

MONTHLY REPORTING FORMAT FOR BIOMEDICAL WASTE

Govt. of National Capital Territory of Delhi
Department of Health & Family Welfare

Report for the Month: JANUARY Year: 2017

Hospital/Dispensary NHMC & Hospital

Name of Ward/Generation point Do

Dates of Generation of Waste _____

Numbers of Yellow Bags sent for Incineration 19 Bags - 2.35 Kg

Total quantity in Kg. 2.35 Kg
(Category I, II, III, V & VI)

Number of red bags sent for autoclaving 45 Bags

Total quantity in Kg. 21.3 Kg
(Category IV & VII)

Quantity of ^{sharp} liquid waste (in litres approx.) 1 Box - 1.25 Kg
(Category VIII & X; waste generated from Lab and working, cleaning,
Housekeeping and disinfecting activities.)

Cardboard box with blue marking 1 Box - 2.5 Kg
Incinerator Ash in Kg

(Category IX applicable to incinerator contractor/personnel only)

Sender's name DR. SEEMA RAI

Signature _____

Date 01.02.17

Telephone No. 24334225, 24334228

NB: All government hospitals registered nursing homes and dispensaries are required to send this information in annexure A before 7th of each month to:
DHS, F-17, Swasthya Sewa Nideshalaya Bhawan, Karkardooma, Delhi-32.

N/S Vanita Anand
01/02/17
(N/S VANITA ANAND)

MONTHLY REPORTING FORMAT FOR BIOMEDICAL WASTE

Govt. of National Capital Territory of Delhi
Department of Health & Family Welfare

Report for the Month: FEBRUARY Year: 2017

Hospital/Dispensary NHMC & Hospital

Name of Ward/Generation point Do

Dates of Generation of Waste _____

Numbers of Yellow Bags sent for Incineration 22 Bags

Total quantity in Kg. 5.3 Kg
(Category I, II, III, V & VI)

Number of red bags sent for autoclaving 48 Bags

Total quantity in Kg. 29.15 Kg
(Category IV & VII)

Quantity of ~~liquid~~ sharp waste (in litres approx.) Nil
(Category VIII & X, waste generated from Lab and working, cleaning,
Housekeeping and disinfecting activities.)

Card board box with blue marking 2 Boxes - 4.5 Kg
Incinerator Ash in Kg
(Category IX applicable to incinerator contractor/personnel only)

Sender's name DR. SEEMA RAI

Signature Seema

Date 01.03.2017

Telephone No. 24334225, 24334228

NB: All government hospitals registered nursing homes and dispensaries are required to send this information in annexure ~~a~~ before 7th of each month to:
DHS, F-17, Swasthya Sewa Nideshalaya Bhawan, Karkardooma, Delhi-32.

Dr. Vanita
B.M.W.

MONTHLY REPORTING FORMAT FOR BIOMEDICAL WASTE
Govt. of National Capital Territory of Delhi
Department of Health & Family Welfare

Report for the Month: MARCH Year: 2017

Hospital/Dispensary NHMC & Hospital

Name of Ward/Generation point Do

Dates of Generation of Waste _____

Numbers of Yellow Bags sent for Incineration 22 Bags

Total quantity in Kg. 15.9 Kg
(Category I, II, III, V & VI)

Number of red bags sent for autoclaving 48 Bags

Total quantity in Kg. 20 Kg
(Category IV & VII)

Quantity of ^{sharp} liquid waste (in litres approx.) Nil
(Category VIII & X, waste generated from Lab and working, cleaning,
Housekeeping and disinfecting activities.)

Cardboard box ² blue marking 01 Box - 1.5 Kg

Incinerator Ash in Kg _____
(Category IX applicable to incinerator contractor/personnel only)

Sender's name DR. SEEMA RAI

Signature [Signature]

Date 01.04.2017

Telephone No. 24334225, 24334228

NB: All government hospitals registered nursing homes and dispensaries are required to send this information in annexure before 7th of each month to:
DHS, F-17, Swasthya Sewa Nideshalaya Bhawan, Karkardooma, Delhi-32.

[Signature]
N/Sr. - Varite Anand
01/04/17

MONTHLY REPORTING FORMAT FOR BIOMEDICAL WASTE

Govt. of National Capital Territory of Delhi
Department of Health & Family Welfare

Report for the Month: APRIL

Year: 2017

Hospital/Dispensary NHMC & HOSPITAL

Name of Ward/Generation point DO

Dates of Generation of Waste _____

Numbers of Yellow Bags sent for Incineration 19 Bags

Total quantity in Kg. 1.95 Kg
(Category I, II, III, V & VI)

Number of red bags sent for autoclaving 43 Bags

Total quantity in Kg. 19.6 Kg
(Category IV & VII)

Quantity of ^{Sharp} liquid waste (in litres approx.) Nil
(Category VIII & X, waste generated from Lab and working, cleaning,
Housekeeping and disinfecting activities.)

Cardboard box with blue marking
Incinerator Ash in Kg. 01 Box - 1 Kg
(Category IX applicable to incinerator contractor/personnel only)

Sender's name DR. SEEMA RAI

Signature Seema

Date 01.05.17

Telephone No. 24334225, 24334228

NB: All government hospitals registered nursing homes and dispensaries are required to send this information in annexure before 7th of each month to:
DHS, F-17, Swasthya Sewa Nideshalaya Bhawan, Karkardooma, Delhi-32.

Seema
(N/Sn - Vinita Anand)
01/05/17.

MONTHLY REPORTING FORMAT FOR BIOMEDICAL WASTE

Govt. of National Capital Territory of Delhi
Department of Health & Family Welfare

Report for the Month: May Year: 2017

Hospital/Dispensary NHMC & Hospital

Name of Ward/Generation point Do

Dates of Generation of Waste _____

Numbers of Yellow Bags sent for Incineration 21 Bags

Total quantity in Kg. 2.3 Kg
(Category I, II, III, V & VI)

Number of red bags sent for autoclaving 50 Bags

Total quantity in Kg. 27.3 Kg
(Category IV & VII)

Quantity of ~~liquid~~ ^{Liquid} waste (in litres approx.) 2 Cans for ETP - 9 litres
(Category VIII & X, waste generated from Lab and working, cleaning,
Housekeeping and disinfecting activities.)

Incinerator Ash in Kg 1 Box - 1.5 Kg Card board box
(Category IX applicable to incinerator contractor/personnel only) 2 blue marking - 2 Boxes
2 Kg

Sender's name DR. SEEMA RAI

Signature [Signature]

Date 01.06.17

Telephone No. 24334225, 24334228

NB: All government hospitals registered nursing homes and dispensaries are required to send this information in annexure before 7th of each month to:
DHS, F-17, Swasthya Sewa Nideshalaya Bhawan, Karkardooma, Delhi-32.

MONTHLY REPORTING FORMAT FOR BIOMEDICAL WASTE
Govt. of National Capital Territory of Delhi
Department of Health & Family Welfare

Report for the Month: JUNE

Year: 2017

Hospital/Dispensary NHMC & Hospital

Name of Ward/Generation point Do

Dates of Generation of Waste P

Numbers of Yellow Bags sent for Incineration 21 Bags

Total quantity in Kg. 2.2 Kg
(Category I, II, III, V & VI)

Number of red bags sent for autoclaving 43 Bags

Total quantity in Kg. 28.75 Kg
(Category IV & VII)

Quantity of liquid waste (in litres approx.) 02 cans for ETP - 08 litres
(Category VIII & X, waste generated from Lab and working, cleaning,
Housekeeping and disinfecting activities.)

Incinerator Ash in Kg sb carb board box c blue marking - 01 Box - 03 Kg
(Category IX applicable to incinerator contractor/personnel only)

Sender's name DR. ANU KAPOOR

Signature A
11/7/17

Date 01.07.17

Telephone No. 24334225, 24334228

NB: All government hospitals registered nursing homes and dispensaries are required to send this information in annexure a before 7th of each month to:
DHS, F-17, Swasthya Sewa Nideshalaya Bhawan, Karkardooma, Delhi-32.

MONTHLY REPORTING FORMAT FOR BIOMEDICAL WASTE

Govt. of National Capital Territory of Delhi
Department of Health & Family Welfare

Report for the Month: JULY

Year: 2017

Hospital/Dispensary NHMC & Hospital

Name of Ward/Generation point Do

Dates of Generation of Waste _____

Numbers of Yellow Bags sent for Incineration 14 Bags

Total quantity in Kg. 2.15 Kg
(Category I, II, III, V & VI)

Number of red bags sent for autoclaving 36 Bags

Total quantity in Kg. 22.95 Kg
(Category IV & VII)

Quantity of liquid waste (in litres approx.) 02 Cans - 800ml
(Category VIII & X, waste generated from Lab and working, cleaning,
Housekeeping and disinfecting activities.)

Card board box 2 blue marking
Incinerator Ash in Kg → 02 Boxes 2 Kg - Sharp - 2 Boxes 3.5 Kg
(Category IX applicable to incinerator contractor/personnel only)

Sender's name DR. SEEMA RAI

Signature Seema

Date 01.08.17

Telephone No. 24 334225, 24 334228

NB: All government hospitals registered nursing homes and dispensaries are required to send this information in annexure before 7th of each month to:
DHS, F-17, Swasthya Sewa Nideshalaya Bhawan, Karkardooma, Delhi-32.

Dr. Seema
1/08/17 - Vinita (Dr.)
01/08/17

MONTHLY REPORTING FORMAT FOR BIOMEDICAL WASTE
Govt. of National Capital Territory of Delhi
Department of Health & Family Welfare

Report for the Month: August Year: 2017

Hospital/Dispensary NHMC & Hospital

Name of Ward/Generation point Do

Dates of Generation of Waste _____

Numbers of Yellow Bags sent for Incineration 14 Bags

Total quantity in Kg. 2.1 Kg
(Category I, II, III, V & VI)

Number of red bags sent for autoclaying 36 Bags

Total quantity in Kg. 30 Kg
(Category IV & VII)

Quantity of liquid waste (in litres approx.) 01 Can 4.5 litres
(Category VIII & X, waste generated from Lab and working, cleaning,
Housekeeping and disinfecting activities.)

Card board box & blue
Incinerator Ash in Kg marking 01 Box - 3.5 Kg
(Category IX applicable to incinerator contractor/personnel only)

Sender's name DR. SEEMA RAI

Signature (Signature)

Date 01.09.2017

Telephone No. 24334225, 24334228

NB: All government hospitals registered nursing homes and dispensaries are required to send this information in annexure a before 7th of each month to:
DHS, F-17, Swasthya Sewa Nideshalaya Bhawan, Karkardooma, Delhi-32.

(Signature)
(N/A - Vaidik)

MONTHLY REPORTING FORMAT FOR BIOMEDICAL WASTE

Govt. of National Capital Territory of Delhi
Department of Health & Family Welfare

Report for the Month: September Year: 2017

Hospital/Dispensary _____

NHMC & Hospital

Name of Ward/Generation point _____

Do _____

Dates of Generation of Waste _____

Numbers of Yellow Bags sent for Incineration 14 Bags

Total quantity in Kg.
(Category I, II, III, V & VI)

1.15 Kg

Number of red bags sent for autoclaving _____

42 Bags

19.2 Kg

Total quantity in Kg.
(Category IV & VII)

Quantity of liquid waste (in litres approx.) 1 Can - 4 litres
(Category VIII & X, waste generated from Lab and working, cleaning,
Housekeeping and disinfecting activities.)

Cardboard box with blue marking

2 Boxes - 5 Kg & Sharp - 1

Incinerator Ash in Kg

(Category IX applicable to incinerator contractor/personnel only)

Sender's name DR. SEEMA RAI

Signature _____

Date _____

03.10.2017

Telephone No. 24334225, 24334228

NB: All government hospitals registered nursing homes and dispensaries are required to send information in annexure ~~a~~ before 7th of each month to:
DHS, F-17, Swasthya Sewa Nideshalaya Bhuwan, Karkardooma, Delhi-32.

Dr. Seema Rai
(Vinita Dand)

MONTHLY REPORTING FORMAT FOR BIOMEDICAL WASTE
Govt. of National Capital Territory of Delhi
Department of Health & Family Welfare

Report for the Month: OCTOBER Year: 2017

Hospital/Dispensary NHMC and Hospital

Name of Ward/Generation point DO

Dates of Generation of Waste _____

Numbers of Yellow Bags sent for Incineration 27 Bags

Total quantity in Kg. 1.9 Kg
(Category I, II, III, V & VI)

Number of red bags sent for autoclaving 44 Bags

Total quantity in Kg. 13 Kg 750 gm
(Category IV & VII)

Quantity of liquid waste (in litres approx.) 1 Can - 4 litres
(Category VIII & X, waste generated from Lab and working, cleaning,
Housekeeping and disinfecting activities.)

Card board Box c Blue marking - 3 Boxes - 4 Kg 750 gm
Incinerator Ash in Kg _____
(Category IX applicable to incinerator contractor/personnel only)

Sender's name DR. RAKESH THAKKAR

Signature (Signature)

Date 01.11.17

Telephone No. 24334225, 24334228

NB: All government hospitals registered nursing homes and dispensaries are required to send this information in annexure a before 7th of each month to:
DHS, F-17, Swasthya Sewa Nideshalaya Bhawan, Karkardooma, Delhi-32.

(Signature)
(Verified)
01/11/17

MONTHLY REPORTING FORMAT FOR BIOMEDICAL WASTE

Govt. of National Capital Territory of Delhi
Department of Health & Family Welfare

Report for the Month: NOVEMBER Year: 2017

Hospital/Dispensary NHMC & HOSPITAL

Name of Ward/Generation point — DO —

Dates of Generation of Waste _____

Numbers of Yellow Bags sent for Incineration 22 Bags

Total quantity in Kg. 632 Kg [Mattress sent for
(Category I, II, III, V & VI) condemnation - 630Kg]

Number of red bags sent for autoclaving 50 Bags

Total quantity in Kg. 9.25 Kg
(Category IV & VII)

Quantity of liquid waste (in litres approx.) NIL
(Category VIII & X, waste generated from Lab and working, cleaning,
Housekeeping and disinfecting activities.)

Cardboard box & Blue Marker
Incinerator Ash in Kg 01 Box - 3 Kg
(Category IX applicable to incinerator contractor/personnel only)

Sender's name DR. SEEMA RAI

Signature [Signature]

Date 01.12.17

Telephone No. 24334225, 24334228

NB: All government hospitals registered nursing homes and dispensaries are required to send this information in annexure A before 7th of each month to:
DHS, F-17, Swasthya Sewa Nideshalaya Bhawan, Karkardooma, Delhi-32.

MONTHLY REPORTING FORMAT FOR BIOMEDICAL WASTE
Govt. of National Capital Territory of Delhi
Department of Health & Family Welfare

Report for the Month: DECEMBER Year: 2017

Hospital/Dispensary NHMC & Hospital

Name of Ward/Generation point Do

Dates of Generation of Waste -

Numbers of Yellow Bags sent for Incineration 20 Bags

Total quantity in Kg. 1.7 Kg
(Category I, II, III, V & VI)

Number of red bags sent for autoclaving 39 Bags

Total quantity in Kg. 12.15 Kg
(Category IV & VII)

Quantity of liquid waste (in litres approx.) Nil - Sharp: Nil
(Category VIII & X, waste generated from Lab and working, cleaning,
Housekeeping and disinfecting activities.)

Box & Blue Mark → 01 Box - 2.75 Kg
Incinerator Ash in Kg
(Category IX applicable to incinerator contractor/personnel only)

Sender's name DR. SEEMA RAI

Signature [Signature]

Date 01.01.2018

Telephone No. 24 334 225, 24 334 228

NB: All government hospitals registered nursing homes and dispensaries are required to send this information in annexure A before 7th of each month to:
DHS, F-17, Swasthya Sewa Nideshalaya Bhawan, Karkardooma, Delhi-32.