

West Bengal Form No. 769

E/57326

COOCH BEHAR GOVERNMENT MEDICAL COLLEGE & HOSPITAL

Cooch Behar

TICKET FOR EMERGENCY PATIENTS

Date of first visit :

Name of the patient : *Ranjit Das*

Age : *34* Sex : *M* Religion : Caste :

Disease :

DATE	TREATMENT
	<p><i>Attend dialysis unit.</i></p> <p><i>13/7/19</i></p>