

वर्ष 2011-12 में कय की गई औषधियों की सूची व मात्रा के आपूर्ति की समय सारिणी।

S.NO	NAME OF MEDICINE	QUANTITY	INDENT DATE/ ORDER DATE	SUPPLY DATE
1	INJ. DICLOFENIC SOD. 3 ML	10000	26.05.11	WAITING
2	INJ. ETO PHYLINE + THEOPHYLLIN 2 ML	1000	"	"
3	TAB. CIPROFLOX 500 MG	50000	"	"
4	TAB. NORFLOX 400 MG	20000	"	"
5	TAB. DOMPERADON 10 MG	10000	"	"
6	TAB. DICLOFENIC SODIUM SR. 100 MG	100000	"	"
7	TAB. CETRIZINE 10 MG	50000	"	"
8	TAB. ALBENDAZOLE 400 MG	5000	"	"
9	INJ. SODABI CARB 25 ML	1000	"	"
10	TAB. RAINITIDIN 300 MG	40000	"	"
11	CAP. DOXY 100 MG	30000	"	"
12	TAB. ATENOLOL 50 MG	2800	"	"
13	INJ. M.V. 2 ML	3000	"	"
14	INJ. AMIKACIN 500 MG	3000	"	"
15	TAB. CLOTRIMAZOLE VAGINAL	30000	"	"
16	CREAM CLOTRIMAZOLE + BECLOMETH 15 GM	2000	"	20.06.11
17	TAB. PENTAPERAZOLE 40 MG	40000	"	WAITING
18	LIQUID DISODIUM HYDROGEN CITRATE 100 ML	5000	06.06.11	"
19	TAB. IBUPROFEN 400 MG	50000	"	"
20	TAB. NIMUSULIDE 100 MG	50000	"	"
21	OINT. DICLOFENIC SOD. 20 GM	1440	"	"
22	INJ. PARACETAMOL 2 ML	200	"	"
23	INJ. GENTAMICIN 2 ML 80MG	2000	"	"
24	INJ. DOPAMIN 5 ML	50	"	"
25	INJ. DEXA 2 ML	500	"	"
26	INJ. FRUSEMIDE 2 ML	500	"	"
27	INJ. HYDRO PROGESTRONE 500 MG 2 ML	1000	"	"
28	INJ. IRONDEXTRON 2 ML	2000	"	"
29	INJ. CAL. GLUCONATE 5 ML	100	"	"
30	CAP. ALFACALC. + CAL. CARB. 0.25 MG + 625 MG	20000	"	20.06.11
31	TAB. METHYL COBLAMINE 500 MG	20000	"	"
32	CAP. MEFANIC ACID 500 MG	20000	"	"
33	SUSP. EEFATE -0- 200 ML	1000	"	18.06.11



मुख्य चिकित्सा अधिकारी
जिला महिला चिकित्सालय, रामपुर

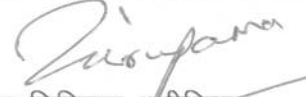
जिला महिला चिकित्सालय, रामपुर

बिन्दु नं०-3 छ

माह-जून 2011 की मासिक रिपोर्ट।

क्रम सं०	औषधियों के नाम	माह जून 11 में प्रयोग की गई औषधियों की मात्रा	माह जून 11 के अन्त में उपलब्ध औषधियों की मात्रा
1	INJ. ATROPIN 1 ML	200	200
2	TAB. ATIENOLOL 50 MG	280	NIL
3	INJ. ADRENALLINE 1 ML	NIL	50
4	CAP. ALPHA CALCIDAL + CAL. CARB.	10600	23500
5	CAP. AMOXY 500 MG	2500	21900
6	INJ. BOTROPASE 1 ML	10	10
7	TAB. CEFADROXYL 250 MG	17000	8000
8	TAB. COTRIMOXAZOLE. S.S.	NIL	2000
9	INJ. CEFTRIAZONE 1 GM	500	1000
10	CAP. CEPHALEXIN 250 MG	2000	22000
11	CLOTTRIMAZOLE + BACLOMETH. CREAM 15 GM	400	1600
12	IV. 5% DEXTROSE 500 ML	144	1512
13	IV. 10% DEXTROSE 500 ML	NIL	192
14	INJ. DIAZIPAM 2 ML	800	1950
15	INJ. DEXA 2 ML	NIL	20
16	CAP. DOXY 100 MG	NIL	3500
17	DICLOFENIC OINMENT 20 GM	300	680
18	TAB. ETHAM SYLATE 500 MG	3000	12600
19	SUSP. EEFATE .O. 200 ML	340	660
20	INJ. EPIDOCIN 1 ML	150	1150
21	TAB. FERRUSFUMARATE + FOLIC ACID + B12	20500	30000
22	TAB. FLUCONAZOLE 150 MG	2000	7000
23	INJ. HYDROCORTISON	NIL	40
24	INJ. ISOXSUPRINE 2 ML	NIL	200
25	INJ. IRONSUCROSE 5 ML	5	30
26	CAP. MEFANIC ACID 500 MG	6000	14000
27	TAB. MESOPROSTAL 200 MG	1000	NIL
28	TAB. METROGYL 400 MG	NIL	2000
29	TAB. METFORMIN 1 GM	100	1900
30	TAB. METHYAL COBLAMINE 500 MG	4000	16000
31	TAB. METHYAL ERGATE 0.125 MG	1000	37000
32	IV. METROGYL	192	528
33	INJ. METHYAL ERGATE 1 ML	800	8750
34	INJ. MAGSULPH 1 ML	300	1100
35	INJ. M.V. 2 ML	300	500
36	I.V. N.S. 500 ML	48	600
37	IV. OFLOX 100 ML	96	224
38	INJ. OXYTOCIN 1 ML	540	9760
39	O.R.S. PACKET 20 GM	600	600
40	TAB. OFLOX 200 MG	2100	NIL
41	TAB. ORIENDAZOLE 500 MG	2000	2000

42	TAB. PARACETAMOL 500 MG	15500	75000
43	INJ. PENTAZOCIN 1 ML	800	2300
44	INJ. PROMETHAGIN 2 ML	400	3750
45	IV. R.L. 500 ML	1104	3192
46	REVLON.P.SOL. 1000 ML	NIL	176
47	INJ. RAINITIDIN 2 ML	400	2900
48	TAB. ROXID 300 MG	NIL	5900
49	INJ. SODABICARB 25 ML	2	3
50	TAB. TINIDAZOLE 300 MG	2000	NIL
51	TAB. TINIDAZOLE 500 MG	NIL	25900
52	TAB. BCOMPLEX	25000	30500



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