

R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

Reg - 180049/426

Report / Treatment is required of

Name: Uday Mal Age: 32y Sex: M

Address:

Physician / Surgeon: Trauma Ward: Unit I No. of Bed / Cabin:

Paying / Non Paying:

Brief history of case

Cervical Injury of

Clinical Diagnosis

Particulars point to be Investigated

M.R.I. of cervical spine

Instruction

Date: 6/11/18

Signature: T.K. Pal

REPORT

Full Signature
Aditya Biswas