

**Study of the Current Indent Process for Developing Standard
Operating Procedure for Ambulances Based on Actual
Consumption**

**Internship Training
at
GVK EMRI, Hyderabad**

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**Post Graduate Diploma in Hospital & Health Management
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Institute of Health Management Research
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2014

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TO WHOMSOEVER MAY CONCERN

This is to certify that Dr. Himani Bishnoi student of Post Graduate Diploma in Health and Hospital Management (PGDHM) from Institute of Health Management Research, Jaipur has undergone internship training from 14th April 2014 to 28th May 2014.

The Candidate has successfully carried out the study designated to her during internship training and her approach to the study has been sincere, scientific and analytical.

The Internship is in fulfillment of the course requirements.

I wish her all success in all her future endeavors.



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The certificate is awarded to

Dr. Himani Bishnoi

In recognition of having successfully completed her
Dissertation in the department of

Supply chain management

And has successfully completed her Project on

**“A Study of the current Indent Process for developing standard operating procedure for
Ambulances based on actual consumption”**

20/05/2014

GVK Emergency Management and Research Institute

She comes across as a committed, sincere & diligent person who has a
Strong drive & zeal for learning

We wish her all the best for future endeavors



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CERTIFICATE BY SCHOLAR

This is to certify that the dissertation titled "**A study of the current indent process for developing standard operating procedure for Ambulances based on actual consumption**", submitted by Dr. Himani Bishnoi, Enrollment No. IIHMR/PGDHM/2012-14/17-1316 under the supervision of Dr. Tanjul Saxena for award of Postgraduate Diploma in Health and Hospital Management of the Institute carried out during the period from 14th April 2014 to 28th may 2014 embodies my original work and has not formed the basis for the award of any degree, diploma associate ship, fellowship, titles in this or any other Institute or other similar institution of higher learning.


Signature

ACKNOWLEDGEMENTS

Any effort, which gives promising result, isn't a work of one man or one day. A team work is always appreciated and required to make a vast project to people in charge at success. Along with team work, the proper guidance and help from surrounding and people in charge is the most important aspect to make the project useful for future, Here I express my thanks to **Kumar Ramalingam** (National Head Supply Chain Management GVK EMRI) the project mentor for providing me with the opportunity to work on such a good project and also providing me the time along with valuable guidance.

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I bow down to that almighty. I am also thankful to my friends, colleagues, and seniors for giving me the guidance, motivation and stands behind me all the way for fulfilling my all the needs with bearing all the pain for my success.

Dr. Himani Bishnoi
GVK EMRI

Abstract

The project is about assessing current indent process and suggesting the action plan to monitor actual consumption of different states. The project includes understanding of indent process in Meghalaya, Tamil Nadu and Andhra Pradesh and also the standard process.

In this project the indent process followed by states and the standard process are compared to find gaps if any and finally proposing an effective way to meet ambulance requirement on the basis of actual consumption and supply.

The project is focused on only the two categories of equipment- Pharmacological Agents (medicines) and Disposable Medical Equipment. These items have been considered as the most important as these being primarily used during pre-hospital care. Proper monitoring and actual demand analysis of such items from the head office will help to reduce the wastage of these items as cost incurred is the maximum for them.

The current system for providing medicines and medical consumables which is followed in GVK EMRI is Pull Process. In this process indent is released on actual demand- medicines and medical consumables are dispatched as per the indent generated by EMTs. This process is reactive which results in long delivery time.

Through this project a new system (Push system) was developed in which indent can be released based on demand forecast. It acts proactively and keeps inventory to meet actual demand. The new indent procedure has been accepted by the organization for adaptation for all 14 states and 2 Union Territories after successful completion of the pilot testing.

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1.0 Introduction

The GVK Foundation represents the overall corporate social responsibility of the GVK group. GVK's vision looks well beyond the bottom line and forays into the initiatives that touch lives and add value to the society. GVK Emergency Management and Research Institute (GVK EMRI) is the major corporate social responsibility arm of GVK group, was established in April, 2005. It provides Integrated Emergency Response services in Public Private Partnership, with a vision to support and build capabilities to save 1 Million lives per annum nationally and establish GVK EMRI as a premier Research and Training Institute.

GVK EMRI is based on the following Standard Practices:

- Process of Emergency Management which involves the following primary functions:

Three Contiguous Sectors

- Sense -Identification of the emergency and need for help at the community level.
- Reach -Transport of the vehicle to reach the site in time.
- Care -Providing pre hospital care while transporting the victim to the hospital for stabilization.

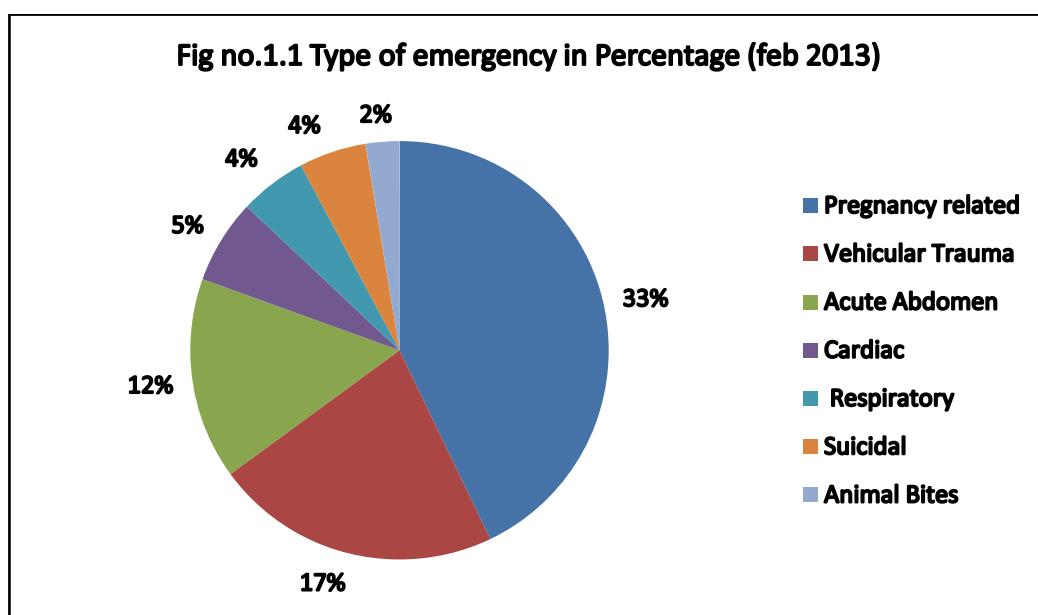
1.1 AREAS OF OPERATIONS:

Table1.1 Areas of Operations

S.No	State	Date of Launch	Ambulances as on Feb' 2014
1	Andhra Pradesh	15th Aug 2005	802
2	Gujarat	29th Aug 2007	525

3	Uttarakhand	15th May 2008	140
4	Goa	5th Sep 2008	33
5	Tamil Nadu	15th Sep 2008	638
6	Karnataka	1st Nov 2008	517
7	Assam	6th Nov 2008	385
8	Meghalaya	2nd Feb 2009	47
9	Madhya Pradesh	16th July 2009	604
10	Himachal Pradesh	25th Dec 2010	172
11	Chhattisgarh	25th Jan 2011	240
12	Dadra & Nagar Haveli	10th April 2012	13
13	Daman and Diu	10th April 2012	13
14	Uttar Pradesh	14th Sep 2012	988
15	Rajasthan	4th June 2013	509
16	Kerala	16th Nov 2013	43
National			5,656

Types of Emergency catered by GVK EMRI



Ambulances: Total Number of Ambulances-Around 7000

GVK EMRI has developed its own ambulance design specifications with unique features meeting ergonomic and safety requirements. Ambulances are fully equipped with modern day medical and communication equipment and categorized as Advanced Life Support, Basic Life Support and Rural Life Support depending on the facilities and pre-hospital care services available.

Fig no 1.2 Process for 108 Ambulance service

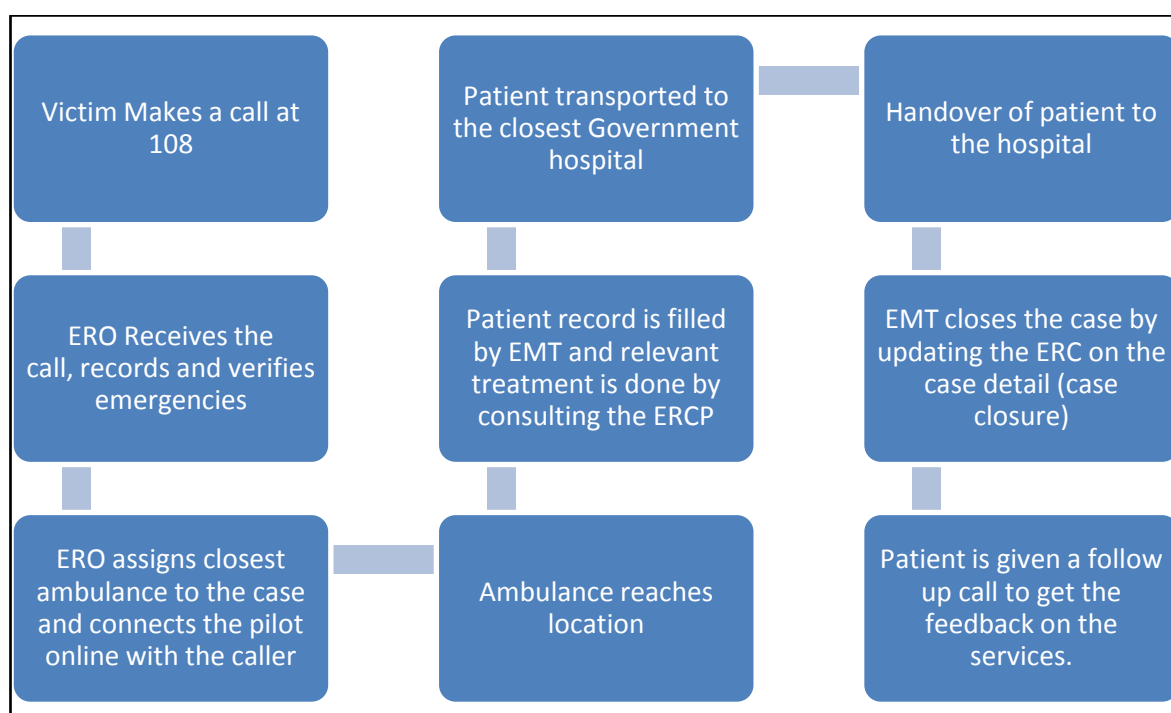


Table no 1.2 Equipment Available in the Ambulance

General equipments	Medical Equipments	Apparatus
•Stretchers- Collapsible Stretcher, Spine Boat Stretcher, Scoop Stretcher •Wheelchair •Hand Gloves •One time use delivery kit •Rope •Fire extinguisher •Excavation Equipment •Metal Cutter •Water Supply	•Medicines •Oxygen Manifold System •Warning torch •Bi Phasic Defibrillator •Airway related equipment	•Suction Apparatus •Water dispenser, Clock in Patient compartment •Automatic B P Apparatus in addition to manual apparatus, Glucometer, S pacer, Digital Pulse Oxy meter •Multi-Para Monitor

Table no 1.3 Medicines available in the Ambulances

<i>Disposable Medical Consumables (50)</i>	<i>Pharmacological Agents (28)</i>
Povidine/Iodine 500 ml Solution	Adrenaline Tartarate 1ml Injection
Surgical spirit 500ml Solution	Atropine Sulphate 1ml Injection
Medicated Adhesive Plaster Bandaid	Pheniramine Maleate 2ml Injection
Cotton 500gms	Buscopan 1ml injection
Cotton Crepe bandages 15x4 cms	Distilled water 5ml
Dressing Pads 10cm x 10cm	Furosemide 2ml Injection
Dressing Pads 20cm x 10cm	Paracetamol 2ml Injection
Elastic Adhesive bandage Plaster 10cm x 10 mt	Ranitidine Hydrochloride 2ml Injection
Absorbant Gauze Cloth 80cm x 18mts	Tramadol Hydrochloride 2ml Injection
Absorbant Gauze Rolls 4" (10cm X 3m)	Ondansetron 2ml injection
Absorbant Gauze Rolls 6" (15 cm X 3m)	Magnesium Sulphate 2ml Injection
Adhesive Plaster 7.5 cms X 10 mts	Theophyllin 2ml injection
Disposable Face Mask 2 ply	Midazolam 5ml/5mg Injection
Disposable Latex Gloves-7.0	Hydrocortisone 100mg Injection
Disposable Syringes 2 CC	Xylocaine Gel 2%
Disposable Syringes 5 CC	Oral glucose 100grms
Disposable Syringes 10CC	Oral rehydration solution 4.2 grms
Glucostrips - On call	Salbutamol 2.5ml Respirator Solution
Oropharyngeal Air Way 0	Budesonide 2ml Respirator Solution
Oropharyngeal Air Way 1	Salbutamol + Ipratropium bromide 2.5 ml
Oropharyngeal Air Way 2	Anesthetic Antacid gel 200 ml
Oropharyngeal Air Way 3	Paracetamol 60ml Syrup

Oropharyngeal Air Way 4	Activated charcoal 200 Mg Tablets
I.V.Drip Sets	Acetylsalicylic Acid 350mg Tablets
Intracath Cannula 16	Isosorbide dinitrite 5mg Tablets
Intracath Cannula 18	Dextrose 25% 100ml IV
Intracath Cannula 20	Normal Saline 250ml IV
Intracath Cannula 22	Ringers Lactate 250ml IV
Intracath Cannula 24	
Click Clamps	
Mackintosh Rubber Sheet 2mts	
Gluko Lancets	
Nasopharyngeal Airway 6.5mm	
Nasopharyngeal Airway 7mm	
Nasopharyngeal Airway 7.5mm	
Nasopharyngeal Airway 8mm	
Nasopharyngeal Airway 8.5mm	
Oxygen mask adult	
Oxygen Mask Child	
Nasal Cannula Adult	
Nasal Cannula Child	
Non rebreather mask- Adult	
Non rebreather mask- Pediatric	
Nebuliser Mask Adult	
Dispo Delivery Kit	
Mucus Sucker	
Suction Catheter 12 fr.	
Suction Catheter 16 fr.	
Nebuliser Mask Child	

Micro Infusion Set	
Surgical Blade	

Pre-hospital Care Record (PCR)

PCR is that document which holds the complete information about the case. Three sets of PCR forms are filled and documented – Doctors of the Hospital where the victim is transferred – EMRI EMTs submit a copy to the head office every 2-3 days – Booklet in the ambulance. PCR should reach within 2 to 3 days. EMRI maintains these records for 5 year.

3.0 Literature Review

In order to understand the current Indent procedures in the three states (Andhra Pradesh, Meghalaya and Tamil Nadu) all the indent forms for the last one year were thoroughly reviewed and a standard process was thus defined and documented for each of the states.

This standard indent process thus defined was considered as benchmark for gap analysis in the current indent process practices, which further helped in formulating ways to address those gaps.

4.0 Problem statement-

For the huge fleet of ambulances at GVK EMRI, the current system for providing medicines and medical consumables is based on the demand by the EMT (Emergency Medical Technician) of the ambulance and supply is done as per the indent generated by them. This process is reactive and thus results in long delivery time which might affect the quality (timely access to all medicines) of care provided. This current system has cost implications for the organization because of several reasons like- improper demand resulting in huge bulk of expired medicines, theft of medicines as the actual consumption is not monitored and no standard procedure for indent etc.

5.0 Research Question

- What is the current indent procedure in Meghalaya, Tamil Nadu and Andhra Pradesh at GVK EMRI?
- What are the gaps in the current indent procedure for ambulance services in Meghalaya, Tamil Nadu and Andhra Pradesh at GVK EMRI?
- How to address gaps in current indent procedure for ambulance services in Meghalaya, Tamil Nadu and Andhra Pradesh at GVK EMRI?

6.0 Objective

- To study the current indent process in Meghalaya, Tamil Nadu and Andhra Pradesh at GVK EMRI.
- To analyze the gaps between the current indent procedure and standard indent procedure for ambulances services in the three states- Meghalaya, Tamil Nadu and Andhra Pradesh at GVK EMRI.
- To develop new standard indent procedure to address gaps between the current indent procedure and standard indent procedure for ambulances services and implementation of new standard indent procedure in three states

7.0 Methodology

7.1 Study design

This study is an Analytical Study, where analysis of the current indent process is done to document the standard indent procedure and then Gap analysis is done for the current and standard indent procedure to formulate a new process of indent requisition.

7.2 Study Area

The study area includes the indent process at the three states- Andhra Pradesh, Meghalaya, and Tamil Nadu.

Table no.7.1 Study Area

State	Total Ambulances	Operational Segments
Andhra Pradesh	802	752
Tamil Nadu	638	605
Meghalaya	47	42

7.3 Sample size

A total of 1399 ambulances in all the three states are operational out of them, 150 Ambulances were chosen for the study and 25 locations in Andhra Pradesh were identified for Primary data collection.

7.4 Sampling procedure

Stratified Random Sampling was done to identify the sample. The sampling was done by defining the different regions (Strata) in each state and then the samples were randomly selected from each region.

7.5 Data collection

7.5.1 Targeted on- Consumption of Pharmacological Agents (medicines) and Disposable Medical equipments.

7.5.2 Data collection technique

Qualitative data collection was done for information about– Current indent process for 150 ambulances operational in three states and List of Medicines and disposables used frequently based on the ambulance data.

Data collection was Observation based for the state of Andhra Pradesh where data was collected for 25 locations. For Tamil Nadu and Meghalaya the data was collected from the respective State Heads for Supply Chain Management.

7.5.3 Data collection tool

A Checklist of all the essential medicines and pharmacological agents was used for data collection which is defined by the ambulance governing committee as the essential list of medicines for each ambulance at GVK EMRI.

7.6 Data Analysis

Data entry and analysis for all the indents made in these three states in the last one year was done in Microsoft Excel. Excel Sheets for indent requisition format were developed for each state and monthly indent requisition for 12 months for each ambulance was done retrospectively.

Gap analysis was done based on the committee guidelines for the quantity and quality of the Pharmacological Equipments and disposables in each ambulance.

8.0 Results and Discussion

The Indent procedure in each state was based on similar indent formats but was not based on a standard operating procedure.

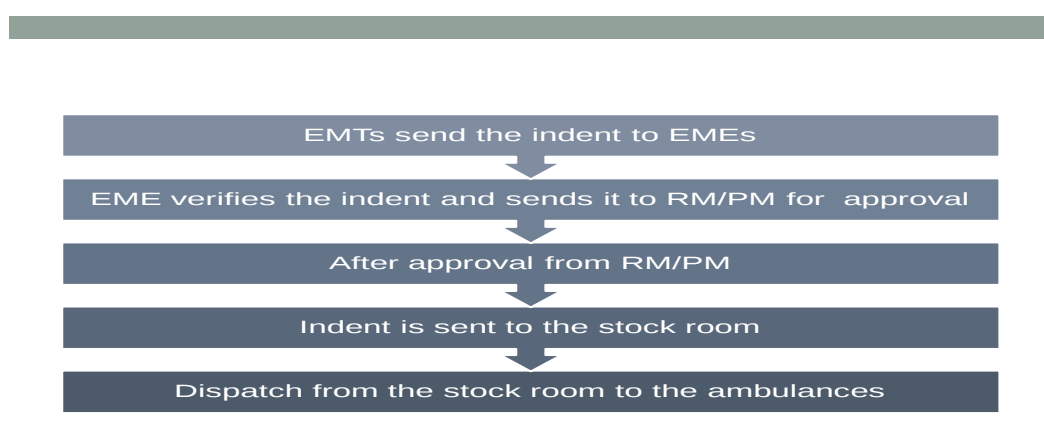
For successful and efficient running of ambulance services, it is essential to have and follow Standard Operating Procedures that can direct all those involved in ambulance operations to perform and accomplish tasks with a greater degree of efficiency, economy and uniformity

The following Indent requisition Procedures were followed in each of the respective states.

8.1 Indent process of Andhra Pradesh

In Andhra Pradesh indent process flow is from EMTs sending indent to EMEs. Once indent is given to EMEs they verify it and send it to regional manager/program manager for approval. After approval from regional/program manger indent is sent to stock room and from there indent is dispatched to ambulances.

Fig no.8.1 Indent process of Andhra Pradesh

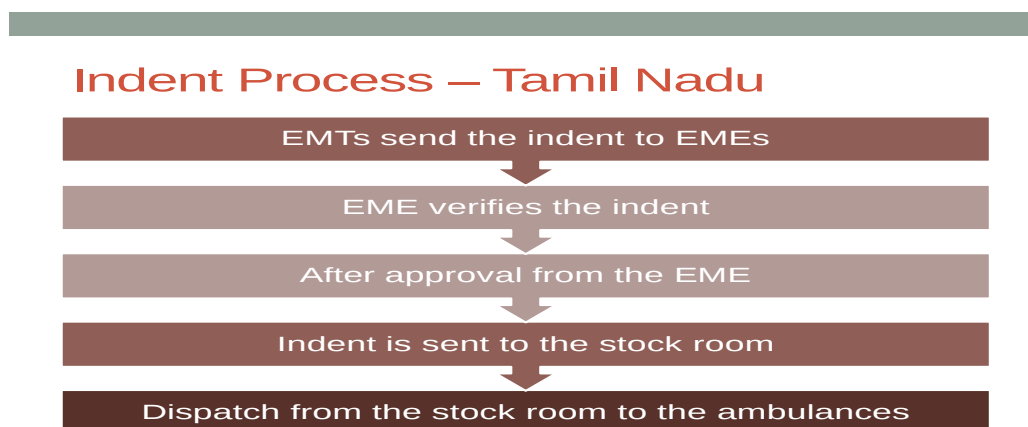


8.2 Indent process of Tamil Nadu

In Tamil Nadu first in first out method (FIFO) is followed. It is generated on monthly basis in which one week is the dispatch time and one day is to reach to the ambulances.

Here indent process starts with EMT sending indent to EME. EME then verifies the indent by checking the ambulances. . The RM/PM's approval is not taken and it is directly given to the state head office where the entry in the database is done and the indent is delivered to the ambulances within 8 days from the entry

Fig no 8.2 Indent process of Tamil Nadu



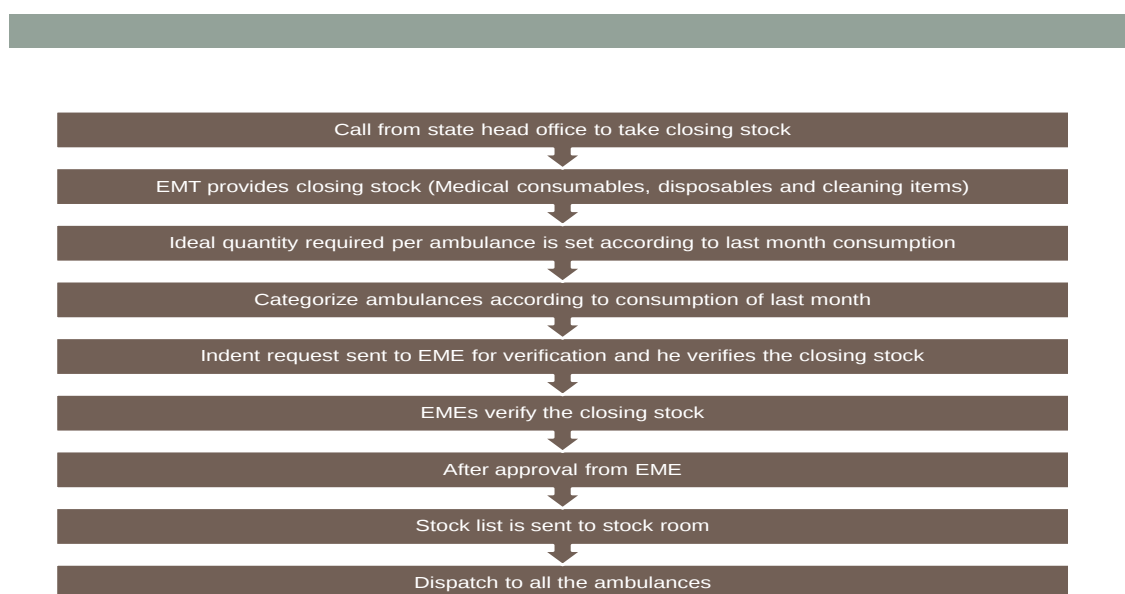
8.3 Indent process of Meghalaya

Meghalaya indent process starts where the state head office calls for the closing stock from EMTs. EMT provides closing stock that consists of medical consumables, disposables and cleaning items. Here state office estimates ideal quantity required by the ambulances based on last month's consumption. They have categorized ambulances into three categories based on their consumption:-

A: 0-20 cases, B: 21-50 cases and C: more than 50 cases.

EME verifies the closing stock and on his approval the indent is sent to the store and the stock is dispatched to the ambulances in total 7 days.

Fig no 8.3 Indent process of Meghalaya



After the analysis of the data the following standard process was defined and documented.

8.4 Standard Intend Process

Standard indent process at GVK EMRI begins with EMTs sending indent to EMEs. Once indent is given to EMEs they verify it and send it to regional manager/program manager for approval. After approval from regional/program manger indent is sent to stock room and from there indent is dispatched to ambulances.

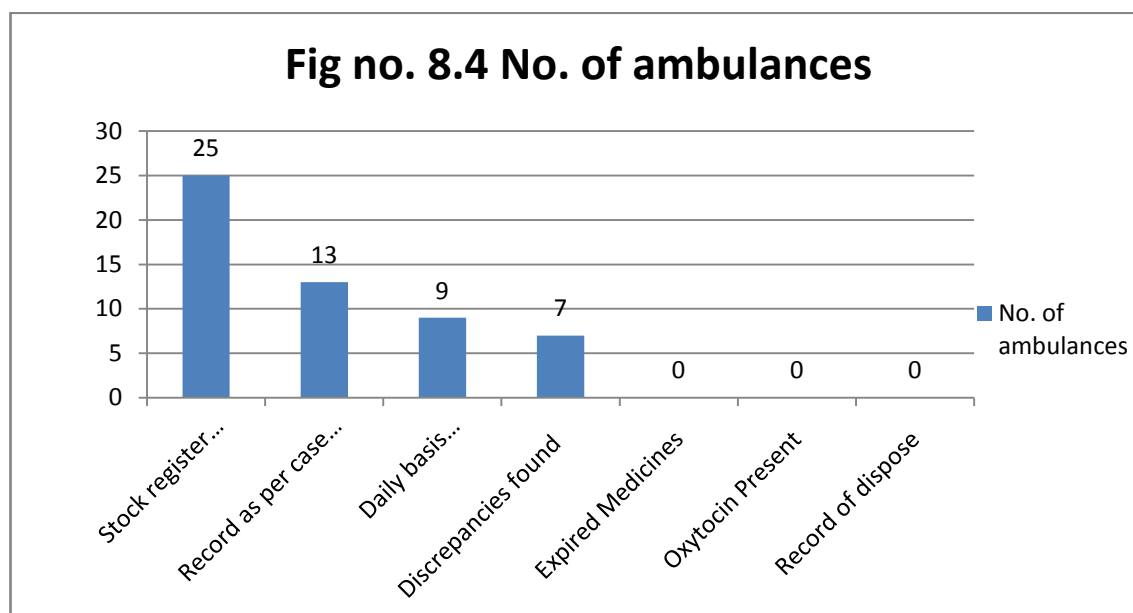
The quantity to be sent to the ambulances is to be based on the number of cases handled in the previous month.

The following Formula for forecasting the indent was developed to standardize the process.

- $\text{Approved Quantity} = \text{Ideal Quantity} - \text{Total Valid Quantity Available}$
- **Total Valid Quantity Available:** Monthly activity where EMT reports the available quantity
- **Ideal Quantity:** As per category based on number of cases handled last month.

In order to standardize the procedure for indent requisition the secondary data was validated by field visits and collection of primary data from 25 locations in Andhra Pradesh.

The following issues were observed by analysis of **Primary data** from the field visits:-



- Stock register was present in all the ambulances. But only thirteen out of Twenty five ambulances maintained the record as per the case ID.
- Nine of the ambulances maintained the record on daily basis whereas others had not maintained it as per the standards.
- There were discrepancies in the data entries and the stock available in the ambulances. For Eg- As per closing stock there should be 9 units of Renitidine but actually 19 units were available.
- None of the ambulances had any expired medicines. In case any medicine is about to expire within 3 months it is sent back to head office whereas others dispose it off or send it to Gandhi Hospital. But as per standards expired medicines are to be sent back to the Head office or disposed at hospitals with consent of PM/RM.

- In case the ambulance crew is disposing of the medicines by themselves then there is no verification of the expiry medicines.
- Essential medicines like Oxytocin were not available in any of the ambulances.
- Meghalaya's indent form also includes medicines which are not present in the list provided by the ambulance committee.-For Eg: Avil, Duolin, Asthalin.
- Some of the medicines present in the ambulances are not much in use.-For Eg: Minimum quantity of Adrenaline is 10 units but only one or two units are used in all the regions of Andhra Pradesh.

8.4 Gaps observed:-

- The current process has many levels thus increasing the time for indent generation. There are three levels at the demand side i.e. closing stock by EMT, verification by EME, and approval from RM/PM. Thus the process is redundant.
- Current process poses many responsibilities for the EMEs which increases their work load which may affect the authenticity of the indent request.
- There were some discrepancies in the closing stock and the actual stock.

8.5 Proposed new Indent Process

The purpose of the project was to identify a standard Indent Release Process based on demand forecast which can act proactively and keep inventory to meet the actual demand.

The actual demand can't be determined by the current indent requisition as huge discrepancies in the recording of available stock were found during primary data collection

8.5.1 New Indent process for Pharmacological Agents

Closing Stock determination by using **Case Closure Application**:

Case closure application is a software based application for real time data collection. The EMTs (Emergency Medical Technician) makes a call back to the Emergency Response Centre for case closure after assignment of the ambulance and dropping the patient to the hospital. During this case closure the ERC Communication Officer records real time data on various points like the type of emergency, medication given etc.

The new indent process is based on using this application for indent requisition by adding an application for collection of data for the pharmacological agents used for each case. Currently the case closure process takes around 3 min approximately when observed for 50 cases in the ERC. This time extended only for 20 sec when the following details were added in an excel sheet format for testing.

The current case closure application could be extended including the following details:

1. Medicines/ Medical consumables Used
2. Form of Medicine (Injectable, Tablet etc.)
3. Quantity Used

These details helped in generating the closing stock which is used at the time of indent generation.

Therefore the following formula can be used to identify the stock.

- Indent = (Defined Maximum Quantity* – Closing Stock)

(*Defined Maximum Quantity is the quantity mentioned in the indent form.)

The above mentioned Process can be easily followed for the medical equipments and medicines but for the disposables as they are used in large quantities and cannot be recorded for each case the following process can't be followed.

8.5.2 New indent process For Disposables:-

- Products like *nasal cannula* and airways can be counted case wise and thus the details will be collected at the time of case closure.
- Products like gloves can be provided in the quantity derived by the formula:
$$\text{No. of gloves} = \text{No. of cases handled last month} * 1.25$$
- Products like *disposable syringes* and *cannula* can be estimated by the records of the injections and fluids used.
 - $\text{No. of syringes} = \text{No. of injectables} * 1.25$
- For other products we will provide the maximum quantity of disposable items to the ambulances.
- At the time of visit by quality team, the actual available quantity of the items whose indent is fixed will be checked.
- Depending upon the available quantity of disposables (fixed items) the further stock will be made available to the ambulances.

FLOWCHART for the New Process

- During case closure
- Case Closure Desk will gather the information related to consumables used in the case from EMT
- Information will be stored into the database
- Data will be provided to the stock room on daily basis- ambulance wise and case wise
- On the basis of the data gathered
- Indent will be generated monthly by the State Head Quarter.
- Dispatch of the stock to the ambulances can be done.

9.0 Conclusion

Proposed Plan based on the pull System rather than push system has several benefits:-

9.1 Advantages of Proposed Process over Current Process

- Quality enhancement.
- Wastage of the medicines and medical consumables will be reduced.
- Authenticity of the closing stock will increase.
- Step including the EMT, EME & RM/ PM verification will be bypassed thus the process will be fast.
- Redundancy of the process will be reduced.
- Smooth information flow.
- Providing appropriate stock to all the ambulances.
- Procurement of only the required stock in the stock room.
- Monitoring of the ambulance stock will be regular.
- This process can be implemented throughout the country irrespective of the terrain & connectivity.

This proposal was accepted by the organization for standardizing throughout 14 operational states and further Pilot testing is being done for the new indent process based on Case Closure Application.

9.2 Methodology for Pilot Testing:-

- Selection of 10 ambulances for pilot testing.
- Collection of Closing Stock from the selected ambulances.
- Excel sheets for collection of consumption of stock to XYZ from OSD department.
- Collection of consumption of stock on daily basis and case ID wise by XYZ.
- Data compilation by Pilot Testing Team.

- Again field visit for collection of closing stock from the selected ambulances.
- Comparative analysis of data collected through excel sheet and field visit.

Pilot study has been initiated and primary data is collected for 8 ambulances till now.

This study is an ongoing project and hence the organization has not permitted to disclose the data details.

10.0 Annexure



INDENT REQUISITION AND STOCK REPORT



Date of indent : 28.04.2014

Name of the Indentor :M Tirupathi

Designation

:EMT

Ambulance Location :Anandapuram

District Name : Visakhapatnam

Vehicle Registration No: AP29 TA 3710

Vehicle Mobile No:9160995197

Vehicle Type : ALS/BLS/RLS

Preferred Delivery Address :Visakhapatnam

Available courier in locality :ANL/GMS

Region Wise Schedules

Region	Week	Dat es
HYD	1 & 2	01 to 11
KDP	2 & 3	12 to 17
VZG	3 & 4	18 to 28

Format revised on 01st
January'2012

S.No	Material ID	Material Description	UoM	Max.stock at Amby level (No's)	Opening stock at the time of ordering	Ind ent qua ntity
Pharmacological Agents (28)						
1	MA0001	Adrenaline Tartarate 1ml Injection	each	10	6	4
2	MA0004	Atropine Sulphate 1ml Injection	each	20	8	12
3	MA0005	Pheniramine Maleate 2ml Injection	each	10	10	0
4	MA0006	Buscopan 1ml injection	each	10	5	5
5	MA0011	Distilled water 5ml	each	10	6	4
6	MA0014	Furosemide 2ml Injection	each	10	10	0
7	MA0016	Paracetamol 2ml Injection	each	15	15	0
8	MA0017	Ranitidine Hydrochloride 2ml Injection	each	15	4	11
9	MA0020	Tramadol Hydrochloride 2ml Injection	each	10	0	10
10	MA0021	Ondanseteron 2ml injection	each	10	10	0
11	MA0029	Magnesium Sulphate 2ml Injection	each	5	4	1
12	MA0039	Theophyllin 2ml injection	each	10	10	0
13	MA0078	Midazolam 5ml/5mg Injection	each	5	4	1
14	MV0004	Hydrocortisone 100mg Injection	each	5	3	2
15	MO/0005	Xylocaine Gel 2%	tube	2	0	2
16	MP/0001	Oral glucose 100grms	packet	5	1	4
17	MP/0003	Oral rehydration solution 4.2 grms	packet	20	10	10
18	MR/0002	Salbutamol 2.5ml Respirator Solution	each	5	3	2
19	MR/0003	Budesonide 2ml Respirator Solution	each	5	3	2
20	MR/0004	Salbutamol + Ipratropium bromide 2.5 ml	each	5	5	0
21	MS/0003	Anesthetic Antacid gel 200 ml	bottle	2	1	1
22	MS/0004	Paracetamol 60ml Syrup	bottle	2	1	1

23	MT/0001	Activated charcoal 200 Mg Tablets	strip of 10	4	3	1
24	MT/0010	Acetylsalicylic Acid 350mg Tablets	strip of 10	2	2	0
25	MT/0053	Isosorbide dinitrite 5mg Tablets	strip of 50	1	1	0
26	MF0003	Dextrose 25% 100ml IV	bottle	10	2	8
27	MF0015	Normal Saline 250ml IV	bottle	24	5	19
28	MF0017	Ringers Lactate 250ml IV	bottle	24	4	20
		Disposable Medical Consumables (50)				
29	MG/0033	Povidine/Iodine 500 ml Solution	jar	2	1	1
30	MG/0069	Surgical spirit 500ml Solution	bottle	2	1	1
31	MD/0001	Medicated Adhesive Plaster Bandaid	each	10	6	4
32	MD/0003	Cotton 500gms	each	2	1	1
33	MD/0004	Cotton Crepe bandages 15x4 cms	each	2	1	1
34	MD/0008	Dressing Pads 10cm x 10cm	each	20	5	15
35	MD/0009	Dressing Pads 20cm x 10cm	each	20	10	10
36	MD/0010	Elastic Adhesive bandage Plaster 10cm x 10 mt	each	1	0	1
37	MD/0011	Absorbant Gauze Cloth 80cm x 18mts	each	2	1	1
38	MD/0012	Absorbant Gauze Rolls 4" (10cm X 3m)	pack of 10	4	2	2
39	MD/0013	Absorbant Gauze Rolls 6" (15 cm X 3m)	pack of 10	4	3	1
40	MD/0016	Adhesive Plaster 7.5 cms X 10 mts	each	2	1	1
41	MG/0002	Disposable Face Mask 2 ply	4 X 25	2	1	1
42	MG/0003	Disposable Latex Gloves-7.0	box of 100	5	2	3
43	MG/0004	Disposable Syringes 2 CC	each	20	6	14
44	MG/0005	Disposable Syringes 5 CC	each	10	8	2
45	MG/0006	Disposable Syringes 10CC	each	4	3	1
46	MG/0132	Glucostrips - On call	box of 25	1	1	0
47	MG/0019	Oropharyngeal Air Way 0	each	2	0	2
48	MG/0020	Oropharyngeal Air Way 1	each	2	1	1
49	MG/0021	Oropharyngeal Air Way 2	each	2	1	1
50	MG/0022	Oropharyngeal Air Way 3	each	2	2	0
51	MG/0023	Oropharyngeal Air Way 4	each	2	2	0
52	MG/0026	I.V.Drip Sets	each	25	12	13
53	MG/0028	Intracath Cannula 16	each	2	2	0
54	MG/0029	Intracath Cannula 18	each	15	14	1
55	MG/0030	Intracath Cannula 20	each	15	5	10
56	MG/0031	Intracath Cannula 22	each	15	6	9
57	MG/0032	Intracath Cannula 24	each	5	2	3
58	MG/0034	Click Clamps	each	15	10	5
59	MG/0035	Mackintosh Rubber Sheet 2mts	each	1	0	1
60	MG/0036	Gluko Lancets	each	25	20	5
61	MG/0037	Nasopharyngeal Airway 6.5mm	each	1	2	-1
62	MG/0038	Nasopharyngeal Airway 7mm	each	1	1	0
63	MG/0039	Nasopharyngeal Airway 7.5mm	each	1	1	0
64	MG/0040	Nasopharyngeal Airway 8mm	each	1	1	0
65	MG/0041	Nasopharyngeal Airway 8.5mm	each	1	1	0
66	MG/0043	Oxygen mask adult	each	3	1	2
67	MG/0044	Oxygen Mask Child	each	3	2	1

68	MG/0045	Nasal Cannula Adult	each	2	1	1
69	MG/0046	Nasal Cannula Child	each	2	1	1
70	MG/0049	Non rebreather mask- Adult	each	1	1	0
71	MG/0050	Non rebreather mask- Pediatric	each	1	0	1
72	MG/0078	Nebuliser Mask Adult	each	3	3	0
73	MG/0079	Dispo Delivery Kit	each	3	2	1
74	MG/0081	Mucus Sucker	each	2	1	1
75	MG/0083	Suction Catheter 12 fr.	each	3	3	0
76	MG/0084	Suction Catheter 16 fr.	each	3	3	0
77	MG/0086	Nebuliser Mask Child	each	3	2	1
78	MG/0100	Micro Infusion Set	each	2	2	0
79	MG/0067	Surgical Blade	each	5	0	5
		Non Medical Ambulance Supplies (19)				
80	VM/0018	Air Freshning Cake (Odonil like) Packet	each	1	0	1
81	VM/0025	Bed Sheet(Green)	each	1	1	0
82	VM/0002	Bio medical waste disposal covers (Red)	kg	1	0	1
83	VM/0001	Bio medical waste disposal covers (Yellow)	kg	1	0	1
84	VM/0084	Clean Sept tablets (surface Disinfectant)	Pack of 50	1	1	0
85	VM/0009	Cleaning Cloth (Doping)	each	5	2	3
86	VM/0010	Cleaning Cloth (Yellow)	each	5	1	4
87	VM/0014	Dettol hand wash 185ml	each	2	0	2
88	VM/0015	Door Mats	each	2	1	1
89	VM/0012	Glass Cleaner 500ml	each	2	1	1
90	VM/0086	Disinfectant Hand rub 500 ml (disinfectant)	each	1	0	1
91	VM/0029	Mosquito Repellent Liquid	each	1	0	1
92	VM/0017	Room Freshner 500ml	each	1	1	0
93	VM/0024	Sponge 6" x 3.5 " x 1.8"	each	5	2	3
94	VM/0033	Teflon Tape	each	2	1	1
95	VM/0035	Washing Powder 1 Kg	each	2	0	2
		Stationary items (06)				
96	PS/0017	Envelops EMRI White(11"x5")	each	10	10	0
97	PS/0014	PCR Envelopes - Brown	each	20	9	11
98	SC/0014	Registers - 2qr	each	1	0	1
99	PS/0005	Scribbling Pads	each	2	1	1
100	PS/0015	P.C.R sheets	Books	5	2	3
101	PS/0102	EM Care Magazine (Telugu)	Book	1	1	0

Indent Requisition And Stock Report- Tamil Nadu



AMBULANCE INDENT STATEMENT AND CONSUMPTION REPORT0									
Ambulance Location & Diistrict		Pudhupettai Police Station & Cuddalore dist							
Despatch Address		108 Ambulance Services, Pudhupettai Police Station, Pudhupettai, Cuddalore dist							
Vehicle Registration No		TN30 G0156							
Mobile No		8754491083							
Vehicle Type		BLS							
Name of the EMT & GID No		P.Pauline Gracy/023481 & R. Sudhahar/023385							
Signature of the EMT		Indent Quantity = Max Stock – Closing Stock							
Name & Signature of the OE									
Previous Indent Date						Consumption Period (Number of Days)			
Current Indent Date		24.04.14							
Date of receipt of Indented Stock									
S.No:	Item Code	Item Description	Type of Ambulance	UoM	Maximum stock at Amby level (No's)	Minimum stock at Amby (No's) Quantity	Closing stock at the time of Indent /order	Indent quantity	
Pharmacological Agents (48)									
1	MA0001	Adrenaline 1ml Amp	BLS / CIFT/ NLS	Ampoule	10	10	0	10	
2	MA0004	Atropine 1ml amp	BLS / CIFT/ NLS	Ampoule	10	10	0	10	
3	MA0008	Diazepam 2ml Amp	BLS / CIFT/ NLS	Vial	15	15	0	15	
4	MA0005	Pheniramine malate 2ml Amp	BLS / CIFT/ NLS	Ampoule	10	10	0	10	
5	MA0014	Furosemide 2ml Amp	BLS / CIFT/ NLS	Vial	10	10	0	10	
6	MA0016	Paracetamol 2ml Amp	BLS / CIFT/ NLS	Vial	20	20	0	20	
7	MA0017	Ranitidine 2ml Amp	BLS / CIFT/ NLS	Vial	20	20	0	20	
8	MA0020	Tramadol hydrochloride 2ml Amp	BLS / CIFT/ NLS	Vial	20	20	0	20	
9	MR/0002	Salbutamol Respule 2.5ml	BLS / CIFT/ NLS	Respule	5	5	0	5	
10	MR/0003	Budesonide Respule 0.1mg 2ml Amp	BLS / CIFT/ NLS	Respule	5	5	0	5	
11	MR/0004	Salbutamol / Ipratropium bromide Respule 2.5 ml Amp	BLS / CIFT/ NLS	Respule	5	5	0	5	
12	MA0025	Oxytocin Injection	BLS / CIFT/ NLS	Vial	5	5	0	5	
13	MA0010	Diclofenac Sodium Injection	BLS / CIFT/ NLS	Vial	20	20	0	20	
14	MA0029	Magnesium Sulphate Injection	BLS / CIFT/ NLS	Ampoule	5	5	0	5	
15	MA0011	Distilled water 5ml Amp	BLS / CIFT/ NLS	Number	10	10	0	10	
16	MT/0001	Activated charcoal 200mg - 6 Tablets per strip	BLS / CIFT/ NLS	Strip	1	1	0	1	

Indent Requisition And Stock Report- Meghalaya



A) The Total Valid Qty: EMT report to office over phone, which is monthly activity.

B) Ideal Qty: As per Category based on no of cases handled last month.

C) Approved Qty: The quantity we issue to base (B-A = C)

Monthly Stock Statement- Indent									
Date:									
Name of O.E :									
Location :						Registration No :			
District :									
No. of Cases Handled in Last Month :						Category :			
Vehicle Mobile No :									
Prepared By(Full name of EMT with signature) :									
Passed By (Signature with Date) :									
S.No.	Item Code	Item Description	UOM	Available Medicine Details	Total Valid Qty Available	Ideal Qty 1	Ideal Qty 2	Ideal Qty 3	Approved Qty
1	MA0001	Adrenaline	Ampule			2	3	5	
2	MR/0002	Asthalin	Ampule			5	5	5	
3	MA0004	Atropine	Ampule			2	5	5	
4	MA0005	Avil	Ampule			5	5	10	
5	MR/0003	Budecort	Ampule			3	3	5	
6	MA0076	Diclofenac sodium	Ampule			10	15	20	
7	MA0011	Distilled water	Ampule			10	10	10	

Research Form



Frequently Used Medicines

S. No.	Medicines	Form/ Use	Minimal Requirement	Stock Available	Difference	Expired Medicines
1	Oxytocin	Injectable	50 ampoules			
2	Aspirin Dispersible 325 mg	Tablet	30 tablets			
3	Isosorbidedinitrite 5mg	Tablet	30 tablets			
4	Clopidogril	Tablet	30 tablets			
5	Magnesium sulphate	Injectable	20 ampoules			
6	Budesonide	Respule	20 respules			
7	Salbutamol/ Pratriptium	Respule	20 respules			
8	Renitidine	Injectable	10 ampoules			
9	Paracetamol	Tablet	20 tablets			
10	Tramadol hydrochloride	Injectable	10 ampoules			
11	Dextrose 10%	Fluid	10			

Rarely Used Medicines

S. No.	Medicines	Form/ Use	Minimal Requirement	Stock Available	Difference	Expired Medicines
1	Midazolam	Injectable	4 vials			
2	Paracetamol	Syrup	1 bottle			
3	Furosemide	Injectable	5 ampoules			
4	Hydrocortisone	Injectable	5 of 2ml vials			