

Aster

WOMEN & CHILDREN



To, We'll Treat You Well

Date:

The Regional Officer,
Karnataka state Pollution Control Board,
Nisarga Bhavan, Thimaiah Main Road,
7th D Main, 3rd Stage 2nd Block,
Shivanagar Basaveshwaranagar,
Bangaluru-560079.

Sir,

Sub: Submission of annual report (form IV) for the year Jan. 2023- Dec.2023 under
Biomedical Waste Management and Handling Rules;

With reference to the above subject, I herewith submitting details of Form-IV (under
Biomedical Waste Management and Handling Rules; annual returns) disposed to KSPCB
authorized agency, for the year Jan. 2023- Dec.2023 of our unit having address Sy no 2
Sadaramangala Industrial Area, Off. Whitefield Main Road, Opp. ITPL, Whitefield
Bengaluru, Karnataka, 560066

Please update in your records and acknowledge the same.

Thanking you,

Yours faithfully

Arun Kumar

COO Aster Hospital.



Enclosures:

1. Form-IV – Annual Returns under Biomedical Waste Management Rules for the year Jan.2023 – Dec.2023
2. Annexure – Details of Biomedical Waste Generated and Disposed to KSPCB Authorised Agencies for Jan.2023 – Dec.2023.
3. Photocopies of Manifest of Biomedical Waste Disposed to KSPCB Authorised agency.
4. Biomedical Waste Management Authorisation.

Form – IV
(See rule13)
ANNUAL REPORT

Sl. No	Particulars	
1 .	Particulars of the Occupier	
	(i) Name of the authorized Occupier	: Mr. Arun Kumar, COO, Aster Hospital, Plot No. 2, Sy. No.76, Sadaramangala vllage, KR Puram Hobli, Bengaluru East Taluk
	(ii) Name of Facility	: Aster Hospital
	(iii) Address for Correspondence	: Sy. No.76, Sadaramangala vllage, KR Puram Hobli, Bengaluru East Taluk
	(iv) Address of Facility	: Sy. No.76, Sadaramangala vllage, KR Puram Hobli, Bengaluru East Taluk
	(v)Tel. No, Fax. No	080 4510 8888
	(vi) E-mail ID	Vijay.kumar4@asterhospital.com
	(vii) URL of Website	https://www.asterhospitals.in/hospitals/aster-women-children-bangalore
	(viii) GPS coordinates of HCF	12° 59' 17"N 77° 44' 02"S
	(ix) Ownership of HCF	Private Limited
	(x). Status of Authorisation under the Bio-Medical Waste (Management and Handling) Rules	Valid, Authorization is valid till 30/09/2030
	(xi). Status of Consents under Water Act and Air act	Valid, Consent is valid till 30/09/2030
2.	Type of Health Care Facility	
	(i) Bedded Hospital	49 Bedded hospital
	(ii) Non-bedded hospital	NA
	(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	NA
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	NA			
	(iv) Quantity of biomedical waste treated or disposed by CBMWTF	NA			
4.	Quantity of waste generated in Kg per annum (on monthly average basis)	Yellow Category: 13493.96 Kg per annum			
		Red Category: 8975.88 Kg per annum			
		White Category: 368.27 Kg per annum			
		Blue Category: 1480.19 Kg per annum			
5.	(j) Details of the onsite storage facility disposal facility	Size: 100 Sq. ft.			
		Capacity: 500 kg per day storage			
		Provision of on-site storage: (cold storage or any other provision) – well ventilated, dedicated storage rooms based on their categories in their in our facility.			
		Type of treatment equipment	No of units	Capacity Kg/Day	Quantity treated or disposed Kg/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:	NA NA NA	NA NA NA	NA NA NA
(iii) Quantity of recyclable wastes sold to authorized recyclers after treatment in kg per annum	Red Category (like plastic, glass etc.) NA				

	(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	<table border="1"> <thead> <tr> <th></th> <th>Quantity generated</th> <th>Where disposed</th> </tr> </thead> <tbody> <tr> <td>Incineration</td> <td>NA</td> <td>NA</td> </tr> <tr> <td>Ash</td> <td>NA</td> <td>NA</td> </tr> <tr> <td>ETP Sludge</td> <td>NA</td> <td>NA</td> </tr> </tbody> </table>		Quantity generated	Where disposed	Incineration	NA	NA	Ash	NA	NA	ETP Sludge	NA	NA
	Quantity generated	Where disposed												
Incineration	NA	NA												
Ash	NA	NA												
ETP Sludge	NA	NA												
	(vi) Name of the Common Bio-Medical Waste Treatment Facility Operator through which wastes are disposed of	M/s. Anu Autoclave and Incin Services												
	(vii) List of member HCF not handed over bio-medical waste.	NA												
6	Do you have bio-medical waste management committee? If yes, attach minutes of the meetings held during the reporting period	Yes												
7	Details trainings conducted on BMW													
	(i) Number of trainings conducted on BMW Management.	24												
	(ii) number of personnel trained	35												
	(iii) number of personnel trained at the time of induction	35												
	(iv) number of personnel not undergone any training so far	Nil, we shall train the personnel before handling Bio-medical waste and other general waste.												
	(v) Whether standard manual for training is available?	Yes												
	(vi) any other information													
8	Details of the accident occurred during the year													
	(i) Number of Accidents occurred	2												
	(ii) Number of the persons affected	2												
	(iii) Remedial Action taken (Please attach details if any)	Details attached												
	(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?	Yes, we have a separate line and collection tank for liquid bio-medical waste at STP area, which is treated as per norms and treated using Ultra filtration technique.
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
12.	Any other relevant information :	

Certified that the above report is for the period from 1st Jan 2023 to 31st December 2023.

Date:

Place: