



May 8, 2019

The Senior Environmental Engineer Camac Street Regional Office West Bengal Pollution Control Board Minority Bhawan (5th floor) Alipore Kolkata – 700 020

Submission of Annual Report in Form IV – Apollo Gleneagles Medical Centre (Formerly: Apollo Gleneagles Heart Centre), 48/1F Leela Roy Sarani, Ward No. 86, Kolkata – 700 019

Dear Sir,

In compliance with the Conditions in the Grant of Authorization No. 50/WBPCB-RO-I/AUTHORIZATION/15/2001 dated 21.11.2016 issued from your office, we are submitting the Annual Report for the period January 2018 to December 2018 in the prescribed format (Form – IV), duly filled in, required as per Section 13(1) of the Bio-medical Waste Management Rules, 2016.

Thanking you,

For Apollo Gleneagles Medical Centre

Rana Dasgupta Chief Executive Officer

Rana Dasyrpta

Encl. A/a

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Hospital: 58, Canal Circular Road, Kolkata - 700 054, Tel.: 91-33-2320-3040 / 2320-2122, Fax: 91-33-2320-5184 / 2320-5218

Gariahat Clinic: 48/1F, Leela Roy Sarani (Gariahat), Kolkata - 700 019, Tel.: 91-33-2461-8028 / 8079 / 8451 / 8547 / 9482 / 9483, Fax: 91-33-2461-8180

E-mail: hospital@apollogleneagles.in

CIN-U33112WB1988PLC045223

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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)]

S	I. Particulars		
N			
1	Particulars of the Occupier		
	(i) Name of the authorised person (occupier or :	:	
	operator of facility)	3	MR. RANA DASGUPTA
	Parado of facility)		CHIEF EXECUTIVE OFFICER
	(ii) Name of HCF or CBAWTF	1.	
	(iii) Address for Correspondence	-	APOLLO GLENEAGLES MEDICAL (E
	(iv) Address of Facility	-	58 CANAL CIRCULAR ROAD
	(v)Tel. No, Fax. No		48/1F, LEELA ROY SARANI KOLKATA - 700019
	(vi) E-mail ID	- :	(023) 24618028/8079; 24618181
	(vii) URL of Website		hospitale aprilogle nexglo. in
			WWW. apollogle neights. in
	(viii) GPS coordinates of HCF or CBMWTF		
	(iv) Owner 1: CYYON	:	(State Government or Private or
	(ix) Ownership of HCF or CBMWTF		Semi Govt. or any other) PRIVATE
		:	Authorisation
	(x). Status of Authorisation under the Bio-Medical	1	50/NTSPCB-RO-1/AUTHORIZATION/
	waste (Management and Handling) Rules		15/2001 valid up to 20/11/202
	(xi). Status of Consents under Water Act and Air	:	Valid up to: 200 /2000 00 TA
1	TICL		0/1437/2016; Yalid uph 30/11/202
1	Type of Health Care Facility	:	1 1/102
1	(i) Bedded Hospital		No. of Beds: 10
	(ii) Non-bedded hospital	-	10
	(Clinic or Blood Bank or Clinical Laboratory or		
	research institute or Veterinary Hospital or any	1	ALTERNATION DESIGNATION OF A
1	other)		The water consistence of their
(iii) License number and its date of expiry		24201052 0050 2126
	Details of CBMWTF		34204253 PATED 31.08.2016;
	(i) Number healthcare facilities covered by	:	0.00 G. Holling July 1. Ing. 1
(CBMWTF Covered by	:	
(i) No of beds covered by CBMWTF		A SERVICE TO BE A SERVED TO SERVED T
(i	ii) Installed treatment and discontinuity		
	ii) Installed treatment and disposal capacity of BMWTF:		Kg per day
1	v) Quantity of biomedical waste treated or disposed CBMWTF		Kg/day
71			SAMPLE SERVICE STATE OF THE SERVICE SE
-	ugatity of wests		
5	num (on monthly average basis)	: 1	Yellow Category : 103 Kas.

			White:		7	Kgo
	BH I		Blue Cat		The second second second second second	Kgp
	LIBE	BOTH HE	General :			
Details of the Storage, treatment, transport	rtatio	n, processing	and Dispos	al Faci	lity	
(i) Details of the on-site storage		Size :			#=	
(-)	Sul	Capacity:				
facility		Provision of	on cito at	orage	. (1	cold storag
		any other pro		orage	. (3111 3111115
		any other pre	JVISIOH)			
		Type of trea	atment	No	Cap	Quantity
disposal facilities		equipment	tettiwill.	of	acit	treatedo
CANTES OF BATHER STATE		equipment		unit	V	r
				S	Kg/	disposed
THE REAL PROPERTY OF THE PARTY					day	in kg
			den Line			per
The state of the s						annum
		Incinerator	S			
		Plasma Pyr				
		Autoclaves				
		Microwave				
		Hydroclave				
		Shredder	ALL SORE			
		Needle tip	cutter or			
		destroyer			-	
		Sharps				
		encapsulat	ion or		-	
		concrete p				
		Deep buria				
		Chemical				
		disinfectio	n:			
		Any other	treatment			
		equipment				
(iii) Quantity of recyclable wastes	:	Red Categor	y (like plas	tic, gla	ss etc.)	
sold to authorized recyclers after						
treatment in kg per annum.						
(iv) No of vehicles used for collection	:					
and transportation of biomedical						
waste						
(v) Details of incineration ash and			Quan	-		here
ETP sludge generated and disposed		THE STA	gener	rated	di	sposed .
during the treatment of wastes in Kg	1.0	Incineration	1			
per annum		Ash				
		ETP Sludge			1	
(vi) Name of the Common Bio-:		MEDIC	ARE	ENV	IRON	DENTAL
Medical Waste Treatment Facility	1	MANAG	COLENT	PUT	1-11	1

Operator through which wastes are disposed of (vii) List of member HCF not handed over bio-medical waste. Do you have bio-medical waste YES CATTACHED) management committee? If yes, attach minutes of the meetings held

during the reporting period Details trainings conducted on BMW

(i) Number of trainings conducted on BMW Management.

A TRAIMING SESSIONS DURING

	on BMW Management.	1 Section	PRAINING SESSIONS DULING
		10	The you wood ?
	(ii) number of personnel trained		12 STAFF
	(iii) number of personnel trained at the time of induction		ALL STAFF UNDERWENT TRAINING
	(iv) number of personnel not undergone any training so far		ALL STAFF UNDERWENT TRAINING
	(v) whether standard manual for training is available?		YES
	(vi) any other information)		
8	Details of the accident occurred during the year		NO MAJOR ACCIDENT OCCURRED
	(i) Number of Accidents occurred		
	(ii) Number of the persons affected		
	(iii) Remedial Action taken (Please attach details if any)		
	(iv) Any Fatality occurred, details.		
9.	Are you meeting the standards of air Pollution from the incinerator? How many times in last year could not met		
	the standards?		
	Details of Continuous online emission monitoring systems installed		
10	Liquid waste generated and treatment methods in place. How many times		STANDARDS MAINTAINED
	you have not met the standards in a year?		YEARLY REPORT ATTACHED
11	Is the disinfection method or sterilization meeting the log 4 standards? How many times you have not met the standards in a year?		
12	Any other relevant information		(Air Pollution Control Devices attached with the Incinerator)

RANA DASGUPTA
CHIEF EXECUTIVE OFFICER
Name and Signature of the Head of the Institution 08.05.2019 Kolkata KOLICATA 700 019

Date: