

**REPUBLIC OF RWANDA**  
**MINISTRY OF HEALTH**  
**Health Center: SOVU**  
**CBHI: HUYE**

CBHI Code: **0204/12/00180/06**

Patient: **CYUBAHIRO BONHEUR**

Family Chief: **RWAMUCYO J D'AMOUR**

File Number: 00180

Age: **0 yr 11 m**

Family Category: **3**

Service: **CPC**

Document Number: 20151204A127

Sex: **Male**

Village: **AGAHENEREZO**

Cell: **RUKIRA**

Sector: **Huye**

District: **Huye**

No Previous Record

Details on received acts

Date	ITEM		Diagnostic: NC <input type="checkbox"/> AC <input type="checkbox"/> PECIME <input type="checkbox"/> Hosp. <input type="checkbox"/>			
	Temperature(°C):	Weight(Kg): <b>6</b>	Principal: Secondary:			
2015-12-04	CPC Jour <input type="checkbox"/>	CPC Nuit/WE <input type="checkbox"/>	Consultation CPN <input type="checkbox"/>	Register No: <input type="text"/>		
	Exam:					
	Medicines:					
	Consumables:					
	Hospitalization: Days and Type: Date In: ...../...../..... Date Out: ...../...../.....					
	Other:					
	Decision: Sortie Definitif <input type="checkbox"/> Transfer Avec Ambulance <input type="checkbox"/> Transfer Sans Ambulance <input type="checkbox"/>					

Date: 2015-12-04

Nurse's Name & Signature

Beneficiary's Name: CYUBAHIRO BONHEUR