

Mrs.S.SIVAGANGAI

70/Female/MHV202300288

24/12/2023/IPV00123

Dr.K.GAYATHRI MD

25 DEC 2023

MH/ PRINT / 0007 / BILL / FO



ILLING CARD

Patient Name

D.O.A. 24/12/23 Time 8.11 PM

IP No. MHV202300288

Room No. Triple Sharing room AC - 301

Rent Per Day 1000

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
24/12/23	8.30pm	ER	301(A)	B. Sumanik 10024.

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

OPERATION THEA TRE	
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	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

LABORATORY

25/12/23	widal (0878)
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