

TAPAN KR CHAKRABORTY [RGKM/OR1800657351]

Wednesday

Name : Male	Age : 72	Yrs. 0	Months 0	Days 0	Day	Reg. No.:	Card No.:
Sex :	Age :	Yrs. :	Months :	Days :	Day	Reg. No.:	Card No.:
Ref. From :	ORTHOPAEDIC-UNIT-II				10-10-2018	10-10-2018	09:09AM
Visit No. : 1	Department :	Prof. D K Pal/Dr. S Dutta/Dr. Dr D			Visit Date :	Time :	
Doctor/Unit Name (DOW) :	106						
Room No. :				Entry No. :			

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

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

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

Clinical Notes	ADVICE
<p>Low back pain radiation to lower limb. Past w/o PVD.</p>	<p>Adv</p> <p>MRI LS spine</p> <p>for</p> <p>① Tab Diclofenac 75 o ————— o ————— o 5 days</p> <p>② Tab Paracetamol 150 - o ————— o ————— o 5 days</p> <p><i>[Signature]</i></p>