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

PAIN CLINIC 4

R.G. Kar Medical College & Hospital

User Name : shadab

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(PH:033-25557676) Name MANSUR GAZI [RGKM/OR1800722261] Day: Friday Sex Age: Male 60Yrs. Months Days Reg. No.: RGKM/RG1800783017 Reg. Date: 09-11-2018 Ref. From: 09-11-2018 Card No.: RGKM/OR180072226 Visit No.: 1 Department: Doctor/Unit Name (DOW): PAIN CLINIC Visit Date: 09-11-2018 Time: Prof. Dipasri Bhattacharya/Dr. B.B. Gharami (Asst. Prof.)/Dr. P. Biswas Room No. Entry No. : Visit No. : 2 Tm. Visit No. : 3 Visit Date : Visit No. : 4 Tm. Visit Date Visit Date Department: Department: Department: Doctor/Unit: Doctor/Unit: Doctor/Unit: Entry No. : Entry No. : Entry No.

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