

3022

# Deben Mahato (Sadar) Hospital

PURULIA

Report / Treatment is required of  
 Name ..... Saifash Bui ..... Regd. No. - 9/124/20  
 Name ..... Saifash Bui ..... Age 50 Sex M  
 Regd. No. .... 9/124/20 .....  
 Address .....  
 Physician / Surgeon Dr. A. Kapat ..... Ward MSI ..... Paying / Cabin  
 Brief history of case CECT  
 Clinical diagnosis ~~ECTC~~ w/A  
 Particulars point to be investigated ..... Signature and Date .....

**REPORT**