

**जिला महिला चिकित्सालय, रामपुर**

बिन्दु नं०-३ क और घ

दिनांक 01.04.11 से 31.10.11 तक

वर्ष 2011-12 में स्थानीय स्तर पर 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	Cancelled Order 30.09.11
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	"	11.07.11
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	"	Cancelled Order 30.09.11
15	TAB. CLOTRIMAZOLE VAGINAL	30000	"	"
16	CREAM CLOTRIMAZOLE + BECLOMETH 15 GM	2000	"	20.06.11
17	TAB. PENTAPERAZOLE 40 MG	40000	"	Cancelled Order 30.09.11
18	LIQUID DISODIUM HYDROGEN CITRATE 100 ML	5000	06.06.11	"
19	TAB. IBUPROFEN 400 MG	50000	"	22.07.11
20	TAB. NIMUSULIDE 100 MG	50000	"	"
21	OINT. DICLOFENIC SOD. 20 GM	1440	"	"
22	INJ. PARACETAMOL 2 ML	200	"	Cancelled Order 30.09.11
23	INJ. GENTAMICIN 2 ML 80MG	2000	"	22.07.11
24	INJ. DOPAMIN 5 ML	50	"	Cancelled Order 30.09.11
25	INJ. DEXA 2 ML	500	"	22.07.11
26	INJ. FRUSEMIDE 2 ML	500	"	"
27	INJ. HYDRO PROGESTRONE 500 MG 2 ML	1000	"	"
28	INJ. IRONDEXTRON 2 ML	2000	"	Cancelled Order 30.09.11
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



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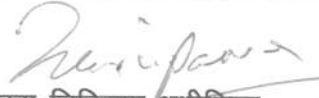
बिन्दु नं०-3 छ

माह-अक्टूबर 2011 की मासिक रिपोर्ट।

क्रम सं०	औषधियों के नाम	माह अक्टूबर 11 में प्रयोग की गई औषधियों की मात्रा	माह अक्टूबर 11 के अन्त में उपलब्ध औषधियों की मात्रा
1	INJ. ATROPIN 1 ML	NIL	200
2	INJ. ADRENOCROME 2 ML	20	10
3	INJ. AMIKACIN 500 MG	100	1150
4	TAB. ALUMINIUM HYDRO. 500 MG	13000	55900
5	TAB. ATIENOLOL 50 MG	140	1820
6	INJ. ANAWIN HEAVY 4 ML	30	NIL
7	DRY SYRUP AMOXICILIN 40 ML	NIL	530
8	SUSP. ALBENDAZOLE 10 ML	NIL	682
9	DRY SYRUP AMOX + CLAV 30 ML	NIL	270
10	ALARIC OINT. 20 GM	NIL	168
11	INJ. AMIKACIN 250 MG	259	200
12	TAB. ALBENDAZOLE 400 MG	NIL	6816
13	CAP. AMOXY 500 MG	1000	14900
14	TAB. AMOX+ CLAVE 375 MG	NIL	13300
15	INJ. BOTROPASE 1 ML	NIL	3
16	CAP. BECASULE	100	900
17	TAB. CEFAXIME 100 MG	NIL	400
18	TAB. CEFAXIME 200 MG	NIL	400
19	INJ. CEFTAZIDIME 250 MG	68	NIL
20	INJ. CEFTAZIDIME 1 GM	NIL	240
21	TAB. CEFADROXYL 500 MG	NIL	2000
22	TAB. CEFUROXIME 250 MG	NIL	8000
23	TAB. CALCIUM LAC. 300 MG	500	4500
24	TAB. CETRIZINE 10 MG	NIL	136200
25	INJ. CEFTRIAXONE 250 MG	309	NIL
26	INJ. CEFTRIAXONE 500 MG	150	NIL
27	CASTOR OIL	1 BOTTLE	NIL
28	TAB. COTRIMOXAZOLE. S.S.	500	NIL
29	TAB. CEFUROXIME 500 MG	NIL	12270
30	INJ. CEFTRIAXONE 1 GM	NIL	240
31	CAP. CEPHALEXIN 250 MG	500	7000
32	CLOTRIMAZOLE GEL 2% 30 GM	NIL	684
33	CLOTRIMAZOLE + BACLOMETH. CREAM 15 GM	150	NIL
34	IV. CIPROFLOX 100 ML	72	702
35	CIPROFLOX EYE DROP 10 ML	2	8
36	IV. 5% DEXTROSE 500 ML	456	1722
37	IV. 10% DEXTROSE 500 ML	72	384
38	IV. D.N.S. 500 ML	126	1920
39	INJ. DIAZIPAM 2 ML	300	100
40	TAB. DICLOFENIC SOD. 50 MG	7160	62000
41	TAB. DOMPERADON 10 MG	600	6220
42	INJ. DEXA 2 ML	NIL	400
43	INJ. DICLOFENIC SOD. 3 ML	20	10
44	CAP. DOXY 100 MG	NIL	12240
45	CAP. DANAZOLE 200 MG	500	1000

46	TAB. DULCOLAX 5 MG	30	170
47	TAB. DICYCLOMINE 20 MG	50	450
48	SUSP. DOMPERADON 30 ML	150	191
49	DICLOFENIC OINMENT 20 GM	440	NIL
50	SUSP. EROTHROMICIN 60 ML	NIL	305
51	TAB. ETHAM SYLATE 500 MG	2000	1600
52	TAB. EROTHROMICIN 250 MG	NIL	6000
53	INJ. EPIDOCIN 1 ML	250	NIL
54	INJ. ETOPHYLIN + ETO. 2 ML	20	10
55	TAB. FERRUS FUMARATE + FOL. ACID + B12	15500	107500
56	CAP. FEFOL. Z	60	940
57	TAB. FLUCONAZOLE 150 MG	1500	5000
58	TAB. FRUSEMIDE 40 MG	300	3110
59	INJ. FRUSEMIDE 2 ML	NIL	400
60	TAB. FEXOFENADINE 120 MG	NIL	1380
61	TAB. FOLIC ACID 5 MG	700	4300
62	INJ. GENTAMYCINE 80 MG 2 ML	350	700
63	INJ. HYDROPROGESTRONE 500 MG 2 ML	100	650
64	INJ. ISOXSUPRINE 2 ML	NIL	100
65	INJ. IRONSUCROSE 5 ML	NIL	5
66	TAB. BRUFEN 400 MG	16820	8800
67	LIQ. PARAFFIN	1 BOTTLE	1 BOTTLE
68	TAB. LEO CETRIZINE 5 MG	5500	500
69	INJ. MEPHENTERMINE 10 ML	2	1
70	TAB. MESOPROSTAL 200 MG	NIL	2300
71	TAB. MEBENDAZOLE 100 MG	500	3120
72	TAB. METFORMIN 1 GM	200	800
73	TAB. METHYAL ERGATE 0.125 MG	7000	23500
74	IV. MULT. ELE. WITH DEXTROSE 500 ML TYPE (P)	36	648
75	IV. METROGYL	216	126
76	IV. MULT. ELE. WITH DEXTROSE 500 ML TYPE (M)	72	612
77	INJ. METHYAL ERGATE 1 ML	1100	8450
78	INJ. MAGSULPH 1 ML	NIL	750
79	IV. MANITAL 20% 100 ML	20	112
80	INJ. M.V. 2 ML	850	1050
81	INJ. METACLOPRAMIDE 2 ML	20	10
82	MICONAZOLE OIN. 2% 20 GM	138	NIL
83	MICONAZOLE CREAM 2% 20GM	170	NIL
84	I.V. N.S. 500 ML	96	2286
85	TAB. NORETHISTERONE 5 MG	NIL	6000
86	TAB. NIMESULIDE 100 MG	NIL	40000
87	NEOSPORIN POWDER 10 GM	2	8
88	INJ. OXYTOCIN 1 ML	800	6300
89	O.R.S. PACKET 20 GM	300	2100
90	TAB. OFLOX 400 MG	1240	26000
91	TAB. OFLOX 200 MG	13620	NIL
92	CAP. OMIPERAZOLE 20 MG	80	4680
93	TAB. PARACETAMOL 500 MG	11500	146700
94	INJ. PENTAZOCIN 1 ML	300	2450

95	INJ. PARACETAMOL 2 ML	50	350
96	INJ. PHENRAMIN MALEATE 2 ML	20	10
97	INJ. PROMETHAGIN 2 ML	NIL	2900
98	INJ. PIPRACILIN + TAZOBACTUM 4.5 GM	NIL	150
99	PIPAZINE CITRATE 30 ML	NIL	20
100	TAB. PENTAPARAZOLE 40 MG	NIL	2130
101	POVIDINE IODINE SOL. 500 ML	NIL	252
102	IV. R.L. 500 ML	648	720
103	REVLON.P.SOL. 1000 ML	16	80
104	INJ. RANITIDIN 2 ML	500	1550
105	TAB. ROXID 150 MG	NIL	6840
106	TAB. ROXID 300 MG	NIL	5900
107	TAB. RANITIDIN 300 MG	12140	7700
108	SOFRAMICIN SKIN OIN. 30 GM	3	7
109	INJ. SODABICARB 25 ML	75	725
110	TAB. TRIMETHOPRIM + SULPHAMETH 160 + 800	NIL	1530
111	SUSP. TRIMETHOPRIM + SULPHAMETH 60 ML	NIL	153
112	TAB. TIDILAN 10 MG	50	50
113	TAB. TINIDAZOLE 500 MG	6620	21000
114	TAB. VERMISOL 150 MG	10	190
115	XYLOMETAZOLINE N DROP 10 ML	NIL	150

  
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