

IMMUNIZATION SCHEDULE

PHC/CHC: Thirubuvanai

Month/Year: Sep-2015

Sl. No.	Name of the School	No. of Students			Name of the Vaccine			Planned Date
		I	V	X	DPT 5yrs	TT 10yrs	TT 16yrs	
1.	G.P.S Thirubuvanai peria pot	11	-	-	11	-	-	10-9-2015
2.	G.M.S Sangasikuppam	25	23	-	25	23	-	10-9-2015
3.	G.H.S Thirubuvanai	12	28	57	12	28	57	11-9-2015
4.	Annai Kids	8	-	-	8	-	-	11-9-2015

Alhamsy

MEDICAL OFFICER I/C

MEDICAL OFFICER
PRIMARY HEALTH CENTRE
TIRUBHUVANAI