

✓/2852 MRI No 1800830261

R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

Report / Treatment is required of

Name LIAKAT KORAI Age 60 yrs Sex Male

Address

Physician / Surgeon unit II (Med) Ward MALHS No. of Bed / Cabin F-36 (N-32)

Paying / Not Paying Paying

Brief history of case Quadruplegia & paralysis

Clinical Diagnosis

Particulars point to be Investigated MRI of Brain

Instruction

Date 28/11/18

Bilal Khan
Signature

REPORT

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.