## DEPARTMENT OF HEALTH & FAMILY WELFARE OGREVA Name Design CHATTERNEE

Nephrology 75

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N.R.S MEDICAL COLLEGE & HOSPITAL 138, A.J.C BOSE ROAD, KOL-700014

(PH:22653243/47)

Name Sex

Ref. From:

ATOSHIBAGDI Age 55 Female

Yrs.

[NRSM/OR1800463392] Months Days

Day : Monday Reg None1800847714 Reg. Date: 16-07-2018

Canda No or 1800463392

Visit No.: 1 Department:

Mephrology

Visit Date 2018

Time:

Doctor/Unit Name (DOW): Room No.

DR. P. MUKHOPADHYAY/DR. A. MAITY/DR. A. ROY SHOWDHURY

Entry No.:

Visit Date: Department: Visit No.: 2 Tm.

Visit Date Department: Visit No.: 3 Tm.

Visit Date: Department:

Visit No.: 4 Tm.

Doctor/Unit:

Doctor/Unit:

Doctor/Unit:

Entry No.

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Entry No. Clinical Notes ADVICE true weeke 1 6 JAT 5018 MHA CKd Sa Anti cozenladi: Confire D- 10 Mc x and Orola XT- 1 Ope X cos lose 10- 10D Xort elal soo - 100 xur Atnetro 2.6\_ 1 BD.

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