# **Discharge Report**

### **Personal Information**

Member No.	Reg Date	Name	Email	Birthday	Age	Gender	Civil Status	Blood Group
SSAL000012	2023- 09-04	spero	spero999@gmail.com	0000-00-	53	Male		

			Room Details		
Member No	sSAL000012	IOP No.	IP-SSAL000012	Admit Date	2023-09-18
Room No.	410	Bed No.	Bed 2	Discharge Date	1694975400

### **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**

ксо	Chief Complaint	Past History	Pulse	B.P	Temp	SPO2	Urine	P/A	R/S	Food Intake

	Ongoing Medication
1	