

08880

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: *Kalpana Ranibay Sait*
AGE: *69* SEX: *F* WARD / OPD / ER: *OPD*
ADDRESS: *Ukhalpur P.S. Raiganj*
PS. Raiganj MT V/S
REGISTER ID: *44558* DATE: *22/7/19*
TREATING DOCTOR NAME: *A. Sarker*
PATIENT MOBILE NO.:
TYPE OF INVESTIGATION: *Dialysis*

Received the service and I have not paid any amount for the service
[Signature]
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



সকল পরীক্ষাগুলির জন্য রোগীকে কোনো টাকা দিতে হবে না।
22/7/19