

09 JAN 2024

MH/ PRINT / 0007 / BILL / FO



Mr. RAMU.V.M

86/Male/MHV202401000

08/01/2024/IPV2024000012

Dr. K. GAYATHRI MD

ILLING CARD

09 JAN 2024

D.O.A. 08/01/24 Time 11.30 AM

Patient Name

IP No.

Room No. ICU-1

Rent Per Day 3500/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
8/01/2024	11.30 AM	ER	ICU	Shi 0028

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
8/1/24	12 PM	9/1/24	12 PM				

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OPERATION THEA TRE

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III Asst. Surgeon :	Diathermy :
Anaesthetist :	C-Arm :
OT Nurse :	Arthroscopy :
Name of Surgery :	Laproscopey :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

[illegible]

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

8/1/2024 CHEST "X" RAY (BEDSIDE) (0141)
 8/1/2024 ECHO (BEDSIDE) 0149

CBG

CBG

08/01/24 1

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

[illegible]