

**United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA)
Hospital Information Sheet**

Dear Director,

Thank you for filling the below table that gathers general information about your hospital and the services provided.

1	Name of the Hospital	
2	Name of the Hospital Director	
3	Hospital Telephone Numbers	
4	Hospital Fax Number	
5	Hospital Email Address	
6	Total Number of Beds	
7	Total Number of Staff	
8	Number of Beds in Medical Ward	
9	Number of Beds in Surgical Ward	
10	Number of Beds in Pediatric Ward	
11	Number of Beds in Obstetric Ward	
12	Number of Beds in Intensive Care Unit (ICU) + # of respirators	
13	Number of Beds in Coronary Care Unit (CCU) + # of respirators	
14	Number of Beds in Intensive Care for the Neonates (ICN) + # of respirators	
15	Number of Operating Rooms	
16	Check the services available in the Hospital Laboratory Department	<input type="checkbox"/> Hematology <input type="checkbox"/> Chemistry <input type="checkbox"/> Parasitology <input type="checkbox"/> Bacteriology <input type="checkbox"/> Serology <input type="checkbox"/> Hormones <input type="checkbox"/> Others: -----
17	Check the services available in the Hospital Radiology Department	<input type="checkbox"/> Routine XRay <input type="checkbox"/> Ultrasound <input type="checkbox"/> Mammography <input type="checkbox"/> EchoDoppler <input type="checkbox"/> Intravenous Pyelogram <input type="checkbox"/> Upper GI <input type="checkbox"/> CT Scan <input type="checkbox"/> MRI <input type="checkbox"/> Others -----
18	Other Diagnostic Tests	<input type="checkbox"/> Endoscopies <input type="checkbox"/> EEG <input type="checkbox"/> Echocardiography <input type="checkbox"/> Others: -----
19	List Other Services provided (such as Radiotherapy, Heart surgeries, Joint Replacement surgeries, Cardiac Cath etc)	

Thank you for your time