

Dated: 26/06/2023

To,

**The Sr. Environmental Engineer, WMC- I**  
Department of Environment,  
Govt. of NCT of Delhi,  
4<sup>th</sup> Floor, ISBT Building,  
Kashmere Gate,  
Delhi-110006

26/06/2023  
(ENQUIRY COUNTER)  
DELHI POLLUTION CONTROL COMMITTEE  
DEPARTMENT OF ENVIRONMENT  
GOVT. OF NCT OF DELHI  
4TH FLOOR, ISBT BUILDING,  
KASHMERE GATE, DELHI-110006

**Subject: Submission of Form- IV (Annual Report)**

Dear Sir/Madam,

Please find attached herewith the duly filled Form IV (Annual Report) as per the set guidelines by DPCC for the duration from **1<sup>st</sup> January 2022 to 31<sup>st</sup> December 2022.**

Due to high occupancy the generated Bio Medical Waste exceeded our estimated limits. Same has been submitted on monthly basis to your respective office via form A.

Thanking you,

Yours Sincerely,

**For Fortis Hospotel Limited**

**Dr. Archana Bajaj**  
Medical Superintendent

Encl: Attached

*for*  
*for*  
**Dr. Rahul Verma**  
Deputy Medical Superintendent  
Fortis Healthcare Limited  
A-Block, Shalimar Bagh  
New Delhi -110 088  
DMC Regn. No.- 6379

*Ravi*  
*Ravi*

**Fortis Hospotel Limited**

CIN: U74899HR1990PLC054770

Registered Office: Fortis Memorial Research Institute, Sector-44, Near Metro Station,  
Gurgaon - 122002 Harvana (India)

**FORM IV**  
**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)]

S.No	Particulars		
1.	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or operator of facility)	:	Dr Archana Bajaj
	(ii) Name of HCF or CBMWTF	:	FORTIS HOSPOTEL LIMITED
	(iii) Address for Correspondence	:	A-Block, Shalimar Bagh, Delhi -110088
	(iv) Address of Facility	:	A-Block, Shalimar Bagh, Delhi -110088
	(v) Tel. No, Fax. No	:	011-45302222, 011-45302211
	(vi) E-mail ID	:	archana.bajaj@FORTISHEALTHCARE.COM
	(vii) URL of Website	:	-
	(viii) GPS coordinates of HCF or CBMWTF		Yes, Observed to be in place during round to the CBMWTF
	(ix) Ownership of HCF or CBMWTF	:	Private (Public)
	(x) Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: DPCC/BMW/AUTH/NEW No/2019/04619 Valid Till: 25-06-2022 Renewal applied on 23-06-2022
	(xi) Status of Consents under Water Act and Air Act	:	Valid up to: 06-07-2024
2.	Type of Health Care Facility	:	HCF
	(i) Bedded Hospital	:	262

S.No	Particulars	
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	: NA
	(iii) License number and its date of expiry	: License Number: DGHS/NH/882 Valid till 31-03-2023 Renewal applied on 30-01-2023
3.	Details of CBMWTF	: Biotic Waste Solutions Pvt. Ltd.
	(i) Number healthcare facilities covered by CBMWTF	: CBMWTF will provide the details
	(ii) No. of beds covered by CBMWTF	: CBMWTF will provide the details
	(iii) Installed treatment and disposal capacity of CBMWTF:	: CBMWTF will provide the details
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	: CBMWTF will provide the details
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	: Yellow Category: 3766.09 Red Category: 4847.36 White: 211.96 Blue Category: 1173.09 Cytotoxic: 244.52 General Solid waste: 4500 + 3000
5.	Details of the Storage, treatment, transportation, processing and Disposal Facility	
	(i) Details of the on-site storage facility	Size: 167 Sq Ft + 178 Sq Ft
		Capacity: 15,000 kg per month
		Provision of on-site storage : NA



S.No	Particulars				
	(ii) 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 authorize recyclers after treatment in kg per annum.	Red Category (like plastic, glass etc.) CBMWTF will provide the details			
	(iv) No of vehicles used for collection and transportation of biomedical waste	CBMWTF will provide the details			
	(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			
		CBMWTF will provide the details			
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	Biotic Waste Solutions Pvt. Ltd.			
	(vii) List of member HCF not handed over bio-medical waste	CBMWTF will provide the details			

S.No	Particulars	
6.	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	Yes, conducted 2 times, Minutes of the Meeting attached
7.	Details trainings conducted on BMW	
	(i) Number of trainings conducted on BMW Management.	360
	(ii) number of personnel trained	6577
	(iii) number of personnel trained at the time of induction	399
	(iv) number of personnel not undergone any training so far	Nil – All HCW are trained for BMW mgmt.
	(v) Whether standard manual for training is available?	Yes
	(vi) any other information)	NA
8.	Details of the accident occurred during the year	0
	(i) Number of Accidents occurred	0
	(ii) Number of the persons affected	0
	(iii) Remedial Action taken (Please attach details if any)	NA
	(iv) Any Fatality occurred, details	NA
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met the standards?	NA (CBMWTF Responsibility)

S.No	Particulars	
	Details of Continuous online emission monitoring systems installed	NA (CBMWTF Responsibility)
10.	Liquid waste generated and treatment methods in place. How many times you have not met the standards in a year?	Yes  Always compliant with the standards
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  Always compliant with the standards
12.	Any other relevant information	NA (CBMWTF Responsibility)


Certified that the above report is for the period from 01.01.2022 upto 31.12.2022

Date: 26.06.2023

Place: Shalimar Bagh, Delhi

Name and Signature of the Head of the Institution

for

  
**Dr. Rahul Verma**  
 Deputy Medical Superintendent  
 Fortis Healthcare Limited  
 A-Block, Shalimar Bagh  
 New Delhi -110 088  
 DMC Regn. No.- 6379

FORM I

ACCIDENT REPORTING

(Annual report from 1<sup>st</sup> Jan 2022 to 31<sup>st</sup> Dec 2022)

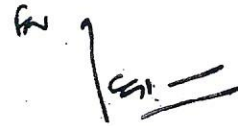
- |  |     |
|--|-----|
| 1. Date and time of accident:  | Nil |
| 2. Type of Accident:   | Nil |
| 3. Sequence of events leading to accident:   | Nil |
| 4. Has the Authority been informed immediately:                                    | Nil |
| 5. The type of waste involved in accident:   | Nil |
| 6. Assessment of the effects of the accidents on human health and the environment: | Nil |
| 7. Emergency measures taken:   | Nil |
| 8. Steps taken to alleviate the effects of accidents:                              | Nil |
| 9. Steps taken to prevent the recurrence of such an accident:                      | Nil |
| 10. Does you facility has an Emergency Control policy? If yes give details:        | Nil |

Date - 26/06/2023

Signature

Place - Delhi

Designation - Medical Superintendent



**Dr. Rahul Verma**  
Deputy Medical Superintendent  
Fortis Healthcare Limited  
A-Block, Shalimar Bagh  
New Delhi - 110 088  
DMC Regn. No.- 6379





# WATER LABORATORY

DELHI POLLUTION CONTROL COMMITTEE  
4TH FLOOR, ISBT BUILDING, KASHMERE GATE, DELHI-110006  
visit us at <http://dpccocmms.nic.in>

Result No- DPCC/Comm/W/7880/4974

Date:22/08/2022

## LAB REPORT

1. Name & Address of Unit : M/s.Fortis Hospotel limited  
A-Block, Shalimarbagh, New Delhi-110088  
Delhi-110088
2. Sampling Location : STP Outlet
3. Date of sampling : 08/08/2022
4. Sample collected by : DPCC Lab
5. Control Measure (if any) : STP
6. Nature of sample : Grab
7. Nature of Industry : Health Care Establishments having bed strength above 50 beds and connected or not connected to Sewer and with boiler
8. Parameter analyzed and result

S. No.	Parameters	Outlet of STP	Prescribed Standard
1	pH	7.4	6.5-9.0
2	Total Suspended Solids (TSS)	26	100.0
3	Oil and Grease	1.2	10.0
4	Bio-Chemical Oxygen Demand(BOD)[3 days at 27°C]	18	30.0
5	Chemical Oxygen Demand(COD)	56	250.0
6	Bio - assay Test (percent survival of fish after 96 hours in 100 percent effluent)	90	90.0-100.0

\*All parameters are in mg/l except pH

*N. Moitra*  
Dr Nandita Moitra  
I/C Water Laboratory

*Shamshad Khan*  
SSA/Analyst/JLA



**MINUTES OF BMW COMMITTEE**

NAME OF UNIT: Shalimar Bagh

1. Date & Time: 19/10/2022 & 15:00-16:00 hrs
2. Total no. of Members in the committee: 31
3. Number of members attended: 17
4. Chairman, convener & Mandatory Members present (Yes/No): Yes
5. Details of essential members who neither attended nor sent a representative: Dr Sonal Gupta, Dr Kapil Kumar, Dr Amit Singh, Dr Amit Agrawal, Dr Raju Vyas, Dr G k Aggarwal, Dr Vivek Jain, Dr Manish Kulshrestha, Dr Simmi, Dr Aparna Jain, Dr Ankit, Dr Umesh, Mr Abdul, Mr Rajesh
6. Agenda circulated 3 days prior to meeting (Yes/No): Yes
7. Action Taken Report (ATR) of previous meeting: Yes

**BMW OBSERVATIONS SEPTEMBER'22**

AREA	OBSERVATIONS	CAPA
NR ICU	Plastic apron found in yellow bin	It was discarded by physiotherapist, she rebriefed about proper BMW disposal & management.
MICU	Gauze piece found in sharp container.	Staff identified & rebriefed regarding proper BMW disposal & management
CCU	Plastic bottle filled with IV fluid discarded in red bin	Staff identified she was already aware about proper disposal of BMW hence she rebriefed about proper disposal method for fluid filled IV bottles
DIALYSIS	Sharp container was not labelled with date & time of starting of usage	Informed to HK staff & supervisor & got corrected at same time
1B2	ID band found in general bin	Staff identified & sensitized regarding proper BMW Segregation & disposal

SIGNATURE OF CONVENER

SIGNATURE OF CHAIRMAN



NAME OF UNIT                    **SHALIMAR BAGH**

**MINUTES OF MEETING**

NAME OF COMMITTEE    **BIO MEDICAL WASTE COMMITTEE MEETING**

1. Date & Time : **15/06/2022 & 3 - 4PM**
2. Total no. of Members in the committee: **30**
3. Number of member's attended- **20** Dr Pankaj Kumar, Dr Monika Gupta, Dr Rizvi, Dr Harjit Singh, Ms Girja Sharma, Dr Vikas Maurya, Dr Rahul Verma, Dr GK Aggarwal, Dr Amit Prakash, Dr Sonal, Mr Rajeev Kapur, Mr Sunny, Mr J P Sahu, Mr Sudhir, Mr Abdul Rasheed, Mr Vivek, Ms Preeti, Mr Sudhir, Mr Rajesh Kumar, Mr Sandeep Singh, Ms Himmat Malhotra , Ms Sapna.
4. Chairman & convener present (Yes/No): **Yes**
5. Details of essential members who neither attended nor sent a representative: **Dr Raju Vyas, Dr Vivek Jain, Dr Umesh, Dr Amit Aggarwal, Dr Simmi Singhal, Dr Amit Singh, Dr Kapil kumar, Dr Sunita Varma, Dr Arpana Jain, Dr Manish, Dr Mohit Aggarwal.**
6. Agenda circulated prior to meeting (Yes/No): **Yes**
7. Discussion on Action Taken Report on action items / recommendations from previous meeting (Yes/No):  
**Yes**
8. Details of action items open from previous meeting: **No**
9. Details of action items open from previous two meetings: **No**
10. Summary of discussion on Reports / documents of all essential Agenda items presented
  - Action Taken Report on previous committee minutes
  - Any Key update from HMC
  - Infection Control Data including MOS & CESC & trend analysis of HAIs
  - BMW License, Vendor Agreement validity & regulatory reports
  - BMW Audit findings/ issues /concerns
  - Needle Stick Injury data, Audits
  - Infection Control & BMW Trainings
  - Surveillance reports
  - Vaccination Record update
  - AMS update
  - Data Validation Report
  - OT Report
  - CSSD Update
  - Construction/Repair planned
  - Approval of any new products
  - Any issues/ Concerns/ Incidents
  - Important Matters for decision & direction
  - Important Matters for Information

11. Timelines & responsibilities

BMW OBSERVATIONS May'22		
<u>AREA</u>	<u>OBSERVATIONS</u>	<u>CAPA</u>
SBI	Red bag found in yellow bin.	Staff couldn't be identified but briefing done on proper BMW segregation and disposal for all staff on duty.
OT	Broken ampule found in white leak proof container.	Staff couldn't be identified but briefing done on proper BMW segregation and disposal for all staff on duty.
MICU	General waste found in red bin.	Staff couldn't be identified but briefing done on proper BMW segregation and disposal for all staff on duty.
Chemo Day Care	Lancet (Sharp) found in red bin.	Staff identified and re-briefing done on proper sharp disposal for all staff on duty.
ER	Plastic syringe found in blue leak proof container.	Staff couldn't be identified but briefing done on proper BMW segregation and disposal for all staff on duty.
LAB	Open blade found in hematology department.	Staff identified and re-briefing done on proper sharp disposal for all staff on duty.



Signature of Chairman and Convener



