

No.-001

Dialysis / Digital X-Ray / CT Scan

118058

Hospital

Health District,

District

Voucher for Free Services from PPP Diagnostic Lab

Patient Name: SANJIT SAHA Age: 44 Sex: M

Address: KLY

Register Id: 16 Date: 17/8/18

Received the services and I have not paid any amount for the service.

Sucharita Saha

Signature of the Patient

Superintendent

Hospital

Health District,

District

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on

West Bengal Form No. 815

Register No.

J. N. M. HOSPITAL, KALYANI

ELECTRO THERAPUTIC DEPARTMENT (X-RAY)

Name SANJIT SAHA Age 44 Sex m

Address PA - 1800012083

Physician/Surgeon UNIT - IV Ward mmul

No. of Bed Cabin 16 Paying / Non-Paying

Brief history of case

Paraparesis

Clinical Diagnosis

Paraparesis ↓ investigation -

Particular Point to be investigated.

Instruction

MRI D-L Spine

Date 17.8.18

[Signature]
Medical Superintendent
J. N. M. Hospital Kalyani
Nadia

REPORT

48 kg

2528/118058

KLY

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