

EVEN HOSPITALS

Race Course Road, Bangalore 560001

ADMISSION SLIP

Patient Name:	SHRAVANTHI	Age / Sex:	29 / Female
UHID:	0	Surgical Specialty:	
Admitting Consultant:	DR PRASHANTH NAGARAJ		
Date of Admission:	27-May-2026 (arrive by 21:30)		
Clinical Indication:			
Proposed Procedure:	BUNNIONECTOMY		
Expected LOS (Days):	46024	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 PRASHANTH NAGARAJ
Signature:	_____
Date:	_____
Time:	_____

Patient / Attender

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