

**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: []

SHIKHA KOLOY

Female

44

Patient's Name : Sex : Age : Yrs. Months Days

Patient Srl. No. : PA19041548 Admission Date : 19-Jul-2019 Admission Time : 06:55 Patient Category : PAYING/CABIN/GENERAL

Registration No. : RG19145221 Charge Coll. No. : Bed No. : [Free] Patient Type : OPD/ER

Ward : [WRD0000013] DIALYSIS UNIT

Address : Municipality / Village : NASKORPUR Post Office : DO PIN :

Police Station : Jagatballavpur P. S. District : Howrah

State : West Bengal Nationality : Indian Religion : Hindu

Address for Communication :

Marital Status : Married Patient's Occupation :

Father's Name : PAPA KOLOY Husband's Name : SUSANTA KOLOY

Brought By : PAPA KOLOY Phone / Mobile No. : 0

Doctor/UNIT : [DDC0000062] DR. MANABENDRA ROY

Whether Referred From :

Provisional Diagnosis : **DIALYSIS**

Signature of Admitting Officer
Designation

IPC Serial No. : Story 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) Fnal 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. :