06 APR 2024

MH/ PRINT / 0007./ BILL / FO

Mrs.RASATHI
45/Female/MHV2024021116
04/04/2024/IPV2024000247
Dr.K.GAYATHRI MD

LLING CARD

06 APR 2024

Patient Name _____ D.O.A. 04/04/24 Time 10.00 Am

IP No. _____

Room No. Twin Sharing Non Ac 319 Rent Per Day 2,200/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
4/4/2024	10.20pm	ER	ward 318	

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
4/4/24	Peripheral Smear, Urea, Creatinine, LFT
	S. electrolytes, urine R/E, Absolute Eosino
	-phil Count, HBA1C, Blood grouping
	(1952)
4/4/24	Transferrin, ferritin, TIBC (1954)
5/4/24	FBS (1968) (PPBS) (1970), STOOL - OCCULT BLD (1519)

RADIOLOGY - ECG / ECHO / X-RA Y / USG / CT / MRI / DRP / BIO-DOPPLER			
4/4/24	Chest X-ray PA view (1953)		
5/4/24	USG ABDOMEN (DR. DHILIP) (1980)		

CBG				CBG			

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. GAYATHRI (MD)	5/4/24	6/4/24					
DR. Nithiyapriyadharshini (OG)	6/4/24 @ 3:30PM						

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

Other Procedures : (specify) :-

Admission Officer : 6/4/24

Sister In-charge