

West Bengal Form No. 815

✓/2369/MRI

Plate No. ....

Register No. 41800  
843432

# R. G. KAR MEDICAL COLLEGE & HOSPITAL

## Electro Therapeutic Department

Report / Treatment is required of

Name..... Nalpana Ganguly Age..... 74 Sex..... F

Address.....

Physician / Surgeon..... I Ward..... FMPW7 No. of Bed / Cabin..... 246

Paying / Non Paying .....

Brief history of case

Clinical Diagnosis

Particulars point to be Investigated MRI brain T DWI sequence

Instruction

Date..... 3/1/18

Signature..... [Handwritten Signature]

**REPORT**