

HOSPITALS INFORMATION DETAIL (HID)

SM/W,M

1.City Name : _____ 2.Hospital Name: _____ 3.Tel.No. _____ 4.Email: _____ 5A.Total Beds: _____ 5B.ICCU/ICU/ITU Beds: _____
 6. Management : _____ 7. Medical Director : _____ 8. Mob.No. : _____ 9. Medical Supt. _____ 10. Mob.No. : _____
 11.Purchase: _____ 12.Mob.No. _____ 13.Stores _____ 14.Mob.No. _____ 15.A/c _____ 16.Mob.No. _____
 17.SUPPLY STATUS : (Pls. ✓) Direct - Y / N : HP-IP ED : _____, OPD ED : _____, Near by OTC ED : _____

18. **Speciality Covered** of important doctors (Maximum Five per speciality) - Write down the **name** of the Doctors (Highest - **HOD** → Low Priority) in the below box along with '**R**'-Recommendation - Y / N

Spl.→ Total No. Qty.→	Medicine / Cardiology		Vascular		G.Surgeon		Gynaecologist		Orthopaedist		Physiotherapist		Neurology		Oncology		P.Surgeon / Dermatologist		ICCU / ITU / CCU & Nursing Head.		
		R		R		R		R		R		R		R		R		R		R	
1																					
2																					
3																					
4																					
5																					

19	If OPD available with above speciality, (Please tick below ✓ on YES or on NO)																			
	Yes / No		Yes / No		Yes / No		Yes / No		Yes / No		Yes / No		Yes / No		Yes / No		Yes / No		Yes / No	
20	If yes, how many approximate patients per day are checked in OPD - speciality wise - Put the quantity in the below box.																			
21	Probable patient (atleast 1 patient out of 10, i.e. 1:10) related to our nature of product range - Put the quantity in the below box.																			
22	Probable patient (atleast 1 patient out of 10, i.e. 1:10) related to ' medi ' product range - Put the quantity in the below box.																			
23	Probable value (MRP) of the 'medi' product range - Put the value (MRP) in the below box.																			

Note : Use separate sheet for each Hospital