

**FORM- C: MONTHLY REPORT TO BE MAINTAINED BY HEALTH CARE ESTABLISHMENTS (HCFs)**MONTH:- FEBRUARY YEAR 2022

DATED:- \_\_\_\_\_

<b>1</b>	<b>NAME OF THE HOSPITAL</b>	<b>DR BABA SAHEB AMBEDKAR HOSPITAL, SEC-06, ROHINI, DELHI-85</b>	
<b>2 (a)</b>	TOTAL NO. OF BEDS	500+	
<b>(b)</b>	AVERAGE OCCUPANCY FOR THE MONTH	>100%	
<b>3</b>	NO. OF GENERATION POINT	60	
<b>i.</b>	WARDS	16	
<b>ii.</b>	ICU	04	
<b>iii.</b>	OT	MAJOR -10 MINOR -08	
<b>iv.</b>	LABS	06	
<b>v.</b>	BLOOD BANK	01	
<b>vi.</b>	RADIOLOGY	01	
<b>vii.</b>	DIALYSIS UNIT	01	
<b>viii.</b>	OPD's	13	
<b>* 4 (a)</b>	YELLOW BAGS SENT TO CBMWTFs	<b>NUMBER</b>	<b>WEIGHT (kg)</b>
		719	7259
<b>(b)</b>	RED BAGS SENT TO CBMWTFs	726	6701
<b>(c)</b>	WHITE CATEGORY	168	138
<b>(d)</b>	BLUE CATEGORY	196	1247
<b>5</b>	NAME OF CBWTF OPERATOR WITH WHOM AGREEMENT MADE	BIOTIC WASTE SOLUTION PVT. LTD.	
<b>6</b>	VALIDITY OF AGREEMENT WITH CBWTF	AS PER DPCC WEBSITE	

\*Including COVID -19 waste

**NODAL OFFICER**  
**BIOMEDICAL WASTE MANAGEMENT**  
**PHONE No.:-**

**NURSING OFFICER**  
**BIOMEDICAL WASTE MANAGEMENT**