

# DR. KHANADE HOSPITAL

732/A LEELEA CHAMBERS, PUNE-SATARA ROAD, PUNE, 411037 Tel 020 2421 2498 Email : drkhanadehospital@gmail.com

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Date:

Kindly admit patient \_\_\_\_\_

Under the care of \_\_\_\_\_

Date of admission: \_\_\_\_\_ Procedure: \_\_\_\_\_

## **Instructions to the patient**

- Please bring all your reports and old files with you
- Stop blood thinners such as (Ecosprin, Clavix, Clopitab, Warfarin). Please consult your doctor if you have any doubts regarding your medication
- Nil by mouth (NBM) from (time)\_\_\_\_\_ (date)\_\_\_\_\_ (NOT EVEN WATER) if admitted for surgery

## **APPROXIMATE ESTIMATE**

**(Please note the estimate might vary due to unexpected circumstances, developments, events either anticipated or unanticipated and does not include additional procedures, tests or any other bills that might occur due to arising clinical situations.)**

<b>Approximate total charges</b>	<b>Advance to be paid</b>	<b>Name of patient or patient's relative</b>
<b>Approximate medicines' charges</b>	<b>Approximate Laboratorys' charges</b>	<b>Signature of patient or patient's relative</b>

The reception desk can provide more information regarding any further questions or comments regarding this policy or call them at +91 20 2421 2498.

**Please bring your Aadhaar card copy and original for verification.**