

R. G. KAR MEDICAL COLLEGE & HOSPITAL  
Electro Therapeutic Department

Register No. 18089519

Report / Treatment is required of

Name Saraswati Prinjapati Age 29 yrs. Sex F  
Address PHUNCH  
Physician / Surgeon J. U. D. A. Ward chemicine No. of Bed / Cabin 37  
Paying / Non Paying Non Paying

Brief history of case

Clinical Diagnosis

Particulars point to be Investigated

Instruction

Date 20/11/18

port T.R films + Baricentric  
TICTE reactive  
Purified 20/11/18  
MRI of brain

Signature Pankaj Desai  
R.M.O.  
Chest Medicine  
R. G. K. M. C. H.  
KOL-4

REPORT

- 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.