

3397

# Deben Mahato (Sadar) Hospital

PURULIA

Regd. No. - 94105

Report / Treatment is required of

Name ..... *Nanibala Mahato* ..... Age *60y* Sex *F*

Regd. No. ....

Address .....

Physician / Surgeon *unit 6* ..... Ward *150* Paying / Cabin

Brief history of case

*CT scan of brain*

Clinical diagnosis

Particulars point to be investigated

Signature and Date ..... *[Signature]*

## REPORT

*Deben*  
*08/12/2020*