

ORTHOP. O. R. D.
R. G. KAR M. C. H.
Kolkata
Friday

ANAY BAKSHI

[RGKM/OR1800723289]

Name : Male	Age : 25	Yrs. Months Days	Day : 09-11-2018
Sex :	Ref. From :	Orthopaedic-Unit-III	Reg. No. : RGKM/OR1800723289
Visit No. : 1	Department :	Prof. K Banerjee/Dr. E Hossain/Dr. R Shaw/Dr. H Deb	Card No. : 09-11-2018
Doctor/Unit Name (DOW) :	Room No. :	106	Time : 01:49PM
Visit Date :		Visit Date :	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>P/L Restricted movement Pain Lt knee false movement. ACL tear.</p>	<p>ADY</p> <p>DO NOT Left Knee use knee belts Dignity Left knee 2AT (30° Bend) DAD Rem (1) & (1) AD u Rem (1) & (1) AD Review & Reports.</p> 