

DEPARTMENT OF HEALTH AND FAMILY WELFARE  
GOVERNMENT OF WEST BENGAL

DISCHARGE

N.R.S MEDICAL COLLEGE & HOSPITAL  
138, A.J.C BOSE ROAD, KOL-700014  
(PH:(033) 2286-0103-08)

MMD-1

GM-1

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Charge Certificate/Left Against Medical Advice

Charge No. \_\_\_\_\_ Date of Discharge : **06.07.2019** Time : **4PM** Patient Category : Free/Paying/Cabin

Patient Name : **UTTARAYAN CHAKRABORTY** Sex : **Male** Age : **50** Yrs. **0** Months **0** Days

Patient Srl. No. : **NRS M/PA1900045505** Patient Registration No. : **NRS M/RG1900496057** Admission Date : **[ 01-07-2019 ] [ 9:12 PM ]**

Address : **PASCHATYAPARA ROAD** Post Office : **RAJPUR**  
Municipality / Village : **Sonarpur** District : **South 24-Parganas**  
Police Station : **West Bengal** Nationality : **India** Religion : **Hindu**  
State : **LT BALAI CHAKRABORTY** Father's Name : **DR. SUKDEB DAS/DR. SUMIT CHAKRABORTY/DR.** Husband's Name : \_\_\_\_\_  
Doctor/Unit : **AVISHEK SAHA/DR. APURBA BIKASH PRAMANIK** Phone/Mobile No. : **6291855485**  
Bed No. \_\_\_\_\_ Bed Type : **FREE** Ward Name : **MMD Ward**

Final Diagnosis : **Chronic Kidney Disease Stage 2 on Maintenance Hemodialysis + Hypertension**

Referred To : **Nephrology OPD** Date : \_\_\_\_\_ Time : \_\_\_\_\_ Reason : **Diabetic Nephropathy**  
**CTVS OPD (For A-V fistula fura)**

A. \_\_\_\_\_ In case of Confinement

Delivery Date & Time : **Endocrinology OPD** Mode of Delivery : **ND/ECL/LUCS/With Forceps/Without Forceps**  
Delivery Status : \_\_\_\_\_ No. of Child : \_\_\_\_\_ Antenatal Care Taken : **Yes / No**

B. \_\_\_\_\_ In case of Surgery

Surgery Date & Time : \_\_\_\_\_ Type of Surgery : \_\_\_\_\_  
Surgery Status : **A is hemodynamically stable, afebrile and feeding well at the time of discharge**

C. \_\_\_\_\_ Anesthesia Details

**To continue Maintenance Hemodialysis from Nearest COC @ twice / week.**

D. \_\_\_\_\_ Investigation Done

Test Name : **Adv. Su Base** Comments : \_\_\_\_\_

E. \_\_\_\_\_ Medicine Details

Medicine Name : **1. Salt restricted diabetic diet.** No. of Days : \_\_\_\_\_ Comments : \_\_\_\_\_  
**2. Tab. Amlodipine 10mg 1tab OD x to cont.**

**3. Tab. Sodium bicarbonate 500mg 1tab TDS x to cont.**  
**4. Tab. IFA 1tab TDS x to cont.**

**5. Tab. Calcium Carbonate 500mg 1tab OD x to cont.**  
**6. Tab. Atorvastatin 20mg 1tab ODHS x to cont.**  
**7. Tab. Torsemide 10mg 1tab OD x to cont.**  
**8. Dof. EPO 4000 IU S/C twice weekly x to cont.**

**9. Maintain ID chart & Input = Output + 300ml**

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Counter Signature of Visiting Staff : **[Signature]** **Renal Urea-Creat, Na-K, reph. / ER SDS**

Signature of the Medical Officer : **[Signature]** **07/01/2019**

Details of Baby

Birth Date : \_\_\_\_\_ Birth Time : \_\_\_\_\_  
Disc No. : \_\_\_\_\_ Sex : \_\_\_\_\_  
Birth Wt. : \_\_\_\_\_

Advice for Baby

**\* During admission per CBG remained normal, one episode of hypoglycemia on introduction of oral diet.**

Baby Checked and Discharged : \_\_\_\_\_  
Signature : \_\_\_\_\_  
Date : \_\_\_\_\_ Time : \_\_\_\_\_