

DEPARTMENT OF HEALTH AND FAMILY WELFARE
GOVERNMENT OF WEST BENGAL
BED HEAD TICKET
 Rampurhat Govt. Medical College & Hospital
 RAMPURHAT
 (PH:0)

User No

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

Patient Sri. No. : RSHH/PA1900043524 Admission Date : [08-06-2019] Admission Time : [5:05 PM] Patient Category : PAYING/CABIN/GENERAL Free

Registration No. : RSHH/RG1900093318 Ward. : MMW Bed No. Patient Type : OPD/IN

Address :
 Municipality / Village : KOLITHA Post Office : DO PIN : 000
 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 BHATTACHARJEE Husband's Name :
 Brought By : WIFE 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) ^{1 of 4}

From to 06/08/2

Date and Hour of Death

at Hrs

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

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