

R415099816

R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

Report / Treatment is required of

Name..... Anand Sh Age..... 20y Sex..... M

Address.....

Physician / Surgeon..... ENT O-I Ward..... ENT(M) No. of Bed / Cabin.....

Paying / Non Paying.....

Brief history of case Perisistent ear discharge Rt i ? Intracranial

Clinical Diagnosis 2 Lateral scc fistula vertigo complicated

Particulars point to be Investigated MRI brain

Instruction

Date..... 21/12/18

R. G. Kar
Signature..... R. G. Kar

REPORT