

RTRMH

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

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

Month: **March**

Year: **2025**

1. Name of the Hospital : Rao Tula Ram Memorial Hospital
2. a) Total Nos. of beds : 100 Beds
b) Average occupancy for the month : February-25 **49.45 %**
3. Nos. of generation point
a) Total Nos. of ICUs : Nil
b) Total Nos. of OTs : 03
c) Total Nos. of Cath Labs : Nil
4. Number of Yellow bags sent for incineration (along with their weight) to CBWTF:
1263.75 KG (Number of Bags 924)
5. (i) Number of Red bags autoclaved by self (along with their weight)
833.87 KG (Number of Bags 753)
(ii) Quantity of sharp generated & treated by self/ CBWTFs (in Kgs):
220 sharp containers treated by CBWTF/weight: 151.45 KG
6. Name of CBWTF Operator with whom agreement made: SMS Water Grace Pvt. Ltd.
7. Validity of agreement with CBWTF:
Agreement of CBWTF with DHS
Signature with Date:--

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

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Report prepared by
N.S.G. Officer
[Signature]
RTRMH
Nodal Officer
BMW
2025

[Signature]
Dr. Satish Chandra Yadav
Chief Medical Officer
Rao Tula Ram Memorial Hospital
New Delhi-110002

ANNEXURE - REPORTING OF WASTE MANAGEMENT DATA

Govt. of National Capital Territory of Delhi

Department of Health & Family Welfare

Polyclinic Najafgarh

NAJAFGARH

Report for the month: BMW Report

1	Name of Dispensary	Polyclinic Najafgarh
2	Name of generation Point	Incinerator Room
3	Injection Room / Dressing Room / Lab / DOTS Center / Any other	
4	Dates of Lifting of waste by service provider	11/3, 3/3, 4/3, 5/3, 11/3, 14/3, 15/3, 23/3, 24/3
5	Number of yellow bags sent for Incineration	12
6	Total quantity in KG (Category 1, 2, 3, 4, 5 & 6)	1,310 kg
7	Number of red bags sent for Autoclaving	11
8	Total quantity in KG (Category 1, 2, 3, 4, 5 & 6)	101.10 kg
9	Quantity of liquid waste (in liter approx) Category 8 & 10 waste generated from lab & working cleaning, housekeeping & disinfecting activities)	2 litre
10	(Incinerator ASH in KG Category 9, applicable to incinerator Contractor /personnel only)	
11	Sender's Name	DR. Mahesh Kumar
12	Signature	
13	Date	
14	Telephone Number	7335064051

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

DHS P- 17 swasth sewa nirदेशालय bhawan karkarduma delhi 32.

Chanderprabha
CHANDERPRAEHA
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