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COLLEGE OF MEDICINE & SAGORE DUTTA HOSPITAL
Government of West Bengal
Kamarhati, Kolkata - 700 058
(X-RAY / ULTRA SOUND)
OUTDOOR / INDOOR REQUISITION FORM

Registration No. 103007

Patient's Name..... Rita day

Age..... 33 Male / Female..... Religion-Hindu / Muslim / Christian

Address.....

Physician / Surgeon.....

Ward / O.P.D. Bmr Bed No. Paying Bed No.

Description of disease.....

Type of X-Ray / Investigation..... RT Shoulder

Report :

Signature of attending
Medical Officer

Signature
Radiology / E.C.G. Deptt.
COLLEGE OF MEDICINE & SAGORE DUTTA HOSPITAL
Kamarhati, Kolkata - 700 058