

Continuation Sheet  
**Uluberia S.D. Hospital**

Ward ..... *Bhaverati Digen* ..... Bed No. .... *X5A* .....  
Name ..... *F MW* ..... Age .....  
Reg. No. .... *14075* ..... Under Doctor ..... *Dr. B. chel* .....

*C.T Scan of Brain*

Medical Officer  
Uluberia S.D. Hospital  
Uluberia, Ho...