Sir H. N.
Reliance
Foundation Hospital
And Research Centre
RESPECT FOR LIFE

Raja Rammohan Roy Road,
Prarthana Samaj, Girgaon,
Mumbai - 400004
Toll Free No.: 1-800-221-166
Website: www.rfhospital.org

REQUEST FOR CHANGE IN BED CLASS - UPGRADATION

Patient ID: ☐☐☐☐☐☐☐☐☐☐

Patient Name: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
First Name Middle Name

☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
Last Name

Admitting Doctor: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Date of Admission: ☐☐ - ☐☐ - ☐☐☐☐
DD MM YYYY

Current Bed No: ☐☐☐☐ Current Bed Class: _____

Current Bill amount: _____ Paid amount: _____

Request for Bed Class: _____

Kindly Note: Up gradation will be effective from the date of admission.

Patient/Legally Authorized Representative Sign:	Date: ☐☐ - ☐☐ - ☐☐☐☐ (DD MM YYYY)	Time: ☐☐ : ☐☐ AM/PM (HH MM)
Name of Legally Authorized Representative:	Relationship with Patient:	
Name of Patient Experience Executive:	Patient Experience Executive Sign:	
Name of Approver:	Approver Sign:	
Effective From:	Date: ☐☐ - ☐☐ - ☐☐☐☐ (DD MM YYYY)	Time: ☐☐ : ☐☐ AM/PM (HH MM)