

West Bengal Form No. 815

Plate No.

Register No. R918007

681722

R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

Report / Treatment is required of

Name..... Ashalata Das Age..... 75y Sex..... F

Address.....

Physician / Surgeon..... UNIT-V (MED) Ward..... FMW-6 No. of Bed / Cabin..... 23

Paying / Non Paying

Brief history of case

MRI Brain

Clinical Diagnosis

Particulars point to be Investigated

Instruction

Date..... 29/9/18

Signature..... [Signature]

R.M.O.
Female Medicine Ward
R.G. Kar Medical College & Hospital

REPORT