

West Bengal Form No. 815

Plate No.
Register No. 191990

DISTRICT HOSPITAL HOWRAH

ELECTRO-THERAPEUTIC DEPARTMENT

Report / Treatment is required of

Name Rejesh Das. Age 25 Sex M

Address _____

Physician / Surgeon Dr. S. Baskin. Ward mmw No. of bed/cabin 81

Paying / Non-Paying

Brief history of case

Clinical Diagnosis

of Brain

Particular point to be investigated

Instructions

Date 16/02/18

Signature [Signature]
16/02/18

Report