

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 : ROBIN MAJUMDER      Sex : Male      Age : 65 Yrs. 0 Months 0 Days

Patient Srl. No. : RSHH/PA1900050945      Admission Date : [ 02-07-2019 ]      Admission Time : [ 6:39 PM ]      Patient Category : PAYING/CABIN/GENERAL Free

Registration No. : RSHH/RG1900117601      Bed No.      Patient Type : ~~OPD~~ Emergency

Ward : MMW

Address : Municipality / Village : KURUMGRAM      Post Office : DO      PIN : 000000

Police Station : Nalhati      District : Birbhum      Religion : Hindu

State : West Bengal      Nationality : India

Address for Communication :

Marital Status : Single      Patient's Occupation :  
 Father's Name : LT BHAGABATI CHARAN MAJUMDER      Husband's Name :  
 Bought By : SON      Phone / Mobile No. 0000000000

Doctor/UNIT : / Dr.BANKU DUTTA

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 .....

1 of 4  
 Hospital (in days) .....

From ..... to 07/02/2019 06:45 PM

End Hour of Death .....  
 at ..... Hrs .....

Signature of the Visiting Staff / Medical Officer

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