

Plate No.

Register No.

R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

RG1800744420

Report / Treatment is required of

Name..... Anil Gosai Age 52y Sex M

Address.....

Physician / Surgeon IV Medicine Ward mmw6 No. of Bed / Cabin 13

Paying / Non Paying

Brief history of case

Clinical Diagnosis ICVA (?) U-60

Particulars point to be Investigated MRI Brain Or-1.9

Instruction

Date..... 27/10/18

Signature R. G. KAR MCH
M M WETH
Kolkata-6

REPORT