

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

Uluberia S.D. Hospital
Vill. + P.O. + P.S. - Uluberia, P.S., Dist. - Howrah

Printed By:

Patient's Name : SWAPAN DOLUI Sex : Male Age : 58 Yrs. Months Days

Patient Srl. No. : PA19037510 Admission Date : 27-Jun-2019 Admission Time : 12:07 Patient Category : PAYING/CABIN/GENERAL

Registration No. : RG19128945 Charge Coll. No. : [WRD0000013] Bed No. : [FREE] Patient Type : OPD/ER

Address : [WRD0000013] DIALYSIS UNIT Post Office : DO PIN : 711001

Municipality / Village : KHARIOP District : Howrah

Police Station : Amta P. S. Nationality : Indian Religion : Hindu

State : West Bengal Address for Communication : West Bengal

Marital Status : Single Patient's Occupation :

Father's Name : LT BASUBED DOLUI Husband's Name :

Brought By : SEFALI DOLUI Phone / Mobile No. :

Doctor/UNIT : [DDC0000062] DR. MANABENDRA ROY

Whether Referred From : Provisional Diagnosis :

(Handwritten Signature)

(Handwritten Signature)
Signature of Admitting Officer
Designation

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.

(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

Counter Signature of the Visiting Staff / Medical Officer
Regn. No. :

Signature of the Doctor with Designation
Regn. No. :

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