

EVEN HOSPITALS

Race Course Road, Bangalore 560001

ADMISSION SLIP

Patient Name:	Swathi	Age / Sex:	43 / Female
UHID:	316549	Surgical Specialty:	Gynac
Admitting Consultant:	Dr Prerna		
Date of Admission:	12-Jun-2026 (arrive by 07:00)		
Clinical Indication:	Fibroid uterus		
Proposed Procedure:	Total Laproscopic Hysterectomy/ Laparoscopic Salpingectomy- Salphingo Oophorectomy		
Expected LOS (Days):	As per DR	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:	Dr Prerna
Signature:	_____
Date:	_____
Time:	_____

Patient / Attender

Name:	_____
Signature:	_____
Relationship:	_____
Date / Time:	_____