ABHIKA JAYADEVAN

Kizhakke Minnumpuram, Panavally PO, Cherthala, Alappuzha- 688526

Mob: 8304902382 | E-mail: abhikajayadevan@gmail.com



PERSONAL INFORMATION

Date of Birth	: 13/03/2001
Marital Status	: Single
Nationality	: Indian
Known languages	: English,Malayalam

EDUCATION

2021	Dr. SOMAVELL MEMORIAL C.S.I MEDICAL COLLEGE & HOSPITAL, Karakonam Thiruvananthapuram Diploma in Operation Theater and Anaestesia Technology
2018	S N H S S Sreekandeswaram school Plus Two
2016	S N H S S Sreekandeswaram school
	SSLC

EXPERIENCE

Two and half years of practical experience, including six months internship in various major specialty operation theatres and ICU at Dr.SMCSI.medical college Karakonam and during that period, I was able to provide technical assistance for anesthesia in general surgery, orthopedics, oro maxillary, facial surgery, urology, obstetrics and gynecology, peadiatric surgery, neuro surgery, oncology, Gastroenterology joint replacement surgery, cardio thoracic surgery, critical care units (MCCU & SCCU), renaltransplant and causality emergency OT.

ANAESTHESIA TECHNIQUES

Assisted in CPCR,Laparoscopy, Central Neuraxial Block, Peripheral Nasal and oro - Tracheal intubation Extubaion Setting Of Anaesthesia Table including drugs, Done Ryle's tube Insertion and IV Cannulation Care of patients on ventilatior in ICU and PACU Tracheotomy care, Done Oral and Nasal Le Suctioning, assisted and Monitoring of post operative and intra operative cares, oxygen therapy, IM IV

OT TECHINIQES

S/C injections, blood transfusion, Fluid transfusion Patient positioning, laparoscopic equipment's, central pipe line system, OT lights, electrosurgicalitems, oxygencylinders

BIOMEDICAL TECHNIQUES

Anesthesia machine, multi parameter monitors, drug delivery system, defibrillator, Anesthesia ventilator, ICU ventilator and settings, syringe pump, infusion pump, suction apparatus, Nebulizer, Fluid warmer, patient warmer, nerve stimulator, glucometer, video laryngoscope, fiber optic bronchoscope

HOBBIES

- listening to music
- > Gardening

REFERENCE

- Dr. SASIDHARAN NAIR Dept Of Anaestesia , Dr. SMCSI HOSPITAL, Karakonam 944786372
- Dr. KHADER Dept Of Anaestesia , Dr. SMCSI HOSPITAL, Karakonam 8281248386

DECLARATION

I hereby declare that the information given above is true to the best of my knowledge. Given an opportunity, I shall do my best to the satisfaction of my superiors and colleagues

ABHIKA JAYADEVAN

Date:

Place: Panavally