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

JALPAIGURI DISTRICT HOSPITAL
HOSPITAL PARA
(PH:03561232002)

User Name :
Paid Rupees :

[JADH/OR1900023947]

Mond

BIMAL SAHA

Male 42 0 0

Day : JADH/RG1900020
Reg. No. 18-02-2
Reg. Date : JADH/OR1900023
Card No. : 12

Name :
Sex :
Ref. From :

Age : Yrs. Months Days

MALE MEDICINE
Dr.MALAY KUMAR NATH/Dr.MANORANJAN SARKAR/Dr.SAGARIKA BHATTACHARJEE/Dr.KAKOLI R
5

Visit No. : 1 Department :
Doctor / Unit Name (DOW) :
Room No. :

Visit Date : 18-02-2019
Entry No :

Time :

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

Clinical Notes	ADVICE
	22/02/19 CKD V Adv. - HD Fortnightly

02/1