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# Deben Mahato (Sadar) Hospital

PURULIA

Regd. No. - 88346

Report / Treatment is required of

Name ..... Sonu ..... Mondal ..... Age 18 yrs Sex M

Regd. No. ....

Address .....

Physician / Surgeon ..... Dr. A. Chakrabarty ..... Ward ..... M.G.H. Paying / Cabin

Brief history of case

Clinical diagnosis

CT Scan Brain

Particulars point to be investigated

Signature and Date .....

**REPORT**

