

✓ 3000

Plate No. ....

Register No. ....

# R. G. KAR MEDICAL COLLEGE & HOSPITAL

## Electro Therapeutic Department

RG180080 2943

Report / Treatment is required of

Name Reba Halder Age 86y Sex F

Address .....

Physician / Surgeon V Ward AVA-2 No. of Bed / Cabin (211)

Paying / Non Paying .....

Brief history of case

Clinical Diagnosis

Particulars point to be Investigated CMRI Brain E seizure protocol

Instruction

Date 23/11/18

Signature Krishnendu A

**REPORT**