

PLEASE SHOW YOUR PHOTO ID AT THE TIME OF ADMISSION"

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

Rampurhat Govt. Medical College & Hospital
RAMPURHAT
(PH:0)

User Name : ipd

Patient's Name : ABDUL JABBER Sex : Male Age : 32 Yrs. 0Months 0Days

Patient Srl. No. : RHSH/PA1900057719 Admission Date : [24-07-2019] Admission Time : [7:09 AM] Patient Category : PAYING/CABIN/GENERAL
Free

Registration No.: RHSH/RG1900143006
Ward. : MMW

Bed No. Patient Type : Emergency OPD/ER

Address
Municipality / Village : SALBADRA Post Office : TARACHUA PIN : 000000
Police Station : Rampurhat District : Birbhum
State : West Bengal Nationality : India Religion : Muslim

Address for Communication :

Marital Status : Single Patient's Occupation :
Father's Name : ASCAR MIYA Husband's Name :
Brought By : WIFE Phone / Mobile No. : 0000000000

Doctor/UNIT : UNIT-II A(MEDICINE) / Dr.S.CHAKRABORTY/Dr.BANKU DUTTA

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

1 of 4
Stay in Hospital (in days) From to 07/24/2019 07:13
Date and Hour of Death at Hrs