

No.-001

Dialysis / Digital X-Ray / CT Scan

118166

J.V.M

Hospital

KLY

Health District,

NADIA

District

Voucher for Free Services from PPP Diagnostic Lab

Patient Name:

Asit K. Podder

Age:

43

Sex:

M

Address:

Cringhata

Register Id:

7889

Date:

24/8/18

Received the services and I have not paid any amount for the service.

Asit Kumar Podder

Signature of the Patient

Superintendent

Hospital

Health District,

District

No.

7889

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.....

.....

Superintendent

Hospital

Nadia

.....

26 35

# J. N. M. HOSPITAL, KALYANI

7889

## ELECTRO THERAPUTIC DEPARTMENT (X-RAY)

Name Siddhanta Boddary Age 43 Sex M

Address .....

Physician/Surgeon..... Ward Med

No. of Bed Cabin..... Paying / Non-Paying.....

Brief history of case

Clinical Diagnosis  
Particular Point to be investigated.  
Instruction

*[Handwritten signature]*

Date- 24/8/18

Medical Officer  
Com. J. N. M. Hospital  
Signature (S.)  
Kalyani, Nadia

### REPORT

6296808041  
haighata

26 35

**DEPARTMENT OF HEALTH & FAMILY WELFARE**  
**GOVERNMENT OF WEST BENGAL**  
**OPD Patient Card**  
**COLLEGE OF MEDICINE & JNM HOSPITAL**  
**WEST BENGAL UNIVERSITY OF HEALTH SCIENCES**  
**KALYANI, NADIA, PIN - 741 235**

**ME MEDICINE 12**

User Name : BIDYUT  
 Paid Purpose : 2

Name : ASIT KR PODDER	Regd. No. : [JNMM/RG1800107889]	Day : Friday
Sex : Male	Age : 43 Yrs. 0 Months 0 Days	Reg. No. : JNMM/RG1800107889
Ref. From :		Reg. Date : 24-08-2018
		Card No. : JNMM/OR1800095091
Visit No. : 1	Department : MALE MEDICINE	Visit Date : 24-08-2018
Doctor/Unit Name (DOW) : Dr. ANIRBAN GHOSH		Time : 09:20AM
Room No. : 2		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>24/08/18</p> <p>Acute hepatitis → T2DM</p> <p>Reports: (8/8/18)</p> <p>Acute hepatitis → (? viral / ? Drug induced)</p> <p>HAV / HBeV (-)</p> <p>Multiple Liver Cyst</p> <p>LF7:</p> <p>Dr. Bilirubin → 6.40 (Cmg. + Umcng.)</p> <p>- Cmg. → 4.6</p> <p>Umcng. → 1.8</p> <p>AST - 810.</p> <p>ALT - 660.</p> <p>Alkaline Phosphate - 250.</p>	<p>Advise:</p> <ul style="list-style-type: none"> <li>- T. UDCA (300) 1 tab @ BP PC x cont.</li> <li>- <del>0.5 mg</del></li> <li>- Syn. Erion 2 tab TDS x cont</li> <li>- T. Emeg (20) 1 tab ODBBF x 20 days</li> <li>- Plan: MRCP of liver need to be done</li> </ul>

*(Signature)*  
**Medical Officer**  
**Com & JNM Hospital**  
**(W.B.U.H.S.)**  
**Kalyani, Nadia**

08/24/2018 09:21 AM