

1658

PURULIA

Regd. No. - 87027

Report / Treatment is required of  
Name ..... *Bhuti Bansi* .....

Age *33yr* Sex .....

Regd. No. ....

Address .....

Physician / Surgeon ..... *PH* ..... Ward ..... *PH* ..... Paying / Cabin

Brief history of case

Clinical diagnosis

Particulars point to be investigated

Signature and Date ..... *Rangra* .....

**REPORT**

*C. S. Banerjee*

*AB*  
*13/10*