

31/May/2023

To
The Environmental Engineer,
Regional Office,
Telangana State Pollution Control Board (TSPCB),
4th Floor, Hyderabad District Collector's Office Complex
Nampally, Hyderabad- Telangana - 500 001.

Dear Sir,

Reg: - Submission of Annual Report for Biomedical waste generation of M/S
Care hospital Malakpet Telangana 500024

We are enclosing herewith the Annual Report for Biomedical waste generation,
for the year of 2022

We trust the information furnished is in line with the requirement

Kindly Acknowledge the Same

For Quality Care India limited
(CARE Hospitals, Malakpet)

Authorized Signatory

KRISHNA MURTHY G.
H.C.O.O.
Hospital Administration
Care Hospitals, Malakpet,
HYDERABAD - 500 024, T.S.



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)	:	Mr. Krishna Murthy G
	(ii) Name of HCF or CBMWTF	:	CARE HOSPITALS – Malakpet (A Unit of Quality Care India Limited)
	(iii) Address for Correspondence	:	16-6- 04 to109, Old Kamal Theatre Complex, Chaderghat Road, Malakpet, Hyderabad - 24
	(i) Address of Facility		Sy. No. 179 & 181, Edulapally (V), Nandigam Shad Nagar .Ranga Reddy
	(ii) Tel. No. Fax. No.	:	040 6810 6589
	(V) E-mail ID	:	krishna.murthy@carehospitals.com
	(i) URL of Website	:	https://www.carehospitals.com/hospital- detail/care-hospitals-malakpet-hyderabad
	(ii) GPS coordinates of HCF or CBMWTF		CBMWTF
	(iii) Ownership of HCF of CBMWTF		Private
	(iv) Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules.	:	Authorization No.: TSPCB/BMWA/HYD- 3940323/HO/2022-1181 Valid up to: 28/02/2030
	(v) Status of Consents under Water Act and Air Act.	:	Valid up to: 28.02.2030
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds: 180
	(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.	:	07F-APMCE-1912, Valid Upto 25-03-2027
3.	Details if CBMWTF	:	
	(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
	(iv) Quantity of biomedical waste treated or disposal by CBMWTF	:	NA
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow category : 4580 kg /annum Red Category: 2775 kg /annum White: 255 kg/annum Blue Category: 450 kg/annum General Solid waste: kg /annum
5.	Details of the Storage , treatment, transportation, processing and Disposal Facility		
	(i) Details of the on-site storage facility	:	Size : -- Capacity: 0.3 cu. meter Provision of on-site storage : The Biomedical waste is stored in color coded bins in air conditioned rooms for not more than 48 hours

(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 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> </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 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.	:	01																																																
(v) Details of incineration ash and ETP sludge generated and disposal during the treatment of wastes in Kg per annum)	:	<table border="1"> <thead> <tr> <th>Quantity Generated</th> <th>Where disposal</th> </tr> </thead> <tbody> <tr> <td>Incineration</td> <td></td> </tr> <tr> <td>AshNA</td> <td></td> </tr> <tr> <td>ETP Sludge</td> <td></td> </tr> </tbody> </table>	Quantity Generated	Where disposal	Incineration		AshNA		ETP Sludge																																									
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(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	:	G J Multiclave (India) Pvt. Ltd. Sy. No. 179 & 181, Edulapally (V), Nandigam Shad Nagar .Ranga Reddy .Telangana																																																
(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																																																

7	Details trainings conducted on BMW		
	(i) Number of trainings conducted on BMW Management.		2
	(ii) number of personnel trained		28
	(iii) number of personnel trained at the time of induction		30
	(iv) number of personnel not undergone any training so far		0
	(v) whether standard manual for training is available?		Yes
	(vi) any other information)		Nil
8	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		Nil
	(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?		INCINERATOR NOT AVAILIABLE WITH OUR ORGANIZATION. OUT SOURCED.
	Details of Continuous online emission monitoring systems installed		OUT SOURCED.
10	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?		NA
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		NA
12.	Any other relevant information		Nil

Certified that the above report is for the period from APRIL 2022 to DECEMBER 2022

Date:

01/jun/2023

Place:

Hyderabad

Name and Signature of the Head of the Institution

KRISHNA MURTHY G.
H. No. 16-6-104 TO 109,
Hospital Administration
Care Hospitals, Malakpet,
HYDERABAD - 500 024, T.S.

QUALITY CARE INDIA LIMITED

CIN: U85110TG1992PLC014728

evercare group

CARE Hospitals, Malakpet: H. No. 16-6-104 TO 109, Kamal Theatre Complex, Chaderghat, Hyderabad - 500 024 Telangana Tel: 040 6165 6565

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. Telangana

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




Minutes of the HICC Meet held on Tuesday, 7th March 2023

From: HIC Committee

To: All Concerned

Members Present: Dr Navin Chand, Dr.Mustafa Afzal , Dr.P.K Dhar , Dr Mohammed Masood , Dr,Shabnam Raza, Dr. Murali Krishna, Dr.Subramanyam, Dr.Ahsan, Dr.Srikanth, Dr.Athallah Dr Mohammed Abdullah Salem ,Dr Gangadhar, Dr Arjumand Aleem, Dr Alicia B Earl , Mr Manav, Ms Mariyam Bamasaq ,Mr Sineesh M V, Ms Mane Grace Pranuthi, Ms Ramadevi , Ms Shoba Thomas, Mr Naveed Ahmed, Mr Jobin , Mr Prasad Raju

S. N	Tasks Discussed	Action Plan	Responsibility	Timeline
1.	ICRA	<ul style="list-style-type: none"> Obtain infection control permit before construction begins. 	Dr Mustafa Afsal	W.i.e
		<ul style="list-style-type: none"> Isolate HVAC system in area where work is being done to prevent contamination of duct system. 	Mr.Prasad raju	W.i.e.
		<ul style="list-style-type: none"> Complete all critical barriers or implement control cube method before construction begins. 	Mr.Prasad raju	W.i.e.
		<ul style="list-style-type: none"> Maintain negative air pressure within work site utilization HEPA equipped air filtration units. 	Mr.Prasad raju	W.i.e.
		<ul style="list-style-type: none"> Seal holes, pipes, conduits and punctures appropriately. 	Mr.Prasad raju	W.i.e.
		<ul style="list-style-type: none"> Construct anteroom and require all personnel to pass through this room so they can be vacuumed using a HEPA vacuum cleaner before leaving work site or they can wear cloth or paper coveralls that are removed each time they leave the work site. 	Ms. Grace	W.i.e.
		<ul style="list-style-type: none"> All personnel entering work site are required to wear shoe covers. 	Ms. Grace	W.i.e.
		<ul style="list-style-type: none"> Contain construction waste before and during transport in tightly covered containers. cover transport receptacles or carts. Tape covering. 	Mr.Naveed	W.i.e.
		<ul style="list-style-type: none"> Do not remove barriers from work area until complete project is inspected by safety and epidemiology depts. And thoroughly cleaned. 	Mr.Prasad raju	W.i.e.
		<ul style="list-style-type: none"> Vacuum work area with HEPA filtered vacuums. 	Mr.Prasad raju	W.i.e.
		<ul style="list-style-type: none"> Wet Mop with disinfection. 	Mr.Naveed	W.i.e.
<ul style="list-style-type: none"> Remove barrier materials carefully to minimize spreading of dirt and debris associated with construction. 	Ms. Grace	W.i.e.		
<ul style="list-style-type: none"> Remove isolation of HVAC system. 	Mr.Prasad raju	W.i.e.		



Dr. Mustafa Afzal
Chairperson - HICC

Dr Mustafa Afsal
Chairperson - HICC

Copy to:
All Committee Members
All Concerned

MINUTES OF MEETING
HOSPITAL INFECTION CONTROL COMMITTEE (HICCC)

VENUE: Conference Hall

DATE: Dec 14th, 2022 **Time:** 3.00 PM

CHAIRD BY: Dr. Md. Abdullah Saleem

MEMBERS ATTENDED: Mr. Syed Kamran Hussain, Dr. Navin Chand, Dr. Murali Krishna, Dr. N. Md. Athaullah, Dr. Arjumand Aleem, Dr. M. Hashim, Dr. Mustafa Afzal, Dr. Ahsan, Dr. Sai Anand, Dr. M. M. Khalid, Mr. Manav, Mr. Mirza Hasan Baig, Ms. Mariyam, Ms. Jyothi, Dr. Abuzar Mr. Jobin, Mr. Prasada Raju, Mr. Shaik Abdhul Khader, Mr. Md. Abdul Qauayum, Mr. C. T. Anil,

Status of Previous Meeting Points & Action Taken Report

S. NO	AGENDA POINT	DESCRIPTION OF DISCUSSED POINTS	ACTION TAKEN	RESPONSIBILITY	STATUS	REMARK
1	Patient admit with Bedsore	Screening for MRSA to be done	Screening for MRSA will be done on the day of admission for the patients admitted with Bed sore.	Mr. Suresh, Ms. Jyoti	Closed	
2	Protocol for OT Scrub uses	OT dress and chappal are wore outside of the premises	All the OT Staff Advised to wear scrub suits and aprons and active Chappal & dresses outside the OT Premises.	Mr. Suresh, Ms. Jyoti	Closed	
3	Staff Vaccination	Some staff are due for second dose.	Reminder sent to all the staff. Still some staff is due for vaccination. A department wise list will be shared with HODs for their departmental staff who are pending for vaccination.	Mr. Suresh, Ms. Jyoti	Closed	

4	Infection control surveillance	Infection rate is very low since past three months.	Link nurses identified. Training is scheduled on Infection control surveillance.	Mr. Suresh, Ms. Jyoti	Closed	
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S. NO	AGENDA POINT	DESCRIPTION OF DISCUSSED POINTS	ACTION TAKEN	RESPONSIBILITY	TARGET DATE	REMARK
1	Communicable Diseases	On identification of patient (OP & IP) with communicable infectious diseases (eg. Open TB), a internal communication to be done among all the concerned staff to take appropriate preventive measures.	A internal communication will be done to all the concerned staff as and when any patient diagnosed with communicable disease. Lab & Radiology to give intimation immediately to infection control department and primary consultant if result of the patient came positive for any communicable disease.	Mr. Suresh, Ms. Jyoti, Dr. Arjumand, Dr. Madhuri	W.i.e.	
2	Surgical Prophylactic Antibiotic	Non compliance to the timing of the Surgical prophylactic antibiotic administration is noted.	All the staff will be sensitized and trained on surgical prophylactic antibiotic policy and strict adherence will be followed.	Mr. Suresh, Ms. Jyoti	30 th May 23	
3	Improper biowaste segregation in ER	During emergency procedure the biowaste improperly discarded by the nurses.	All the nursing staff needs to be trained on biowaste segregation protocol.	Mr. Suresh, Ms. Jyoti	30 th May 23	


Dr. Md. Abdullah Saleem
 Chairperson - HICC