

EVEN HOSPITALS

Race Course Road, Bangalore 560001

ADMISSION SLIP

Patient Name:	Pathan Parveen	Age / Sex:	62 / Female
UHID:	UHID-285538	Surgical Specialty:	Ortho
Admitting Consultant:	Dr. Abrar		
Date of Admission:	18-May-2026 (arrive by 03:00)		
Clinical Indication:	Pain in knee		
Proposed Procedure:	Surgery		
Expected LOS (Days):	4	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. Abrar

Signature: _____

Date: _____

Time: _____

Patient / Attender

Name: _____

Signature: _____

Relationship: _____

Date / Time: _____