ILLING CARD

Mrs.SENGENIAMMAL
72/Female/MHV202300510
06/07/2024/IPV2024060566
Dr.K.GAYATHRI MD

07 JUL 2024

Patient Name

IP No. _____

D.O.A. 06/07/24 Time 03:35PM

Room No. Twin Sharing non AC 319 'A' Rent Per Day 1200/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
6/7/24	3.40PM	DIRECT	WARD	J Sudha.

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

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
7/7/24	~~Sodium~~ (3878)

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

CBG				CBG			
7/7/24							

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. KATHIRAVAN (NEPHRO)	6/7/24 3.50PM	[illegible]					
Dr. Gayathri (MD)	7/7/24 10.30am Sunday						

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

Other Procedures : (specify) :-

ENDOSCOPY DONE BY DR. RAJAMAHENDRAN (GASTRO) ON 7/7/24 AT 7.40AM

Admission Officer

Sister In-charge