

Sl. No.:

Dialysis / Digital X-Ray / CT Scan

RAIGANJ GOVT. MEDICAL COLLEGE & HOSPITAL
RAIGANJ, UTTAR DINAJPUR

VOUCHER FOR FREE SERVICES FROM PPP DIAGNOSTIC LAB

PATIENT NAME : *Nishi Kantu Sarkar*

AGE : *61y* SEX : *M* WARD / OPD / ER : *EOA*

ADDRESS : *Vill - Kurobary, PO - Sorala
PS - Koshumundi, D/D*

REGISTER ID : *41522* DATE : *09/09/13*

TREATING DOCTOR NAME : *Dr. A. Salam*

PATIENT MOBILE NO : *9593357813*

TYPE OF INVESTIGATION : *Dialysis*

Received the service and I have not paid any amount for the service
PBICamSarkar
Signature of the Patient

Assistant Superintendent (N/M)
Raiganj Govt. Medical College & Hospital
Raiganj, Uttar Dinajpur.

SUPDT. / ASST. SUPTD. / EMO.
RAIGANJ GOVT. MEDICAL COLLEGE & HOSPITAL
RAIGANJ, UTTAR DINAJPUR



9593357813

বিঃদ্রঃ- উক্ত পরীক্ষার জন্য রোগীকে কোনো টাকা দিতে হবে না।