

R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

177128

Report / Treatment is required of

Name..... Mamata Mondal Age..... 32 Sex..... F

Address.....

Physician / Surgeon..... Ward..... 52 No. of Bed / Cabin.....

Paying / Non Paying..... No headache.

Brief history of case

Clinical Diagnosis

MRI of Brain

Particulars point to be Investigated

Instruction

Date.....

Emergency Medical
Signature.....
R. G. Kar M.C.H.
Kol.
Dr. M. D. Kar

REPORT