

Cash

Corporate : .....

NONAC

Surgery :

[illegible][illegible]

| Date | Time of Start | Time of Stop | Date | Total/Hrs. Days |
|------|---------------|--------------|------|-----------------|
|      |               |              |      |                 |
|      |               |              |      |                 |

| Date | Time of Start | Time of Stop | Date | Total/Hrs. Days |
|------|---------------|--------------|------|-----------------|
|      |               |              |      |                 |
|      |               |              |      |                 |

| Date | Time of Start | Time of Stop | Date | Total/Hrs. Days |
|------|---------------|--------------|------|-----------------|
|      |               |              |      |                 |

|             |  |  |  |  |
|-------------|--|--|--|--|
| No.fo. Time |  |  |  |  |
|-------------|--|--|--|--|

| Date    |  | Total |
|---------|--|-------|
| Morning |  |       |
| Evening |  |       |
| Night   |  |       |

Scanned with OKEN Scanner



|              |  |  |  |  |  |  |  |  |       |
|--------------|--|--|--|--|--|--|--|--|-------|
| Date         |  |  |  |  |  |  |  |  | Total |
| No. of times |  |  |  |  |  |  |  |  |       |

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| Date | Investigation |
|------|---------------|
|      |               |
|      |               |
|      |               |
|      |               |
|      |               |
|      |               |

| Procedure       | No.of Times | Procedure         | No.of Times |
|-----------------|-------------|-------------------|-------------|
| Intubation      |             | Tracheostomy      |             |
| Ryle's Tube     |             | Steam Inhalation  |             |
| Lumbar Puncture |             | ICD               |             |
| Cut Down        |             | Fundus Evaluation |             |
| Catheterisation |             | Pleural Taping    |             |
| Central Line    |             | Suture Removal    |             |
| Defibrillator   |             | Enema             |             |
| Suction         |             |                   |             |

| Date    | From | To | Type of Accommodation | Time   |
|---------|------|----|-----------------------|--------|
| 28/2/24 | Emr  | to | 103                   | 4:30pm |
|         |      |    |                       |        |
|         |      |    |                       |        |
|         |      |    |                       |        |
|         |      |    |                       |        |
| DIET    |      |    |                       |        |
|         |      |    |                       |        |
|         |      |    |                       |        |

Name of Ward Secretary : J. K. Khatun  
EMP. No. : 82

Name of Staff Nurse : Sridewi  
EMP. No. : 0041