## DEPARTMENT OF HEALTH & FAMILY WELFARE

## GOVERNMENT OF WEST BENGAL

JALPAI OPD PATIENT CANDSPITAL

HOSPITAL PARA

(PH:03561232002)

User Name : Debabrata Paul

Paid Rupees :

SAROSWATI RAY

Age:

Visit No.: 2

Tm.

[[ADH/OR1800140914]

Thursday

Name Sex

Yrs.

Months

Days

Day 15-11-2018 Reg. Nonior1800140914

Reg. Date:

Ref. From:

FEMALE MEDICINE 15-11-2Card No.: 09-584N Dr.ALKA MUKHERJEE/Dr.APARNA RUDRA/Dr.TANIYA BABERJEE/Dr.SAKTL RANJAN Visit Date: Time:

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

GAYEN

Entry No:

Visit No.: 3

Tm.

Visit No.: 4 Tm.

Visit Date

Department

Doctor/Unit

Entry No.

Visit Date

Department

Doctor/Unit

Entry No.

Visit Date

Department

Doctor/Unit:

Entry No.

Clinical Notes

**ADVICE** 

16/11/18. CKD-5+099

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11/15/2018 10:10 AM