ARUL Hospital: ADUTHURAI

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Kanagagiri	29/3/24	30/3/24					
Morning		11am					
Evening	6.30pm						
Night							

Verified
AB

Verified
S/N Nithiri
2149

PHARMACY		AMBULANCE
OT DRUGS REPLACED	: V. [illegible]	MEDAY TO ADUTHURAI IN
BILL CLEARED	: No	BODY PICKUP IN OCM AMBL
RETURNS CHECKED	: Tot: 3440/-	AMBLE S/N VIJNESHWARI

Other Procedures : (specify) :-

On tube inserted 29/3/24 @ 6.30pm

Nursing Officer

Sister In-charge

MH/ PRINT / 0007 / BILL / FO

BILLING CARD

Patient Name B/O. ROSE BANU.H D.O.A 29/3/24 Time 18:15pm

IP No. 2024000487

Room No. NICU Rent Per Day 4100

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
29/3/24	6:15pm	Arul hospital (Ambulance)	NICU	N Vijhi

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				INFUSION PUMP			
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
29/3/24	6.15pm	30/3/24	12pm	29 (1)			

OXYGEN				SYRINGE PUMP			
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
29/3/24	6.15pm	29/3/24	10 pm	29/3/24	6.30pm	30/3/24	12pm (1)

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
	CBC, RBP, calcium, Blood grouping [4293]

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

29/3/24	Chest X-ray both side	(4333)	Dr Paired

	CBG			CBG			
29/3/24	CBG-2 (4333)	Dr Paired					
30/3/24	CBG-B (4388)						

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			