

West Bengal Form No. 769

56742

**COOCH BEHAR GOVERNMENT  
MEDICAL COLLEGE & HOSPITAL**

Cooch Behar

**TICKET FOR EMERGENCY PATIENTS**

Date of first visit : .....

11/07/19

Name of the patient : .....

Narayan Ch. Roy

Age : .....

Sex : .....

Religion : .....

Caste : .....

Disease : .....

**DATE**

**TREATMENT**

Adm. for dialysis

*[Signature]*