



Mr. DHILISHATH HASSAN S

51/Male/MHMG2300922

Patient

22/03/2024/IPM2024000235

IP No.

Dr. VAISHNAVI GANESAN

Room No.

**BILLING CARD**

ATA HASSAN .S

D.O.A. 22/3/24 Time 6.30pm

Rent Per Day 4000/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
22/3/24	9:50pm	ER	304	S. E. 3190

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**INFUSION PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OXYGEN**SYRINGE PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP**VENTILATOR**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

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	Others :

Date

LABORATORY

22/3/24 ~~CBC, LFT, PFT~~ (2064)

23/3/24 ~~Lipid Profile~~ (2066)

23/3/24 ~~Trop - I Qualitative, Trop T (Qualitative)~~ (2075)

24/3/24 ~~Urine Routine~~ (2094)

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

22/3/24
23/3/24

X-ray chest (2065)
Echo & cordis

opinion (Dr. Suresh) (2080)

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

[illegible]