

340

DEPARTMENT OF HEALTH & FAMILY WELFARE
GOVERNMENT OF WEST BENGAL

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OPD Patient Card
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(For Name) Purnendu Samanta
(For Address) 2

Name :	(PH:033-24733900)	Day :	Wednesday
Sex :	MRINAL	Reg. No. :	SSKM/RO/1809/18006
Age :	Yrs. Months/Weeks/Days 33/0/0	Reg. Date :	25-07-2018
Ref. From :	Male 33 0 0	Card No. :	SSKM/RO/1809/1800643220
Visit No. : 1	Department : NEPHROLOGY	Visit Date :	25-07-2018
Doctor/Unit Name (DOW) :	Prof.(Dr.)D. Sen (1st, 3rd, 5th/Prof. Chowdhury (2nd, 4th)	Entry No. :	006432201
Room No. :			

Visit Date : Department : Doctor/Unit : Entry No. :	Visit No. : 2 Tm. 25 JUL 2018	Visit Date : Department : Doctor/Unit : Entry No. :	Visit No. : 3 Tm.	Visit Date : Department : Doctor/Unit : Entry No. :	Visit No. : 4 Tm.
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Clinical Notes	ADVICE
<p>on femoral cath CUSA) <u>Hcv+ve</u> HE 7.2 Creat 11.24 Urea 10.58 Na 132 K 5.3</p> <p>H/O previous peruncath</p> <p>• Doppler screening of Rt & Lt inter jugular subclavian.</p>	<p><u>Adv</u></p> <p>Refd to Belaghata ID Hospital (P.P.D unit) for MHD 2/wk</p> <p>• Luj Iron sucrose (100) post HD 1/wk</p> <p>• Luj APO (4000) SC 2/wk</p> <p>• Pantoprazole + Domperidone</p> <p>• Torsemide (10) OD</p> <p>• Refd to HD unit of SSKM for Lt peruncath.</p>

10/1

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