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

(Having Autoclave/Shredder & facility for disposal of sharps)

Month May Year 2017	Dated: 2/6/17
1. Name of the Hospital	Dr. Baby Saheb Ambedker Hospotal Rohini Sec-6 Delli
2. a) Total no. of Beds	500+
b) Average occupancy for the m	onth
<ul><li>3. No. of generation point</li><li>a) Total no. of Wards &amp; ICUs</li><li>b) Total no. of O.T.s</li><li>c) Total no. of Cath. Labs</li></ul>	11 words ICU CCU NICU NUSSERY lang Bld Bounk chest clinic etc 03+ 05 minos 073 NA
4. Number of yellow bags sent for i  CBWTFs  1093 Bags 40	ncineration (alongwith their weight) to
V	•
5. (i) Number of Red bags autoclave	d by self (alongwith their weight):
557 Bags 3300 K	9
•	treated by self/CBWTFs (in Kgs): 191 (65kg)
6. Name of CBWTF Operator with w	hom agreement made Biotic Pvt. solution Ud.
7. Validity of agreement with CBWT	F: As pos DHS quidline.
Signature with date	276/17 i D. Drygal (ine to Nodal Officer r. SHALINI DEWAN DUGGAL
9	pecialist pept. of Microbiology pr. Baba Saheb Ambedkar Hospital Sec-6, Rohini, Delhi-110085

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