

**MONTHLY REPORT ON INSTITUTIONAL ACTIVITIES AND  
FUNCTIONAL INDICES FOR THE MONTH OF.....2022**

Name and Address of the Institution :

Name of the Superintendent :

Name of the MRO / Medical Record Librarian :

Sanctioned Bed Strength :

**1. Outpatients During the month**

<b>SI No</b>	<b>PATIENT CATEGORY</b>	<b>NEW OP</b>	<b>OLD OP</b>	<b>TOTAL OP</b>
1	Male			
2	Female			
3	Children			
<b>TOTAL</b>				

## **2. Average Daily OP Attendance**

<b>Sl No</b>	<b>Specialty</b>	<b>Total Attendance</b>
1	Cardiology	
2	Dental	
3	Clinical Psychology	
4	Dermatology	
5	ENT	
6	Endocrinology	
7	Fever	
8	Gastroenterology	
9	General Medicine	
10	General Surgery	
11	Gynecology And Obstetrics	
12	NCD	
13	Neonatology	
14	Nephrology /Dialysis	
15	Neurology	
16	Neurosurgery	
17	Oncology	
18	Oncology Surgery	
19	Ophthalmology	
20	Orthopedics	
21	Pediatrics	
22	PMR	
23	Physiotherapy	
24	Psychiatry	
25	Respiratory Medicine	
26	Urology	
27	Covid Test	
<b>TOTAL</b>		

**3. Average Casualty Attendance Per Day:**

**4. Admission Details (Male -      Female -      Children -      Total -      )**

SI No	Specialty	Male	Female	Male Child	Female Child	Total
1	Cardiology					
2	Dental					
3	Dermatology					
4	ENT					
5	Gastroenterology					
6	General Medicine					
7	General Surgery					
8	Gynecology &Obstetrics					
9	Neonatology					
10	Nephrology					
11	Neurology					
12	Ophthalmology					
13	Orthopedics					
14	Pulmonology					
15	Pediatrics					
16	Psychiatry					
17	Radiation Oncology					
18	Surgery					
<b>TOTAL</b>						

**5. Admission/Discharge Details**

a. Average daily Admission:

b. Average daily Discharge:

**6. Total Number of Death during the month:**

A. Among Inpatient :

b. Among OP / Casualty:

C. No of Brought Dead Cases:

7. Average no. Of Inpatient stay per day :

8. Bed occupancy Rate :

**9. No. Of cases Referred In and Referred Out :**

<b>SI No</b>	<b>IP/OP</b>	<b>Referred from other Hospital</b>	<b>Referred to other Hospital</b>
1	OP cases		
2	IP cases		

**10. Surgery Details**

<b>SI No</b>	<b>Specialty</b>	<b>Major</b>	<b>Minor</b>	<b>Total</b>	<b>Emergency</b>
1	Dental				
2	Dermatology				
3	ENT				
4	Gastroenterology				
5	General Surgery				
6	Gynecology				
7	Ophthalmology				
8	Orthopedics				
9	Pediatric Surgery				
10	Neurosurgery				
11	Nephrology				
12	Urology				
<b>TOTAL</b>					

## **11. Details of Surgery Doctor Wise**

<b>SI No</b>	<b>Specialty/ Doctor's Name</b>	<b>Major</b>	<b>Minor</b>	<b>Total</b>	<b>Emergency</b>
1	Dental:Dr.1 Dr.2				
2	Derma:Dr.1 Dr.2				
3	ENT :Dr.1 Dr.2				
4	Gyn/Obs : Dr.1 Dr.2				
5	Ortho : Dr.1 Dr.2				
6	Paedia :Dr.1 Dr.2				
7	Nephro : Dr.1 Dr.2				
8	Uro : Dr.1 Dr.2				
9	Gastro :Dr.1 Dr.2				
10	Pulm Medicine : Dr.1 Dr.2				
<b>TOTAL</b>					

## **12. Delivery Conducted- Total**

<b>Type</b>	<b>Number</b>	<b>Category</b>	<b>Number</b>	<b>Category</b>	<b>Number</b>
FTND		LSCS Primi		Low Birth weight	
Vaccum Extarction		LSCS Repeat		No. of Abortions	
Forceps Delivery				No. of PPS	
Assisted Breech					
LSCS					
<b>TOTAL</b>					

### **13. Delivery Details Doctor wise**

Sl No	Name of Doctor	Normal	LSCS	Total
1	Dr.			
2	Dr.			
3	Dr.			
4	Dr.			
5	Dr.			

### **14. Total Medico Legal Cases Reported**

Assault		Poisoning	
RTA		Medicine Overdose	
Accidental Fall		Electric Shock	
Accidental Injuries		Animal Bites	
Burn Cases		Suicidal Attempts	
Work Site Injuries		Intake of Chemicals and Organophosphorous	
Drunkenness Cases		No of Cases under Pocso Act	
No of Reports sent in Custody Medical Examination		No of Health Screening done for Jail Admission	
No of Potency Examinations done		Others	

### **15. No: of Postmortem Examination Done:**

(A) Medico Legal : Pathological:

No. Of Viscera sent to Chemical Analysis :

No. of Cases sent for Chemical Analysis :

No: of Chemical Analysis Reports Received:

### **16. Medical Record Department / Library – Staff Position**

Medical Record Officer :

Medical Record Librarian :

Medical Record Assistant :

**17. Details of Medical Board**

**(i) Disability Certificate**

- a. Number of Applications Received :
- b. Number of Certificates Issued :
- c. Number of Applications on Pending :

**(ii) Special Medical Board (MACT/ECCT)**

- a. Number of Applications Received :
- b. Number of Certificates Issued :
- c. Number of Applications on Pending :

18. Number of Case sheets in which Coding and Indexing done according to ICD -10

19. Details of Medical Record Committee Conducted:-

20. Other Institutional Activities under Medical Record Department, If any:-

Name, Designation & Signature  
Head of the Institution