

West Bengal Form No. 815

Plate No.
Register No.

186917

DISTRICT HOSPITAL HOWRAH
ELECTRO-THERAPEUTIC DEPARTMENT

Report / Treatment is required of

Name Nemai Rajak Age 58 Sex M

Address _____

Physician / Surgeon Dr. S. Pal Ward MMW No. of bed/cabin X3

Paying / Non-Paying

Brief history of case

Clinical Diagnosis

CT - Brain

Particular point to be investigated

Instructions

Date

10/8/18.

Signature

Nemai

Report