

**BILLING CARD**Patient Name Mr. ChokalingamD.O.A. 27/1/24 Time 04:45 AmIP No. 202400147Room No. IcuRent Per Day 2100/-**TRANSFER DET AILS**

| Date    | Time | From     | To        | Sister Signature |
|---------|------|----------|-----------|------------------|
| 27/1/24 | 5 AM | Casualty | ICU       | SIN Subang       |
| 30/1/24 | 9 am | ICU      | 2nd floor | P. Subang        |
|         |      |          |           |                  |
|         |      |          |           |                  |
|         |      |          |           |                  |

**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 |
|---------|-------|---------|------------|------|-------|------|------------|
| 27/1/24 | 5 AM  | 30/1/24 | 9 am       |      |       |      |            |
|         |       |         |            |      |       |      |            |
|         |       |         |            |      |       |      |            |
|         |       |         |            |      |       |      |            |

**OXYGEN****SYRINGE PUMP**

| Date | Start | Date | Disconnect | Date    | Start | Date    | Disconnect |
|------|-------|------|------------|---------|-------|---------|------------|
|      |       |      |            | 27/1/24 | 5 AM  | 28/1/24 | 6 pm       |
|      |       |      |            |         |       |         |            |
|      |       |      |            |         |       |         |            |
|      |       |      |            |         |       |         |            |

**ALPHA BED / SCD PUMP****VENTILATOR**

| Date | Start | Date | Disconnect | Date    | Start | Date    | Disconnect |
|------|-------|------|------------|---------|-------|---------|------------|
|      |       |      |            | 27/1/24 | 5 AM  | 27/1/24 | 8:30 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 :                   |

| Date    | LABORATORY                                                                                                                                |
|---------|-------------------------------------------------------------------------------------------------------------------------------------------|
| 27/1/21 | ECI CRP, PFT, AET, Chlamy, Serology, & electrolytes<br>HbA1c, <del>CLAMP</del><br>RBS, SSR, LDH, D-Dimer, <del>PS</del> (202401145)       |
| 27/1/24 | Urine comple, <del>TRAP</del> (2401163)<br>PS, Lipid profile, FT3, FT4, TSH (2401161)<br>BBG, <del>BMP</del> (2401162) <i>Minigen lab</i> |
| 28/1/24 | RBS, Electrolytes (2401194)                                                                                                               |
| 29/1/24 | RBS, Electrolytes, PFT (2401249)                                                                                                          |
| 30/1/24 | FTSS, Electrolytes, (2401333)<br>Sodium                                                                                                   |



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

27/1/24 ECG (202401145) ✓  
 chest x-ray (2401162) ✓  
 27/1/24 echo (202401181) ✓  
 28/1/24 @ 6am ECG JWC (2401194) ✓  
 29/1/24 @ 6am ECG JWC (2401249) ✓  
 29/1/24 echo screening (202401301) ✓

27/1/24

CBG

CBG

1pm (202401181)  
 9pm (2401194)  
 28/1/24 2am (2401194)  
 1pm (2401249)  
 9pm (2401249)  
 29/1/24 2am (2401249)  
 1pm (202401301)  
 8pm (2401333)

Date

PHYSIOTHERAPY

29.1.24 DBE + Bronchodilator given 11:15am  
 chest physio + isambro ex 5:00pm  
 30.1.24 11:30pm Bronchodilator nebulizer ex + Chest Physio  
 4:30pm nebulizer ex + Chest Physio  
 31.1.24 11:30am isambro ex

NEBULIZER

NEBULIZER

Ref (Arun Priya) Madhawan Ambulance 2000/-

[illegible]

| PHARMACY                            | AMBULANCE |
|-------------------------------------|-----------|
| OT DRUGS REPLACED : total : 19787/- |           |
| BILL CLEARED :                      |           |
| RETURNS CHECKED : NO due .          |           |

Other Procedures : (specify) :-

1) CAP was done ✓

Suky      Verified b  
 gks      L. Nithya 2  
 30/11 29 at 12.

Admission Officer :

Sister In-charge