

DEPARTMENT OF HEALTH & FAMILY WELFARE
 GOVERNMENT OF WEST BENGAL
 OPD Patient Card
 S.S.A.M. HOSPITAL
 KOLKATA-700020
 FRI-OPD

DEPARTMENT OF HEALTH & FAMILY WELFARE
 GOVERNMENT OF WEST BENGAL

OPD Patient Card

289

Name : KABIR MANDAL Yrs. Months KM/ Days Day :
 Sex : Yrs. Months KM/ Days Reg. No. :
 Ref. From : Reg. Date :
 Card No. :
 Visit No. : 1 Department : Visit Date : Time :
 Doctor / Unit Name (DOW) :
 Room No. : Entry No. :

Visit No. : 2 Visit Date : Tm. Department : Doctor/Unit : Entry No. :	Visit No. : 3 Visit Date : Tm. Department : Doctor/Unit : Entry No. :	Visit No. : 4 Visit Date : Tm. Department : Doctor/Unit : Entry No. :
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Clinical Notes	ADVICE
CKD 5 on MKD X4yr 2/wk wa BVF (LT) 27/08/18 ur - 8.2gm urea - 132 cr - 15.9mg2 kt - 5.9 13/08/18	Maintenance Hemodialysis.....2 Per week From nearest PPP Center Inj Erythropoietin 4000 unit s/c.....2 Per week post HD Inj Iron sucrose.....100 mg every weekly Cap Iron Folic Acid.....5mg OD Total fluids intake.....800-1000 124 hrs Total protein.....60 gm/day 2w salt restriction < 5 gm/day Refer to Central Kitchen For Diet Chart. ID OD 20 OD - T. Casareidil 6.25mg OD - T. Pantoprazole 40mg OD R/A 2mW ur / cr / kt / Ca ²⁺ / P ₂ / iPTH / use and 25 (8m) VRS level

TD