

West Bengal Form No. 815

Plate No.
Register No. 184598

DISTRICT HOSPITAL HOWRAH

ELECTRO-THERAPEUTIC DEPARTMENT

Report / Treatment is required of

Name Jhufika Das Age 62 Sex F

Address _____

Physician / Surgeon S Debnath Ward RMW No. of bed/cabin X125

Paying / Non-Paying

Brief history of case

Clinical Diagnosis CT Brain

Particular point to be investigated

Instructions

Date

8/8/10

Signature



Report