

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

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

User Name : ip

Patient's Name : ARDHENDU BIKASH ROY **Sex :** Male **Age :** 65 Yrs. 0 Months 0 Days

Patient Srl. No. : RSHH/PA1900056116 **Admission Date :** [19-07-2019] **Admission Time :** [1:55 PM] **Patient Category :** PAYING/CABIN/GENERAL Free

Registration No. : RSHH/RG1900138109

Ward. : MMW

Bed No.

Patient Type : OPD/ER

Address

Municipality / Village : NISCHINTAPUR

Post Office :

PIN :

Police Station : Rampurhat

District : RAMPURHAT

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State : West Bengal

Nationality : India

Religion : Birbhum

Religion : Hindu

Address for Communication :

Marital Status :

Single

Patient's Occupation :

Father's Name :

LT AMARANDA NATH ROY

Husband's Name :

Brought By :

SON

Phone / Mobile No. : 0000000000

Doctor/UNIT :

UNIT-IC(MEDICINE) / Dr.SAMIR KR SINGA/Dr.SANJIB SIMLANDI

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 07/19/2019 01:

Date and Hour of Death at Hrs

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Counter Signature of the Visiting Staff / Medical Officer
Regn. No.

.....
Signature of the Doctor with Designation
Regn. No.