

Form - IV

(See rule 13)

ANNUAL REPORT -2019

[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)]

Sl. No.	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	Mayur Dave
	(ii) Name of HCF or CBMWTF	:	CARE Hospital – Hi-Tech City
	(iii) Address for Correspondence	:	Old Mumbai High- Way, Near Cyberabad Police Commissionerate, Gachibowli, Hyderabad, Telangana – Inida- 500032
	(iv) Address of Facility	:	Old Mumbai High- Way, Near Cyberabad Police Commissionerate, Gachibowli, Hyderabad, Telangana – Inida- 500032
	(v) Tel. No, Fax. No	:	040-33623774
	(vi) E-mail ID	:	mayur.dave@carehospitals.com
	(vii) URL of Website	:	http://www.carehospitals.com/
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	( Private)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: GJ/ B/ 720 valid up to ...30 <sup>th</sup> June 2020
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31/03/2019 Renewal acknowledgement available
2.	Type of Health Care Facility	:	
	(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)	:	Not Applicable
	(iii) License number and its date of expiry	:	Application No. 1423/Dated : 02.03.16 File No of Registration Authority: 414 / DM & HO/RR/2008 28 / 10 / 2020



*Handwritten signature/initials*

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																																																
	(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 : 14,982 Kgs / yr Red Category : 20,590 Kgs/yr White: 1255 Kgs / yr Blue Category : 2438 Kgs / yr General Solid waste: -85,200 Kgs / yr																																																
5	Details of the Storage, treatment, transportation, processing and Disposal Facility																																																		
	(i) Details of the on-site storage facility	:	Size : 2.25M X 5.2 Capacity : One day waste generation Provision of on-site storage : Closed rooms -02 – Basement - 1																																																
	disposal facilities		<table border="1"> <thead> <tr> <th>Type of treatment equipment</th> <th>No of units</th> <th>Capa city 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 Pyrolysis</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Autoclaves</td> <td></td> <td></td> <td>NA</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>NA</td> </tr> <tr> <td>Sharps encapsulation or concrete pit</td> <td></td> <td></td> <td>NA</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>NA</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	Capa city Kg/day	Quantity treated or disposed in kg per annum	Incinerators				Plasma Pyrolysis				Autoclaves			NA	Microwave				Hydroclave				Shredder				Needle tip cutter or destroyer			NA	Sharps encapsulation or concrete pit			NA	Deep burial pits:				Chemical disinfection:			NA	Any other treatment equipment:			
Type of treatment equipment	No of units	Capa city Kg/day	Quantity treated or disposed in kg per annum																																																
Incinerators																																																			
Plasma Pyrolysis																																																			
Autoclaves			NA																																																
Microwave																																																			
Hydroclave																																																			
Shredder																																																			
Needle tip cutter or destroyer			NA																																																
Sharps encapsulation or concrete pit			NA																																																
Deep burial pits:																																																			
Chemical disinfection:			NA																																																
Any other treatment equipment:																																																			
	(iii) Quantity of recyclable wastes sold to authorize 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	One
	(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
	(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	Hospital has Hospital Infection Control Committee to discuss about infection control practices, BMW disposal and its compliance.
7	Details trainings conducted on BMW	BMW 2016 rules and hospital policy on waste disposal/ Needle stick injury policy
	(i) Number of trainings conducted on BMW Management.	
	(ii) number of personnel trained	--
	(iii) number of personnel trained at the time of induction	All new Joiners
	(iv) number of personnel not undergone any training so far	Nil
	(v) Whether standard manual for training is available?	Yes
	(vi) any other information)	No
8	Details of the accident occurred during the year	Needle Stick Injuries : 11
	(i) Number of Accidents occurred	Nil
	(ii) Number of the persons affected	Nil
	(iii) Remedial Action taken (Please attach details if any)	Required investigations were done. Treatment was provided as per hospital policy. Mandatory Induction for new staff and continuous training for all the staff especially HK personnel and Nursing...
	(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?	Yes
	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?	Yes

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 (Air Pollution Control Devices attached with the Incinerator)	NA

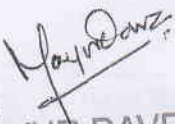
Certified that the above report is for the period from Jan 2019 to Dec 2019

Name of the Head of the Institution: **Mayur Dave**

Signature:

Date: 30<sup>th</sup> Mar 2020

Place: Hyderabad- Gachibowli

  
**MAYUR DAVE**  
Hospital Chief Operating Officer  
**CARE HOSPITAL**  
(Hitech City)  
Gachibowli, Hyderabad-500 032.