

Ref (Dr. Manivannan)

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Manivannan	22/2/24	23/2/24	23/2/24	24/2/24			
	6pm	10 AM	6pm	11 AM			
	W	W	W	W			

PHARMACY

AMBULANCE

OT DRUGS REPLACED : V. Jayaraj
 BILL CLEARED : Nodan
 RETURNS CHECKED : Tot : 2292/-

Other Procedures : (specify) :-

KL. Moona

24/2/24 at 12pm

Harpreet

Sister In-charge

BILLING CARD

MIL/PRINT/0037/DLL/PC



Patient Name Baby. Logitha .V.M

D.O.A. 28/1/80 Time 01'00pm

IP No. 2024000297

Room No. G1W1F

Rent Per Day 600/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
22/2/24	1:15 pm	Casualty	General ward	Harpreet

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

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	
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Name of Surgery	Laproscopy
	Sevoflurane / Isoflurane
	Inj. Fentanyl
	Others
Date	LABORATORY
22/2/24 CBC, EFT, Sr. electrolyte, CRP. (202400878)	

[illegible]