**RESUME**

**SHABY P B**

**Velleprambil house**

**Kozhivettum Veli**

**Eroor .P.O**

**Thripunithura**

**PERSONAL DETIALS**

**NAME** : SHABY P B

**FATHER’S NAME** : BABU

**ADDRESS** : VELLAPARAMBIL HOUSE

: KOZHIVETTUM VELI : EROOR.P.O

: THRIPUNITHURA

**SEX**  : FEMALE

**AGE, DATE OF BIRTH** : 25/04/1995

**NATIONALITY** : INDIAN

**RELIGION, CASTE**  : HINDU EZHAVA **MARITAL STATUS** : MARRIED

**LANGUAGE KNOWN** : MALAYALAM, ENGLISH

**PH.** : +919383446172, +918606500867.

**Email** : **shabipb95@gmail.com**

**Educational Qualifications**

**S.S.L.C**  : **ST PETERS HSS KUMBALANGHY**

**Plus Two** : **S.D.P.Y G.H.S.S PALLURUTHY**

**Diploma in Anaesthesiology** : **LAKESHORE HOSPITAL**

**SKILL AREAS**

**.** Well practiced in handling Anaesthesia machine, cardiac monitors,defibrillator,infusion pump, Nerve stimulator, cvp transducer, IBP transducer, Ventilator, ABG.

**.** Well versed in assisting advanced field of Neuro, Kidney and Liver transplant, plastic, Urology, Orthopedic, ENT, OBG, Paediatric and Oncology Surgeries. Assisting doctors for all procedures like central defibrillation, Endotracheal suctioning, regional and peripheral nerve blocks.

**.** Well trained in handling anaesthesia drugs and other supportive drugs, equipments with timely assisting sense.

**.** Also emergency management of the critically ill patient including Resuscitation, Airway clearance, ventilator care.

**FOR REFERENCE** :

1. Dr. Mohan Mathew MD FICA

Director of critical care and Anaesthesiology

Mob. No: 9447076652

2. Dr. Mathai Samuel

Senior Consultant, Anaesthesiology

Lakeshore Hospital, Kochi

Mob.No: 9447221151

**DECLARATION**

**I hereby declare that the above details are true and correct to the best of my knowledge and belief.**

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**PLACE : EROOR** **SHABY.P.B**