BILLING CARD

Mrs.CHELLAM. S
67/Female/MHM202403581
08/02/2024/IPM2024000098
Dr.SARALA

Patient Name Chellam D.O.A. 08/2/24 Time 7:45pm

IP No. IPM2024000098

Room No. 303 Rent Per Day

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
8/2/24	10pm	ER	3rd floor 303	S/N Sandhi 312
9/2/24	6.00am	3rd floor (303)	OT	S/N Sandhiya 3189
09/02/24	8.30 Am	OT	3rd floor.	S/N 3169

OPERATION THEA TRE

Date	: 09/02/2024	OT No.	: OT-1
Surgeon	: DR. SARALA	Start Time	: 6.30 Am
I Asst. Surgeon	: DR. PRENA	End Time	: 8.00 Am
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	: USED
Anaesthetist	: DR. PAUL PRAVEEN	C-Arm	:
OT Nurse	: VASANTHA	Arthroscopy	:
Name of Surgery	: VAGINAL HYSTERECTOMY T PELVIC FLOOR REPAIR ↓ SA	Laproscopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl	: USED 1 AMP
		Others	:

MONITOR

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
9/2/24	9AM	9/2/24	9:30AM.

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

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

CBG

9/2/24	(8) +V (88g5)		
10/2/24	(8) (88g5)		
11/2/24	(8) (09/4)		

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr Sarala.	8/2/24	9/2/24	10/2/24				

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED :	
RETURNS CHECKED :	

Other Procedures : (specify) :-

OT clearance
3159

CATHETERIZATION DONE ON 09/02/2024 OT @ 8.30 Am.

CBD removed 11/2/24 at: 4 Pm.

at: 10 Am

3159

Admission Officer :

3190

Sister In-charge