

40 STAFF
MORNING

NEURO MEDICINE 67

DEPARTMENT OF HEALTH & FAMILY WELFARE
GOVERNMENT OF WEST BENGAL

OPD Patient Card

R.G. Kar Medical College & Hospital
1, Khudiram Bose Sarani, Kolkata-700004
(PH:033-25557676)

User Name : nilanjan
Paid Rupees : 2

Handwritten signature

Name : ROBINA AZAD
 Sex : Female Age : 20 Yrs. 0 Months 0 Days
 Ref. From : _____ Day : _____
 Reg. No. : PKM/RG1800656352
 Reg. Date : 09-10-2018
 Card No. : _____
 Visit Date : 09-10-2018 Time : 12:15PM
 Department : NEURO MEDICINE
 Doctor/Unit Name (DOW) : Prof. K.B. Bhattacharya
 Room No. : 206
 Entry No. : _____

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

Visit Date : _____ Visit No. : 3
 Tm. : _____
 Department : _____
 Doctor/Unit : _____
 Entry No. : nl-9002/A

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

Clinical Notes

*Plca. Audi.
? Computed
---*

ADVICE

DR. DHIMAN DAS
MD (Medicine) DNB (Neurology)
Assistant Professor
Dept. of Neuro Medicine
R.G. Kar Medical College

09 OCT 2018

*Adv. 1 EEG
MRI of Brain
Caut. Adv.
Come 2 Repeat.*