

MONTHLY REPORTING FORMAT FOR BIOMEDICAL WASTE

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

Report for the Month: JANUARY Year: 2018

Hospital/Dispensary NHMC & Hospital

Name of Ward/Generation point Do

Dates of Generation of Waste -

Numbers of Yellow Bags sent for Incineration 26 Bags

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

Number of red bags sent for autoclaving 53 Bags

Total quantity in Kg. 11.9 Kg
(Category IV & VII)

Quantity of liquid waste (in litres approx) 01 Can 5 litres
(Category VIII & X, waste generated from Lab and working, cleaning,
Housekeeping and disinfecting activities.)

Incinerator Ash in Kg sharp 01 Box - 1 Kg - Box with blue mark - 01 Box - 2.5 Kg
(Category IX applicable to incinerator contractor/personnel only)

Sender's name DR. SEEMA RAI

Signature Seema Rai

Date 01.02.2018

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.