

**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 : ABUL KALAM Sex : Male Age : 56 Yrs. 0 Months 0 Days

Patient Srl. No. : RSHH/PA1900051823 Admission Date : [ 05-07-2019] Admission Time : [ 3:34 PM] Patient Category : PAYING/CABIN/GENERAL Free

Registration No. : RSHH/RG1900121400 Ward. : MMW Bed No. Patient Type : OPD/ER Emergency

Municipality / Village : BABUPUR Post Office : G/PRASAD PIN : 000000  
 Police Station : Raghunathganj District : Murshidabad  
 State : West Bengal Nationality : India Religion : Muslim

Address for Communication :

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

Doctor/UNIT : / Dr.SAMIR KR SINGA

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 07/05/2019 03:.....

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.