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Deben Mahato (Sadar) Hospital

PURULIA

Regd. No. -

88325

Report / Treatment is required of

Name *Page Bar* Age *1 yr* Sex

Regd. No.

Address

Physician / Surgeon *AA* Ward *100* Paying / Cabin

Brief history of case

Clinical diagnosis

Particulars point to be investigated

Signature and Date

REPORT

(Handwritten signature)

(Handwritten date)
01/11/18