

R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

Report / Treatment is required of

Name Delajan Bibi Age 58y Sex F

Address

Physician / Surgeon UNK-D (Med) Ward FNU-6 No. of Bed / Cabin (2) (3)

Paying / Non Paying (nearby)

Brief history of case

Clinical Diagnosis

MRI - Brain

Particulars point to be Investigated

Instruction

Date 27/10/18

R.M.O.
Female Medicine Ward
Signature [Signature]
R.G. Kar Medical College & Hospital
(nearby)

REPORT

- (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.
- In the M. C. H. this form should be sent to the X.R. Dept.