

CERTIFICATE FOR HOSPITALIZATION

(To be completed in the case of patients who are admitted to hospital for treatment)

Certificate granted to Mrs./Mr./Miss _____ ,
husband /wife /son /daughter /mother /father of Mrs/Mr
_____ employed in the office
of _____,BSNL.

PART `A`

I, Dr. _____ hereby certify:

- (a) that the patient was admitted to hospital on _____.
- (b) that the patient has been under treatment at _____ and that the under mentioned medicines prescribed by me in this connection were essential for the recovery/prevention of serious deterioration in the condition of the patient.
- (c) that the patient is/was suffering from _____ and is/was under treatment from _____ to _____.
- (d) that the X-ray, laboratory tests, etc. for which an expenditure of Rs. _____ was incurred were necessary and were undertaken on my advice at _____ (name of hospital or laboratory);

Signature and Designation of the
Medical Officer In-charge of the

case at the hospital