

**DEPARTMENT OF HEALTH & FAMILY WELFARE  
GOVERNMENT OF WEST BENGAL**

NEURO MEDICINE 52

**OPD Patient Card**

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

|                          |                                       |                     |              |             |                   |
|--------------------------|---------------------------------------|---------------------|--------------|-------------|-------------------|
| Name :                   | ABDUL MALIK SARDAR                    | TRGKM/OR16006378101 | Day :        | TUESDAY     |                   |
| Sex :                    | Male                                  | Age :               | 70 Yrs.      | Months      | Days              |
| Ref. From :              |                                       |                     |              | Reg. No. :  | RGKM/RG1600630052 |
|                          |                                       |                     |              | Reg. Date : | 02-10-2018        |
|                          |                                       |                     |              | Card No. :  | RGKM/OR1600637810 |
| Visit No. : 1            | Department :                          | NEURO MEDICINE      | Visit Date : | 02-10-2018  | Time : 11.35AM    |
| Doctor/Unit Name (DOW) : | Prof. K B Bhattacharya/Dr. Dhiman Das |                     |              |             |                   |
| Room No. :               | 205                                   |                     | Entry No. :  |             |                   |

|   |  |  |
|---|--|--|
| Visit Date : _____<br>Department : _____<br>Doctor/Unit : _____<br>Entry No. : <u>18767</u> | Visit No. : 2<br>Tm. _____<br>Visit Date : _____<br>Department : _____<br>Doctor/Unit : _____<br>Entry No. : _____ | Visit No. : 3<br>Tm. _____<br>Visit Date : _____<br>Department : _____<br>Doctor/Unit : _____<br>Entry No. : _____ |
|   | Visit No. : 4<br>Tm. _____<br>Visit Date : _____<br>Department : _____<br>Doctor/Unit : _____<br>Entry No. : _____ |  |

**Clinical Notes**

**ADVICE**

**DR. DHIMAN DAS**  
MD (Medicine) DM (Neurology)  
Assistant Professor  
Dept. of Neuro Medicine  
R.G. Kar Medical College

02 OCT 2018

*Anti-hypertensive  
Antiplatelets  
Statins*

*Go  
cuss & Brain  
Breathlessness*

*Le hemiparesis  
- 3/4*

- no smoking*
- ✓ *MNS Bmic*
- ✓ *xycastr parp*
- ✓ *and castopid*
- ✓ *and Cardiology opd*
- ✓ *Continue medicines  
from Cardiology*

*am*