

PRIYANKA SARKAR  
 Female 23 0 0

[RGKM/OR1800804701]

Friday

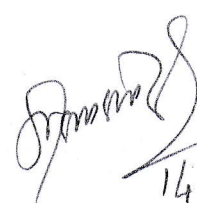
Name :	Age :	Yrs.	Months	Days	Day :	Reg. No.:
Sex :					Reg. Date:	Card No.:
Ref. From :	MEDICINE				2018	
Visit No. : 1 Department :				Visit Date :		Time :
Doctor/Unit Name (DOW) :				Entry No. :		
Room No. :						

RGKM/OR1800873011  
 14-12-2018  
 RGKM/OR1800804701  
 10:59AM

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

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

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

Clinical Notes	ADVICE
<p>No recurrent doc                  ↓                  Once in yr.                  no up tonic                  clonic movement                  No tongue bite                  FTVD (N) birth                  develop.                  EEG = (N)</p>	<p>Adv :                  • MRI Angio Brain + MRA neck vessel                  (✓) (1.5T)                  • Tab divipil (250) 0 — 0                  • Tab Nuro dom 1 tab 503                  • Tab Fryptomer (100) x — x — 0                  • Review E reports.</p> <p style="text-align: right;">                       14/12/18                 </p>

Sarswathy Prasad 11A