

4059

Deben Mahato (Sadar) Hospital

PURULIA

64

Regd. No. - 99093

Report / Treatment is required of

Name *Suraj mndu ajha* Age *50* Sex *M*

Regd. No.

Address

Physician / Surgeon *D.H. AS Das* Ward *AMC* Paying / Cabin

Brief history of case

Clinical diagnosis

CT-Brain

Particulars point to be investigated

Signature and Date *28/12/18*

REPORT

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