

RTRMH

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

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

- Month: **Oct** Year: **2021** : Date: **05.11.2021**
1. Name of the Hospital : **Rao Tula Ram Memorial Hospital**
2. a) Total Nos. of beds : **100 Beds**
- b) Average occupancy for the month : **Oct-21 75.29%**
3. Nos. of generation point
- a) Total Nos. of ICUs : **Nil**
- b) Total Nos. of OTs : **01**
- c) Total Nos. of Cath Labs : **Nil**
4. Number of Yellow bags sent for incineration (along with their weight) to CBWTF:
- 1281.98 Kg (Number of Bags 1034)**
5. (i) Number of Red bags autoclaved by self (along with their weight)
- 903.973 Kg (Number of Bags-751)**
- (ii) Quantity of sharp generated & treated by self/ CBWTFs (in Kgs):
- 116/29.43 treated) treated by CBWTF**
- 201.08 Kg on site (by Sharp Blaster)**
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. Rakesh Kumar prasad, Nodal Officer, BMW, RTRMH** Phone No. **25318444/555** Email-**msrtrmh@gmail.com**

[Signature]
Nodal Officer

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5/11/21