.. Jim No. 815

Plate No.

## Register No. .... R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

Report / Treatment is required of		1807 00 197
Name HAMIDA BIBI	A	cont.
Address	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	55 yrs sex femile
Physician/Surgeon VL (MBD).  Paying/Non Paying	Word F	MD,
Paying / Non Paying	vvaru	No. of Bed / Cabin 49
Brief history of case	••••	
Clinical Diagnosis	1.05	Λ
Particulars point to be Investigated	JURE	of brain!
Instruction		
Date	V.	Med Amond May
	REPORT	Signature Remaine Ward Female Plant Ward Ward Remains Ward Respitation & Hospital
		R.G. Kar Medical Culture & Hospital