

**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 ARIFUL Sex : Male Age : Yrs. Months Days

Patient Srl. No. : PA19037030 Admission Date : 27-Jun-2019 Admission Time : 10:40 Patient Category : PAYING/CABIN/GENERAL

Registration No. : RG19126964 Charge Coll. No. :
Ward : [WRD0000013] DIALYSIS UNIT Bed No. : [Free] Patient Type : OPD/ER

Address : KHADINAN Municipality / Village :
Post Office : DO
Police Station : Bagnan P. S. District : Howrah PIN :
State : West Bengal Nationality : Indian Religion : Muslim

Address for Communication :

Marital Status : Single Patient's Occupation :
Father's Name : SK RAJU Husband's Name :
Brought By : SK RIJABUL Phone / Mobile No. :

Doctor/UNIT : [DDC0000062] DR. MANABENDRA ROY

Whether Referred From :

Provisional Diagnosis :

Dialysis

[Signature]
27/6/19
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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