09 APR 2024

MH/ PRINT / 0007 / BILL / FO

Mrs.SHEELA
46/Female/MHV202401905
06/04/2024/IPV2024000254

ILLING CARD

09 APR 2024

Patient Name Dr.S.ARTHI GRACE

IP No.

D.O.A. 06/04/2024 Time 12.30 PM

Room No. Single Room AC-315 Rent Per Day 2200 /-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
6/4/24	12:40 Am	ER	Ward 315	SIXI 0128

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

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
06/4/24	HIV I & II, HBSAG, LFT, Bleeding time, clotting
	time, Blood group And RH Type, VDRL [1981]
	Thyroid Profile free, FBS, PPBS (1987)
6/4/24	MP MF, Dengue NS1, widal (2002)
7/4/24	FBS, PPBs, Urine c/s, HBA1C 2005
8/4/24	CBC, ESR, CRP Dengue Igm Elisa, Blood c/c (2037)
9/4/24	FBS, (periforal smear → (2046) cancel)
9/4/24	lipid Profil (2046)

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

CBG				CBG			

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Kavitha	6/4/24 @ 6pm	7/4/24 at 9am	8/4/24 at 9am	9/4/24 at 9am			
Dr. Gayathri (ENT)	8/4/24	9/4/24					

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

Other Procedures : (specify) :-

Admission Officer : S. Malik 9/4/24

Jayanthi 0032
Sister In-charge