



# VINAYAK HOSPITAL

Plot No. 7/8, Ward 5/A, Adipur (Kutch). Mobile 7575073745

## INDOOR CASE SHEET

Name: \_\_\_\_\_ Date : \_\_\_\_\_

Address : \_\_\_\_\_ Age : \_\_\_\_\_ Weight : \_\_\_\_\_

\_\_\_\_\_ Date of Birth : \_\_\_\_\_

\_\_\_\_\_ Day of Admission : \_\_\_\_\_

Date of Admission: \_\_\_\_\_ Date of Discharge : \_\_\_\_\_

Diagnosis: \_\_\_\_\_

DATE	CLINICAL EXAM.	TREATMENT GIVEN