

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

Rampurhat Govt. Medical College & Hospital  
RAMPURHAT  
(P.H.O.)

User Name

Patient's Name : MR. KABIR ANSARI Sex : Male Age : 64 Yrs. Months 0 Days 0

Patient Srl. No. : RSH/PA1900056393 Admission Date : [ 20-07-2019 ] Admission Time : [ 9:58 AM ] Patient Category : PAYING/CABIN/GENERAL Free

Registration No. : RSH/RG1900138857 Bed No. Patient Type : OPD/ER Emergency  
Ward : MMW

Municipality / Village : PINALGORIA Post Office :  
Police Station : SHIKARI PARA District : DO  
State : Jharkhand Religion : Dumka Muslim PIN : 000000  
Address for Communication : Nationality : India

Marital Status : Single Patient's Occupation :  
Father's Name : DILJAN MIA Husband's Name :  
Brought By : WIFE Phone / Mobile No. : 0000000000

Doctor/UNIT : / Dr GAUTAM GHOSH  
Whether Referred From :  
Provisional Diagnosis :

IPC Serial No. : Diary No. : Signature of Admitting Officer Designation

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 10:02  
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.