

**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: IF

Patient's Name : RENUKA MONDAL Sex : Female Age : Yrs 5 Months Day

Patient Srl. No. : Admission Date : Admission Time : Patient Category : PAYING/CABIN/GENER

PA19040304 13-Jul-2019 07:07

Registration No. :

Ward : -RB19139923 Charge Coll. No. : Bed No. : Patient Type : OPD/ER

Address : [WRD0000013] DIALYSIS UNIT Post Office : [Free] PIN :

Municipality / Village : Post Office :

Police Station : RUDRAPUR District : DO

State : Domejur P. S. Nationality : Indian Religion : Howrah

Address for Communication : West Bengal Indian Hindu

Marital Status : Patient's Occupation :

Father's Name : Married Husband's Name :

Brought By : RIMPA MONDAL Phone / Mobile No. : LAKSHMAN MONDAL

Doctor/UNIT :

Whether Referred From : [DDC0000085] DR. RAJAT KANTI GASMAMI

Provisional Diagnosis :

DIALYSIS


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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