

Recd
11.02.19

DEPARTMENT OF HEALTH AND FAMILY WELFARE
GOVERNMENT OF WEST BENGAL
BED HEAD TICKET

260

Dr. A. Sinha

Patient's Name : PRABHAS SAMANTA Sex : M Age : 40 Yrs. Months Days

Patient Srl. No. : 7346 Admission Date : 16/2 Admission Time : 10-40 P.M. Patient Category : PAYING/CABIN/GENERAL

Registration No. : Ward : SS H (M) Bed No. : 260 Patient Type : OPD/ER

Address : Jagatpur Municipality / Village : Jagatpur Post Office : Balidewangan PIN : District : Hooghly Religion : State : West Bengal Nationality :

Address for Communication : Marital Status : Patient's Occupation : Husband's Name : LT, Bala Samanta

Father's Name : Brought By : Sona Samanta Phone / Mobile No. : 9867813277

Doctor/UNIT : Whether Referred From : Provisional Diagnosis : C-V.A.

Signature of Admitting Officer
Designation
16/2/19

IPC Serial No. : Diary No. :

Specify if it is a cause of accident/ Suicide/Homicide	How injury Occurred	Specify the place of injury Home/Farm Factory / Street / Others	Whether injury occurred while at work Specify by Yes / No.
	স্বপ্নে ঘুমের মধ্যে সড়ক দুর্ঘটনা সড়ক দুর্ঘটনা (সড়ক দুর্ঘটনা) Brother (17/2/19)	at 10.50 AM	

(To be filled in BLOCK LETTERS at the end of Hospital Stay)

- (a) Outcome : Discharged/Left Against Medical Advice / Absconded / Referred out / Death :
- (b) Final Diagnosis or Injury
- (c) Principal Complications
- (d) Principal Associated Diseases

Stay in Hospital (in days) From to
Date and Hour of Death at Hrs

Signature of the Doctor with Designation