Alast	Bengal	Form	No.	815
yvest	Deligai	, 0		

Plate No.

Register No.

R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

R418081877

Report / Treatment is required of Name	Age 18 4 Sex P
Address	d. Rn W- 6 No. of Bed/Cabin 66
Paying / Non Paying	M.
Clinical Diagnosis Particulars point to be Investigated	F. G. Ker Medical College
Instruction Date	Signature O. W. 3
RE	PORT