

blakku

SAFETY FIRST

Self Discharge on 1/6/24

Medical Management

MHI/DP/2022/104



BILLING CARD



Patient Name Mr. JAYAPAL A
69/Male/MH55012
29/05/2024/IPH2024001288
IP No. Dr. G. GNANAVELU
Room No.

D.O.A. 29/05/2024 Time 12:56 AM

Card - 3

TRANSFER DETAILS

Rent Per Day _____

Date	Time	From	To	Nurse's Signature
29/5/24	12.56	ADMISSION	CCU	
30/5/24	11.10	CCU	18th FLOOR 105	

OPERATION THEATRE

Date :	OT No. :
Surgeon :	Start Time :
I Asst. Surgeon :	End Time :
II Asst. Surgeon :	Dis. Pack :
III Asst. Surgeon :	Diathermy :
Anaesthetist :	C-Arm :
OT Nurse :	Arthroscopy :
Name of Surgery : <u>Medical upf</u>	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl : 2ml 10ml/inj. monphi:
	Others :

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
29/5/24	12.56	30/5/24	11.10	29/5/24	12.58	29/5/24	7.30

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
29/5/24	12.56	29/5/24	2.10				
29/5/24	2.10	30/5/24	11.10				

ALPHA BED

SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
				29/5/24	2.10	30/5/24	6.00

LABIX

NIV

OPERATION THEATRE	
Date :	OT. No. :
Surgeon :	Start Time :
I Asst. Surgeon :	End Time :
II Asst. Surgeon :	Dis. Pack :
III Asst. Surgeon :	Diathermy :
Anaesthetist :	C-Arm :
OT Nurse :	Arthroscopy :
Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

[illegible]

(3) ✓ (1) ✓ (2) ✓

69 64)

DATE: 14

2520

NUMBERS

29/5/24	1 + 1 (6800)
29/5/24	1 (6822)
29/5/24	1 (6836)
30/5/24	1 (6854)
30/5/24	1 + 1 + 1 (6868)
31/5/24	1 + 1 + 1 (6882)
1/6/24	1 + 1 + 1 (6896)

PHYSIOTHERAPY

[illegible]

OTHERS

DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS

