

Plate No.

Register No.

R. G. KAR MEDICAL COLLEGE & HOSPITAL

REG 800698376 Electro Therapeutic Department

Report / Treatment is required of

Name..... PHANE SARKAR Age..... 79 y Sex..... M

Address.....

Physician / Surgeon..... Unit W Ward..... No. of Bed / Cabin..... 205

Paying / Non Paying

Brief history of case

Clinical Diagnosis

Particulars point to be Investigated ← MRI - Brain

Instruction

Date..... 05/10/18.....

Signature.....

REPORT

Stamp: R.G. KAR MEDICAL COLLEGE & HOSPITAL, Dept. of Medicine, Radiology, Reg. No. 800698376