

17th April, 2019

The Environmental Engineer
West Bengal Pollution Control Board
Camac Street Regional Office
Minority Bhgaban, 5th Floor
Biplabi Kanai Lal Bhattacharya Sarani
Alipore; Kolkata-700027

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-700029 for the year 2018 as per the format specified by your Office.

Thanking You

For Fortis Hospitals Ltd, Kolkata



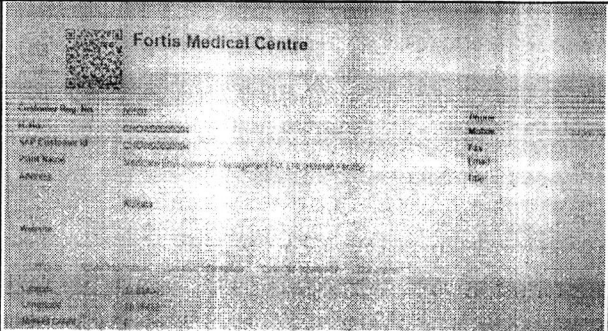
Dr. Tania Rahman Lodh

Medical Superintendent



(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)	:	MR GURVINDER SINGH
	(ii) Name of HCF or CBMWTF	:	FORTIS MEDICAL CENTRE
	(iii) Address for Correspondence	:	FORTIS MEDICAL CENTRE 2/7,SARAT BOSE ROAD , KOLKATA-700020, INDIA
	(iv) Address of Facility	:	FORTIS MEDICAL CENTRE 2/7,SARAT BOSE ROAD , KOLKATA-700020, INDIA
	(v)Tel. No, Fax. No	:	+91 33 24754096/4320,6620200
	(vi) E-mail ID	:	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	:	 (Attached)
	(ix) Ownership of HCF or CBMWTF	:	Corporate (State Government or Private or Semi Govt. or any other)
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	:	Authorisation No.: 51/1/Authorisation/39/2002 valid up to 31.07.2022
	(xi). Status of Consents under Water Act and Air Act	:	Valid up to: 31.07.2022

2.	Type of Health Care Facility		:	Day Care Centre	
	(i) Bedded Hospital		:	No. of Beds:10	
	(ii) Non-bedded hospital (Clinic or Blood Bank or Clinical Laboratory or Research Institute or Veterinary Hospital or any other)		:	NA	
	(iii) License number and its date of expiry		:	34215491 Validity:21.06.2021	
3.	Details of CBMWTF		:		
	(i) Number healthcare facilities covered by CBMWTF		:		
	(ii) No of beds covered by CBMWTF		:		
	(iii) Installed treatment and disposal capacity of CBMWTF:		:	Kg per day	
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF		:	Kg/day	
4.	Quantity of waste generated or disposed in Kg per annum (on monthly average basis)		:	Yellow Category : 10.66 kg (Per month)	
			:	Red Category : 38.5 kg (Per month)	
			:	White: : 5.72 kg (Per month)	
			:	Blue Category : 2.6 kg (Per month)	
			:	General Solid waste: NA	
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		Type of treatment Equipment	No of units	Capacity Kg/day	Quantity treatedo disposed in kg per annum
		Incinerators Plasma Pyrolysis			

			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		
	(v) Details of incineration ash and ETP sludge generated and disposed during the treatment of wastes in Kg per annum		Quantity Generated Where disposed Incineration Ash ETP Sludge
	vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of		
	(vii) List of member HCF not handed over bio-medical waste		
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period		Yes (Attached)
7	Details trainings conducted on BMW		
	(i) Number of trainings conducted on BMW Management.		22 (A ttached)
	(ii) number of personnel trained		09
	(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

	(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	:	(Air Pollution Control Devices attached with the Incinerator)

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Certified that the above report is for the period from

JAN'2018 to DEC'2018

Name and Signature of the Head of the Institution

(GURVINDER SINGH)

Date: 17/04/19

Place KOLKATA