Mrs.KASIYAMMAL
72/Female/MHV202300312
01/12/2023/IPV00078
Patient Nam Dr.K.GAYATHRI MD
IP No.

BILLING CARD

D.O.A 01/12/2023 Time 05'10pm.

Room No. Single Room Non AIC 306 Rent Per Day 1400/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
01/12/23	6PM	ER	WARD	SIN E2hy/0014
01/12/23	9.30pm	ward	ICU	Jayanthi A
3/12/23	1.15pm	ICU	WARD	Lathi 0038.

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
1/12/23	9.30pm	3/12/23	1.15pm
3/12/23	1.30PM	5/12/23	10AM.

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
2/12/23	1AM	2/12/23	11 9m

SYRINGE PUMP

Date	Start	Date	Disconnect
1/12/23	9.30pm.	3/12/23	9.30am

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

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	:

Date	LABORATORY
01/12/23	widalslide, Dengue IgM Elisa, ~~Urine Routine~~ wrongly entered. (0330) Urine Routine Analysis (0476)
2/12/23	ABG. (0478)
2/12/23	Urine Routine (0484) urine c/s, Scrub typ elisa [0488]
2/12/23	Blood c/s (0488) (0488) Electrolytes (0488)
02/12/23	Urea, Creatinine, Total WBC count, Na, K^+ (0510)
03/12/23	ABG (0511)
4/12/23	Na^+, K^+, Chloride, Bicarbonate (0536)
5/12/23	Total WBC count, Total Protein, Albumin (0555)

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

2/12/23	CHEST X-RAY BEDSIDE (0482)		
02/12/23	ECHO (0508)		
5/12/23	USG Abdomen scan (Dr. Arthi)		

CBG

2/12/23	1+1		
2/12/23	1+1+1+1		
03/12/23	1+1+1+1		
3/12/23	1+1		
4/12/23	1+1+1+1		
	1+1		
5/12/23	1+1+1		
6/12/23	1+1		

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
K. Gayathri MD (6.00pm)	1/12/23	2/12/23					
DR. KARTHIKEYAN (Cardio)		02/12/23					

PHARMACY	AMBULANCE
OT DRUGS REPLACED : BILL CLEARED : RETURNS CHECKED :	

Other Procedures : (specify) :-

⇒ Urine catheter done at 1AM ON 2/12/2023

⇒ Central line done by DR. RAJA at 4.30 AM ON 2/12/2023

Admission Officer :

01/12/23.

Sister In-charge