

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

Name : UDAY KAR		[HWHD/ORI1800191799]		Day : Saturday	
Sex : Male	Age : 55 Yrs	0 Months	0 Days	Reg No. : HWHD/RG1800233583	Reg. Date : 29-09-2018
Ref.From :		Card No :			
Visit No. : 1		Department : MEDICINE		Visit Date : 29-09-2018	
Doctor/Unit Name(DOW) : Dr./Dr.Sanat Kr Ankure		Room No. 13			

Visit No : 2	Department :	Tm.	Visit No : 3	Department :	Tm.
Doctor/Unit :	Visit Date :	Entry No :	Doctor/Unit :	Visit Date :	Entry No :

Clinical Notes	ADVICE
<p>29/09/18 Wells (M) on MUD</p> <p>25uch Shyam 21/09/18</p> <p>PHYSICIAN Bhawan Hospital, Howrah</p>	<p>29/09/18</p> <p>sent all microbes on previous day</p> <p>U/S</p> <p>for EPO car s/c } Cystitis</p>

User Name : hdhoptd