

**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:IPD

Patient's Name : AMINA BEGAN Sex : Female Age : Yrs Months Days

Patient Srl. No. : PA17039400 Admission Date : 00-Jul-2019 Admission Time : 18:29 Patient Category : PAYING/CABIN/GENERAL

Registration No. : Ward : RG19136059 Charge Coll. No. : Bed No. : Patient Type : OPD/ER

Address : [WRD0000013] DIALYSIS UNIT [Free] PIN :

Municipality / Village : Post Office :

Police Station : BAINAN District : DD

State : Bagnan P. S. West Bengal Nationality : Indian Religion : Howrah Muslim

Address for Communication :

Marital Status : Married Patient's Occupation :

Father's Name : Brought By : DD Husband's Name : Phone / Mobile No. : HATIM ALI MOLLAH

Doctor/UNIT : Whether Referred From : [DDC0000085] DR. RAJAT KANTI GOSWAMI

Provisional Diagnosis :

D

*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. :