

West Bengal Form No. 815

Plate No.
R.G. 1808 41279
Register No.

R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

Report / Treatment is required of

Name... Prasanta Mondal Age... 35y Sex... M

Address.....

Physician / Surgeon... U-GM Ward... MMW-5 No. of Bed / Cabin... 32

Paying / Non Paying

Brief history of case
MRI-brain

Clinical Diagnosis

Particulars point to be Investigated

Instruction

Date... 2/12/2018

Signature... [Signature]

REPORT