



BILLING CARD

Patient Name Murugesan. PD.O.A. 02/6/24 Time 9.45 AmIP No. 2024000763Room No. ICURent Per Day 4/00

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
2/6/24	10 ⁴⁵ am	casualty	ICU	S/n Colin Rani (223)
7/6/24	9.45am	ICU	II nd (F)	S/n S. Sanyal 22002
8/6/24	12.00pm	2nd 4/000	Dialysis	S/n. V. May/2/10

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
2/6/24	11AM	7/6/24	9.45am	(X)			
8/6/24	10.30PM	09/06/24	8am	(S)			

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
				2/6/24	1. PM	2/6/24	7.45PM

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
03/06/23	6AM	11/6/24	11.30 AM	(U)			

OPERATION THEA TRE

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Date	LABORATORY
2/6/24	CBC, RBS, RFT, LFT, Electrolytes. (202400173)
2/6/24	PT/INR, APTT, Bilirubin, Blood Glucose, Phosphate C24 00173
3/6/24	FBS, Electrolyte's, Urea, Creatinine (202407304)
4/6/24	FBS, Electrolyte, urea, creatinine (202407330)
5/6/24	FBS, Electrolyte, urea, creatinine (07354)
	ABG [07388]
6/6/24	FBS, Electrolyte, urea, creatinine (07389)
7/6/24	FBS, Electrolyte, urea, creatinine (07432)
9/6/24	RFT (7558)

[illegible]

mmc

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Jamuna	2/6/24 ICU	3/6/24 ICU	4/6/24 ICU	5/6/24 ICU	6/6/24 ICU	7/6/24 ICU	8/6/24 ICU
Dr. Rajarajan	2/6/24 ICU	7/6/24 ICU					9.30pm w.
(phone order)	(PO)						
DR. Vimal Kumar	2/6/24 ICU	6/6/24 ICU					
DR. Ravichandran	3/6/24 ICU	5/6/24 ICU	6/6/24 ICU	10/6/24 Ward			
DR. Balaprasad	3/6/24 ICU	4/6/24 ICU	5/6/24 ICU				
Dr. Nisha Kumar	4/6/24 ICU	5/6/24 ICU	6/6/24 ICU				
Dr. Jamuna	10/6/24 Ward	11/6/24 Ward					

PHARMACY

AMBULANCE

OT DRUGS REPLACED : V. Jayaraj
BILL CLEARED : No due
RETURNS CHECKED : Tot:- 30678/-

Other Procedures : (specify) :-

2/6/24. Abdominal Tapping Done by Dr. Jamuna at 2.30pm
3/6/24. Hemodialysis done in ICU Duration-4hrs (PNS)
6/6/24 - Hemodialysis done in ICU. Duration: 4hrs (PNS)
8/6/24 - Hemodialysis done at 3rd Floor. Duration: 4hrs (PNS)
10/6/24 - Hemodialysis done at 3rd Floor. Duration: 4hrs (PNS)

Verified Shift J. Nithya
10/6/24

Admission Officer :

Sister In-charge