

3293

Deben Mahato (Sadar) Hospital

PURULIA

Report / Treatment is required of
 Name *Sumanu Bibi* Regd. No. - *93202*
 Regd. No. Age *60* Sex *F*
 Address
 Physician / Surgeon *PKM* Ward *PMU* Paying / Cabin *26*
 Brief history of case
 Clinical diagnosis
 Particulars point to be investigated

Signature and Date *[Signature]*

REPORT

(CT brain urgent)