

**DEPARTMENT OF HEALTH AND FAMILY WELFARE
GOVERNMENT OF WEST BENGAL**

Rd at 1Pm

F9 ↓ 46115

PLEASE SHOW YOUR PHOTO ID AT THE TIME OF ADMISSION
BED HEAD TICKET
Medical College and Hospital, Kolkata
88, College Street, Kolkata-700073
(PH:0)

User Name : PRATIK SAHA

Name: KALPANA SARKAR Sex: Female Age: 57 Yrs: 0 Months: 0 Days: 0

Sri. No.: MCHK/PA1900047575 Admission Date: [29-06-2019] Admission Time: [12:29 PM] Patient Category: ^{Free} PAYING/CABIN/GENERAL

Registration No.: MCHK/RG1900547782 Bed No.: Patient Type: ^{Emergency} OPD/ER

Ward: MCH 1ST FLOOR FEMALE

Address: Post Office: BEADON ST. PIN: 700006

Municipality / Village: 5, DAYAL MITRA LANE District: Kolkata

Police Station: Girish Park Religion: Hindu

State: West Bengal Nationality: India

Address for Communication: Patient's Occupation: Husband's Name: AJIT SARKAR

Marital Status: Married Phone / Mobile No.: 9836130144

Father's Name: RAM KUMAR MISHRA

Brought By: Doctor/UNIT: UNIT 6 (GENERAL MEDICINE) / PROF.T.J.SAU/Dr. K. Basu

Whether Referred From: Provisional Diagnosis: *Signature of Admitting Officer* *Medical College Hospital* *Kolkata* *29/06/19*

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
 1 of 4 at Hrs 06/29/2019 12:42 PM
 Date and Hour of Death

Counter Signature of the Visiting Staff / Medical Officer Signature of the Doctor with Designation
 Regn. No. Regn. No.