

OPERATION THEATRE	
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 :

LABORATORY

Cath package, ~~for~~ Trop-I (Quantitative), CK-MB, CPK (Total),
Rapid antigen (7993)

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

[illegible]**CBG**

ABG

ACT

[illegible]**Date**

PHYSIOTHERAPY

[illegible]

NEBULIZER

OTHERS

[illegible]

[illegible]

Ref
Cevathi mam

Self

INSURANCE

Rejected

CAG

Discharge on 25/6/24 MHI/DP/2022/104



Mrs. NIRMALA FOUSTA

38/Female/MHP202300188

Patient Name

24/06/2024/1PH2024001489

IP No.

Dr. K. JAISHANKAR

Room No.



BILLING CARD

SAFETY FIRST



D.O.A. 24/6/24 Time 8:11 AM

TRANSFER DETAILS

Rent Per Day

Date	Time	From	To	Nurse's Signature
24/6/24	8:12	ARM	CCU	
24/6/24	12:40	CCU	CATH LAB	
24/6/24	13:30	CATH LAB	CCU	
24/6/24	15:06	CCU	103	

OPERATION THEATRE

Date	: 24/6/24	OT No.	: CATH LAB-1
Surgeon	: Dr. Jaishankar. K	Start Time	: 12:50
I Asst. Surgeon	:	End Time	: 13:20
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	:	C-Arm	:
OT Nurse	: R/n. Abhinaya	Arthroscopy	:
Name of Surgery	: CAG + MM	Laprosopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl : 2ml 10ml/inj. monphi:	:
		Others	:

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
24/6/24	8:12	24/6/24	15:06				

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED

SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect