Report / Treatment is required o	f · · ·	
	jai sha	MAge 24 YSex Mian
Address Physician / Surgeon	GM Ward	No.of bed/cabin
Paying / Non-Paying Brief history of case	RTA	anoni
Clinical Diagnosis	Head	Injuny.
Particular point to be investigated	NECT	Rain
Instructions Date 2-3 8 1 8		Signature