

**OFFICE OF THE MO I/C**

**PHC.....GOVT. OF MANIPUR.** (put office seal) proforma-1

Statistic on number of patients visiting AYUSH OPD for the month  
of.....20..... Patients are categorized **Male /Female/Child/ANC/Others etc.**

Sl	New Patients					Old patients				Remarks
	Adult			Children		Adult		Children		
	Cases	Male	Female	M	F	M	F	F	M	
	GIT									
	Allergy									
	C.V.S									
	N.S.									
	EYE									
	SKIN									
	UTI									
	Female problem									
	Toothache									
	Jaundice									
	Fistula.									
	Mental									
	H.T.									
	Injury									
	H.I.V									
	Fever									
	RTI									
	Snakebite									
	Hernia									
	Impotency									
	Joint pain									
	Diabetes									
	Gallstone									
	Renal stone									
	B.H.P.									
	Sinusitis									
	Polyps									
	Deafness									
	Otitis									
	Tonsillitis									
	ANC									
	Others									
	<b>Total</b>									

**MO AYUSH**

**MO i/c**