

**DEPARTMENT OF HEALTH AND FAMILY WELFARE  
GOVERNMENT OF WEST BENGAL**

**BED HEAD TICKET**

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

Printed By:IP

AMINA BEGAM

Female

35

0

0

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

Patient Srl. No. : PA19040853 Admission Date : 15-Jul-2019 Admission Time : 18:12 Patient Category : PAYING/CABIN/GENERAL

Registration No. : RG19142129 Charge Coll. No. : [Free] Patient Type : OPD/ER

Ward : [WRD0000013] DIALYSIS UNIT Bed No. :

Address : BAINAN Post Office : DD

Municipality / Village : Bagnan P. S. Post Office : Howrah PIN :

Police Station : West Bengal Indian District : Muslim

State : Nationality : Religion :

Address for Communication : Married

Marital Status : Patient's Occupation : HATEM ALI MOLLAH

Father's Name : NUKTARI BEGAM Husband's Name :

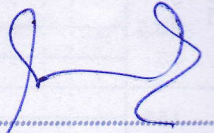
Brought By : Phone / Mobile No. :

[DDC0000085] DR. RAJAT KANTI GOSWAMI

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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