

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

PHYSICAL MEDICINE & REHABILITATION OPD Patient Card

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

Name : PAJILA	[RGKM/OR1800729444]	Day : Tuesday	
Sex : Female	Age : 30 Yrs.	0 Months 0 Days	Reg. No. RGKM/RG1800751342
Ref. From :			Reg. Date : 13-11-2018
			Card No. RGKM/OR1800729444
Visit No. : 1	Department : PHYSICAL MEDICINE & REHABILITATION	Visit Date : 13-11-2018	Time : 10:23AM
Doctor/Unit Name (DOW) :	Dr S Iswari (Assoc. Prof.)	Entry No. :	
Room 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
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Handwritten: A/c LBP. Recs pain. " No inv done "

Stamp: Physical Medicine & Rehabilitation OPD, R.G. Kar Medical College, Kol-04

Handwritten: Adv. Cont all. Few reports.

Handwritten: 20 NOV 2018

Handwritten: Tab. PARACETAMOL (500mg/650mg)

Handwritten: Tab. IBUPROFEN 200mg

Handwritten: Tab. FAMOTIDINE 20mg

Handwritten: Tab. CALCIUM

Handwritten: Tab. DOXYCYCLINE 100mg

Handwritten: Tab. PREDNISOLONE (10mg)

Handwritten: Tab. CIPROFLOXACIN (500mg)

Handwritten: MRI (L/S) spm

Handwritten: LBP

Handwritten: Post Neurophysiology

Handwritten: Army Free

Handwritten: 20/11/18

Handwritten: Rejoice on ...

Handwritten: Prepartation ...

Handwritten: 20/11/18

Handwritten: সৌম
বৃহস্পতি

Handwritten: মঙ্গল
শনি

Handwritten: B/D

Handwritten: SCBE

Handwritten: EPR/PP

Handwritten: Self IPPBS

Handwritten: H/A/H

Handwritten: Ume/ur

Handwritten: None

Handwritten: RE/ME