

**Supplementary file:**

Bangladesh Medical University Referral Notes format



# Bangladesh Medical University

**BMU Hospital, Shahbagh, Dhaka-1000, Bangladesh**

## REFERRAL NOTES

**Bed :**

Ward :

Unit :

**Block :**

**Level :**

PRN : ..... Name : ..... Age : ..... Sex : .....

Referred to Prof / Dr : .....

**Nature of Referral :**      ☐ Urgent (within one hr),      ☐ Routine (within 24 hr)

**Clinical information:** (History, Physical, Lab, Imaging etc.) :

Reason for referral : .....

Resident

Date :

Time :

MR-5

Referring consultant

(Name with signature)

## Referral Reply

Time :

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.....  
 Attending consultant  
 Full name and designation