



Patient Name

IP No.

Room No.

306 Single Room Alc

Rent Per Day

2200/-

TRANSFER DET AILS



30 MAY 2024

MH/PRINT/0007/BILL/FO

LING CARD

30 MAY 2024

D.O.A. 29/05/2024 Time 1.15pm

Date	Time	From	To	Sister Signature
29/5/24	12.30pm	OPD	ward (306)	[Signature]

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

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

[illegible]

29/5/24	ESR, HBAir, urino culture & sensitivity, urino Routine Analysis Lipid: creatinine, CBC (3/118)
30/5/24	FBS, PPBS (3/35)

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

29/5/24

USG Abdomen Scan (2/19)
[Dr. Balavaitheswar]

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

[illegible]