

BIO-DATA

Salini Damodaran

D/o .T. Damodaran

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OBJECTIVE

As a Nurse with adequate clinical experience and a strong commitment towards the profession, I am like to be a team member in a repute organization where my skills, responsibilities and experience may be put to use professional manner and simultaneously contribute to the growth of the organization and myself.

ACADEMIC QUALIFICATION

Course	Name of Institution	University/Board	Year of Passing
BSc Nursing	Aswini College of Nursing, Thrissur	Kerala University of Health Science	2019-2024
Plus Two	St Anthony's H.S.S pudukad	Board of Public Examination Kerala	2018
S.S.L.C	St Joseph's model h s s kuriachira	Board of Public Examination Kerala	2016

TRAINING DETAILED YEAR WISE

Sl.No	Year	Department	Duration	Hospital
1	1 st year	Medical ward, Surgical ward, Emergency, OPD, Minor OT	6 months	Aswini Hospital Ltd, 300 bedded
2	2 nd year	Medical ICU, Surgical ICU, OT, CCU, Ortho ward, Cardiac ward	6 months	Aswini Hospital Ltd, 300 bedded
3	3 rd year	PICU, NICU, Pead's ward, ICU,OT	6 months	Aswini Hospital Ltd, 300 bedded
4	3 rd year	Psychiatric/ Mental Health	1 months	S H Hospital, Payyankulam
5	3 rd year	Oncology ward	2 weeks	Amala Institute of Medical Science Thrissur
6	4 th year	Gynae ward, Labour Room, Labour OT, CTVS	6 months	Aswini Hospital Ltd, 300 bedded, Raji Nursing home Thrissur

7	4 th year	Community Health	1 month	Primary Health Centre Moorkanikkara, Community Health Centre Vellanikkara
8	4 th year	Community Health	1 week	Primary Health Centre Dindigal

SEMINARS/WORKSHOPS/RESEARCH WORKS

Research conducted on topic" Assess the knowledge regarding the prevention and management of problems in breastfeeding among antenatal women.

WORKSHOP

National level workshop on "Palliative care ; Care unto the last"

PERSONAL DETAILS

Name of the Father : Mr.T. Damodaran
Date of Birth : 31/01/2000
Sex : Female
Religion & Caste : Nair
Nationality : Indian
Marital Status : Single
Languages Known : English & Malayalam

REFERENCE

Dr.Lt.Col.Rosy K.O
Principal
Aswini College of Nursing
Thrissur- Kerala
Ph. No: 0487-2317255

DECLARATION

I hereby declare that all statement made in this application are true and correct to the best of my knowledge and belief.

Place: Thrissur

Date

