

West Bengal Form No. 769

50220

**COOCH BEHAR GOVERNMENT  
MEDICAL COLLEGE & HOSPITAL**

**Cooch Behar**

**TICKET FOR EMERGENCY PATIENTS**

Date of first visit : ..... 18/07/19 .....

Name of the patient : ..... Gunobala Roy .....

Age : ..... 60y ..... Sex : ..... F ..... Religion : ..... Caste : .....

Disease : .....

<b>DATE</b>	<b>TREATMENT</b>
	Hemodialysis ↓