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 FRI (OPD)

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

297

S.S.K.M Hospital & IPGME&R
A.J.C Bose Road Kolkata-20
(PH-033-24733900)

User Name : Golam Rasu
 Paid Rupees : 2

Name : MRINAL KANTI PAL	[SSKM/OR1800365317]	Day : Friday
Sex : Male	Age : 32 Yrs. 0 Months 0 Days	Reg. No. : SSKM/RG1800462203
Ref. From :		Reg. Date : 27-04-2018
		Card No. : SSKM/OR1800365317
Visit No. : 1	Department : NEPHROLOGY	Visit Date : 27-04-2018
Doctor/Unit Name (DOW) : Dr. Asso. Prof. Dr. D. Sircar		Time : 12:25PM
Room No. : 0		Entry No. :

Visit Date : _____	Visit No. : 2	Visit Date : _____	Visit No. : 3	Visit Date : _____	Visit No. : 4
Department :	Tm.	Department :	Tm.	Department :	Tm.
Doctor/Unit :		Doctor/Unit :		Doctor/Unit :	
Entry No. :		Entry No. :		Entry No. :	

Clinical Notes	ADVICE
<p>27 APR 2018</p> <p>1st visit</p> <p>USG -</p> <p>Rk - 8.2 cm } CMD</p> <p>Lk - 7.2 cm } 1st</p> <p>Cr - 12-6</p> <p>U3 - 9.2</p> <p>Ca/P - 7.6/5.0</p> <p>Penicillin 450 G</p> <p>IPTH - 624</p> <p>TSAT - 46.4%</p> <p>BP - 180/110</p> <p>✓ Inj Hepatitis B vaccine schedule 1 ml in each deltoid (total 2 ml), IM, M0 May 18 M1 Jun 18 M2 Jul 18 M6 1st Nov 18 Inj pneumococcal 23 vaccine 0.5 ml s/c single dose Inj Influenza vaccine yearly</p>	<p>Adv ✓</p> <p>NO IV PRICK IN LEFT / RIGHT UPPER LIMB</p> <p>Refer to CTVS/Urology/plastic surgery For AV fistula creation</p> <p>Hand exercise with fistula ball</p> <p>No NSAIDs/Aminoglycosides/Other Nephrotoxic drugs</p> <p>No. High Potassium containing meals</p> <p>SSKM/RA has meat/ NRSMCA/MEAT</p> <p>Tab Amlodipine.....10.....mg.....OD 8am</p> <p>Tab Metoprolol xl.....25.....mg.....OD 8pm</p> <p>Tab clonidine 100mcg.....mg.....</p> <p>Tab Prazosin xl.....mg.....</p> <p>Tab Torsemide.....mg.....</p> <p>Tab calcium.....Carbocare 500 BDP</p> <p>Tab ranitidine.....mg.....30 min before breakfast</p> <p>Tab Domperidone.....mg.....</p> <p>Tab ondansetron.....mg.....</p> <p>Tab Sodium Bicarbonate.....mg.....</p> <p>Tab Febuxostat.....10.....mg.....OD PC</p> <p>✓ Maintenance Hemodialysis.....2.....Per week From nearest PPP Center → Krishnamoayer Dist Hosp</p> <p>✓ Inj Erythropoietin 4000 unit s/c.....2.....Per week post HD</p> <p>✓ Inj Iron sucrose.....100.....mg.....2x post HD weekly</p> <p>Cap Iron+Folic Acid.....mg.....</p> <p>Total fluids intake.....5500.....ml/24 hrs</p> <p>Total protein.....gm/day.....kcal/day</p> <p>salt restriction < 5 gm/day</p> <p>Refer to Central Kitchen For Diet Chart.</p> <p>✓ BP - low U3, Cr, Ca, P, uric acid } after 5wk</p> <p>albumin</p> <p>04/27/2018 12:28 PM</p>

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