CHAPTER IV

Medical Stores and Equipment

401. Standard Pharmacopoeia: A pharmacopoeia, "Indian Railway Pharmacopoeia" is in use on the Railways which provides a broad pattern to be followed by the Railway medical institutions. The details as to how to make use of the pharmacopoeia are given in the pharmacopoeia itself.

402. Procurement of stores from Public Sector Undertakings: For procurement of medical stores, preference should be given, other things being equal, to the products of the public sector undertakings.

(Ministry of Railway's letter No. 71/H/2/6 dated 15th May 1971.)

403. Check of medical stores: All stores received by the medical department, irrespective of the source of supply of such stores, and irrespective of whether the stores have already been checked or not, should be subjected again to at least a test check before admitting them in the stores godowns of the medical department. Such test checks should be exercised on small representative quantities and should include visual examination and check of dimensional accuracy with reference to contract description.

(MOR's letter No. 69/H/2/9 dated 5th August 1969)

404. Additions/replacement of equipment in Railway hospitals and health units: (1) Apparatus and appliances for Railway hospitals and health units on additional or replacement account should be procured by including them in the machinery and plant programmes when they cost more than Rs.100,000/- each.

(2) Machinery and plants programme: Machinery and Plants Programme is dealt by Mechanical Department, being nodal branch for its compilation and issue. Detailed instructions for preparation of M&P Programme are contained in Chapter XV of Indian Railway Code for Mechanical Department (workshops). Guide lines for preparation of M&P Programme are also issued from time to time Mechanical Directorate of Railway Board.

(a) While preparing the proposal under M&P, detailed justification, estimates of costs based on present day quotation should be indicated, the provision for other charges such as freight, insurance, installation and commissioning, D&G charges and customs duty wherever applicable should be correctly made. The proposals should be got vetted by associated finance and submitted to CMD, who, depending upon the statistical returns and discussions with various unit heads decides the Machinery and Plants to be provided on priority basis to the various divisions, and will consolidate and pass on the proposals to CME (Planning) for inclusion in the M&P Programme after HQ finance concurrence. It may be noted that “having completed” the codal life by a certain machine does not necessarily justify its replacement. The condition of the machine, its uneconomical repairs should form the basis of its replacement, also the justification should indicate the jobs undertaken and the workload of the machine. The total number of similar machines available and the shortfall in the capacity may also be indicated.

(b) All items costing from Rs. 5 lakhs to Rs.50 lakhs should be grouped under lump sum items and those costing Rs. 50 lakhs above should be itemised and shown separately.

(c) The new proposals duly vetted by the FA&CAO should be sent to Railway Board by 30th of September.

(d) Once the item is sanctioned in M&P, the zonal hospital/divisional hospital should process for procurement without any delay. The requisition/material schedule with quantity vetting from associate accounts, with clear specifications and a list of likely supplier or Proprietary Article Certificate (PAC) in case of single tender should be sent to the Controller of Stores through CMD.

(e) M&P items costing not more than 5 lakhs each on “Out of turn basis” can be procured under GM’s power subject to the funds provision made under the lump sum head.

(3) When such apparatus and appliances cost less than Rs.1,00,000/- each, they are chargeable to Ordinary Revenue and should be provided under Demand No. 5 (ordinary Working Expenses Repairs and Maintenance). If the cost of an item of medical equipment exceeds Rs. 20,000 and cost of an item other than a medical equipment exceeds Rs. 10,000, it should be sanctioned by the Head of the Department, who will exercise this power in consultation with the F.A & C.A.O.

(Ministry of Railway’s Letter No.F(X)II/95/ALC/2/Ptl dt.05/09/95)
(4) Keeping in view of arrears of throw-forward of the old sanctions, the department should critically review all items of M&P sanctioned in the previous five years, which have not been procured so far. The results of such review should be sent to Railway Board latest by 30th September of every year. The review should also furnish the latest and detailed status of the procurement. 'Under Process' statements should be avoided.

Replacement of all such apparatus for Railway hospitals and health units, irrespective of their cost, should be provided under demand No. 5 (Ordinary expenses-Repairs and maintenance).

Note -(1) In the case of production units for which revenue demands are not available, replacement of equipment for Railway hospitals and dispensaries, irrespective of the monetary limit, as also items on additional account costing not more than Rs.25,000 should be charged to WMS which should be cleared as an element of on-cost by distributing the expenditure under appropriate overhead charges to the various items of production turned out by the Production Units.

Note (2) - Such items which do not fall under the category of apparatus and appliances (e.g. ambulance vans) should be charged to Capital/DF2 or DRF depending upon whether they are on additional or replacement account as the case may be, and should be processed through the Machinery and plant Programme.

( Ministry of Railway's letter No. 77/M (M & P )/1063/7/VI dated 8th September 1977).

405. Procurement of hospital diet articles:- (1) At places where departmental catering exits, efforts should be made to arrange the supplies of various raw materials through the catering department which should be requested to raise the necessary debits against the hospital for the supplies taken from the stock of the catering department.

(2) At other places, where the catering department is not able to arrange supplies, the purchase of provisions and various articles of diet may be through the agency of contractors, which should be on an open tender basis. In such cases, however, it is necessary that the Railways scrutinize the tenders properly and keep a proper watch on the execution of such contracts, specially bearing in mind the following points -

(i) The reasonableness of the rate of each individual item should be considered carefully before acceptance:

(ii) The assessment of quantities should be as realistic as possible:

(iii) In the case of items with accepted prices that are very high, the bill passing officer should be specially cautioned so that abnormal increases over estimated quantities are watched and investigated and wide deviations in the actual monthly payments allowed from time to time against the originally estimated value of such items of the contract are checked, and action considered necessary taken.


406. Stamping of medical stores:- To avoid pilferage and misuse, all medical stores received by Railway hospital/ health units should be stamped with a rubber stamp showing the name of the Railway and the Department and the date of receipt. The stamping should be made both on the carton and on the bottle/ampoule/vial. Similarly, all instruments and furniture should be stenciled with the initial of the Railway concerned viz.. "Central", "Eastern", etc.

(MOR's letter No.67/H/2/7 dated 28th January 1969).

407. Maintenance of Register:- (1) The following Register of stores shall be maintained in all health units and hospitals:-

(a) Day Book of Receipt of Medical Stores.
(b) Stock Register of Medicines and Medical Stores.
(c) Consumable Stores Register.
(d) Tools and Plant Register.
(e) Expendable Tools and Plant Register.
(2) All stores received in the stocking units are to be accounted for in one of the Registers mentioned in (b) to (e) above. In order to facilitate cross checking and to ensure that all items received are accounted for, it is necessary that a certificate should be endorsed on the Issue Notes/bills from the firms and the indent copies received along with supplies to the effect that "the material has been correctly received and taken into account and accounted for in Folio No......of...... Register".

(3) The debit will not be accepted by the Accounts department and the bills will not be passed without this certificate.

(4) A few pages of each Register should be earmarked for indexing the items showing the serial number, name of the stores and folio number, alphabetically.

(5) Day Book of Receipt of Medical Stores:- In order to keep a watch over the various kinds of stores that are received, and also to ensure that these are accounted and debit accepted for each, it is necessary to maintain a day-to-day register to be called the "Day Book of Receipt of Medical Stores", or simply, the "Day Book" (specimen attached under Annexure II to this Chapter). All the receipts of medical stores should be recorded in serial number date-wise.

(6) This book will be in addition to the Stock Register and other Registers which are described below. While posting the receipts from the receipt vouchers into the Stock Register, a reference to the folio number of the Register should be entered in the receipt voucher as well as in the Day Book to facilitate checking.

(7) Stock Register of Medicines and Medical Stores:- This Register should contain details of receipts and issues of drugs, injections etc. It should be maintained, in the prescribed form as given in Annexure II to this Chapter. It will be called the "Stock Register of Medicines and Medical Stores", or simply the "Stock Register". All the items should find a place alphabetically. Each item should have a separate ledger page. As and when each item is received, the quantity received is entered on the receipt side showing Challan Number and Date, Name of the party from whom received etc. As and when any quantity of the item is issued, it would be entered on the expenditure side with issue Voucher Number and Date, party to whom issued, etc. The A.D.M.O/D.M.O in charge of stores will periodically check his balance in the Register with actual stock on hand and see that they tally. The difference, if any, should be reported to the CMS/MS of the division for necessary action. The C.M.S./M.S should do a random check of items of this register during his inspection. The expiry date of drugs should also be recorded as referred to in Para 412(1).

(8) Consumable Stores Register:- This contains all consumable stores like stationery, sanitary articles like phenyle, etc. The procedure for maintenance of this Register is the same as for the stock register.

(9) Tools and Plant Register:- This register is to be maintained in the prescribed proforma as given in Annexure III to this Chapter. All items of "dead stock", viz., plant machinery, furniture, fixtures, instruments, utensils, cutlery, etc., should be brought under this Register.

(10) Each independent holder of such materials shall maintain this Register showing alphabetically each item. The pages of each Register will be numbered and separate page or pages should be allotted for each item. An index should be prepared showing the contents and the page number on which each item will be found. Where justified by the number of items two or more Registers should be maintained to cover different groups by classes as (a) surgical instruments and appliances, (b) furniture and equipment etc. The distribution of these items in various places in the hospital or the health unit should also be indicated in the Register as this will make it easy for the inspecting officers and the stock verifier to check them.

(11) Each item should have a clear and detailed description. The following details should also be entered against each item :-

(i) Date of receipt,  
(ii) Source of supply and voucher number, and  
(iii) value.

(12) All articles, whether received on capital or revenue account, should be entered in this Register. Whenever any article is condemned, returned to stores, or otherwise disposed off, it shall be entered as an issue, and a reference to the advice note under which it has been returned, issue note under which it has been transferred or write off statement under which its write off has been sanctioned, should also be given.

(13) Each holder of Tools and Plant Register shall check his Register annually with the actual stock on hand and certify to this effect on the first page of the Register. Any surplus items will be taken on the
register, and any shortages, should be explained. Besides this self stock verification, CMS/MS of the division will do a random verification during his inspection. The Finance branch deputes a stock verifier to conduct verification once in two years. Every such ledger holder will submit once a year to his CMS/MD/MS a statement showing the variations in the Tools and Plant Register.

(14) Expendable Tools and Plant Register :- There are certain items of tools and plant which are not durable or are fragile in nature, and as such have to be replaced from time to time. If these are included in the Tools and Plant register, frequent entries may have to be made in that Register. To avoid this, a separate register is to be maintained for such articles in the same proforma as for the Tools and Plant Register, and is to be called an "Expendable Tools and Plant register". The mode of entries like receipts and issues will be the same as for the Tools and Plant Register.

The following will find a place in this register :-

- Rubber goods .. .. Gloves, ice bags, hot water bags, catheters.
- Pewterware .. .. Ink pots, inhalers,
- Enamelware .. .. Bed pans, kidney trays, irrigation cans, basins, trays etc.
- Surgical .. .. Needles for syringes, surgical needles, surgical blades, etc.
- Conservancy stores .. .. Buckets, mugs, iron pots, latrine pans, night soil drums, metal dustbins, drain cleaning tools like bamboo poles, brushes, mops, etc.
- Linen and hospital clothing .. .. All items of linen and clothing like bed-sheets, counter-panes, blankets, draw-sheets, mattresses, pillows, mosquito-curtains, table cloths, towels, other items of uniform and clothing of staff like pyjamas, dhoties, aprons, shirts, etc.
- Glassware .. .. Funnel glass, measure glass, bowls glass, Petri dishes, pipettes, microscope slides, test tubes, glass stirring rods, syringes, thermometers, urinal glasses, nozzles etc.
- Crockery .. .. Plates and dishes, cups and saucers, jugs and pots, and other similar breakable items.

Note :- (1) The title of the various registers and the heading :" ........ Railway .......Department," as shown in the annexure may be printed only on the front cover of these register concerned and not on every page.

(2) At the divisional head quarters, the system of maintaining individual numerical ledger cards in Cardex (specimen given in AnnexureIV to this Chapter) in place of the various register may be introduced for easier accountal. Similarly, the system of Bin-cards (specimen given in AnnexureV to this Chapter ) can be introduced at all health units and divisional stores for correct checking.

(MOR's letter No. 67/H/2/7 dated 28th January 1969.)

408. Handling of the drugs & medicines :- (1) The hospital Store-keepers/Pharmacists will actually handle the drugs and keep the keys. They will maintain ground balance, keep records and make indents and issues under the orders of the doctor in-charge. The doctors will be in overall supervision. They will keep a watch on the trends of expenditure and will exercise such control as is necessary to ensure correct usage of drugs.

(2) The requirements of the compounding rooms and various other units of the hospitals, such as the wards, operation theatres, etc. will be issued once weekly/fort-nightly on "as required " basis.

(3) The Stock Register should be properly maintained as detailed in para 407 (7)

(4) A detailed account will be kept of all nominated medicines. The nominated medicines need not be costly items; they could include potentially dangerous drugs, etc., to be decided by the Chief Medical Director, who may use his discretion to decide on "Nominated Items". A duplicate slip of the prescription of the nominated items should always be issued by the prescribing doctor and such slips preserved, in chronological order, in the concerned sub-stores for two years to enable the departmental and Accounts inspection staff to check up the postings in the Stock Registers. For other medicines, only daily totals of the expenditure and the balance will be struck.

(5) In respect of the medicines supplied to the line doctor for his medicine bag, he should make a mention of the quantities of medicines issued to his patients in the register of attendance which he maintains.
(6) The doctors, other than line doctors need not normally be issued with medicines other than emergency drugs. Where, however, a doctor undertakes to give routine injection to patients at home, accounting would not be needed for emergency drugs.


409. Breakage and condemnation of unserviceable articles: Due to normal wear and tear, many items become unserviceable. A list of such articles is to be maintained in a "Condemnation register" by the stock-holder. Such articles are usually collected and kept and put up to the Medical Superintendent/C.M.S/M.D periodically during his inspection and condemned as unserviceable. The Medical Superintendents/C.M.S/M.D are authorised to condemn articles up to a certain value in each case on the individual Railways. For things of value of over the Medical Superintendents/C.M.S/M.D powers the Chief Medical Director's orders should be obtained in each case. The Medical Superintendent/C.M.S/M.D will, after condemnation, get the articles of no return value destroyed in his presence. Those that are likely to fetch any value will be dispatched to the concerned Stores Depot.

(Ministry of Railways letter No. 67/H2/7 dated 28th January 1969)

410. Life time of medical equipment: The normal life of medical equipment will differ from item to item. The duration for which an equipment can be used without any repair or with only minor repair, is considered to be the normal life. The normal life of different machines is suggested as below:

<table>
<thead>
<tr>
<th>Sr.No</th>
<th>Name</th>
<th>Normal Life in Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ECG. Machine</td>
<td>3</td>
</tr>
<tr>
<td>2</td>
<td>Cardiac Pace maker</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>Cardiac Monitor</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Other Electronic Equipment</td>
<td>3</td>
</tr>
<tr>
<td>5</td>
<td>Laparoscope</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Bronchoscope</td>
<td>5</td>
</tr>
<tr>
<td>7</td>
<td>Laryngoscope</td>
<td>5</td>
</tr>
<tr>
<td>8</td>
<td>Operating Microscope</td>
<td>5</td>
</tr>
<tr>
<td>9</td>
<td>Ambulance</td>
<td>5</td>
</tr>
<tr>
<td>10</td>
<td>Sterilisers</td>
<td>10</td>
</tr>
<tr>
<td>11</td>
<td>X-ray Machines</td>
<td>10</td>
</tr>
<tr>
<td>12</td>
<td>Portable X-ray machine</td>
<td>10</td>
</tr>
</tbody>
</table>

The sophisticated equipment generally do not work efficiently after repairs. Rapid advances in Medical Equipment are taking place and so the old models are to be replaced by the new ones, usually after a period of 3-5 Years.

Servicing of sophisticated medical equipment should be done by manufacturing firms or by the reputed servicing agencies on the basis of service contract and spare parts may also be purchased according to the advice of the firm at the time when equipment is purchased. A history card for costly medical equipment should be maintained as per Annexure VI to this Chapter. A log book for repair of medical equipment should also be maintained as given in Annexure VII to this chapter.

(Bd.'s No.84/H/27/34 dt.26/02/86)

411. Disposal of surplus articles: (1) Where items of serviceable medical equipment are rendered surplus in any health unit or hospital, they may be put up to the Divisional Medical Officer/Medical Superintendent/C.M.S/M.D., who, if he feels that he can utilise them in any other health unit or hospital in his own division, will cause them to be transferred to that health unit/hospital.

(2) Where items of such equipment are not required in his division, he will advise the Chief Medical Director, who in turn will find out whether they are required by any other division and transfer the items where they are needed.

(3) Where items of such equipment are not required by the Chief Medical Director for his Railway, he will circulate a list of such items to other Railways. Transfer of equipment from one Railway zone to another may be effected after the necessary formalities have been gone through, and the Ministry of Railways advised of the transaction.
(4) Any such article which can fetch some value and which is not needed at all anywhere, should be dispatched to the concerned stores depot after obtaining Chief Medical Director's sanction, and necessary credit obtained.

(5) All empty containers such as tins, packing cases, bottles, drums, etc. are to be sent to the Railway stores depots for disposal.

(Ministry of Railway’s' letters No.67/H/2/7 dated 28th January 1969, No.67/H/2/7 dated 6th July 1970 and No.76/H/2/7 A dated 25th February 1977).

412. Items marked with a date of expiry:- (1) Certain items of medicines like antibiotics, sera and vaccines, have a date of expiry marked on their packing. When receiving such items from the firms or the Government Medical Stores Depot, care should be taken to verify that there is a sufficiently long interval between the date of receipt and the date of expiry, so that there is a reasonable possibility of using such items before their date of expiry. It is always advisable to enter the date of expiry in red ink on the page of the Stock Register under such items, where the date of expiry is mentioned. Care should be taken to see that such drugs are used within that period.

(2) When any article is approaching the date of expiry, and surplus to his requirements, the Medical Officer(stores) should advice his CMS/MS in charge of the Division well in advance so that these can be utilised at other hospitals or health units in his division. If he is unable to do so, he shall advise the Chief Medical Director who will try to utilize it in some other division. If in spite of all these efforts, they still remain unused, they should be condemned and destroyed after obtaining the Chief Medical Director's sanction.

(3) With a view to keep a proper watch on such drugs so that they are consumed within their date of expiry, it is advisable to arrange them in racks or almirahs according to their date of expiry, and not according to their alphabetical order as is done with other drugs. As these drugs have got the month and the year of expiry, they should be arranged according to both the month and the year of expiry.

(Ministry of Railways' letter No.67/H/2/7, dated 28th January 1969).

413. Maintenance of and repairs to ambulance cars: Ambulance cars should invariably be maintained in good running condition. Regular servicing and repairs, wherever necessary, may be carried out promptly by any commercial concern in the same manner as is done in the case of staff cars. Timely replacement must be made. Efforts should also be made to have good selected drivers. Every ambulance should be equipped with emergency first-aid kit and manned by suitably trained para-medical staff. A log book for repairs of ambulance cars should be maintained as per Annexure VIII of this Chapter. A Proforma for Ambulance movement register is given in Annexure IX to this Chapter.

ANNEXURE - I
(See Para 407 (5))

RAILWAY

MEDICAL DEPARTMENT

DAY BOOK OF RECEIPTS OF MEDICAL STORES

<table>
<thead>
<tr>
<th>Date No.</th>
<th>Sl. No.</th>
<th>P.W.B. &amp; date or delivery note No. &amp; date</th>
<th>Name of firm or party from whom received</th>
<th>Reference to purchase order other reference under which supply is arranged</th>
<th>Particulars of stores received</th>
<th>Quantity</th>
<th>Reference to ledger folio</th>
<th>Reference to bill No. and date</th>
<th>Bill certified and sent</th>
<th>To</th>
<th>On</th>
<th>Initials</th>
<th>Remarks</th>
</tr>
</thead>
</table>

ANNEXURE – II
(See Para 407(7) and 407(8))

STOCK REGISTER OF MEDICINES AND MEDICAL STORES CONSUMABLE STORES REGISTER

RAILWAY

MEDICAL DEPARTMENT

<table>
<thead>
<tr>
<th>Month and date</th>
<th>No. of receipt or issue voucher</th>
<th>From whom received or</th>
<th>Receipts</th>
<th>Issue</th>
<th>Value</th>
<th>Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No.</td>
<td>Weight or measure</td>
<td>No.</td>
<td>weight or measure</td>
<td>Receipt</td>
<td>Issues</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
</tbody>
</table>
**ANNEXURE – III**
(see para 407(9) to 407(14) )

TOOLS AND PLANT REGISTER/EXPENDABLE TOOLS AND PLANT REGISTER

-----------------------RAILWAY

**MEDICAL DEPARTMENT**

<table>
<thead>
<tr>
<th>Date</th>
<th>Issue Note No. and date</th>
<th>Receipt No.</th>
<th>Quantity</th>
<th>Rate</th>
<th>Value</th>
<th>Advice Note No.</th>
<th>Date</th>
<th>Quantity</th>
<th>Balance</th>
<th>Distribution of the item</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<td>8</td>
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<td>11</td>
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</table>

**ANNEXURE IV**
( See Note (2) below Para 407)

-----------------------RAILWAY

**MEDICAL DEPARTMENT**

**NUMERICAL LEDGER CARD**

<table>
<thead>
<tr>
<th>Ward</th>
<th>Class</th>
<th>Unit</th>
<th>Main Depot</th>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>From whom received or issued to</th>
<th>Receipt or issue voucher number</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Receipts</td>
</tr>
<tr>
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<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part or P.L. No.</th>
<th>Description</th>
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<th>Maximum</th>
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</thead>
<tbody>
<tr>
<td>Bin No.</td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>
ANNEXURE V
(see note (2) below para 407)

………..RAILWAY

MEDICAL DEPARTMENT

STOCK POSITION CARD FOR MEDICAL STORES

Hospital / Health Unit ……………………………………..

<table>
<thead>
<tr>
<th>Item</th>
<th>AU</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Ladger Page</th>
<th>PVMS</th>
<th>Cat. No.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Receipt</th>
<th>Issue</th>
<th>Balance</th>
<th>Initials</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

ANNEXURE – VI
(see para 410)

Maintenance of History Card for costly medical equipment

<table>
<thead>
<tr>
<th>Specification the machine</th>
<th>Name of the manufacture/ supplier</th>
<th>Date of purchase</th>
<th>Cost of the equipment</th>
<th>Date and cost of repairs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>


**ANNEXURE - VII**
(see para 410 )

Maintenance of Log Book for repair of costly medical equipment

Name of Equipment:

<table>
<thead>
<tr>
<th>Date and time</th>
<th>Defects noted and detected by</th>
<th>Action taken</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**ANNEXURE - VIII**
(see para 413 )

Proforma for Ambulance Repair Log Book

<table>
<thead>
<tr>
<th>Ambulance number</th>
<th>Nature of defect</th>
<th>Signature of ambulance driver reporting the defects</th>
<th>Date and time from which defects noticed or out of order</th>
<th>Date and time when sent for repairs</th>
<th>Date and time when received after repairs</th>
<th>Remarks if any</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
</tbody>
</table>
## ANNEXURE - IX

(see para 413 )

Proforma for Ambulance Movement Register

<table>
<thead>
<tr>
<th>Date</th>
<th>Ambulance number</th>
<th>Name of driver</th>
<th>Time of departure</th>
<th>Time of arrival</th>
<th>Purpose for which ambulance is used</th>
<th>Signature of Medical Officer</th>
<th>Remarks</th>
<th>Kilo - meters</th>
<th>Drawal of petrol</th>
<th>Date</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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