

53749

West Bengal Form No. 769

COOCH BEHAR GOVERNMENT MEDICAL COLLEGE & HOSPITAL

Cooch Behar

TICKET FOR EMERGENCY PATIENTS

Date of first visit :

Name of the patient : *Mrinal Das*

Age : *64* Sex : *F* Religion : Caste :

Disease :

DATE	TREATMENT
	<p><i>Dicyclns</i></p> <p><i>1/27/17</i></p>