

Date: 17/01/2025

To
The Joint Chief Environmental Engineer,
• A.P.Pollution Control Board,
Regional Office,
Visakhapatnam, A.P

Respected Sir,

Sub: Submission of FORM IV of CARE Hospitals, Health City, Vizag.

Greetings for CARE Hospitals,

We are hereby submitting Form IV annual report for the year 2024 for CARE Hospitals, Health City, Visakhapatnam.

This is for your information.

Thank you.

Authorized Signatory

For Quality Care India LTD

MAYJIKH CHAUDHURI
Host fall Chief Operating Officer
THE Mospitals
Cuality Care India Ltd.
Visakhapatnam

27/11/25

ENCOUNTY INTO ISSUED IN THE PARTY OF THE PAR

Trologue area as a

Ramnagar: D.No. 10-50-11/5. A.S.Raja Complex, Waltair Main Raod, Visakhapatnam - 530 002. Tel:Ph:0891-6165656,

E-mail: carevisakha@carehospitals.com

Health City: Plot No. 3. Health City, Arilova, Visakhapatnani, Andhra Pradesh- 530040, Tel: 0891-2555799, 0891-6799601 24x7 EMERGENCY CONTACT NO. 0891-2555733

Registered Office: # 6-3-248/2, Road No.1 Banjara Hills, Hyderabad - 500 034 Telangana
Corporate Office: # 8-2-120/86/10, 1st Floor, Kohinoor Building, Road No.2, Banjara Hills, Hyderabad - 500 034

E: info@carehospitals.com
W: www.carehospitals.com

#### 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 Januaryto December of the preceding year, by the occupier of health care facility (HCF) or common bio-medical waste treatment facility (CBWTF)]

SI. No.	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)		Mr. Mayukh Chaudhuri
	(ii) Name of HCF or CBMWTF	:	CARE Hospitals (Quality Care India Ltd)
	(iii) Address for Correspondence	•	Plot No.3 Health City, Arilova, Visakhapatnam, AP – 530040
	(iv) Address of Facility		Plot No.3 Health City, Arilova, Visakhapatnam, AP – 530040
	(v)Tel. No, Fax. No	:	0891-2555799
	(vi) E-mail ID	:	Sudhakar.sana@carehospitals.com
	(vii) URL of Website		www.carehospitals.com
	(viii) GPS coordinates of HCF or CBMWTF		17.761761023705674, 83.31530022188466
	(ix) Ownership of HCF or CBMWTF	:	Private
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorization No: APPCB- 11025/3/2023-TEC-BMW-APPCB 11/07/2023
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 30-05-2025
2.	Type of Health Care Facility	:	Multi Speciality Allopathic Hospitals
	(i) Bedded Hospital	:	No. of Beds: 247
	(ii) Non-bedded hospital	:	NA
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)		
	(iii) License number and its date of expiry		1875 Date of Expiry: 27-04-2028
3.	Details of CBMWTF	:	
	(i) Number healthcare facilities covered by CBMWTF	:	NA
	(ii) No of beds covered by CBMWTF	:	NA

	(iii) Installed treatment and disposal CBMWTF:	city of	:		_Kg per	day		
	(iv) Quantity of biomedical waste treate by CBMWTF	lisposed	:	Kg/day				
4.	Quantity of waste generated or dispos	ed in	Kg per	:	Yellow (	Category	: 2	43.68
	annum (on monthly average basis)				Red Cate	egory :	266.95	
					White: 1	8.03		T
					Blue Cat	egory:	39.41	
					General	Solid wa	aste: 37	2.3
5	Details of the Storage, treatment, transp	ortatic	n, proces	ssing a	nd Dispos	al Facili	ty	
	(i) Details of the on-site storage	:	Size	:18	x 8 ft			- 1
	facility		Capaci	ty:300	)			
			hist	5		torage	· (col	d storage or
			Provision of on-site storage : (cold storage any other provision)					a storage or
	disposal facilities				eatment	No	Cap	Quantity
	disposar facilities		55550	pment		of	acit	treatedo
			equi	pinene		unit	у	Г
						S	Kg/	disposed
							day	in kg
			l I					per
								annum
	1		Incir	nerato	'S			
			Plasi	ma Py	rolysis			
				oclave				
			Mici	rowav	е			
			Hyd	roclav	e			
			Shre	edder				
			Need	dle tip	cutter or			
			desti	royer			Ē	
			Shar	ps				
			enca	psulat	ion or		_	
			conc	erete p	it			
				•	al pits:			
				mical				
			1. H	nfectio				
			SC 000000		treatment			
			7,27	pment				
	(iii) Quantity of recyclable wastes	:	Red Ca	ategor	y (like plas	stic, glas	s etc.) -	-NA
	sold to authorized recyclers after							
	treatment in kg per annum.							
	(iv) No of vehicles used for collection	:	01					
	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		Incineration Ash ETP Sludge NA	Quantity generated	Where disposed
	(vi) Name of the Common Bio- Medical Waste Treatment Facility Operator through which wastes are disposed of	:	Ltd	NUSTRIES (.	ANDHRA) Pvt.
	(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	<u>S</u>	**
7	Details trainings conducted on BMW  (i) Number of trainings conducted on BMW Management.		30 trainings		
	(ii) number of personnel trained		120		
	(iii) number of personnel trained at the time of induction		60		
	(iv) number of personnel not undergone any training so far		NIL		3
	(v) whether standard manual for training is available?		Yes		
	(vi) any other information)		_		
8	Details of the accident occurred during the year	1		Til.	
	(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?		Liquid waste treatment are in place and met the standards all the time
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		Disinfection method is meeting log 4 standards all the time
12	Any other relevant information	i	(Air Pollution Control Devices attached with the Incinerator) NA

Certif	fied that the above report is for the period from
	···

Mr. Mayukh Chaudhuri 🔊

Name and Signature of the Head of the Institutional Chief Hospital Ltd.

CARE Hospital Ltd.

Cuality Care India Ltd.

Visakhapatnam Date: 16/01/2025

Place: VISAKHAPATNAM

# FORM – I [ (See rule 4(o), 5(i) and

# 15 (2)]ACCIDENT

## REPORTING

Date and time of accident:

2.	Type of Accident:			
3.	Sequence of events leading to accident:			
4.	Has the Authority been informed immediately:		NIL -	
5.	The type of waste involved in accident:			
6.	Assessment of the effects of the accidents on human health and the environment:			
7.	Emergency measures taken :			
8.	Steps taken to alleviate the effects of accidents:			
9.	Steps taken to prevent the recurrence of such an accident	:		
10.	Does you facility has an Emergency Control policy? If ye	es give		
details:	Is: Date:  Designation	Van Lai Chie Quality Quality	Care India La cakhapatnam	RI Hicer id.



## Visakhapatnam Date: 08.01.2024

From: HICCommitteeTo: All Concerned

This is to inform you all that HIC Committee Meeting is to be held 8th<sup>h</sup> Jan ,2024 at 1:00pm -2:00 pm in the Conference hall ,1st floor, OPD.

Participants: All HICC Members , Clinicians, Quality Department, ICU, OT-In Charge, & Concerned HCWs.

#### Agenda:

- 1. Review of previous minutes
- 2. Presentation of HIC details
  - a) Presentation on HIC indicators
  - b) Presentation on HIC audits
  - c) Immunization to Health care workers
  - d) Engernering Controls
  - e) Antibiotic compliance
  - f) BMW Audits
- 3. Any other issue raised by the committee members

P.C. Rani

Dr. T L Rani Chairperson,HIC



Visakhapatnam Date:08.01.2024

#### From:HICCommitteeTo:All Concerned

#### ATR April of ,2024

S. No	Discussion			Actions to be Taken	Responsibility	Target Date	
1	Minutes of the previous month were discussed			Closed all previous meeting points.	ICN		
	Monitor han	d hygiene areas Sep-24		iance in			
	audit	Sep-24	NOV-24	Dec-24			Continous
2	Doctor	92	93	93	Hand hygiene to be	ICN	process
	Nurse	95	98	97	performed		process
	House	89	89	86			
	keeping						
3	Phlebitis has to reduce in all areas			Training needs to give on importance of following VIP score .	Incharge ICN	Continous process	
	Presen	itation on H	IIC indicate	ors			
	Sep-24 Nov-24 Dec-24		Aseptic techniques has to follow and all bundle		0		
4	VAP	1	0	0	need to monitor.	ICN	Continous
-	CAUTI	1	1	0	Daily audits for the		process
	CLABSI	0	1	0	same		
	SSI	1	0	0			
5	Discuss to the hospital acquired infection			Instructed to follow aseptic measures and safe infusion practices Auditing the VAP bundle check list.	ICN	Continous training/bed side training	
	Discuss on Surg	gical site Inf	ection		When Post Operative	Icn & Charge	
		_			Patients was Discharge	Nurses	
					from the ward, staff		Continous
6					should given education of post operative care at home town.		process

### Minutes of HIC Committee on 10<sup>th</sup> May- 2024

S.No		Discus	sion		ActionTaken	Responsibi lity	Target Date	Status
1	Discuss to reduce cather associated infections		To maintain CAUTI checklist on daily bases Instructed to insert FC by trained person Shiftwise FC care to be done Educated HK staff for emptying the urine bag in aspetic process	ICN	Continou s process	Open		
	Monitor hand	hygiene no	n-complia	nce in areas	pi dedas			
	Hand wash	Sep-24	Nov-24	Dec-24		ICN		
	audit	ļ			Hand hygiene to be	ICN		
_	Doctor	93	93	94	performed and	Charre	Continou	•
2	Nurse	98	97	96	audits frequency	Charge	s process	Open
	House	89	86	90	increased.	Nurses	-	
	keeping							
	Presentation on HIC indicators along with VAC &IVAC				Aseptic techniques has to follow and all bundle need to monitor.		Continou s process	
3	VAP	Sep-24	Nov-24	Dec-24	All cases come	ICN		Open
	CAUTI	0 1	0	0	under VAC & IVAC need to mentions in			•
	CLABSI	1	0	0	indicators			
	SSI	0	0	1	Daily audits for the			
		•			same			
4	Discuss to th	ie hospital	acquired i	infection	Instructed to follow aseptic measures and safe infusion practices	ICD Mr. Hari	Continou s process	Open
					. Auditing the VAP bundle check list			
5	Bio m	edical wast	e managen	nent	Daily observations To identify the segration protocols are following or not Every shift the bins to be cleared 3/4 <sup>th</sup> dust should immdeatiely to be removed Proper hygeneic protocols while	ICN Charge Nurse	Continou s	Open

		waste Trainings are conducted to get awareness on bio medical waste management saggration to ( hk& nursing staff)			
6	Bio Medical Waste Practices	To audit actively on BMW segregation, transportation by ICN in the Medblaze audit tool	ICN	30.01.20 25	Open

P.C. Rani

Dr. T L Rani Chairperson,HICC



#### Visakhapatnam

# HIC Committee Meeting held on $20^{th}$ June- 2024 from 3.00pm -5:30pm in the Conference hall Ramnagar

**Desired Participants :** All HICC members ,Clinicians,Quality department, ICU In-charges &Concerned HCWs.

#### Attended by - Dr.Laxmi Rani

Dr. Venu Gopal

Dr.Sodhan Kumar

Dr.Sai Shaker

Dr.K.S.Praveen Kumar

Dr.Aasish

**HIC Team** 

ICO & ICN

P.C. Rani

Dr. T.L.Rani Chairperson,HICC



### Minutes of HIC Committee meeting happened on 20<sup>th</sup> June- 2024

Serial No	Discussion	Recommendations	Responsibility	Target Date
1.	After 48 hrs Intubation or any invasive lines, send for the C/S and Repeate urine C/Safter 10-14 days.(50% cost )	Foe early detection of HAIs it is recommende to send follow up cultures.	MS \$ Operations Head	Immediate effect
2.	Surgical Antibiotics choice administrate for based on surgery's -	List to be prepared for the details of the antibiotic used for surgeries according to CDC guidelines.	Clinical Pharmacist	Immediate effect
3.	Antibiotic audits	New Reserved antimicrobial proforma – has to be implemented and Internal circular has to be sent by MS.	MS & Clinical Pharmacist.	Immediate effect
4.	Surgical Prophylaxis Consumption	Needs to be evaluated as per our Institution Policy.	ICT	Immediate effect
5.	Needle Stick Injury	Regarding the recent NSI incidents here we are emphasizing on the dictum "Who ever generates BMW is responsible for the segregation".	All Department Incharges.	Immediate effect

6.	BMW Transportation	PPE should be used by HK staff and monitored by ICN & HK incharge and present in HICC	ICN/HK Incharge	Immediate effect
7	Needle Stick Injury	Regarding the recent NSI incidents here we are emphasizing on the dictum "Who ever generates BMW is responsible for the segregation".	All Department Incharges.	Immediate effect

P.C. Rani

Dr. T.L.Rani Chairperson,HICC