

DEPARTMENT OF HEALTH AND FAMILY WELFARE
GOVERNMENT OF WEST BENGAL

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

User Name : ip

Patient's Name : X MD EMTIAZ ALI Sex : Male Age : 35 Yrs. 0 Months 0 Days

Patient Srl. No. : RSHH/PA1900054092 Admission Date : [13-07-2019] Admission Time : [12:31 PM] Patient Category : PAYING/CABIN/GENERAL Free

Registration No. : RSHH/RG1900130627
Ward : MMW

Address : _____ Bed No. _____ Patient Type : OPD/ERgency

Municipality / Village : PAKUR Post Office : DO PIN : 000000
Police Station : PAKUR District : Pakur
State : Jharkhand Nationality : India Religion : Muslim

Address for Communication :

Marital Status : Single Patient's Occupation :
Father's Name : ALI ANSARI Husband's Name :
Brought By : WIFE 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 07/13/2019 12:3

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.