

## **BARALA HOSPITAL & RESEARCH CENTRE**





DR. ROOM NO :- G-2-1157

		_
Patient Name	:	
Relative	:	
UHID No	:	
Address	:	
Consultant		

Date Age/Sex Mobile No Category Department

Chief Comp	laints
Ciner Con-	

Gothroad pary x story, Past History (includes known drug allergy, surgery & vaccination, if any):

PR - 1/66%

Até pain in abdonn.

Spo2 - ~991/-

RR -

General / Physical / Systemic Examination:

P/A-tendemes)

Provisional Diagnosis:

AZIVIZA

Investigation:

USCI Whole abdomen

T. Zifi-o toomy BD

Syp. Sycraffate-0 2+sf 70)

- North - Do 1 tal Sos

Dietary and Preventive care

Date & Time

Dr. Signature with Stamp

Review Date / After Day (s)

IN CASE OF EMERGENCY CONTACT:8875004329 FOR AMBULANCE SERVICE CONTACT:8875004238

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