R91300723584, Register No.

Plate No.

## R. G. KAR MEDICAL COLLEGE & HOSPITAL

**Electro Therapeutic Department** 

Report / Treatment is required of				
Name NIRMAL DEBN	ATH	Age. 65	Sex	Male
Address				
Physician/Surgeon Uuity	G M Ward	MMW-S-	No. of Bed /	Cabin 27
Paying / Non Paying			, and a body	Odbii i
Brief history of case				
Clinical Diagnosis	MRI B	rain	1	
Particulars point to be Investigated			4	
Instruction			YASHI	ALYKON DOOLN
Instruction Date 21/10/13			Signature B	Patomty GM ting Physician
	REPO	RT	- wood	ting Physician of Medicine MMW 5th
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