

Deben Mahato (Sadar) Hospital

PURULIA

Regd. No. - 96018

Report / Treatment is required of

Name *Sovan Ran Mahato* Age *13* Sex *M*

Regd. No.

Address

Physician / Surgeon *D. A. Sen* Ward *Mand* Paying / Cabin

Brief history of case

Clinical diagnosis *CTS of both*

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

REPORT