

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

R.G.KAR MEDICAL COLLEGE & HOSPITAL
17, RAJABAI ROY ROAD, KOLKATA-70

Name :
Sex :
Ref. From :
Age :
Yrs. Months Days :
Visit No. : 1 Department :
Doctor/Unit Name (DOW) :
Room No. :
Day : Paid Rupees 2.00
Reg. No. : Tuesday
Reg. Date :
Card No. :
Visit Date :
Entry No. :
Dr. Shyama Das Gupta (Asso. Prof.) (Tuesday)

Visit Date : Department : Doctor/Unit : Entry No. :	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.
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Clinical Notes	ADVICE
<p>Go.</p> <p>Pain abdomen for last 1 hr. during menstruation.</p> <p>H/O ut Head ache during menstruation</p> <p>P 200 (VVO)</p> <p>RHR - 104</p> <p>RRH 13 $\frac{8-4}{28-2}$</p> <p>No H/O DH, IEN 1 hr mild antacid</p> <p>No H/O H. any surgery</p> <p>A/A Soft / NAD</p> <p>PLV Wt NB / AX / m / 4 Ca / NAD</p>	<p>As</p> <p>- Cap Once + 1 hr PM 12 = 15 mg</p> <p>- Ins 2 ins dot 500 1 hr 500</p> <p>- Ins 200 mg line (100 mg) 1 hr PM = 15 mg</p> <p>- H/O in lower abdomen</p> <p>- Mx w/ @. 04, Surg. \leftarrow Dr whee / creative Lit</p> <p>- MRI of Brain with contrast</p>

R.M.S.
DEPT. LEAF
KODS / 12/18