

31 DEC 2023

MH/PRINT/0007/BILL/FO



Mrs. KALUVAMMAL
70/Female/MHV202300946
31/12/2023/IPV000131

LLING CARD

Patient Name

Dr. RAJA

D.O.A. 31/12/23 Time 3.40 PM

IP No.

Room No. 1CV-1

Rent Per Day 3500/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
31/12/23	3.40pm	ER	ICU	B. Sowmya loorey

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 :	Laprosopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
31/12/23	3.45 PM	31/12/23	7.00 pm				

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
31/12/23	3.45 PM	31/12/23	7.00 pm				

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OPERATION THEA TRE	
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[illegible]

[illegible]

