

**DISCHARGE**  
**DEPARTMENT OF HEALTH AND FAMILY WELFARE**  
**GOVERNMENT OF WEST BENGAL**

Sanku Nath Gandhi Hospital  
 11, Eight Road, Bhowanipore, P.O. Kolkata - 700 026

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Discharge Certificate Left Against Medical Advice

Discharge No. : MANUJ ALAM  
 Date of Discharge : 8.3.18  
 Time : 25  
 Patient Category : Free / Paying / Cabin

Patient Name : MANUJ ALAM  
 Patient Sri. No. : PA1803784  
 Patient Registration No. : RB18029126  
 Admission Date : 03-Mar-2018 Time: 17:35

Post Office : BANUJPUH KHODAR BAZAR  
 District : South 24-Parganas  
 Religion : Muslim  
 Nationality : Indian  
 Husband's Name :  
 Phone/Mobile No. : 9874288412  
 Ward Name : J.B.1 (Male Medical) (07)  
 Bed No. :  
 Doctor/Unit : LDC00000114) DR. GLORE CHOWDHURY (M.B., DM (Card.))  
 Bed Type :  
 Final Diagnosis :

Address :  
 Municipality / Village : BANUJPUH KHODAR BAZAR  
 Police Station : Baruipur P. S.  
 State : West Bengal  
 Father's Name : MKAIL ISLAM KOLLA  
 Doctor/Unit : LDC00000114) DR. GLORE CHOWDHURY (M.B., DM (Card.))  
 Bed No. :  
 Final Diagnosis :

A. Delivery Date & Time :  
 Mode Of Delivery : ND/ECL/LUCS/With Forceps/Without Forceps  
 Antenatal Care Taken : Yes / No.  
 In case of Confinement

B. Delivery Status :  
 In case of Surgery :  
 Type of Surgery :  
 Surgery Date & Time :  
 Surgery Status :

C. Anesthesia Details :  
 Birth Date :  
 Disc No. :  
 Birth Wt. :  
 Sex :  
 Birth Time :

D. Test Name :  
 Investigation Done :  
 Comments :

E. Medicine Name :  
 No. of Days :  
 Comments :

F. Advice :  
 Comments :

Details of Baby :  
 Birth Date :  
 Disc No. :  
 Birth Wt. :  
 Sex :  
 Birth Time :

Advice for Baby :  
 Comments :

Baby Checked and Discharged :  
 Signature :  
 Date :  
 Time :

Signature of the Medical Officer :  
 Counter Signature of the Visiting Staff :

Handwritten notes in the top right section of the form.

Handwritten notes in the top left section of the form.