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| **CBHI Form No. 5A** |
| **Annual (State / UT)** |

**NUMBER OF STATE GOVERNMENT\* NURSING AND PARAMEDICAL PERSONNEL WORKING IN THE STATE / UT AS ON 31st DECEMBER OF THE REPORTING YEAR**

**NAME OF THE STATE/UT: NAME OF THE DISTRICT: Reporting Year : ................**

| **S. No** | **Nursing and Paramedical Personnel** | **STATE GOVT** | **LOCAL GOVT BODIES** | **TOTAL** |
| --- | --- | --- | --- | --- |
| **Purely State** | **Autonomous** | **Purely local bodies** | **Autonomous** |  |
| **M** | **F** | **T** | **M** | **F** | **T** | **M** | **F** | **T** | **M** | **F** | **T** | **M** | **F** | **T** |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 |
| **1** | **Nursing Personnel** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1.1 | Nurses |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 1.2 | Public Health Nurses |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **2** | **Auxiliary Staff** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2.1 | Auxiliary Nurse Midwives (ANMs) |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 2.2 | Health Supervisor (Male) |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 2.3 | Lady Health Visitors (LHV) |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 2.4 | Multipurpose Health Workers (Male) |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| **3** | **Paramedical Personnel**  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.1 | Anaesthesia Technician |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.2 | Audio and Speech Therapy Technician |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.3 | Blood Transfusion Technician |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.4 | Cardio Pulmonary Perfusionist |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.5 | Cardio Technician |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.6 | Cardio vascular Technician |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.7 | Dental Hygienist |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.8 | Dental Mechanics |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 3.9 | Dental Technician |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.10 | Dialysis Technician |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.11 | Dieticians |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 3.12 | ECG Technician |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.13 | Emergency Medical Services Technician |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.14 | Endoscopy Technician |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.15 | Laboratory Assistant/Technicians |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 3.16 | Neuro Technician |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.17 | Occupational Therapy Technician |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.18 | Operation Theatre Technician |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.19 | Optometry Technician# |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.20 | Orthopaedic / Prosthetic technicians |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.21 | Pharmacists |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 3.22 | Physiotherapists |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 3.23 | Radio Therapy Technician |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.24 | Radiographer/Radiographic Technician |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 3.25 | Vascular Surgery Technician |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3.26 | Others(specify) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **GRAND TOTAL** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**NOTE: M - Male, F - Female, T - Total**

1. All nurses and paramedical personnel employed in Clinical / Non-Clinical Govt. establishments including those involved in administrative duties.
2. \*State Government includes State/UT, Public Sector Undertakings, Municipalities, Municipal Corporation, Zilla Parishads, Village Panchayat, Autonomous Govt. bodies of State & Local Governments etc. in various establishments like teaching institutions, hospitals, dispensaries, clinics, polyclinics, sanatoria, CHCs, PHCs etc.
3. # Optometry Technician includes Ophthalmic Assistant, Para Medical Ophthalmic Assistant, Optometrist, refractionist etc
4. **Duly completed proforma as on 31st December should be uploaded on CBHI data entry Portal** [**www.cbhi.nic.in**](http://www.cbhi.nic.in) **and sent through E-mail: dircbhi@.nic.in by 25th January of the succeeding year.**

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| **Signature** |  |
| **Name & Designation** |  |
| **Address with Tel/Fax & Email** |  |
|  |

**To**

**The Director**

**Central Bureau of Health Intelligence (CBHI)**

**401-A, Nirman Bhawan, New Delhi – 110108**

**Email:dircbhi@nic.in, Tel/Fax : 91-011-23063175/23062695**