REFER Kavitha (G/w) [illegible]

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Jameema	31/3/24 ICU	1/4/24 ICU	2/4/24 W	3/4/24 W			
Dr. [illegible]	31/3/24 ICU						
Dr. Palaniyappan	31/3/24 ICU						

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Total: 10432	
BILL CLEARED : NO: Due	
RETURNS CHECKED : P.Kala	

Other Procedures : (specify) :-

Verified by Kavitha 2212 at 8/4/24 8 am

Admission Officer :

Sister In-charge

MH/ PRINT / 0007 / BILL / FO

BILLING CARD

Patient Name MR. MADHAN. R D.O.A. 31/3/24 Time 10:30 AM

IP No. 20240000A93

Room No. ICU Rent Per Day 4100

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
31/3/24	10:30 pm	Casualty	ICU	[illegible]
1/4/24	12.30pm	ICU	General ward	[illegible] 2240.

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
31/3/24	10:40pm	1/4/24	12.30pm

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconne

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disco

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
31/3/24	CBC. PPF. LFT. RBS. S. Electrolyte. Hbsag FSR. urine complet. Serology. BT. CT, CRP APTT. PT INR (20240439)
1/4/24	FBS, Electrolyte, APTT, PT INR, LFT (20240441 6)
2/4/24	FBS PT INR, LFT (4493)
3/4/24	LFT (4535)

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

31/3/24	ECG (4402) X ray chest	(20240434)
1/4/24	ECHO (20240445)	

CBG				CBG			
1pm (1)	(20240402)						
9pm (12)	(20240441 6)						
4	8am (1)	(20240441 6)					

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER		