

**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: 1

Patient's Name : ALDKE MARIK Sex : Male Age : 50 Yrs. 0 Months 0 Days

Patient Srl. No. : PA19039352 Admission Date : 08-Jul-2019 Admission Time : 13:30 Patient Category : PAYING/CABIN/GENERAL

Registration No. : RG19135938 Charge Coll. No. : [Free]

Ward : [WRD0000013] DIALYSIS UNIT Bed No. : _____ Patient Type : OPD/ER

Address : BANITALA DU

Municipality / Village : Uluberia P. S. Post Office : Howrah PIN : _____

Police Station : West Bengal Indian District : Hindu

State : _____ Nationality : _____ Religion : _____

Address for Communication : _____

Marital Status : Single Patient's Occupation : _____


Father's Name : LT DULAL CH MARIK Husband's Name : _____

Brought By : ARIJIT MARIK Phone / Mobile No. : _____

Doctor/UNIT : _____

Whether Referred From : _____

Provisional Diagnosis : AA / D


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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