

1571

# Deben Mahato (Sadar) Hospital

PURULIA

Regd. No. -

80302

Report / Treatment is required of

Name ..... *Sone Mun. Gochi* ..... Age *30yr* Sex *M* .....

Regd. No. ....

Address .....

Physician / Surgeon ..... *DA* ..... Ward *Female* ..... Paying / Cabin .....

Brief history of case

Clinical diagnosis

Particulars point to be investigated      Signature and Date .....

## REPORT

*Cyberman*

*11/10/18*