

**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:IPB

Patient's Name : REBA BHOWMICK Sex : Female Age : Yrs7 Months Days

Patient Srl. No. : PA19041071 Admission Date : 16-Jul-2019 Admission Time : 18:23 Patient Category : PAYING/CABIN/GENERAL

Registration No. : Ward : RG19143197 Charge Coll. No. : Bed No. : Patient Type : OPD/ER

Address : [WRD000003] DIALYSIS UNIT [Free] PIN :

Municipality / Village : Post Office : District : SAJNEBACHI

Police Station : RANCHANDRAPUR Religion : Midnapore (E)

State : Kolaghat P. S. Nationality : Indian Religion : Hindu


Address for Communication : West Bengal Indian Hindu

Marital Status : Married Patient's Occupation :

Father's Name : Brought By : DO Husband's Name : Phone / Mobile No. : DIMALENDU BHOWMICK

Doctor/UNIT : Whether Referred From : [DOC0000130] DR. MRINAL BAYADA

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. :