

V-003369

DEPARTMENT OF HEALTH & FAMILY WELFARE
GOVERNMENT OF WEST BENGAL

ORTHOPAEDIC-UNIT-II 139

OPD Patient Card

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

Name : RAJASREE DAS	[RGKM/OR1800775365]	Day : Saturday
Sex : Male	Age : 26 Yrs. 0 Months 0 Days	Reg. No. RGKM/RG1800841057
Ref. From :		Reg. Date : 01-12-2018
		Card No. RGKM/OR1800775365
Visit No. : 1	Department : ORTHOPAEDIC-UNIT-II	Visit Date : 01-12-2018
Doctor/Unit Name (DOW) :	Dr. H Deb/Dr. Dr. D Mukherjee	Time : 11:55AM
Room No. :	106	Entry No. :

Visit Date : _____	Visit No. : 2
Department : _____	Tm. _____
Doctor/Unit : _____	
Entry No. : 1 DEC 2018	

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

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

Clinical Notes	ADVICE
<p>H/O Fall from road low back pain</p>	<p>At to Zander's - BDR 8h to Pen - 20R - 2h to Pantan - om - 5h Dyktal - x - 2h LC - 5h MRI of L5 spine to attend to ortho opo. advised at set day. with all copy</p> <p><i>[Signature]</i> 1/12/2018</p>

10/18