

**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: IP

Patient's Name : JOYSTNA PATRA Sex : Female Age : Yrs@ Months Days

Patient Srl. No. : Admission Date : Admission Time : Patient Category : PAYING/CABIN/GENER
PA19040244 12-Jul-2019 18:00

Registration No. : Ward : RG19139863 Charge Coll. No. : Bed No. : Patient Type : OPD/ER

Address : [WRD0000013] DIALYSIS UNIT [Free]

Municipality / Village : Post Office : PIN :

Police Station : MECHADA District : BARNAN

State : Kolaghat P. S. West Bengal Nationality : Indian Religion : Midnapore (E) Hindu

Address for Communication : West Bengal Indian Hindu

Marital Status : Widowed Patient's Occupation :

Father's Name : GUNADHAR PATRA Husband's Name :

Brought By : Phone / Mobile No. : LT KALIPAD PATRA 0

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. :

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