



BILLING CARD

Mr. RAJAN C

72/Male/MHM202403551

06/02/2024/IPM2024000086

Dr. SARAVANAN

Patient Name RajanIP No. IPM2024000086Room No. 306D.O.A. 06/2/24 Time 12:30pm

Rent Per Day _____

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
6/2/23	2pm	ER	11th floor 306	Sgt. Rachel.
7/2/23	4pm	10th floor	20	Sgt. Rachel.
7/2/24	6:30pm	OT	11th floor	Sgt. Rachel.

OPERATION THEA TRE

Date	: 7/2/24	OT No.	: 2
Surgeon	: Dr. Saravanan	Start Time	: 4:30pm.
I Asst. Surgeon	: Dr. MAHESHWAR	End Time	: 5:40pm.
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	: USED
Anaesthetist	: Dr. Anesh	C-Arm	:
OT Nurse	: Maithili	Arthroscopy	:
Name of Surgery	: MODULAR HEMIARTHROPLASTY	Laproscopy	:
	(1) HIP	Sevoflurane / Isoflurane	:
	↓ SA	Inj. Fentanyl	: 1 AMP Used.
		Others	: MERIL COMPANY INSTRUMENT USED

MONITOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
7/2/24	6:40pm	7/2/24	9:30pm

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	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 :

[illegible]

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

6/2/24 X-RAY → LBFT HIP AP, KNEE ^{AP} LAT / LEG ^{AP} LAT (0797)
 CHEST X-RAY (0781)
 ECG (0782)
 Echo done by Dr. Keemavareel. (0796)
 8/2/24 HIP Joint AP (bedside) (0845)

CBG

CBG

6/2/24 1 (0789) + 1 (0796)
 7/2/24 1 (0798) + 2 (0825)
 8/2/24 1 (0825) 1 (0884)

Date

PHYSIOTHERAPY

Rs 600/- per session

8/2/24 6:50 PM
 9/2/24 6:50 PM

NEBULIZER

NEBULIZER

