

West Bengal Form No. 769

61340

**COOCH BEHAR GOVERNMENT  
MEDICAL COLLEGE & HOSPITAL**

Cooch Behar

**TICKET FOR EMERGENCY PATIENTS**

Date of first visit : ..... 25-7-19 .....  
Name of the patient : ..... Chantanya Paul .....  
Age : ..... 27 ..... Sex : ..... M ..... Religion : ..... Caste : .....  
Disease : .....

DATE	TREATMENT
	H/D ←