

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

MEDICINE 634

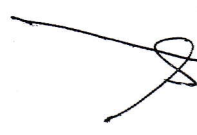
R.G. Kar Medical College & Hospital User Name : nilanjan
1, Khudiram Bose Sarani, Kolkata-700004 Paid Rupees : 2
(PH:033-25557676)

Name :	RASHIDUL SARDAR [RGKM/OR1806770182]	Day :	Thursday
Sex :	Male	Reg. No. :	RGKM/RG1800835443
Ref. From :	Age : 40 Yrs. 0 Months 0 Days	Reg. Date :	29-11-2018
		Card No. :	RGKM/OR1806770182
Visit No. : 1	Department : MEDICINE	Visit Date : 29-11-2018	Time : 01:03PM
Doctor/Unit Name (DOW) :	Prof. S S Kundu/Dt. S Bandyopadhyay		
Room No. :	201	Entry No. :	

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

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>c/o weakness of left half of body</p> <p>c/o - gradually progressive weakness of side of body & ↓ sensation</p> <p>o/s Power of (L) UL ↓</p>	<p align="center">Refn to MOPD (201)</p> <p align="center"><u>Adv</u></p> <p>- Brain MRI (P+C). ECD</p> <p>- Review E report</p> <p align="right"></p>