

C.R
10-30am

MH/ PRINT / 0007 / BILL / FO



RII LING CARD

Mrs. NAGALAKSHMI S
50 / Female / MHM63202
10/01/2024 / IPM2024000020
Dr. INDRANIL BANERJEE

Patient Name

IP No.

Room No.

D.O.A. 10.1.24 Time 1:00 PM

Rent Per Day 2500

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
10/1/24	2:50 PM	ER	3rd floor 303	SIN Krishnareddy

OPERATION THEA TRE

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 :

MONITOR

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

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	Others :

Date	LABORATORY
10/1/24	CBC, Urea, Creat, LFT, ST-Electrolytes.
	CAP, PCP, (0159)
	Stool Examination R/E; C/S (0160)
	Urine R/E, Urine C/S (0161)
12/1/24	hr. Ct (0191)

RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER

10/1/24

X-ray

ECG

(0162)

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

[illegible]