

West Bengal Form No. 769

580 AA

# COOCH BEHAR GOVERNMENT MEDICAL COLLEGE & HOSPITAL

Cooch Behar

## TICKET FOR EMERGENCY PATIENTS

Date of first visit : ..... 15/07/19 .....  
Name of the patient : ..... Bhabananda Roy .....  
Age : ..... 58y ..... Sex : ..... M ..... Religion : ..... Caste : .....  
Disease : .....

| DATE | TREATMENT   |
|------|-------------|
|      | Homoeopathy |