



Deben Mahato (Sadar) Hospital
PURULIA

Regd. No. - 90809

Report / Treatment is required of

Name *Dalu Bauri* Age *25* Sex *M*

Regd. No. *(F)*

Address

Physician / Surgeon *Dr. S. Chatterjee* Ward *Ms. 2* Paying / Cabin

Brief history of case

Clinical diagnosis *CT scan brain*

Particulars point to be investigated Signature and Date

REPORT

[Signature]
18/11