Indian Institute of Technology Kanpur

**CERTIFICATE - A** 

P.F. No./ Roll No.: Tel.: Bank Name: Account No.:

hereby certify

at my

Certificate granted to Shri/Smt./Kumari

(indicate relation)

I, Dr.

of Shri/ Dr.

consultations on

(Rupees

1. That I charged and received Rs. only) for

consulting room at the residence of the patient after hospital hours.

2. That the patient has been under treatment at

hospital/ my consulting room and the under mentioned medicines by me in this connection were essential for the recovery/ prevention of serious deterioration in the condition of the patient. These medicines were not stock in the I.I.T.Kanpur hospital for supply to private patient and do not include proprietary preparation for which cheaper substance / substances of equal therapeutic value are available nor preparation which are primarily foods, toilets and disinfectants.

## NAME OF MEDICINES

S. No.	Name	Qty.	Amount	R or NR*	S. No.	Name	Qty.	Amount	R or NR*
				-			,		-
								L	

R = Reimbursable, NR = Non-Reimbursable\*

3.	That the patient is/was suffering from		and is/was under my
	treatment from	to	
4.	That the X-ray, Laboratory Test etc. da	ated	for which expenditure of
	Rs. N	was incurred were nec	essary and were undertaken on my advice,
	due to their non availability of Health C	centre.	
5.	That I referred the patient to the		hospital which is the nearest
	entitled Hospital from the place where	the patient fell ill which	n in my option could provide the necessary

	entitied hospital from the place where the patient feir	in which in my option could provide the necessary
	and suitable treatment.	
6.	That is referred the patient to Dr.	Specialist M. O. in
	Government employment in the	for Specialist consultation.

Government	employment i	in the

Date

Signature and Designation of the
Medical Adviser/ Medical Officer

(For Use in the Accounts Section)

S. No. (a) Total Amount of Claim Passed (b) Less advance drawn, if any (c) Net amount payable/ recoverable	Date (Rs.) (Rs.) (Rs.)
Checked By:	Claim Prepared By:

Please Pay Rs.

(Rupees

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