

EVEN HOSPITALS

Race Course Road, Bangalore 560001

ADMISSION SLIP

Patient Name:	Shaik Moin	Age / Sex:	40 / Male
UHID:	UHID-16212	Surgical Specialty:	Internal Medicine Specialist
Admitting Consultant:	Ankit Bhojani		
Date of Admission:	26-Jun-2026 (arrive by 15:00)		
Clinical Indication:	Low Sugar Level.		
Proposed Procedure:	Hypoglycaemia.		
Expected LOS (Days):	2	Admission To:	Ward

CONSENT STATEMENT

I have been explained (in language that I understand) about the diagnosis, need of admission, proposed line of management & possible outcome including risks & complications. I hereby give my consent for admission.

Doctor

Name: Ankit Bhojani

Signature: _____

Date: _____

Time: _____

Patient / Attender

Name: _____

Signature: _____

Relationship: _____

Date / Time: _____