

## BILLING CARD

Patient Name MR. SUBRAMANIAN.DD.O. 20/2/24 Time 11:40amIP No. 2024000291Room No. 800Rent Per Day 4100

## TRANSFER DET AILS

| Date    | Time               | From                           | To         | Sister Signature     |
|---------|--------------------|--------------------------------|------------|----------------------|
| 20/2/24 | 11:30pm            | direct                         | ICU        | S/A Gnanapriya 2120. |
| 25/2/24 | 11:30pm<br>11:45pm | (Cured Rent) Twin sharing 212. |            | T. Sany 2202.        |
| 26/2/24 | 11:45 am           | Twin sharing                   | Siglas Roy | 22/2/24              |

## 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 |
|---------|----------|---------|------------|------|-------|------|------------|
| 20/2/24 | 11:30 PM | 26/2/24 | 9:00 AM    |      |       |      |            |
| 21/2/24 | 8pm      |         |            |      |       |      |            |
|         |          |         |            |      |       |      |            |
|         |          |         |            |      |       |      |            |

## OXYGEN

## SYRINGE PUMP

| Date    | Start   | Date    | Disconnect | Date    | Start   | Date    | Disconnect |
|---------|---------|---------|------------|---------|---------|---------|------------|
| 21/2/24 | 6:30 AM | 21/2/24 | 9pm 15     | 22/2/24 | 9:00 pm | 24/2/24 | 4:00 AM.   |
| 22/2/24 | 3am     | 22/2/24 | 5am 2      |         |         |         |            |
| 22/2/24 | 7am     | 22/2/24 | 3:pm 8     |         |         |         |            |
| 22/2/24 | 6:pm    | 23/2/24 | 9:00 pm 3  |         |         |         |            |
| 23/2/24 | 5am     | 23/2/24 | 7:00 am 2  |         |         |         |            |

## ALPHA BED / SCD PUMP

## CPAP

## VENTILATOR

| Date    | Start | Date    | Disconnect | Date    | Start   | Date    | Disconnect |
|---------|-------|---------|------------|---------|---------|---------|------------|
| 21/2/24 | 7 am. | 21/2/24 | 11:45 AM   | 21/2/24 | 12-AM   | 21/2/24 | 6:30 AM    |
|         |       |         |            | 21/2/24 | 9pm.    | 22/2/24 | 3am        |
|         |       |         |            | 22/2/24 | 5am     | 22/2/24 | 7am        |
|         |       |         |            | 22/2/24 | 3pm     | 22/2/24 | 6:pm       |
|         |       |         |            | 22/2/24 | 9:00 pm | 23/2/24 | 5am        |
|         |       |         |            | 23/2/24 | 7:00 AM | 23/2/24 | 9:am.      |

| OPERATION THEA TRE  |                            |
|---------------------|----------------------------|
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| Anaesthetist :      | C-Arm :                    |
| OT Nurse :          | Arthroscopy :              |
| Name of Surgery :   | Laproscopy :               |
|                     | Sevoflurane / Isoflurane : |
|                     | Inj. Fentanyl :            |
|                     | Others :                   |

| Date    | LABORATORY                                                   |
|---------|--------------------------------------------------------------|
| 21/2/24 | CBC, C-R-P, RBS, RFT, Electrolyte, ABG (20240244)            |
| 22/2/24 | RBS, electrolytes (202402485) } RFT (202402485) }            |
| 22/2/24 | Procalcitonin (20242507) } DDO }                             |
| 22/2/24 | ABG (20242507)                                               |
| 23/2/24 | phs, electrolyte, HB, <del>urine culture</del> (202402534) } |
| 23/2/24 | urine culture (202402547) }                                  |
| 23/2/24 | urea creatinine, total count (202402549) <del>phs</del> .    |
| 24/2/24 | phs, electrolyte (2402578) }                                 |
| 24/2/24 | Albumin (202402607) }                                        |
| 25/2/24 | phs, electrolyte, LFT. (202402624)                           |
| 26/2/24 | phs, electrolytes, (2402662) } <del>phs</del> .              |
| 28/2/24 | RFT, Electrolyte, Albumin (1801) } 500/ }                    |

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

|         |                 |             |  |
|---------|-----------------|-------------|--|
| 21/2/24 | ECU (202402445) |             |  |
| 21/2/24 | X-ray Chest     | (202402450) |  |
| 21/2/24 | CT Chest        | (202402451) |  |
|         |                 |             |  |
|         |                 |             |  |
|         |                 |             |  |
|         |                 |             |  |
|         |                 |             |  |
|         |                 |             |  |
|         |                 |             |  |
|         |                 |             |  |

CBG

CBG

|                     |         |                   |                 |
|---------------------|---------|-------------------|-----------------|
| 11:30pm (202402445) | 24/2/24 | 2 AM (2402578)    | 28/2/24         |
| 6 AM (202402445)    | "       | 12 PM (202402602) | 7 AM (2731) (2) |
| 1 PM (202402476)    |         | 9 PM (2402624)    |                 |
| 9 PM (202402488)    | 25/2/24 | 2 AM (2402624)    |                 |
| 2 AM (202402488)    |         | 1 PM (202402650)  |                 |
| 1 PM (202402507)    |         | 9 PM (2402662)    |                 |
| 9 PM (202402534)    | 26/2/24 | 2 AM (2402662)    |                 |
| 2 AM (202402534)    |         | 7 PM (2699)       |                 |
| 1 PM (202402558)    | 27/2/24 |                   |                 |
| 9 PM (2402578)      | CBG     | (2) (875)         |                 |
| Date                |         | PHYSIOTHERAPY     |                 |

|         |          |                             |  |
|---------|----------|-----------------------------|--|
| 21/2/24 | 12:30 PM | limb physio.                |  |
|         | 4:30 PM  | limb physio.                |  |
| 22/2/24 | 11:30 AM | limb physio                 |  |
|         | 4:00 PM  | limb physio.                |  |
| 23/2/24 | 11:00 AM | limb physio                 |  |
|         | 3:30 PM  | Chest physio                |  |
|         | 5:30 PM  | Chest physio + limb physio. |  |
| 24/2/24 | 11:00 AM | limb physio chest physio    |  |
|         | 3:30 PM  | Chest physio                |  |
|         | 5:15 PM  | limb physio + chest physio  |  |
| 26/2/24 | 11:30 AM | limb physio + chest physio  |  |
|         | 1:30 PM  | Chest physio.               |  |
| 2       | 5:30 PM  | limb physio + chest physio  |  |
| 27/2/24 | 11:30 AM | limb physio + chest physio  |  |
|         | 1:30 PM  | Chest physio                |  |

NEBULIZER

NEBULIZER

|         |  |  |  |
|---------|--|--|--|
| Neb     |  |  |  |
| 26/2/24 |  |  |  |
| neb (4) |  |  |  |
| 27/2/24 |  |  |  |
| neb (5) |  |  |  |

[illegible]

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

Other Procedures : (specify) :-

Admission Officer:

Sister In-charge

# BILLING CARD



Patient Name MR. SUBRAMANIAN

D.O.A. \_\_\_\_\_ Time \_\_\_\_\_

IP No. \_\_\_\_\_

Rent Per Day \_\_\_\_\_

Room No. \_\_\_\_\_

## TRANSFER DET AILS

| Date | Time | From | To | Sister Signature |
|------|------|------|----|------------------|
|      |      |      |    |                  |
|      |      |      |    |                  |
|      |      |      |    |                  |
|      |      |      |    |                  |
|      |      |      |    |                  |

## OPERATION THEA TRE

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|                     | Sevoflurane / Isoflurane : |
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|                     | Others :                   |

## MONITOR

## INFUSION PUMP

| Date    | Start     | Date    | Disconnect | Date | Start | Date | Disconnect |
|---------|-----------|---------|------------|------|-------|------|------------|
| 28/2/24 | @ 8.00 PM | 29/2/24 | 2 am       |      |       |      |            |
|         |           |         |            |      |       |      |            |
|         |           |         |            |      |       |      |            |
|         |           |         |            |      |       |      |            |

## OXYGEN

## SYRINGE PUMP

| Date    | Start      | Date    | Disconnect     | Date | Start | Date | Disconnect |
|---------|------------|---------|----------------|------|-------|------|------------|
| 23/2/24 | 9 am       | 23/2/24 | 10 pm (13)     |      |       |      |            |
| 24/2/24 | 10 am      | 24/2/24 | 10 am (14)     |      |       |      |            |
| 24/2/24 | 6 pm       | 25/2/24 | 12 am (2)      |      |       |      |            |
| 27/2/24 | @ 10.00 am | 27/2/24 | @ 5.00 pm (17) |      |       |      |            |
| 28/2/24 | 2.00 pm    | 28/2/24 | 7.20 pm (6)    |      |       |      |            |
| 28/2/24 | 10.00 pm   | 29/2/24 | 2 am (11)      |      |       |      |            |

## ALPHA BED / SCD PUMP

## VENTILATOR

| Date | Start | Date | Disconnect | Date    | Start | Date    | Disconnect |
|------|-------|------|------------|---------|-------|---------|------------|
|      |       |      |            | 23/2/24 | 10 pm | 24/2/24 | 1 am       |
|      |       |      |            | 24/2/24 | 9 pm  | 24/2/24 | 10 pm      |
|      |       |      |            |         |       |         |            |
|      |       |      |            |         |       |         |            |

|                    |  |
|--------------------|--|
| OPERATION THEA TRE |  |
|--------------------|--|

|                     |                            |
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|                     | Inj. Fentanyl :            |
|                     | Others :                   |

## Date \_\_\_\_\_

## LABORATORY

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. A vertical margin line is present on the left side, creating a narrow left margin. The paper appears to be from a notebook or a standard ruled sheet. There are some faint smudges and marks on the surface, particularly near the bottom center and along the right edge. The top edge of the paper is slightly irregular, suggesting it might be part of a bound volume.

[illegible]

