

**DEPARTMENT OF HEALTH & FAMILY WELFARE
GOVERNMENT OF WEST BENGAL**

OPD Patient Card
ALIPURDUJAR, DIST. ALIPURDUJAR

SUGANDHA KAY
Female 45

[DR19072048/1]

Card Rupees 2.00
Thursday

Name :	Age :	Yrs.	Months	Days	Day :
Sex :	Ref. From :	GENERAL	Reg. No. : 11-Apr-2019		
Visit No. : 1	Department :	Dr. S. KARMAKAR, DR. U. KANTI, DR. S. SARKAR, DR. R. RAIRAGYA (Friday/Thursday/Thursday)			Reg. Date : 11-Apr-2019
Doctor/Unit Name (DOW) :	Room No. :	Visit Date :	Entry No. :	Card No. :	Time :

Visit Date :	Department :	Doctor/Unit :	Entry No. :
--------------	--------------	---------------	-------------

Visit Date :	Department :	Doctor/Unit :	Entry No. :
--------------	--------------	---------------	-------------

Visit Date :	Department :	Doctor/Unit :	Entry No. :
--------------	--------------	---------------	-------------

Clinical Notes	ADVICE
	<p align="right"><i>Subhas Dasgupta</i></p> <p align="right"><i>12/11/19</i></p>