

Patient Name Mr Chandrashekar.

D.O.A. 12/20/81 Time 81'30

IP No. 2024000252

Room No. FCU

TRANSFER DET AILS

Rent Per Day 4100/-

Sister Signature

From

To

Ten

Prüfung

18/2/21	ap. 20pm
18/2/24	11pm

direct

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	:	:	Laprosocopy	:

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

13/2/24 09:30pm 15/2/24 11Am

[illegible]

Date	Start	Date	Disconnect	Date	Start	Date

Date	Start	Date

13/2/24	9.30pm	14/2/24	Spay
15/2/24	5am	15/2/24	11am

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OPERATION THEA TRE

Date	OT No.
Surgeon	Start Time
I Asst Surgeon	End Time
II Asst Surgeon	Dis. Pack
III Asst Surgeon	Dietary
Anesthetist	C Arm
OT Nurse	Ambroscopy
Name of Surgery	Laprosocopy
	Sevoflurane / Isoflurane
	Inj. Fentanyl
	Others

Date	LABORATORY
14/02/24	PBS, CBC, VFT, IFT Electrolytes, ABGAS, Urine complete, (202401948)
14/02/24	PBS, Electrolyte (202401945)
14/2/24	ABG (202402074)
15/2/24	PBS, Electrolyte (202402074)

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

13/2/24 ECG, Chest X-ray (20021101912)

14/2/24 ECHO

CBG

13/2/24 20021101912

14/2/24 20021101912

15/2/24 20021101912

CBG

PHYSIOTHERAPY

Date

NEBULIZER

NEBULIZER

Ref (Dr. Kunti Keyan Rmo)

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Palaniyappan	14/2/24						
Dr. Subini	14/2/24						
Dr. Jeyaraj	14/2/24	15/2/24					
Dr. Praveen	14/2/24						
Dr. Vinothkumar	14/2/24						

Verified
A/Q

PHARMACY		AMBULANCE
OT DRUGS REPLACED :	v. fuyash	Pl Pick UP To Adoor Kamraj Nagar, Dist. Ambulance.
BILL CLEARED :	No due.	
RETURNS CHECKED :	Tot:- 11,102/-	

Other Procedures : (specify) :-

Other Procedures : (specify) :-
4/2/24 Fractureostomy, tube changed, ~~Done~~ by Dr. Praveen → 70