

## **CHUKA COUNTY REFERRAL HOSPITAL**

P.O BOX 8 CHUKA.

728226333

## ADMITTED PATIENTS REPORT

5/31/2019

8:22:45AM

5/51/2019 6.22.45AW								
Date Admitted	PatientName	RegNo	Ward Name	Bed No	Patient Category	Diagnosis	Doctor	Duration In Days
Total Number Of Admitted Patients								