

DEPARTMENT OF HEALTH AND FAMILY WELFARE  
GOVERNMENT OF WEST BENGAL

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

*Rd at 11.20 PM*  
User Name : ARNAB DUTTA

Name: SUBAL DEY Sex: Male Age: 65 Yrs. 0 Months 0 Days  
Patient Category: PAYING/CABIN/GENERAL  
MCHK/PA1000046827 [26.06.2019] [10.36 PM] Free  
Admission Time: Patient Type: OPD/ER  
Registration No.: MCHK/RG1900537211 Bed No. 26 → 29  
Ward: CHEST TB (EZRA/SCLD) Emergency PIN: 700006

Address: 2 NO. MANICKTALA LANE Post Office: BEADON ST  
Municipality / Village: Park Police Station: Kolkata District: Hindu  
State: West Bengal Nationality: India Religion: Hindu  
Address for Communication: PIN: 700006

Marital Status: Married Patient's Occupation:  
Father's Name: LT. SUKUMAR DEY Husband's Name: 8017576118  
Brought By: REKHA DEY Phone / Mobile No.:  
Doctor/UNIT: UNIT 1 (CHEST MEDICINE) / PROF.S.BASU THAKUR/DR.S.PANDIT/DR.S.CHOWDHURY

Whether Referred From: Provisional Diagnosis: *Ac. exacerbation of COPD, type 2 resp. failure, L.R.T.E, Anemia*  
Signature of Admitting Officer: *EMC 26/06/2019 Medical College Hospital Kolkata*  
Designation:

IPC Serial 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.
<i>3/13/19 Cause of accident Dhokan Biswas</i>			<i>Prayer this patient to RICU on 21/11-12</i>

- (To be filled in BLOCK LETTERS at the end of Hospital Stay)
- (a) Outcome : Discharged/Left Against Medical Advice / Absconded / Referred out / Death *Prayer this pt. to B/W-29*
  - (b) Final Diagnosis or Injury.....
  - (c) Principal Complications.....
  - (d) Principal Associated Diseases.....

Stay in Hospital (in days) ..... From ..... to ..... 06/26/2019-10:47 PM  
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.