

Mohali

To

**Fortis Hospital** 

Sector 62, Phase-VIII Mobali - 160 062

Tel. 91-172-469-2222, 91-172-502-1222 Fax: 91-172-4692221, 91-172-509-6221

E-mail: contactus.mohali@fortishealthcare.com Website: www.fortishealthcare.com

Date, 27.01.2023

The Environmental Engineer,

Punjab Pollution Control Board,

Plot No. 55, Phase 2,

S. A. S. Nagar (Mohali).

Sub: Submission of Annual Bio-Medical Waste Report FY 2022 (1st Jan 2022 to 31st Dec 2022)

Dear Sir,

Please find enclosed the Annual Bio-Medical Report for the year 2022 with below mentioned enclosures.

- Annual Report Form IV
- 2. Accident Reporting Form 1
- 3. Annexure -1 for Biomedical waste details month wise for the year 2022
- 4. Annexure -2 for Needle stick injury details month wise for the year 2022

With Best Regards

**Authorized Signatory** 

For Fortis healthcare Ltd., Mohali

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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)]

| Particulars  |  | 4   |
|--|--|---|
| Particulars of the Occupier  | 1  | *   |
| (i) Name of the authorized person (occupier or : operator of facility)                                   | :  | Abhijot Singh.  |
| (ii) Name of HCF or CBMWTF   | :  | FORTU HEALTHCARE LIO  |
|  | :  | C/O FORTIS HOSPITAL, SECTOR 62  |
|  | :  | PHASE-8, MOHALI, SAS NAGAK (PB)   |
|  | :  | 0172-4692222  |
|  | :  | ABHIDIT. SINGH REFERTIS HEALTHCARG. COM   |
|  | :  | WWW. FORTUNEAUTHEARE.COM  |
|  |  | NL 30.413832 EL 76.434924   |
| (ix) Ownership of HCF or CBMWTF  | :  | (State Government or Private or Semi Govt. or any other)  |
| (x). Status of Authorization under the Bio-<br>Medical<br>Waste (Management and Handling) Rules          | •  | Authorisation No.:  BMW/RENEWAL/SAS/2019/9276266  Valid upto:31/23/2024   |
| (xi). Status of Consents under Water Act and Air   | :  | Valid upto: 31.03.2023  |
| Act  |  | 31.03.2023  |
| Type of Health Care Facility   | ;  | •   |
|  | :  | No. of Beds: 360  |
| (ii) Non-bedded hospital  Clinical Laboratory or Research Institute or Veterinary Hospital or any other) | :  | N/A   |
| (iii) License number and its date of expiry  | :  | NA  |
| Details of CBMWTF  | :  |   |
| (i) Number of health care facilities covered by CBMWTF   | :  | WA  |
| (ii) No. of Beds covered by CBMWTF   | ;  | NA  |
| (iii) Installed treatment and disposal capacity of CBMWTF;   | :  | Kg / day  |
| (iv) Quantity of bio medical waste<br>treated or disposed by CBMWTF                                      | :  | Kg / day  |
| Quantity of waste generated or disposed in Kg per Annum (on monthly average basis)                       | :  | Yellow Category: 96241-19/Anum 8020-10/MENTH<br>Red Category: 127/72.34/Annum 10597-68/MONTH<br>White: 2166.92/Annum, 180.58/MONTH.<br>Blue Category: 25286-05/ANUM 2107-17/MONTH<br>General Solid Waste: 11862163/ANUM 77454 Cent  |
| Details of the Storage, Treatment, Transporta  | tion.  |   |
| (i) Details of the on-site storage   | 1:   | Size: 450 -550 S&F  |
|  | Particulars of the Occupier  (i) Name of the authorized person (occupier or : operator of facility)  (ii) Name of HCF or CBMWTF  (iii) Address for Correspondence  (iv) Address of Facility  (v)Tel. No, Fax. No  (vi) E-mail ID  (vii) URL of Website  (viii) GPS coordinates of HCF or CBMWTF  (ix) Ownership of HCF or CBMWTF  (x). Status of Authorization under the Bio-Medical  Waste (Management and Handling) Rules  (xi). Status of Consents under Water Act and Air  Act  Type of Health Care Facility  (i) Bedded Hospital  (ii) Non-bedded hospital  Clinical Laboratory or Research Institute or Veterinary Hospital or any other)  (iii) License number and its date of expiry Details of CBMWTF  (i) Number of health care facilities covered by CBMWTF  (ii) No. of Beds covered by CBMWTF  (iii) Installed treatment and disposal capacity of CBMWTF;  (iv) Quantity of bio medical waste treated or disposed by CBMWTF  Quantity of waste generated or disposed in Kg per Annum (on monthly average basis) | Particulars of the Occupier  (i) Name of the authorized person (occupier or : operator of facility)  (ii) Name of HCF or CBMWTF  (iii) Address for Correspondence  (iv) Address of Facility  (v)Tel. No, Fax. No  (vi) E-mail ID  (vii) URL of Website  (viii) GPS coordinates of HCF or CBMWTF  (x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules  (xi). Status of Consents under Water Act and Air Act  Type of Health Care Facility  (i) Bedded Hospital  (ii) Non-bedded hospital  (iii) Non-bedded hospital  (iii) License number and its date of expiry  Details of CBMWTF  (ii) Number of health care facilities covered by CBMWTF  (iii) No. of Beds covered by CBMWTF  (iii) Installed treatment and disposal capacity of CBMWTF;  (iv) Quantity of bio medical waste treated or disposed by CBMWTF  Quantity of waste generated or disposed in Kg per Annum (on monthly average basis) |

|                 |         | facility  |   | Capacity: 75                            |                  |                             | prex.                            |
|-----------------|---------|---|---|---|------------------|-----------------------------|----------------------------------|
|                 |         |   |   | Provision of on                         |                  | ragě: (Co                   | old storage or                   |
| *************** |         |   |   | any other provi                         | sion)            |                             | 1.                               |
|                 | (ii)    | Disposal facilities   |   | Type of treatment equipment             | No of<br>Units   | Capacit<br>Kg/day           |                                  |
|                 |         |   |   | Incinerators                            |                  |                             |                                  |
|                 |         |   |   | Plasma<br>Pyrolysis                     | *                |                             | 1/                               |
| *               |         |   |   | Autoclaves                              |                  |                             | 1/                               |
|                 |         |   |   | Microwave                               |                  |                             |                                  |
|                 |         |   |   | Hydroclave                              |                  |                             | /                                |
|                 |         |   |   | Shredder                                |                  | /                           |                                  |
|                 |         |   |   | Needle tip<br>cutter or<br>destroyer    | <i>i</i> ·       | /                           |                                  |
|                 |         |   |   | Sharps                                  |                  | NA                          |                                  |
|                 |         |   |   | Encapsulation or concrete               |                  |                             |                                  |
|                 |         |   |   | pit                                     |                  | 1/                          |                                  |
|                 |         |   |   | Deep burial pits                        |                  |                             |                                  |
|                 |         |   |   | Chemical disinfection:                  |                  |                             |                                  |
|                 |         |   |   | Any other treatment equipment:          |                  |                             |                                  |
|                 | (iii)   | Quantity of recyclable wastes<br>sold to authorized recyclers after<br>treatment in Kg per annum                | : | Red Category (                          | like plas        | tic, glass,                 | etc.)                            |
|                 | (iv)    | No. of Vehicles used for<br>collection and transportation of<br>biomedical waste                                | : | _ N                                     | A —              |                             |                                  |
|                 | (v)     | Details of incineration ash and<br>ETP sludge generated and   |   |   | Quant<br>Gener   | 700                         | Where<br>disposed                |
|                 |         | disposed during the treatment of  |   | Incineration                            | 7                |                             |                                  |
|                 |         | wastes in Kg per annum  |   | Ash                                     |                  |                             |                                  |
|                 | 73      |   |   | ETP Sludge                              |                  | $\neg$                      |                                  |
|                 | (vi):   | Name of the Common Bio-<br>Medical Waste Treatment Facility<br>Operator through which wastes<br>are disposed of |   | MJS RAINBOOD<br>VILL - BALL<br>DLET. SA | YALI KI<br>SNAGA | HORDME<br>ALAP, T<br>AL (PB | WTS PUT. LTD<br>TEH - KHARA<br>) |
|                 | (vii)   | List of member HCF not handed over bio-medical waste.   |   |   | - NA             |                             |                                  |
| 6               | managem | ve bio-medical waste<br>ent committee? If yes, attach<br>f the meetings held during the<br>period               |   | MINUTES O                               | S<br>OF ME       | :<br>ETINGS                 | ATTACHED                         |

| 7  | Details trainings conducted on BMW  |   |
|----|---|---|
|    | (i) Number of trainings conducted on BMW Management   | 178 Nas .   |
|    | (ii) Number of personnel trained  | 17.59 2007 -  |
|    | (iii) Number of personnel trained at the time of induction  | 646 Nos.  |
|    | (iv) Number of personnel not<br>undergone any training so far   | NIL   |
|    | (v) Whether standard manual for training is available?  | YES   |
| 8  | Details of the accident occurred during the year  | MAJOR NIL   |
|    | (i) Number of Accidents occurred  | NEEDLE STICK INJURIES (96 MO)                                 |
|    | (ii) Number of persons affected   | 26 NUS CINTERNAL BENCHMARKS)                                  |
|    | (iii) Remedial Action taken (Please attach details if any)  | TRAINING PROVIDED.  |
|    | (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?     | YES ?   |
|    | Details of Continuous online emission monitoring systems installed  | NIL.  |
| 10 | Liquid waste generated and treatment<br>methods in place. How many times you<br>have not met the standards in a year?             | YES, AS PER STANDARD GLD NORMS.                               |
| 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, DISINFECTION METHOD, AS PER<br>NORMS ARE FOLLOWED        |
| 12 | Any other relevant information  | (Air Pollution Control Devices attached with the Incinerator) |

| Certified that the above report is for the period from | JANUARY 2022 TO                                   |
|--|---|
| 31st DECEMBER 2022                                     |   |
|  | 1   |
|  | Name and Signature of the Head of the Institution |
|  | Zonal Director                                    |
| Date: Place: Mempli                                    | Fortis Hospital Sector-62, Phase-VIII, Mohali     |
| Tidee.   |   |

# FORM – I [See rule 4(0), 5(i) and 15(2)]

# ACCIDENT REPORTING

| 1   | 1.  | Date and time of accident  | :         | NEEDLE STICK      | WYURY (ASPER ANNEXURE 2)  |
|-----|-----|--|-----------|-------------------|---|
| 4   | 2.  | Type of Accident   | :         | NEEDLE STICK !    | work  |
|     | 3.  | Sequence of events leading to accident   | :         | AS PER ANNEXU     | IPE 2_  |
|     | 4.  | Has the Authority of been informed immediately                                     | y:        | NIL               |   |
| ,   | 5.  | The type of waste involved in accident   | :         | MIL               |   |
| •   | 6.  | Assessment of the effects of the accidents on human health and the environment     | 1         | FOR SAFETY VA     | LLINATION DONG  |
|     | 7.  | Emergency measures taken   | :         | TRAINING PROVIDED | TO ALL HEALTH GIVEPS  |
| ٠   | 8.  | Steps taken to alleviate the effects of accidents                                  | ;         |                   | ogs/ TRAININGS with   |
| - 1 | 9.  | Steps taken to prevent the recurrence of such an accident                          | :         | CONTINUOUS T      | PATION  |
|     | 10. | Does you facility has Emergency Control police If yes, give details Any Kind OF E. | y?<br>nii | MOSPITAL HAS ERT  | THAZAMAT TEAMS TO DEAL<br>TY & SECURITY, ASPER NORMS                                |
| 17  | Da  | te :27[21/202]   |           | Signature         | Alland Ly   |
|     | Pla | ice : Manali   |           | Designation       | Abhijit Singh<br>Zonal Director<br>Fortis Hospital<br>Sector-62, Phase-VIII, Mohali |



# ANNEXURE - 1

Fortis Hospital Sector 62, Phase-VIII Mohali - 160 062

Tel.: 91-172-469-2222, 91-172-502-1222 Fax: 91-172-4692221, 91-172-509-6221 E-mail: contactus.mohali@fortishealthcare.com Website: www.fortishealthcare.com

Site, WWW.TOTUSTIE

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: Fortis Hospital Limited (Fortis Healthcare Limited)

Address of the Hospital

Name of the Hospital

: Mohali- Phase-8, Sector 62, SAS Nagar, Mohali.

Year

: 2022

### Details of Category wise, Biomedical Waste. (Kgs.)

| Category/Date     | de la liqu | gry.  | Yellow Ca | tegory | Cytoto  |      | Blue Cate | gory | White<br>Category |      |  |
|-------------------|------------|-------|-----------|--------|---------|------|-----------|------|-------------------|------|--|
| Month             | Weight     | Bags  | Weight    | Bags   | Weight  | Bags | Weight    | Bags | Weight            | Bags |  |
| Jan-22            | 7481.81    | 1645  | 6011.44   | 1701   | 110.49  | 25   | 1356.07   | 161  | 99.76             | 112  |  |
| Jan-22 (COVID19)  | 358.3      | 300   | 544.6     | 494    | 0       | -    | 23.7      | 17   | 5,2               | 6    |  |
| Feb-22 (COVID19)  | 294        | 212   | 462.3     | 388    | -       | -    | 45.4      | 9    | 10.2              | 8    |  |
| Feb-22            | 8289.495   | 1663  | 6365.38   | 1577   | 119.455 | 26   | 1531.685  | 185  | 131.075           | 123  |  |
| Mar-22 (COVID19)  | 47.3       | 30    | 51.5      | 33     | -       | -    | 5 7       | 2    | 2                 | 2    |  |
| Mar-22            | 10203.62   | 2158  | 7511.03   | 1932   | 126.795 | 27   | 2013.51   | 248  | 172.41            | 159  |  |
| Apr-22            | 10534.452  | 2084  | 7895.904  | 1813   | 149.87  | 36   | 2467.922  | 307  | 158.1             | 137  |  |
| May-22            | 10778.32   | 2275  | 7839.28   | 1889   | 200.45  | 56   | 2236.65   | 275  | 206.48            | 153  |  |
| Jun-22 (COVID19)  | 50.65      | 27    | 74.3      | 51     | *       |      | 9         | 3    | 4                 | 3    |  |
| Jun-22            | 10505.415  | 2118  | 7301.644  | 1654   | 199.717 | 56   | 2042.834  | 253  | 174.24            | 145  |  |
| Jul-22            | 11517.51   | 2496  | 8703.41   | 2075   | 205.76  | 57   | 2193.09   | 255  | 189.2             | 154  |  |
| Jul-22 (COVID19)  | 96.6       | 62    | 106.8     | 82     | -       |      | 17        | 8    | 3.5               | 5    |  |
| Aug-22            | 11772.634  | 2567  | 9035.826  | 2174   | 244.608 | 60   | 2338.702  | 266  | 224.906           | 171  |  |
| Aug 22 (COVID19)  | 81.5       | 64    | 96.75     | 71     |         | -    | 19        | 6    | 5.3               | 6    |  |
| Sep-22            | 12021.2    | 2491  | 8533.973  | 1796   | 220.7   | 52   | 2580.185  | 303  | 197.73            | 179  |  |
| Sept-22 (COVID19) | 19.7       | 11    | 27.5      | 15     | 0       | -    | 8         | 2    | 2                 | 2    |  |
| Oct-22 (COVID19)  | 4          | 1     | 3         | 2      |         |      |           | -    | -                 | -    |  |
| Oct-22            | 10359.1    | 2161  | 8101.39   | 1727   | 242.66  | 54   | 1985.48   | 245  | 181.95            | 125  |  |
| Nov-22            | 11069.74   | 2265  | 7423.73   | 1646   | 238.34  | 55   | 2197.43   | 256  | 198.01            | 134  |  |
| Dec-22 (COVID19)  | 9.4        | 3     | 8.4       | 4      | -       | -    |           |      | -                 |      |  |
| Dec-22            | 11677.59   | 2201  | 7840.04   | 1706   | 244.15  | 55   | 2215.39   | 272  | 200.858           | 155  |  |
| Total             | 127172,336 | 26834 | 93938.2   | 22830  | 2303    | 559  | 25286.05  | 3073 | 2166.92           | 1779 |  |

After generation, Segregation, Collection & Storage of Bio-Medical Waste, handed over to Authorized outsourced Agency M/s Rainbow Environment Pvt. Ltd., Village Balyali, Mohali for treatment & disposal as per PPCB norms.







A UNIT OF FORTIS HEALTHCARE LIMITED

Regd. Office: Fortis Hospital, Sector 62, Phase - VIII, Mohali - 160062 CIN No.: L85110DL1996PLC076704



# ANNEXURE - 2

| NEEDLE | STICK | INJURY | 2022 |
|--------|-------|--------|------|
|--------|-------|--------|------|

|      |           |                  |          |         |         |         | T                 | <u></u> | *1      |       | - 6  | NI.  | - 41 | . C. | ale      | Tain    |     |          |          |        |        | Cal   | cgo | HE         | OI      |    | THE               | IUC       |                 | TVC        |        | . 50                      | CK         |
|------|-----------|------------------|----------|---------|---------|---------|-------------------|---------|---------|-------|------|------|------|------|----------|---------|-----|----------|----------|--------|--------|-------|-----|------------|---------|----|-------------------|-----------|-----------------|------------|--------|---------------------------|------------|
|      |           |                  |          |         |         | Ar      | ea I              | Jist    | ribi    | itio  | 1 OI | Ne   | ear  | 2 50 | ICK.     | ınju    | Т   |          |          |        | N      | odl   | 2   | اماد       | Loi     | -  | $\neg$            |           | 4               | ٢          | _      |                           | -          |
| S.No | Month     | No. of<br>Injury | Ward A1  | Ward A3 | Ward A4 | Ward A6 | Sample Collection | ccn     | MICU    | NISCU | SICU | NICU | eicu | MSOT | Ortho OT | Daycare | PCR | Basement | РАТН ГАВ | Triage | Doctor | Nurse | GDA | Technician | Trainee | H. | Wrong segretation | Re-Caping | Wrong Practice- | Accidental | Splash | After use before disposal | Procedural |
| 1    | January   | 0                | 2        | _       | -       |         | U                 | Ŭ       | Since . | -     | 0,   |      |      |      |          |         |     |          |          |        |        |       |     |            |         |    |                   |           |                 |            |        |                           |            |
| 2    | February  | 4                | 1        | 1       | 1       |         |                   |         |         |       |      |      |      |      |          |         |     |          |          | 1      |        | 2     |     |            | 1       | 1  | 2                 | 1         | 1               |            |        |                           |            |
| 3    | March -   | 2                | -        | -       | -       |         | 1                 |         |         |       |      | 1    |      |      |          |         |     |          |          |        |        | 1     |     | 1          |         |    |                   | 1         |                 |            |        |                           | 1          |
| 4    | April     | 1                |          |         |         |         |                   |         | 1       |       |      |      |      |      |          |         |     |          |          |        |        | 1     |     |            |         |    |                   |           |                 |            |        |                           | 1          |
| -5   | May       | 2                |          |         |         |         |                   |         |         | 1     | 1    |      |      |      |          |         |     |          | ,        |        | 1      |       |     |            |         | 1  | 1                 |           |                 |            | 1      |                           |            |
| 6    | June      | 3                | 1        |         |         |         |                   |         | 1       |       |      |      |      |      | 1        |         |     |          |          |        |        | 2     |     |            |         | 1  | 1                 | 1         |                 |            |        | 1                         |            |
| 7    | July      | 2                | 1        |         |         |         | 1                 |         |         |       |      |      |      | 1    |          |         |     |          |          |        | 1      |       |     |            |         | 1  | 1                 |           |                 |            |        |                           | 1          |
| 8    | August    | 1                |          |         |         |         | -                 |         | 1       |       |      |      |      |      |          |         |     |          |          |        |        | 1     |     |            |         |    |                   |           | 1               |            |        |                           |            |
| 9    | September | 2                |          |         |         | 1       |                   |         |         |       |      |      |      |      |          |         |     |          |          | 1      |        | 2     |     |            |         |    |                   |           |                 | 2          |        |                           |            |
| 10   | October   | 4                |          |         |         | 1       | 1                 |         |         |       |      |      |      |      |          | 1       |     | 1        | 1        |        |        | 1     |     | 1          | 1       | 1  | 1                 |           | 1               |            |        |                           | 2          |
| 11   | November  | 2                | 1        |         |         | +       |                   | 1       |         |       |      |      |      |      |          |         |     |          |          |        |        | 0.5   | 1   |            |         | 1  | 1                 |           | 1               |            |        | 1                         |            |
| 12   | December  | 3                | <u> </u> |         |         |         |                   |         |         | 1     |      |      | 1    |      |          |         | 1   |          |          |        |        | 2     |     |            |         | 1- | 2                 |           |                 | 1          |        |                           |            |
| 12   | Total.    | 26               | 3        | 1       | 1       | 2       | 2                 | 1       | 3       | -     | 1.,  | 1    | 1    | 1    | 1        | 1       | 1   | 1        | 1        | 2      | 2      | 12    | 1.  | . 2        | 2       | 7  | 9                 | 3         | 4               | 3          | 1      | 1                         | 5          |

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## MINUTES OF MEETING

# FHM-BMW COMMITTEE (27 May. 2022)

NAME OF UNIT - Fortis Hospital Mohali

Venue-Board room

# NAME OF COMMITTEE: Bio-Medical Waste Committee

- 1. Date & Time: 27.5.2022 (12pm 1pm)
- 2. Total no. of Members present in the meeting: 10
- 3. Agenda circulated prior to meeting (Yes/No): Yes

#### List of Attendees:

- 1. Dr. Anita Sharma-Infection Control Officer, Lab Head -BMW Chairperson
- 2. Dr Shweta Prabhakar, Head Quality
- 3. Mrs Madhavi Chikale, CNO
- 4. Joice Thomas ACNO
- 5. Rajesh Sharma- Housekeeping Head
- 6. Neeraj Tandon Engineering Head
- 7. Sheila Kispotta -ICN
- 8. Kiranpreet Kaur-ICN
- 9. Dr. Apra Kalra
- 10. Rajbir kaur-DCON

#### **AGENDA**

1. Update on the progress made from the last minutes of meeting.

### New Additions /Concerns

- BMW mixing found frequently in all areas.
- Any statutory compliances to be followed in the coming months- Mr. Neeraj to apprise.
- Vaccination status- Ongoing
- Mandatory trainings on BMW- Compliance at FHM and FMC
- Needles are discarded in sharp boxes
- Inside and surface cleaning of waste bins compromised.
- BMW poster needs update as per change in SOP (general waste-green colour to blue)

Mr

 The following points were discussed and responsibilities and timelines were agreed as in the table below.

| S.No.  | Issues                           | Discussion   | Responsibility                   | Expected<br>Closure<br>Date | Remarks  |
|--------|----------------------------------|--|----------------------------------|-----------------------------|--|
| Issues | from previ                       | ous meeting  |                                  |                             | *  |
| 1      | TT &<br>HBV<br>Status            | Vaccination Registers in the areas to be updated with new joiners and doctors. Chicken pox status to be added. | IC Team/<br>Nursing<br>Incharges | Ongoing                     | Chicken Pox<br>vaccination/previous<br>history added to<br>nursing vaccination<br>registers. |
| 2.     | Training<br>on Hub<br>Cutters    | Re-<br>enforcement/on<br>hands training<br>on Hub cutters  | IC Team/<br>Nursing<br>Incharges | Ongoing                     | Training ongoing   |
| New A  | dditions/ C                      | Concerns   | 32.000                           |                             | 300 30 30 30 30  |
| 1      | BMW<br>mixing<br>in blue<br>bins | Mask, caps and gloves are being discarded in blue bins.  BMW segregation trainings to be reinforced            | HK/IC<br>Team/Nsg<br>Incharges   | Immediate                   | Training ongoing   |

| 2 | Quality<br>of Hub<br>cutters | New Needle<br>hub cutters<br>were available<br>and quality very<br>good | Purchase HOD | closed | All areas used hub cutters. |
|---|------------------------------|---|--------------|--------|-----------------------------|
|---|------------------------------|---|--------------|--------|-----------------------------|

Date and Time of Next Meeting: To be arranged in the month of Nov 2022.

Signature of Chairman and Secretary

(Chairman)

Kiranprearkaurull Lur'.
(Secretary)

Mr

|  |  |  |  |           | 32            |
|--|--|--|--|-----------|---------------|
|  |  | -  |  |           | TΕ            |
|  |  | S. S   |  |           | 30            |
|  |  |  |  |           | 57            |
|  |  |  |  |           | 28            |
|  |  |  |  | 70E       | 17.           |
|  |  |  |  | ( P       | 97            |
|  |  |  | 12/ 1 1/2  |           | 52            |
|  |  | The state of the s | (A)  |           | 74            |
|  | V. Taranta   | * *  |  |           | 23            |
|  |  |  |  |           | 77            |
|  |  |  |  |           | 17            |
|  |  |  |  |           | 07            |
|  |  |  |  |           | 61            |
|  |  |  |  |           | 81            |
|  |  |  |  |           | 11            |
|  | 1  |  |  |           | 91            |
|  |  |  |  |           | SI            |
|  |  |  |  |           | 14            |
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## MINUTES OF MEETING

## FHM-BMW COMMITTEE (10 Dec. 2021)

NAME OF UNIT - Fortis Hospital Mohali

Venue-Board room

#### NAME OF COMMITTEE: Bio-Medical Waste Committee

- 1. Date & Time: 10.12.2021 (2:30pm 3:30pm)
- 2. Total no. of Members present in the meeting: 11
- 3. Agenda circulated prior to meeting (Yes/No): Yes

#### List of Attendees:

- 1. Air Marshal Dr R. Ranyal (Medical Director)
- 2. Dr. Anita Sharma-Infection Control Officer, Lab Head -BMW Chairperson
- 3. Dr Shweta Prabhakar, Head Quality
- 4. Mrs Madhavi Chikale, CNO
- 5. Joice Thomas ACNO
- 6. Rajesh Sharma- Housekeeping Head
- 7. Neeraj Tandon Engineering Head
- 8. Sheila Kispotta -ICN
- 9. Kiranpreet Kaur-ICN
- 10. Pooja Kumari-ICN
- 11. Dr. Apra Kalra

#### **AGENDA**

1. Update on the progress made from the last minutes of meeting.

## New Additions /Concerns

- BMW mixing in blue bins
- Quality of Hub cutters & way forward-under discussion
- Any statutory compliances to be followed in the coming months- Mr Neeraj to apprise.
- Vaccination status-Ongoing
- Mandatory trainings on BMW- Compliance at FHM and FMC

Mr

The following points were discussed and responsibilities and timelines were agreed as in the table below.

| S.No.  | Issues                        | Discussion   | Responsibility                   | Expected<br>Closure Date | Remarks  |
|--------|-------------------------------|--|----------------------------------|--------------------------|--|
| Issues | from previous                 | meeting  |                                  |                          |  |
| 1      | TT & HBV<br>Status            | Vaccination Registers in the areas to be updated with new joiners and doctors. Chicken pox status to be added. | IC Team/<br>Nursing<br>Incharges | Ongoing                  | Chicken Pox<br>vaccination/previous<br>history added to<br>nursing vaccination<br>registers. |
|        |                               |  |                                  |                          | 7  |
| 2.     | Training on<br>Hub<br>Cutters | Re-<br>enforcement/on<br>hands training<br>on Hub cutters  | IC Team/<br>Nursing<br>Incharges | Ongoing                  | Training ongoing   |
| New A  | dditions/ Cond                | erns   |                                  | L                        |  |
| 1      | BMW<br>mixing in<br>blue bins | Mask, caps and gloves are being discarded in blue bins.  BMW segregation trainings to be reinforced            | HK/IC<br>Team/Nsg<br>Incharges   | Immediate                | Training ongoing   |



| 2  | Quality of<br>Hub<br>cutters                               | The blade is getting blunt or broken after a few mutilations rendering it useless.  Newer options have to be explored and the same has been informed to the Purchase department | Purchase HOD          | July 2021 | Still in discussion                                    |
|----|--|---|-----------------------|-----------|--|
| 3. | Medication<br>trays are<br>not being<br>used<br>frequently | Medication tray usage to be reinforced to advocate safe injection practises and proper BMW segregation.   | Nsg<br>Incharges/ICNs | Immediate | ANTT Trays were distributed in all ICU.  Point Closed. |

Date and Time of Next Meeting: To be arranged in the month of May 2022.

Signature of Chairman and Secretary

Dr Anita Sharma

(Chairman)

Kiranpreet Kaur (Secretary)

|       |           |                    | FHL Training Attend | ance Sheet  |  |                |
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