

J. N. M. HOSPITAL, KALYANI 92564

ELECTRO THERAPUTIC DEPARTMENT (X-RAY)

Name..... Rharkem Konon Age..... 43 Sex..... M

Address.....
ken

Physician/Surgeon..... Ward.....

No. of Bed Cabin..... Paying / Non-Paying.....

Brief history of case

HEPT Bscuin o
Control

Clinical Diagnosis

Particular Point to be investigated.

Instruction

Date- 22 September 2018

[Signature]
1318/18

Signature

REPORT

Medical Officer
Com & JNM Hospital
(W.B.U.H.S.)
Kalyani, Nadia

GENERAL

Monday

92564

2018

81889

8:32AM

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