



"Government of West Bengal"  
 "Gorkhaland Territorial Administration"  
 Department of Health & Family Welfare  
 District Hospital, Darjeeling

**"DEPARTMENT OF EMERGENCY"**

Emergency Registration Number: EMR-103 Date/Year: 25/7/19 Time:.....  
 Name: Savitā Chettri Age: 50y Sex: f Son/Daughter/Wife of:.....  
 Patient's Address:..... Ph. No. ....  
 Attending Doctor's Name:..... Observation/Referred to/Admitted to:.....

to KLC CKD  
 ↓ HD

Hb - 9.1 gm%  
anti  
HCV - 12.98

**Rx**

Send the patient to  
 dialysis unit

2pm NAC SOJ

Signature of the Medical Officer