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Deben Mahato (Sadar) Hospital

PURULIA

Regd. No. -

80409

Report / Treatment is required of

Name *Shahi Bhuvan Patel* Age Sex

Regd. No.

Address

Physician / Surgeon *Dr* Ward *11* Paying / Cabin

Brief history of case

Clinical diagnosis *UTI*

Particulars point to be investigated Signature and Date

REPORT

UTI
UTI scan done

AK
11/5/18