

Plate No. ....

Register No. ....

# R. KAR MEDICAL COLLEGE & HOSPITAL

## Electro Therapeutic Department

R.G. 1800856893

Report / Treatment is required of

Name JAMILA BEBI Age 50 yrs Sex F

Address .....

Physician / Surgeon I Med Ward PMW-6 No. of Bed / Cabin 14

Paying / Non Paying .....

Brief history of case

MRI thoraco-lumbar spine  
= cervical screening.

Clinical Diagnosis

Particulars point to be Investigated

Instruction

Date 12/12/18

Signature Susmita Sen

**REPORT**

R.M.O.  
Femal Medicine Ward  
6th Floor  
R.G. Kar Medical College & Hospital