



Deben Mahato (Sadar) Hospital

PURULIA

Regd. No. - 92169

Report / Treatment is required of

Name *moni kalindi* Age *10.7* Sex *F*

Regd. No. *B/W* *37*

Address

Physician / Surgeon *unit - V* Ward *F/W* Paying / Cabin

Brief history of case

Clinical diagnosis *CT scan of brain*

Particulars point to be investigated Signature and Date

REPORT