ANNEXURE -I

PROFORMA FOR THE DATA TO BE COLLECTED AT STATES/ UTS LEVEL FOR MONTHLY ONWARD TRANSMISSION TO MINISTRY OF AYUSH

GOVERNMENT AYURVEIDC HOSPITAL, WARANGAL

MONTH & YEAR: FEBRUARY-2024

| S.NO | Name of the District | Total No. of Patients attended | Total No. of Female patients attended | Total No. of Male Patients attended | Total No. of Children Patients attended | Total No. of Aadhar seeded beneficia ries | Total No. of beneficiarie s having Mobile No. | Туре |
|------|----------------------------|---|--|--|--|--|--|------|
| 1 | Warangal | 6262 | 2839 | 2927 | 496 | 1480 | 1217 | OP |
| 4. | Warangal | 120 | 59 | 61 | | 48 | 68 | ΙP |

Modical Superintendent Haent

Modical Superintendent Haent

Govt. Ayurvaya dangar

Out WARANGAL