BILLING CARD

Mr.RATHANAVELU .S
41/Male/MHV202401850
14/03/2024/IPV2024000185
Dr.RAJA

16 MAR 2024

Patient Name

IP No.

D.O.A. 14/03/24 Time 07:57PM

Room No. Triple sharing Non AC '308 A' Rent Per Day 1000/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
14/03/24	8.-pm	ER	Ward 302A	
14/3/24	9.10pm	Ward	OT	Dr. Tamil
14/3/24	10.15pm	OT	Ward	

OPERATION THEA TRE

Date	: 14/3/2024	OT No.	: 3
Surgeon	: Dr. Soundar Rajan (M.S)	Start Time	: 9.40pm
I Asst. Surgeon	: -	End Time	: 10pm
II Asst. Surgeon	: -	Dis. Pack	: NIL
III Asst. Surgeon	: -	Diathermy	: NIL
Anaesthetist	: Dr. Victor	C-Arm	: NIL
OT Nurse	: Saraswathi, Elamathi, Jeeva	Arthroscopy	: NIL
Name of Surgery	: I&D done & SA	Laproscopy	: NIL
		Sevoflurane / Isoflurane	: NIL
		Inj. Fentanyl	: NIL
		Others	: NIL

MONITOR

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

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	:

Date	LABORATORY
14/3/24	✓ Pus culture / Sensitivity @ 1542).

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

CBG				CBG			
4/3/21	✓ 1						

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. SOUNDHARAJAN (MS)	2.20PM 15/3/24	6PM 15/3/24	→ Discharge				

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

Other Procedures : (specify) :-

small dressing done by Dr. Soundharajan (15/3/24)

Admission Officer :

Sister In-charge