Report Date & Time: 15/01/2010 11:54:10

POSTGRADUATE INSTITUTE OF MEDICAL EDUCATION & RESEARCH

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Ph: ----- Fax: -----

(ABSCONDED FORM)

The Station House Officer Kalyanpuri Police Station Delhi - 110091

Subject: INFORMATION REGARDING ABSCONDING PATIENT

Sir.

This is report to you that the patient whose particulars are given below has absconded from

New Ward For ward of POSTGRADUATE INSTITUTE . His / Her particulars as per hospital

Rep OF MEDICAL EDUCATION & RESEARCH

record taken at the time of his / her admission are as under:

1. Patient Name : Abhishek

2. Regd. / CR No. : 1081000000071

3. Age : 21 Yr
4. Year : 2010 11:53
5. Religion : Hindu
6. Father / Husband's Name : Dfg Fdg Fd

7. Address at the time of admission : D

It is requested that necessary step may kindly be taken to trace the absconding patient.

Yours faithfully,

(Signature)

(Senior Resident)

Dated: 15-Jan-2010 New Ward For Rep

Time: 11:54:12 AM POSTGRADUATE INSTITUTE OF MEDICAL EDUCATION & RESEARCH

CHANDIGARH-160012(India)

Copy to:

- 1. Medical Supritendent (ABSCONDED FORM)
- 2. Dy. Medical Supritendent for information.

3. Vigilence Incharge , $$\operatorname{\textsc{POSTGRADUATE}}$$ POSTGRADUATE INSTITUTE OF MEDICAL EDUCATION & RESEARCH

RECEIVED REPORT DUTY OFFICER Kalyanpuri Police Station Delhi - 110091