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

PAIN CLINIC 18

R.G. Kar Medical College & Hospital

User Name: nilanjan

1, Khudiram Bose Sarani, Kolkata-700004 Paid Rupees: 2

Visit No.: 3

Tm.

(PH-033, 25557676) Name ALI HUSSAIN Age: 35 Yrs.

Day: Friday

Sex Male Ref. From:

Reg. No : 15-11-2018 Reg. Date : 15-11-2018

 $\begin{array}{c} \text{Months} & \text{[RGKM/OR1800738820]} \\ \text{O} & \text{Days} \end{array}$

16-11-2018 Card Norigkm/OR1800738820

Visit No.: 1 Department:

PAIN CLINIC

Visit Date: 16-11-2018

Time: HHOAM

Doctor/Unit Name (DOW):

Prof. Dipasri Bhattacharya/Dr. B.B. Gharami (Asst.Prof.)/Dr. P. Biswas

Room No.

Entry No.:

Visit No.: 4

Visit Date : Department: Visit No.: 2 Tm.

Visit Date : Department:

Visit Date : Department: Tm.

Doctor/Unit:

Doctor/Unit:

Doctor/Unit:

Entry No. :

Entry No. :

Entry No. :

Clinical Notes **ADVICE** mb Perison PD) to Jolays.

Mb Pand OD) to Jolays.

For Kei. Tede Sen, men F

in and & PT DNR. Dipassi.