

DISCHARGE Certificate



DISCHARGE SUMMARY

DEPARTMENT OF SURGERY

HN :

0000924507

AN :

LSH221078271

DN :

DS322100000110672

Patient Name : MD. SAHABUDDIN

DOA : Oct 23, 2022 02:52 PM

- * Tab. Emizoy
0+0+1 (after meal) - to be continued
- * Cap. D-rise 40,000IU
1cap weekly for 16 weeks

Advice on Discharge :

- * Take medicine regularly.
- * Review with Prof. Dr. Moududul Haqueat his chamber on 31.10.22 (Monday)
- * Take serial before visit.

Discharge Summary Copy Receiver's Name & Sign :

Name:

Relationship with Patient:

Sign:

For Urgent Care (When and How to get) :

Please inform emergency department of labaid hospital if you have abdominal pain, discharge from wound, bleeding from wound, vomiting, chest pain, respiratory distress/ breathlessness, palpitation, sweating, fainting, excessive sweating, vertigo, choking, giddiness, blood mixed vomiting (hematemesis), uncontrolled blood sugar (hypoglycemia or hyperglycemia) or any other symptom.

For All Health Queries Dial 10606 ; Tel: 02-9670210-3,02-58610793-8

Labaid Emergency : 01713333337 ; Labaid Ambulance : 01766663999,01766663990

26.10.22

RMO

REGISTRAR/SMO

CONSULTANT

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