

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

NEURO MEDICINE 97

R.G. Kar Medical College & Hospital User Name : shadab
1, Khudiram Bose Sarani, Kolkata-700004 Paid Rupees : 2
(PH:033-25557676)

Name : ABDUL RAHMAN	[RGKM/OR1800730971]	Day : Tuesday
Sex : Male	Age : 60 Yrs.	Reg. No.: RGKM/RG1800792590
Ref. From :	Months Days	Reg. Date : 13-11-2018
Visit No. : 1	Department : NEURO MEDICINE	Card No.: RGKM/OR1800730971
Doctor/Unit Name (DOW) : Prof. K B Bhattacharya/Dr. Dhiman Das	Visit Date : 13-11-2018	Time : 12:54 PM
Room No. : 206	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>H/O stroke 3yrs back</p> <p>slurring of speech</p> <p>2 hrs back in dining</p> <p>room.</p> <p>difficulty in swallowing</p> <p>OE - Ben ↑</p> <p>Generalised nystagmus</p>	<p>Adv ✓ MR P Brain</p> <p>P - Aspirin 75 OD x cont</p> <p>T. Atova 20 OD x cont</p> <p>Review 1 month</p>
<p>13/11/18 10:30 PM</p>	