

R. G. KAR MEDICAL COLLEGE & HOSPITAL

Electro Therapeutic Department

Report / Treatment is required of

Name Prabin Halder. Age 62y. Sex M.

Address:

Physician / Surgeon VI-GM. Ward MMW 8. No. of Bed / Cabin 28

Paying / Non Paying

Brief history of case MRI - brain.

Clinical Diagnosis

Particulars point to be Investigated

Instruction

Date 16/12/18.

Visiting Physician
Dept. of ...
D. Saunyan Pal.
Signature

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.