B/O.ABIRAMI RAMESH
O/Male/MHM202404364
03/04/2024/IPM2024000262
Dr.MEDWAY HOSPITAL

MH/ PRINT / 0007 / BILL / FO

# BILLING CARD

Patient Name B/O Abirami Ramesh D.O.A. 03/4/24 Time 7:55pm

IP No. IPM2024000262

Room No. First Floor

Rent Per Day

## TRANSFER DET AILS

| Date | Time | From | To | Sister Signature |
|---|---|---|---|---|
| 3/04/24 | 9:50 PM | OT | FIRST FLOOR - R.N: 114 | Tisha 3206 |
| 3/4/24 | | | | |

## OPERATION THEA TRE

| | | | |
|---|---|---|---|
| Date | : 3/4/24 | OT No. | : OT-1 |
| Surgeon | : DR. | Start Time | : |
| I Asst. Surgeon | : | End Time | : |
| II Asst. Surgeon | : | Dis. Pack | : |
| III Asst. Surgeon | : | Diathermy | : |
| Anaesthetist | : DR. | C-Arm | : |
| OT Nurse | : | Arthroscopy | : |
| Name of Surgery | : | Laproscopy | : |
| | | Sevoflurane / Isoflurane | : |
| | | Inj. Fentanyl | : |
| | | Others | : BABY WARM MACHINE USED. |

## MONITOR

| Date | Start | Date | Disconnect |
|---|---|---|---|
| 3/4/24 | 7.50pm | 3/4/24 | 10pm |

## INFUSION PUMP planned

| Date | Start | Date | Disconnect |
|---|---|---|---|
| 3/4/24 | 7:50 PM | 3/4/24 | 10pm |

## 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 |
|---|---|
| 5/4/24 | * SBR ~~Total~~ Direct (2329) |
| | * Blood grouping & typing (2329) |
| | * DCT (2330) |

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

## CBG

| | |
|---|---|
| 03/04/24 | 8 (229) |
| 4/04/24 | 8 + (209) |
| 4/6/24 | 2 (219) |

## CBG

## PHYSIOTHERAPY

Date

## NEBULIZER

## NEBULIZER

| CONSULTANT NAME | Date | Date | Date | Date | Date | Date | Date |
|---|---|---|---|---|---|---|---|
| RESUSCIATION DONE | | | | | | | |
| BY | | | | | | | |
| DR. ASHA P | 03/4/24 | 4/4/24 | 5/4/24. | | | | |
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| PHARMACY | AMBULANCE |
|---|---|
| OT DRUGS REPLACED : | |
| BILL CLEARED : | |
| RETURNS CHECKED : | |

Other Procedures : (specify) :-

BABY RESUSCITATED BY DR. ASHA PADHINI

5/04/2024

- HEARING ASSESSMENT DONE
- VACCINATION DONE BY DR. ASHA PADMASHINI

Admission Officer :

Sister In-charge