

8384

# Deben Mahato (Sadar) Hospital

PURULIA

Regd. No. - 86488

Report / Treatment is required of  
Name ..... Ray Mahalik ..... Age ..... 2 yrs Sex .....

Regd. No. ....

Address .....

Physician / Surgeon ..... [Signature] ..... Ward ..... [Signature] Paying / Cabin

Brief history of case

Clinical diagnosis

Particulars point to be investigated      Signature and Date .....

## REPORT

[Signature]  
01 / 11 / 18