RESUME

ATHARAMALAI A

No.3/227, Milk Street,

Oothukuli,

Thenkarai Post,

Vadipatti Taluk,

Madurai (D.T) MOBILE NO: 6374260061,9655378182

625207 EMAIL ID: atharamalai@gmail.com

OBJECTIVE

To be a successful person in medical professional by using my talents and potential to the possible extent to excel in my career. Achieve both individual and organizational goals through dedicated hard work and perseverance.

EDUCATIONAL QUALIFICATION

| NAME OF | ME OF INSTITUTION/PLACE | | BOARD | %MARKS | |
|---------------|--|---------|----------------|--------|--|
| COURSE | | PASSING | | | |
| B.SC ACCIDENT | Government Villupuram Medical | 2023 | DR.M.G.R | 64% | |
| AND | College and Hospital Mundiyampakkam | | MEDICAL | | |
| EMERGENCY | | | UNIVERSITY | | |
| CARE | | | | | |
| TECHNOLOGY | | | | | |
| H.S.C | Government Higher Secondary School, Mullipallam. | 2018 | STATE BOARD | 74% | |
| S.S.LC | Government Higher Secondary School, Mullipallam. | 2016 | STATE BOARD | 75% | |

PERSONAL SKILL

- Communication with patient to know the problem
- Assistance to doctor during treatment

- Ability to function well in Emergency as a Technician
- Basic care treatment to the patient suffering from injuries
- Primary medication and treatment for the patient.
- Basic Knowledge in computer (Typewriting)

PROFESSIONAL SKILL

TAEI WARD

CASUALITY:

- Emergency
- Peadiatric
- OG

ICU CARE:

- SICU
- IMCU
- PICU

PROFESSIONAL EXPERIENCE

| DESIGNATION | CONCERNS | PERIOD |
|-------------|--------------------------|--------|
| Internship | Government Villupuram | 1 Year |
| | Medical College And | |
| | Hospital, Mundiyampakkam | |

PERSONAL HABITS

- Personal Development
- Reading Books
- Drawing
- Spend Time in nature

RESPONSIBILTIES

- Continuously identify hazards and risk and take corrective precautions Carry out roll call in the event of an emergency
- Ensure work confirms to client's standards
- Accompany doctor on rounds & implement treatment as required

STRENGTH

- Punctuality
- Optimistic
- Ability to learn quickly and apply knowledge effectively
- Self-Confident

CERTIFICATE

• I participated BLS certification program in Indian medical association, Villupuram

| P | ER | RSC |)NA | L P | RO | FILE | £ |
|---|----|-----|-----|-----|----|------|---|
| | | | | | | | |

Name : ATHARAMALAI A

Age : 22

Gender : Male

Date of Birth : 15.12.2000

Father Name : AYYANAR N

Marital Status : Single

Languages Known : English, Tamil

Nationality : Indian

Religion : Hindu

DECLARATION

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

Place: Yours Faithfully,

Date: (ATHARAMALAI A)