

West Bengal Form No. 815

Plate No. ~~181059~~
Register No. 181059.

DISTRICT HOSPITAL HOWRAH

ELECTRO-THERAPEUTIC DEPARTMENT

Report / Treatment is required of

Name Aparna Sanyal Age 45 Sex F.

Address _____

Physician / Surgeon Dr. S. Pal Ward EMW No. of bed/cabin 25

Paying / Non-Paying _____

Brief history of case _____

Clinical Diagnosis _____

CT - Brain

Particular point to be investigated _____

Instructions _____

Date

5/8/18

Signature



Report