

Recd
21/5/19

Date: 20.05.2019

To

The Regional Environmental Engineer,
Punjab Pollution Control Board,
Regional office Phase II,
Mohali (Punjab)

Subject: Submission of Annual Report for Biomedical Waste Generated in Max Super Speciality Hospital, Ajitgarh Mohali (January 2018 to December 2018)

Ref- Authorization no.- BMW/Renewal/SAS/2018/7347070 dated 17.05.2018

Sir,

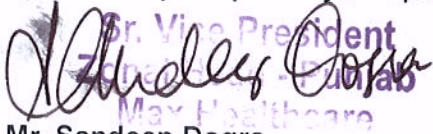
Kindly refer to your letter no BMW/Renewal/SAS/2018/7347070 dated 17.05.2018 authorising our hospital to generate, collect, store and dispose of Bio-Medical Waste.

As per the "The Bio Medical Waste Management Rules 1998" we are enclosing the report of the Bio Medical Waste generated in Max Super Speciality Hospital Ajitgarh, Mohali for the year 2018

Thanking You

Sincerely

For Max Super Specialty Hospital


Mr. Sandeep Dogra

(Authorized Signatory)

Max Super Speciality Hospital, Mohali - A unit of Hometrail Buildtech Pvt. Ltd.

Near Civil Hospital, Phase -6, Mohali, Punjab - 160055.

Phone: +91-172-5212 000

Hometrail Buildtech Private Limited

(CIN: U45400DL2008PTC176962)

Regd. Office: M-110, Paschim Park, New Delhi-110 017



Form – IV
(See rule13)
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. Sandeep Dogra
	(ii) Name of HCF or CBMWTF	:	Max Super Speciality Hospital
	(iii) Address for Correspondence	:	Phase VI Near Civil Hospital Mohali SAS Nagar Punjab
	(iv) Address of Facility	:	Phase VI Near Civil Hospital Mohali SAS Nagar Punjab
	(v) Tel. No, Fax. No	:	0172 5212000
	(vi) E-mail ID	:	kirti.thakur@maxhealthcare.com
	(vii) URL of Website	:	www.maxhealthcare.com
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	Private Public Partnership (PPP Mode) (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/2018/7347070valid up to 31/03/2023
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: Renewal Applied For
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Beds: 200 (2 Dental Chair and 5 OT)
	(ii) Non-bedded hospital	:	

	Laborator (Clinic or Blood Bank or Clinical y or Research Institute or Veterinary Hospital or any other)		NA
	(iii) License number and its date of expiry		
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
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	NA _____ Kg/day
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category Details Attached Red Category : Details Attached White: Details Attached Blue Category : Details Attached General Solid waste:
5	Details of the Storage, treatment, transportation, processing and Disposal Facility		
	(i) Details of the on-site storage facility	:	Size : Capacity : Provision of on-site storage : (cold storage or any other provision)

disposal facilities		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:
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.	:	Red Category (like plastic, glass etc.)
(iv) No of vehicles used for collection 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		Quantity generated Where disposed Incineration Ash ETP Sludge
(vi) Name of the Common Bio- : Medical Waste Treatment Facility Operator through which wastes are disposed of		Rainbow Environments Pvt. Ltd.
(vii) List of member HCF not handed over bio-medical waste.		Kirti Thakur / Sumit Walia
6 Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		Yes, Attached
7 Details trainings conducted on BMW (i) Number of trainings conducted on BMW Management.		78

	(ii) number of personnel trained		2515
	(iii) number of personnel trained at the time of induction		270
	(iv) number of personnel not undergone any training so far		NIL
	(v) whether standard manual for training is available?		Yes
	(vi) any other information)		N/A
8	Details of the accident occurred during the year		
	(i) Number of Accidents occurred		NIL
	(ii) Number of the persons affected		NIL
	(iii) Remedial Action taken (Please attach details if any)		N/A
	(iv) Any Fatality occurred, details.		N/A
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?		Yes, Liquid waste generated is being treated through STP and ETP. NIL
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		Yes, Nil
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator)

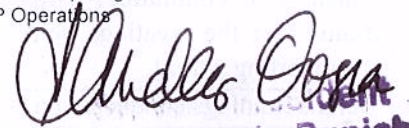
Certified that the above report is for the period from January 2018 to December 2018

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Name and Signature of the Head of the Institution

Date:
Place

Mr. Sandeep Dogra
SVP Operations


Zonal Director, Punjab
Max Healthcare

HCF DETAILS

Code
100062

Name
HOMETRAIL BUILDTECH PVT. LTD.

Cat
BEDDED HOSPITAL

Beds
200

CBWTF
M/s RAINBOW ENVIRONM
ENT'S PVT LTD

CONTACT PERSON

Name
MR. MANISH KUMAR

Mobile
9592909875

Tele
1725212000

Email
MANI@GMAIL.COM

Period of Report: JAN 2018 to DEC 2018 ; Report Generated by: HOMETRAIL BUILDTECH PVT. LTD. ; Date of Report: 02 MAY 2019 / 10:05

SNo		Total Waste		Yellow			Red			Blue		White		 Cyto		Others	
		Bags	Weight	Bags	Weight	%age	Bags	Weight	%age	Bags	Weight	Bags	Weight	Bags	Weight	Bags	Weight
REPORT TOTAL		26833	115235.311	8514	36947.510	32	11798	55397.549	48	2535	15716.953	3420	5126.509	1	3.045	565	2043.74
	Months																
1	Jan 2018	2099	9706.654	707	3172.957	33	913	4464.387	46	193	1458.595	236	453.505	1	3.045	49	154.165
2	Feb 2018	2261	9201.670	746	2891.620	31	973	4481.720	49	180	1343.050	304	344.550	0	0.000	58	140.730
3	Mar 2018	2586	11098.600	837	3564.190	32	1157	5437.065	49	241	1647.985	297	304.910	0	0.000	54	144.450
4	Apr 2018	2705	10498.266	906	3351.435	32	1126	5051.626	48	260	1583.365	367	382.690	0	0.000	46	129.150
5	May 2018	2418	9425.425	774	2721.110	29	1103	4863.250	52	241	1348.725	266	367.995	0	0.000	34	124.345
6	Jun 2018	2137	8731.585	660	2673.060	31	964	4356.220	50	203	1149.865	275	411.585	0	0.000	35	140.855
7	Jul 2018	2051	8485.709	584	2550.530	30	926	4216.870	50	231	1127.446	279	424.125	0	0.000	31	166.730
8	Aug 2018	2299	9536.895	670	3082.630	32	1014	4513.920	47	238	1164.845	328	547.720	0	0.000	49	227.780
9	Sep 2018	2278	9944.005	708	3315.075	33	961	4527.345	46	255	1395.375	302	464.905	0	0.000	52	241.305
10	Oct 2018	2145	9739.755	697	3259.495	33	934	4627.500	48	194	1203.695	269	435.610	0	0.000	51	213.455
11	Nov 2018	1892	8902.829	587	2939.628	33	890	4272.586	48	146	1096.477	221	418.686	0	0.000	48	175.455
12	Dec 2018	1962	9963.918	638	3425.780	34	837	4585.060	46	153	1197.530	276	570.228	0	0.000	58	185.320

MINUTES OF MEETING- MSSH Mohali

HOSPITAL INFECTION CONTROL COMMITTEE MEETING

Date: 10/10/2018

Time: 2:30 PM- 3:30 PM

Venue: Seminar Room, Third Floor

Chairperson: Dr. Gian Prakash Malik

Infection Control Officer: Dr. Neha Gupta

Infection Control Nurse: Mr. Sandeep

Co-ordinator: Dr. Harpreet Kaur

Present: Dr. G. P. Malik, Dr. Y K Batra, Dr. Jasbir Kaur (MS), Dr. Ashwani Nayyar, Dr.Neha Gupta, Dr. Munish Kumar Chauhan, Dr. Arpinder Gill, Dr. Saurav Singha Gautam Goyal, Mr. Sharavan BME, Mr. Kirti (HK), Mr. D V Singh (OT), Mr. Harpreet (Eng), Mr. Paramjeet(Cssd)

Apology : Dr. Deepak Bhasin, Dr. Harpal (MICU), Dr. Parampreet Ghuman

S. No.	Minutes of previous meeting			
1	Disposal of Pus in Radiology: Mr. Harpreet engineering HOD to look into it & suggest committee some options & discuss with Committee Chairperson.	Mr. Harpreet		Put standard strength of Sodium Hypochlorite in Collected pus /drain fluids & wait for 20mts. Then dispose off in the sewage line. To be discussed in CICC
2	It was discussed to include new teams CTVS, Ortho members committee.	MS & MA	Next meeting	Done & Closed
3	Autoclave: It was discussed that hospital has two autoclaves one smaller in	BME	Next meeting	CER Raised Equipment pending

	lab and another in blood bank. One more bigger autoclave is required for lab as well as back up purpose. It was discussed BME to look into requirement and revert in next meeting.			
4	OT infection control practices: It was discussed to reinforce OT apron, mask and cap removal policy. Anybody coming out of OT has to come in apron or over scrub gown.	MS	Immediate	Reinforced
5	It was discussed that many complaints of engineering and BME in OT keeps on lingering for days. As suggested by both heads OT manager to ensure that no compliant is made verbal unless emergency. All complaints to be logged through 2828 so that TAT could be adhered to.	OT staff with Manager	Immediate	To be discussed in meeting
6	It was discussed to prevent OT infections, all the beds which are wheeled inside OT to be carbolized before wheeling out of OT complex. OT manager to ensure same. Housekeeping team to be briefed.	OT manager along with Housekeeping	Immediate	To be discussed again
7	MICU 2 pigeons smell problem still exist. It was discussed to come out with concrete conclusion.	Dr. Ankush & Mr. Harpreet	Next meeting	Safety Net installation work initiated post approval from central teams after detailed survey.
8.	Skin testing policy was discussed. It was decided to re-circulate the policy in all clinicians.	Dr. Harpreet kaur	ASAP	Open, to be discussed in PISC
9.	Anaphylaxis consent – check the guidelines			open
	AGENDA & DISCUSSION	RESPONSIBILITY	TIMELINE	
1.	AMS programme: To be discussed in separate forum. Team to be formed.	Dr Harpreet / Dr. Neha	ASAP	

2.	Autoclave: It was discussed that hospital has two autoclaves one smaller in lab and another in blood bank. One more bigger autoclave is required for lab as well as back up purpose. Autoclave CER raised to be received next week. Nursing to be told to send vacutainers in case any used to be sent to Lab for proper disposal.	BME Sis Sarabjeet	Update in next meeting	
3	Preoperative surgical preparation with Chlorhexidine solution. Cost & effectiveness to be asked from other hospital of Max who have implemented it. To find out How to do it? How long to do it? Does it lead to better outcomes? What is literature support? What are benefits?	Dr. Harpreet Kaur & Dr Neha Gupta	Next Meeting	
4.	O.T. Crocs, caps, masks & gowns should be removed before leaving the O.T. complex. Yellow Dustbins to be placed inside change rooms. Print outs to be pasted inside OT door to ensure person remembers it. Labeling of sleepers & shoes used in OT as OT. Talk to be done for same. Security guards to ensure compliance and escalate if somebody does not follow.	Mr. Kirti Thakur OT Manager Mr. Kirti Thakur Mr. Vinod	Immediate effect	

5.	It was discussed that many complaints of engineering and BME in OT keeps on lingering for days. As suggested by both heads OT manager to ensure that no compliant is made verbal unless emergency. All complaints to be logged through 2828 so that TAT could be adhered to.	OT staff with Manager	Immediate	
	Awareness session and all Mohali mailer to be circulated about 2828.	Mr. Ashok		
6.	It was discussed to prevent OT infections, all the beds which are wheeled inside OT to be carbolized before wheeling out of OT complex. OT manager to ensure same. Housekeeping team to be briefed.	OT manager along with Housekeeping	Immediate	
7.	MICU 2 pigeons smell problem still exist. It was discussed to come out with concrete conclusion. Mr. Harpreet Engineering, gave closure date as March 2019.	Dr. Ankush & Mr. Harpreet	Next meeting	
8.	Immunization: As per immunization policy list to be made who all staff should be immunized. Chicken pox vaccination for nsg. Staff to be done after HR approval. Booster dose of Hepatitis-B pending due to cost analysis of Hepatitis-B Antibodies titres. Also those who do not want to be immunized signature to be taken that they are opting out with their own wish.	ICN	30 th November, 2018	

9.	HAI's: CAUTI on increase. In RCA it was found that care is compromised. MICU team to be taken in loop and all support to be provided to decrease rate. For SSI: Surgical prophylaxis to be redistributed and re-discussed by AMS team.	Dr. Jasbir to talk to Dr. Harpal AMS team		
10.	Clinical audit in indication of catheterization to be done.	Dr Harpreet and Dr Jasbir		

Dr. Neha Gupta

Infection Control Officer

Dr G P Malik

Chairperson HICC

Dr Jasbir Kaur

Medical superintendent