

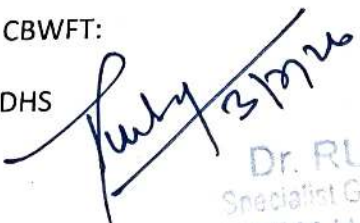
RTRMH

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

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

Month: **June**

Year: **2026**

1. Name of the Hospital : Rao Tula Ram Memorial Hospital
2. a) Total Nos. of beds : 100 Beds  
b) Average occupancy for the month : **June 53.40 %**
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:  
**1074.64 KG (Number of Bags 843)**
5. (i) Number of Red bags autoclaved by self (along with their weight)  
**710.070 KG (Number of Bags 856)**  
(ii) Quantity of sharp generated & treated by self/ CBWTFs (in Kgs):  
**119 sharp containers treated by CBWTF/weight: 208.570KG**
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. Ruby Yadav, Nodal Officer, BMW, RTRMH**

Dr. RUBY YADAV  
Specialist Grade-III, Microbiology  
RTRMH Hospital, GND  
Jalgaon

Phone No. 20895186/171

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**MONTHLY REPORTING FORMAT FOR BIOMEDICAL WASTE**

Govt. of National Capital Territory of Delhi

Department of Health & Family Welfare

Polyclinic Najafgarh

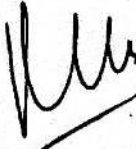
**JUNE 2026**

Report for the month : ---- BMW Report

|    |                                                                                                                                                          |                                                    |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|
| 1  | Name of Dispensary                                                                                                                                       | Polyclinic CHAWLA STAND                            |
| 2  | Name of generation Point<br>Injection Room /Dressing Room /Lab/DOTS<br>Center /Any other                                                                 | Procedure Room                                     |
| 3  | Dates of Lifting of waste by service provider                                                                                                            | 4/6, 8/6, 12/6, 16/6, 19/6, 22/6, 24/6, 27/6, 29/6 |
| 4  | Number of yellow bags sent for incineration                                                                                                              | 9                                                  |
| 5  | Total quantity in KG<br>(Category 1,2,3,4,5&6)                                                                                                           | 1.360 kg                                           |
| 6  | Number of red bags sent for Autoclaving                                                                                                                  | 9                                                  |
| 7  | Total quantity in KG<br>(Category 1,2,3,4,5&6)                                                                                                           | 2.530 kg                                           |
| 8  | Quantity of liquid waste (in liter approx)<br>Category 8 & 10 waste generated from lab &<br>working cleaning, housekeeping &<br>disinfecting activities) | 1 litre                                            |
| 9  | (Incinerator ASH in KG<br>Category 9, applicable to incinerator<br>Contractor /personnel only )                                                          | —                                                  |
| 10 | Sender's Name                                                                                                                                            | DR. MAHESH CMD NFSG                                |
| 11 | Signature                                                                                                                                                |                                                    |
| 12 | Date                                                                                                                                                     |                                                    |
| 13 | Telephone Number                                                                                                                                         | 7835064051                                         |

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

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

 01/7/26

Dr. MAHESH KUMAR  
Chief Medical Officer - NFSG  
NTRM Hospital-GNCTD  
Jaffarpur, New Delhi-73

I/c Polyclinic  
Nijgh