

DEPARTMENT OF HEALTH & FAMILY WELFARE
GOVERNMENT OF WEST BENGAL
OPD Patient Card

307

NEPHROLOGY 212

Name : _____ Day : _____
 Sex : SHILA DEB Age : _____ Yrs. Months Days Reg. No. : _____
 Ref. From : Female Card No. : _____
 Visit No. : 1 Department : _____ Visit Date : _____ Time : _____
 Doctor/Unit Name (DOW) : _____ Entry No. : _____
 Room No. : _____

Visit No. : 2 Visit Date : _____ Department : _____ Doctor/Unit : _____ Entry No. : _____	Visit No. : 3 Visit Date : _____ Department : _____ Doctor/Unit : _____ Entry No. : _____	Visit No. : 4 Visit Date : _____ Department : _____ Doctor/Unit : _____ Entry No. : _____
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Clinical Notes
 13 MAR 2019 (KDS HD x One year -
 Access (L) AVF
 2/wk

ADVICE
 Adv Cont MHD 2/wk
 Fluid ~ 500ml/day
 * Tab Telmisartan 40mg OD on HD days x Cont.
 ↑ Tab Torsemide 20mg BD x Cont.

To attain
 over next one or
 months
 (Target
 wt 41 kg)

25/3/19
 20/3/19
 Pulva HD
 wt gain ~ 4kg.
 Fluid intake ~ 1L.
 On 26/12/18
 10/1
 Hb 9.9 g/dl.
 CR 10.67 /dl.
 Kt 6.2
 13/3/19

(Go) Pulvadialytic Hypertension
 ~ 220/100
 Bipodal edema ⊕
 BP 160/90
 Blood.
 Dr/Cr/Nat/K
 Hbgu 1.1
 Alb/Ca/Po4
 HD
 Review 2 months x Cont.

13 APR 2019
 Tab Amlodipine 10mg OD x Cont.
 Tab metoprolol-xl 50mg OD x Cont.
 Tab. Razeosin-xl 5mg OD HS x Cont.
 Tab. Febuxostat 40mg OD x Cont.
 Tab Ca-acetate 667mg BDX Cont.
 Ery Epo 4000 U S.C x 2/wk
 Ery Dura-Sun 100mg IV 1/wk