

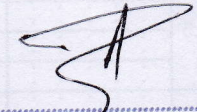
**DEPARTMENT OF HEALTH AND FAMILY WELFARE  
GOVERNMENT OF WEST BENGAL  
BED HEAD TICKET**

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

Printed By: I

SV BOLAM MUSTAFA Male  
 Patient's Name : Sex : Male Age : 51 0 Months 0 Day  
 Patient Srl. No. : PA19040030 Admission Date : 11 Jul 2017 Admission Time : 18:49 Patient Category : PAYING/CABIN/GENERAL  
 Registration No. : RG19139013 Charge Coll. No. : [WRD0000013] DIALYSIS UNIT Bed No. : [Free] Patient Type : OPD/ER  
 Ward : Address : DURGAPUR Municipality / Village : Jaypur P. S. Post Office : KANKROL  
 Police Station : West Bengal District : Howrah PIN :  
 State : West Bengal Nationality : Indian Religion : Muslim  
 Address for Communication :  
 Marital Status : Single Patient's Occupation :  
 Father's Name : LT RABIUDDIN Husband's Name :  
 Brought By : AKSAR ALI Phone / Mobile No. :  
 [DOC00000062] DR. MANABENDRA ROY  
 Doctor/UNIT :  
 Whether Referred From :  
 Provisional Diagnosis :



  
 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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