

# Deben Mahato (Sadar) Hospital

PURULIA

Regd. No. - 96029

Report / Treatment is required of  
Name ..... *poonima Mahato* ..... Age *26* Sex *F*

Regd. No. ....

Address .....

Physician / Surgeon *Dr AS Das* ..... Ward *Fms* Paying / Cabin

Brief history of case

Clinical diagnosis *CT-brain*

Particulars point to be investigated ..... Signature and Date *9/12/18* .....

**REPORT**

*an*