

Phone - 18093365
R. G. KAR MEDICAL COLLEGE & HOSPITAL
Electro Therapeutic Department

Plate No.

Register No.

Report / Treatment is required of

Name..... Rajib Chakraborty Age 42 Sex Male

Address.....

Physician / Surgeon..... Plastic Surgery In Res Ward.....

Paying / Non Paying..... B.H.T. free No. of Bed / Cabin RN2

Brief history of case 10 Neu of Left leg

Clinical Diagnosis Neurocysticercosis

Particulars point to be Investigated

Instruction 2 DMRT Brain

Date..... 5/12/18

Signature [Signature] Plastic Surgery.....
R. G. Kar Medical College

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 it is a fresh or old fracture.
 - (3) The time at which a fracture is made should be noted.