BILLING CARD

Patient Name Mas. Mohammed Affan D.O.A. 10/1/24 Time 14:30 Pm

IP No. 2024 0000 48.

Room No. 202 Rent Per Day 2000 /-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
10/1/24	4 PM	Casualty	II Floor	Sasikala
10/1/24	8:30pm	2nd Floor	OT	Neef
10/1/24	10:30pm	OT	2nd floor	

OPERATION THEA TRE

Date	: 10/1/24	OT No.	: 2
Surgeon	: Dr Riyamthulla. MS	Start Time	: 9-30PM
I Asst. Surgeon	: Dr. Anandh. MS.	End Time	: 10-20PM
II Asst. Surgeon	: —	Dis. Pack	: —
III Asst. Surgeon	: —	Diathermy	: ½ hourly.
Anaesthetist	: Dr. Balapragash. MD	C-Arm	: —
OT Nurse	: Kavitha.	Arthroscopy	: —
Name of Surgery	: Lap. Appendicitomy.	Laproscopy	: ½ hourly.
		Sevoflurane / Isoflurane	:
		Inj. ~~Fentanyl~~	: Ketamine ICC
		Others	: O2 ½ hourly.

MONITOR

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
10/1/24	11. PM	11/1/24	12AM

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

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	:

Date	LABORATORY
10/1/24	CBC, RFT, Serology, BT CT, Bd - grouping (1/2) typing.

RADIOLOGY - ECG / ECHO / X-RA Y / USG / CT / MRI / DRP / BIO-DOPPLER			
10/1/24,	(CT Abdomen		
	CECT) IV contrast (0373)		
	x-ray chest		

CBG				CBG			

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

Ref (Dr. Manivannan)

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
	12/1/23	13/1/23	10/1/23	11/1/23			
Dr. Niyamathullah	11pm	5pm.	6pm	(6pm phone orders	)		
	W	W	W	W			

PHARMACY	AMBULANCE
OT DRUGS REPLACED : V. Jayanthi BILL CLEARED : No due. RETURNS CHECKED : Tot : 13073/-	

Other Procedures : (specify) :-

verified by
13/1/24
at 5.30pm
[signature]
2228.

Admission Officer : [signature]	Sister In-charge