

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

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

User Name : ipd1

Patient's Name : JAHAR BHATTACHARYA Sex : Male Age : 59 Yrs. 0 Months 0 Days

Patient Sri. No. : Admission Date : [29-06-2019] Admission Time : [5:50 PM] Patient Category : PAYING/CABIN/GENERAL Free

Registration No. : RSHH/RG1900114506 Bed No. Patient Type : OPD/ER
 ID : MMW Emergency

Address : Municipality / Village : KALITHA Post Office : DO PIN : 000000
 Police Station : Nalhati District : Birbhum
 State : West Bengal Nationality : India Religion : Hindu
 Address for Communication :

Marital Status : Single Patient's Occupation :
 Father's Name : LT MOTILAL BHATTACHARYA Husband's Name :
 Brought By : SON Phone / Mobile No. : 0000000000

Attending Doctor/UNIT : / Dr. ANANDA MONDAL
 Whether Referred From :
 Provisional Diagnosis :

.....
 Signature of Admitting Officer
 Designation

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)

Outcome : Discharged/Left Against Medical Advice / Absconded / Referred out / Death

Final Diagnosis or Injury

Principal Complications

Principal Associated Diseases

Stay in Hospital (In days) From to 06/29/2019 05:56 PM

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.