

श्रुव्राचर्डकाचवित्राक्ष्वेत्रह्नव्याद्वित्री Signature and seal of the prescriber

引.吳如 वर्माद्राक्षर Date: gister No. विग लहा वर्गाने सम्बंध amber No Disease Code. Advice

श्रुव पर्केश परिस्म ब्रह्म हण्य द्रमित्र। Signature and seal of the prescriber

Treatment Record शु.ष्ट्रय 首中有5005 函/Age Z/M Register No. वरश्चेम अर् Chamber No Disease Code. Dr (2) - ant-R/V-(12) 4) Remove - splint - Apply Right below elbow pop-cast-(colles - keep for 6/52 Gapplied -> Plv after 6/52. NV intact. CLFT<2. No pain e passive more mont. -> RIV 808 ib 1 hand pain, swelling RYA Case C/o I seering, no otaleja, middines, Tinita No Go Gleding. CAC n 186: Normal Lesving bu श्वराम्बन्नितः सक्तराम्बन्धाः प्रमान

Signature and seal of the prescriber But Sos.

### PARO GENERAL HUSPITAL

Registration No.	Ep13	Date: 8	30/03/2028		Andrews (Street, Street, Stree	The same of the sa
Patient's Name	Kiran Rai		Gender:		V P	F
Address			Age:	27 -		
Referred from:		Service F	Referred to:			
Health Problem/Diagnosis			Disease Code:		b:	C:
BP- 11/73m	mHg.	- hý	Novemre (2.0°)	75~	9 1/1	stat



### Paro Hospital

Annual arthur			Bhut	an				
			Patient Disch	arge Summary				
Patient Name	KIRAN RAI		UHID 627CDD83E9		CID		11103002446	
Age/Sex	27Y/M		Contact No.	77820487		Visit Date	30/03/2025 13:33	
Visit No.	0801PVIP0000077107		Facility Department	DEPARTMENT OF GENERAL PRACTICE		Consulting Doctor	Dr. Yeshi Choden	
Ward	IPD Ward		Room	General ward 1		Bed	(MM584) Bed 1	
Personal Habits	Chewing Tobacco,		,					
Discharge Details								
Discharge Condition								
IMPROVING				Discharge Date 31/03/2025 10:09				
				31/03/2025 10:09				
Final Diagnosis								
ICD 11 Code	Туре	Des	Descriptions Remarks					
PA13	Primary	UNII	UNINTENTIONAL LAND TRANSPORT NONTRAFFIC EVENT INJURING A MOTOR CYCLIST			rks		
NC32.5Z	Secondary	FRA	FRACTURE OF LOWER END OF RADIUS, UNSPECIFIED					
Discharge Summary	Prepared By							
Name			Designation		Territoria			
Dr. Saroj Tamang (MM 542)		GDMO			Signature			
, many (mm ove)								
Course In Facility								
KUO for 24 hrs								

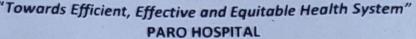
#### Advice On Discharge

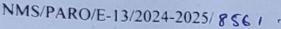
review with ortho OPD in jDWNRH

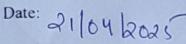
Deport la po TID-3d mendorn 2) a) Houprofon 400 mg po TID-5d 3) Ramitidine 150 mg po BID-5d. \*\*\* End Of Report \*\*\* a) MV after /52 at OPD.

## ट्रिका इंच विवा विवा । क्रिक क्रूट ब विष्य विवा हेवी

# Royal Government of Bhutan | National Medical services THIMPHU







# MEDICAL/SICK LEAVE CERTIFICATE CID No. 1110 3002446 I certify that ... Kiran Rai Employee/Student/Resident of Bhutam Post Was unable to attend work/school Will be unable to attend work/school From 21/64/2025 to 1/5/2025 Additional document: # right-distal radius. Signature of certifier: .. Designation: . General Duty Medical Officer BMHC Reg. No.: MMM S42 Paro General Hospital .... Date: (Certificate is signed): ....

Office Sealo SHUTAN