

DEPARTMENT OF HEALTH & FAMILY WELFARE
GOVERNMENT OF WEST BENGAL

R.G. Kar **OPD Patient Card** & Hospital User Name : amit
1, Khudiram Bose Sarani, Kolkata-700004 Paid Rupees : 2
(PH:033-25557676)

GOUTAM ROY

[RGKM/OR1800698404]

Tuesday

Name :	Age :	Yrs.	Months	Days	Day :	30-10-2018
Sex :					Reg. No. :	RGKM/OR1800698404
Ref. From :					Reg. Date :	30-10-2018
					Card No. :	1622AM
Visit No. : 1	Department :				Visit Date :	
Doctor/Unit Name (DOW) :					Time :	
Room No. :					Entry No. :	

Visit Date :	Visit No. : 2	Visit Date :	Visit No. : 3	Visit Date :	Visit No. : 4
Department :	Tm.	Department :	Tm.	Department :	Tm.
Doctor/Unit :		Doctor/Unit :		Doctor/Unit :	
Entry No. :		Entry No. :		Entry No. :	

Clinical Notes	ADVICE
<p>c/o Vertigo Dor 1/18 K/C/O 12 PM</p> <p>c/o Vertigo, Vomiting K/C/O T2DM</p> <p>PT is on oral hypoglycaemic drug</p> <p>CT Scan Brain ↳ WNL</p> <p>BP - 120/80 mmHg</p> <p>Ech - WNL</p>	<p>Reported at 11-2018</p> <p>Adv</p> <p>1) Tab Blood - PPBS, FBS MRP Brain (P+G), Carotid Doppler → AP</p> <p>2) Digital Xray C-S spine → lateral</p> <p>3) T. Elosprin AC - (75/10) - 1 tab OD present</p> <p>3) Tab Metformin (500)</p> <p>4) T. Rabeprazole (20) - 1 tab OD x cont Tab Alimepride (30) (2mg)</p> <p>- 1 tab OD x cont</p> <p>5) Review & reports at MOPD</p>