

DISTRICT HOSPITAL HOWRAH 18824

ELECTRO-THERAPEUTIC DEPARTMENT

Report / Treatment is required of

Name Rabindra Kumar Chowdhury Age 62 Sex M

Address _____

Physician / Surgeon S. M. J. Ward 100 No. of bed/cabin 122

Paying / Non-Paying

Brief history of case

Clinical Diagnosis

CP Spine Pain

Particular point to be investigated

Instructions



Date

Signature

Report