

14 FEB 2024

MH/ PRINT / 0007 / BILL / FO

	Mrs. KAMALA.K 72/Female/MHV202401363 10/02/2024/IPV2024000085	ILLING CARD 14 FEB 2024	D.O.A. 10/2/24 Time 9.45 AM
	Patient Name Dr. KAMAL IP No. 		

Room No. Single room Non AC - 306

Rent Per Day 1400/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
10/02/2024	9.45 AM	ER	WARD [306]	S. Mathanisha
10/2/24	2 pm	WARD	ICU 6	A. Kewthi
11/2/24	10 AM	ICU	WARD [306]	

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

Date	Start	Date	Disconnect
10/2/24	2 pm	11/02/2024	10. AM

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
10/2/24	6 pm	10/02/24	8.30 pm

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

[illegible]

10/2/24 CHEST X-RAY BORDS (0815)
 11/2/24 CHEST X-RAY BORDS (0835)
 13/2/24 CT CHEST (P) (0889)

CBG

CBG

10/2/24 1
 11/02/24 1

Date

PHYSIOTHERAPY

NÉBULIZER

NEBULIZER

10/2/24 1 + 1
 11/02/24 1 + 1 + 1
 12/2/24 1 + 1 + 1
 13/2/24 1 + 1 + 1
 14/2/24 1

[illegible]