

2497 - प्रियंका
 (2497) - 7602641756

Plate No.

Register No. R.4) 87069.8.3.65

R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

Report / Treatment is required of

Name..... Priyanka Biswas Age..... 16yrs Sex..... F

Address.....

Physician / Surgeon..... Unit - IV Ward..... FMW6 No. of Bed / Cabin..... 16

Paying / Non Paying.....

Brief history of case

Clinical Diagnosis ? Intestinal TB

Particulars point to be Investigated - Contrast MRI of Brain
 - MRI of Whole Spine

(Epileptic protocol)
(with cerebellar focus)

Instruction

Date..... 12/10/18

Signature..... [Signature]

R.M.O.
 Female Medicine Ward
 R.G. Kar Medical College & Hospital

REPORT

- 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.