

26th, February , 2026

The Sr. Environmental Engineer
West Bengal Pollution Control Board
Kolkata Regional office
Mani Square 8th floor
164/1 Maniktala Main Road
Kolkata - 700054

Dear Sir/Madam

Subject: Submission of Form-IV

Please find enclose the "Annual Report" of Bio-Medical Waste generated and disposed of from Fortis Medical Centre at 2/7, Sarat Bose Road Kolkata for the year of 2025 as per the format specified by your Office.

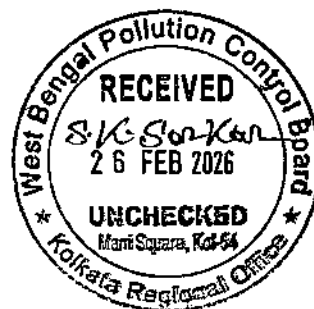
Thanking You

For Fortis Hospitals Ltd, Kolkata



Dr. R. Sandhya. Rao

Facility Director



Note: There was no occurrence of any type of incidents (minor/major) at Hospital during handling /transportation of BMW in the year 2025 .

FORTIS HOSPITALS LIMITED

Regd. Office : Escorts Heart Institute and Research Centre, Okhla Road, New Delhi - 110025
Tel.: +91 11 2682 5000, Fax : +91 11 4162 8435 CIN : U93000DL2009PLC222166, GST : 19AABCF3718N1ZB

(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	:	FORTIS MEDICAL CENTRE
	(i) Name of the authorised person (occupier or operator of facility)	:	DR.R. SANDHYA. RAO
	(ii) Name of HCF or CBMWTF	:	FORTIS MEDICAL CENTRE
	(iii) Address for Correspondence	:	FORTIS MEDICAL CENTRE
	(iv) Address of Facility	:	2/7, SARAT BOSE ROAD, KOLKATA-700020, INDIA
	(v) Tel. No, Fax. No	:	FORTIS MEDICAL CENTRE 2/7, SARAT BOSE ROAD, KOLKATA-700020, INDIA
	(vi) E-mail ID	:	+91 33 24754096/4320,6620200 fmc@fortishealthcare.com
	(vii) URL of Website	:	http://www.fortishealthcare.com/india/hospitals-in-west-bengal/fortis-hospital-kidney-institute-kolkata/bmw
	(viii) GPS coordinates of HCF or CBMWTF	:	Latitude:22.53947578475152, Longitude:88.35523250474294
	(ix) Ownership of HCF or CBMWTF	:	Corporate
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: D0010504 valid up to 31.07.2027
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31.07.2027
2.	Type of Health Care Facility	:	Day Care Centre
	(i) Bedded Hospital	:	No. of Beds:3
	(ii) Non-bedded hospital	:	NA
	(Clinic or Blood Bank or Research Institute or Clinical Laboratory or Veterinary Hospital or any other)	:	

(iii) License number and its date of expiry

CE License No:34229167
Validity 21.06.2027

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

(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: 34 Kg

Red
Category : 45Kg

White: 5 Kg

Blue
Category : 6 Kg

General Solid Waste: NA

5. Details of the Storage, treatment, transportation, processing and Disposal Facility

(i) Details of the on-site storage
facility

: Size : NA

Capacity : NA

Provision of on-site storage : (cold storage or
any other provision) NA

disposal facilities

Type of treatment
Equipment

No
of
units

Capacity
Kg/day

Quantity
treatedo
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:	- NA
	(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	NA	
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum	Incineration Ash ETP Sludge	Quantity Generated Where disposed
	vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	Medicare Environmental Management (P) Ltd HMC Dumping site Belgachia F-Road Howrah-107	
	(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.	12(Sample copy Attached)	
	(ii) number of personnel trained	9	
	(iii) number of personnel trained at the time of induction	Nil	
	(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		
	(i) Number of Accidents occurred	NIL	
	(ii) Number of the persons affected	NA	
	(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
	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?		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-1ST Jan,2025 -31st Dec 2025

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Name and Signature of the Head of the Institution

Date: 26-02-2026.
 Place-Kolkata



FORTIS MEDICAL CENTRE

2/7, SARAT BOSE ROAD,
KOL-700020, WEST BENGAL
TEL- +91 033662020000



TRAINING

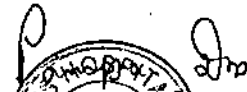
DEPARTMENT: HOUSEKEEPING

SUBJECT: Bio Medical Waste segregation & handling.

TRAINING CONDUCTED BY: Pampa DAS.

DATE: 06.11.25

SL NO	NAME OF THE STAFF	SIGNATURE
1	Tarak Parikshit	TARAK PARIKSHIT
2	Surajit Hazari	Surajit Hazari
3	Rajkumar Sharma	Rajkumar Sharma
4	Mamata Pramanick	Mamata Pramanick
5	Swuchi Haldar	Swuchi Haldar
6	Srimanta Naskar	Srimanta Naskar
7	Biswajit Chakraborty	Biswajit Chakraborty
8	Kartick Ch. Jana	Kartick ch. Jana.
9	Chemki Saha	Chem
10		
11		
12		
13		
14		
15		
16		


Signature of HK In charge



FORTIS MEDICAL CENTRE

2/7, SARAT BOSE ROAD,
KOL-700020, WEST BENGAL.
TEL- +91 033662020000

TRAINING

DEPARTMENT: HOUSEKEEPING

SUBJECT: Bio Medical Waste segregation & handling.

TRAINING CONDUCTED BY: *Pampa Das*.

DATE: 06.12.25

SL NO	NAME OF THE STAFF	SIGNATURE
1	Chumki Saha	C-Saha
2	Tarak Parikshit	TARAK PARIKSHIT
3	Rajkumar Sharma	<i>Rajkumar</i>
4	Surajit Hazari	Surajit Hazari
5	Mamata Pramanick	Mamata Pramanick
6	Kartick Ch. Jana	Kartick Ch. Jana
7	Suruchi Haldar	Suruchi Haldar
8	Srimanta Naskar	Srimanta Naskar
9	Biswajit Chakraborty	Biswajit Chakraborty
10		
11		
12		
13		
14		
15		
16		

Pampa Das
Signature of HK In charge





Fortis Hospital & Kidney Institute, Rashbehari, Kolkata

ATTENDANCE

UNIT: FHKI

VENUE: CONFERENCE HALL

TOPIC: INFECTION CONTROL COMMITTEE MEETING

Sl No	Name	Designation	Signature
1	MR.BAISHPAYAN MUKHERJEE	FACILITY DIRECTOR	Baishpayan Mukherjee
2	DR.ANASUYA BOSE	HEAD MEDICAL	Anasuya Bose
3	DR.PULAK MUKHERJEE	CHAIR MAN	Pulak Mukherjee
4	DR.ARINDAM CHAKRABORTY	MICROBIOLOGIST	Arindam Chakraborty
5	MS.SATHYA ANANDA KUMAR	CHIEF NSG OFFICER	Sathya Ananda Kumar
6	DR.PARTHA BIKASH GHOSH	QUALITY HEAD	Partha Bikash Ghosh
7	DR.R.N.SAIGAL	CLINICIAN	R.N. Saigal
8	MR .ARITRA ROY	DEPUTY MANAGER MAINTENANCE	Aritra Roy
9	MS.MITA GHOSH	ASSISTANT CHIEF NSG OFFICER	Mita Ghosh
10	MR.ABHISHEK GUPTA	BIO-MEDICAL ENGINEER	Abhishek Gupta
11	MS.SOHINIEE SEAL	DIETICIAN	Absent
12	MS.PAMPA DAS	ASSISTANT MANAGER HOUSE KEEPING	Pampa Das
13	MS.M.Chan Chan Devi	QUALITY NURSE	Chan Chan Devi
14	MS.L.SUNILA DEVI	CRITICAL CARE INCHARGE	Sunila Devi
15	MS.JHUMMA MUKHERJEE	DIALYSIS MANAGER	Jhumma Mukherjee
16	MR.GOPAL MAITY	OT MANAGER	Gopal Maity
17	MS.NIREEKSHANA ELISHA	INFECTION CONTROL NURSE	Nireekshana Elisha

DATE:TIME:12.02.25 AT 4.00PM.

MINUTES OF HOSPITAL INFECTION CONTROL COMMITTEE

NAME OF UNIT: FHKI Hospital, Kolkata-29

1. Date & Time: 12.02.2025 from 4:30 pm - 5:30 pm
2. Total no. of Members in the committee: 16
3. Number of members attended: 14
4. Chairman, convener & Mandatory Members present (Yes/No): Yes
5. Details of essential members who neither attended nor sent a representative: No
6. Agenda circulated 3 days prior to meeting (Yes/No): Yes.
7. Action Taken Report (ATR) of previous meeting: Yes.

S. No.	Actionable Item from previous meeting	Date when the actionable was first decided	Responsibility	Timeline	Remarks on closure with date when closed	Remarks on escalation to next higher committee (if the point was open for previous two meetings)
1	HEPA filter installation planned	23.11.2024	Maintenance team	15.02.2025	Particle count reports in hand and planned for filter changes. Once installation is complete perform leak test before	30.04.2025

					commissioning the ORs.	
2	OT scrub basin has unsterile water supply.	17.01.2025	Maintenance team	15.02.2025	RO water lines to be provided to the area once the new OT complex is built.	30.04.2025
3	Growth of <i>Pseudomonas</i> sp. in the RO water supply	17.01.2025	Maintenance team ICN	Immediate tank cleaning was planned by 19.01.2025.	Weekly water tank cleaning is being performed. Maintenance head and ICN to supervise the exercise.	Fresh water samples to be collected weekly till the issue is resolved.

Summary of discussion on Reports / documents of all essential Agenda items presented.

S. No.	Agenda Item	Updates / Points	Actionable	Responsibility	Timeline
1	MOS - HAI Concerns / Scores	MOS compliance: CAUTI – 98%, CLABSI, VAP – 100%, SSI – 99%. 4004-No date & Time stamp found on catheter secure area. 4006-No secure found over the catheter.	Spot teaching provided to allocated nurses and spot corrections made. Audit findings were closed on spot and Staffs given training on maintenance of invasive devices.	All concerned ICN Maintenance	15.03.2025

2	CESC – HAI Score / trend / Analysis / Concerns	VAP- 0 SSI- 0 CLABSI- 0 CAUTI: 0 HAI rate: 0	HAI surveillance process has improved. The Pathology lab is playing its part in providing culture data on a timely manner to the ICN.	ICN Lab ICO	With immediate effect.
3	BMW License / Vendor Agreement validity / regulatory reports status	All updated	ICN to supervise schedules and reports when available.	Head-Admin & HK. ICN	To be updated when next due.
4	Needle Stick Injury data / concerns	Sharp injury-1 / BBF – 0	All staffs to be encouraged to careful while handling of sharps and prompt self-reporting of blood/body fluid exposure cases for personal safety. Measure undertaken for prevention of NSI to be followed in all patient care areas, which needs to be continued.	ICN	Continuous compliance required.
5	Infection Control & BMW Trainings update	Improper disposal of biomedical waste in some areas.	Regular training of all staffs to continue with emphasis on biomedical waste disposal. Spot teaching during audit and notifying areas with repeated noncompliance.	HK team ICN.	Continuous training and monitoring
6	Surveillance reports	There have been bacterial growths found in the nursing hostels.	The Girl's and Boy's hostel overhead water tanks to be cleaned immediately and purifier filters to be changes asap.	ICN Maintenance	10.03.2025
7	Vaccination status update	Updated (7/7 staffs jabbed) – 100%	Hepatitis B vaccine availability has improved. HR to keep the ICN informed about newly joined staff details.	HR & ICN	Ongoing process

