West Bengal Form No. 815	4	
-де	INO-IHERAPEUT	Plate No. Register No. 193783 TAL HOWRAH IC DEPARTMENT
Report / Treatment is re	equired of	1
Name <u>PANJAN</u> Address	SHAD	Age <u>&amp;</u> Sex
Physician / Surgeon K. Paying / Non-Paying	ching w	Vard MS2 No. of bed/cabin
Brief history of case		
Clinical Diagnosis	Nect	Brach Product
Particular point to be investigated		
Instructions		
Date 18 /8 /18	Report	Signature
		10161