

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

Rajnarayan Medical College & Hospital User Name : amit
Khudiram Bose Sarani, Kolkata-700004 Paid Rupees : 2
(PH:033-25557676)

Name :	SALINA B. S.	[RCKM/OR/300673580]	Day :	Friday
Sex :	Age : 40 Yrs.	0 Months 0 Days	Reg. No. :	RCKM/RD1800720559
Ref. From :			Reg. Date :	19-10-2018
			Card No. :	RCKM/OR1800673580
Visit No. : 1	Department : NEURO SURGERY	Visit Date : 19-10-2018	Time :	
Doctor/Unit Name (DOW) :	Dr. S. Chatterjee, Dr. S. K. Das, Dr. S. K. Pal			
Room No. :		Entry No. :		

Visit Date : Department : Doctor/Unit : Entry No. : 49418	Visit No. : 2 Tm. : Visit Date : Department : Doctor/Unit : Entry No. :	Visit No. : 3 Tm. : Visit Date : Department : Doctor/Unit : Entry No. :	Visit No. : 4 Tm. : Visit Date : Department : Doctor/Unit : Entry No. :
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Clinical Notes	ADVICE
<p>NEURO SURGERY UNIT-II FRIDAY</p> <p>19 OCT 2018</p> <p># 4</p>	<p>1 MR L-5 spine</p> <p>to use L-5 belt</p> <p>1 Cap. @ methylcobalamin (500 mg)</p> <p>to use</p> <p>1-1-1</p> <p align="right">9</p>