

23/8

Deben Mahato (Sadar) Hospital

PURULIA

Regd. No. - 86434

Report / Treatment is required of

Name *Salisha Panee* Age *12 yr* Sex *f*

Regd. No. *(21)*

Address

Physician / Surgeon *Dr. S. Chatterjee* Ward *B* Paying / Cabin

Brief history of case

Clinical diagnosis *C. T. Brain.*

Particulars point to be investigated Signature and Date

REPORT