# **Discharge Report**

## **Personal Information**

Member No.	Reg Date	Name	Email	Birthday	Age	Gender	Civil Status	Blood Group
SSAL000039	2023- 05-29	Vijaya Vaijapurkar	kale_ravi1984@rediffmail.com	0000-00-	81	Female		A+

		R	oom Details		
Member No.	SSAL000039	IOP No.	IP-SSAL000036	Admit Date	2023-06-30
Room No.	201	Bed No.	Bed 2	Discharge Date	2044-07-27

## **Contact Information**

Address	City	Phone No.

## **Relative Contact 1**

Relation With	Address	City	Phone No.

## **Relative Contact 2**

Relation With	Address	City	Phone No.

## **General Examination**

KCO	Chief Complaint	Family History	Past History	Pulse	B.P	Temp	SPO2	Urine	P/A	R/S	Food Intake
mm	aseaes	aseraw	awedfa	mlk,	sdfa	scs		sdf	asedaes	aer	aedaw

	Ongoing Medication
1	t. stamlo 5mg
2	t.cardace 5mg
3	t. livipil 500mg
4	t.zitamet 20/500
5	

	Doctor Notes
sdaf	