

# R. G. KAR MEDICAL COLLEGE & HOSPITAL

## Electro Therapeutic Department

1800912825

Report / Treatment is required of

Name Chand Nihar Khatun Mondal Age 34 Sex F

Address .....

Physician / Surgeon 11(0) Ward FMPW-7 No. of Bed / Cabin 203

Paying / Non Paying .....

Brief history of case LBP x 4 yrs.

Clinical Diagnosis Tingling & Numbness of both legs

Particulars point to be Investigated MRI of Lumber Spine

Instruction

Date 11/12/18

Signature Ameyan Das

### REPORT

Emergency Medical Office  
R. G. Kar M.C.H.  
KOL-4

- 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.