

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

Uluberia S.D. Hospital

Patient's Name : Vill.+P.O.+P.S. - Uluberia , P.S. , Dist.- Howrah Sex: Age: Yrs. Months Days

Patient Srl. No. : AMINA BEGAM Admission Date: Admission Time: Female Patient Category: PATING/CABIN/GENERAL

Registration No. : PA19036993 27-Jun-2019 07:16
Ward : Bed No. : Patient Type : OPD/ER

Address : Municipality / Village : RG19126760 Charge Coll. No.: Post Office : PIN :
[WRD0000013] DIALYSIS UNIT [Free]

Police Station : State : BAINAN Nationality : Religion :
Bagnan P. S. Indian DD
West Bengal Muslim

Address for Communication : Marital Status : Patient's Occupation :
Bagnan P. S. Indian Husband's Name :
West Bengal Muslim

Father's Name : Brought By : Married Phone / Mobile No. :

Doctor/UNIT : MOKTARI BEGAM HATEM ALI
Whether Referred From : 0

Provisional Diagnosis : [DDC0000011] Dr. ALOKE KR. MUKUTI

DIALYSIS

[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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