

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



Patient's Name : Gopal Barman Sex : M Age : 56 Yrs. Months Days

Patient Srl. No. : 32405 Admission Date : 16/05/19 Admission Time : 6:26 Am Patient Category : PAYING/CABIN/GENERAL

Registration No. : ER & OBS Bed No. : Patient Type : OPD/ER

Address : Puramahal Post Office : Burnpur PIN : 72353

Municipality / Village : Asnapur District : Paschim Bardhaman Religion : DIET

Police Station : Asnapur Nationality : Indian

Address for Communication :

Marital Status : W. M.C Barman. Patient's Occupation : Retired

Father's Name : Sanjay Mohanta Husband's Name : Sanjay Mohanta

Brought By : Sanjay Mohanta Phone / Mobile No. :

Doctor/UNIT : Ar. S.D

Whether Referred From :

Provisional Diagnosis : Ar. S.D

- A - Veg. / Non - Veg.
- B - Veg. / Non - Veg.
- C - Veg. / Non - Veg.
- D - Veg. / Non - Veg.
- E - Veg. / Non - Veg.
- F - Veg. / Non - Veg.

Signature of Admitting Officer
DR. RITAM KHANNA
Medical Officer (Ophthalmology)
Regd. No. - 72353

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	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

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. :

শ্রীমতী ডাক্তারি কলেজ এক বা একাধিক
কোয়ার্টার সিস্টেম স্থাপন করা হইবে