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# Deben Mahato (Sadar) Hospital

PURULIA

Regd. No. - 9094/

Report / Treatment is required of

Name ..... *Jalendra* ..... *Men* Age *46* Sex *M* .....

Regd. No. ....

Address .....

Physician / Surgeon ..... *MDR* ..... Ward ..... *PAC* ..... Paying / Cabin

Brief history of case

Clinical diagnosis

*C/S a/g bon*

Particulars point to be investigated ..... Signature and Date ..... *[Signature]*

**REPORT**