

**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: IP

Patient's Name :	SK RASID	Sex :	Male	Age :	Yrs.	Months	Days
Patient Srl. No. :	PA19037372	Admission Date :	28-Jun-2019	Admission Time :	17:24	Patient Category : PAYING/CABIN/GENERAL	
Registration No. :	RG19128289	Charge Coll. No. :		Bed No. :	[Free]	Patient Type : OPD/ER	
Ward :	[WRD0000013] DIALYSIS UNIT						
Address							
Municipality / Village :	SINGHAMARA	Post Office :	DELTAMIL	PIN :			
Police Station :	Sankrail P. S.	District :	Howrah				
State :	West Bengal	Nationality :	Indian	Religion :	Muslim		
Address for Communication :							
Marital Status :	Single	Patient's Occupation :					
Father's Name :	LT SOLEMAN SK	Husband's Name :					
Brought By :	SELF	Phone / Mobile No. :					
Doctor/UNIT :	[DOC0000011] Dr. ALOKE KR. MUKUTI						
Whether Referred From :							
Provisional Diagnosis :							

CKD

[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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