

VERY URGENT H-D TO BE DONE

College of Medicine & J.N.M. Hospital, Kalyani, Nadia.  
**Requisition Form for DIALYSIS**  
**for O.P.D. & I.P.D. Patients, COMJNMH, Kalyani)**

Name of the Patient: *Swarajit Mondal*  
Address: *Para Beskmap, CHAKDADA*  
OPD/IPD Registration No: *PA 9542*  
Clinical Diagnosis: *Parquet podwong*

Age: *18y* Sex: *M*  
Telephone No (M): *9836697556*  
New Case/Old Case:  New  
Ward: *MMW*  
Referred from:

Investigation Reports: Blood Biochemistry: Sugar: Urea: *136*  
Creatinine: *6.76* Potassium: *5.8*  
Serology : HBsAG: } *negative*  
ICTC (HIV I & II): } *negative*  
Hemoglobin Level: *11.5* } *Associate Professor*

Advised by: *DR. P. GANAVLY* Designation: *Associate Professor*  
(Name in Block Letters) (Not below the rank of RMO):

Whether patient belong to BPL: YES/NO (Documents to be submitted)

Whether entitled to RSBY Scheme:

Whether the patient is referred from any Govt. Hospital: YES/NO

If YES, name of the Hospital:

Number of Dialysis needed (anticipated):

Date: *23/1/19.*

Signature of Faculty/VP/VS/RMO

*Dr. Parva Roy*  
*(PPT/US)*  
Medical Officer  
College of Medicine & JNM Hospital (WBUHS)  
Kalyani, Nadia  
*Jy.*

\*Place the requisition slip directly to the Dialysis centre, COMJNMH, Kalyani for necessary action

( Only for BPL categories and other beneficiaries( as per Govt. norms) for waiving of charges)  
Registration No: Date:

Forwarded to Dialysis Centre (COMJNMH/Health Point)

Allowed free for \_\_\_\_\_ nos of Haemodialysis  
(EXCEPT DIALYSIS KIT CHARGE)

Seal

Medical Superintendent  
College of Medicine & J.N.M. Hospital,  
Kalyani, Nadia.