Mo-suddenfa	Il two palms over heat
Annexure II DEPART	MENT OF HEALTH & FAMILY WELFARE GOVERNMENT OF WEST BENGAL OPD / EMERGENCY TREATEMENT CARD
PATIENT DETAILS	DIPUR - MANIKPUR B. P. H. C. Kulgachia, Uluberia -1, Howrath Registration Number-\\383
Name Majera Begum Age 10.88 Sex F. Address Vill	
PO Doctor's name	P.\$. Dist
Cfinical notes	ADVICE / Investigations
History/ Complaints Signs & Symptoms Chinical Examination Injury Notes Provisional alagnosis	3) Selsen Son Son Son Son Son Son Son Son Son So
a) with rash b) with bleeding c) with cough & cold b) w	Name of the Doctor/Stamp Kepatiment Guidelines and ensure Rational Use of Medicine IDSP 7 days ith no dehydration ith some dehydration ith some dehydration ith blood. d) cholera 7. Filera 18. Anthrax 19. Arsenicosis