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# Deben Mahato (Sadar) Hospital

PURULIA

Regd. No. - 7850

Report / Treatment is required of

Name ..... *Rathu Gopin* ..... Age *16* Sex *M*

Regd. No. ....

Address .....

Physician / Surgeon ..... *Dr. Pratik* ..... Ward ..... Paying / Cabin

Brief history of case *Dr. Pratik*  
Clinical diagnosis *EET - Throat*

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

## REPORT

*(Signature)*  
*10/11/18*