Plate No.	

Register No. RUPWH78

R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

Report / Treatment is required of			
Name maked mondal.	Age & O	Sex. M.	•
Address			
Physician / Surgeon	Ward MMW -5	_, No. of Bed / Cabin .	28
Paying / Non Paying			
Brief history of case			
Clinical Diagnosis			
Particulars point to be Investigated MR Sp	ectroscopy.		
Instruction MRI	ectroscopy.	Mouri	
Date 12 10 18		Signature	
	REPORT		

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(2) A note should, in all fracture cases, be made as to whether the splints may be removed.