

CHIP Training and Consulting (Pvt) Ltd
LEAVE APPLICATION FORM-PTPP Project

SECTION 1: APPLICANT'S DETAILS	
Employee Name	Bushra Saadat
Designation	AS
CNIC No.	17301-4787026-8
District/UC	Peshawar
Leave application date	9-2-2024

SECTION 2: DETAILS OF LEAVE	
Reason of Leave Applied for (Tick in appropriate box)	
<input type="checkbox"/> Hajj	<input type="checkbox"/> Umrah/Ziarat
<input type="checkbox"/> Chillah, Tableegh, Ehtikaf	<input type="checkbox"/> Christmas, Diwali
<input type="checkbox"/> Study/Exams	<input checked="" type="checkbox"/> Maternity
<input type="checkbox"/> Family Wedding	<input type="checkbox"/> Self-Wedding
<input type="checkbox"/> Immediate Family Death	<input type="checkbox"/> Self-Sick Leave
<input type="checkbox"/> Immediate Family-Sick Leave	<input type="checkbox"/> Accident/Sickness-while at work
<input type="checkbox"/> Accident/Sickness-while not at work	<input type="checkbox"/> Emergency Leave
<input type="checkbox"/> Vacations	<input type="checkbox"/> Others
Number of Days Leave Applied for <u>45 Days</u>	
Leave start date <u>9-2-2024</u>	Leave end date <u>24-3-2024</u>
OIC Name and designation:	
0313-6282687	
Employee signature: <u>Bushra Saadat</u>	Date: <u>9-2-24</u>
PEO endorsement: _____	Date: _____
PTL endorsement: _____ For more than Two weeks	Date: _____
CTC final approval: _____	Date: _____

CTC Remarks, if any _____

NOTE: Leaves during campaign days are NOT allowed



REHMAN MEDICAL INSTITUTE
S/O-2 Phase 5, Hayatabad, Peshawar, Pakistan
Tel: (92-91) 5830000, Fax: (92-91) 5830333

Admission Slip

Admission ID #
24-02-239434

Patient Name	Bushra, 33y, Female	Admission Type	Regular		
PRN	22-11-100860	Referring Source	OPD		
Nationality	Pakistan	Admitted On	06 Feb, 2024-11:46 AM		
CNIC	17301-4757026-8	Holder CNIC	---		
Phone	+923136282687	Ward	Ward E-General-318-A		
Address	hayatabad phase 5 house no 38 sector C-2 peshawar, Peshawar, Khyber Pakhtunkhwa, Pakistan				
Attendant Name	Wife Of Nadeem Khan	Relationship	Next of Kin	Phone	+923136282687
Payment Type	Panel	Panel Detail	Discounted Economy Packages-GW - Standard		

CLINICAL INFORMATION

Department Gynecology and Obstetrics | Primary Consultant Falza Rahman | Secondary Consultant ---

Packages

1 C-Section

REQUESTED AMOUNT

84,000

UNDERTAKING

- Cost of Treatment: The cost provided in the package is the minimum chargeable amount for the treatment and may exceed in case of additional services required for the treatment. The package covers the exceed in cost up to 10 percent and I hereby agree to clear all dues as per billing rules of RMI.

- I acknowledge that prior approval is required at the time of admission in case of third-party payment. I hereby agree that admissions made on cash shall not be claimed to convert to the third-party payer at a later stage.

میں تسلیم کرتا ہوں کہ انشورنس یا صحت کارڈ پر داخلے کیلئے پیشگی منظوری ضروری ہے۔ بعد میں نقد رقم پر کیا جائے والا علاج / داخلہ صحت کارڈ میں تبدیل نہیں ہو گا۔

- I hereby give my consent to be examined/or undergo diagnostic procedures by the medical officer(s) for the purpose of medical education under the supervision of the consultant.

- I Bushra PRN 22-11-100860 hereby authorize the following to either receive refunds or make outstanding payments on my behalf.

Name Wife Of Nadeem Khan | Relationship Next of Kin

SIGNATURE

Payment Through

CASH

CHEQUE

CREDIT CARD

OTHER

Cash Received By

SIGNATURE

Adil Yousaf

06 Feb, 2024

Date

RM

Fluor-Do Check

Birth Wt. 3600 gram
RBS: 53mg/dl
Good size baby

3250 kg

NURSERY

Newborn Assessment Performa

Advised Admission

but Refused RBS at 5:30pm = 60mg

pr no: 22-11-100860

Date: 06/02/24

Name: D/o Bushra

Room: 304 317

From: phase 5 Hayat abad

RISK FACTOR:

Maternal: Previous c-section

1. Maternal Drug History

Fetal:

Antenatal Steroids give to mother (Yes/ NO) (if yes, than dose and time)

COVID-19 STATUS (RA / PCR)

POSITIVE _____ NEGATIVE: _____ AWAITED _____

PREGNANCY DETAIL: Booked Un-Booked

Gravida: G2 P1

POG: 39+6 week, EDD by Scan: _____ EDD by date: 7/1/24

Mother's Blood Group: A+ve

PREVIOUS PREGNANCY: Normal Complicated Previous on c/s

DELIVERY DETAILS:

Time: 12:05 pm Date: 06/02/24

Mode of delivery: c/s

Indication of c-section

APGAR score at 1 minute: A P G A R 7/10

at 5 minutes: A P G A R 10/10

Any resuscitation required: Suction: Stimulation: Ambu

bagging: CPR: IV Adrenaline: Intubation:

Attending Doctor: Wahab Attending Staff: Hussain Bano

Obstetric Consultant: Dr. Farah Rehman

Follow up visit on 09/02/2024 with Prof Dr Anwar Zeb Jn Clinic #30. Do the following tests: HbO Blood Group, TSH, SBR