West Bengal Form No. 815

Plate No. Register No. 18938

DISTRICT HOSPITAL HOWRAH

ELECTRO-THERAPEUTIC DEPARTMENT

Report / Treatment is required of

Name Salonam	Na 7	91
Address	29 -	Age 21 y Sex Flm
Physician / Surgeon Surgeon	Ward _ P	No. of bed/cabin X16
Paying / Non-Paying	Di Di	No. of bed/cabin
Brief history of case	Mrs Imp	Beal asop
Clinical Diagnosis	2 42	Beal alog
	CT Scan	of Brain
Particular point to be investigated		
Instructions		1. 12912
Date		(Signature
	Report	Colgridiate