

DEPARTMENT OF HEALTH & FAMILY WELFARE  
GOVERNMENT OF WEST BENGAL

PHYSICAL MEDICINE & REHABILITATION **OPD Patient Card**

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

Name : SUKUMAR DAS [RGKM/OR1800636839]	Day : Tuesday
Sex : Male Age : 50 Yrs. 0 Months 0 Days	Reg. No. RGKM/RG1800689061
Ref. From :	Reg. Date : 02-10-2018
	Card No. RGKM/OR1800636839
Visit No. : 1 Department : PHYSICAL MEDICINE & REHABILITATION	Visit Date : 02-10-2018 Time : 10:11AM
Doctor/Unit Name (DOW) : Dr. S Iswarari (Assoc. Prof)	Entry No. :
Room No. :	

Visit Date : _____ Visit No. : 2 Department : _____ Tm. _____	Visit Date : _____ Visit No. : 3 Department : _____ Tm. _____	Visit Date : _____ Visit No. : 4 Department : _____ Tm. _____
Doctor/Unit: _____	Doctor/Unit: _____	Doctor/Unit: _____
Entry No. : _____	Entry No. : _____	Entry No. : _____

Clinical Notes	ADVICE
<p>02 OCT 2018</p> <p><u>SpA</u></p> <p>? SpA.</p> <p>01-14/10/18</p> <p>8:30 AM</p> <p>+</p> <p>8:55 AM</p> <p>9539568245</p> <p>বুকিং সময়ের থেকে ১ ঘন্টা আগে আসবেন। PLEASE COME BEFORE 1 HOUR OF YOUR BOOKING TIME</p> <p>PLEASE BRING ALL PREVIOUS REPORT দয়া করিয়া পুরোনো সমস্ত রিপোর্ট নিয়ে আসবেন</p>	<p>Physical Medicine &amp; Rehabilitation OPD R.G. Kar Medical College, Kol-04</p> <p>সোম বৃহস্পতি শনি</p> <p>Advice : —</p> <p>MRE L/S Spine &amp; B/L S-I joint</p> <p>P. <del>Ameciu</del> (25) — 1 tab TDS x 10 days.</p> <p>P. Robe (20) — 1 tab OD x 10 days.</p> <p>P. (Cat Vit-D<sub>3</sub>) — 1 tab OD x 30 days.</p> <p>Cont. Vit-D<sub>3</sub> at prescribed.</p> <p>Blood for <span style="border: 1px solid black; padding: 2px;">CBC FBG/PPBS</span> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">#LA-B27</span></p> <p>Review &amp; reports</p> <p>হাতে 3-4 ঘন্টা সময় নিয়ে আসবেন</p> <p>10/02/2018 10:15 AM</p>