

**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


Patient's Name : ANISHA KHATUN BEGAM Sex : Female Age : 25 Yrs 0 Months

Patient Srl. No. : PA19042307 Admission Date : 22-Jul-2019 Admission Time : 16:55 Patient Category : PAYING/CABIN/GEN

Registration No. : Ward : RG19148384 Charge Coll. No. : Bed No. : Patient Type : OPD/ER  
Address : [WRD0000013] DIALYSIS UNIT Post Office : [Free] PIN :  
Municipality / Village : Police Station : MANIKPUR District : KULGACHIA  
State : Uluberia P. S. Nationality : Indian Religion : Howrah  
Address for Communication : West Bengal Muslim

Marital Status : Patient's Occupation :  
Father's Name : Married Husband's Name :  
Brought By : ALEYA BEGAM Phone / Mobile No. : SK SABIR 0  
Doctor/UNIT :  
Whether Referred From : [DOC0000085] DR. RAJAT KANTI GASMAMI  
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. :