

1804

Deben Mahato (Sadar) Hospital

PURULIA

Regd. No. - 82657

Report / Treatment is required of

Name *Adri Moh 70* Age *70* Sex *M*

Regd. No.

Address

Physician / Surgeon *Adm* Ward *4* Paying / Cabin

Brief history of case *CM*

Clinical diagnosis

CTS of Rm

Particulars point to be investigated Signature and Date

REPORT