FORM- C: MONTHLY REPORT TO BE MAINTAINED BY HEALTRH CARE ESTABLISHMENTS (HCFs)

MONTH:- JANUARY YEAR 2022 DATED:-____

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.	ОТ	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)	
		829	7449	
(b)	RED BAGS SENT TO CBMWTFs	780	6905	
(c)	WHITE CATEGORY	122	109	
(d)	BLUE CATEGORY	180	1227	
5	NAME OF CBWTF OPERATOR WITH WHOM AGREMENT MADE	BIOTIC WASTE SOLUTION PVT. LTD.		
6	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