

West Bengal Form No. 815.

Plate No.  
Register No. 34920

# DISTRICT HOSPITAL HOWRAH

ELECTRO-THERAPEUTIC DEPARTMENT

Report / Treatment is required of

Name Gisan Age 5yr Sex M

Address Goal Moti Uttar Para.

Physician / Surgeon Dr. A. Basu Ward PSW No. of bed/cabin ENT;

Paying / Non-Paying

Brief history of case

Clinical Diagnosis

NECT Brain

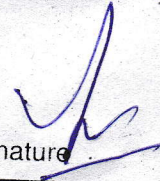
Particular point to be investigated

Instructions

Date

7/8/18

Signature



Report