

To,

Date 13-06-2024


Regional Officer
UP Pollution Control Board
Sector-1, Noida.

Subject: Annual Report of bio Medical Waste for 2023.

Respected Sir,

With Reference to the above mentioned subject, please find the enclosed duly filled Form IV pertaining to the annual return for the year January 2023 to December 2023.

Regards,


Raj Kumar Raina
Unit Head
Apollo hospital
E-2, Sec-26, Noida

Recd
M
13-06-24
उप प्रो. पर्यावरण नियंत्रण बोर्ड
E-2, सेक्टर-26, नोएडा



Apollo Hospitals, E - 2, Sector 26, Noida - 201 301 (U.P.)
Helpline Number : 0120-4012000 | Emergency Number : 0120-4012010
Email : info@apollohospitals.com
NABH & NABL Accredited
Your friendly neighbourhood hospital

Keep the records carefully and bring them along with you

Form - IV

(See rule 13)

ANNUALREPORT

[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 authorized person (occupier or operator of facility)	:	Raj Kumar Raina
	(ii) Name of HCF or CBMWTF	:	Apollo Hospitals Noida
	(iii) Address for Correspondence	:	E-2, Sec-26, noida
	(iv) Address of Facility	:	E-2, Sec-26, noida
	(v) Tel. No, Fax. No	:	0120-4012000
	(vi) E-mail ID	:	Engg_noida@apollohospitals.com
	(vii) URL of Website	:	https://noida.apollohospitals.com/
	(viii) GPS coordinates of HCF or CBMWTF	:	
	(ix) Ownership of HCF or CBMWTF	:	(State Government or Private or Semi Govt. or any other)
	(x). Status of Authorization under the Bio-Medical Waste (Management and Handling) Rules	:	Authorization No.: 21741716, 03.08.2023 valid up to 31.07.2026
(xi). Status of Consents under Water Act and Air Act	:	Valid up to:31.07.2026	
2.	Type of Health Care Facility	:	
	(i) Bedded Hospital	:	No. of Bed: 75 Beds
	(ii) Non-bedded hospital	:	
	(Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)	:	
(iii) License number and its date of expiry	:	21741716, 31.07.2026	
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:	:	_____ Kg per day... NA
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	:	_____ Kg/day..NA
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)	:	Yellow Category : 6309.69 kg
		:	Red Category : 9109.70 Kg
		:	White: 809.93 Kg
		:	Blue Category : 2063.76 Kg
		:	Cytotoxic Waste 1822.41 Kg
		:	General Solid waste:

5	Details of the Storage, treatment, transportation, processing and Disposal Facility				
	(i) Details of the on-site storage facility	Size :			
		Capacity :			
Provision of on-site storage : (cold storage or any other provision)					
Disposal Facilities	M/s Enviorn waste connections LLP BN-102-104, Phase-III, M.G. Road, UPSIDC Industrial Area, Ghaziabad ,201015	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 Sharps encapsulation or concrete pit Deep burial pits: Chemical disinfection: Any other treatment equipment:			
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum.		Red Category (like plastic, glass etc.)			
(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	Quantity generated	Where disposed	
(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of		ETP Sludge	45 Kg	NA	
(vii) List of member IICF not handed over bio-medical waste.		M/s Enviorn waste connections LLP BN-102-104, Phase-III, M.G. Road, UPSIDC Industrial Area, Ghaziabad ,201015			
		NA			
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	Documents Attached			

7	Details trainings conducted on BMW		
	(i) Number of trainings conducted on BMW Management.		Documents Attached
	(ii) number of personnel trained		Documents Attached
	(iii) number of personnel trained at the time of induction		Documents Attached
	(iv) number of personnel not undergone any training so far		Documents Attached
	(v) whether standard manual for training is available?		Documents Attached
	(vi) any other information)		Documents Attached
8	Details of the accident occurred during the year		
	(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?		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	:	(Air Pollution Control Devices attached with the Incinerator): NA

Certified that the above report is for the period from

Annual report from January 2023 to December 2023


Name and Signature of the Head of the Institution

Date: 13.06.2024
Place: NOIDA

Hospital: Apollo Hospitals Noida Period: 01-2023 : 12-2023

Sl No.	Month	Yellow Bags		Red Bags		Blue Mark Box		Whites		Cytotoxic Bags		Covid Yellow Bags		Total	
		Count	Weight	Count	Weight	Count	Weight	Count	Weight	Count	Weight	Count	Weight	Count	Weight
1	Jan-23	134	438.95	198	667.20	49	186.75	63	86.70	22	47.52	0	0	466	1427.12
2	Feb-23	143	403.83	188	542.86	41	127.12	53	53.27	33	102.46	0	0	458	1229.54
3	Mar-23	146	614.3	203	900.12	45	137.23	45	81.93	56	198.02	0	0	495	1931.60
4	Apr-23	149	582.39	186	823.47	59	201.11	69	104.1	53	188.8	0	0	516	1899.87
5	May-23	164	764.82	171	836.57	55	174.16	52	71.82	65	238.7	0	0	507	2086.07
6	Jun-23	136	437.22	208	737.27	47	179.77	52	52.46	41	124.2	0	0	484	1530.92
7	Jul-23	160	503.01	235	788.92	53	192.37	59	48.68	37	126.15	0	0	544	1659.13
8	Aug-23	146	623.97	200	924.19	47	158.69	50	60.06	48	205.61	0	0	491	1972.52
9	Sep-23	156	630.73	204	898.95	50	171.08	53	67.28	54	187.82	0	0	517	1955.86
10	Oct-23	128	383.77	193	592.12	62	231.83	72	68.27	33	90.36	0	0	488	1366.35
11	Nov-23	118	423.79	153	631.87	37	143.35	46	48.47	42	131.53	0	0	396	1379.01
12	Dec-23	124	502.91	162	766.16	40	160.3	49	66.89	50	181.24	0	0	425	1677.50
Total		1704	6309.69	2301	9109.70	585	2063.76	663	809.93	534	1822.41	0	0.00	5787	20115.49



UTTAR PRADESH POLLUTION CONTROL BOARD

TC-12V, Vibhuti Khand, Gomti Nagar, Lucknow-226010

Phone:0522-2720828, 2720831 Fax:0522-2720764

Email: info@uppcb.com Website: www.uppcb.com

FORM III (See Rule 10) AUTHORISATION

(AUTHORISATION FOR OPERATING A FACILITY FOR COLLECTION, RECEPTION, TREATMENT, STORAGE, TRANSPORT AND DISPOSAL OF BIOMEDICAL WASTES)

1. File no. of authorisation and date of issue: No:- 21741716 and Date:-03/08/2023
2. M/s APOLLO HOSPITAL, RAJ KUMAR RAINA an occupier or operator of the facility located at E-2, Sector-26, Noida, GAUTAM BUDDHA NAGAR, 201301 is hereby granted an authorisation for:

Generation, segregation

Collection



Storage

Transportation



Reception

Use

Recycling

Offering for sale

Packaging

Transfer

Treatment or Processing or Conversion

Disposal or destruction

Any other form of handling

3. M/s APOLLO HOSPITAL is hereby authorized for handling of biomedical waste as per the capacity given below:
 - (i) Number of beds of HCF: 75
 - (ii) Number of health care facilities covered by CBMWTF: .
 - (iii) Installed treatment and disposal capacity: .
 - (iv) Area or distance covered by CBMWTF: .
 - (v) Quantity of Biomedical waste handled, treated or disposed: .
4. This authorisation shall be in force for a period of 3 Years from the date of issue.
- 4.1 The authorization shall be valid for till 31/07/2026
5. This authorisation is subject to the conditions stated below and to such other conditions as may be specified in the rules for the time being in force under the Environment (Protection) Act, 1986

SATYA Digitally signed
by SATYA VIJAY
VIJAY Date: 2023.08.04
20:18:15 +05'30'
Regional Officer

Specific Conditions:

1. This authorisation shall be in force for a period up to 31-07-2026.
2. HCF shall ensure to get membership agreement from register CBWTF from the Board and also check the validity of CTO & BMW authorization of CBWTF.
3. The Validity of authorisation for bedded health Care Facility shall be synchronised with the validity of the consents.
4. The authorization shall comply with the provisions of the Environment (Protection) Act, 1986 and the rules made there under.
5. The authorization or its renewal shall be produced for inspection at the request of an officer authorized by the prescribed authority.
6. The person authorized shall not rent, lend, sell, transfer or otherwise transport the biomedical wastes without obtaining prior permission of the prescribed authority.
7. Any unauthorized change in personnel, equipment or working conditions as mentioned in the application by the person authorized shall constitute a breach of his authorization.
8. It is the duty of the authorized person to take prior permission of the prescribed authority to close down the facility and such other terms and conditions may be stipulated by the prescribed authority.
9. The Bio- Medical waste shall be segregated into containers or bags at the point of generation in accordance with schedule I prior to its storage, transportation, treatment.
10. The containers or bags referred to in sub-rule (2) shall be labelled as specified in schedule IV.
11. The occupier shall ensure that bio- medical waste generated in hospital is handled without any adverse effect to human health and the environment.
12. If a container is transported from the premises where bio-medical waste is generated to any waste treatment facility container shall, apart from the label prescribed in schedule IV, also carry information in schedule IV.
13. Bio-medical waste shall not be mixed with other waste.
14. No untreated bio-medical waste shall be kept beyond a period of 48 Hrs. If it becomes necessary to store beyond 48 Hrs. The authorized person must take permission from the prescribed authority to ensure that it does not adversely affect human health and the environment.
15. As per Bio-Medical Waste Management, Rules 2016 and its amendment the hospital install Bar Coding Facility.
16. The occupier shall submit an annual report to the prescribed authority in form IV by 30th June every year, to include information about the categories and quantities of Bio-medical waste handled during the preceding year.
17. This authorization shall be valid subject to the validity of agreement with the Common Bio Medical Waste Treatment Facility .Renewed agreement should be submitted before the expiry of existing agreement.
18. The occupier shall maintain a record to the generation, collection, reception, storage, transportation, treatment, disposal and or any form of Bio-medical waste in accordance with these rules and verification by the prescribed authority at anytime.
19. The occupier shall ensure the Mercury Spillage Management within the Hospital/Nursing Home etc due to breakages of thermometers, pressure & other measuring equipment as the spilled mercury does not become part of bio-medical or other solid wastes generated from the health care facilities.
20. Bar code system for bags or container containing bio-medical waste to be send out of the premises or place for any purpose should be submitted within 15 days.
21. The occupier shall ensure that waste water generated from the hospital shall be treated as per norms and should obtain consent to operate, under provision of Water (Prevention & Control of Pollution) Act, 1974 under section 25/26 and Air (Prevention & Control of Pollution) Act, 1981 under section 21/22.
22. It is within powers and function of the U.P. Pollution Control Board to modify/revoke the terms and



मिशन LiFE - पर्यावरण के लिए जीवन शैली
(Lifestyle For Environment)
जनसहभागिता का सन्देश



- स्वच्छता – देशसेवा में अपने परिवेश की स्वच्छता हेतु अपना सक्रिय योगदान सुनिश्चित करें
- संकल्प लें -एकल उपयोग प्लास्टिक उत्पाद जैसे कप, तश्तरी, चम्मच, स्ट्रॉ, ईयरबड्स आदि का उपयोग न हो एवं पर्यावरण अनुकूल विकल्पों जैसे कागज/पत्तों से बने बोने या कटलरी को प्राथमिकता दी जाय ।
- एकल उपयोग प्लास्टिक उत्पाद के प्रयोग को रोकने एवं प्लास्टिक बैग के वजाय कपड़े के थैले का उपयोग करने मात्र से 375 मिलियन टन टोस (प्लास्टिक) कचरे का उत्सर्जन बचाया जा सकता है
- चक्रीय अर्थव्यवस्था (सर्कुलर इकोनॉमी) का समुचित कार्यान्वयन वर्ष 2030 तक लगभग 14 लाख करोड़ रुपये की अतिरिक्त बचत उत्पन्न कर सकता है । वेस्ट /अपशिष्ट फेंकने के पूर्व सोचें, ये किसी का संसाधन तो नहीं ...?
- अनुपयोगी इलेक्ट्रिक / इलेक्ट्रॉनिक उत्पाद को कचरे में फेंकने से रुकें । इसके उपयुक्त निस्तारण हेतु इसे प्राधिकृत ई – वेस्ट रीसाइकलर को दें । प्राधिकृत ई-रीसाइकलिंग इकाई में अनुपयोगी इलेक्ट्रिक / इलेक्ट्रॉनिक उत्पाद को देने मात्र से 0.75 मिलियन टन तक ई-कचरे का पुनर्चक्रण किया जा सकता है एवं ई-कचरे के विषम पर्यावरणीय दुष्प्रभाव से बचा जा सकता है
- बाहर जाते समय - सोचें कि क्या आपको वास्तव में परिवहन की आवश्यकता है - वह भी क्या व्यक्तिगत रूप में ? छोटी दूरी के लिए पैदल चलना पसंद करें, अथवा सम्भव हो तो कार पूल के रूप में संसाधन को साझा करें अथवा सार्वजनिक परिवहन पर विचार करें
- घरेलू स्तर पर कम से कम टोस अपशिष्ट का उत्सर्जन करें और इनका श्राद्धीकरण करें
- उपयोगी शेष खाद्य सामग्री आपके स्वयं प्रयास अथवा निकटस्थ सक्रिय स्वयं सेवी संस्थाओं की सहायता से समाज के वंचित वर्ग तक पहुंचाई जा सकती है । वहीं अनुपयोगी भोजन /खाद्य सामग्री को कंपोस्ट (वर्मी कम्पोस्ट) करने से 15 अरब टन भोजन को नष्ट होने से बचाया जा सकता है
- ध्यान रखें - उपयुक्त नल और शावर के उपयोग से पानी की खपत को 30 - 40% तक कम किया जा सकता है। एवं उपयोग में न होने पर नलों को बंद रखने मात्र से 9 ट्रिलियन लीटर पानी बचाया जा सकता है
- ट्रैफिक लाइट/रेलवे क्रॉसिंग पर कार/स्कूटर के इंजन बंद करने मात्र से 22.5 विलियन kWh तक ऊर्जा की बचत हो सकती है
- परम्परागत बल्ब के स्थान पर CFL का उपयोग बिजली की खपत में प्रभावी कमी लाते हैं । उपयोग में न होने पर बिजली उपकरणों को बंद करें । स्टार रेटेड विद्युत उपकरणों के उपयोग को प्राथमिकता दें

हमारे द्वारा अपनी जीवन शैली की प्राथमिकताओं का उचित और पर्यावरण अनुकूल पुनर्निर्धारण समाज और पर्यावरण के प्रति हमारा दायित्व है ।

MEETING MINUTES

Committee Name:	Infection Control Committee		
Date of Meeting:	12.4.2024	Time:	
Location:	MS Office	Start:	3:00pm
Minutes Prepared By:	R/N Suby - ICN	End:	4:00 pm
Presided by:	MS.Beena Valson (NS)		

1. Attendance at Meeting (add rows as necessary)

Ms.Beena Valson	Mr.Vinod Kumar
Dr. Neha Minocha	Mr.Vikas
Dr.Vishal Gupta	Mr.Ram Nandan Raut
Dr.Krutali Chauhan	
R/N Suby Varghese	
Mr.Kailash Chand	
Ms.kamlesh Bisht	
Mr.Selvakumar	
Ms.Bibha Kumari	
S/N.Sreemol k Suresh	
R/N.Chhama	

Committee Name:	Infection Control Committee		
Date of Meeting:	12.4.2024	Time:	
Location:	MS Office	Start:	3:00pm
Minutes Prepared By:	R/N Suby - ICN	End:	4:00 pm
Presided by:	MS.Beena Valson (NS)		

2. Meeting Agenda

- 1.HAI Data
2. BMW Audit
3. Needle Stick Injury
4. Training
- 5.Surveillance Reports
- 6.Vaccination Record (HK & F&B)
- 7.AMSP
- 8.FOGGING DATA

3. Previous meeting discussions/ follow ups (if any):

1. HAI Data
2. Antibiotic RE - Dosing
3. BMW Audit
4. Needle Stick Injury
5. Training
6. Surveillance Reports
7. Vaccination Record (HK & F&B)

4. Action Items/ Decision tracker *(add rows as necessary)*

Key Issues Discussed	Root Cause Identified	Agreed Action/ Decision	Assigned To/ Responsibility	Due Date	Follow up Status
Previous Meeting point discussion MARCH 2024					
HAI DATA	HAI - NIL, HAND HYGINE DATA 96% PROPHYLACTIC ANTIBIOTIC DATA 99.14% MDRO - 01 PATIENT	NA	ICN	NIL	Continuous Process
ANTIBIOTIC RE - DOSING	ANTIBIOTIC RE - DOSING NOT GIVEN WHEN SURGERY LASTING > 4 HOURS.	SENSITIZATION OF THE CONCERN CONSULTANT TO BE DONE.	ICO & MS	15.4.2024	PENDING
BIO MEDICAL WASTE MANAGEMENT AUDIT	BMW DISPOSAL PROPERLY NOT DONE,	DAILY MONITORING TO BE DONE BY ICN BMW MANAGEMENT TRAINING -EVERY MONTH.	HK ON DUTY, HK SUPERVISOR & ICN	DAILY BASIS MONITORING TO BE DONE BY ICN.	CLOSED
ICNC 2.0 TRAINING	TRAINING GIVEN TO STAFFS	TRAINING TO BE GIVEN TO STAFF ABOUT VARIOUS TOPICS.	ICN	Continuous Process	Continuous Process
MONTHLY SURVEILLANCE	MONTH OF FEB - 2024 SURVEILLANCE REPORT WAS SATISFACTORY	ONCE IN A MONTH SURVEILLANCE TO BE DONE IN ALL CRITICAL CARE ARES.	ICN	Continuous Process	Continuous Process

4. Action Items/ Decision tracker *(add rows as necessary)*

Key Issues Discussed	Root Cause Identified	Agreed Action/ Decision	Assigned To/ Responsibility	Due Date	Follow up Status
Previous Meeting point discussion MARCH 2024					
VACCINATION FOR HK STAFF & FOOD HANDLERS	VACCINATION DATA NOT SUBMITTED FROM HK & F&B.	DATA TO BE SUBMITTED	MR.VIKAS / MR.RAJEEV SHARMA (APOLLO SINDOORI) & MR.SAURABH (HK MANAGER)	15.4.2024	PENDING

4. Action Items/ Decision tracker (add rows as necessary)

Key Issues Discussed	Root Cause Identified	Agreed Action/ Decision	Assigned To/ Responsibility	Due Date	Follow up /Status
MEETING POINT DISCUSSION APRIL 2024					
HAI DATA	HAND HYGINE DATA 95% PROPHYLACTIC ANTIBIOTIC DATA 98.18% MDRO - NIL	NA	ICN	NIL	Continuous Process
BIO MEDICAL WASTE MANAGEMENT AUDIT	NO MIXING FOUND.	BMW DAILY MONITORING TO BE DONE BY ICN BMW MANAGEMENT TRAINING - EVERY MONTH.	BMW PROPER DISPOSAL TO BE DONE BY EACH SHIFT (BY ASSINGED STAFF).	DAILY BASIS MONITORING TO BE DONE BY ICN.	CLOSED
ICNC 2.0 TRAINING	TRAINING GIVEN TO STAFFS	TRAINING TO BE GIVEN TO STAFF ABOUT VARIOUS TOPICS.	ICN	Continuous Process	Continuous Process
MONTHLY SURVEILLANCE	MONTH OF MARCH - 2024 SURVEILLANCE REPORT WAS SATISFACTORY	ONCE IN A MONTH SURVEILLANCE TO BE DONE IN ALL CRITICAL CARE ARES.	ICN.	Continuous Process	Continuous Process

4. Action Items/ Decision tracker (add rows as necessary)

Key Issues Discussed	Root Cause Identified	Agreed Action/ Decision	Assigned To/ Responsibility	Due Date	Follow up/ Stat
MEETING POINT DISCUSSION APRIL 2024					
VACCINATION FOR HK STAFF & FOOD HANDLERS	VACCINATION DATA NOT SUBMITTED FROM HK & F&B.	DATA TO BE SUBMITTED	MR.VIKAS / MR.RAJEEV SHARMA (APOLLO SINDOORI) & MR.SAURABH (HK MANAGER)	15.4.2024	PENDING
AMSP FORM	AMSP Formes not filled by consultant (Indication To Be mentioned) & culture to be send before starting antibiotic.	Information to be given by assigned staff nurse on duty to consultants regarding Restricted Antibiotics form to be filled.	Assigned staff on duty & Consultants /JMS	Daily basis TO BE DONE.	PENDING
FOGGING DATA	FOGGING & DEEP CLEANING DATA NOT MAINTAINED BY HK DEPARTMENT	FOGGING & DEEP CLEANING DATA TO BE MAINTAINED BY HK DEPARTMENT	HK SUPERVISOR ON DUTY	Daily basis TO BE DONE.	PENDING

Key Issues Discussed	Root Cause Identified	Agreed Action/ Decision	Assigned To/ Responsibility	Due Date	Follow up/ Status
OT CLEANING CHECKLIST	FOR OT CLEANING CHECKLIST WAS NOT MAINTAINED. (OT LIGHTS , WALL ,TABLE) CHECKLIST	OT CLEANING CHECKLIST TO BE PREPARED.	MS.BEENA VALSON / ICN	20.4.2024	PENDING

Signed by:



(Chairperson)

COMMITTEE MEETING

PRESIDED BY

DATE

TIME/DURATION

VENUE

ATTENDANCE SHEET

INFECTIOUS CONTROL COMMITTEE MEETING

: MRS. BEENA. VALSON

: 12.04.2024

: 1 HOUR

: GROUND FLOOR - MIS OFFICE

SN	CLOCK NO	NAME	DEPARTMENT	SIGN
1				
2	1056661	Dr. Umali	Emr	we
3	1054415	Kanishk Bhat	PS IIP	Kanishk
4	1054418	Vivod, KOMAR	E.S.SP	Vivod
5	400216	S. Selvakumar	BEMS	Selva
6	1054019	Beena Valson	Nursing	Beena
7	-	Dr. Vishal Singh	S. N. G. S. H. L. S.	Vishal
8	1055422	RIN SREERAO	NSG	Sreerao
9	1054079	Karlam Chand	Diys	Karlam
10	1133494	Dr. Neta	O+O	Neta
11	1054481	Ram Nandan Rao	HN	Ram
12	AHNO 25	Keshavachari	FB	Keshava
13	1055428	SCBY. P. UARGHESE	ICU	P. Uarghese
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Committee Name:	Infection Control Committee		
Date of Meeting:	10.5.2024	Time:	
Location:	MS Office	Start:	3:00pm
Minutes Prepared By:	R/N Suby - ICN	End:	4:00 pm
Presided by:	Dr.Deepika Handa		

1. Attendance at Meeting (add rows as necessary)

Dr.Deepika Handa	Mr.Vinod Kumar
Dr. Neha Minocha	Mr.Ram Nandan Raut
Dr.Vishal Gupta	
Dr.Sameer Boila	
Dr.Ratna Ahuja	
Dr.Krutali Chauhan	
Mr.Sajeesh Augustine	
Suby Varghese - ICN	
Mr.Kailash Chand	
Ms.kamlesh Bisht	
Mr.Selvakumar	
Mr.Yashbir Singh	
S/N.Sreemol K Suresh	
S/N.Jyothi H	
R/N.Chhama	

Committee Name:	Infection Control Committee		
Date of Meeting:	10.5.2024	Time:	
Location:	MS Office	Start:	3:00pm
Minutes Prepared By:	R/N Suby - ICN	End:	4:00 pm
Presided by:	Dr.Deepika Handa		

2. Meeting Agenda

- 1.HAI Data
2. BMW Audit
3. Needle Stick Injury
4. Training
- 5.Surveillance Reports
- 6.Vaccination Record (HK & F&B)
- 7.AMSP
- 8.FOGGING & Deep Cleaning Data

3. Previous meeting discussions/ follow ups (if any):

1. HAI Data
2. BMW Audit
3. Needle Stick Injury
4. Training
5. Surveillance Reports
6. Vaccination Record (HK & F&B)

4. Action Items/ Decision tracker *(add rows as necessary)*

Key Issues Discussed	Root Cause Identified	Agreed Action/ Decision	Assigned To/ Responsibility	Due Date	
Previous Meeting point discussion APRIL - 2024					
HAI DATA MARCH - 2024	HAI - NIL HAND HYGINE DATA 95% PROPHYLACTIC ANTIBIOTIC DATA 98.80% MDRO - NIL	NA	ICN	NIL	Continuous Process
ANTIBIOTIC RE - DOSING	ANTIBIOTIC RE - DOSING NOT GIVEN WHEN SURGERY LASTING > 4 HOURS.	SENSITIZATION OF THE CONCERN CONSULTANT TO BE DONE.	ICO & MS		PENDING
BIO MEDICAL WASTE MANAGEMENT AUDIT	NO MIXING OF BMW.	DAILY MONITORING TO BE DONE BY ICN BMW MANAGEMENT TRAINING EVERY MONTH.	HK ON DUTY , HK SUPERVISOR & ICN	DAILY BASIS MONITORING TO BE DONE BY ICN.	Continuous Process
NEEDLE STICK INJURY MARCH 2024 - 03	1.WHILE CLEANING OT GOT NSI. 2.WHILE SUTURING (HERNIOPLASY WITH MESH) GOT NSI. 3.While segregating bmw from tray gort NSI (AT THE TIME OF CODE BLUE)	RCA DONE , RE - TRAINING GIVEN ABOUT NSI & INCIDENT RASD IN THE AIRS.	ICN	NIL	CLOSED

4. Action Items/ Decision tracker *(add rows as necessary)*

Key Issues Discussed	Root Cause Identified	Agreed Action/ Decision	Assigned To/ Responsibility	Due Date	Follow up /Status
Previous Meeting point discussion APRIL - 2024					
ICNC 2.0 TRAINING	TRAINING GIVEN TO STAFFS	TRAINING TO BE GIVEN TO STAFF ABOUT VARIOUS TOPICS.	ICN	Continuous Process	Continuous Process
MONTHLY SURVEILLANCE	MONTH OF MARCH - 2024 SURVEILLANCE REPORT WAS SATISFACTORY	ONCE IN A MONTH SURVEILLANCE TO BE DONE IN ALL CRITICAL CARE AREAS.	ICN	Continuous Process	Continuous Process
VACCINATION FOR HK STAFF & FOOD HANDLERS	VACCINATION DATA NOT SUBMITTED FROM HK & F&B.	DATA TO BE SUBMITTED	MR.VIKAS / MR.RAJEEV SHARMA (APOLLO SINDOORI) & MR.SAURABH (HK MANAGER)	20.5.2024	PENDING

4. Action Items/ Decision tracker (add rows as necessary)

Key Issues Discussed	Root Cause Identified	Agreed Action/ Decision	Assigned To/ Responsibility	Due Date	Follow up/ Status
MEETING POINT DISCUSSION APRIL - 2024					
VACCINATION FOR HK STAFF & FOOD HANDLERS	VACCINATION DATA NOT SUBMITTED FROM HK & F&B.	DATA TO BE SUBMITTED	MR.VIKAS / MR.RAJEEV SHARMA (APOLLO SINDOORI) & MR.GAURAV (HK MANAGER)	20.5.2024	PENDING
AMSP FORM	AMSP Formes not filled by consultant (Indication To Be mentioned) & culture to be send before starting antibiotic.	Information to be given by assigned staff nurse on duty to consultants regarding Restricted Antibiotics form to be filled.	Assigned staff on duty & Consultants /JMS	Daily basis TO BE DONE.	PENDING
FOGGING DATA	FOGGING & DEEP CLEANING DATA NOT MAINTAINED BY HK DEPARTMENT	FOGGING & DEEP CLEANING DATA TO BE MAINTAINED BY HK DEPARTMENT	HK SUPERVISOR ON DUTY	Daily basis TO BE DONE.	PENDING

4. Action Items/ Decision tracker (add rows as necessary)

Key Issues Discussed	Root Cause Identified	Agreed Action/ Decision	Assigned To/ Responsibility	Due Date	
MEETING POINT DISCUSSION MAY - 2024					
HAI DATA APRIL - 2024	HAI - NIL HAND HYGINE DATA 94% PROPHYLACTIC ANTIBIOTIC DATA 98.850% MDRO - NIL	NA	ICN	NIL	Continuous Process
ANTIBIOTIC RE - DOSING	ANTIBIOTIC RE - DOSING NOT GIVEN WHEN SURGERY LASTING > 4 HOURS.	SENSITIZATION OF THE CONCERN CONSULTANT TO BE DONE.	ICO & MS		PENDING
BIO MEDICAL WASTE MANAGEMENT AUDIT	NO MIXING OF BMW. OVER FLOW & SHARP CNTAINER TO BE CHANGEDM WHEN 75% (1/3 RD) FULL, TO PREVENT NSI.	DAILY MONITORING TO BE DONE BY ICN BMW MANAGEMENT TRAINING EVERY MONTH.	HK ON DUTY , HK SUPERVISOR & ICN	DAILY BASIS MONITORING TO BE DONE BY ICN.	Continuous Process
NEEDLE STICK INJURY - NIL APRIL 2024	NO NSI	REGULAR MONITORING.	ICN	DAILY BASIS MONITORING TO BE DONE BY ICN.	Continuous Process

4. Action Items/ Decision tracker (add rows as necessary)

Key Issues Discussed	Root Cause Identified	Agreed Action/ Decision	Assigned To/ Responsibility	Due Date	Follow up /Status
MEETING POINT DISCUSSION MAY 2024					
ICNC 2.0 TRAINING	WORLD HAND HYGIENE DAY CELEBRATED (CHART COMPETITION , QUIZ & TRAINING PROGRAM FOR STAFF & PATIENT ATTENDANT)		ICN	DONE	Continuous Process
MONTHLY SURVEILLANCE	MONTH OF APRIL - 2024 SURVEILLANCE REPORT WAS SATISFACTORY	ONCE IN A MONTH SURVEILLANCE TO BE DONE IN ALL CRITICAL CARE AREAS.	ICN	Continuous Process	Continuous Process
VACCINATION FOR HK STAFF & FOOD HANDLERS	VACCINATION DATA NOT SUBMITTED FROM HK & F&B.	DATA TO BE SUBMITTED	MR.VIKAS / MR.RAJEEV SHARMA (APOLLO SINDOORI) & MR.GAURAV (HK MANAGER)	20.5.2024	PENDING
AMSP FORM	AMSP Formes not filled by consultant (Indication To Be mentioned) & culture to be send before starting antibiotic.	Information to be given by assigned staff nurse on duty to consultants regarding Restricted Antibiotics form to be filled.	Assigned staff on duty & Consultants /JMS	Daily basis TO BE DONE.	PENDING

4. Action Items/ Decision tracker (add rows as necessary)

Key Issues Discussed	Root Cause Identified	Agreed Action/ Decision	Assigned To/ Responsibility	Due Date	Follow up /Status
MEETING POINT DISCUSSION MAY 2024					
ICNC 2.0 TRAINING	WORLD HAND HYGIENE DAY CELEBRATED (CHART COMPETITION , QUIZ & TRAINING PROGRAM FOR STAFF & PATIENT ATTENDANT)		ICN	DONE	Continou Process
MONTHLY SURVEILLANCE	MONTH OF APRIL - 2024 SURVEILLANCE REPORT WAS SATISFACTORY	ONCE IN A MONTH SURVEILLANCE TO BE DONE IN ALL CRITICAL CARE AREAS.	ICN	Continuous Process	Continou Process
VACCINATION FOR HK STAFF & FOOD HANDLERS	VACCINATION DATA NOT SUBMITTED FROM HK & F&B.	DATA TO BE SUBMITTED	MR.VIKAS / MR.RAJEEV SHARMA (APOLLO SINDOORI) & MR.GAURAV (HK MANAGER)	20.5.2024	PENDING
AMSP FORM	AMSP Formes not filled by consultant (Indication To Be mentioned) & culture to be send before starting antibiotic.	Information to be given by assigned staff nurse on duty to consultants regarding Restricted Antibiotics form to be filled.	Assigned staff on duty & Consultants /JMS	Daily basis TO BE DONE.	PENDING

FOGGING DATA	FOGGING & DEEP CLEANING DATA NOT MAINTAINED BY HK DEPARTMENT	FOGGING & DEEP CLEANING DATA TO BE MAINTAINED BY HK DEPARTMENT	HK SUPERVISOR ON DUTY	Daily basis TO BE DONE.	PENDIN
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Signed by:



(Chairperson)

COMMITTEE MEETING

PRESIDED BY

DATE

TIME/DURATION

VENUE

ATTENDANCE SHEET

: INFECTION CONTROL COMMITTEE

: DR. DEEPIKA HANDA

: 10.5.2024

: 3:00PM - 4:00PM, 1 HOUR

: MS OFFICE

SN	CLOCK NO	NAME	DEPARTMENT	SIGN
1	1055263	Dr Deepika Handa	Microbiology	
2	1133494	Dr. Neha	O+D	
3	1056661	Dr. Krutali	CCC	
4	026562	R/W JYOTHI	ICU	
5	0118	Yashbir Singh	Pharmacy	10/11/15/502
6	1055288	SATISH	Ny sup.	
7	—	Rameen Bolie	Anaesthesia	
8	—	Dr Vishal Gupta	Intensive Care	
9	1054481	Ram Nandan Raut	HI	
10	1054079	Kailash Chandra	Engg	
11	400216	S. SELVAKUMAR	Biomedical	
12	097348	R/W SREEMOL	MSG	10/11/12
13	—	Dr. Ramesh Singh	Gen. Surgery	10/11/12
14	1054418	Vinod, KOMAR	C.S.SD	
15	1055428	SUBY. P. UARGHESE	ICU	
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BRIEFING
 TRAINER
 DATE
 TIME/DURATION
 VENUE

ATTENDANCE SHEET

: BIO-medical waste management, H4
 : Inv. Suby
 : 8.4.2024
 : 1 HOUR
 : Training Cell

SN	CL.NO	NAME	DEPTT.	SIGN
1	1231988	R/N HARSH		
2	1142896	R/N RASHMI		
3	1260295	R/N SEEMA JAIN	NICU	Rashmi 1142896
4	1157435	R/N ANJANA	DIAGNOSIS	Seema 1260295
5	1261836	R/N MANJU	C.R	Anjana
6	1213463	R/N MEHHA	NICU	Manju
7	1116374	R/N JOYACE	C.R	Mehha
8	1223215	R/N NEHA	DST Floor	Joyace
9	1235513	R/N KHUSHBOO	NICU	Neaha
10	125995	R/N VAGNIKA	MBU I	Khushboo
11	1116757	R/N ROSHAN	ICU	Vagnika
12	1127172	R/N EKTA	ICU	Roshan
13	1214688	R/N JUDHA	ICU	EKTA
14	1285128	R/N NEHA	NICU II	Judha
15	1290517	R/N PRACHI	EMR	Neaha
16	1285132	R/N MANVI	IIIrd Floor	Prachi 1285128
17	1055421	R/N NEETHU MATHEW	IInd Floor	Manvi 1290517
18	1260291	R/N JUSTIA RASOOL	NURSING	Neethu 1055421
19	1261605	R/N NEELAM	IInd Floor	Justia 1260291
20	1288341	R/N INDU	EMR	Neelam 1261605
21	1067275	R/N RUBY	NICU	Indu 1288341
			NURSING	Ruby 1067275

TRAINING PROGRAM

ATTENDANCE SHEET

TRAINER

: BIO-MEDICAL WASTE MANAGEMENT

DATE

: ICU SUBY
: 23.5.2024

TIME/DURATION

: 1 HOUR
: 3RD FLOOR

VENUE

SN	CLOCK NO	NAME	DEPARTMENT	SIGN
1	1213463	R/N MEETHA	LR	<i>Meetha</i>
2	1237805	R/N ASMA	LR	<i>Asma</i>
3	1140435	R/N ARPANJAL	ICU	<i>Arpan</i>
4	1254831	R/N ASHU	ICU	<i>Ashu</i>
5	1260754	R/N ARYA	EMR	<i>Arya</i>
6	1259315	R/N THOTREIPHI	EMR	<i>Thotreiphi</i>
7	1259310	R/N JESSY	EMR	<i>Jessy</i>
8	1259310		11 FLOOR	<i>Deepa</i>
9	1286823	R/N HIMANSHI	1st Floor	<i>Himanshi</i>
10	1223239	R/A MINA	1st Floor	<i>Mina</i>
11	1054969	R/N SUNITA	EMR	<i>Sunita</i>
12	1117268	R/N HAMA	MBU - I	<i>Hama</i>
13	1214688	R/N SIDDHA	MBU - I	<i>Siddha</i>
14	1268832	R/N ABHILASHA	MBU	<i>Abhilasha</i>
15	1261645	R/N NEELAM	EMR	<i>Neelam</i>
16	1223239	R/A MINA	1st Floor	<i>Mina</i>
17	1200192	R/N AKANKSHA	LR	<i>Akanksha</i>
18	1288391	R/N INDU	NICU	<i>Indu</i>
19	1116757	R/N ROSHNI	ICU	<i>Roshni</i>
20	1055635	R/N SANYA	MBU - I	<i>Sanya</i>



ATTENDANCE SHEET

TRAINING PROGRAM

BIO-Medical waste management

TRAINER

ICN. SUREY

DATE

6/6/2024

TIME/DURATION

1 HOUR

VENUE

3RD FLOOR

SN	CLOCK NO	NAME	DEPARTMENT	SIGN
1	009360	R/N Soniya Thomey	IND floor	Soniya 0360
2	1259310	R/N JESSY	DIALYSIS	Jessy
3	1260754	R/N ARYA	EMR	arya
4	1087445	R/N MALIKA	EMR	malika/1087
5	1077924	R/N RINKI	RICU	Rinki 5824
6	125862	R/N VISHAKH	IND floor	Vish
7	11311482	R/N SWAPNKA	1st floor	Sw
8	1213463	R/N MEENA	LR	Me
9	1257205	R/N ASMA	LR	ASms
10	1237780	R/N NAZISHA	DIALYSIS	Nazish
11	1288391	R/N INDU	NICU	Indu
12	1124812	R/N KM POOJA	1st floor	Pooja/won
13	030319	R/N NAZIYA	EMR	Naziya 0303
14	1056369	R/N SWEETA	EMR	Sweeta 5869
15	1225239	R/N HINA	1st floor	Hina 5839
16	120010	R/N MAHITA	2nd floor	Mahita 1200
17	1259955	R/N UPAM K	EMR	Upam
18	1117262	R/N HIMMA	MBU-I	Himma
19	1055635	R/N SONIYA	MBU-I	Soniya