

09 JAN 2024

MH/ PRINT / 0007 / BILL / FO



Mr. M. PICHANDI

86/Male/MHV202400967

05/01/2024/IPV2024000007

ILLING CARD

09 JAN 2024

Patient Name

Dr. RAJA

D.O.A. 05/01/24 Time 10:15am.

IP No.

Room No. ICU-1

Rent Per Day 3500/-

## TRANSFER DET AILS

| Date     | Time   | From | To   | Sister Signature |
|----------|--------|------|------|------------------|
| 5/1/2024 | 10am   | ER   | ICU  | S. Esh 10014     |
| 7/1/2024 | 11 am. | ICU  | WARD | Sprachna 0020    |
|          |        |      |      |                  |
|          |        |      |      |                  |
|          |        |      |      |                  |
|          |        |      |      |                  |

## 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 |
|----------|---------------------|--------|------------|------|-------|------|------------|
| 5/1/2024 | 10am                | 7/1/24 | 11Am.      |      |       |      |            |
| 7/1/2024 | 11 <sup>15</sup> am | 9/1/24 | 9-30am     |      |       |      |            |
|          |                     |        |            |      |       |      |            |
|          |                     |        |            |      |       |      |            |
|          |                     |        |            |      |       |      |            |

## OXYGEN

## SYRINGE PUMP

| Date | Start | Date | Disconnect | Date | Start | Date | Disconnect |
|------|-------|------|------------|------|-------|------|------------|
|      |       |      |            |      |       |      |            |
|      |       |      |            |      |       |      |            |
|      |       |      |            |      |       |      |            |
|      |       |      |            |      |       |      |            |
|      |       |      |            |      |       |      |            |

## ALPHA BED / SCD PUMP

## VENTILATOR

| Date     | Start   | Date    | Disconnect | Date | Start | Date | Disconnect |
|----------|---------|---------|------------|------|-------|------|------------|
| 06/01/24 | 6.00 AM | 7/1/24  | 11. AM.    |      |       |      |            |
| 07/1/24  | 11am    | 09/1/24 | 10 AM.     |      |       |      |            |
|          |         |         |            |      |       |      |            |
|          |         |         |            |      |       |      |            |

## 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 :                   |

[illegible]



2024 CHEST 'X'-RAY - BEDSIDE (0080)

CBG

CBG

05/01/24 1+1

6/01/24 1+1+1

7/1/24 1+1+1

8/1/24 1+1

9/1/24 1

Date

PHYSIOTHERAPY

6/1/24 ICU MORNING PHYSIO - EVENING PHYSIO

NEBULIZER

NEBULIZER

7/1/24 1+1+1+1

8/1/24 1+1+1+1

8/1/24 1+1+1

9/1/24 1+1

[illegible]

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

Other Procedures : (specify) :-

Other Procedures : (specify) :-  
 Ryles tube insertion done } on 5.1.2024 at 10.40AM.  
 Poly's Catheterization done }

Admission Officer :

05/01/24.

S. Subhashini 0045  
Sister In-charge