RTRMH

FORM-C: Monthly Report to be maintained by Health Care Establishment (HCEs)

(Having Autoclave/Shredder & Facility for disposal of sharp)

Month: October

Year: 2025

1. Name of the Hospital

Rao Tula Ram Memorial Hospital

2. a) Tota

a) Total Nos. of beds

100 Beds

b) Average occupancy for the month

October 54.87 %

3. Nos. of generation point

a) Total Nos. of ICUs

Nil

b) Total Nos. of OTs

03

c) Total Nos. of Cath Labs

Nil

Number of Yellow bags sent for incineration (along with their weight) to CBWTF:

1310.160 KG (Number of Bags 1108)

5. (i) Number of Red bags autoclaved by self (along with their weight)

721 KG (Number of Bags 831)

(ii) Quantity of sharp generated & treated by self/ CBWTFs (in Kgs):

185 sharp containers treated by CBWTF/weight: 177.98 KG

- 6. Name of CBWTF Operator with whom agreement made: SMS Water Grace Pvt. Ltd.
- Validity of agreement with CBWFT:

Agreement of CBWTF with DHS

Signature with Date:--

Name & Designation Dr. Satish Chandra Yadav, Nodal Officer, BMW, RTRMH

Phone No. 20895186/171

Email: ms-rtrmh@delhi.gov.in`

MONTHLY REPORTING FORMAT FOR BIOMEDICAL WASTE

Govt. of National Capital Territory of Delhi

Department of Health & Family Welfare

Polyclinic Najafgarh

Report for the month : ----**BMW Report**

T	Name of Dispensary	Polycunic Chhawar starter
	Name of generation Point Injection Room /Dressing Room /Lab/DOTS Center /Any other	Polyclinic Chhawla stand NF Procedure Room 1/10 4/10 6/10 e/10 10/10 13/10 13/10 13/10 24/10 3
	Dates of Lifting of waste by service provider	1/10 4/10 6/10 5/10 10/10 1/1
	Number of yellow bags sent for incineration	
5	Total quantity in KG (Category 1,2,3,4,5&6)	1.210 kg
5	Number of red bags sent for Autoclaving	
7	Total quantity in KG (Category 1,2,3,4,5&6)	1,760 kg
8	Quantity of liquid waste (in liter approx) Category 8 &10 waste generated from lab & working cleaning, housekeeping & disinfecting activities)	2 litre
9	(Incinerator ASH in KG 'Category 9, applicable to incinerator Contractor /personnel only)	DR. MAHESH KUMAR CMO (NESY
10	Sender's Name	DK. TI
11	Signature	1.11.2025
12	Date	7835064051
13	Telephone Number	183506 1001

NB:- All government hospital registration nursing homes and dispensaries are required to send this information in annexure a before 7th of each month to:-

DHS F- 17 swasth sewa nirdeshaly bhawan karkarduma delhi 32.

Dr. MAHESH KUMAR Chief Medical Officer

RTRM Hospital-GNCTD

laffarpur, New Delhi-73

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