

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

PAIN CLINIC 3

R.G. Kar Medical College & Hospital User Name : shadab
1, Khudiram Bose Sarani, Kolkata-700004 Paid Rupees : 2
(PH:033-25557676)

Name : SOUMEN GHOSH	[RGKM/OR1800707817]	Day : Friday
Sex : Male	Age : 18 Yrs.	Reg. No.: RGKM/RG1800707029
Ref. From :	Months Days	Reg. Date : 02-11-2018
Visit No. : 1	Department : PAIN CLINIC	Card No.: RGKM/OR1800707817
Doctor/Unit Name (DOW) :	Prof. Gopati Bhattacharya/Dr. B.B. Gharami (Asst.Prof.)/Dr. P. Biswas	Visit Date : 02-11-2018 Time : 10:01AM
Room No. :	105	Entry No. :

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

Clinical Notes	ADVICE
<p>2/11/18</p> <p>c/o Pain knee joint (Rt side) following an injury during run.</p> <p>X-ray knee joint - done WNL</p> <p><i>Arise pain</i></p> <p>c/o Pain in (R) knee joint following injury 1m. ago.</p>	<p><i>Adv.</i></p> <p>Refer to orthopaedic OPD for opinion.</p> <p>Revised SOS.</p> <p align="center"> UNIT IN স্বাস্থ্য / স্ব সেবা কেন্দ্র 02-11-2018 R.G. KAR M.C.H Kolkata </p> <p>Refd to P.M.R.</p> <p align="center"> 03 NOV 2018 Physical Medicine & Rehabilitation OPD R.G. Kar Medical College, Kol-04 </p> <p><i>Advice :-</i></p> <ul style="list-style-type: none"> MR I (R) knee joint. P. PCM (500) - Hab BDR 5 days. Volition APS Spray - to apply locally. <p align="right"><i>Sh</i></p>

সৌম্য মজল
বুদ্ধপতি শনি