



BILLING CARD

Patient Name Mrs. ABIRAMI
IP No. IPM2024000211
Room No. 306

Mrs. ABIRAMI
 52/Female/MHM202404122
 15/03/2024/IPM2024000211
Dr. SARALA

D.O.A. 15/3/24 **Time** 9:40pm

Rent Per Day _____

Date	Time	From	To	Sister Signature
15/3/24	10. Pm	ER	3rd floor (306)	M. Dey/2547
18/3/24	2-4:50pm	3 rd Floor	OT	SIN KRISHNA 3022
18/3/24	5:40pm	OT	3rd floor	SIN 3119

OPERATION THEA TRE

Date :	<u>18/3/24</u>	OT No. :	<u>OT-1</u>
Surgeon :	<u>DR. SARAVANAN</u>	Start Time :	<u>4.00pm</u>
I Asst. Surgeon :		End Time :	<u>5.00pm</u>
II Asst. Surgeon :		Dis. Pack :	
III Asst. Surgeon :	<u>(DR. SASTI/COMST)</u>	Diathermy :	<u>USED</u>
Anaesthetist :	<u>DR. GIANECH (DOOM)</u>	C-Arm :	
OT Nurse :	<u>VACANTHA / SANUAVI</u>	Arthroscopy :	
Name of Surgery :	<u>DRIFT TENDON BAND</u>	Laproscopy :	
	<u>WIRING</u>	Sevoflurane / Isoflurane :	
	<u>LA</u>	Inj. Fentanyl :	<u>15mg USED</u>
		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

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
15/3/24	Urine (1805)
16/3/24	CBC, CRP, RET, FB'S (1806)
	HBA1C (1807)
16/3/24	PPBS (1809)
16/3/24	Urine Ketone (1811)
16/3/24	Urine spot protein, Microalbuminuria, Urine routine analysis (1814)
16/3/24	Electrolytes (1821)
	ABU C (1842)
17/3/24	Electrolytes, PT, APTT, Blood grouping & typing (1843)
	Viral serology Elisa (1844)
17/3/24 10m	Electrolytes (1865)
17/3/24 7pm	Electrolytes (1878)
18/3/24	Electrolytes (1891)
18/3/24	Sr. electrolytes (1922)
19/3/24	So - Electrolytes (1932)
	Sr. electrolytes (1931)

[illegible]

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