

1766

# R. G. KAR MEDICAL COLLEGE & HOSPITAL

## Electro Therapeutic Department

Report / Treatment is required of

Name Subhna Sarkar Age 34 Sex F

Address .....

Physician / Surgeon Chief (iv) Ward AMPAM (7) No. of Bed / Cabin 240

Paying / Non Paying .....

Brief history of case

L.B.P

Clinical Diagnosis

Particulars point to be Investigated

MRI 4/ Spine

Instruction

Date 08-11-18

Signature Soumitra Das

### REPORT

08/11/18  
R. G. Kar Medical College & Hospital  
Kolkata - 700 004

- Notes :
- (1) This form should, except in urgent cases, be signed by the Visiting Staff.
  - (2) A note should, in all fracture cases, be made as to whether the splints may be removed.
  - (3) The time at which a Bismuch meal has been given should be noted.
  - (4) In the M: C. H. this form should be sent to the X-Ray Department at 8-30 a.m. for appointment of time.