CBHI Form No.	07 A
ANNUALLY	

STATE/UT WISE NUMBER OF DOCTORS & DENTAL SURGEONS EMPLOYED IN PRIVATE. INSTITUTIONS IN THE COUNTRY AS ON 31 DECEMBER OF REPORTING YEAR

	Name & Address of the Reporting Agency						
				1			
	Reporting Year:	December			Name of State/	JT	
			No. of D	- octors working	under these Pv	t. Institutions	
S.No	Type Of Pvt. Infrastructure. - Speciality	Clinic/ Polyclinic with/ without Beds	General Hospital/ Nursing Home with Common Specilities	General Hospital/ Nursing Home with Common Supper Specility	Only Super Speciality Hospital	Dental Hospital	Total
1.0	Allopathic Doctors						
1.1	M.B.B.S Doctors						
1.2	Specialists						
1.2.1	General Surgeory						
1.2.2	Obst.& Gyne.						
1.2.3	Physician						
1.2.4	Pediatric						
1.2.5	Anaesthesia						
1.2.6	Psychiatry						
1.2.7	Orthopedic						
1.2.8	Radio Diagnostics						
1.2.9	Onchology						
1.2.10	Opthalmologist						
1.2.11	Pathology						
1.2.12	Others(Specify)						
2.0	Dental Surgeon						
	Grand Total						

NOTE: Duly completed State/Ut wise proforma containing information of Doctors as on December should be sent to reach CBHI New Delhi by 25th January of the succeeding year through E-Mail dircbhi@nb.nic.inn to enable CBHI for national compilation by Feburary.

To The Director

Central Bureau Of Health Inteligence (CBHI) 401-A, Nirman Bhawan, New Delhi-110108 Tel/Fax: 91-011-23063175/23061529 Email- dircbhi@nic.in

Signature	
Name & Designation	
Address with tel./FAX & E-mail	