

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

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

User Name

Patient's Name : SR. KANIKA MAL Sex : Female Age : 45 Yrs. 0 Months 0 Days

Patient Srl. No. : Admission Date : Admission Time : Patient Category : PAYING/CABIN/GENERAL  
RHSB/PA1900056379 [ 20-07-2019] [ 9:33 AM] Free

Registration No. : RHSB/RG1900138650 Bed No. Patient Type : OPD/ER  
Ward. : FMW Emergency

Address  
Municipality / Village : DHARAMPUR Post Office : PIN : 900000  
Police Station : Nalhati District : Birbhum  
State : West Bengal Nationality : India Religion : Hindu  
Address for Communication :

Marital Status : Married Patient's Occupation :  
Father's Name : Brought By : SON Husband's Name : BAIDONATH MAL  
Phone / Mobile No. : 0000000000

Doctor/UNIT : / Dr. GAUTAM GHOSH  
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 ..... 07/20/2019

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.