

**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 : DABLU BAR Sex : Male Age : 36 Yrs. 0 Months 0 Days
 Patient's Sr. No. : PA19039305 Admission Date : 08-Jul-2019 Admission Time : 13:32 Patient Category : PAYING/CABIN/GENERAL

Registration No. : RG19135941 Charge Coll. No. : [Free] Bed No. : [Free] Patient Type : OPD/ER
 Ward : [WRD0000013] DIALYSIS UNIT

Address : SONAMUI Post Office : DO PIN :
 Municipality / Village : Amta P. S. District : Howrah
 Police Station : West Bengal Indian Religion : Hindu
 State : West Bengal Nationality : Indian

Address for Communication : Single Patient's Occupation :
 Marital Status : LT PANU BAR Husband's Name :
 Father's Name : SELF Phone / Mobile No. :
 Brought By : [DOC0000085] DR. RAJAT KANTI GOSWAMI

Doctor/UNIT :
 Whether Referred From :
 Provisional Diagnosis : AID

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
 Regn. No. : _____

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