

Fortis Hospitals Limited

I54/9, Bannerghatta Road,
Opp. IIM-B, Bangalore - 560 076
Tel:+91-80-6621 4444, 2254 4444.
Fax:+91-80-6621 4242.
care.bng@fortishealthcare.com
www.fortishealthcare.com
CIN No. U93000DL2009PLC222166

Date: 27-06-2017

To

The Environmental officer
Karnataka State Pollution Control Board
Bommanahalli Division
2nd Floor, Nisaraga Bhavan,
Thimmaiah Road, Shivanagar, Rajajinagar
Bangalore – 560010

Respected Sir,

Sub:-Submission of Bio Medical waste annual report for region form January 2016 to December 2016

Please find enclosed the annual report from Jan-2016 to Dec-2016 of bio medical waste generated and disposed by M/s.Fortis Hospitals limited, Bannerghatta road Bangalore duly filled in Form –IV

Kindly acknowledge the same and oblige.

Thanking You

For Fortis Hospitals Ltd

Authorized Signatory







Form – IV (See rule13) ANNUAL REPORT

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[To be submitted to the prescribed authority on or before 30 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)]

S1.			
No	Particulars		
	Particulars of the Occupier	:	
	(i) Name of the authorised person (occupier or : operator of facility)		Dr Manish Mattoo
	(ii) Name of HCF or CBMWTF	:	Fortis hospitals hannerghatta road Bangalore 560076
	(iii) Address for Correspondence	:	
	(iv) Address of Facility		Fortis Hospitals Limited 154/9, Bannerghattha road, Opp-IIM,Bangalore-76
	(v)Tel. No, Fax. No	:	080-66214444
	(vi) E-mail ID		ganesh.hegde@fortishealthcare.com
2	(vii) Website		www.fortishealthcare.com
	(viii) GPS coordinates of HCF or CBMWTF		Eco Maridi industries
	(ix) Ownership of HCF or CBMWTF		Private Limited

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	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorization No.:KSPCB/BMW/HCE/2015- No.: 16, 93936 VALID TILL:- 30.06.2018
	(xi). Status of Consents under Water	:	Valid up to:14.11.2021
	Act and Air Act		
	Type of Health Care Facility		Multispecialty Hospital
2.	(i) Bedded Hospital	:	No. of Beds- 276
	(ii) Non-bedded hospital Laborator (Clinic or Blood Bank or Clinical y	:	
	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	1	
	CBMWTF .		
	(ii) No of beds covered by CBMWTF	:	
	(iii) Installed treatment and disposal capacity of		Kg per day
	CBMWTF:		

				a	
	(iv) Quantity of biomedical water treated or disposed by CBMWTF	vaste	:	Kg/day	2 (*)
4.	Quantity of waste generated of disposed in Kg per	or	:	Yellow Category	81565 kg
	annum (on monthly average l	hacie)		Red Category:	100527 kg
	aman (on monthly average (Jasis)		White:	16684 kg
				Blue Category :	,
				General Solid waste:	
5	Details of the Storage, treatm	ent, tra	ansportatio	on, processing and Dis	sposal Facility
	on- (i) Details of the site storage		Size :	97 14 15	E E
	facility	:	Capacity:		
	\$ a #			of on-site storage : (provision)	cold storage or
					¥

,	disposal facilities	Type of treatment equipment	No of	Cap	Quantity treatedo	
			unit	У	r	
			s	Kg/	disposed	
				day	in kg per	
			-			

	annum
	Incinerators
	Plasma Pyrolysis
	Autoclaves
	Microwave
	Hydroclave
	Shredder
	Needle tip cutter or
	destroyer Sharps -
	encapsulation or concrete pit -
	Deep burial pits:
,	Deep build pits.
	Chemical disinfection:
	Any other treatment equipment:
2 2	
E 2	947.7
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(iii) Quantity of recyclable wastes sold to	: Red Category (like plastic, glass etc.)
authorized recyclers	
after treatment in kg per	
annum.	
100	
(iv) No of vehicles used for collection and	
transportation of	
biomedical	One Authorized vehicle daily
waste	
(v) Details of	Quantity Where
incineration ash and	
ETP sludge generated and disposed	generated disposed
during the treatment of	Incineration
wastes in Kg	memeration
	Ach
per annum	ACR

1	A 11 - 1	T	
	Accidents occurred		
	(ii) Number of the persons affected		06
	(iii) Remedial Action taken (Please attach details if any)		Appropriate counselling and post exposure follow-up done by Infection control team
	(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 you have not met the standards in a year?		
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)

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	Name and Signature of the Head of the Institution
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