

2 FEB 2024

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MH/ PRINT / 0007 / BILL / FO



Patient Name

IP No.

Room No. ICU - 1

Mr. DHANASEKARAN

35/Male/MHV202401356

09/02/2024/IPV2024000083

Dr. RAJA



BILLING CARD

12 FEB 2024

D.O.A. 09/02/24 Time 04:30pmRent Per Day 3500/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
09/02/24	4:30pm	ER	ICU	R. Nidhya / 0009
11/2/24	3:20pm	ICU	WARD	Lakshmi

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
9/2/24	4:45pm	11/2/24	3:20pm				

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

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[illegible]

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