

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

PAIN CLINIC 4

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

| | | |
|--------------------------|---|-----------------------------|
| Name : MANSUR GAZI | [RGKM/OR1800722261] | Day : Friday |
| Sex : Male | Age : 60 Yrs. | Months Days |
| Ref. From : | | Reg. No.: RGKM/RG1800783010 |
| | | Reg. Date : 09-11-2018 |
| | | Card No.: RGKM/OR1800722261 |
| Visit No. : 1 | Department : PAIN CLINIC | Visit Date : 09-11-2018 |
| Doctor/Unit Name (DOW) : | Prof. Dipasri Bhattacharya/Dr. B.E. Gharami (Asst. Prof.)/Dr. P. Biswas | Time : 10:50AM |
| Room No. : | 105 | Entry No. : |

| | |
|---------------------|---------------|
| Visit Date : _____ | Visit No. : 2 |
| Department : _____ | Tm. _____ |
| Doctor/Unit : _____ | |
| Entry No. : _____ | |

| | |
|---------------------|---------------|
| Visit Date : _____ | Visit No. : 3 |
| Department : _____ | Tm. _____ |
| Doctor/Unit : _____ | |
| Entry No. : _____ | |

| | |
|---------------------|---------------|
| Visit Date : _____ | Visit No. : 4 |
| Department : _____ | Tm. _____ |
| Doctor/Unit : _____ | |
| Entry No. : _____ | |

| Clinical Notes | ADVICE |
|--|---|
| <p>c/o L³ radiating to R leg.</p> <p>L³ spine - marginal osteophytic changes in L²-L⁵ spine.</p> | <p align="center"><u>Adv</u></p> <p>- T. Ibuprofen (100) - 1 Tab BD x 15 days</p> <p>- T. Labe (20) - 1 Tab OPAC x 15 days</p> <p>- T. cal + Vit D₃ - 1 Tab OPAC x 15 days</p> <p>See <u>See</u> - <u>MRI L² spine</u></p> <p>Review & reports after 15 days / ER 505</p> <p align="right">p</p> |

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