

Date- 23/06/25

TO,

The environmental officer,

Karnataka state Pollution control board

Regional office-Rajarajeshwari Nagar

Nisarga Bhavan,2nd floor Bangalore-560010

SUB: Submission of Annual returns for BIOMEDICAL WASTE-2024

Respected sir,

We are enclosing Bio-Medical Waste handling Annual reports FORM IV for the year -2024(jan-2024 to dec-2024) along with monthly BMW waste online uploaded copies ,BMW MOU, Audits reports CFO-AIR, Staff training copies with minutes of meeting copies for our hospitals.

for M/s. Fortis Health Management limited, NO;23,80 feet road, Nagarabhavi site Bangalore-560072.

We kindly request you to consider this document & issue us the acknowledgement.

Hope you will do the needful.

Thank you

Yours faithfully

For M/S, Fortis Health Management Ltd




(Authorized Signatory)

FORTIS HEALTH MANAGEMENT LIMITED
No. 23, 80 Feet Road, Gurukrupa Layout
2nd Stage, Nagarabhavi, BANGALORE-560 072.
Tel: 91 - 80 - 2301 4100

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. Thejaswini Parthasarathy
	(ii) Name of HCF or CBMWTF	:	Medicare Managing BMW
	(iii) Address for Correspondence	:	No. 25, 2 nd Cross, Hebbur
	(iv) Address of Facility	:	M/s. Forks Health Management
	(v) Tel. No, Fax. No	:	080-2201400, 4190
	(vi) E-mail ID	:	Thejaswini, Sarathy@forkshealthcare.com
	(vii) URL of Website	:	WWW.forkshealthcare.com
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	private (State Government or Private or Semi Govt. or any other) private
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: AW-343108, 16014 29/2/24 valid up to 30/9/2030
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 30/9/2030
2.	Type of Health Care Facility	:	Forks Hospital
	(i) Bedded Hospital	:	No. of Beds:..... 102
	(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	:	-
3.	Details of 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 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)	:	<table border="1"> <tr> <td>Yellow Category</td> <td>: 1664.837 + 20.954</td> </tr> <tr> <td>Red Category</td> <td>: 1887.948</td> </tr> <tr> <td>White</td> <td>: 46.995</td> </tr> <tr> <td>Blue Category</td> <td>: 486.224</td> </tr> <tr> <td>General Solid waste</td> <td>: 1574.25</td> </tr> <tr> <td colspan="2" style="text-align: right;">= 1675.79</td> </tr> </table>	Yellow Category	: 1664.837 + 20.954	Red Category	: 1887.948	White	: 46.995	Blue Category	: 486.224	General Solid waste	: 1574.25	= 1675.79																																					
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5	Details of the Storage, treatment, transportation, processing and Disposal Facility																																																		
	(i) Details of the on-site storage facility	:	<table border="1"> <tr> <td>Size</td> <td>: 5 Feet & 4 Feet = 24 Nos</td> </tr> <tr> <td>Capacity</td> <td>: 650 kg to 750 kg</td> </tr> <tr> <td>Provision of on-site storage or any other provision</td> <td>: (cold storage or) NA</td> </tr> </table>	Size	: 5 Feet & 4 Feet = 24 Nos	Capacity	: 650 kg to 750 kg	Provision of on-site storage or any other provision	: (cold storage or) NA																																										
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	(ii) Details of the treatment or 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 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>- 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	Capacity Kg/day	Quantity treated or disposed in kg per annum	Incinerators				Plasma Pyrolysis				Autoclaves				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:			
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	(iii) Quantity of recyclable wastes sold to authorized 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	:	KA-52 B 6740																																																
	(v) Details of incineration ash and ETP sludge generated and disposed	:	<table border="1"> <thead> <tr> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	Quantity generated	Where disposed																																														
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	during the treatment of wastes in Kg per annum	Incineration Ash ETP Sludge
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	Medicare
	(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, Attached copy
7	Details trainings conducted on BMW	Detail Training Copy Attached
	(i) Number of trainings conducted on BMW Management.	Attached.
	(ii) number of personnel trained	Attached
	(iii) number of personnel trained at the time of induction	Attached
	(iv) number of personnel not undergone any training so far	NIL
	(v) whether standard manual for training is available?	Yes
	(vi) any other information)	-
8	Details of the accident occurred during the year	NIL
	(i) Number of Accidents occurred	NIL
	(ii) Number of the persons affected	NIL
	(iii) Remedial Action taken (Please attach details if any)	NIL
	(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?	NA
	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?	STP & OTP plant we have
11	Is the disinfection method or sterilization meeting the log 4	Yes

	standards? How many times you have not met the standards in a year?		NO
12	Any other relevant information	:	(Air Pollution Control Devices attached with the Incinerator)

Certified that the above report is for the period from

January - 2024 to December 2024


Name and Signature of the Head of the Institution

Date: 23/6/2025

Place: Bangalore

Megastore Site

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