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Date: 18.06.2026

To
The Environmental Engineer
Pollution Control Board
Hyderabad, Telangana

Sub: Form IV & Form I submission for the year 2025 of Care Hospitals, Hitech City – IP Block

Respected Sir,

Forwarding herewith the annual submission of the FORM IV & Form I from January 2025 to December 2025 for Care Hospitals, Hitech City – IP Block (Plot No. 48,49,50,51,52, Jayabheri Pine Valley, Beside Cyberabad Police Commissionerate Office, Ranga Reddy)

Authorized Signatory


Dr. Pramod Gupta Gunda
Hospital Chief Operating Officer
Care Hospitals, Hitech City
Hyderabad, Telangana



QUALITY CARE INDIA LIMITED

CIN: U85110TG1992PLC014728

CARE Hospitals, Gachibowli: 2-50/Care/G, Old Mumbai Highway Road, Near Cyberabad Police Commissionerate, Hyderabad - 500 032 Telangana. Tel: 040 61 656565 | Fax: 040 2300 0096

Registered Office: #6-3-248/2, Road No 1, Banjara Hills, Hyderabad - 500 034 Telangana
Corporate Office: #8-2-120/86/10, 5th & 6th Floor, Kohinoor Building, Road No. 2, Banjara Hills, Hyderabad - 500 034 Telangana



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 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)	:	Dr. Pramod Gupta Gunda
	(ii) Name of HCF or CBMWTF	:	CARE Hospitals – Hitech City
	(iii) Address for Correspondence	:	Plot No. 48,49,50,51,52, Jayabheri Pine Valley , Beside Cyberabad Police Commissionerate Office, Ranga Reddy
	(iv) Address of Facility	:	Plot No. 48,49,50,51,52, Jayabheri Pine Valley , Beside Cyberabad Police Commissionerate Office, Ranga Reddy
	(v) Tel. No, Fax. No	:	040 – 33623774
	(vi) E-mail ID	:	pramod.gupta@carehospitals.com
	(vii) URL of Website	:	http://www.carehospitals.com
	(viii) GPS coordinates of HCF or CBMWTF	:	17°25'51.0"N 78°22'19.4"E
	(ix) Ownership of HCF or CBMWTF	:	Private
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: TSPCB/BMWA/RR-I-3510625/HO/2022/1183 valid up to 31/03/2027
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31/03/2027
2.	Type of Health Care Facility	:	Private
	(i) Bedded Hospital	:	No. of Beds: ...220 ..
	(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	:	1423/DRA/RR/2025 Valid up to 28/10/2030
3.	Details of CBMWTF	:	NA

	(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 disposed by CBMWTF	:	NA																																																
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category :2482.37 Kgs Red Category : 2724.23Kgs White: 55.13Kgs Blue Category : 459.30Kgs General Solid waste: 6989Kgs																																																
5	Details of the Storage, treatment, transportation, processing and Disposal Facility																																																		
	(i) Details of the on-site storage facility	:	Size : 11.7 sq.m Capacity : 150 bags Provision of on-site storage : (cold storage or any other provision) Dedicated Central Biowaste Area																																																
	disposal facilities	NA	<table> <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> <tr><td>Incinerators</td><td></td><td></td><td></td></tr> <tr><td>Plasma Pyrolysis</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 destroyer</td><td>-</td><td></td><td></td></tr> <tr><td>Sharps encapsulation or concrete pit</td><td></td><td>-</td><td></td></tr> <tr><td>Deep burial pits:</td><td></td><td></td><td></td></tr> <tr><td>Chemical disinfection:</td><td></td><td>-</td><td></td></tr> <tr><td>Any other treatment equipment:</td><td></td><td></td><td></td></tr> </table>	Type of treatment equipment	No of units	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:			
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	(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	NA
	(iv) No of vehicles used for collection and transportation of biomedical waste	:	TWO TS06UA8325 , TS09UD1735
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		NA
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	GJ Multiclave pvt. Ltd.
	(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, The compliance related to BMW is discussed in Hospital Infection Control Committee
7	Details trainings conducted on BMW		Appropriate biowaste handling & Needle stick injury
	(i) Number of trainings conducted on BMW Management.		24
	(ii) number of personnel trained		320 – Nursing, Housekeeping, Technician
	(iii) number of personnel trained at the time of induction		317
	(iv) number of personnel not undergone any training so far		Nil
	(v) whether standard manual for training is available?		Yes
	(vi) any other information)		None
8	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		1
	(ii) Number of the persons affected		1
	(iii) Remedial Action taken (Please attach details if any)		Staff has been provided with treatment as per hospital policy. Root cause analysis done and presented to HIC Committee. Mandatory induction for new staff and continuous training for all the staff
	(iv) Any Fatality occurred, details.		None

9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?		N/A
	Details of Continuous online emission monitoring systems installed		N/A
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		Liquid waste generated , We have installed STP & ETP , and met the standards all 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 the log 4 standards all the times
12	Any other relevant information	:	N/A

Certified that the above report is for the period from Jan 2025 to Dec 2025

Name and Signature of the Head of the Institution

Date: 18/06/2026
Place Case Hi-Tech



CONFIDENTIAL

MINUTES OF MEETING (HICC COMMITTEE - MAY 2025)

Minutes of the Hospital Infection Control Committee Monthly Meeting held on 12.06.2025 at 6th Floor Training hall from 2.30-3.30 PM.

Members Present : Dr. Pavan (Chairperson), Felicitia(NS), Dr. Rukana(ICO & Microbiologist), Ms. kavitha (OPS),Dr. Prathiba(DMS),Dr. Jahan (Quality),Dr. Salaja(Anesthesia),Dr. salaja (Pulmonology),Dr. Usman ali(Clinical Pharmacist),

Mr. Gaurav(HL), Ms. Bhagya Isham(CN),Mr. Srinivas(CSSD), Ms. Shustima(Quality),Nursing Incharges, Ms. Amrutha(Educator), Ms. Lilly (ICN), Mr. Manoj (OT)

Members absent : Representation from F&E, Dialysis

Quorum Required: Yes

Minutes of Current meeting (20.05.2025)

S No	Agenda	Point discussed	Responsibility	Action taken (status)	Start date	Expected closure date	Status
1	Administration of prophylactic antibiotic with in specified time frame	Administration of prophylactic antibiotic with in specified time frame is about 88 % for the month of Dec 2024, Target is 100%.	Dr. Navin & All the surgeons	may month is 83%	18.01.2024	31.01.2025	Closed
2	Biomedical waste compliance	For the month of Feb is 91 %, OT & dialysis is very less compliance committee suggested that the person responsible for generating shall only discard in appropriate bins & retraining to be a ongoing programme	Dr. Prathiba & Ms. Bhagya	Retraining & awareness is being done	With immediate effect	15.04.2025	Closed
3	Requirement of Trolley	Committee suggested to have each department mop trolley & soiled linen trolley	Mr. Gaurav & Ms. kavitha	Mop trolley provided & linen trolley pending	20.03.2025	30.04.2025	Closed
4	HK Staff-CSSD	One more HK staff required in CSSD	Mr. Gaurav& Ms. kavitha		16.04.2025		Closed
5	OT Cleaning	Ensure proper OT cleaning as per protocol (day & night)	Mr. Manoj & Mr. Gaurav	Is being followed	With immediate effect		Closed
6	CLABSI	1 CLABSI was identified in CTVS ,committee suggested to follow strict aseptic precautions while handling of tubes & catheters in case of emergency.	Ms. Bhavani & Ms. Lilly	No infection observed in the month of may 2025	With immediate effect		Closed
7	NSI	1/2 staff subjected to NSI from which one staff was using incorrect procedure & ortho procedure committee suggested to check titres of concern staff 2/needles should not be used, disposable needles are to be used, price details	Ms. Bhagya & Ms. kavitha	Strict adherence to the reuse policy	20.05.2025	25.05.2025	Closed
8	RO water culture	RO water cultures from dialysis is pending for the month of may 2025	Mr. Ravi & Dr. Prathiba		20.05.2025	25.05.2025	Closed
9	Instruments & Drape cloth washing	As discussed in OT committee about cloth drapes usgae for open cases, designated place, staff to be identified for pre cleaning & washing before sending to CSSD	Ms. kavitha	Disposables handedover to Surgical onco team	20.05.2025	25.05.2025	Closed
10	BMW Compliance	Biomedical waste compliance for the month of april is 93 %	Ms. Bhagya		With immediate effect	25.05.2025	NA

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

15 (2)] ACCIDENT

REPORTING

CARE HITECH IP

BLOCK

1. Date and time of accident : 13/12/2025
2. Type of Accident : NSI
3. Sequence of events leading to accident : NA
4. Has the Authority been informed immediately : YES
5. The type of waste involved in accident : NEEDLE SHARP
6. Assessment of the effects of the accidents on human health and the environment: HUMAN HEALTH
7. Emergency measures taken : YES
8. Steps taken to alleviate the effects of accidents : PROVIDED IMMEDIATE FIRST AID TO THE EFFECTED NURES. ITIATE PEP AS PER PROTOCOL
9. Steps taken to prevent the recurrence of such an accident : RETRAINING ENSURE CORRECT PLACEMENT OF SHARP CONTAINER
10. Does you facility has an Emergency Control policy? If yes give details: YES ,FIRE EMERGENCY PREPARDENESS, SPILL MANAGEMENT DISASTER MANAGEMENT

Date : 18/06/2026

Signature

Place: Care - Hi Tech

Designation HCOO