

BILLING CARD
CASH

(Gr/w)

Patient Name

Mrs. PAVITHRA.M

23/Female/MHC202410276

12/03/2024/IPC2024000810

IP No.

Dr. VALIAMMAL K

Room No.



D.O.A. 12/3/24 Time 11.33 PM

Rent Per Day 1,500/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date	: 13/03/24	OT No.	: 1
Surgeon	: Dr. Valiammal	Start Time	: 6.30 AM
I Asst. Surgeon	: Dr. Sasikala	End Time	: 7.00 AM
II Asst. Surgeon	: -	Dis. Pack	: -
III Asst. Surgeon	: -	Diathermy	: -
Anaesthetist	: Dr. Ravi Kumar	C-Arm	: -
OT Nurse	: Yagna	Arthroscopy	: -
Name of Surgery	: 1 lc	Laproscopey	: -
		Sevoflurane / Isoflurane	: -
		Inj. Fentanyl : 2ml 10ml/Inj. Morphine	: 1 amp
		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

[illegible]

PHARMACY		AMBULANCE
OT DRUGS REPLACED :	 A. Jeyapalan MJC621	
BILL CLEARED :		
RETURNS CHECKED :		

CROSS MATCHING :

RESERVATION OF BLOOD :

STERILE TRAY USED :

TRANSFUSION (BLOOD)

ATTENDER'S HOLDING :

OTHER PROCEDURES : Dirt Consultation

Discharged. 13/3/24 at
12pm.

OPERATION THEATRE

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 :

[illegible]

