

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

P.O. AND DISTRICT HEADQUARTERS
OPD Patient Card

SANCHITA SAHA
Female 44

[DR19043965/3]

Paid Ru
Thured
RG19043962

Name :	Age :	Yrs.	Months	Days	Day	28-Feb-2018
Sex :	GENERAL				Reg. No. :	DR19043965
Ref. From :	Dr. S. KANTHAR, DR. U. KANKI, DR. S. SARKAR, DR. P. BAJRABYA				Reg. Date :	28-Feb-2018
Visit No. : 1	Department :	Visit Date :			Time	
Doctor/Unit Name (DOW) :					Entry No. :	
Room No. :						

Visit Date :	Visit No. : 2
Department :	Tm.
Doctor/Unit :	
Entry No. :	

Visit Date :	Visit No. : 3
Department :	Tm.
Doctor/Unit :	
Entry No. :	

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

Clinical Notes	ADVICE
<p><i>Flacive Dialysis CNO!</i></p>	<p><i>2 m 240 to 200m.</i></p> <p><i>flavistromy Ave any</i></p>