

Nephrology 23

DEPARTMENT OF HEALTH & FAMILY WELFARE

GOVERNMENT OF WEST BENGAL

OPD Patient Card

N.R.S MEDICAL COLLEGE & HOSPITAL

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Dr. Anisak Maity
Associate Professor
User Name: RABIN CHAKRABORTY
Dept. of Nephrology
N.R.S.M.C & Hospital

Name : AMITAVA SARKOAR [NRSM/OR1800864195] Day : Friday
 Sex : Male Age 41 Yrs. 0 Months Days
 Ref. From :
 Reg. No. : M/REG1801024411
 Reg. Date : 21-12-2018
 Card No. : M/OR1800864195
 Visit No. : 1 Department : Nephrology Visit Date : 21-12-2018 Time : 09:36AM
 Doctor/Unit Name (DOW) : DR. P. MUKHOPADHYAY/DR. A. MAITY/DR. A. ROYCHOWDHURY
 Room No. : 5 Entry No. :

Visit Date : Department : Doctor/Unit: Entry No. :	Visit No. : 2 Tm.	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>21 DEC 2018</p> <p>Hb = 5.4 Cr = 6.26 U⁺ = 24.3</p> <p>mw</p> <p>S. Cat. / invy powsymate</p> <p>25 (or) D</p> <p>iPTH</p> <p>Hb</p> <p>Hep B Completed</p>	<p><u>CMDSD</u></p> <p>Last HD - yesterday.</p> <p>inj EPO 4000 u s/c 2/wk</p> <p>inj iron sucrose 100mg/100</p> <p>NS 2/months</p> <p># Prazosin XL (5) - OD OD - 10pm</p> <p># Metformin XL 50 - OD</p> <p># Aspirin 75 - OD</p> <p># Amlodipine 10 - OD</p> <p># Sevelamer Car 400 - 10pm</p> <p># Torsemide 10 - OD</p> <p>- inj</p>

NEPHROLOGY OPD
N.R.S.M.C. & HOSPITAL

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12/21/2018 09:45 AM

[Signature]
21/12