

**BILLING CARD**Patient Name Mr. G. ArivendanD.O.A. 11/2/24 Time 22:00 pmIP No. 2024000282Room No. ICURent Per Day 4100/-**TRANSFER DET AILS**

Date	Time	From	To	Sister Signature
11/2/24	10:20 pm	Casualty	ICU	R. Vinodhini
12/2/24	1 pm	ICU	11 th Floor	Ram 2164

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
11/2/24	10:30 pm	12/2/24	12:30 pm				

OXYGEN**SYRINGE PUMP**

Date	Start	Date	Disconnect	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 :
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Anaesthetist :	C-Arm :
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Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

Date

LABORATORY

11/2/24 BT-CT, ECG, RFT, Sr. electrolytes PT/INR.
 APTT, HbA1C (20240129))
 HbA1C (20240129) 1877 30 min

12/2/24 FBS, Electrolytes (20240128))

[illegible]

Ref: - Dr. Vengalesh Sampath

[illegible]

PHARMACY

AMBULANCE

OT DRUGS REPLACED : Total = 1540
BILL CLEARED : NO. Due
RETURNS CHECKED : P. Key

Other Procedures : (specify) :-

Verified by
B. Florini
5:20 12.2.24.

Admission Officer :

Sister In-charge