

R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

R618077 957

Report / Treatment is required of

Name Rajkumar Das Age 80yr Sex M

Address

Physician / Surgeon (Med) Ward meds No. of Bed / Cabin (53)

Paying / Non Paying

Brief history of case Ascitis

Clinical Diagnosis

Particulars point to be Investigated MRCP

Instruction

Date 6/10/18

Signature [Signature]
R.G. Kar Medical College
Electro Therapeutic Department

REPORT

910 88657663
G. Bala
N-1044

7/10/18
JAM

- 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.