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1.7.19

West Bengal Form No. 769

TICKET FOR EMERGENCY
Dr. B. N. Bose S.D. Hospital, Barrackpore

Date of First Visit No. in E.P. Register
Name *Basanti Ghose*
Age Cast Sex
Disease *32* *F*

Date

Treatment

Allow free H/D
slan
7.00 pm

Medical Officer
Dr. B. N. Bose S. D. Hospital
Barrackpore, 24 Pgs. (H)