time of induction	232
	(iv) number of personnel not undergone any training so far	NIL
	(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?	Yes (NIL)
	Details of Continuous online emission monitoring systems installed	NIL
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Yes as per norms and standards
11	Is the disinfection method or sterilization meeting the log 4	Yes, disinfection method as per norms are followed.

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FORM - I
[See rule 4(o), 5(i) and 15(2)]

ACCIDENT REPORTING

1. Date and time of accident : Needle Stick Injury (Asper structure-III)
2. Type of Accident : Needle stick injury
3. Sequence of events leading to accident : During Segregation/Procedural.
4. Has the Authority of been informed immediately: NIL
5. The type of waste involved in accident : NIL
6. Assessment of the effects of the accidents on human health and the environment : For safety Vaccination done.
7. Emergency measures taken : Training provided with test to all health givers
8. Steps taken to alleviate the effects of accidents : Procedural Trainings/Training with PPE on segregation
9. Steps taken to prevent the recurrence of such an accident : Continuous Trainings
10. Does your facility has Emergency Control policy? If yes, give details : No

Date : 27/01/2020

Place : Fortis Mohali

Signature : 

Designation :
Abhijit Singh
Zonal Director
Fortis Hospital
Sector-62, Phase-VIII, Mohali

Wards

BIOMEDICAL WASTE RECORD 2019

S. No	Month	Red Category		Yellow Category		Cytotoxic/ Yellow Category		Blue Category		White Category	
		Total Bags	Total Wt.	Total Bags	Total Wt.	Total Bags	Total Wt.	Total Bags	Total Wt.	Total Bags	Total Wt.
1	Dec-19	1827	9750.25	1461	6522.855	27	187.735	202	1855.925	166	276.855
2	Nov-19	1707	9198.955	1450	6900.705	33	209.34	210	1815.27	177	308.8
3	Oct-19	1740	8680.635	1469	6680.5	28	201.76	221	1942.91	157	290.805
4	Sep-19	1855	9422.555	1610	7517.952	26	199.97	261	2290.355	217	331.685
5	Aug-19	1923	9542.898	1642	7428.705	31	194.242	256	2239.289	207	284.46
6	Jul-19	1854	9686.015	1647	7365.661	29	212.403	261	2261.488	207	334.067
7	Jun-19	1858	8842.735	1580	6068.96	29	153.255	223	1935.365	180	267.205
8	May-19	2109	10129.595	1725	7521.92	27	190.314	240	2076.835	183	470.965
9	Apr-19	1873	9213.135	1586	6468.51	29	187.285	219	1990.22	196	510.19
10	Mar-19	1987	9466.075	1630	7106.905	32	212.81	261	2339.6	178	464.367
11	Feb-19	1728	9147.15	1523	7357.545	25	176.3	216	2067.125	170	437.26
12	Jan-19	1862	9829.78	1530	7395.03	28	192.67	219	2057.535	166	454.93
Total		22323	112910	18853	84335	344	2318	2789	24872	2204	4432
Average separate waste per Month		1860	9409	1571	7028	29	193	232	2073	184	369
Average separate waste per day		61	309	52	231	1	6	8	68	6	12




NEEDLE STICK INJURY 2019

S.No	Month	No. of Injury	Area Distribution of Needle Stick Injury (2019)																				Categories of Needle Stick Injury						Incidence Needle Stick Injury												
			Ward A1	Ward A2	Ward A3	Ward A4	Ward A6	TRICU	CCU	SPICU	MICU	NISCU	OICU	GICU	MSOT	ORTHO OT	COT	CATH LAB	PATH LAB	RADIOLOGY	Day Care	Fortis Inn	House Keeping	Laundry	Dialysis	Triage	Blood Bank	Sample Collection	Doctor	Nurse	GDA	Student	Technician	Trainee	HK	Wrong segregation	Act of disposal	Re-Capping	Splash	After use before disposal	Wrong practice
1	January	8		1				1		2	1	1	1								1								5						2	1	1	3	1	1	3
2	February	6				2		1	1	1		1																1	5							1			2	2	3
3	March	5			1																		1		1			1	2		1				1	1	1	1	1	1	2
4	April	4			1					1														1	1				3					1	1	2				1	1
5	May	2		1																					1			1	3							1	1				
6	June	6											3				1	1							1			1	3	1							1	1	2	2	
7	July	13			1			1		2	1	4	1									1						7	5						1	1	2		3	7	
8	August	8								4	1	2											1					4	2							2	1	1	2	1	3
9	September	8								2			3					1										6						1	1	1	1	2	1	3	
10	October	6						1		1	1	1													1		1	4						1			2	2	2	2	
11	November	8										1	2					1						1			1	3	2		2				1	1	1	3	1	3	
12	December	6								1		1	1												1			6								2	2	2	1	1	1
	Total	80	6	1	1	4	2	2	6	1	13	4	1	10	7	4	1	1	1	2	1	1	5	1	1	1	1	7	48	9	3	2	4	7	4	2	16	2	18	9	29

Handwritten signature and name:
 Zayeda
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MINUTES OF MEETING

FHM-BMW COMMITTEE (19th Dec 2018)

NAME OF UNIT – Fortis Hospital Mohali

NAME OF COMMITTEE: Bio-Medical Waste Committee

1. Date & Time: 19.12.2018 (12pm - 1pm)
2. Total no. of Members present in the meeting: 12
3. Agenda circulated prior to meeting (Yes/No): Yes

List of Attendees:

1. Dr Anita Sharma-Infection Control Officer, Lab Head –BMW Chairperson
2. Jaspreet Kaur –Admin Head
3. Rajbir Kaur - DCNO
4. Joice Thomas-Assistant Chief of Nursing
5. Dr Apra Kalra-Head Blood Bank
6. Rajesh Sharma- Housekeeping Head
7. Dr Tanvi Sood – Quality Assurance
8. Jyoti Sharma-ICN
9. Kiranpreet Kaur-ICN
10. Poonam- ICN
11. Arvind Thakur- Engineering
12. Harvinder Kaur-Nursing Education

AGENDA

1. Update on the progress made from the last minutes of meeting.
2. BMW mixing especially in green bins - ways to stop it
3. Mutilation of plastic waste e.g. IV bottles/flexi bags, tubing and gloves as observed by

PPCB officials on 27.6.18 -Progress

New Additions /Concerns

1. Bahyal Visit
2. Shortage/New Hub cutters – Feedback & Way forward
3. Sharps Management - Improper segregation of guide wires/trochars

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		non-chlorinated bags can be procured.			
4	All high risk areas to be audited/month and complete maintenance of BMW audit checklists wrt Signatures of MS, IC doctor, ICN with dates/areas	IC Team have revised BMW Audit checklist with a tracker sheet at the front. All high risk areas covered each month and audit reports are being signed by ICO & MS each month.	IC Team	Immediate	Closed
5	BMW reporting on Website	NT to ensure all receipts and register records are present for verification	NT		Ongoing
6	Status of ETP	Budget has been approved. Pipework has been installed.	NT	31 st Jan 19	WIP
7	BMW mixing in green bins	Daily segregation in the DU is going on before transportation. Training of staff. Frequent rounding to ensure compliance	Nursing Teams/ICNs/RS		Ongoing
8	Mutilation of gloves/IV tubings /bottles etc.	Education, Re-enforcement and continuous monitoring. Scissors to be procured	Nursing Team/ICNs	31st Jan 2019	Ongoing
New Additions/ Concerns					
1	Balyali Visit	Representatives from IC Team, Engg & HK visited Balyali WTF on 15.12.2018. Observations from the visit were shared with the group. Our waste is not being weighed when entering the facility which is a	NT/ICNs	31 st Jan 2019	Engg will share information on scheduled holidays with HK & IC Team

M. J. J.

A. J. J.

		patient's bedside in MICU. Only 1 big green bin could be placed next to the HW sink.			
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Date and Time of Next Meeting: To be arranged in the month of June 2019

Signature of Chairman and Secretary

Dr Anita Sharma

Anita Sharma
20-12-2018

(Chairman)

Kiranpreet Kaur
Kiranpreet Kaur

21/12/2018

(Secretary)

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MINUTES OF MEETING

FHM-BMW COMMITTEE (11th June 2019)

NAME OF UNIT – Fortis Hospital Mohali

Venue- Meeting Room 3rd Floor

NAME OF COMMITTEE: Bio-Medical Waste Committee

1. Date & Time: 11.6.2019 (3pm – 4pm)
2. Total no. of Members present in the meeting: 7
3. Agenda circulated prior to meeting (Yes/No): Yes

List of Attendees:

1. Dr Anita Sharma-Infection Control Officer, Lab Head –BMW Chairperson
2. Rajbir Kaur - DCNO
3. Rajesh Sharma- Housekeeping Head
4. Neeraj Tandon – Engineering Head
5. Jyoti Sharma-ICN
6. Kiranpreet Kaur-ICN
7. Sonam- ICN

AGENDA

1. Update on the progress made from the last minutes of meeting.

2. ETP -Progress

New Additions /Concerns

1. Balyali Visit
2. Waste handling –Heavy duty gloves
3. Treatment of hazardous chemicals

March

[Signature]

		smaller ones.			
3	Status of ETP	ETP is fully functional. All hazardous chemical is being treated via ETP	NT	March 2019	Completed
4	Mutilation of gloves/IV tubings /bottles etc.	Education, Re-enforcement and continuous monitoring Scissors to be procured	Nursing Team/ICNs	Continuous	Ongoing. Scissors are in place.
5	Guidewires & trochars -Disposal	Guidewires and trochars will be discarded in cardboard box as they are metallic in nature. They are a mis-fit for sharp boxes. The House agreed on the same.	IC /Nursing Teams	With immediate effect	Communicated to nursing teams. Closed
6.	TT & HBV Status	Vaccination Registers in the areas to be updated with new joiners and doctors. Chicken pox status to be added.	IC Team/ Nursing Incharges	Ongoing	Chicken Pox vaccination/previous history added to nursing vaccination registers.
New Additions/ Concerns					
1	Bilyali Visit	Representatives from IC Team, Engg earlier this morning. Observations from the visit were shared with the group. Glass waste was being received in puncture proof containers contrary to PPCB	NT/ICNs	June 2019	Next Visit due in Dec 2019

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FHL Training Attendance Sheet

Program Name Biomedical waste Committee Meeting
Program Date 11/6/2019
Facilitator IC Team / Biow Committee.

Time From 3:00 pm TO 4:00 pm

Unit Venue Meeting Room - 3rd floor.

S.No	Employee ID	Global ID	Participant Name	Dept/Area	Signature
1	10082	114245	Rajbir Kumar Anand	DCNB	[Signature]
2	10858	114250	Rajesh Sharma	H.K	[Signature]
3	13583	115412	Sonam	IC	[Signature]
4	16416	184552	J Shama	IC	[Signature]
5	114199	114195	Navej	enys	[Signature]
6	16757	188051	Anita Shama	Ls Med.	[Signature]
7	18570	19846	Kunpreet Kaur	IC	[Signature]
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