

**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 : REBA BHOWMICK Sex : Female Age : 47 Yrs. Months 0 Days 0

Patient-Srl. No. : PA19037676 Admission Date : 30-Jun-2019 Admission Time : 12:12 Patient Category : PAYING/CABIN/GENERAL

Registration No. :

Ward :

Address : RG1R129339 Charge Cell. No. :

Municipality / Village : [WRD0000013] DIALYSIS UNIT Post Office : [Free] PIN :

Police Station :

State : RAM CH PUR District : SAJNA GACHI

Address for Communication : Kalgahat P. S. Nationality : Indian Religion : Midnapore (E)

Marital Status :

Father's Name : Married Patient's Occupation :

Brought By :

Doctor/UNIT : DD Husband's Name :

Whether Referred From : [DDC0000114] DR. BISWAJIT CHEL Phone / Mobile No. : BIMALENDU BHOWMICK

Provisional Diagnosis : *Dialysis*

[Signature]
Signature of Admitting Officer
Designation

IPC Serial 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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