

**DEPARTMENT OF HEALTH AND FAMILY WELFARE**  
**GOVERNMENT OF WEST BENGAL**  
**BED HEAD TICKET**

Rampurhat Govt. Medical College & Hospital  
 RAMPURHAT  
 (PH.O)

User Name : ipd

**LAL MD KHAN**  
 Sex : Male Age : 60 Yrs. 0 Months 0 Days  
**Admission Date :** [ 01-07-2019] **Admission Time :** [ 7:02 AM] **Patient Category :** PAYING/CABIN/GENERAL  
 RSHH/PA1900050452 Free

**No.:** RSHH/RC1900114935 **Bed No.** **Patient Type :** OPD/ER  
 : MMW Emergency

**Municipality / Village :** KALHAPUR **Post Office :** DO **PIN :** 000000  
**Police Station :** Paikar PS **District :** Birbhum  
**State :** West Bengal **Nationality :** India **Religion :** Muslim  
**Address for Communication :**

**Marital Status :** Married **Patient's Occupation :**  
**Father's Name :** LT TUJIRUDDIN KHAN **Husband's Name :**  
**Brought By :** SON **Phone / Mobile No. :** 0000000000

**Doctor/UNIT :** / Dr. ANANDA MONDAL  
**Whether Referred From :**  
**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 ..... 07/01/2019  
 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.