

1653

Deben Mahato (Sadar) Hospital

PURULIA

87079

Regd. No. -

Report / Treatment is required of

Name *M. K. Das* Age Sex

Regd. No.

Address

Physician / Surgeon *AH* Ward *mu* Paying / Cabin

Brief history of case

Clinical diagnosis

Particulars point to be investigated Signature and Date

REPORT

C. S. Das

AH
(31/11/14)