

DEPARTMENT OF HEALTH & FAMILY WELFARE

GOVERNMENT OF WEST BENGAL

OPD Patient Card

B.O. for Medical College & Hospital

User Name : sanjnamitra

1, Khudiram Bose Street, Kolkata - 700004

Paid Rupees : 0

(Phone: 23337070)

Name : <b>SANJANA KHANRA</b>	Sex : <b>Female</b>	Age : <b>3</b> Yrs. <b>0</b> Months <b>0</b> Days	Day : <b>11</b>
Ref. From :	Visit No. : <b>1</b>	Department : <b>MEDICINE</b>	Visit Date : <b>11-2018</b>
Reg. No. : <b>11/11/18/1800725547</b>	Doctor/Unit Name (DOW) : <b>Prof. P. S. K...</b>	Room No. : <b>315</b>	Time : <b>11:00 AM</b>
Entry No. :	Entry No. :	Entry No. :	Entry No. :

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

Clinical Notes	ADVICE
<p>Recent CVA - - residual paresis</p> <p>of weakness of <b>(L)</b> side of body.</p>	<p>FM OPD - 9 <i>Ad</i> <i>12/11</i></p> <p><u>Ad</u></p> <p>NCT Brain, MRI Brain</p> <p>T. pcm 650 1 eb x 805 T. pan 40 1 eb 00Ac x sd.</p> <p>Review 2 reports @ Neuro medicine</p> <p>OPD</p> <p><i>[Signature]</i></p>

11/12/2018 09:50 AM