



**OPERATION THEA TRE**

Date	OT. No.	Start Time	End Time
Surgeon	Dis. Pack	Diathermy	C-Arm
I Asst. Surgeon	Arthroscopy	Laproscopy	Sevoflurane / Isoflurane
II Asst. Surgeon	Inj. Fentanyl	Others	
III Asst. Surgeon			
Anaesthetist			
OT Nurse			
Name of Surgery			

  

Date	LABORATORY
26/5/24	C.B. R.F.T. Surgery (B.P. of 180/84/100)
27/5/24	Biopsy (Prostate) (B.P. 120/80/110)

**RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER**

Date	CBG	CBG
26/5/24	CBG - 20 (41FD)	
	CBG - 20 (4109)	
	CBG - 20 (4110)	

  

Date	PHYSIOTHERAPY

  

	NEBULIZER	NEBU