

## **VELS**

#### MEDICAL COLLEGE & HOSPITAL

Under VELS INSTITUTE OF SCIENCE, TECHNOLOGY & ADVANCED STUDIES (VISTAS)
(Deemed to be University Estd. u/s 3 of the UGC Act. 1956)
Uthukottai Taluk, Tiruvallur District - 601 102

www.velsmedicalcollege.com



# DEPARTMENT OF COMMUNITY MEDICINE

FAMILY ADOPTION PROGRAMME



Under Vels Institute of Science, Technology and Advanced Studies (VISTAS)

Deemed to be University



## COMMUNITY MEDICINE - FAMILY ADOPTION PROGRAM

Community Medicine provides Promotive,
Preventive, Curative and Rehabilitative healthcare
for an entire community with an emphasis on
preventative measures at various levels.
Community medicine takes an active role in
maintaining the well-being of a particular
community, considering their needs.

Community engagement gives medical students a first-hand experience of the living conditions of the people they encounter as patients in the hospital. The specialty of Community Medicine serves the dual purpose of benefitting the medical students, as well as the community which the institution has adopted.



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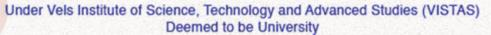


## COMMUNITY MEDICINE - FAMILY ADOPTION PROGRAM

The National Medical Commission (NMC) has mandated Family Adoption Programme (FAP) for MBBS students from 2022. Every student is to be allotted three to five families. The student is expected to establish rapport, understand their health and related factors, and help improve the healthcare of the family, and by extension, the community. Thus it is expected to help in achieving Universal Health Coverage.

FAP brings its challenges and opportunities. It is a very challenging task to implement this program by allotting families to each student and sustaining the follow-up throughout the undergraduate period.





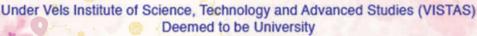


## COMMUNITY MEDICINE - FAMILY ADOPTION PROGRAM

## Objectives of Family Adoption Programme:

- Orient the learner towards primary health care
- Create health related awareness within the community
- Function as a first point of contact for any health issues within the community
- Act as a conduit between the population and relevant health care facility
- Generate and analyze related data for improving health outcomes and Evidence based clinical practices.







- VMCH is organizing a noteworthy event a general at the heart of Aathupakkam village.
- This compassionate initiative is set to take place from 9 am to 2 pm.
- Beneficiaries of events are 112 (68 males and 44 females). Each individual screened for Hypertension and diabetes. And around 14 members were referred to VMCH.
- A free health check up was organized by VMCH at Eeuguvaripelam village.
- This compassionate initiative is set to take place from 9 am to 2.30 pm, Beneficiaries of events are 98 (12 males and 86 females).
- Each individual screened for Hypertension and diabetes. And around 21 members were referred to VMCH.
- The patients were also provided with free medicines.



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- A free general and ophthalmology health check up was organized by VMCH at Kakkivakkam village.
- This compassionate initiative is set to take place from 9 am to 2.30 pm.
- Beneficiaries of events are 80 (20 males and 60 females).
- Each individual screened for Hypertension, diabetes and cataract. And around 37 members were referred to VMCH.
- The patients were also provided with free medicines.
- VMCH is organizing a noteworthy event a general at the heart of Eedur village.
- This compassionate initiative is set to take place from 9 am to 3 pm.
- Beneficiaries of events are 111 (35 males and 76 females).
- Each individual screened for Hypertension and diabetes. And around 22 members were referred to VMCH



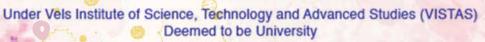
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- A free general and ophthalmology health check up was organized by VMCH at Mallingkuppam village, near Arani.
- This compassionate initiative is set to take place from 9 am to 2.30 pm. Beneficiaries of events are 135 (35 males and 100 females).
- Each individual screened for Hypertension, diabetes and cataract. And around 30 members were referred to VMCH.
- The patients were also provided with free medicines. Medical and para medical staffs were given health education on diet modification and exercises for the attendees.
- VMCH is organizing a noteworthy event a general camp at the heart of Kilambakkam village.
- This compassionate initiative is set to take place from 9 am to 3 pm.
- Beneficiaries of events are 126 (44 males and 79 females and 3 child).
- Each individual screened for Hypertension and diabetes. And around 22 members were referred to VMCH







## FAMILY ADOPTION PROGRAMME IN VMCH

#### 2021 - 2022

Batch	Village Name	Village Population	Village Pincode	No. of students	Total Family/Household adopted
2021-22	Manjankarani Village, Thanakulam, Kottukupam, Bandikavanoor	2937	600067	150	450

Village	2021-22
Manjankarani	
Village	658
Thanakulam	193
Kottukupam	436
Bandikavanoor	1650
Total	2937



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#### 2021 - 2022

Vels Medical College and Hospital, organized a one-day free medical camp for the benefit of public in vadamadhurai Village on 08.03.2022.

The medical camp was conducted and its organizing team included 50 medical students (2021 batch) and 30 NSS students (Vels pallavaram campus) led by Dr. Bhaskar Singam Setty, Dr.Archana Carolin, Dr.Sathish Dev, Dr.Jayanandhini. A and Dr.S.Sivaanusuya.

The medical team consisted of Dr. Senthil, MD., (General Medicine), Dr. Anand Pandyaraj, MS., (General Surgery), Dr. Vishnu Priya, (Dermatologist), and Compunders Mr.Suresh and Mr.Balaji from VMCH.

The teams arrived to the location at 9 am and the camp was inaugurated with a welcome speech by Dr.Bhaskar, Prof and HOD and Dr.Archana department of Community Medicine and with the presentation of shawl to the doctors by the members of village panchayat.

Many villagers participated in the camp thanks to wide publicity by NSS volunteers.

In total,52 villagers attended the medical camp and benefitted.

The NSS also arranged for free Blood Sugar Level and Blood Pressure tests which were hugely useful for many villagers.

Nearly 150 people have undergone their general health check-ups and 25 people were benefitted with the dermatology-skin check-ups.

After the checks up, many people were benefitted with the medicines provided free of cost by VMCH.

Few of the patients were referred by the doctors for further treatment at VMCH.

The medical students and NSS volunteers played a vital role in making this camp success with their dedication in serving people, they directed people in all needy way.



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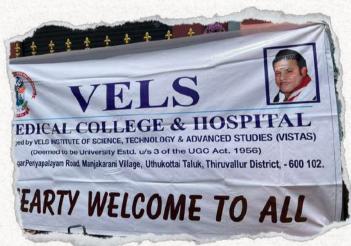
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08.03.2022

Health camp at Red Hills Totally 138 (M-90., F-48) patients were screened. Referred 42 patients to VMCH













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08.03.2022













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## 08.03.2022













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#### 2021 - 2022

Vels Medical College and Hospital, organized a one-day free medical camp for the benefit of public in Thanakulam Village on 10.04.2022.

The medical camp was conducted and its organizing team included 50 medical students (2021 batch) and 25 NSS students (vels pallavaram campus) led by Dr. Bhaskar Singam Setty, Dr.Archana Carolin, Dr.Sathish Dev, Dr.Jayanandhini.A and Dr.S.Sivaanusuya.

The medical team consisted of Dr. Shankar, MD., (General Medicine), Dr. Muthu Raman, MS., (General Surgery), Dr. Abirami, (Dermatologist), and Compunders Mr.Suresh and Mr.Balaji from VMCH.

The teams arrived to the location at 9 am and the camp was inaugurated with a welcome speech by Dr.Bhaskar, Prof and HOD, department of Community Medicine and with the presentation of shawl to the doctors by the members of village panchayat.

Many villagers participated in the camp thanks to wide publicity by NSS volunteers. In total, 32 villagers attended the medical camp and benefitted.

The NSS also arranged for free Blood Sugar Level and Blood Pressure tests which were hugely useful for many villagers.

Nearly 150 people have undergone their general health check-ups and 16 people were benefitted with the dermatology-skin check-ups. After the checks up, many people were benefitted with the medicines provided free of cost by VMCH.

Few of the patients were referred by the doctors for further treatment at VMCH.

The medical students and NSS volunteers played a vital role in making this camp success with their dedication in serving people, they directed people in all needy way.



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10.04.2022

Health camp at Kilambakkam Total no of attendees 126 (M-44.,F-79&C-3). Referals to VMCH-22













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10.04.2022













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## 10.04.2022





















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## SURVEY CONDUCTED GLIMPSES 2021 - 2022















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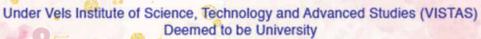














## FAMILY ADOPTION PROGRAMME IN VMCH

#### 2022 - 2023

Batch	Village Name	Village Population	Village Pincode	No. of students	Total Family/Household adopted
2022-23	Neiveli colony, Neiveli Thaleri, Poorivakkam Colony	2290	601102	150	450

Village	2022-23	
Neiveli colony	600	
Neiveli Thaleri	640	
Poorivakkam Colony	1050	
Total	2290	



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#### 2022 - 2023

Vels Medical College and Hospital, organized a one-day free medical camp for the benefit of public in Bandikavanoor Village on 08.08.2022 & 10.11,2022.

The medical camp was conducted and its organizing team included 50 medical students (2022 batch) and 30 NSS students (vels pallavaram campus) led by Dr. Bhaskar Singam Setty, Dr.Archana Carolin, Dr.Sathish Dev, Dr.Jayanandhini.A and Dr.S.Sivaanusuya.

The medical team consisted of Dr. Shankar, MD., (General Medicine), Dr. Muthu Raman, MS., (General Surgery), Dr. Abirami, (Dermatologist), and Compunders Mr.Suresh and Mr.Balaji from VMCH.

The teams arrived to the location at 9 am and the camp was inaugurated with a welcome speech by Dr.Bhaskar, Prof and HOD, department of Community Medicine and with the presentation of shawl to the doctors by the members of village panchayat.

Many villagers participated in the camp thanks to wide publicity by NSS volunteers. In total, 80 villagers attended the medical camp and benefitted.

The NSS also arranged for free Blood Sugar Level and Blood Pressure tests which were hugely useful for many villagers.

Nearly 150 people have undergone their general health check-ups and 32 people were benefitted with the dermatology-skin check-ups. After the checks up, many people were benefitted with the medicines provided free of cost by VMCH.

Few of the patients were referred by the doctors for further treatment at VMCH.

The medical students and NSS volunteers played a vital role in making this camp success with their dedication in serving people, they directed people in all needy way.



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08.08.2022

Health camp at MALLING
KUPPAM., Near ARANI along with
medical & paramedical staff.,
totally 135 patients were screened.,
Referrals to VMCH-30













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08.08.2022













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## 08.08.2022

















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10.11.2022

Health camp at EEDUR., Total no of attendees 111., M-35., F-76., Referals to VMCH-22









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10.11.2022











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#### 2022 - 2023

Vels Medical College and Hospital, organized a one-day free medical camp for the benefit of public in Neyveli Village on 20.02.2023.

The medical camp was conducted and its organizing team included 150 medical students (2022 batch) and 55 NSS students (vels pallavaram campus) led by Dr. Bhaskar Singam Setty, Dr.Archana Carolin, Dr.Neelakanti Rajashekar, Dr.Sathish Dev, Dr.Jayanandhini.A and Dr.S.Sivaanusuya.

The medical team consisted of Dr. Shankar, MD., (General Medicine), Dr. Anand Pandyaraj, MS., (General Surgery), Dr. Vishnu Priya, (Dermatologist), and Compunders Mr. Venkatesh and Mr. Balaji from VMCH.

The teams arrived to the location at 9 am and the camp was inaugurated with a welcome speech by Dr.Bhaskar, Prof and HOD and Dr.Sathish dev department of Community Medicine and with the presentation of shawl to the doctors by the members of village panchayat. Many villagers participated in the camp thanks to wide publicity by NSS volunteers.

In total,65 villagers attended the medical camp and benefitted.

The NSS also arranged for free Blood Sugar Level and Blood Pressure tests which were hugely useful for many villagers.

Nearly 450 people have undergone their general health check-ups and 25 people were benefitted with the dermatology-skin check-ups. After the checks up, many people were benefitted with the medicines provided free of cost by VMCH.

Few of the patients were referred by the doctors for further treatment at VMCH.

The medical students and NSS volunteers played a vital role in making this camp success with their dedication in serving people, they directed people in all needy way.

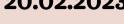


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KAKIVAKKAM., Total no of attendees 80., M-20., F-60., 20.02.2023 **Referals to VMCH-37** 















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### 20.02.2023



















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20.02.2023













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## SURVEY CONDUCTED GLIMPSES 2022 - 2023















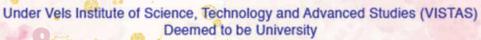














## FAMILY ADOPTION PROGRAMME IN VMCH

#### 2023 - 2024

Batch	Village Name	Village Population	Total Family/Household adopted
2023-24	Alinjivakkam	3000	300

Village	2023-24
Alinjivakkam	1000
Srinagar colony	800
Irilipattu	800
Ambedkar nagar	400
Total	3000



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#### 2023 - 2024

Vels Medical College and Hospital, with an intention to provide access of medical health care and generate awareness towards health among the underprivileged sections of the society, one day medical health camp was organised at Alinjivakkam Village on 20.08.2023 & 16.11.2023.

The medical camp was conducted and its organizing team included 150 medical students (2023 batch) and 45 NSS students (vels pallavaram campus) led by Dr. Bhaskar Singam Setty, Dr.Archana Carolin, Dr.Neelakanti Rajashekar, Dr.Sathish Dev, Dr.Jayanandhini.A, Dr.S.Sivaanusuya and DXr.Nishanthan.

The medical team consisted of Dr. Shankar, MD., (General Medicine), Dr. Vikram, MS., (General Surgery), Dr. Vishnu Priya, (Dermatologist), and Compunders Mr. Venkatesh, Mr. Seenu and Mr. Balaji from VMCH.

The teams arrived to the location at 10 am and the camp was inaugurated with a welcome speech by Dr.Bhaskar, Prof and HOD and Dr.Neelakanti rajashekar department of Community Medicine and with the presentation of shawl to the doctors by the members of village panchayat.

Many villagers participated in the camp thanks to wide publicity by NSS volunteers. In total,85 villagers attended the medical camp and benefitted.

The NSS also arranged for free Blood Sugar Level and Blood Pressure tests which were hugely useful for many villagers.

Nearly 450 people have undergone their general health check-ups and 50 people were benefitted with the dermatology-skin check-ups.

After the checks up, many people were benefitted with the medicines provided free of cost by VMCH.

Few of the patients were referred by the doctors for further treatment at VMCH.

The medical students and NSS volunteers played a vital role in making this camp success with their dedication in serving people, they directed people in all needy way.



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20.08.2023

Health camp at
Eeguvaripalem., Total no
camp attendees 98., M-12., F86., Referals to Vels Hospital21













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20.08.2023













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20.08.2023













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16.11.2023

Health camp conducted at Aathupakkam ., Total no of Attendees 112(M-68., F-44)., 18 were referred to VMCH













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### 16.11.2023













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### 16.11.2023













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### 16.11.2023



















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### SURVEY CONDUCTED GLIMPSES 2023 - 2024















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Department Of Community Medicine Activities
FAMILY ADOPTION PROGRAMME







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PALLAVARAM - CHENNAI

ACCREDITED BY NAAC WITH 'A' GRADE INSTITUTION WITH UGC 12B STATUS



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### **DEPARTMENT OF COMMUNITY MEDICINE**

### FAMILY ADOPTION PROGRAMME





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### DEPARTMENT OF COMMUNITY MEDICINE

### FAMILY ADOPTION PROGRAMME



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### No of Visits

S.No	Particulars	Visit-1	Visit-2	Visit-3	Visit-4
1	Date of Visit				
2	Sign of the Candidate				
3	Sign of the Faculty				

No. 12 / 123, Periyapalayam Road, Velan Nagar, Manjankaranai Village, Uthukottai Taluk, Tiruvallur District - 601 102. Phone : (91-44) 2762 9405

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Phone: (91-44) 2431 5541 / 2431 5542



# WELS MEDICAL COLLEGE & HOSPITAL Under VELS INSTITUTE OF SCIENCE, TECHNOLOGY & ADVANCED STUDIES (VISTAS) (Deemed to be University Esid. u/s 3 of the UGC Act. 1966) Ulthukottai Taluk, Tiruvaliur District - 601 102 www.velsmedicalcollege.com



# **Family Adoption Programme**

FAMILY- NO-1

SOCIO-DEMOGRAPHIC PROFILE OF THE FAMILY
Name of Head of the family:  Balan M  Complete A to
Complete Address: 264, Kulathur Street, Thanakulam
Contact Number: 9791131638
Marital Status: Unmarried / Married / Divorce / Separated / Widowed
Type of Family: Nuclear / Joint / Three generation
Total number of Family members :
Total income of Family : 35,000 Per capita income : 8150
BG Prasad Socio economic class : (Tick the appropriate option)
A. Class I 2. Class II 3. Class III 4. Class IV 5. Class V
Religion: 1. Hindu 2. Christian 3. Muslim 4.Others (specify):
Near by health facility: 1. Government Periyapalayam 2. Private
Usual source of medical care : 1. Hospital (Govt / Private) 2. Govt Primary Health Centre 3. Private practitioner 4. Others, Specify
Preferred system of medicine : 1. Allopathy 2. Ayurveda 3. Yoga 4. Unani 5. Siddha 6. Homeopathy 7. Others,
ICDS Beneficiaries: 1. Antenatal / Postnatal mother 2. Children 0-6 years  3. Adolescent girls (11-18 years)
Special groups in the family: 1. Antenatal / Postnatal mother 2. Under 5 Children 3. Geriatric people 4. Differently abled people

Vital events in the past 1 year: 1. Births (Y / N) 2. Deaths (Y / N) 3. Marriage (V / N) 4. Divorce (Y / N)

Covered under any health insurance / schemes: 1. State Government 2. Central Government 3. ESI 4. Private 5. Others (specify):

### FAMILY STRUCTURE

S.no	Age in completed years	Nui	mber	Tota
		Male	Female	
1.	Infants (<1 year)			
2.	1 - 5 Years			
3.	6 - 14 Years			
4.	15 - 48 Years	-		2
5.	49 - 60 Years	•		a
6.	60 - 64 Years	-6	1	
7.	>64 Years	4/-		-4

### **DEPENDENCY STATUS:**

Total dependency (young age + Old age ) = Number of children 0-14 years age + Population more than 65 years of age

### **DEPENDENCY RATIO:**

Number of children 0-14 years of age (+) Population more than 65 years of age /

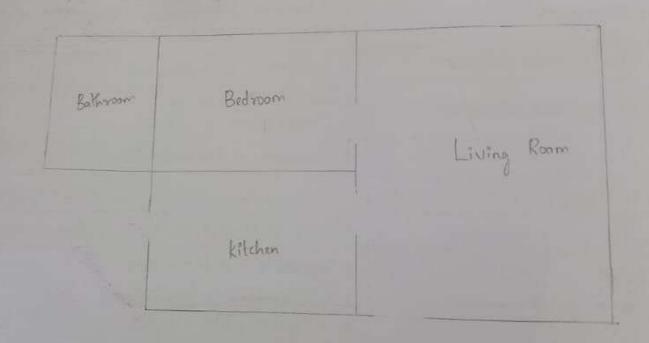
Population of 15 to 64 years X 100 = 
$$\frac{0}{3}$$
 × 100 =  $\frac{1}{3}$  × 100

### Environmental details

House	V 0	
Type of house	J. Own House 2. Rental House	
Duration of stay in current house	1. Kutcha 2. Pucca 3. Semi-pucca	
Approximate size of living	1.493 1.11111	
Todatola (Oq.It)	450 sq.ft	
Number of living rooms	IBHK	
Setback area	7. Present 2. Absent	
Overcrowding	1. Present 2. Absent	
Ventilation	J. Adequate 2. Inadequate	
Cross-Ventilation	1. Present 2. Absent	
Lighting .	Natural (Adequate / Inadequate)     Artificial (Adequate / Inadequate)	
KITCHEN		
Separate Kitchen	ℷ⁄. Yes 2. No	
Type of cooking fuel	LPG 2. Firewood 3. Kerosene stove     Lectric 5. Mixed	
Food Storage facilities	✓. Yes 2. No	
Smoke Outlet	✓. Present 2. Absent	
WATER		
Sources of drinking water	1. Bore well 2. Public tap 3. Mineral / RO Water 4. Others	
	1. Bore well 2. Public tap	
Sources of water for Domestic purpose	1/ Boiling 2 Filtering	
Water purification process followed	3. Chlorination 4. Others	
vvator po	1. Sanitary 2. Insanitary	
Storage		
SANITATION	J. Own 2. Shared 3. Public Latrine	
atrine	J. Sanitary 2. Insanitary	
	1. Continuous 2. Intermittent	
Cleanliness of toilet	3. No piped water supply	
Water supply	J. Dust bins 2. Plastic covers	
	a Others Specily	
Solid Waste disposal - Garbage	ning / I giluin	
Solid Waste disposation the house?	Collection by parions	
LOW IT IS STOLE	4. Others, Specify	
Disposal details		

Sewage disposal	1. Septic tank 2. Underground drainage system 3. Open air defecation 4. Others
Sullage disposal	Soakage pit 2. Open drainage     S. Closed drainage 4. Gardens     Others
ANIMALS: Animal(s) Reared:  Cattle Shed: Rodents: Vector Breeding Sites:	1. Yes 2. No If Yes, Pets / Domestic (specify)
Details of Tree plantation activities	

### DRAW THE HOUSING PLAN:



### SOCIO - CULTURAL PRACTICES :

S.no	Practices	Details of practice	Remarks
1.	Personal hygiene of the family members - Bathing, hand washing, oral hygiene etc.	Good and Adequate	
2.	Indiscriminate spitting in and around the house	Yes	
3.	Addictions : Smoking & tobacco usage	NIL	_
	Alcohol	Balan drinks one bottle of alcohol per day for almost 25 yrs	<u> </u>
	Cow dung smearing to floor	No	

Other practices : (specify, if any) :

Nil

PRA	CTICES AMONG WOMEN AND CHILDREN :	Details of practice
S.n		
1.	Consanguineous marriage	
2.	Menstrual hygiene	a)Cloth b)Napkin c)Others. Frequency of Changing it:
4.	Maternal and child health practices  Pregnancy & Lactation - Special diet, physical activity, Antenatal care, Exclusive breast feeding Mention any other customs followed	
5.	Child Rearing practices -  Oil bath, applying kajal, usual time of commencement of breast feeding, colostrum given or not, prelacteal feeds, - Artificial milk - bottle feeding or spoon - Age at which weaning is started and foods introduced - Any other custom	
6.	Attitude towards Immunization Immunization details of the child :	
	Details of Family planning Family size decision	-
	Preference for male child	

### DIETARY PRACTICES :

Type of diet: 1. Vegetarian 2. Mixed diet 3. Others, specify

Meal pattern : Bed tea, Breakfast, Lunch, Evening tea, Dinner, Bedtime drink.

### Write about the Family's Meal Pattern : (24 hour recall method)

Bed Tea	2		attern . (24	nour recal	l method)
Da ra	Breakfast	Lunch	Evening tea	Dinner	Bedfime drink
lea	Dosa/Idl:	Rice, Sambar	Coffee/Tea	Dosa/ Idli/	Razely Milk

Average Monthly Expenditure on Food : ~ 4000

Particulars		Inference
Staple diet	Rige / Wheat / Millets	
Using greens, vegetables, fruits,	Yes / No	
Fermentation of grains	Yes / N/6	
Sprouting of grains	Yes / N/6	
Use of lodized salts	Yes / No	Limited intake

Family food practices: Egg 2-3 times a week, Fish, Chicken 1-2 times

### Mention any food taboos, restrictions and prejudice in the family :

Raw Banana Jallergic to Mrs. Kasthuri Potato Brinjal – allergic to Mrs. Sumithra No Beef – religions restrictions.

Assessment of I	Knowledge, Attitude and P	Attitude (Beliefs		
Health particulars	Knowledge (Good / Average / Poor)	and Customs) (Positive/Negative)	Practices Yes / No If Yes - Regular / Irreg	
Healthy lifestyle	Average	Positive	Yes Regular	
Prevention of Common diseases	Good	Positive	Yes Reguler	
Family planning services	Good	Postfire	Yes Regular	
Sanitation and hygiene	Good	Positive	Yu Regular	
Psychiatric condition	Grood	Positive	Yes Regular	
nvironmental rotection	Grood	Positive	Yes Regular	

HEALTH NEEDS	GENERAL NEEDS
cines to be arranged	THAT HELDS



### ADILS

### MEDICAL COLLEGE & HOSPITAL

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### DEPARTMENT OF COMMUNITY MEDICINE

### FAMILY ADOPTION PROGRAMME

Photo of the Student

Name of the Student	: D. ABISHEL NO3
Registration Number / Academic Year	:
Name of the Village /Area allotted	·

### No of Visits

S.No	Particulars	Visit-1	Visit-2	Visit-3	Visit-4
1	Date of Visit				
2	Sign of the Candidate				
3	Sign of the Faculty				

No. 12 / 123, Periyapalayam Road, Velan Nagar, Manjankaranai Village, Uthukottai Taluk, Tiruvallur District - 601 102. Phone : (91-44) 2762 9405

E-mail: info@velsmedicalcollege.org www.velsmedicalcollege.com

Regd. Office: #521 / 2, Anna Salai, Nandanam, Chennai - 600 035.

Phone: (91-44) 2431 5541 / 2431 5542



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Uthukottai Taluk, Tiruvallur District - 601 102
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### **Family Adoption Programme**

FAMILY- NO-

SOCIO-DEMOGRAPHIC PROFILE OF THE FAMILY: DATE: 12-7-2022
Name of Head of the family: PM ANANDAN
Complete Address: 150 SIVAN KOIL STREET MAN JANKARA NAI PER IYA PALAVAM ROAD THIRUVALLUR DETRICT, 601102 Contact Number: 6380305530
Marital Status : Unmarried / Married / Divorce / Separated / Widowed
Type of Family : Nuclear / Joint / Three generation
Total number of Family members :
Total income of Family: 2000 Per capita income: 5000
BG Prasad Socio economic class : (Tick the appropriate option)
1. Class I 2. Class II 3. Class III 4. Class IV 5. Class V
Religion: 4. Hindu 2. Christian 3. Muslim 4. Others (specify):
Near by health facility: 1. Government 2. PrivateVMCH Distance 1 Rm
Usual source of medical care : 4. Hospital (Govt / Private) 2. Govt Primary Health Centre 3. Private practitioner 4. Others, Specify
Preferred system of medicine: 4. Allopathy 2. Ayurveda 3. Yoga 4. Unani 5. Siddha 6. Homeopathy 7. Others,
ICDS Beneficiaries: 1. Antenatal / Postnatal mother 2. Children 0-6 years  3. Adolescent girls (11-18 years)
3. Adolescent girls (11.49) Special groups in the family: 1. Antenatal / Postnatal mother 2. Under 5 Children 3. Geriatric people 4. Differently abled people

Vital events in the past 1 year: 1. Births (Y / N) 2. Deaths (Y / N) 3. Marriage (Y / N) 4. Divorce (Y / Ň) 4. Divorce (1774)

A. Divorce (1774)

Covered under any health insurance / schemes: 1. State Government 2. Central

Covered under any health insurance / schemes: 1. State Government 2. Central Government 3. ESI 4. Private 5. Others (specify):

### FAMILY STRUCTURE

S.no	Age in completed years	Number		
		Male	Female	
1.	Infants (<1 year)		Sinale	
2.	1 - 5 Years			
3.	6 - 14 Years			
4.	15 - 48 Years	0		
5.	49 - 60 Years	2		0
	60 - 64 Years		)	2
	>64 Years			

### **DEPENDENCY STATUS:**

Total dependency (young age + Old age ) = Number of children 0-14 years age + Population more than 65 years of age

## **DEPENDENCY RATIO:**

Number of children 0-14 years of age (+) Population more than 65 years of age /

Environmental details		
House		
Type of house	1. Own House 2. Rental House	
Duration of stay in current house	1. Kutcha 2. Pucca 3. Semi-pucca	
Approximate size of living space of household (Sq.ft)	puoca -	
	260	
Number of living rooms	800 sar. fect.	
Setback area	1. Present 2. Absent	
Overcrowding	1 5 V	
Ventilation	1. Present 2. Absent	
Cross-Ventilation	1. Adequate 2. Inadequate	
Lighting	1. Present 2. Absent	
KITOUTA	Natural (Adequate / Inadequate)     Artificial (Adequate / Inadequate)	
KITCHEN	(Fladquate / Madequate)	
Separate Kitchen	1. Yes 2. No	
Type of cooking fuel	1. LPG 2. Firewood 3. Kerosene stove 4. Electric 5. Mixed	
Food Storage facilities	1. Yes 2. No	
Smoke Outlet	1. Present 2. Absent	
WATER	Toodit 2. Absell	
Sources of drinking water	Bore well 2. Public tap     Mineral / RO Water 4. Others	
Sources of water for Domestic purpose	1. Bore well 2. Public tap	
Water purification process followed	Boiling 2. Filtering     Chlorination 4. Others	
Storage	1. Sanitary 2. Insanitary	
SANITATION		
atrine	1. Own 2. Shared 3. Public Latrine	
Cleanliness of toilet	1. Sanitary 2. Insanitary	
dearininess of tonot	1. Continuous 2. Intermittent	
/ater supply	3. No piped water supply	
olid Waste disposal - Garbage ow it is stored inside the house? sposal details	1. Dust bins 2. Plastic covers 3. Others, Specify  1. Dumping 2. Landfill 3. Collection by panchayat 4. Others, Specify	

Sewage disposal	drainage system 3. Open air defecation 4. Others
Sullage disposal	1. Soakage pit 2. Open drainage 3. Closed drainage 4. Gardens
ANIMALS :	
Animal(s) Reared :	1. Yes 2. No If Yes,
Cattle Shed :	Pets / Domestic (specify)
Rodents:	1. Present 2. Absent Distance
Vector Breeding Sites :	1. Present 2. Absent  1. Present 2. Absent
Details of Tree plantation activities	
DRAW THE HOUSING PLAN:	

# SOCIO - CULTURAL PRACTICES :

3e

S.no	Practices	Details of practice	Remarks
1.	Personal hygiene of the family members - Bathing, hand washing, oral hygiene etc.	Ves	good.
2.	Indiscriminate spitting in and around the house	No.	
3.	Addictions : Smoking & tobacco usage	No.	
Alcohol	No.		
4.	Cow dung smearing to floor	No.	_

Other practices : (specify, if any) :

# PRACTICES AMONG WOMEN AND CHILDREN:

	Practices	Details of practic
1.	Age at marriage of boys and girls	
2.	Consanguineous marriage	
3.	Menstrual hygiene	a)Cloth b)Napkin c)Others Frequency of Changing it:
4.	Maternal and child health practices  Pregnancy & Lactation - Special diet, physical activity, Antenatal care, Exclusive breast feeding  Mention any other customs followed	
5.	Child Rearing practices -  Oil bath, applying kajal, usual time of commencement of breast feeding, colostrum given or not, prelacteal feeds, - Artificial milk - bottle feeding or spoon	
	- Age at which weaning is started and foods introduced - Any other custom	
A Ir	- Age at which weaning is started and foods introduced	
De	- Age at which weaning is started and foods introduced - Any other custom	

ype of diet: 1. Vegetarian 2. Mixed diet Meal pattern: Bed tea, Breakfast, Lunch Tea Idly Rice	, Evening tea, Dinner, Bedtim	ne drink.
Vrite about the Family's Meal Pattern		
Average Monthly Expenditure on Foo	od: 2000	
Particulars		Inference
Staple diet Using greens, vegetables, fruits, Fermentation of grains Sprouting of grains Use of lodized salts	Rice / Wheat / Millets Yes / No Yes / No Yes / No Yes / No	
Family food practices :		
Mention any food taboos, restricti	ons and prejudice in the fa	amily:

s v nowledge,	Attitude	and Practices
- Waawleage,	6.04	

esment o	f Knowledge, Attitude a	Attitude /Pall-5	
Health particulars	(Good / Average		Pract Yes If Yes Regular/
Healthy lifestyle	Average	Posetene	Yes Regula
Prevention of Common diseases	Average	Besterne	Yes Regula
Family planning services	Average	Positine	Yes Regular
Sanitation and hygiene	Aherage	Posttine	Yes Regular
Psychiatric condition	Grooch	Posttine	Yes
Environmental protection	Average.	Postene	Regular Yes Regular

FELT NEEDS	OF THE -	
	OF THE FAI	VILY

HEALTH NEEDS	
11208	GENERAL NEEDS



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No. 12 / 123, Periyapalayam Road, Velan Nagar, Manjankaranai Village, Uthukottai Taluk, Tiruvallur District - 601 102

### **DEPARTMENT OF COMMUNITY MEDICINE**

### FAMILY ADOPTION PROGRAMME

Photo of the Student

Name of the Student	:
Registration Number / Academic Year	:
Name of the Village /Area allotted	:

#### No of Visits

S.No	Particulars	Visit-1	Visit-2	Visit-3	Visit-4
1	Date of Visit				
2	Sign of the Candidate				
3	Sign of the Faculty				

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### **Family Adoption Programme**

FAMILY- .....

SOCIO-DEMOGRAPHIC PROFILE OF THE FAMILY : DATE :
Name of Head of the family :
Complete Address :
Contact Number :
Marital Status : Unmarried / Married / Divorce / Separated / Widowed
Type of Family :
Total number of Family members :
Total income of Family : Per capita income :
BG Prasad Socio economic class : (Tick the appropriate option)
1. Class I 2. Class II 3. Class III 4. Class IV 5. Class V Religion: 1. Hindu 2. Christian 3. Muslim 4.Others (specify):
Near by health facility : 1. Government 2. Private Distance
Usual source of medical care : 1. Hospital (Govt / Private) 2. Govt Primary Health Centre 3. Private practitioner 4. Others, Specify
Preferred system of medicine : 1. Allopathy 2. Ayurveda 3. Yoga 4. Unani 5. Siddha 6. Homeopathy 7. Others,
ICDS Beneficiaries : 1. Antenatal / Postnatal mother 2. Children 0-6 years 3. Adolescent girls (11-18 years)
Special groups in the family: 1. Antenatal / Postnatal mother 2. Under 5 Children 3. Geriatric people 4. Differently abled people

Vital events in the past 1 year : 1. Births (Y / N) 2. Deaths (Y / N) 3. Ma	rriage (Y /N)
4. Divorce (Y / N)	
Covered under any health insurance / schemes : 1. State Government	2. Central
Government 3. ESI 4. Private 5. Others (specify) :	6. None

#### **FAMILY STRUCTURE**

S.no	Age in completed years	Number		Total
		Male	Female	
1.	Infants (<1 year)			
2.	1 - 5 Years			
3.	6 - 14 Years			
4.	15 - 48 Years			
5.	49 - 60 Years			
6.	60 - 64 Years			
7.	>64 Years			

#### **DEPENDENCY STATUS:**

Total dependency (young age + Old age ) = Number of children 0-14 years age + Population more than 65 years of age

#### **DEPENDENCY RATIO:**

Number of children 0-14 years of age (+) Population more than 65 years of age / Population of 15 to 64 years X 100 =

### **Environmental details**

House	1. Own House 2. Rental House
Type of house	1. Kutcha 2. Pucca 3. Semi-pucca
Duration of stay in current house	
Approximate size of living space of household (Sq.ft)	
Number of living rooms	
Setback area	1. Present 2. Absent
Overcrowding	1. Present 2. Absent
Ventilation	1. Adequate 2. Inadequate
Croos-Ventilation	1. Present 2. Absent
Lighting	Natural (Adequate / Inadequate)     Artificial (Adequate / Inadequate)
KITCHEN	
Separate Kitchen	1. Yes 2. No
Type of cooking fuel	<ol> <li>LPG 2. Firewood 3. Kerosene stove</li> <li>Electric 5. Mixed</li> </ol>
Food Storage facilities	1. Yes 2. No
Smoke Outlet	1. Present 2. Absent
WATER	
Sources of drinking water	Bore well 2. Public tap     Mineral / RO Water 4. Others
Sources of water for Domestic purpose	1. Bore well 2. Public tap
Water purification process followed	Boiling 2. Filtering     Chlorination 4. Others
Storage	1. Sanitary 2. Insanitary
SANITATION	
Latrine	1. Own 2. Shared 3. Public Latrine
Cleanliness of toilet	1. Sanitary 2. Insanitary
Water supply	Continuos 2. Intermittent     No piped water supply
Solid Waste disposal - Garbage How it is stored inside the house? Disoposal details	<ol> <li>Dust bins 2. Plastic covers</li> <li>Others, Specify</li> <li>Dumping 2. Landfill</li> <li>Collection by panchayat</li> <li>Others, Specify</li> </ol>

Sewage disposal	Septic tank 2. Underground drainage system 3. Open air defecation 4. Others
Sullage disposal	<ol> <li>Soakage pit 2. Open drainage</li> <li>Closed drainage 4. Gardens</li> <li>Others</li> </ol>
ANIMALS:	
Animal(s) Reared :	1. Yes 2. No If Yes,
	Pets / Domestic (specify)
Cattle Shed :	1. Present 2. Absent <b>Distance</b>
Rodents:	1. Present 2. Absent
Vector Breeding Sites :	1. Present 2. Absent
Details of Tree plantation activities	

#### **DRAW THE HOUSING PLAN:**

### **SOCIO - CULTURAL PRACTICES:**

S.no	Practices	Details of practice	Remarks
1.	Personal hygiene of the family members - Bathing, hand washing, oral hygiene etc.		
2.	Indiscriminate spitting in and around the house		
	Addictions :		
3.	Smoking & tobacco usage		
	Alcohol		
4.	Cow dung smearing to floor		

Other practices : (specify, if any) :

### PRACTICES AMONG WOMEN AND CHILDREN:

S.no	Practices	Details of practice
1.	Age at <b>marriage</b> of boys and girls	
2.	Consanguineous marriage	
3.	Menstrual hygiene	a)Cloth b)Napkin c)Others Frequency of Changing it:
4.	Maternal and child health practices Pregnancy & Lactation - Special diet, physical activity, Antenatal care, Exclusive breast feeding Mention any other customs followed	
5.	Child Rearing practices -  Oil bath, applying kajal, usual time of commencement of breast feeding, colostrum given or not, prelacteal feeds, - Artificial milk - bottle feeding or spoon - Age at which weaning is started and foods introduced - Any other custom	
6.	Attitude towards Immunization Immunization details of the child :	
7.	Details of Family planning Family size decision	
8.	Preference for male child	

#### **DIETARY PRACTICES:**

Type of diet: 1. Vegetarian 2. Mixed diet 3. Others, spec	ecify
---	-------

Meal pattern: Bed tea, Breakfast, Mid - morning Lunch, Evening tea, Dinner,

Bedtime drink.

Write about the Family's Meal Pattern: (24 hour recall method)

#### **Average Monthly Expenditure on Food:**

Particulars		Inference
Staple diet Using greens, vegetables, fruits,	Rice / Wheat / Milllets Yes / No	
Fermentation of grains	Yes / No	
Sprouting of grains	Yes / No	
Use of lodized salts	Yes / No	

### Family food practices:

Mention any food taboos, restrictions and prejudice in the family:

### **Assessment of Knowledge Attitude and Practices**

Health particulars	Knowledge (Good / Average / Poor)	Attitude (Beliefs and Customs) (Positive/Negative)	Practices Yes / No If Yes - Regular / Irregular
Healthy lifestyle			
Prevention of Common diseases			
Family planning services			
Sanitation and hygiene			
Psychiatric condition			
Environmental protection			

FELT NEEDS OF THE FAMILY			
HEALTH NEEDS	GENERAL NEEDS		

#### **FAMILY HEALTH PROFILE**

Examine and interview all the family members present during your visit. Briefly summarize the findings.

1) NAME :	Age / S	ex	Date	of Vis	sit
CHIEF COMPLAINTS					
PAST HISTORY					
PERSONAL HISTORY					
TREATMENT HISTORY					
IMMUNIZATION STATUS:					
COVID VACCINATION STATUS:	a)Single dose b)Do	uble dose	c) Booste	r	
GENERAL EXAMINATION	TEMPERATURE: HEIGHT (cms):		BP:		
SYSTEMIC EXAMINATION					
DIGANOSIS / SUMMARY OF THE FINDINGS					
MANAGEMENT					
INVESTIGATIONS	HEMOGLOBIN: BLOOD SUGAR: BLOOD GROUP:		URINE P		
ADVICE GIVEN		1			
FOLLOW UP					

2) NAME :	Age / S	ex	Date of Visit
CHIEF COMPLAINTS			
PAST HISTORY			
PERSONAL HISTORY			
TREATMENT HISTORY			
IMMUNIZATION STATUS:			
COVID VACCINATION STATUS:	a)Single dose b)Do	uble dose	c) Booster
GENERAL EXAMINATION	TEMPERATURE: HEIGHT (cms):		BP: RR: 「(kg): BMI:
SYSTEMIC EXAMINATION			
DIGANOSIS / SUMMARY OF THE FINDINGS			
MANAGEMENT			
INVESTIGATIONS	HEMOGLOBIN: BLOOD SUGAR: BLOOD GROUP:		URINE PROTEIN: URINE SUGAR:
ADVICE GIVEN		I	
FOLLOW UP			

3) NAME :	Age / Sex.	Date of Visit
CHIEF COMPLAINTS		
PAST HISTORY		
PERSONAL HISTORY		
TREATMENT HISTORY		
IMMUNIZATION STATUS:		
COVID VACCINATION STATUS:	a)Single dose b)Doub	le dose c) Booster
GENERAL EXAMINATION	TEMPERATURE: HEIGHT (cms):	PULSE: BP: RR: WEIGHT (kg): BMI:
SYSTEMIC EXAMINATION		
DIGANOSIS / SUMMARY OF THE FINDINGS		
MANAGEMENT		
INVESTIGATIONS	HEMOGLOBIN: BLOOD SUGAR: BLOOD GROUP:	URINE PROTEIN: URINE SUGAR:
ADVICE GIVEN		l
FOLLOW UP		

4) NAME :	Age / S	Sex Date of Visit
CHIEF COMPLAINTS		
PAST HISTORY		
PERSONAL HISTORY		
TREATMENT HISTORY		
IMMUNIZATION STATUS:		
COVID VACCINATION STATUS :	a)Single dose b)Do	ouble dose c) Booster
GENERAL EXAMINATION	TEMPERATURE: HEIGHT (cms):	
SYSTEMIC EXAMINATION		
DIGANOSIS / SUMMARY OF THE FINDINGS		
MANAGEMENT		
	HEMOGLOBIN:	URINE PROTEIN:
INVESTIGATIONS	BLOOD SUGAR:	URINE SUGAR:
	BLOOD GROUP:	
ADVICE GIVEN		
FOLLOW UP		

5) NAME :	Age / Se	c Date of Visit
CHIEF COMPLAINTS		
PAST HISTORY		
PERSONAL HISTORY		
TREATMENT HISTORY		
IMMUNIZATION STATUS:		
COVID VACCINATION STATUS:	a)Single dose b)Dou	ble dose c) Booster
GENERAL EXAMINATION	TEMPERATURE: HEIGHT (cms):	PULSE: BP: RR: WEIGHT (kg): BMI:
SYSTEMIC EXAMINATION		
DIGANOSIS / SUMMARY OF THE FINDINGS		
MANAGEMENT		
INVESTIGATIONS	HEMOGLOBIN: BLOOD SUGAR: BLOOD GROUP:	URINE PROTEIN: URINE SUGAR:
ADVICE GIVEN		
FOLLOW UP		

6) NAME :	Age / Sex.	Date of Visit
CHIEF COMPLAINTS		
PAST HISTORY		
PERSONAL HISTORY		
TREATMENT HISTORY		
IMMUNIZATION STATUS:		
COVID VACCINATION STATUS:	a)Single dose b)Doub	le dose c) Booster
GENERAL EXAMINATION		PULSE: BP: RR: WEIGHT (kg): BMI:
SYSTEMIC EXAMINATION		
DIGANOSIS / SUMMARY OF THE FINDINGS		
MANAGEMENT		
	HEMOGLOBIN:	URINE PROTEIN:
INVESTIGATIONS	BLOOD SUGAR: BLOOD GROUP:	URINE SUGAR:
	BLOOD GROUP.	
ADVICE GIVEN		
FOLLOW UP		