

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

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

User Name : ipd

Patient's Name : JAHAR BHATTACHARYA Sex : Male Age : 62 Yrs. 0 Months 0 Days

Patient Sri. No. : Admission Date : Admission Time : Patient Category : PAYING/CABIN/GENERAL  
RHS/PA1900056581 [ 20-07-2019 ] [ 7:32 PM ] Free

Registration No. : RHS/RG1900139601 Bed No. Patient Type : OPD/ERgency  
D. : MMW

Address : Municipality / Village : KALITHA Post Office : DO PIN : 000000  
Police Station : Nalhati District : Birbhum  
State : West Bengal Nationality : India Religion : Hindu  
Address for Communication :

Marital Status : Single Patient's Occupation :  
Father's Name : MOTILAL BHATTACHARYA Husband's Name :  
Admitted By : DO Phone / Mobile No. 0000000000

Attending Doctor/UNIT : UNIT-IIC(MEDICINE) / Dr.ANANDA MONDAL/Dr.RAMESH CHAKRABORTY/Dr.ASARUL ALI  
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 .....

Admitted in Hospital (in days) ..... From ..... to ..... 07/20/2019 07:36 PM

Time and Hour of Death ..... at ..... Hrs .....

Signature of the Visiting Staff / Medical Officer  
No.

Signature of the Doctor with Designation  
Regn. No.