

To,

The Medical Director,
Dr. Baba Saheb Ambedkar Hospital,
Sector- 6, Rohini, Delhi -110085

Subject: - Submission of monthly BMW Report (May 2024).

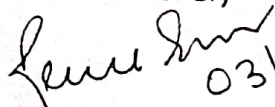
Sir,

This is to duly inform that the monthly BMW Report of May 2024 needs to be submitted in the duly prescribed format of Director of Health Services as per the Bio-Medical Waste Management rules, 2016.

This is for your information further necessary action please.

Thanking you

Yours Sincerely


03/06/2024.

Dr. Renu Gur

LINK Nodal Officer (BMWM)

MONTHLY REPORT TO BE MAINTAINED BY HEALTH CARE ESTABLISHMENTS (HCFs)

MAY YEAR 2024

DATED:- 03/06/2024.

1	NAME OF THE HOSPITAL	DR BABA SAHEB AMBEDKAR HOSPITAL, SEC-06, ROHINI, DELHI-85	
2 (a)	TOTAL NO. OF BEDS	500+	
(b)	AVERAGE OCCUPANCY FOR THE MONTH	>100%	
3	NO. OF GENERATION POINT	60	
i.	WARDS	16	
ii.	ICU	04	
iii.	OT	MAJOR -10 MINOR -08	
iv.	LABS	06	
v.	BLOOD BANK	01	
vi.	RADIOLOGY	01	
vii.	DIALYSIS UNIT	01	
viii.	OPD's	13	
* 4 (a)	YELLOW BAGS SENT TO CBMWTFs	NUMBER	WEIGHT (kg)
		476	7738.615
(b)	RED BAGS SENT TO CBMWTFs	459	7030.348
(c)	WHITE CATEGORY	157	104.445
(d)	BLUE CATEGORY	234	1456.430
5	NAME OF CBWTF OPERATOR WITH WHOM AGREEMENT MADE	BIOTIC WASTE SOLUTION PVT. LTD.	
6	VALIDITY OF AGREEMENT WITH CBWTF	AS PER DPCC WEBSITE	

*Including COVID -19 waste

Sanjay
03/06/2024

NODAL OFFICER
BIOMEDICAL WASTE MANAGEMENT
PHONE No.:-

Sonia

NURSING OFFICER
BIOMEDICAL WASTE MANAGEMENT

HCF NAME : DR BABA SAHEB AMBEDKAR HOSPITAL

HCF Code - 02483

Address SECTOR -6, ROHINI

Period From 01-May-2024 To 31-May-2024

Sr No	Date	Yellow Waste		Red Waste		White Waste		Blue Waste		Cytotoxic Waste		Total	
		Nos	Kg	Nos	Kg	Nos	Kg	Nos	Kg	Nos	Kg	Nos	Kg
1	01-May-2024	18	256.190	15	214.820	3	01.830	14	78.770		0.000	50	551.610
2	02-May-2024	17	258.465	13	222.955	5	03.995	7	58.905		0.000	42	544.320
3	03-May-2024	16	250.470	15	225.085	9	06.400	9	43.980		0.000	49	525.935
4	04-May-2024	15	260.240	15	232.550	3	01.645	7	41.225		0.000	40	535.660
5	05-May-2024	12	266.770	15	210.170	2	02.760	7	46.555		0.000	36	526.255
6	06-May-2024	13	183.265	11	147.865	4	01.880	9	45.685		0.000	37	378.695
7	07-May-2024	17	258.985	17	249.995	2	01.135	8	47.940		0.000	44	558.055
8	08-May-2024	17	264.130	15	254.615	9	05.935	8	52.130		0.000	49	576.810
9	09-May-2024	15	251.080	17	216.525	6	04.160	4	17.495		0.000	42	489.260
10	10-May-2024	16	260.830	16	244.635	8	04.685	7	41.300		0.000	47	551.450
11	11-May-2024	18	256.490	15	228.045	5	03.495	8	74.500		0.000	46	562.530
12	12-May-2024	15	261.945	16	232.730	6	03.870	15	79.350		0.000	52	577.895
13	13-May-2024	16	194.500	12	174.545	1	00.725	6	44.410		0.000	35	414.180
14	14-May-2024	12	256.485	12	204.180	8	05.865	6	39.315		0.000	38	505.845
15	15-May-2024	16	265.185	17	238.425	8	05.065	7	52.760		0.000	48	561.435
16	16-May-2024	14	263.325	13	233.375	5	03.540	9	58.930		0.000	41	559.170
17	17-May-2024	16	259.055	16	239.595	6	04.205	3	20.505		0.000	41	523.360
18	18-May-2024	17	262.300	15	248.245	4	02.670	7	54.765		0.000	43	567.980
19	19-May-2024	17	255.645	14	225.263	1	02.625	3	57.885		0.000	35	541.416
20	20-May-2024	14	203.825	14	192.095	5	03.335	5	35.855		0.000	38	435.110
21	21-May-2024	16	269.630	16	237.820	5	03.100	12	60.095		0.000	49	570.645
22	22-May-2024	16	263.525	15	252.100	7	04.375	7	41.050		0.000	45	561.050
23	23-May-2024	15	254.525	15	234.200	10	04.330	8	38.280		0.000	48	531.335
24	24-May-2024	16	243.540	16	212.200		00.000	7	36.910		0.000	39	492.650
25	25-May-2024	15	262.585	15	255.945	6	03.250	11	60.120		0.000	47	581.900
26	26-May-2024	12	235.320	15	224.700	1	00.940	5	28.630		0.000	33	489.590
27	27-May-2024	13	199.560	13	197.680	5	03.050	10	51.495		0.000	41	451.785
28	28-May-2024	14	251.140	14	244.655	3	02.615	9	56.810		0.000	40	555.225
29	29-May-2024	16	260.990	16	250.475	11	06.810	3	16.840		0.000	46	535.115
30	30-May-2024	16	255.840	15	234.185	3	02.580	6	30.625		0.000	40	523.215
31	31-May-2024	16	252.780	16	250.675	6	03.575	7	43.315		0.000	45	550.315
Grand Total		476	7738.615	459	7030.348	157	104.445	234	1456.430		000.000	1326	16329.615

DR. BABA SAHEB AMBEDKAR HOSPITAL
(GOVT. OF NCT OF DELHI)
SECTOR-6, ROHINI, DELHI-110085

FORM I

ACCIDENT REPORTING FORM

1.	Date and time of accident.	
2.	Type of accident.	nil
3.	Sequence of events leading to accident.	nil
4.	Has the Authority been informed immediately informed immediately.	nil
5.	The Type of Waste involved in accident.	nil
6.	Assessment of the effects of the accidents on human health and environment.	nil
7.	Emergency measures taken.	nil
8.	Steps taken to alleviate the effects of accidents.	nil
9.	Step taken to prevent the recurrence of such an accident.	nil
10.	Does your facility have an Emergency Control Policy? If yes give details.	

Senio
N394076
Bmwm.

Date: Signature:

Place: Designation:

03/06/2011

Doc No.: BSA/Micro/ARF- 1/01
Ref: Bio- Medical Waste Division (DPCC)