



NABH ACCREDITED



MGM NEW BOMBAY HOSPITAL, VASHI



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ADMISSION CASE PAPER

UH ID No. MGM240017131

PATIENT DETAILS		IPD. No : MGMIP2406720
Patient Name : MR. KIRAN BHAGWAN TAWARE	Age: 56 YEARS, 2 MONTHS	Date & Time Of Admission : 05-10-2024 10:40:34
Gender : MALE	Occupation	Marital Status
Address SS III R NO 761, SEC 8, -, Koperkhairne, NAVI MUMBAI, MAHARASTRA, INDIA	Patient Category : PRIVATE	Class MULTIBED A/C UNIT
Bed : ECU-001	Ward : EMERGENCY CARE	MLC <input type="checkbox"/> ROUTINE <input type="checkbox"/>
Phone / Mobile No : 9987287390 / 9867697299	Date of Discharge 13/11/24	
Name of Next to Kin MS POURNIMA TAWARE	Relationship DAUGHTER	Contact No. 9867697299/9987287390
Address : SAME AS ABOVE	Medicine : Paying / Credit	
Consultant Name DR.PRASHANT ATHALE	Department : GENERAL SURGERY	Referred By :

Allergic To : <i>Not known</i>	ICD Coding : K35.32
Provisional Diagnosis : <i>Appendicular</i>	
Final Diagnosis : <i>perforation</i>	
Surgical Procedures : <i>postoperative exploratory laparotomy with septic shock with debridement polynuropathy & postoperative thoracostomy & SIB Blister vac dressing</i>	
Referred to other Consultants : <i>Dr. Vema, Dr. Tushar, Dr. Munde, Dr. Vikas B, Dr. Vikas, Dr. Pradeep Tiwari, Dr. Chhaya, Dr. Daga</i>	
CHARGE STATUS Recovered <input type="checkbox"/> Improved <input type="checkbox"/> Expired <input type="checkbox"/> Against Medical Advice <input type="checkbox"/> Transfer <input type="checkbox"/>	

Undertaking
I am willing to admit the above person, in the mentioned class and hereby undertake to pay all charges as per schedule of charges etc, fixed by the hospital from time to time, inclusive of change in class without raising and dispute, till the date of discharge.

हमोपत्र
मे मरीज को अस्पताल मे उपरो लिखित वर्ग मे दाखील करनेको राजी हुं। अस्पताल के सभी निश्चित किये आकारो के साथ हि वर्ग बदली आकारो को भी मान्य करता हु ओर वही आकारो के मुताबित बगैर कोई शिकायत अस्पताल के खर्च कि रक्कम अदा करनेको बंधित हु। मे अस्पताल के सभी कानून तथा नियमो का पालन करेगा।

Name : MS POURNIMA TAWARE
Relation / Self : DAUGHTER
Signature of Patient / Patient's relative

MEDICO LEGAL CASE Informed by :

Police Station : Constable :

Certificate Issued if Any Specimen handed over (Signature)

Plot 35, Sector 3, Vashi, Navi Mumbai 400 703.

DMO Tel: (022) 50666777/888 | Tollfree : 18002665456 | Emergency Hotline : 14466 Consultant Incharge

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