

J. N. M. HOSPITAL, KALYANI

ELECTRO THERAPUTIC DEPARTMENT (X-RAY)

Name..... S. Kalyan Das Age..... 62 Sex..... M

Address.....

Physician/Surgeon..... Ward.....

No. of Bed Cabin..... 18006 9099 Paying / Non-Paying.....

Brief history of case Pain Abd. - n/o surgical rem. of GB. cholecystitis

Clinical Diagnosis
Particular Point to be investigated. MRCP
Instruction

Date- 25/01/18

[Signature]
Signature

REPORT

67kg
2659
Nakhat
8479923004

Dr. ANJIT MUKHERJEE
ASSOCIATE PROFESSOR OF SURGERY
COLLEGE OF MEDICINE & J.N.M. HOSPITAL
UNIT- III. B.

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 -741235

Clinical Notes

ADVICE

~~18/8/18~~
25/8/18

MRCP
for

~~Post cholecystomy~~

~~For~~ Rohananda Jy
10/12/17

~~For~~ Aulfer + Purk
18/12/17

~~Spent M Lab~~ - (1)
31-5-17 HS

~~For~~ Abandani Jy
14/11/17
at night (1) 27/8/18