

9804447503

RG 1800290

✓ 4870
KIRG

R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

Report / Treatment is required of

Name..... Dip Mondal Age..... 23 Sex..... F

Address.....

Physician / Surgeon..... Ward..... ortho. opd No. of Bed / Cabin..... F120

Paying / Non Paying..... ingure LT knee joint

Brief history of case..... Due to playing.

Clinical Diagnosis..... MRI of LT knee joint

Particulars point to be Investigated.....

Instruction.....

Date..... 24/12/18

R.M.O.
Female Medicine Ward
6th Floor
R. G. Kar Medical College & Hospital
Signature..... [Signature]
24/12/18

REPORT