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MRS

179139

West Bengal Form No. 769

### TICKET FOR OUT-DOOR PATIENTS

R. G. KAR MEDICAL COLLEGE & HOSPITAL, KOLKATA-700 004

Date of first visit ..... No. in O. P. Register.....

Name..... Gopal Maity .....

Age..... 55y ..... Caste..... Sex..... M .....

Disease.....

Date

Treatment

1/12/13 Fall down due to slipping  
3hr ago in bathroom  
Refer to TCU (O)

Right leg  
Digital x rays AP

RT leg weakness  
with foot of calf

↓  
Lt

MR of LS spine

Tab Combiflam  
500-250-5

Dipankar Das  
Emergency Medical Officer  
R. G. Kar M.C.H.  
KOL-4