

Government of West Bengal  
Calcutta National Medical College & Hospital  
24, Gora Chand Road, Kolkata - 700 014

Interdepartmental Referral Report

Ref. To :- VP/VS/RMO/EMO/RS of the Dept. of Dialysis, CNMC & H

Ref. From :- The Department of General Medicine, CNMC & H

Sir / Madam,

Request the valuable opinion of the under mentioned Patient -

Name of the Patient : MD SAMUD Age : 50x Sex :  M/F

Date of Admission : 07/01/19 Ward : RF1 Unit : I Bed No. : 135

Brief Presentation / Case history of the patient :- This pt needs urgent Dialysis.  
Please do needfw. HIV<sub>1,2</sub>: NR, Hbs Ag: NR, Anti HCV Ab: NR

Noted by

(Name & Signature of referral  
Doctor with Date / Time & Seal)

PA 1900001488  
RG 1900013587

A (for Dr. K. U. Das)

(Name & Signature of referring doctor)

Designation : VP

Date & Time : 08/01/19, 10AM

Patient Details :

Name : MD SAMUD Age : 50x Sex :  M/F

Date of Admission : 07/01/19 Ward : RF1 Unit : I Bed No. : 135

PA 1900001488  
RG 1900013587

A (for Dr. K. U. Das)

(Name & Signature of referring doctor)

Designation : VP

Date & Time : 10/01/19, 10 Am